

OPERATIONS 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

PAKISTAN: EARTHQUAKE

Appeal No. 05EA022
12 December 2006

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 185 countries.

In Brief

Operations Update no. 27; Period covered: August to October 2006;

This Operations Update presents a revision of the objectives and budget of the Pakistan Earthquake Appeal. The new Appeal target is: CHF 165 million (USD 137 million or EUR 103 million) revised down from the previous total of CHF 227 million;

Appeal coverage is: 86.7%; Outstanding needs: CHF 22 million (USD 18 million or EUR 14 million);

([click here to go directly to the revised appeal budget and the interim financial report with the latest income and expenditure](#))

([click here to go to glossary with terminology specific to Pakistan/this operation](#))

([click here to go to infographic maps of the operation and reconstruction projects](#))

Appeal history:

- Disaster Relief Emergency Funds (DREF) allocated: CHF 200,000.
- Preliminary Emergency Appeal (launched as South Asia: Earthquake) on 9 October 2005 for CHF 10.8 million (USD 8.4 million or EUR 7 million) for four months to assist 30,000 families (some 120,000 beneficiaries).
- Operations Update No. 3 of 12 October 2005 increased the Preliminary Appeal budget to CHF 73,262,000 (USD 56,616,692 or EUR 47,053,307) to assist up to 150,000 families (some 750,000 beneficiaries) for six months.
- Operations Update No. 5 of 17 October 2005 revised down the number of targeted families to 70,000 (some 500,000 beneficiaries), based on the newly assessed delivery capacity and average family size of seven.
- Revised Emergency Appeal launched on 25 October 2005 for CHF 152 million (USD 117 million or EUR 98 million) to assist 81,000 families (some 570,000 beneficiaries) for six months.
- Revised Emergency and Recovery Appeal launched on 28 March 2006 for CHF 227 million (USD 172 million or EUR 145 million) to assist over 1,085,000 beneficiaries through to the end of 2008.
- Operations update 27 revises the budget down to CHF 165 million to assist over 1,085,000 beneficiaries through to the end of 2008.

Operational Summary: This operations update outlines a budget revision down of 27 percent (some CHF 67 million) from the March 2006 budget figure of 227 million. The number of targeted beneficiaries remains the same and the reduction is due largely to bilateral relationships taking over some of the funding burden, and a refining of the overall programme, with more accurate costing. It also reflects appeal coverage to date and forecast contributions, leading to a rationalization and some scaling back of activities. The appeal figure may be revised again in future if needs or funding potential increases.

Building on the revised emergency and recovery appeal launched on 28 March 2006 and based on ongoing assessments, emerging and changing needs and vulnerabilities, the plan of action is a more focused and comprehensive. It reflects the transition from the emergency relief phase into recovery and reconstruction projects through to the end of 2008, whilst taking into account ongoing residual relief requirements. The plan has been shared with donors/partners.

The plan reinforces the partnership for the way forward between the Federation and the Pakistan Red Crescent Society (PRCS). PRCS will assume greater ownership of the operation with more skills development and resource allocation to play a major role in the earthquake operation. The plan is anchored in the mandate given to the Federation to serve the beneficiaries and protect human dignity effectively.

The emergency relief phase is over; however residual emergency needs are still being met. This included assistance to approximately 10,000 affected people in August as a result of the monsoon and preparation to assist 13,500 vulnerable families heading into the next winter (distributions due to commence in December). The latter is part of the 'Winter Plan' which the Pakistan Red Crescent Society (PRCS)/International Federation is playing a role along with the Earthquake Reconstruction and Rehabilitation Authority (ERRA), the United Nations Resident Coordinator's office and various UN agencies and other humanitarian actors in meeting this need. While the government 'owner driven' reconstruction plan has continued with most beneficiaries receiving the compensation package of Pakistan rupees 175,000, it is estimated that fewer than 20 percent of affected people have completed reconstruction. It is estimated that 400,000 to 500,000 people (approximately 66,000 families) are most vulnerable heading into the winter and will require some form of shelter assistance.

Planning has progressed on the 44 reconstruction projects and the ground work is now due to begin in March 2007 in nine of these (eight involving the Federation and one bilateral). *See the map at the end of this report summarising locations of the various construction projects.*

The health programme continued satisfactorily with Pakistan Red Crescent/Federation activities focusing on the mobile health team operations. The plan is for these teams to be phased out through 2007 when either permanent health facilities become available to communities or partners such as national societies take over their operation.

The International Federation continues to maintain a delegation office in Islamabad, a field office in Mansehra, a mobile health base in Besham and a base camp in Banna (Allai Valley). The Federation is negotiating a handover of an Oxfam camp in Balakot and this process is expected to be completed in early 2007. The camp facility would have the capacity to support personnel for a range of programmes/activities.

The next operations update will cover the three month period November 2006 to January 2007. An independent review is also being commissioned and its findings will be released in early 2007.

For further information specifically related to this operation please contact:

- *Pakistan Red Crescent Society: Khalid Kibriya (secretary-general); email: khalid_kibriya@yahoo.com ; phone: +92 5 925 0404; fax: +92 51 925 0408*
- *Federation country delegation in Pakistan: Azmat Ulla (head of delegation); email: azmat.ulla@ifrc.org ; mobile: +92 300 850 3317; fax: +92 51 443 045; Udaya Regmi (deputy head of delegation); email: uaya.regmi@ifrc.org mobile: +92.300.555.4502*
- *Federation South Asia regional delegation in India: Nina Nobel (acting head of regional delegation); email: nina.nobel@ifrc.org ; phone: +91 11 2411 1125; fax: +91 11 2411 1128*
- *Federation Secretariat in Geneva (Asia Pacific department): Christine South (regional officer South Asia); email: christine.south@ifrc.org ; phone: +41 22 730 4529; fax: +41 22 733 0395.*



Monsoon rains in August took a heavy toll on already vulnerable communities such as this family in Rashang village in Allai Valley receiving relief items from the Pakistan Red Crescent. The PRCS/Federation assisted nearly 10,000 people during the monsoon period.

Background

An earthquake with a magnitude of 7.6 on the Richter scale, centred 95 km northeast of Pakistan's capital, Islamabad, struck at 08:50 local time (03:50 GMT) on 8 October 2005, with tremors felt across the region from Kabul to Delhi. The quake decimated large areas of northern Pakistan and northern India. The affected area of almost 30,000 square kilometres was the size of Belgium. In Pakistan, 73,000 people were killed and more than 120,000 were injured. Approximately 3.5 million people were left homeless.

Operational developments

Plan of action/Budget revision

During the reporting period the operation structure was revised and refined and summarised in a 'plan of action' which is being shared with donors/partners. There is no fundamental shift in direction of the operation, but the plan of action does make some internal organisational adjustments better reflecting the reality on the ground, the current and forecast funding environment and multi-lateral and bi-lateral partnership developments. The plan of action also presents a clearer picture of the recovery phase of the operation now the emergency relief phase is complete. However, there are still ongoing residual relief activities for the winter period.

The new structure is summarized as follows;

| Programme | Project |
|---------------------------------------|--|
| 1. Health and Care | 1. Basic health care |
| | 2. HIV/AIDS |
| | 3. Psychosocial Support |
| | 4. Capacity building in Health |
| | 5. Water and Sanitation (WatSan) |
| 2. Disaster Management / Relief | 1. Relief |
| | 2. Residual Relief/winter preparedness plan |
| | 3. Disaster Management |
| | 4. Livelihood |
| 3. Reconstruction | 1. Reconstruction |
| 4. National Society Capacity Building | Various expected results relating to branch development, governance/management/planning capacity building, principles and values, advocacy and communications. |

The total budget relating to activities from October 2005 to the end of 2008 has been reduced from CHF 227 million by 27.3 percent to CHF 165 million due to the increased bilateral support and a review of programme objectives and budgets to better reflect real costs. The expenditure as of October 2006 stands at CHF 99 million. The major changes in the budget relate to:

- Reconstruction - reduced by CHF 30.9 million
- Disaster Management - reduced by CHF 10.8 million
- Health and Care - reduced by CHF 9.5 million
- Livelihoods - reduced by CHF 8.4 million
- Water and Sanitation - reduced by CHF 2.1 million

Health and Care: Budget decrease of CHF 9.5 million (47 percent)

The significant reduction in the health and care budget does not affect the number of targeted beneficiaries of 200,000 people. The majority of the cuts are due to various planned activities being taken over by bilateral partners. The major 'big ticket' items in this regard are;

- Psychosocial support. The budget line of CHF 4 million is being addressed bilaterally, predominantly by the Danish Red Cross (with funding support from ECHO), the Belgian Red Cross and the Turkish Red Crescent.
- Mobile health clinics in tribal areas. The budget line of CHF 2.8 million was part of a planned bilateral Danish Red Cross project which has now been cancelled due to security reasons. The Canadian Red Cross support for mobile health clinics in the Allai Valley has also contributed to the budget reduction.
- Personnel. The budgeted amount decreases by CHF 2.7 million due to a lower number of international delegates than originally planned and personnel costs being assumed by partner national societies in bilateral projects or by the move to nationally recruited staff.

Reconstruction: Budget decrease of CHF 30.9 million (67 percent)

The reconstruction programme has undergone significant changes which include.

- The planned number of reconstruction projects reducing from 52 to 44.
- Of the 44 projects, 20 are being funded bilaterally.
- A figure of CHF 10 million for shelter (corrugated galvanized iron sheets etc) was removed and placed under relief/winter preparedness as it was incongruous for it to be under *reconstruction*.

Disaster management: Budget decrease of CHF 10.4 million (26 percent)

Reassessing needs, operational issues and the capacity to deliver assistance, the amount of disaster relief items for distribution and/or disaster preparedness has been reduced. This reduction mainly relates to expenditure budgeted for corrugated galvanized iron sheets, tents and blankets and quilts. The reasons for the reduction are;

- The government policy that emergency shelter relief was not to be extended beyond March 2006. Some exceptions to this have been allowed in response to the coming winter.
- Bilateral assistance from the Belgian Red Cross and French Red Cross helped address the needs of targeted communities.
- A reassessment of capacity of the PRCS/International Federation resulted in a more realistic distribution plan.

Due to the reduction in planned relief activities personnel costs also came down.

Other reasons for the budget reduction are the shifting of warehouse reconstruction costs and some human resource costs to the organisational development budget. The number of vehicles budgeted to be provided to the National Society has been reduced from 30 to 20 according to need.

Water and Sanitation: Budget decrease of CHF 2.1 million (30 percent)

The budget has been reduced in line with anticipated funding support. This led to the cancellation of some planned activities in Shangla and other northern areas. Activities will be focused on Batagram, Balakot and some in the Allai Valley. There has been a significant budget cut in expatriate staff being cut from early 2007 and an accelerated handover to the National Society. Assisting with the budget cuts is the Swiss Red Cross plans to conduct and fund water and sanitation activities in the Allai Valley area on a bilateral basis.

Livelihoods: Budget decrease of CHF 8.4 million (68 percent)

The main reason for the large reduction in the livelihoods budget is the removal of the livestock component. Originally it was intended to distribute cattle and chickens and provide support services such as animal husbandry training. Several problems/complications emerged in relation to the planned livestock distributions (see the livelihoods section later in this report for the detailed rationale for this decision). Planned forestry and orchard seedling distributions have also been cancelled. The gender budget line was removed from the livelihoods budget and given its own budget code.

Other budget variances

The Geneva and South Asia regional delegation budgets were adjusted down in line with actual funding levels. The Management and Coordination and Mansehra office core cost budgets were increased to meet actual needs. The increase in the organizational development budget is mainly due to inclusion of new branch development costs and financial software, plus warehouse construction as mentioned above.

General operational developments

The coming winter is expected to be significantly harsher than the previous one which was considered to be 'mild'. The UN World Meteorological Organisation forecast for the coming winter made on 6 October was that the winter would be "severe with average temperatures likely to be colder than normal." The forecast is that in December, January and February, day temperatures are likely to remain several degrees below freezing especially in mountainous regions with minimum temperatures (night) sometimes as low as -15° C.

A major focus during the reporting period has been on responding to the needs of approximately 10,000 people as a result of monsoon flooding and landslides during August. This included dealing with a cholera outbreak which hit communities in Batagram and surrounding areas particularly hard. Full details are outlined in the 'Cholera

outbreak in August' box in the Health section and under the residual relief project in the Disaster Management / Relief section.

In addition to the emergency relief and health assistance provided to people affected by the monsoon, the Pakistan Red Crescent and the Federation finalised planning for the 'Winter Plan' aimed at assisting people still vulnerable, particularly with regards to shelter, heading into the next winter. The winter plan will provide assistance to 13,500 families with distributions to begin in December. Full details are outlined under the residual relief project in the Disaster Management / Relief section.

The Islamic holy month of Ramazan¹ fell between the last week of September up until the last week of October. Muslims fast between the hours of sunrise and sunset, not even drinking water. This obviously impacts on energy levels and the Pakistan Red Crescent went to shortened hours ending at 2:30pm for this period, matching government timings. However where operational needs necessitated working outside these hours, all staff were always available and frequently did work longer. Ramazan reflected a general slow-down in some programmes/projects with communities participating less, particularly in attendance of health facilities. The end of Ramazan was marked by the week-long Eid holiday which further impacted on programme implementation.

Heading into the winter, the UNHCR reported 4,500 families (approximately 36,000 people) were still in official tented camps (three camps in North West Frontier Province (NWFP) – approximately 4,000 people - and 47 camps in Pakistan-administered Kashmir). The UN is carrying out a 'winterization' process in the camps to make the tents more resilient for the winter. This involves surrounding each tent with a reinforcing/insulating structure of bamboo, corrugated galvanized iron (CGI) sheeting and plastic sheeting. The UN hopes, with the assistance of the government, to complete this process in December. Provision is being made for an additional 10,000-15,000 people who may be forced down from the mountains and have no alternative shelter options. The International Organisation for Migration (IOM) notes however that this year fewer people are migrating compared to normal patterns. This is due to the fear of losing land and compensation for building houses.



The PRCS and Federation are working closely with community leaders such as this cleric in Allai Valley, to promote projects such as community based first aid, hygiene promotion and disaster preparedness.

The UN-ERRA Early Recovery plan budget of USD 167 million was 62 percent covered across eight programme sectors.

Human resources: There are 17 delegates involved with the operation and with impending departures with missions ending, this figure will be reduced to 15 by the end of the year. This compares with 28 delegates as at the end of October and 250 delegates at the height of the operation in November/December 2005. There are 135 local Federation staff with this figure remaining relatively constant since the previous reporting period.

The Federation human resources team has been working closely with the National Society in helping it ramp up its HR resources as it takes greater ownership of the operation. The focus has been on nationalizing various delegates' positions, replacing them with either PRCS staff or locally-recruited Federation staff.

The newly created fulltime human resources position in the Pakistan Red Crescent continues to be vacant. A person was chosen for the job but subsequently withdrew. The Federation human resources delegate ends his mission in December and his role will be assumed by the locally recruited human resources officer and the Islamabad delegation senior office manager.

Whilst delegate's positions are being reduced, a construction delegate's position has been created to assist with the large reconstruction programme. A suitable candidate has been appointed and will begin his mission in December.

¹ 'Ramazan' is the Urdu spelling. The Arabic spelling of 'Ramadan' is more commonly used outside of Pakistan.

The National Society has not finally given its go ahead for the recruitment of the Organisational Development delegate until it is in a better position to benefit from this post – the recruitment has been delayed until early 2007.

