

PROGRAMME UPDATE



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

AFGHANISTAN

28 June, 2001

This Programme Update is intended for reporting on Annual Appeals.

Appeal No. 01.34/2001

Appeal Target CHF 7,819,724

Programme Update No. 1; Period covered: 1 January - 31 March 2001

“At a Glance”

Appeal coverage: 34.3%

Related Appeals: None

Outstanding needs: CHF 5,135,009

Update: The International Federation is coordinating support closely with the International Committee of the Red Cross (ICRC) to assist the disaster relief, disaster preparedness and health care activities of the Afghan Red Crescent Society. Continuous natural disasters and ongoing internal strife have increased the vulnerability of Afghanistan's population and caused further internal displacement. Urgent international assistance is required to enable the nation-wide network of Red Crescent branches to continue meeting the most urgent health and shelter needs.

Operational Developments:

Drought and conflict continued to worsen the plight of the Afghan people, forcing increasingly higher numbers of Afghans to flee their homes seeking shelter, protection, and assistance in camps around Herat and along river banks in southern Afghanistan and in neighbouring countries. A sudden cold snap with unusually low temperatures reaching 25 centigrade below zero reportedly caused the death of 150 already very vulnerable displaced people in camps in Herat. Conditions were expected to worsen over the coming months.

An earthquake that struck Badakhshan on 25 February measuring 6.1 on the Richter scale reminded many of the devastating consequences of this natural phenomenon when two quakes claimed over 7,000 lives in 1998. The Afghan Red Crescent Society (ARCS) and International Federation offices across the country, including in Badakhshan, were contacted immediately. Fortunately, no casualties or significant damages were reported. Another minor quake was felt on 26 February in Kabul.

Disaster Response

In Afghanistan the Federation and the International Committee of the Red Cross (ICRC) closely coordinated their efforts to support the ARCS in its efforts to respond to the drought emergency. The ICRC, as the International Red Cross and Red Crescent Movement's lead agency in Afghanistan, has

assumed the responsibility for covering the logistical and financial requirements of the Federation-supported activities.

Objective 1: to further monitor the impact of the drought

Assessment in Ghor province

On 19 March, two joint ICRC and Federation teams started an assessment in Ghor province, one of the worst drought-affected areas in Afghanistan. The teams are comprised of nutrition, health and agricultural specialists from both organizations.

Assessment in Nawzad district in Helmand

A joint ARCS, Federation, and ICRC assessment was carried out in Nawzad district in Helmand. The purpose was to verify the living conditions of internally displaced persons who fled their places of origin due to either economic reasons or insecurity. . Although their living conditions are rather poor at the moment, mainly because of the reduction of labour opportunities, most of them still cope well and the overall situation was found to be stable Therefore no need for assistance was identified .

Nutritional surveillance

The food security and nutritional status of people are areas of major concern. Since January the five ARCS mobile health teams have been screening the children they meet. All children under five years are included in the target group, but as in most cases the teams screen only the children that are presented to them because of sickness, the results can not immediately be used as valid and reliable information. Secondly, although the team members were trained, they had difficulties to produce accurate data from the mid-upper arm circumference (MUAC) measurement method.

The Kandahar mobile health team that vaccinates all children under five was in a position to provide covering data from that age group, . Their findings confirmed that about half of the sick children are moderately malnourished. Regarding all age groups, the data compiled by the teams support other sources findings, particularly Medecins Sans Frontiers - Holland, indicating that between 74-80 per cent of the children are in normal nutritional status, around 20 per cent are at risk or moderately malnourished, and between two to four per cent are severely malnourished.

The general understanding is that malnutrition seems not to be directly related to the drought problems, but more to improper feeding practices and illness. However, constant surveillance is maintained as the situation might change.

Village information

The purpose of data collection was to obtain reliable first hand information, regarding the situation and living conditions in the villages surveyed, especially in relation to health and water needs. The information was collected by ARCS mobile health team members in addition to their other daily activities in the field of health care.

The following compiled results give a general picture of the situation mainly in the southern region, and Farah province in the western region. Up to the present moment a total of 106 villages were surveyed.

Health-related problems include: lack of health care (66 per cent of villages); lack of potable water (25.5 per cent); lack of food (20 per cent); and different diseases. Access to health care is extremely difficult; only 8.5 per cent of villages are within less than two hours walking distance from any clinic, including private sector services (e.g. drug shops). Traditional birth attendants were found only in two per cent of places. The national immunisation days (NIDs) against polio (last round in year 2000) covered 95 per cent of villages.