The breakdown of the current delegate situation and future plans is as follows;

| Team | Current status | 2007 | 2008 |
|----------------------|----------------|-----------|-----------|
| Health | 4 | 3 | 1 |
| Water and Sanitation | 2 | 2 | 1 |
| Relief | 0 | 0 | 0 |
| Logistics | 2 | 2 | 1 |
| Support services | 4 | 2 | 1 |
| Management | 3 | 3 | 3 |
| Communications | 2 | 1 | 1 |
| Construction | 0* | 1 | 1 |
| Organizational Dev. | 0 | 1 | 1 |
| Recovery | 0** | 1 | 0 |
| TOTAL | 17 | 16 | 10 |

* beginning mission December 2006

** the recovery delegate recently ended his mission and will be replaced in 2007.

To ensure human resource changes do not negatively impact on the goals and objectives of the plan of action, the following areas will be focused on;

- Providing locally recruited staff with support to gain good technical and managerial expertise to provide sufficient experience and management capacity.
- Assisting the Pakistan Red Crescent with staffing stability.

Security: There has been no major change in the security situation during the reporting period. Conservative/religious groups in the more rural and remote areas continued to voice disapproval of humanitarian organizations employing women. The Pakistan Red Crescent and International Federation have encountered no major problems in this regard and deal with situations on a case-by-case basis, entering into dialogue with the concerned parties at community level and remaining sensitive to local cultural issues. Apart from one mobile health clinic location having to be moved due to the objections of a local cleric (as noted in operations update 26), the operation has not been significantly affected.

There are regular calls for protests (usually following Friday prayers) relating to various issues such as the bombing of the Bajaur Madrassah. These occasionally lead to restrictions on movements, but normally just for Friday afternoons following a major protest.

Logistics: The Federation logistics team has been busy with the procurement and transportation process of items for the 'winter plan' distribution for 13,500 families in December. The team has been stretched with four delegates ending their missions during the reporting period - the logistics coordination delegate, the warehouse delegate, a logistics delegate and a health logistics delegate. The fleet delegate assumed the role of logistics coordinator. He attended fleet training in Spain in October and was given a thorough logistics briefing and training at the Regional Logistics Unit in Kuala Lumpur in early November. To bolster the logistics office, a local logistics manager is being hired and a local health logistics officer was recruited. A logistics coordination delegate will be in place until the end of 2007 while the procurement delegate's mission runs until March 2007. The process of training local staff and handing over more responsibility to the National Society is ongoing.

The number of vehicles operational is 38 while a further 10 are on standby either to be exported to the Federation fleet base in Dubai, or to be hired by in-country partner national societies. The plan for 2007 is to reduce the fleet to 25 vehicles in 2007, though this will depend on operational developments.

The winter plan distributions will utilize locally hired trucks and procurement has been in the process of assessing rates and availability and the hiring of vehicles and drivers.

Warehousing consists of 10 Rubb Halls in Mansehra and two in Banna camp and a tent in Batagram (60m2). There are two spare Rubb Halls in stock and these will be used if required.

Limited United Nations Humanitarian Air Service (UNHAS) support will be available from November. The service had previously operated until May 2006, providing a valuable transportation and emergency evacuation option. It was utilized extensively by the International Federation/Pakistan Red Crescent for transportation of relief items such as shelter repair kits.

The UNHAS operations have been initially planned for three months (Nov 2006 to Jan 2007) and will have 20 staff and five helicopters. The principle objective of the operation is reconstruction support. There will be partial cost recovery for mandated activities and full cost recovery for other tasks. Cost recovery will be at the rate of USD 50 per person and USD 0.2 per kilogram.



The PRCS, Federation and ICRC held a photo exhibition in Islamabad in October marking the one year anniversary of the quake operation. The exhibition profiled the work of the various Red Cross Red Crescent Movement partners.

Coordination: The Federation attends the weekly UN interagency standing committee meeting, and ad hoc Earthquake Reconstruction and Rehabilitation Authority (ERRA) meetings. The security delegate attends the weekly NGO security forums in Mansehra. The communications team attends weekly UN-chaired information meetings.

ERRA has coordination meetings at district and provincial level covering the sectors of education; health; livelihoods; water and sanitation; housing, shelter and camp management; governance and disaster risk reduction; and coordination and commons services. Federation delegation/PRCS representatives attend these on an ad hoc basis depending on the relevancy to the operation.

The Federation attends the weekly coordination meetings hosted by the PRCS. Across all sectors, Federation and National Society counterparts consult and liaise on a regular basis. There are weekly Federation/ICRC management meetings, fortnightly PRCS/Federation/ICRC meetings and regular informal contact between all Movement partners.

Monthly partner national society coordination meetings commenced in September. Chaired by the Pakistan Red Crescent, these are attended by representatives of in-country partner national societies, the International Federation and the ICRC. Three meetings have been held to date. Partner national societies attending have been the American, Belgian, Canadian, Danish, French, German, Qatar, Swiss, and Turkish national societies. There is also regular coordination at field level, particularly in the area of health.

During the reporting period a service agreement was signed between the Federation and the Belgian Red Cross. This builds on the service agreements already signed with the Danish, French and Qatar National Societies. Agreements are pending with the Canadian, German and Swiss National Societies. The service agreement formalizes administration and service arrangements including the provision of office space.

The plan to employ a coordination officer has been shelved. The monthly partner national society meetings are working well and there is a free and frequent flow of information.

The Federation and the PRCS are set to finalise a Cooperation Agreement, hopefully before the end of 2006. The Agreement formalizes the relationship between the Federation secretariat and the National Society in relation to the earthquake operation. The Federation continues to pursue a Legal Status Agreement and is working with the Pakistan Red Crescent in this regard. Pakistan is now the only country in South Asia in which the Federation does not have a Legal Status agreement.

The first of regularly planned health technical meetings was held in August with a subsequent one held in October. These meetings, planned for every two months, bring together all elements of the Pakistan Red Crescent/International Federation health teams and partner National Societies. Operational matters are discussed including future plans.

During the reporting period there was visit by a six member China Red Cross delegation, led by the Vice President of the China Red Cross. The delegation met with the Pakistan Red Crescent and Federation representatives and also visited field activities in Mansehra. The China Red Cross is a long-term bilateral partner of the PRCS. It contributed significantly to provision of relief supplies during the emergency phase and is providing funding for reconstruction.

Red Cross and Red Crescent action - objectives, progress, impact

HEALTH AND CARE PROGRAMME

OVERALL OBJECTIVE: The health status of the most vulnerable communities in Pakistan is improved by revitalizing Pakistan Red Crescent pre-earthquake projects and through appropriate scaling-up in earthquake-affected areas.

Project 1: Basic Health Care

Specific objective: To enhance prevention of diseases and death through continued provision of appropriate quality basic health care services, while strengthening Pakistan Red Crescent capacity in responding to public health emergencies through community-based health care, first aid, health, sanitation and hygiene promotion activities.

Expected result: Up to 200,000 people in northern Pakistan have access to appropriate quality health care. *(Earthquake-affected area focus)*

Progress/achievements/impact

In total, basic health care has been provided to half a million people over the first year of the operation. Under the Pakistan Red Crescent/Federation plan of action, the focus is now on primary health care delivery via the mobile health clinics and support for basic health units.

The Federation intends to phase out its involvement in mobile health units during 2007. This will be done a needs basis with the handover/phase out process aimed at exiting with a permanent primary health care facility in place or a partner national society continuing support for temporary facilities. In discussion with ERRA, it is planned to phase out the mobile clinics once the capacities of the communities and Pakistan Red Crescent health staff is adequately scaled up and either a PRCS health structure or Ministry of Health/(I)NGO operated facility is in place within the catchment area. The aim is to have most mobile clinics handed over by the end of 2007. This process has already begun, with the Canadian Red Cross, working with the PRCS, taking over responsibility for the mobile health teams in Banna from 1 October.

Integrated primary health care activities (including psychosocial support (PSP) and community based first aid training) have continued to be delivered via mobile health clinics in earthquake-affected areas in Besham, Banna, Balakot and Batagram (all North West Frontier Province). There was a decrease in patronage across all mobile health teams during the reporting period. This was due to three main factors;

- The holy month of Ramadan ran from the last week of September to the last week of October. Muslims fast during daylight hours and generally restrict their movement and normal activities.
- Harvest occurred during September/October and many people were busy either in their own locales or temporarily left for other areas to benefit from harvest-related employment.
- Post-monsoon (September/October) there is a decrease in seasonal diseases/conditions until winter comes.

The mobile health teams operated in the following areas;

| Location (# sites) | Clinics run by; | Number of patients seen per week (average during reporting period) |
|--------------------|--|--|
| Besham (10) | PRCS/Federation | 430 |
| Banna (6) | PRCS/Canadian Red Cross (from 1 October) | 474 |
| Batagram (7) | PRCS/French Red Cross | 370 |
| Balakot (13) | PRCS/Federation | 766 |

Cholera outbreak in August

There was a cholera outbreak around Batagram and the Allai Valley. This was due to disruption or contamination of water supplies as a result of the monsoon rains. Communities surrounding Batagram were particularly hard hit by cases of acute watery diarrhoea and the intervention of the French Red Cross/PRCS was crucial in assisting the Ministry of Health in dealing with the situation.

The local district hospital in Batagram only had a 37-bed capacity and was unable to deal with the hundreds of patients pouring in during early August. Patients were suffering from vomiting, severe diarrhoea and subsequent dehydration.

The PRCS, Federation and French Red Cross, responded with personnel, drugs and tents. In Batagram alone, the French Red Cross/PRCS dealt with 1000 cases in one week. A total of 3,400 cases were eventually treated by the Red Cross Red Crescent via health facilities and mobile health teams.

The combined resources of the Movement partners supplied eight doctors, five nurses, three pharmacy dispensers and two community health promoters to help the authorities deal with the outbreak. Five thousand kilograms of medical equipment was supplied including antibiotics, oral re-hydration solution, IV drips, soap, disinfectants and chloride tablets along with four tents. These supplies were sufficient for providing water purification capacity for 30,000 people and dealing with 1,875 acute cases.

The female-male ratio of patients is approximately 60-40. This is a trend which has emerged over the past six months. In the early months of operation, male patients made up approximately 70 percent of the clients seen by the teams. As trust and acceptance increased in communities, more women have utilised the mobile health services and now make up the majority of patients across all teams.

All teams provide primary health care, including antenatal care, immunisation, health and hygiene education). During the reporting period, the general disease patterns remained the same, with skin infections and respiratory infections being the most common. An increase in lower respiratory infections has been observed and this is expected to continue as the weather deteriorates and people use wood-burning stoves inside during the winter.

Health education activities focus on personal hygiene, prevention of scabies, safe drinking water, treating water at home, advantages of using a latrine, immunization, and promotion of the

benefits of a balanced diet. In this area the health and Watsan hygiene promotion teams work closely together.

Besham mobile health teams: Two teams have been operating around Besham since November 2005. Each visiting a different location Monday-to-Friday, they reach 10 areas per week. During August with heavy monsoon rains, there were outbreaks of acute watery diarrhoea which the teams were able to respond to effectively.

However there was a significant drop-off in patronage of the clinics in the last two months. Over that period, each team was seeing on average 43 clients per mobile clinic per day. This is the lowest average per clinic of all the mobile teams and is down from an average of up to 100 people per day per clinic six months ago. In addition to the reasons outlined above (Ramadan, harvest season, lower incidence of seasonal diseases), ad hoc evidence suggests that the decrease may reflect the success of the clinics. That is, communities are beginning to benefit from the health and hygiene education leading to improved health behaviours. A formal 'end of year' review for the health and care project will be conducted and its results/findings will be included in future operations updates.

Women made up 61 percent of clients during the reporting period.

Banna mobile health teams: Mobile health teams commenced operating from June 2006 and visit six sites per week. Originally operating under the auspices of the PRCS/International Federation, the Canadian Red Cross

entered into an agreement with the National Society/Federation and took over responsibility for the teams from 1 October. The mobile health teams however remain as part of the overall Federation health and care plan of action.

The Canadian Red Cross has a health delegate based in Banna and he is supported by a programme manager based in Islamabad. The Canadian Red Cross will manage and expand the health programme in Banna for the next three years.

School health and antenatal services were introduced during the reporting period while health committees were also formed. These community-based committees provide a forum for feedback, aimed at improving the service provided and increasing village-level cooperation.

Women made up 66 percent of patients seen during the reporting period.

Batagram mobile health teams: Two teams have been operating in the area since November 2005. The teams, based out of a health facility base camp in Batagram, are supported by the French Red Cross, working with the Pakistan Red Crescent. As outlined in the box above, the response by the French Red Cross/Pakistan Red Crescent to cholera outbreak in August was vital. The French Red Cross teams continue to provide basic health care and health education to seven community locations and also see a high proportion of women.

Balakot mobile health teams: Two mobile health teams have been operating in and around Balakot since February 2006. They visit a total of 13 sites a week. As with the other clinics, there was a decrease in patronage over September / October.

Women made up 63 percent of patients seen during the reporting period.

Emerging health needs/risks: The health technical committee has designed a draft plan for Avian Influenza. This is being shared and discussed with committee members, the Pakistan Red Crescent, Federation health staff, the South Asia regional delegation and the Geneva Secretariat. The Pakistan Red Crescent director of health and the Federation health coordinator are the focal points for the Red Cross Red Crescent in Pakistan for Avian Influenza.

During the reporting period, there have been outbreaks of Dengue Fever (and sporadic cases of Dengue Haemorrhagic Fever) particularly in urban areas such as Rawalpindi, Lahore and Karachi. The health team is incorporating Dengue awareness as part of its health education activities.

Health coordination: Regular health technical committee meetings are being held. Planned for every two months, meetings have been held in August and October to date. The meetings cover specific health interventions and there is sharing of technical expertise, lessons learned etc. Minutes from the meetings are distributed to all in-country partner national societies, the Pakistan Red Crescent, ICRC and Federation health managers (including those involved in the psychosocial support and water and sanitation projects).

Mobile health team leaders attend in their respective areas World Health Organisation (WHO) cluster meetings on a fortnightly basis. The Federation senior health manager and health coordinator also attended health-related ERRAs meetings in Islamabad.

During the cholera outbreak in August, Federation and French Red Cross health representatives participated in daily WHO/Ministry of Health coordination meetings.

The health programme is committed to working with other partners such as its cooperation with UNICEF and WHO in the malaria-prevention programme.

Bilateral activities

The Qatar Red Crescent continues to provide health services bilaterally through its hospital in Bagh. For budgetary reasons, the two mobile health units ceased operating at the end of August. Over the past two months the hospital saw an average of 835 patients a week. This was down from an average of over 1300 patients. Factors such as Ramadan, harvest season etc. are likely to have contributed to the drop in patient numbers. Health education sessions were conducted as part of the out-patients services. During the past two months, a total of 25

lady health workers were trained. There are plans for community based first aid training to be conducted in the coming months.

The German Red Cross is continuing to support areas in Peshawar and is examining the possibility of extending support in the Swat district.

The American Red Cross is launching a mother and child health programme in six union councils in Balakot and Mansehra Tehsil. Baseline surveys have been carried out. The project goal is to reduce under-five mortality and material mortality in rural Mansehra district.

In summary, approximately half a million people received some form of medical assistance from Red Cross Red Crescent Movement partners over the first year following the earthquake. This assistance is summarized as follows;

| Health facility | Location | Operational status | Beneficiaries |
|--|---|--------------------|----------------|
| PRCS mobile health units/basic health units | Pakistan-administered Kashmir (various) | Active | 96,852 |
| PRCS/Federation mobile health units | Besham, Banna, Balakot | Active | 28,020 |
| PRCS/Federation/Korean Red Cross mobile health unit | Mansehra, Besham | Closed Dec 2005 | 4,382 |
| PRCS/Federation temporary facility (formerly Federation/Spanish Red Cross emergency response unit (ERU)) | Balakot | Closed Apr 2006 | 7,629 |
| PRCS/French Red Cross mobile health facilities (formerly Federation/French Red Cross ERU) | Batagram and Allai Valley | Active | 25,476 |
| RDRT/Malaysia Red Crescent | Mansehra | Closed Nov 2005 | 1,182 |
| Federation multinational field hospital | Abbottabad | Closed Feb 2006 | 14,623 |
| Italian Red Cross field hospital | Mansehra | Closed Nov 2005 | 686 |
| Qatar Red Crescent field hospital | Bagh | Active | 59,415 |
| Saudi Red Crescent field hospital ² | Mansehra | Active | 208,327 |
| Turkish Red Crescent field hospital | Muzaffarabad | Closed Mar 2006 | 54,435 |
| TOTAL | | | 501,027 |

Constraints

There was some disruption to the mobile health clinics during August due to landslides as a result of the monsoon rains. Some locations were not able to be reached due to roads being washed out and/or unsafe road conditions. The mobile health teams servicing Balakot did have a camp in Balakot, but this was washed out during the monsoon. All team members are now based out of Mansehra, an hour-and-a-half drive to the south. The travel time impinges on the time teams can spend with communities. The health team is examining the possibility of relocating staff in Balakot in the future and it is planned to take over an Oxfam camp in the town.

During August, the mobile health teams in Banna had to operate without female staff (thus preventing them from reaching female clients) due to demonstrations organised by local conservative religious groups. These groups were objecting to women being employed by humanitarian organisations or being involved in community mobilisation. After the demonstration, Pakistan Red Crescent and International Federation representatives commenced a dialogue with local religious leaders and village elders which cleared the way for female health



Mobile health teams had to contend with treacherous conditions during the monsoon period. This team is attempting to reach a village north of Balakot.

² The Saudi Red Crescent field hospital is part of unilateral assistance provided by the Saudi Relief Mission direct to the Pakistan government and not through the Federation or Pakistan Red Crescent.

workers to return to the team. The Batagram teams ceased visiting one of their regular sites due to security concerns resulting from antagonism from local religious groups.

A pharmacy constructed by local carpenters in Banna was of unsatisfactory quality, and workmen from Mansehra were brought in during November to complete the job. This constraint highlights the lack of skilled construction labour in the area, which has caused problems with the general reconstruction efforts.

There are procedural issues relating to procurement of medicines. These relate mainly to cost and 'lead time' (i.e. time of purchase and shelf life of medicine until expiry). The Federation health team, the National Society and the Geneva Secretariat are continuing discussions to resolve the situation.

Project 2: HIV/AIDS

Expected result: Thirty thousand people benefit from community-based HIV/AIDS prevention, care and support activities that contribute to the reduction of the burden of HIV/AIDS on the country.

Progress/achievements/impact

The HIV/AIDS project continued to operate at a low level, focused on the pilot voluntary counselling and testing centre in Lahore. However significant progress was made in planning and determining activities for the future.

In August, the first meeting of the HIV/AIDS Steering and Management Committee was held, at the Pakistan Red Cross national headquarters in Islamabad. In addition to National Society and Federation personnel, the meeting was attended by representatives from UNAIDS, WHO, National Aids Control Programme (NACP), and Family Health International.

The meeting formed a taskforce to revise and update the Pakistan Red Crescent HIV/AIDS policy and strategy and to develop a memorandum of understanding with WHO, NACP, UNAIDS and other stakeholders to develop a formal partnership.

The taskforce met again on 11 October and updated partners on the revision of the National Society strategy and policy.

The Pakistan Red Crescent deputy director of health attended a UNAIDS training course in Bangkok in October on guidelines for the prevention of HIV/AIDS in emergency situations. The Federation is supporting two voluntary counselling and testing centre counsellors to attend a training course in India in November. The course will focus on improving care and support skills.

Constraints

The project continues to operate at a low level. This has been due largely to priority given to emergency response activities/projects in relation to the earthquake operation. However, the August meeting of the Steering Committee and formation of a taskforce are concrete steps to re-energise the project and reflects a desire of the National Society to ramp up activities.

Project 3: Psychosocial Programme (PSP)

Expected result: Up to 30,000 people have been able to cope with prolonged psychological stress and actively contributed to community efforts during the post-emergency/transition period.

Progress/achievements/impact

The second phase of the ECHO-funded PSP project being implemented by the Danish Red Cross and the Pakistan Red Crescent began on May 15 2006. This second phase focuses on communities' recovery and aims at supporting them to rebuild hope and confidence and strengthen social links. A community-based approach is applied and has proven to be a key factor in the success in ensuring community acceptance and involvement. The first phase up to May concentrated on people in relief camps while the second phase targets villages.

As a component of the overall health and care programme, one of the project's objectives is to mainstream PSP in primary health care in order to strengthen a holistic approach of health where the psychological and social well being contribute to people's overall health conditions.

The PSP Project is now operational in two districts across 17 villages - Mansehra (Balakot Tehsil) and Batagram (Batagram and Allai Tehsils). In Mansehra district, it is implemented in 12 villages. The extension of PSP activities to five more villages in Balakot Tehsil will take place in November 2006. In Batagram Tehsil, the PSP team is working in close coordination with French Red Cross in three locations. Need assessments for the remaining villages where the French Red Cross works will begin early November and PSP activities will commence immediately after. The PSP team is also working in two villages in Allai Tehsil in cooperation with International Federation mobile health teams.

As of mid-October, the project has supported 14, 684 beneficiaries in villages through a wide range of activities:

- Play and sports activities for kids and adolescents ;
- Social activities for the community as a whole ;
- Skills training activities (electricity, computers, sewing, etc.) which aim at rebuilding self-esteem and bringing people together ;
- Awareness sessions (psycho-education sessions) which intend to increase the knowledge of different target groups about their specific needs and psychological issues, about stress reactions and symptoms, and how to cope with these feelings.

These 14,684 beneficiaries are in addition to the 27,000 people reached in camps during the emergency phase, bringing the total number of people benefiting from the project to over 41,000.

During the reporting period, all PSP staff received training in psycho-education from local NGO Rozan, and in community mobilization from local NGO Cavish.

A psychologist has been recruited to provide support to the psycho-education sessions and feedback to the field teams and Rozan. This recruitment is intended to improve the overall project quality and also better measure the impact of PSP activities.

The cooperation with the International Federation and French Red Cross health teams is now well established. A joint strategy has been defined and detailed activity plans have been agreed upon. This integration will be boosted in the second half of the project and extended to the Government health system (through the 'lady health workers' in particular). One major component of this integration is to train the health workers in psychological symptoms

PSP activities broaden

To date the PSP project has consisted of the Danish Red Cross (with funding from ECHO) working with the Pakistan Red Crescent under the umbrella of the International Federation earthquake operation.

The Danish Red Cross has secured new ECHO support which will see it continue to operate in the Mansehra and Batagram districts until April 2007.

Not funded under this appeal, but included in the revised plan of action, are Belgian Red Cross and Turkish Red Crescent PSP interventions.

The Belgian Red Cross is operating in five villages in Batagram district. The Belgian PSP programme is operating in conjunction with its shelter programme and is also integrated into water and sanitation activities.

The Turkish Red Crescent in conjunction with the Pakistan Red Crescent disaster management activities will be working in Muzaffarabad in Pakistan-administered Kashmir. During the reporting period the Turkish Red Crescent completed building a PSP centre in Muzaffarabad and it is expected to be operational from January 2007. The Turkish Red Crescent conducted PSP activities in camps in Pakistan-administered Kashmir during the emergency phase.

More details on Turkish and Belgian PSP activities will be provided in the next operations update.

and reactions. To date, all International Federation and French Red Cross health staff have been trained and government health workers in Batagram Tehsil will be trained during November.

The project is also targeting school teachers in order to enhance their understanding of children's psychological issues and develop psychosocial support activities within the school system. A total of 43 teachers have been trained to date and this figure will reach 100 by April 2007.

Key PSP staff will be trained in 'training of trainers' First Aid by the Pakistan Red Crescent during November. They will then provide first aid trainings to targeted communities from November 2006.

Targeted populations are generally satisfied with the PSP project and show enthusiasm and commitment for the various activities. Although some communities can initially be rather reluctant to participate in the psycho-education sessions, they usually recognize after a few sessions the benefit they get from learning new things about themselves and improving their coping mechanisms.

A project mid-term review will take place from November 27 to December 7, 2006. This exercise to be conducted by the Danish Red Cross will be an opportunity to conduct interviews with beneficiaries and gain a better insight into the project impact.

Constraints

Working in remote and conservative areas remains a daily challenge for the field teams. The teams are trained in community mobilization and participation to enable them to approach people in villages properly.

In Batagram Tehsil in particular, implementation is challenging due to internal strife between castes in some communities, and a conservative culture in general. Outsiders are met with much suspicion and mistrust and minor incidents can lead to serious problems between the PSP teams and communities. PSP teams work on a daily level with the communities and become very involved in the daily routines and problems that the respective communities face. This increases the "risk" of becoming entangled in internal community problems. Furthermore, psychosocial activities, unlike curative health services are not tangible i.e. material in the form of medicine/hygiene kits and hence it is more difficult to encourage communities to participate in psychosocial activities and realize the benefits of participation.



The PRCS/ Danish Red Cross psychosocial programme has reached 14,684 people in villages in addition to 27,000 people in camps during the emergency phase.

Project 4: Capacity building in health

Expected result: Pakistan Red Crescent capacity in emergency health preparedness is enhanced and its community based primary health care system is developed with volunteer involvement, enabling the National Society to better serve communities at risk (*nationwide focus*).

Progress/achievements/impact

Traditional birth attendants have been identified through the mobile health clinics for safe motherhood training. UNICEF is interested in the Federation taking the lead in some districts, and meetings are continuing to reach agreement on a uniform training curriculum, delivery kits and programme context.

Staff, volunteers and community members receive a range of training via the mobile health team network. All locally engaged staff receive ongoing training from the health professionals attached to each team.

A focus on community based first aid training continued and the following was achieved during the reporting period;

- Seven health staff and 60 community volunteers received training in Besham.
- A total of 45 community volunteers (all women) received training in Balakot.
- A total of 120 community volunteers received training in Banna.

A strong base of volunteers (mostly male) is being built up through the establishment of health committees where the mobile teams are operating. These committees help organise the clinic and assist with crowd control and general logistics. It is planned for all volunteers to be trained in community based first aid.

A summary of the health committees and volunteer base is as follows;

| Besham | Balakot | Banna |
|---|---|--|
| <ul style="list-style-type: none"> • Eight health committees established. • 120 volunteers trained in community based first aid | <ul style="list-style-type: none"> • Nine health committees established. • 10-15 volunteers in each location • 20 volunteers have been trained to date in community based first aid. | <ul style="list-style-type: none"> • Health committees are being formed in five locations • 20 volunteers have been identified in each location. |

A further area of health and care capacity building is the continued British Red Cross financial and technical support to Balochistan province (since 2002) through three mobile health units, two basic health units and community based first aid training. Assistance is also provided for a mobile clinic and basic health unit in Peshawar and Torkhan respectively. All facilities are involved in curative care, health education, community based first aid and reproductive health services.

The Peshawar, Torkhan and Balochistan facilities took part in national immunization days for Polio eradication. Drops were administered to patients at the clinics while staff were utilized to mobilize communities to take part in the campaign.

Constraints

Staff turnover continues to be an issue particularly in the Peshawar and Torkhan facilities. These were resolved by the hiring of new staff, but in the long run, issues such as remuneration and timeliness of payment of salaries need to be addressed by the National Society.

During the reporting period there were threats from various conservative religious groups against women being employed by NGOs/humanitarian organisations. This led to a brief disruption of services in Balochistan but the matter settled down and there were no untoward incidents.

Project 5: Water, sanitation and hygiene promotion

In line with the refining and development of the water and sanitation project as per the plan of action, the project now has three expected results in place of the original one. The expected result as outlined in operations update 26 read ‘To support 160,000 vulnerable people in communities affected by the earthquake in NWFP through the implementation of safe and sustainable community-based water and sanitation projects in order for them to reach a substantial improvement in health and wellbeing by the end of 2008.’. The new expected results are as below;

Expected result (hygiene promotion and health education): By the end of 2008 160,000 people have attained a substantial improvement in their health and wellbeing and benefit from reduced risk of water and sanitation related diseases through the hygiene promotion and health education programme.

Progress/achievements/impact

The hygiene promotion unit is progressively integrating its community-based activities with other health-related and community-based activities under health, gender and livelihoods in the same targeted areas. Training of hygiene promotion trainers in a community participatory process (Participatory Hygiene and Sanitary Transformation - PHAST) has progressed, while two teams of PRCS/Federation hygiene promoters are conducting a health and hygiene awareness programme in schools. Distribution of family hygiene kits and female hygiene kits is progressing at a rate of 600 kits per month. A case study has been prepared to document the participatory community approach to hygiene promotion in Banian Union Council. This should be produced before the end of the year.

Through the work of the hygiene promoters, 52 communities in the Balakot and Batagram areas now have well-established village committees. These committees of community members receive regular hygiene promotion training and are responsible for spreading this information to the wider community. A total of 150,000 people have now received hygiene promotion and health education messages since the beginning of the operation (October 2005).



Hygiene promotion sessions such as this one at a village near Balakot have proved particularly popular with women. A total of 150,000 people have received hygiene/health promotion messages since the beginning of the operation.

Constraints

The training of trainers in hygiene promotion is challenging due to cultural conservatism. Female staff members often struggle to gain acceptance from male members of the communities. This is also reflected in a gender division in the way communities accept and participate in various water and sanitation activities. Male community members participated more in outdoor activities such as clean up campaigns, building of latrines and receiving of hygiene kits. Women on the other hand were more involved in educational activities and taking decisions on which hygiene practices were to be promoted in the families. They also became very instrumental in passing the messages to other women. This has been incorporated into the participatory PHAST approach, where two village committees are set up in each community (one male, one female), each with their own respective functions.

Expected result (sanitation): 160,000 vulnerable people in the areas of Batagram, Balakot and Allai Valley and in other areas prioritized by the relief recovery programme and PRCS have access to and maintain 9,000 rural toilets (improved pit latrines) and bathrooms close to their dwellings, through a community-based, gender-responsive and sustainable sanitation project until the end of 2008.

Progress/achievements/impact

Eighty pour-flush latrines were constructed every week by targeted populations in Balakot and Batagram with the materials and the technical instructions provided by Pakistan Red Crescent/Federation teams. A total of 1,500 improved family latrines have now been completed and installed in the target areas (out of a total of 2000 latrines to be constructed by the end of 2006)

Sanitation and hygiene promotion teams have also distributed about 1,300 water containers (or buckets) and they delivered 100 solid waste containers (rubbish bins) in the villages (one solid waste disposal for 4-to-5 families). Drainage work and education in the correct use of latrines are also ongoing activities. 'Clean-Up' campaigns are being currently organized by Pakistan Red Crescent/International Federation sanitation and hygiene promotion teams in targeted villages.

Feedback from PRCS volunteers working in the field is that communities are exhibiting more awareness of water-related hygiene and sanitation problems, especially the relationship between good hygiene practices and the improvement of their health. Progressive change of hygienic behavior, promoted by the hygiene promotion and sanitation teams has already been verified in some operational areas where WatSan has completed projects and led a lower level of disease incidence in target communities during the monsoon season.

Constraints

Communal latrines tried out in some communities were not accepted by communities and not utilized. On the other hand, 'family latrines' used by just a few households were found to be acceptable and the project adjusted to meet this preference. One of the issues with communal latrines was that no-one was prepared to take responsibility for cleaning them. However family latrines (shared by just a few households) did not encounter this problem.