Food security is a concern in about 90 per cent of villages. Loss of livestock was reported from 80 per cent of areas. The area of cultivated land was clearly less than the previous year.

Recruitment and training of community-based first aid volunteers

Between 1 January and 31 March, ARCS recruited 200 volunteers from villages in Ghor, Nimrooz, Helmand, Uruzgan and Zabul provinces. All volunteers received training in health education, water and sanitation, first aid, disaster preparedness and the ARCS and RC/RC Movement. By the end of March, the total number of volunteers trained under the emergency programme reached 755.

It is estimated that, these volunteers have handled some 943 first aid cases in their villages so far, helped to raise health awareness in the assisted communities and taught people how to make oral rehydration salts (ORS) for treatment of diarrhoea cases. Based on preliminary reports received at the end of March, on the occasion of the first round of the NIDs, 116 volunteers vaccinated a total of 33,351 children under five against polio in two districts of Uruzgan and 10 districts of Zabul province.

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

Supervision, planning and management

The first mobile health team started to operate in August 2000, and thereafter three other teams were deployed by the ARCS. These four teams continued to work in the four different provinces in the southern and western regions and occasionally visited the camps for internally displaced persons (IDPs) in Kandahar.

In early January, a two-day seminar was organized for all participants of the ARCS mobile health teams, including the head of the national society's health department. The aims were to familiarize team members with the organization and its different activities, to specialize on the drought response programme, to introduce primary health care, and to standardize diagnostics and treatments. One practical new point was to introduce MUAC screening of all child patients under five. Dissemination on the Movement and the ARCS activities was part of the seminar's programme.

Team activities

In January and February, 11,173 patients were treated and through this period, the total number of patients treated by the teams was 33,867.

The Kandahar team started the period working in certain camps in Panjwai district, where the displaced Baluch families reside, working in co-ordination with other NGOs also currently providing mobile health services in the area. This visit coincided with the Federation/ARCS distribution of winter assistance materials to 2,456 internally displaced families. The camps were also covered by mass measles campaign by the MSF-H vaccination team.

Morbidity

Respiratory infections (common cold, bronchitis, pneumonia, throat infections) were the main ailments during the winter months. The team from Zabul province also reported a high rate of suspected pulmonary tuberculosis for which there is hardly any appropriate treatment available.

Measles started to be a cause of concern in several locations. The measles vaccination coverage in Kandahar region is reported to be 27 per cent. The ongoing EPI, both fixed centres and outreach areas are very limited, with gaps and delivery delays allowing for the outbreak of epidemics. MSF-H working in the area has been doing a systematic mass campaign since December.

Health education and preventive health care

The start of the vaccination (EPI) programme was the main achievement, but practical arrangements caused constraints. The ARCS Kandahar team started its vaccination programme while the preparations for the other teams are underway.

During the first and second round, the Kandahar mobile health team provided vaccines to 700 children, while about 500 women were immunized against tetanus, in 16 villages outside of the area covered by UNICEF.

The reported health education campaign covered 59 per cent of the patients. The only female nurse of the teams had to cease her work in December, reducing the effectiveness of the health education for women. According to the reports all the teams, however, tackle important women-related issues such as breast feeding and child spacing during the ongoing hygiene education and treatment of women by the teams continues.

During the seminar in January all the team members considered the lack of knowledge and understanding of the causality between diseases and lacking hygiene, and improper use of water sources, as the root causes of many health problems in the communities. Though there is need for improved transfer of this knowledge to the people, various conditions such as the restrictions on the use of pictures and posters, the limitations on communication between men and women, and the lack of continuity and follow-up in this mobile setting, make the task daunting.

Objective 3: to provide access to safe drinking water and sanitation facilities.

One shallow well was deepened and lined in the IDP camp Dost Mohammed, in Kandahar's Maiwand district, serving 25 Baluch families who had fled their residential areas in the Registan desert. Further, one bore hole was completed with a hand pump in Hajyan village in Kandahar's Argandab district, serving 90 families. For both wells, communities actively participated in the implementation of the project by providing unskilled labour, accommodation for skilled labour, sand and gravel.