A significant lesson learned over the course of the operation is the need for greater community consultation, particularly in the location of latrines. Cultural practices in Pakistan require that women do not share the same latrine facilities as men (separate and private sanitation facilities must be provided for both men and women). Lack of community consultation at the beginning of the intervention resulted in some of the latrines being sited in locations unacceptable to the traditional practices of 'purdah', where women do not leave their houses unaccompanied and use toilet and bathing facilities only during the night.

Expected result (provision of safe drinking water): By end 2006 80,000 people have access to and can maintain safe water supply systems in the areas of Batagram, Allai, Balakot and Shangla (Besham) and in other areas prioritized by the relief recovery programme and PRCS, with the number of beneficiaries to increase to 160,000 by the end of 2008.

Progress/achievements/impact

During the emergency phase two water and sanitation emergency response units operated in Balakot and Batagram respectively to meet water supply needs. The Federation/Swedish Red Cross unit which was wound up in July was producing 210,000 litres of potable water per day servicing 15,000 people. The Federation/German/Austrian Red Cross unit in Batagram which was wound up in April 2006 had been providing water for 10,000 people per day.

As these units have been phased out, they have been replaced by rehabilitated water supply schemes. These water supply schemes in and around Balakot, Batagram and in recent months, Banna, are supported by village water and sanitation committees which have been formed. These committees, with support and guidance from Pakistan Red Crescent/International Federation staff manage the equipment and organize field work.

During the reporting period, a further five villages benefited from new or rehabilitated water supply schemes, benefiting a total of approximately 12,000 people. This brings the number of constructed/rehabilitated water supply schemes under the WatSan project to 22. The Pakistan Red Crescent/International Federation has received approval from ERRA to construct/rehabilitate a total of 58 water supply schemes.

Constraints

Heavy flooding and resultant landslides during August damaged or destroyed many water supply schemes. This meant repairs and reconstruction work had to take place. WatSan and hygiene promotion teams, utilizing materials from the former emergency response units, are preparing contingency plans in case of emergency situations in the coming winter.

DISASTER MANAGEMENT/RELIEF PROGRAMME

NB this is a 'new' programme replacing the structure previously outlined in the revised appeal launched in March 2006. The disaster management/relief programme incorporates components of 'ongoing relief', 'shelter and reconstruction' and 'livelihoods' which were previously separate programmes. The activities relating solely to reconstruction (as opposed to shelter relief) have been separated and compiled as a single programme).

Project 1 – Relief

Expected result: The most vulnerable communities in earthquake-affected or disaster-prone areas are identified and receive targeted assistance.

This project is effectively closed in that it involved the initial emergency relief phase between October 2005 and April 2006. As outlined in previous operations updates, the target of reaching 81,000 earthquake-affected families

with emergency relief supplies was exceeded, with 122,000 families assisted by May. Details relating to these distributions are outlined in operations update 25 http://www.ifrc.org/cgi/pdf_appeals.pl?05/05EA02225.pdf

Project 2 – Residual relief

The residual relief project reflects the PRCS/Federation planning/response for the 2006 monsoon season and coming winter. In an effort to improve preparedness of communities for disasters, ERRA in cooperation with regional District Coordination Officers, conducted mapping of available resources including those of INGOs and other international organizations. The main focus of the PRCS/Federation is to assist vulnerable communities in the transitional stage from temporary to permanent shelter. While ERRA officially deemed the emergency shelter phase to be over at the end of March 2006, by August it had re-evaluated the situation and recognized that not all families were going to have access to permanent shelter before the winter. The UN estimated 66,000 families would be ‘at risk’ with regards to shelter in the coming winter.

Expected result: Additional relief and shelter needs of the most vulnerable in earthquake-affected areas are met, ensuring their preparedness for the coming winter (2006-07) and relief and shelter activities are phased out strategically in 2007.

As detailed in operations update 26, a large-scale distribution of relief goods was made to more than 41,000 families over June/July. These distributions targeted gap areas and areas which had been under-served in the initial emergency relief phase – Thakot, Sarkool, Kaghan, Berot, Bakot, Namal, Berengali, Patankalan, Palek, and some of the more remote union councils in Balakot. These distributions brought the total number of people reached with emergency relief items to 1.1 million.

During the reporting period, the major focus has been on dealing with emergency relief needs arising out of the monsoon floods and preparing for the coming winter, finalising the ‘winter plan’.

Monsoon response

Heavy monsoon rains which began in July caused extensive flooding and landslides in earthquake-affected areas through August. The Pakistan Red Crescent and the International Federation responded to the needs of affected people with emergency relief (the specific health response is outlined under the health section box ‘Cholera outbreak in August’).

The PRCS despatched assessment teams to various areas and quickly relayed information back to headquarters to coordinate the response. In several instances, the Pakistan Red Crescent was the first responder in affected areas. Numerous landslides made reaching affected areas extremely challenging. For example, an assessment team heading from Mansehra to Balakot had its way blocked by extensive landslips. The team completed a five hour journey on foot to affected villages, assisted affected people as best they could, and then trekked five hours back to their vehicle before returning to Mansehra to present their findings.

The Pakistan Red Crescent, with the support of the Federation assisted affected people in NWFP (Mardan, Charsada, Balakot, Swat, and Allai Valley), Sindh (Thatta, Badin, Sanghar, Mirpurkhas, Hyderabad) and in coordination with the ICRC in the Neelum and Jhelum Valleys in Pakistan-administered Kashmir.

A summary of assistance provided is as follows;

| | | | | | |
|------------|-------|-------------------------|--------|---------------|-----|
| Tents | 1,150 | Hygiene kits | 770 | Mosquito nets | 300 |
| Food packs | 3,680 | Plastic sheets | 365 | Cholera kits | 2 |
| Blankets | 900 | Water purification tabs | 42,000 | | |

In addition to the above, the PRCS national headquarters released a further 5,000 food packs, 500 plastic sheets and 300 kitchen sets to the Sindh, Balochistan and Punjab provincial branches for distribution to affected people in those areas.

Winter Plan

The needs: The latest information from the UN and other agencies is that out of a total of 600,000 families who lost their homes during the earthquake, approximately 66,000 families remain most vulnerable and at risk this winter. Of that, the break-down is approximately 38,000 families in Pakistan-administered Kashmir and 28,000

families in NWFP. These families include vulnerable families without the means to rebuild, those who have fallen through the gaps of the government support and vulnerable families such as female-headed households, disabled etc. Many of these people face a second winter under canvas or under limited temporary shelter. This will be physically and psychologically very hard to cope with after one year of living in such conditions and with the prediction of a much harsher "normal" winter. There are also concerns as to the level of people who will migrate to lower altitudes to survive this second winter.

The context: There have been a number of challenges to working in this situation, particularly in terms of getting its shelter approach in place for ERRA. It has been difficult to get the compensation package fully distributed to all vulnerable families and a number of families have not received any or all of their entitled compensation. For this reason they have not been able to rebuild. In addition, ERRA's shelter strategy experienced problems in that their plans are not geared to the remote highland areas where "pucca" housing, using concrete and steel is not practical, feasible nor culturally acceptable. People are culturally used to using basic materials such as timber and mud to rebuild and have not had appropriate support nor access to the compensation package as a result.

PRCS / Federation plans - Based on the needs identified by the PRCS teams on the ground, the National Society / Federation is preparing assistance to meet the needs of up to 13,500 families (10,000 in NWFP and 3,500 in Pakistan-administered Kashmir). The type and level of goods identified in the contingency plans - mainly to respond to shelter related needs - are in alignment with the needs / gaps identified by the local authorities assessments and contingency plans and those of other agencies that highlight shelter as one of if not the key need for this second winter.

The Federation continues to apply a simple and acceptable strategy to address emergency shelter needs: a much smaller number of winterised tents to cope with emergency needs and provide additional shelter to makeshift dwellings and a further number of CGI sheeting with building kits (the local communities will continue to use scrap wood and put up their own frames). The PRCS/Federation has previously supplied "scrap wood heaters" which have proven to be technically adequate and culturally appropriate and hence more of these will be distributed. .

Procurement processes were put in place. It is expected that all items required will be in place by the end of November with the exception of quilts, over which there were some delays. Some emergency stocks did remain from the earlier distributions to cover the needs of the earthquake affected population in the monsoon season and early winter, however stocks were relatively low and insufficient for the needs identified nor for the predicted harshness of the second winter. Distributions are planned for early December and continue through the month.

The planned assistance under the 'winter plan' will be targeting the following areas;

| Item/Area | Balakot – NWFP (4000 families) | Allai – NWFP (4,000 families) | Batagram – NWFP (2,000 families) | Pakistan-administered Kashmir (3,500 families) | TOTAL |
|-------------------------------|---------------------------------------|--------------------------------------|---|---|--------------|
| Shelter repair kits | 4,000 | 4,000 | 2,000 | 3,500 | 13,500 |
| Hurricane lamps | 4,000 | 4,000 | 2,000 | - | 10,000 |
| Quilts (4 per family) | 16,000 | 16,000 | 4,000 | - | 40,000 |
| Jerry cans | 4,000 | 4,000 | 2,000 | - | 10,000 |
| Wood-burning stoves | 4,000 | 4,000 | 2,000 | - | 10,000 |
| Ladies hygiene kits | 4,000 | 4,000 | 2,000 | - | 10,000 |
| CGI sheets (10 per family) | 40,000 | 40,000 | 20,000 | 35,000 | 135,000 |
| Plastic sheets (2 per family) | 8,000 | 8,000 | 4,000 | 7,000 | 27,000 |
| Blankets (7 per family) | 28,000 | 28,000 | 14,000 | - | 70,000 |
| Kitchen sets | 4,000 | 4,000 | 2,000 | - | 10,000 |
| Winterized tents | CONTINGENCY STOCK | | | | 5,000 |

Transportation: Without the support of the Transport Support Unit present earlier in the operation, all road transport will be undertaken by local firms. The United Nations Humanitarian Air Service resumed a limited service of five helicopters in November which may be utilised if there is difficulty in reaching distribution points.

Stocks are being pre-positioned in Banna to service distribution points in Allai, while the other points will be serviced from the PRCS/International Federation warehouse complex in Mansehra.

Generous support has been received from partner National Societies – American, Canadian, German, Netherlands, Norwegian and Irish Red Cross – in support of the winter plan.

Project 3 – Disaster Management

The disaster management project is an integrated approach to disaster preparedness and response activities. The programme covers all provinces of Pakistan and includes disaster preparedness stock pre-positioning and training/capacity building of PRCS staff and volunteers. Under the disaster management plan, relief stocks for 25,000 beneficiary families will be maintained across the country at national headquarters, provincial branch headquarters and district branch levels. The disaster management programme is designed for three years (2006-2008). Training of PRCS staff and volunteers as well as communities is an integral component of the capacity building part of the disaster management programme.

Expected result: The vulnerability of communities is reduced by strengthening the PRCS disaster management capacity (*NB this expected result replaces the previous expected result 'Nationwide PRCS disaster management capacities are enhanced, especially in high-risk areas, for effective and timely disaster response' which occurred in the 'National Society Capacity Building' programme.*)

Progress/achievements/impact

Community based disaster preparedness was carried out for 20 staff/volunteers in Swat in NWFP during the reporting period. The training was based on needs identified as a result of a vulnerability and capacity assessment (VCA) done earlier in the year.

Two further branches have been opened in the past three months (Mansehra and Thatta), bringing to four the number of new branches this year and ten since the beginning of 2005. Each branch has a disaster management cell which consists of two personnel – a disaster management officer and a warehouse manager. The plan is for each DM Cell at district branch level to have disaster preparedness stocks for 200 families. The two new branches are expected to receive their stocks by January 2007.

The disaster management plan 2005-2010 is still in the draft phase and it is anticipated it will be finalised and approved in February 2007.

The revised plan for disaster preparedness stocks is for the PRCS to have the capacity to respond to the needs of 25,000 families at any time. These preparedness stocks would be distributed as follows;

- National headquarters – stocks sufficient for 10,000 families
- Provincial branch level – stocks sufficient for 2,000 families.
- Regional branch level – stocks sufficient for 1,000 families
- District branch level – stocks sufficient for 200 families.

Provision of stock is a continuous process but the latest available figures indicated national headquarters had supplies sufficient for approximately 8,000 families and across the four provincial branch headquarters there were stocks for approximately 8,500 families. Breakdowns of figures at regional and district level were not available at the time of writing.

As outlined in the previous operations update, a 30-strong national disaster response team was formed following pre-selection training in May and final training in July. A five-day logistics training for PRCS, locally recruited International Federation and Qatar Red Crescent staff was held in July.

Development work on a planned nationwide high frequency (HF) network providing mobile stations and vehicles with very high frequency (VHF) kits continues, but it has not progressed significantly. It remains in the disaster management plan of action, but will not be completed in 2006.

Constraints

The two further VCAs will not take place as planned before the end of the year. This is due to resources being redirected to carrying out the winter plan distributions. VCAs were carried out in Balochistan and NWFP earlier in 2006.

The planned second national disaster response team training will not take place before the end of the year. This is due to resources committed to the winter plan.

Generally disaster management capacity building activities have proceeded slowly, and in general have not kept pace with the plan. The National Society continued to be preoccupied with disaster response work, primarily in relation to the earthquake operation and also in response to monsoon-related flooding and landslides in July/August. This reflects a need to reassess development activity levels. The Federation disaster management coordinator is attempting to assist the National Society to ensure their capacity building plans are realistic and achievable given that historically a significant portion of each year is consumed by disaster response activities.

Project 4 – Livelihoods

Expected result: Earthquake-affected people, particularly the most vulnerable, in 18 remote union councils of NWFP and Pakistan-administered Kashmir have received assistance helping speed up their livelihood capacity recovery.

NB. This single expected result replaces the four expected results as outlined in the revised appeal published in March 2006 and Operations Update 26. The expected results related to;

- Vocational training through community centres.
- Livestock distributions and kitchen gardening support
- Farming seeds and tools distributions.
- Gender

The single expected result reflects the streamlining of the Livelihoods project. As explained more fully below, vocational training/community centre activity is being re-developed; the livestock distribution has been cancelled and the gender activity is now an integrated component of all other programmes.

In preparing the Plan of Action for 2006-2008 and in planning the consolidation and integration of the emergency phase into a recovery programme, the Livelihoods element of the recovery programme was reviewed in the light of present capacities. Activities for 2006 were reduced to ensure the basic essential inputs possible with the limited human resources available. This has focused on the distribution of vegetable seeds and kitchen garden tools to selected beneficiaries and the procurement of winter wheat seed, surveying, assessing, planning and now distributing this seed in the selected areas.

The most significant changes to the livelihoods programme are the removal of the planned activities of livestock distribution and tree seedling distributions. The decision not to proceed with the distribution of cattle was influenced by major problems encountered by other agencies. These included cattle dying due to climatic conditions, cattle being slaughtered for quick cash, and problems with access to suitable grazing. The decision not to proceed with chicken distributions had been made earlier following the outbreak of Avian Influenza in Pakistan.



Abbas Khan standing amidst his maize crop ready for harvest. The 75-year-old lost his entire crop as a result of the quake, leaving his extended family of 40 exceptionally vulnerable. The seeds and tools distributed by the PRCS/Federation have helped thousands of small-holding farmers such as Abbas Khan get back on their feet. The distributions for targeted families will cover two sowing cycles per year through to the end of 2008.

It had been planned to distribute forest and orchard tree seedlings. However this activity would only begin to benefit targeted populations in five years time. Given the uncertainty over the future location of many beneficiaries (particularly those around Balakot) this activity was not seen to be effective or realistic.