In Farah province, Qah-lai-Kah district, the drilling of one bore hole is completed, but installation of the filter pack, casings, platform and water pump was not yet done. In the same district a second bore hole is under construction. Drilling for two bore holes in Kandahar's Argestan district was stopped due to caving in (in Cotizai village) and as no water was struck at a depth of 40 metres (in Darmanday village). As hydro-geological data are not available, these problems may occur more often.

In addition, numerous assessment and supervision missions were conducted by the ARCS and the Federation's wat/san engineers and delegate to Maruf, Argestan and Panjwai districts in Kandahar and Anardara and Qah-lai-Kah districts of Farah province. During these field visits and after coordination with partners (DACAAR, UNICEF and the ICRC), appropriate sites were identified.

Constraints that have so far resulted in a relatively low implementation level include the absence of hydro-geological data, the need for intensive coordination with other humanitarian agencies and logistical problems, the latter especially in Farah.

Lastly, a total of seven latrines were rehabilitated in Lowya Wala in Kandahar city for as many households, with active community participation through provision of unskilled labour and accommodation for skilled labour. A survey, in order to identify further sites for provision of latrines as sanitary facilities, was conducted in February in three alleys in Kandahar district no. 3 where sanitary conditions seemed the worst. A team of both female and male members interviewed representatives from 50 households.

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

In the Afghan context, the ICRC and Federation coordinated especially the appropriate response to internal displacement.

In early January 2001, ARCS and Federation, supported by the ICRC, provided 2,456 internally displaced families with winter shelter assistance; 352 tents, 2,104 tarpaulins and 9,842 blankets were distributed to mostly Baluch families who had to flee the Registan desert previous year due to lack of water and rapidly dying livestock. The assisted families were stranded in 12 camps in Kandahar's Maiwand and Panjwai districts and eight different camps in Garmser and Bust districts of Helmand.

This distribution followed an initial rough survey conducted at the end of 2000 in regions of southern Afghanistan including Garmser, Bust and Nahr-e-Saraj districts in Helmand and Maiwand, Panjwai, Shah Wali Kot and Arghandab districts in Kandahar provinces, .

In early February, the Federation helped the ICRC in its distribution of firewood to displaced people in Maslakh camp in Afghanistan's western city of Herat, in response to an unusual cold snap with temperatures reported to 25 degrees Celsius below zero.

The conditions of the displaced population were continuously monitored by the Federation's delegates in both Herat and Kandahar, and the drought coordinator.

Plans are made for an assessment to the areas of origin of these Baluch IDPs in southern Registan, in April.

Objective 5: to develop and reorient, if necessary, further assistance strategies or phase out the emergency response activities.

In all regions, intensive coordination was maintained with other actors in the drought response efforts and the consequences of the drought are being monitored where possible taking into account accessibility and available resources. Initial rainfall data collected in the southern region indicated that precipitation was higher in this region than the previous year, but still less than in a normal year. Concrete data on areas cultivated compared to previous years are not yet available, but preliminary estimates are a cause of serious concern.

Disaster Preparedness

Objective 1: to strengthen the managerial, administrative and human resource capacities of disaster preparedness (DP) structures at the headquarters and regional levels of the ARCS.

A DP coordination meeting with all regional DP supervisors was held in mid-January to facilitate exchange experiences and skills and also to discuss the DP concept and planned activities for 2001. No specific training was conducted during the period on Vulnerability and Capacity Assessment (VCA), partly because DP staff had been called upon by ARCS leadership to participate in drought relief distributions in different parts of the country.

Objective 2: to develop a disaster preparedness plan and an efficient response capacity.

During the discussions on the new programme agreement for 2001, the ARCS was asked to review its organizational set-up and consider DP as a coordination unit among the various departments of the national society and not as a component of relief. As this will be a significant conceptual change, it is expected that the organizational restructuring may only take place over a longer period of time.

Meanwhile, during the coordination meeting of the regional DP supervisors, it was agreed that future activities would focus on (a) the establishment of emergency/rescue teams at regional and branch level, depending among other things on available ARCS volunteers; (b) joint regional community based

first aid (CBFA)/DP coordination meetings; and (c) the completion of mapping high risk areas based on VCAs carried out in the previous year.

As objectives changed compared to last year, the initial draft DP guideline was amended to emphasize the concept and practical planning and response steps, using input materials from the Federation's regional delegation. In the next months, this revised draft will be discussed and reviewed at the regional level in Afghanistan.

As part of the disaster preparedness stocks, a total of 24,000 blankets ordered and accounted for in 2000 arrived early in the year, and were distributed to the various Federation-managed regional warehouses. . Simultaneously, other prepositioned relief items were reallocated in the various regions. Although details will have to be defined , the ARCS and the Federation agreed in principle to gradually hand over disaster preparedness stock to ARCS premises, starting this year.

Following the distribution of non-food items in southern Afghanistan to displaced Baluch people from the Registan desert, an analysis was made of the strengths and weakness of the operation in order to integrate recommendations in future disaster preparedness planning.

First contacts were made with the office for disaster preparedness and follow-up visits are planned for future coordination and advocacy on DP issues.

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

A joint meeting held on 15 January with all regional DP and CBFA supervisors and directors of the ARCS focused mainly on DP and included discussions on individual roles and responsibilities to avoid duplication in field activities, outlining future coordination plans at the regional level.

Health and Care

Basic Health Care (Clinic Support) Component

A total of 456,000 health services were provided from 1 January to 31 March. It should be noted that this figure contains figures from an average of 39 of the 48 clinics only. Women and children under age of 15 form over 77 per cent of the total beneficiary group.

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

Based on the health information system (HIS) data received, the health education session conducted at the ARCS clinics recorded 92,401 participants in the group and 31,141 in the individual sessions. Health education is mostly given on common health problems and hygiene, sanitation and immunization. Regular health data collection was performed, although 26 clinics' monthly data was not received or processed by the end of the period.

During the first round of NIDs from 15-17 March, all Federation and ARCS regional health officers monitored the anti-polio vaccination campaign with transport provided by the Federation. Additionally, a total of 34 ARCS clinics provided polio immunizations, while according to preliminary reports the society's CBFA department mobilized over 1,000 volunteers who immunized over 92,000 children under five in their villages and neighbourhoods.

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

A total of 223,111 consultations and cases treated were recorded by the ARCS clinics that submitted the HIS reports by the end of March, while over 1,800 complicated cases were referred elsewhere, mostly to hospitals. Since 1 January, 83 medical kits were distributed, including two kits to the clinics in Kapisa and Parwan through support from the ICRC.

A shipment of 305 medical kits from Europe arrived in Herat and were distributed in Kandahar, Kabul, Herat and Mazar-i-Sharif. The clinics in the eastern region will be supplied from Kabul. None of the additional five scheduled additional laboratory facilities were established in the reporting period.

Objective 3: To maintain and strengthen the primary health care capacity of the ARCS and to reinforce its programme management skills.

Throughout most of the period, the ARCS clinics and health department were supported with basic clinic supplies and salary support, except for a short interval when ARCS, the ICRC and the Federation were discussing new support agreements for 2001. The discussions on the health agreement between ARCS and the Federation included topics such as staffing, incentive levels, job descriptions for all staff, relocation of clinics and a cost-sharing mechanism.

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

No specific training for regular health staff was conducted other than on-the-job training during the various monitoring and supervision visits. By end of March, the Primary Health Care (PHC) manual was ready for printing but delayed due to funding constraints. A second proof reading of the Maternal and Child Health Care (MCH) manual was carried out. The manual on breastfeeding received from UNICEF was reproduced and distributed to all clinics in the central region except the one in Bamiyan due to inaccessibility. Translation of health education materials from English into Dari continued.

Maternal and Child Health Care Component

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

The 161 ARCS-trained traditional birth attendants (TBAs) in four regions registered 623 pregnant women, conducted 261 deliveries and distributed 200 clean delivery kits, in addition to referral of high-risk cases and the provision of routine health education in their communities. During the reporting period, no TBA training was conducted due to weather restrictions (in Qayaq and Badghis) and lack of midwives (maternity and long-term sick leave).

Ante-natal and post-natal care and growth monitoring were introduced in four more clinics (Jalalabad, Qayaq clinic in Ghazni, Kandahar and Helmand clinic in Kandahar). In Darinoor clinic (eastern region), only growth monitoring could be introduced as no midwives are available there.

MCH workshops were conducted in the above clinics with all concerned female staff covering the following subjects: primary health care concept; the different MCH components; ante-natal and post-natal care; growth monitoring; and family planning. The theoretical training was combined with practical training in the clinics. Preparations were made with Action Against Hunger for a growth monitoring workshop in Kabul, held in April.