Over this reporting period the Livelihood team completed a survey in Banian Union Council for winter wheat seed and fertilizers. The survey encompassed more than 2000 families in 30 villages, covering a total population of 14,500. Together with previously collected information from three other Union Councils – Banna, Batkul and Jambera, the following cumulative distribution plan for all four Union Councils will be implemented at the beginning of December;

| Union council | No. families | Total amount DAP (fertilizer) – (tonnes) | Total amount Urea (tonnes) | Total amount wheat seed (tonnes) |
|---------------|--------------|---|-------------------------------|-------------------------------------|
| Banian | 2087 | 63.75 | 60 | 30 |
| Banna | 1782 | 40 | 50 | 25 |
| Batkul | 1869 | 40 | 50 | 25 |
| Jambera | 823 | 40 | 40 | 20 |
| TOTAL | 6561 | 183.75 | 200 | 100 |

These planned distributions will build on the seeds and tools distributions completed in July for 4,474 families in Banna, Batkul and Jambera (who will now be receiving a second distribution).

With respect to vegetable seeds and kitchen gardening, the main target group being women, the survey results identified 500 households in five Union Councils. Up to eleven types of vegetable seeds (depending on planting area) are available together with basic kitchen garden tools. A female kitchen gardening training specialist is being contracted and will follow up the distribution of seeds and tools, expected to take place at the end of November.

| Union Council | Tehsil | Households identified for vegetable seeds and tool kits | People identified for training in kitchen gardening. |
|---------------|----------|--|--|
| Garlat | Balakot | 110 | 60 |
| Ganool | Balakot | 58 | 41 |
| Batkul | Allai | 70 | 20 |
| Jambera | Allai | 72 | 35 |
| Banian | Batagram | 120 | 55 |
| Banna | Allai | 70 | 0 |
| | | 500 | 211 |

Livelihoods activities for 2007/8 are to be reviewed and revised. With the greater experience of the livelihoods team, together with enhanced skills and experience, the activities will expand in two directions. Firstly livelihoods needs have been identified in areas where both the health and WatSan elements of the recovery programme are working, which will significantly strengthen the sustainability of these elements and the programme as a whole. Secondly the construction element of the recovery programme envisions vocational training centres, to be made operational in two years. The Livelihoods programme will look to provide follow up support to the reconstruction of these vocational centres. These revisions will be reflected in future operations updates.

Gender and Community Participation

With the publication of the Plan of Action, gender and community participation activities are no longer a distinct programme element, but are now actively "cross-cutting" across all of the recovery programme, including health and care, water and sanitation, livelihoods, contingency relief and disaster preparedness, to support and reinforce a community based approach in all these elements. This is contributing towards ensuring an integrated and cohesive "humanity-oriented" programme that will provide the PRCS with a platform from which to establish district branches to assist these isolated and traditional communities.

The conservative nature of these communities require a particularly sensitive and cautious approach, especially with regard to gender issues, which need training and careful preparation to ensure acceptance and engagement with programme activities and outcomes. The gender and community team has planned several joint training workshops with WatSan and health teams and the communities which they serve. The first of these, a 12-day

training session that includes a workshop supported by field work, was being held in November in Besham, Shangla District.

RECONSTRUCTION PROGRAMME

(NB this was previously an expected result under the former 'Shelter and Reconstruction' programme. It is now outlined as a programme in its own right, given its scale, complexity and budget).

Expected Result: Construction of 44 public buildings encompassing health, education and community centre facilities will be completed by the end of 2008 and will be used by the earthquake-affected communities by 2009.

Progress/ achievements/ impact

Of the 44 projects, 20 are supported by bilateral funding direct to the Pakistan Red Crescent. Of the other 24 projects, 15 have earmarked funding via the International Federation and the remaining nine are being funded out of un-earmarked funds under this appeal. All 11 planned health facilities are being funded bilaterally.

All locations for the construction projects have been allocated and approved by ERRA. A summary of the locations and type of facility is outlined in the table below.

| Facility | Pakistan-administered Kashmir | North West Frontier Province | Total | Summary facility type |
|---------------------|-------------------------------|------------------------------|-----------|----------------------------|
| Degree College | 2 | 1 | 3 | 19 educational facilities. |
| High School | 5 | 1 | 6 | |
| Middle School | 5 | 4 | 9 | |
| Primary School | 1 | - | 1 | |
| Basic Health Unit | 6 | 2 | 8 | 11 health facilities. |
| Rural Health Centre | - | 2 | 2 | |
| Tehsil HQ hospital | - | 1 | 1 | |
| Community Centre | 7 | 7 | 14 | 14 Com. centres |
| Total | 26 | 18 | 44 | |

Note this reflects a slight change from Operations update 26 which stated 23 projects would be in Pakistan-administered Kashmir and 21 in NWFP. Subsequent surveys and refining of the plan have led to the alteration in locations.

The first phase of construction is now planned to commence in March 2007, involving nine projects – one bilateral and eight International Federation/PRCS/partner national society projects.

The nine phase-1 projects are;

| Funding source | Project | Location |
|--------------------------------------|----------------------|--|
| General appeal funds | Boys middle school | Amra Sawan, Pakistan-administered Kashmir. |
| General appeal funds | Girls middle school | Shohal Mazulla, NWFP. |
| General appeal funds | Boys middle school | Shohal N. Khan, NWFP. |
| General appeal funds | Girls degree college | Gari Dopatta, Pakistan-administered Kashmir. |
| Hong Kong Red Cross | Girls middle school | Shohal N. Khan, NWFP. |
| General appeal funds | Girls middle school | Mera Bakot, Pakistan-administered Kashmir. |
| Japanese Red Cross | Degree college | Chinari, Pakistan-administered Kashmir. |
| Chinese Red Cross | Girls high school | Mansehra, NWFP. |
| PRCS/Friends of Al Shifa (Bilateral) | Boys middle school | Hatian Bala, Pakistan-administered Kashmir |

The Pakistan Red Crescent has signed an agreement with a public limited company to act as the consultant for the phase-1 projects. The Federation reconstruction manager and procurement delegate were involved in this process. The consultant company is providing architectural, engineering and construction services. The consultant company aims to complete specific designs relating to each location in two months (by January) and will also develop tender documents and contract agreement for contractors. The National Society will place advertisements for hiring of contractors November/December.

The Federation construction manager and PRCS construction consultant have visited the sites of the eight Phase-1 projects and noted down all the specifications.

As soon as construction of phase-1 projects start, groundwork on the next construction phase for the remaining 16 Federation/PRCS projects will commence.

Underpinning the reconstruction operation is the 'Project Cooperation agreement for Reconstruction' between the International Federation and the PRCS. This agreement is pending approval by the Geneva Secretariat. The document outlines minimum conditions/standards for procurement and contractors.

A reconstruction delegate has been identified and is due to begin his mission in December. The delegate will complement the existing Federation reconstruction team made up of the Head of Delegation (a qualified civil engineer with extensive reconstruction experience with the Federation), the construction officer, procurement delegate and finance delegate.

Constraints

It had been originally intended for up to five 'fast track' projects to have commenced by October. However the planning process has been lengthy and complicated. With the winter setting in, the window of opportunity to commence reconstruction has been lost and work will not be able to commence until the spring. The PRCS infrastructure for the reconstruction projects is complex leading to delays in the decision making process.

With the various construction projects forecast to take between 11 and 22 months to complete, given the delay until March next year, there is already severe pressure on completing all the projects by the end of 2008.

NATIONAL SOCIETY CAPACITY BUILDING PROGRAMME

As per previous operations updates, the health capacity building element is included in the health and care programme. In a change from previous operations updates, the expected result relating to disaster management capacity building is moved to the disaster management/relief programme.

Expected result: The institutional capacity of the PRCS to deliver effective and efficient services to the most vulnerable communities is developed and strengthened through expansion of PRCS branches in disaster-prone areas.

Progress/achievements/impact

In the past three months two new branches have been established in Mansehra (NWFP) and Thatta (Sindh) districts. This brings to four the number of new branches established during 2006, while the total number of new branches established since the beginning of 2005 is now ten.

These newly developed branches also include disaster management cells which incorporate two personnel, and disaster preparedness stocks (though these have yet to be put in place in the new branches).

Expected result: Overall PRCS governance, management and programme planning is improved to enable better service delivery.

Progress/achievements/impact

Federation senior management has provided guidance and advice to the National Society virtually on a daily basis to assist it in striving to become a 'well functioning national society'.

Scaling up from a pre-earthquake operation of approximately CHF 1-2 million per annum to a CHF 163 million operation over three years is understandably producing some challenges and 'growing pains' for the National Society. The Federation is providing support to try to ensure the smooth handover of activities, increase ownership by the Pakistan Red Crescent and ensure sustainability. At a core-programme level in health and disaster management this is proceeding reasonably satisfactorily (e.g. in the various health components of health and care and water and sanitation and in capacity building in disaster management). However beyond these 'traditional' areas, there are some challenges.

Organisational development implementation under the framework of this programme design has continued to be low. There has been progress in branch development (see above), financial systems and fundraising, but the overall organisational development/capacity building of the National Society needs greater direction. The post of Director of Organisational Development has been vacant since mid-2005 and the governing board has yet to make a decision on finding a replacement. The strategic development plan and unified constitution also remain in draft form, awaiting finalisation.

The Federation position of an organisational development delegate has been delayed until at least early 2007 at the request of the National Society. PRCS senior management, in conjunction with the Federation is reviewing its approach and strategy for organisational development implementation and still feels under pressure from the day-to-day earthquake operation.

The post of human resources manager is currently vacant and the human resource manual is still to be approved the governing board. A HR manager was appointed in July, but was unable to take up the post due to other commitments. Whilst this could be seen to leave the PRCS in a vulnerable position with regards to HR, it has been given extensive assistance by the Federation HR team in recruitment of staff and development of HR systems. The National Society now plans to fill the HR manager position and finalize the manual in 2007.

The standardized financial policy for the National Society developed in the 2004 has continued to be adopted throughout the country at branch level. It has been adopted in the newly developed Mansehra district branch and Punjab and North West Frontier Province (NWFP) provincial branches. Adoption of the standardized financial policy in the remaining provincial branches (Sindh, Balochistan and Pakistan-administered Kashmir) will be completed shortly.

The planned installation of financial software in the NWFP (Peshawar) and Balochistan (Quetta) provincial headquarters has been put on hold. The software has already been installed at the national headquarters and the Punjab provincial headquarters. The National Society is now examining the purchase of a more sophisticated system to be installed firstly at national headquarters and subsequently at provincial headquarters. The NWFP and Balochistan installations are on hold until this process is completed. However the older system, which would be compatible with the planned new system, would be utilised at provincial branch level.

To increase communications capacity at national headquarters, particularly in times of emergency, a 100-line telephone exchange is being purchased. Two suppliers have been short-listed and the purchase and installation should be completed before the end of the year.

A direct mailing campaign to approximately 200 people has been ongoing, targeting individuals on the National Society donor database. An analysis of this campaign will be included in the next operations update.

Over the reporting period, National Society staff have continued to participate in various international trainings and meetings. Three staff (two disaster management personnel from provincial branches and one NHQ staff member) attended regional disaster response team training in Sri Lanka in August. A PRCS representative also attended a training of trainers' for guidelines on HIV prevention in emergency situations in Thailand. The national headquarters deputy director of finance attended a Federation budget holders training.

Constraints

In addition to the delays outlined above, various other planned activities did not take place. A fundraising initiative involving a pharmaceutical company to use PRCS premises for meningitis and polio vaccination for Hajj and Umra pilgrims to Saudi Arabia (these vaccinations are now immigration pre-requisites of the Saudi government) has not proceeded. While preparatory work was completed and a contract signed, the company has now delayed proceedings. It is hoped to resurrect this activity in 2007.

The volunteer-based fundraising activity planned for September did not occur due to time constraints.

The Pakistan Red Crescent has direction and focus when it comes to capacity building in its traditional programme areas of health and disaster management. However it requires further assistance/guidance in organisational

development components such as strategic planning. It is hoped that this can be addressed when it is agreed to move ahead with the recruitment of an Organisational Development delegate.

Expected result: The Red Cross Red Crescent image and awareness of the Movement is improved among vulnerable groups and communities.

Progress/achievements/impact

World First Aid Day was celebrated at national headquarters in early November, involving a speech competition for high school students on 'saving lives without discrimination', dramas outlining first aid responses to common situations and a panel discussion on a national television network involving the PRCS chairman, director of First Aid and another National Society spokesperson. A media release was also issued.

The National Society is developing a 30-second television commercial which it intends to air on various channels in early 2007. The Pakistan Red Crescent ran a half page advertisement in the week preceding the one year anniversary of the earthquake operation profiling its work and achievements. The advertisement was run in five national newspapers (three English-language and two Urdu).

The Pakistan Red Crescent maintains a website (www.prcs.org.pk) for the purpose of information dissemination and web based promotions. The site also has on-line registration forms for donations, volunteers, blood donors and general information about programmes and developments.

The profile of the National Society has received a significant boost through its work in earthquake-affected areas. Staff and volunteers have reported feedback from beneficiaries that prior to the quake awareness of the Pakistan Red Crescent was low. People were vaguely aware of the 'Red Cross' as an organisation, but often had no idea that a National Society existed. Through interaction with communities as a result of ongoing programmes/projects, and various promotional/media opportunities to highlight Pakistan Red Crescent quake-related activities, the National Society has raised its profile. This improved profile will hopefully have positive spin-offs in volunteer and fundraising mobilisation.

Constraints

It had been hoped to make an online donation facility available on the National Society website, but currently no company in Pakistan is providing this service. There is no distinct 'principles and values' focal point in the National Society, with the various aspects of the project dealt with on an ad hoc basis by different staff. To improve coordination, the Federation information officer has been made the Federation focal point. Working under the direction of the Regional Humanitarian Values coordinator based in Delhi, the officer will work with the Pakistan Red Crescent to bring more coherence and structure to this project.

Expected result: PRCS has the capacity to meet communication and advocacy needs.

Progress/achievements/impact

The Federation communications team liaises regularly with the National Society public information officer. A Federation communications officer has been in place since 1 August and is the focal point with the Pakistan Red Crescent. Fluent in Urdu and conversant with media and communications issues specific to Pakistan, the officer is proving to be an asset in progressing the relationship with the National Society.

The Federation and the National Society worked together to contact local media to highlight the work and achievements of the Red Cross Red Crescent Movement for the one year anniversary of the earthquake disaster (see next section for further details).

The Federation purchased and provided a digital camera to the Pakistan Red Crescent to increase its capacity to produce quality and timely images profiling the work of the National Society.

Constraints

The Federation communications team still needs to achieve greater coordination with the National Society. Substantial media commitments for the one year anniversary, whilst producing good coverage for the Pakistan Red Crescent, impacted on the Federation communications team's ability to work with its local counterpart. Post one-

year anniversary, the recently appointed Federation information officer is able to work much more closely with the Pakistan Red Crescent public information officer.

Expected result: Awareness on ongoing earthquake efforts is raised locally and internationally through the media, enhancing funding support.

Progress/achievements/impact

The major focus during the reporting period was on preparation and implementation of promotional activities highlighting the Red Cross Red Crescent Movement response to the earthquake. There was high media interest both nationally and internationally which resulted in some excellent coverage of the Pakistan Red Crescent and the Movement as a whole.

The Federation Pakistan delegation communications team, well supported by the South Asia Regional Delegation and the Geneva Secretariat, launched a comprehensive campaign aimed at getting media into the field and face-to-face with beneficiaries.

The South Asia Regional Delegation information delegate and the Geneva media/public relations officer for Asia-Pacific both made field visits to Pakistan to assist with the media 'push'.

A video 'b-roll' of stock footage from the field showing Red Cross Red Crescent activities, daily life of beneficiaries and the conditions in which they have to cope, was shot in August and included in an overall media pack which was issued in early September to targeted media and partner national societies. The media pack included a 'questions and answers' sheet, high and low resolution jpegs, fact sheet, opinion editorial and media release.

Major international and national media organisations were contacted through August and September with pitches for field trips, with a variety of options provided relating to location, length of time in the field and range of activities. This gleaned an excellent response with a total of eight media organisations taking the opportunity to visit Red Cross Red Crescent activities in the field. These were BBC World (television), SKY News (television), The Telegraph (UK), APTN, Al Jazeera International., ARY One (Pakistan TV network), Radio Pakistan, and Associated Press of Pakistan.

Red Cross Red Crescent media mentions were monitored on 51 media organisations. This included the supplied video footage being utilised by Reuters, CNN, RTE (Irish national television) and TV3 (Irish private tv network).

Pakistan Red Crescent staff and volunteers and Federation personnel were interviewed extensively while numerous beneficiaries were interviewed by media during the various field trips.

The Geneva communications team, utilising stories and images from the field, constructed a dedicated Pakistan quake page which can be seen at <http://www.ifrc.org/what/disasters/response/pakistan/index.asp>.

There was particularly strong media interest from the United Kingdom. This probably reflected the strong historical links between the two countries, and the large numbers of British people of Pakistan origin living in the UK with links to Pakistan.

Overall the media campaign could be deemed a success. Various lessons learned/conclusions include;

- The strategy of pitching a product and outlining different 'tour options' including activities which could be viewed, travelling times, and details of logistical support which could be provided. Balakot emerged as a



There was significant international media interest in the PRCS/Federation activities for the quake one year anniversary. Here the head of the Federation field office gives an interview in Balakot to BBC World.

media favourite as a quake disaster ‘one stop shop’ due to easy proximity of a range of activities. Presenting media, who are already under budget and time pressure, with a package gained a good response.

- The need for a separate strategy for Pakistan media, taking into account certain local peculiarities (e.g. an expectation that all expenses for field trips would be covered; extremely lengthy and time-consuming process of getting any form of commitment from organizations to take up offers of field trips.) The locally-engaged Federation information officer’s skills were essential in this regard.
- The field trip strategy was to guide media towards Red Cross Red Crescent activities but not ‘force them down their throats’. Part of the pitch was that the Federation could facilitate the media to *the beneficiaries* in their natural environment. What was presented to the media reflected reality and the wider picture beyond just Red Cross / Red Crescent activities.
- Excellent support was provided by the British, Australian and Irish National Societies. The British Red Cross was particularly instrumental in assisting facilitation of media contacts. The Weekend Telegraph feature (a six page spread published on 8 October) was mainly thanks to the British Red Cross media team pitch.

In addition to the media push, the Federation with the Pakistan Red Crescent and ICRC organized a photo exhibition ‘Faces of Recovery’ held at a gallery in Islamabad. The exhibition ran for a week leading up to the anniversary. Visits by school groups were arranged and people were guided through the exhibition which profiled a wide range of emergency and recovery activities. The poster-sized photographs are now part of a collection which will be utilized at various other events and is available for use by the Pakistan Red Crescent, Federation and ICRC. Prints from the collection have already been subsequently displayed at the Pakistan Prime Minister’s Secretariat, shown to the Prince of Wales and Duchess of Cornwall during their recent visit, and utilized for the PRCS First Aid Day celebrations.

Key to the high quality of the exhibition and the general supply of images at the disposal of the International Federation and PRCS were a collection of excellent photographs, most notably those taken by Jakob Dall. Dall, a world class photographer, was engaged by the Danish Red Cross and made two extensive field visits to Pakistan. His images were made available to the Federation and proved to be an enormous asset. Along with other good quality images, these photos were utilized extensively in Federation and PRCS publications, and also reproduced in publications by ERRA, the United Nations and ECHO.

In the first week of November, the Prince of Wales and Duchess of Cornwall made a visit to Pakistan. The Federation helped facilitate the inclusion of Red Cross Red Crescent activities into the Prince’s programme. The Prince, who is also the President of the British Red Cross, and the Duchess, visited a range of Red Cross Red Crescent activities in the village of Pattika in Pakistan-administered Kashmir. The Royal couple was accompanied by a UK media contingent of approximately 40 journalists, photographers and television crews. The British Red Cross chief executive officer and a British Red Cross media officer came out to Pakistan for the visit and assisted greatly in liaising with the UK media, including a press briefing on the eve of the visit to Pattika.

Constraints

Despite some notable successes with the ARY One television mini-features profiling the Pakistan Red Crescent and the excellent coverage afforded by Radio Pakistan, connection with Pakistan media was poor. Extensive efforts were made to pitch to local media, but it was often a slow, laborious and convoluted process even to get in touch with the correct person. There is also a high expectation in Pakistan media to have all costs covered. In some instances there is even a presumption of payment for coverage, something unacceptable to the International Federation. A major task ahead for the newly hired information officer (on board only since July) is to improve relations with Pakistan media.

MONITORING AND EVALUATION

The Federation and PRCS are accountable to donors and partners and will continue to provide information relating to progress under the operation. This information is provided in operations updates (now being published every 3 months) which report on expected results. This is the 27th operations update published to date. In addition, some donors/partners are receiving specific pledge based reporting.

An independent review of the operation is hoped to be conducted in early 2007. Draft terms of reference have been drawn up. It had been hoped to conduct the review at the one year mark of the operation from October, but the

revision of the plan of action and associated budget revisions took longer than expected. Findings in the review will be shared with donors/partners.

Ongoing reporting is coordinated by the Federation communications team but the onus on information gathering is on Federation programme managers working with their PRCS counterparts. The health and care team is conducting a formal end-of-year review and the findings will be included in the next operations update. The Danish Red Cross component of the psychosocial support programme was conducting a review in November-December and these findings will also be included in operations update 28.

A two month audit process by Ernst and Young on the financial management of the operation is being conducted and the report should be completed by January 2007.

The Federation communications coordinator, assisted by a reporting officer will conduct basic monitoring and evaluation training aimed at both Federation programme managers and Pakistan Red Crescent staff during 2007 at national headquarters and provincial branch level. It had been hoped to have begun this training in 2006, but ongoing reporting commitments and significant communications commitments precluded this.

As outlined in the plan of action, each programme has various systems/methods in place for monitoring and evaluating progress. Such detailed reports/evaluations can be shared with partners in addition to the regular operations updates on request.

[Infographic maps and revised appeal budget below;](#)
[click here to return to the title page.](#)

How we work

All International Federation assistance seeks to adhere to the [Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations \(NGO's\) in Disaster Relief](#) and is committed to the [Humanitarian Charter and Minimum Standards in Disaster Response \(Sphere\)](#) in delivering assistance to the most vulnerable.

The Federation's Global Agenda

The International Federation's activities are aligned with under a Global Agenda, which sets out four broad goals to meet the Federation's mission to "improve the lives of vulnerable people by mobilizing the power of humanity".

Global Agenda Goals:

- Reduce the numbers of deaths, injuries and impact from disasters.
- Reduce the number of deaths, illnesses and impact from diseases and public health emergencies.
- Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability.
- Reduce intolerance, discrimination and social exclusion and promote respect for diversity and human dignity.

REVISED APPEAL, BUDGET SUMMARY
Pakistan : Earthquake

Appeal No. 05EA022

| TYPE | Annual Budgets | | | | |
|--|-------------------|-------------------|-------------------|-------------------|--------------------|
| | 2005 | 2006 | 2007 | 2008 | TOTAL |
| | CHF | CHF | CHF | CHF | CHF |
| RELIEF NEEDS | | | | | |
| Shelter | 23,466,838 | 21,477,225 | 9,286,960 | 4,343,682 | 58,574,705 |
| Construction Materials | 0 | 814,140 | 81,050 | 133,960 | 1,029,150 |
| Clothing & Textiles | 4,588,906 | 9,497,304 | 729,400 | 626,080 | 15,441,690 |
| Food | 131,637 | 20,190 | 0 | 0 | 151,827 |
| Seeds & Plants | 0 | 404,500 | 591,010 | 688,690 | 1,684,200 |
| Water & Sanitation | 173,516 | 756,133 | 665,905 | 657,130 | 2,252,684 |
| Medical & First Aid | 1,339,658 | 838,969 | 643,116 | 287,242 | 3,108,985 |
| Teaching Materials | 0 | 52,400 | 300 | 300 | 53,000 |
| Utensils & Tools | 1,706,762 | 3,486,506 | 313,585 | 287,254 | 5,794,107 |
| Other Supplies & Services | 6,024,879 | 5,043,806 | 87,136 | 67,306 | 11,223,127 |
| TOTAL RELIEF NEEDS | 37,432,197 | 42,391,173 | 12,398,462 | 7,091,644 | 99,313,477 |
| CAPITAL EQUIPMENT | | | | | |
| Land & Buildings | 0 | 407,635 | 522,388 | 477,944 | 1,407,967 |
| Vehicles Purchase | 118,400 | 1,516,556 | 884,000 | 0 | 2,518,956 |
| Computers & Telecom Equipment | 387,752 | 430,898 | 117,506 | 64,806 | 1,000,962 |
| Office/Household Furnitue & Equipment | 0 | 0 | 7,000 | 0 | 7,000 |
| Medical Equipment | 0 | 0 | 0 | 0 | 0 |
| Other Machinery & Equipment | 0 | 0 | 0 | 0 | 0 |
| TRANSPORT, STORAGE & VEHICLES | | | | | |
| Storage - Warehouse | 7,211,267 | 2,271,794 | 420,492 | 265,821 | 10,169,375 |
| Distribution & Monitoring | 5,008,796 | 3,713,956 | 53,200 | 41,040 | 8,816,992 |
| Transport & Vehicles Costs | 496,150 | 3,663,439 | 1,132,457 | 914,209 | 6,206,256 |
| PERSONNEL | | | | | |
| International staff | 849,355 | 5,812,834 | 2,882,796 | 1,368,000 | 10,912,986 |
| Regionally Deployed Staff | 25,636 | 336,408 | 138,007 | 250,672 | 750,724 |
| National Staff | 5,939 | 922,647 | 860,810 | 611,490 | 2,400,887 |
| National Society Staff | 128,749 | 980,703 | 1,407,043 | 1,325,973 | 3,842,468 |
| Consultants | 102,878 | 114,122 | 124,400 | 126,364 | 467,764 |
| WORKSHOPS & TRAINING | | | | | |
| Workshops & Training | 5,943 | 379,562 | 626,986 | 663,935 | 1,676,427 |
| GENERAL EXPENSES | | | | | |
| Travel | 202,589 | 387,960 | 200,540 | 160,120 | 951,210 |
| Information & Public Relations | 29,793 | 211,169 | 296,158 | 248,409 | 785,529 |
| Office running Costs | 110,604 | 766,093 | 635,524 | 562,312 | 2,074,533 |
| Communication Costs | 112,573 | 249,693 | 143,420 | 106,580 | 612,266 |
| Professional Fees | 17,488 | 60,588 | 43,938 | 37,550 | 159,564 |
| Financial Charges | 0 | 4,000 | 0 | 0 | 4,000 |
| Other General Expenses | 93,013 | 113,494 | 105,870 | 98,957 | 411,334 |
| PROGRAMME SUPPORT | | | | | |
| Programme support (6.5% of total) | 3,638,549 | 4,500,275 | 1,599,000 | 1,002,170 | 10,739,994 |
| TOTAL OPERATIONAL NEEDS | 18,545,476 | 26,843,827 | 12,201,537 | 8,326,355 | 65,917,195 |
| TOTAL APPEAL CASH, KIND, SERVICES | 55,977,673 | 69,235,000 | 24,600,000 | 15,418,000 | 165,230,672 |
| LESS AVAILABLE RESOURCES (-) | | | | | 143,320,181 |
| NETT REQUEST | | | | | 21,910,491 |

International Federation of Red Cross and Red Crescent Societies

M05EA022 - SOUTH ASIA: EARTHQUAKE

INTERIM FINANCIAL REPORT

| Selected Parameters | |
|---------------------|----------------|
| Reporting Timeframe | 2005/1-2008/12 |
| Budget Timeframe | 2005/1-2008/12 |
| Appeal | M05EA022 |
| Budget | APPEAL |

All figures are in Swiss Francs (CHF)

I. Consolidated Response to Appeal

| | Health & Care | Disaster Management | Humanitarian Values | Organisational Development | Coordination & Implementation | TOTAL |
|--------------------|---------------|---------------------|---------------------|----------------------------|-------------------------------|-------------|
| A. Budget | 15'783'000 | 136'893'673 | | 3'937'000 | 8'617'000 | 165'230'673 |
| B. Opening Balance | 0 | 0 | | 0 | 0 | 0 |

Income

Cash contributions

| | | | | | | |
|--------------------------------|-----------|------------|--|---------|--------|------------|
| Altria | | 65'600 | | | | 65'600 |
| American Red Cross | | 7'068'381 | | | | 7'068'381 |
| Andorra Red Cross | | | | | 30'246 | 30'246 |
| Australian Red Cross | 1'183'485 | 4'165'460 | | | | 5'348'945 |
| Austrian Red Cross | 23'865 | 231'272 | | | | 255'137 |
| Autonomous Prov. of Bozen | | 0 | | | | 0 |
| Barbados Red Cross Society | | 1'973 | | | | 1'973 |
| Belgian Red Cross (French) | | 28'819 | | | | 28'819 |
| Belgium Red Cross (Flanders) | | 151'672 | | | | 151'672 |
| BP Foundation | | 99'353 | | | | 99'353 |
| British Red Cross | 91'671 | 11'942'693 | | | 5'525 | 12'039'889 |
| Cambodian Red Cross Society | | 19'668 | | | | 19'668 |
| Cambodia - Private Donors | | 0 | | | | 0 |
| Canadian Red Cross Society | | 7'262'727 | | | 1'440 | 7'264'167 |
| China Red Cross Society | | 1'230'000 | | | | 1'230'000 |
| Croatian Red Cross | | 30'756 | | | | 30'756 |
| Cypriot Turkish RC RC | | 31'987 | | | | 31'987 |
| Cyprus Red Cross | | 20'867 | | | | 20'867 |
| Czech Red Cross | | 12'940 | | | | 12'940 |
| Danish Red Cross | 3'022 | 1'147'749 | | | 3'499 | 1'154'270 |
| Denmark - Private Donors | | 4'783 | | | | 4'783 |
| ECHO | | 0 | | | | 0 |
| Ecuadorian Red Cross | | 7'481 | | | | 7'481 |
| EMC Corp. | | 47'232 | | | 0 | 47'232 |
| Enterprise Foundation | | 328'000 | | | | 328'000 |
| Estonia Red Cross | | 3'847 | | | | 3'847 |
| European Commission | | 1'265'341 | | | | 1'265'341 |
| Finland - Private Donors | | 1'084 | | | | 1'084 |
| Finnish Red Cross | | 153'848 | | | | 153'848 |
| France - Private Donors | | 1'952 | | | | 1'952 |
| French Red Cross | | 640'679 | | | | 640'679 |
| German Red Cross | 305 | 1'815'773 | | | | 1'816'078 |
| Germany - Private Donors | | 1'890 | | | | 1'890 |
| Ghana Private Donor | | | | | 17'929 | 17'929 |
| Great Britain - Private Donors | | 17'000 | | | | 17'000 |
| Harris Foundation | | 131'200 | | | | 131'200 |
| Hellenic Red Cross | | 54'180 | | | | 54'180 |
| Hewlett Packard | | | | | 0 | 0 |
| Hong Kong Red Cross | | 1'085'624 | | | | 1'085'624 |
| Icelandic Red Cross | 2'593 | 439'950 | | | | 442'543 |
| Indonesia - Private Donors | | 129 | | | | 129 |
| Intel Foundation | | 656'000 | | | 0 | 656'000 |
| Ireland - Private Donors | | 1'035 | | | | 1'035 |
| Irish Government | | 2'018'575 | | | | 2'018'575 |
| Irish Red Cross Society | 392'500 | 2'078'264 | | | | 2'470'764 |
| Italian Government | | 311'400 | | | | 311'400 |
| Italian Red Cross | | 231'825 | | | | 231'825 |
| Italy - Private Donors | | 78'250 | | | | 78'250 |
| Japanese Government | | 3'698'800 | | | | 3'698'800 |
| Japanese Red Cross Society | 2'120'000 | 9'287'510 | | 678'400 | | 12'085'910 |
| Korea Republic National Red C | | 64'700 | | | | 64'700 |
| Latvian Red Cross | | 129'400 | | | | 129'400 |

International Federation of Red Cross and Red Crescent Societies

M05EA022 - SOUTH ASIA: EARTHQUAKE

INTERIM FINANCIAL REPORT

| Selected Parameters | |
|---------------------|----------------|
| Reporting Timeframe | 2005/1-2008/12 |
| Budget Timeframe | 2005/1-2008/12 |
| Appeal | M05EA022 |
| Budget | APPEAL |

All figures are in Swiss Francs (CHF)

| | | | | | |
|---|------------------|-------------------|----------------|------------------|-------------------|
| Latvia - Private Donors | | 23 | | | 23 |
| Lehman Brothers Foundation | | 216'846 | | | 216'846 |
| Libyan Red Crescent | | 10'000 | | | 10'000 |
| Lichtenstein - Private Donors | | 300'000 | | | 300'000 |
| Lithuanian Red Cross Society | | 3'567 | | | 3'567 |
| Luxembourg Government | | 309'100 | | | 309'100 |
| Luxembourg - Private Donors | | 193 | | | 193 |
| Luxembourg Red Cross | | 74'666 | | | 74'666 |
| Macao Red Cross | | 40'000 | | | 40'000 |
| Macedonia (Former Yugoslavia) | | 4'637 | | | 4'637 |
| Monaco Red Cross | | 46'710 | | 18'145 | 64'855 |
| Nepal Red Cross Society | | 16'208 | | | 16'208 |
| Netherlands - Private Donors | | 546 | | | 546 |
| Netherlands Red Cross | 4'878 | 3'898'905 | | 1'697 | 3'905'480 |
| New York Office | | 48'785 | | 595'222 | 644'007 |
| New Zealand Red Cross | 1'430 | 666'791 | | 618 | 668'839 |
| Norwegian Red Cross | 3'946 | 4'456'742 | 200'655 | 596'446 | 5'257'789 |
| On Line donations | | 872'030 | | | 872'030 |
| Other | | 5'253 | | | 5'253 |
| Poland - Private Donors | | 3'235 | | | 3'235 |
| Qatar Red Crescent Society | | 150'186 | | | 150'186 |
| Saudi Arabia - Private Donors | | 13'245 | | 4'157 | 17'402 |
| Schering Plough | | | | 0 | 0 |
| Sigma Paints | | 0 | | | 0 |
| Singapore - Private Donors | | 77'850 | | | 77'850 |
| Singapore Red Cross Society | | 200'000 | | | 200'000 |
| Slovenia Government | | 66'077 | | | 66'077 |
| Slovenian Red Cross | | 14'885 | | | 14'885 |
| South Africa - Private Donors | | 1'294 | | | 1'294 |
| Spain - Private Donors | | 3'946 | | | 3'946 |
| Spanish Red Cross | | 9'825 | | | 9'825 |
| Swedish Red Cross | 1'668 | 10'229'093 | | 1'652 | 10'232'413 |
| Swiss Red Cross | 2'015 | 233'333 | | | 235'348 |
| Switzerland - Private Donors | | 82'670 | | | 82'670 |
| Taiwan Chinese RCO | | 671'402 | | | 671'402 |
| Trinidad & Tobago Red Cross | | 0 | | | 0 |
| United Arab Emirates Red Cross | | 13'100 | | | 13'100 |
| United States - Private Donors | | 757'476 | | 0 | 757'476 |
| VERF/WHO Voluntary Emerg | | 1'605 | | | 1'605 |
| C1. Cash contributions | 3'831'379 | 81'567'896 | 879'055 | 1'276'574 | 87'554'905 |
| Outstanding pledges (Revalued) | | | | | |
| Australian Red Cross | 380'000 | | | | 380'000 |
| British Red Cross | | 471'000 | | | 471'000 |
| Canadian Red Cross Society | | 1'590'000 | | | 1'590'000 |
| German Red Cross | | 472'526 | | | 472'526 |
| Great Britain - Private Donors | | 953 | | | 953 |
| Hong Kong Red Cross | | 393'733 | | | 393'733 |
| Norwegian Red Cross | | 452'676 | 102'708 | 205'416 | 760'800 |
| OPEC Fund For International C | | 724'200 | | | 724'200 |
| Philippine National Red Cross | | 12'070 | | | 12'070 |
| C2. Outstanding pledges (Revalued) | 380'000 | 4'117'159 | 102'708 | 205'416 | 4'805'283 |
| Reallocations (within appeal or from/to another appeal) | | | | | |
| Altria | | 0 | | | 0 |
| American Government | 29'594 | | | | 29'594 |
| American Red Cross | 481'102 | -600'000 | 150'000 | | 31'102 |
| Australian Government | | | 22'855 | | 22'855 |
| Austrian Red Cross | | -13'000 | 13'000 | | 0 |
| Barbados Red Cross Society | | -1'973 | | 1'973 | 0 |
| BP Foundation | | -99'353 | 99'353 | | 0 |
| British Red Cross | 80'235 | -406'950 | | 452'561 | 125'847 |
| Canadian Red Cross Society | | 0 | | | 0 |

International Federation of Red Cross and Red Crescent Societies

M05EA022 - SOUTH ASIA: EARTHQUAKE

INTERIM FINANCIAL REPORT

| Selected Parameters | |
|---------------------|----------------|
| Reporting Timeframe | 2005/1-2008/12 |
| Budget Timeframe | 2005/1-2008/12 |
| Appeal | M05EA022 |
| Budget | APPEAL |

All figures are in Swiss Francs (CHF)

| | | | | | |
|-------------------------------------|-----------|-------------|-----------|-----------|------------|
| Capacity Building Fund | | | 34'376 | | 34'376 |
| Croatian Red Cross | | -30'756 | | 30'756 | 0 |
| Cypriot Turkish RC RC | | 0 | | | 0 |
| Czech Red Cross | | -12'940 | | 12'940 | 0 |
| Danish Red Cross | 122'000 | -614'769 | | 492'769 | 0 |
| Denmark - Private Donors | | -4'783 | | 4'783 | 0 |
| Ecuadorian Red Cross | | -7'481 | | 7'481 | 0 |
| EMC Corp. | | -47'232 | | 47'232 | 0 |
| Enterprise Foundation | | -250'000 | | 250'000 | 0 |
| Estonia Red Cross | | -3'847 | | 3'847 | 0 |
| Finnish Red Cross | | 18'892 | | | 18'892 |
| French Red Cross | | -200'000 | | 200'000 | 0 |
| German Red Cross | 309'596 | 154'797 | 154'797 | | 619'190 |
| Great Britain - Private Donors | | -17'000 | | 17'000 | 0 |
| Harris Foundation | | 0 | | | 0 |
| Hong Kong Red Cross | 672'269 | -672'269 | | | 0 |
| Icelandic Red Cross | 342'354 | -342'354 | | | 0 |
| Indonesia - Private Donors | | -129 | | 129 | 0 |
| Intel Foundation | | 0 | | | 0 |
| Ireland - Private Donors | | -1'035 | | 1'035 | 0 |
| Irish Government | | -619'000 | | 619'000 | 0 |
| Irish Red Cross Society | | 0 | | | 0 |
| Italy - Private Donors | | 0 | | | 0 |
| Japanese Red Cross Society | | -1'443'734 | | 1'500'000 | 56'266 |
| Lehman Brothers Foundation | | 0 | | | 0 |
| Lichtenstein - Private Donors | | -300'000 | 300'000 | | 0 |
| Lithuanian Red Cross Society | | -3'567 | | 3'567 | 0 |
| Luxembourg - Private Donors | | -193 | | 193 | 0 |
| Macedonia (Former Yugoslavia) | | -4'637 | | 4'637 | 0 |
| Netherlands - Private Donors | | -46 | | 46 | 0 |
| Netherlands Red Cross | 511'572 | -812'350 | 300'000 | 779 | 0 |
| New York Office | | -48'785 | | 48'785 | 0 |
| New Zealand Red Cross | | -353'400 | 353'400 | | 0 |
| Norwegian Red Cross | 1'975'000 | -1'975'000 | | | 0 |
| On Line donations | 383'471 | -383'471 | | | 0 |
| Saudi Arabia - Private Donors | | -13'245 | | 13'245 | 0 |
| Slovenia Government | | -66'077 | | 66'077 | 0 |
| Spain - Private Donors | | -3'946 | | 3'946 | 0 |
| Spanish Red Cross | | -2'080 | | 2'080 | 0 |
| Swedish Red Cross | 2'447'080 | -3'525'000 | | 1'200'000 | 122'080 |
| Swiss Red Cross | | -100'000 | | 100'000 | 0 |
| Switzerland - Private Donors | | -63'820 | | 63'820 | 0 |
| Taiwan Chinese RCO | | 0 | | | 0 |
| United Arab Emirates Red Cross | | -13'100 | | 13'100 | 0 |
| United States - Private Donors | | -48'383 | | 48'383 | 0 |
| VERF/WHO Voluntary Emerge | | -1'605 | | 1'605 | 0 |
| C3. Reallocations (within appeal) | 7'354'273 | -12'933'622 | 1'427'780 | 5'211'771 | 1'060'201 |
| Inkind Goods & Transport | | | | | |
| Other | | 48'434'736 | | | 48'434'736 |
| C4. Inkind Goods & Transport | | 48'434'736 | | | 48'434'736 |
| Inkind Personnel | | | | | |
| American Red Cross | | 8'680 | | | 8'680 |
| Australian Red Cross | 78'174 | 76'800 | | | 154'974 |
| Austrian Red Cross | | 13'200 | | | 13'200 |
| British Red Cross | 66'133 | 50'040 | | 93'500 | 209'673 |
| Canadian Red Cross Society | | 293 | | 22'147 | 22'440 |
| Danish Red Cross | 53'240 | 22'913 | | 53'550 | 129'703 |
| Finnish Red Cross | | 41'066 | | | 41'066 |
| German Red Cross | 4'693 | 1'467 | | | 6'160 |
| Icelandic Red Cross | 39'599 | 21'120 | | | 60'719 |
| Netherlands Red Cross | 81'547 | 2'480 | | 25'960 | 109'987 |

International Federation of Red Cross and Red Crescent Societies

M05EA022 - SOUTH ASIA: EARTHQUAKE

INTERIM FINANCIAL REPORT

| Selected Parameters | |
|---------------------|----------------|
| Reporting Timeframe | 2005/1-2008/12 |
| Budget Timeframe | 2005/1-2008/12 |
| Appeal | M05EA022 |
| Budget | APPEAL |

All figures are in Swiss Francs (CHF)

| | | | | | |
|-------------------------------|------------|-------------|--------|-----------|-----------|
| New Zealand Red Cross | 30'654 | 11'366 | | 31'000 | 73'020 |
| Norwegian Red Cross | 59'627 | 272'619 | 46'640 | 46'493 | 425'379 |
| Other | 6'200 | 8'506 | | | 14'706 |
| Swedish Red Cross | 25'373 | 23'200 | | 25'420 | 73'993 |
| Swiss Red Cross | 24'800 | 61'327 | | | 86'127 |
| C5. Inkind Personnel | 470'040 | 615'077 | 46'640 | 298'070 | 1'429'827 |
| Other Income | | | | | |
| Miscellaneous Income | | -13'000 | | | -13'000 |
| Service Agreements | | | | 48'229 | 48'229 |
| C6. Other Income | | -13'000 | | 48'229 | 35'229 |
| C. Total Income = SUM(C1..C6) | 12'035'692 | 121'788'246 | | 2'456'183 | 7'040'061 |
| D. Total Funding = B +C | 12'035'692 | 121'788'246 | | 2'456'183 | 7'040'061 |

II. Balance of Funds

| | Health & Care | Disaster Management | Humanitarian Values | Organisational Development | Coordination & Implementation | TOTAL |
|----------------------------------|---------------|---------------------|---------------------|----------------------------|-------------------------------|-------------|
| B. Opening Balance | 0 | 0 | | 0 | 0 | 0 |
| C. Income | 12'035'692 | 121'788'246 | | 2'456'183 | 7'040'061 | 143'320'181 |
| E. Expenditure | -2'837'799 | -92'989'566 | | -344'636 | -3'315'299 | -99'487'299 |
| F. Closing Balance = (B + C + E) | 9'197'893 | 28'798'680 | | 2'111'547 | 3'724'762 | 43'832'882 |

International Federation of Red Cross and Red Crescent Societies

M05EA022 - SOUTH ASIA: EARTHQUAKE

INTERIM FINANCIAL REPORT

| Selected Parameters | |
|---------------------|-----------------|
| Reporting Timeframe | 2005/10-2006/10 |
| Budget Timeframe | 2005/1-2008/12 |
| Appeal | M05EA022 |
| Budget | APPEAL |

All figures are in Swiss Francs (CHF)

III. Budget Analysis / Breakdown of Expenditure

| Account Groups | Budget | Expenditure | | | | | TOTAL | Variance |
|---|-------------------|------------------|---------------------|---------------------|----------------------------|-------------------------------|-------------------|-------------------|
| | | Health & Care | Disaster Management | Humanitarian Values | Organisational Development | Coordination & Implementation | | |
| A | | B | | | | | A - B | |
| BUDGET (C) | | 15'783'000 | 136'893'673 | | 3'937'000 | 8'617'000 | 165'230'673 | |
| Supplies | | | | | | | | |
| Shelter - Relief | 58'574'705 | | 35'506'683 | | | | 35'506'683 | 23'068'022 |
| Construction Materials | 1'029'150 | 2'075 | 2'067'333 | | | | 2'069'408 | -1'040'258 |
| Clothing & textiles | 15'441'690 | 67 | 10'435'571 | | | 190 | 10'435'829 | 5'005'861 |
| Food | 151'827 | 15'371 | 136'532 | | | 147 | 152'051 | -224 |
| Seeds,Plants | 1'684'201 | 1 | 148'325 | | | 8 | 148'334 | 1'535'867 |
| Water & Sanitation | 2'252'684 | 225'314 | 208'217 | | | | 433'531 | 1'819'153 |
| Medical & First Aid | 3'108'987 | 101'932 | 1'482'412 | | | 137 | 1'584'480 | 1'524'507 |
| Teaching Materials | 53'000 | 307 | 49'949 | | | | 50'256 | 2'744 |
| Utensils & Tools | 5'794'106 | 40'289 | 2'826'407 | | | 34 | 2'866'730 | 2'927'376 |
| Other Supplies & Services | 11'223'127 | 12'708 | 10'611'118 | | | 624 | 10'624'449 | 598'678 |
| Total Supplies | 99'313'477 | 398'064 | 63'472'546 | | | 1'141 | 63'871'750 | 35'441'727 |
| Land, vehicles & equipment | | | | | | | | |
| Land & Buildings | 1'412'505 | | 4'538 | | | | 4'538 | 1'407'967 |
| Vehicles | 2'518'956 | | 813'243 | | | | 813'243 | 1'705'713 |
| Computers & Telecom | 726'751 | 9'888 | 358'021 | | 14'638 | 23'998 | 406'546 | 320'205 |
| Office/Household Furniture & Ec | 269'105 | 3'359 | 82'459 | | 1'822 | 15'894 | 103'535 | 165'570 |
| Medical Equipment | 7'000 | | | | | | | 7'000 |
| Others Machinery & Equipment | 568 | | 22'086 | | | | 22'086 | -21'517 |
| Total Land, vehicles & equipme | 4'934'885 | 13'247 | 1'280'347 | | 16'461 | 39'892 | 1'349'947 | 3'584'938 |
| Transport & Storage | | | | | | | | |
| Storage | 3'192'881 | 71'489 | 1'364'444 | | | 2'021 | 1'437'954 | 1'754'927 |
| Distribution & Monitoring | 15'793'486 | 446 | 15'619'162 | | | 6'624 | 15'626'232 | 167'254 |
| Transport & Vehicle Costs | 6'206'255 | 207'933 | 2'524'455 | | 3'149 | 78'753 | 2'814'290 | 3'391'965 |
| Total Transport & Storage | 25'192'622 | 279'868 | 19'508'061 | | 3'149 | 87'399 | 19'878'477 | 5'314'146 |
| Personnel Expenditures | | | | | | | | |
| Delegates Payroll | 10'741'986 | 295'666 | 432'905 | | 67'296 | 1'221'162 | 2'017'028 | 8'724'958 |
| Delegate Benefits | 171'000 | 791'468 | 1'482'180 | | 127'758 | 766'911 | 3'168'317 | -2'997'317 |
| Regionally Deployed Staff | 764'624 | 13'032 | 82'415 | | | 6'524 | 101'971 | 662'654 |
| National Staff | 2'501'913 | 228'293 | 360'352 | | 20'215 | 202'752 | 811'611 | 1'690'302 |
| National Society Staff | 3'727'544 | 260'841 | 267'305 | | 17'206 | 10'653 | 556'005 | 3'171'539 |
| Consultants | 467'764 | 377 | 81'162 | | | 63'126 | 144'665 | 323'100 |
| Total Personnel Expenditures | 18'374'831 | 1'589'677 | 2'706'319 | | 232'474 | 2'271'127 | 6'799'596 | 11'575'235 |
| Workshops & Training | | | | | | | | |
| Workshops & Training | 1'676'427 | 42'405 | 43'214 | | 4'464 | 21'142 | 111'225 | 1'565'202 |
| Total Workshops & Training | 1'676'427 | 42'405 | 43'214 | | 4'464 | 21'142 | 111'225 | 1'565'202 |
| General Expenditure | | | | | | | | |
| Travel | 951'207 | 59'081 | 284'659 | | 10'011 | 178'704 | 532'454 | 418'752 |
| Information & Public Relation | 785'530 | 5'961 | 27'588 | | 7'761 | 58'449 | 99'759 | 685'770 |
| Office Costs | 2'076'135 | 50'230 | 275'988 | | 17'794 | 211'938 | 555'950 | 1'520'185 |
| Communications | 615'664 | 15'973 | 164'081 | | 4'591 | 118'259 | 302'904 | 312'760 |
| Professional Fees | 152'765 | 216 | 29'280 | | 1'636 | 28'552 | 59'683 | 93'082 |
| Financial Charges | 86'521 | 5'037 | -1'708 | | | 48'503 | 51'832 | 34'689 |
| Other General Expenses | 326'615 | 3'085 | 57'897 | | 318 | 22'099 | 83'400 | 243'216 |
| Total General Expenditure | 4'994'437 | 139'583 | 837'785 | | 42'110 | 666'504 | 1'685'982 | 3'308'455 |
| Depreciation | | | | | | | | |
| Depreciation | 4'000 | | 3'772 | | | | 3'772 | 228 |
| Total Depreciation | 4'000 | | 3'772 | | | | 3'772 | 228 |
| Program Support | | | | | | | | |
| Program Support | 10'739'994 | 182'542 | 5'082'726 | | 22'223 | 214'316 | 5'501'806 | 5'238'187 |
| Total Program Support | 10'739'994 | 182'542 | 5'082'726 | | 22'223 | 214'316 | 5'501'806 | 5'238'187 |

International Federation of Red Cross and Red Crescent Societies

M05EA022 - SOUTH ASIA: EARTHQUAKE

INTERIM FINANCIAL REPORT

| Selected Parameters | |
|---------------------|-----------------|
| Reporting Timeframe | 2005/10-2006/10 |
| Budget Timeframe | 2005/1-2008/12 |
| Appeal | M05EA022 |
| Budget | APPEAL |

All figures are in Swiss Francs (CHF)

III. Budget Analysis / Breakdown of Expenditure

| Account Groups | Budget | Expenditure | | | | | TOTAL | Variance |
|------------------------------|-------------|---------------|---------------------|---------------------|----------------------------|-------------------------------|-------------|------------|
| | | Health & Care | Disaster Management | Humanitarian Values | Organisational Development | Coordination & Implementation | | |
| A | | | | | | | B | A - B |
| BUDGET (C) | | 15'783'000 | 136'893'673 | | 3'937'000 | 8'617'000 | 165'230'673 | |
| Operational Provisions | | | | | | | | |
| Operational Provisions | | 192'412 | 54'797 | | 23'755 | 13'778 | 284'743 | -284'743 |
| Total Operational Provisions | | 192'412 | 54'797 | | 23'755 | 13'778 | 284'743 | -284'743 |
| TOTAL EXPENDITURE (D) | 165'230'673 | 2'837'799 | 92'989'566 | | 344'636 | 3'315'299 | 99'487'299 | 65'743'374 |
| VARIANCE (C - D) | | 12'945'201 | 43'904'107 | | 3'592'364 | 5'301'701 | 65'743'374 | |

Annex 1 Glossary

Kanal: The Kanal is a traditional unit of land measurement in Pakistan. It is the equivalent of 605 square yards (1/8 acre) or approximately 506 square meters.

Lady Health Worker: Lady Health Workers are a crucial frontline resource in health care in Pakistan. Employed by the Ministry of Health, they receive 15 months training and are responsible for up to 1000 households each. They are often the first contact between the community and the formal health services in Pakistan. There are around 100,000 lady health workers nationwide. They work in the community providing services such as home visits, health education, maternal and child health services and are a crucial partner in the Red Cross/Red Crescent health.

Tehsil: A tehsil is a term for an administrative area in Pakistan. It generally consists of a city or town which is regarded as the headquarters, often further towns, and villages. As a government entity it has various fiscal and administrative powers over the villages and towns/cities in its jurisdiction. The units of government administration in Pakistan from the largest to the smallest are;
Province → Division → Tehsil → Union Council

Traditional birth attendant: Effectively a midwife, but the important difference is these women have generally had no formal training. They usually lack basic supplies and instruments but are often the only person on hand in rural areas with expertise of delivering children. Providing traditional birth attendants with basic skills and equipment is an important aspect of the health capacity building activities of the Pakistan Red Crescent and the International Federation.

Union Council: This is the smallest government administrative unit in Pakistan. Several Union Councils make up a Tehsil.

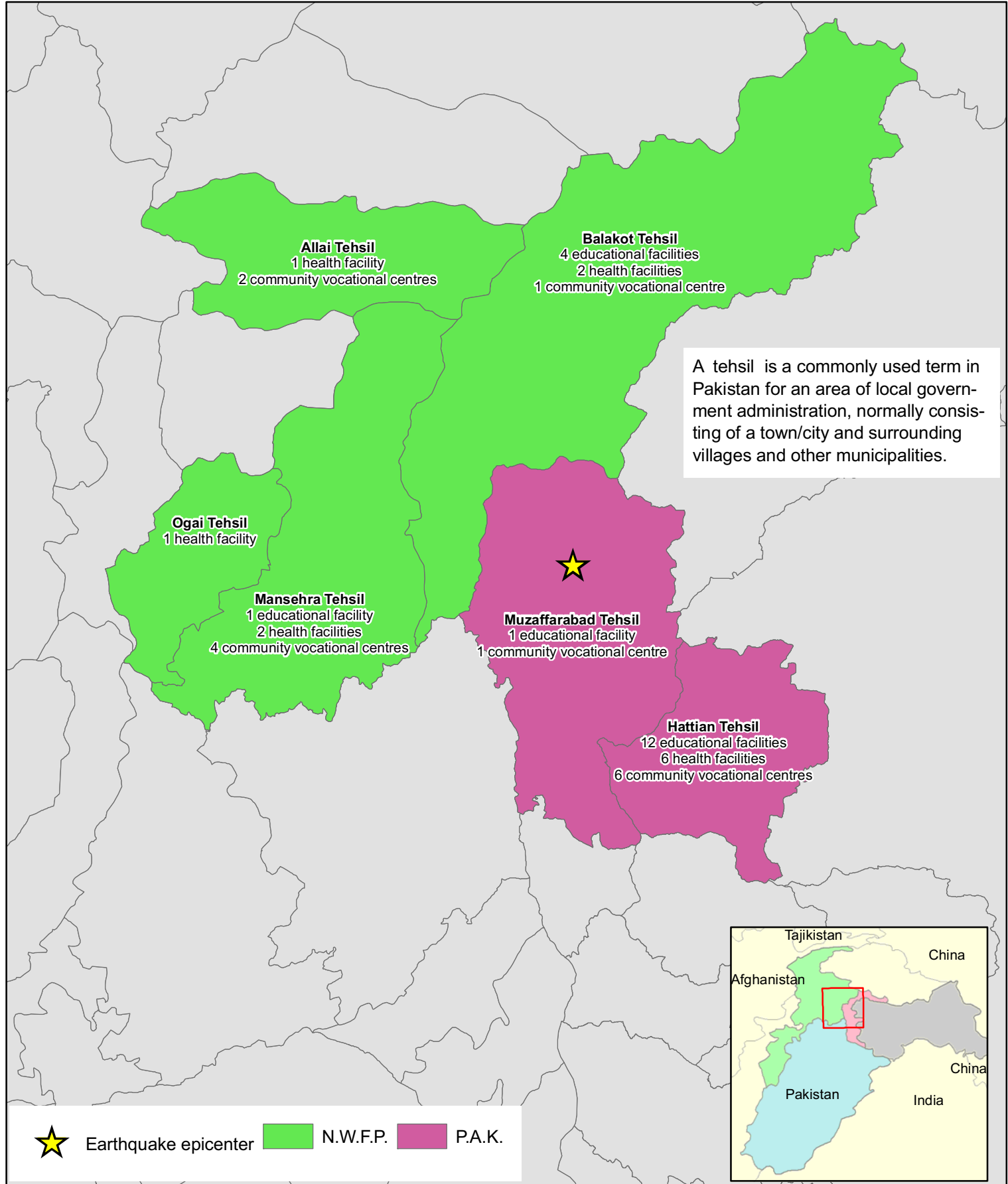
Annex 2 Abbreviations/acronyms

BHU – basic health unit
DCO – District Coordination Officer
DHQ – district headquarters
ERU – emergency response unit
ERRA – Earthquake Reconstruction and Rehabilitation Authority
HP – hygiene promotion
LHW – lady health workers
NDRT – national disaster response team
NHQ – national headquarters
NOC – No Object Certificate
NWFP – North West Frontier Province
PDRT – provincial disaster response team
PERA – Provincial Earthquake Reconstruction Authority
PHC – primary health care
PHQ – provincial headquarters
PNS – partner national society
PRCS – Pakistan Red Crescent Society
PSP – psychosocial support programme
RDRT – regional disaster response team
TBA – traditional birth attendant
ToT – training of trainers
WatSan – water and sanitation



Pakistan: Earthquake

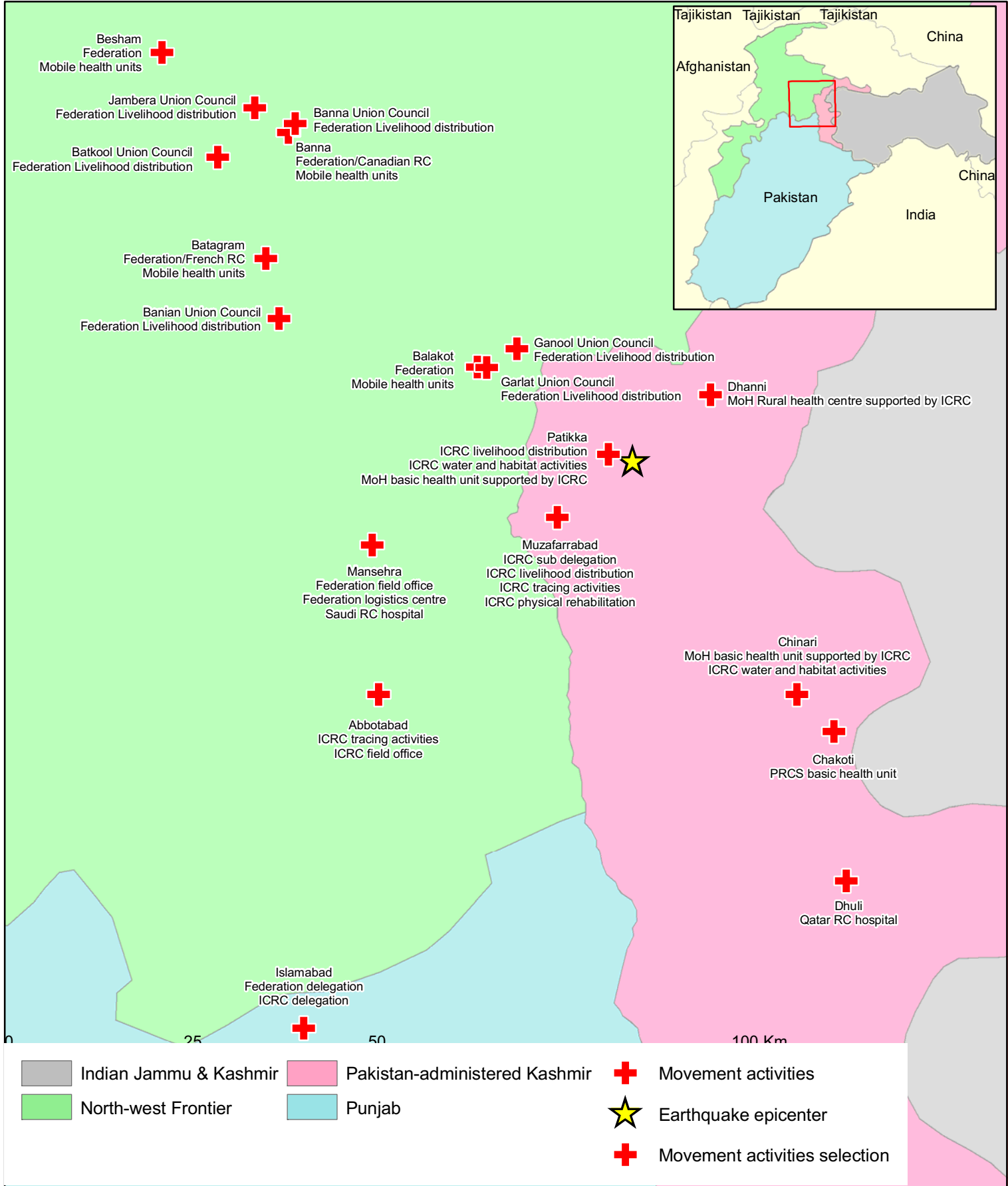
Operations update 27
November 2006





Pakistan: Earthquake

Operations update 27
 November 2006



The maps used do not imply the expression of any opinion on the part of the International Federation of Red Cross and Red Crescent Societies or National Societies concerning the legal status of a territory or of its authorities.