In order to provide these additional health services, these clinics also received additional furniture, sphygmomanometers, stethoscopes, fetoscopes and scales for weighing children and measuring height in addition to road to health charts and ante-natal cards.

During the reporting period, ARCS clinics provided 20,352 doses of tetanus toxoid (TT) vaccine to pregnant women and mothers, while 59,305 doses of different vaccines to prevent childhood diseases were provided to children. Furthermore, 4,526 children received vitamin A supplements between 1 January and 31 March.

New reporting formats for the different components are under development. Until these are finalized and introduced to the clinics and their health staff no accurate data on these additional activities can be provided.

Generally, most clinics were visited by ARCS and Federation regional health officers, the MCH delegate, the health Co-ordinator or field delegates to monitor and supervise the activities. From 18-25 February, the Federation's health officer - with support from the ICRC - visited the ARCS clinic in Parwan and Kapisa (located across the frontline in the central region) which had not been visited for months. Main problems addressed for improvement related to inadequate record keeping and reporting; sterilization of clinic equipment due to lack of fuel, hygiene and inadequate planning for health education. Various plans for a visit to ARCS in Faizabad were cancelled as flights were cancelled because of bad weather.

Community Based First Aid

Objective: To expand the network of trained, equipped and motivated volunteers in about 8,000 villages in Afghanistan and to assist them to carry out community and referral services.

A total of 610 volunteers, covering 591 villages, were trained from 1 January through 31 March, representing 24 per cent of the annual target of 2,500 volunteers. They were recruited from 13 districts of all five regions in Afghanistan. This period's round of training expanded the countrywide network of ARCS volunteers to 6,807. The new volunteers received a first aid kit and a manual in Dari or Pashtu after their training.

ARCS regional supervisors and trainers met with 385 volunteer team and district leaders of as many volunteer groups. At these meetings, trainers and supervisors briefed the group leaders on volunteer activity reporting, the objectives of the CBFA programme, importance of mobilization of volunteers for the national immunization days to eradicate polio and first aid cases. It should be noted that trainers should meet monthly with each volunteer team leader; consequently the figure of 385 includes a duplication, as the total current number of team leaders is 300. Over the past three months the CBFA trainers were not able to meet more than 60 per cent of all team leaders per month for a variety of reasons.

Follow-up meetings by trainers directly with volunteers themselves were held with 208 volunteer groups in all regions in which 3,599 volunteers participated. During these follow-up meetings, first aid bags were refilled, while refresher courses were given on topics such as the importance of vaccination, frostbite, hygiene, diarrhoea, bleeding, shock and mine-awareness.

During this period, ARCS volunteers trained 125 male and 227 female volunteers within their own families in the various districts. Methods continue to be explored on how to recruit more female volunteers.

At the end of March, two workshops were held in Balkh and Samangan provinces with volunteer group leaders, facilitated by the Federation's CBFA and Mazar-i-Sharif field delegates, the assistant director of CBFA at ARCS and the dissemination field officer of the ICRC. The topics presented at the workshop included volunteerism, the role of volunteers during disasters, an overview of ICRC and Federation activities in Afghanistan, planning, reporting, follow-up systems and first aid.

Based on the activity reports received by the end of March, ARCS volunteers handled 16,782 cases,

varying from the provision of first aid, referral to hospitals or other health facilities and the provision of requested advice in their respective villages. The cases reported included fractures, bleeding, diarrhoea, burns, common cold, animal bites, food poisoning and mine injuries. The total number of cases though is far from complete due to inability to collect all reports.

Aimed to improve the community's understanding of health issues and to increase good hygiene, ARCS volunteers disseminated health information to 25,697 individuals about first aid, the importance of safe drinking water, hygiene and vaccination, and held among them mine-awareness sessions. Over 750 volunteers explained to 10,168 people how to prepare ORS in March.

At the occasion of the NIDs from 15-17 March, 1,027 volunteers vaccinated 92,802 children under five years of age against polio in all regions and participated in mobilizing more women and children during the campaign. Practical constraints and organizational set-up of the campaign prevented higher participation of volunteers. These data include reports from 116 volunteers trained under the drought emergency programme in southern Afghanistan, supported by the ICRC.

In addition, , volunteers cleaned a large area of waste and informed people of the ARCS mobile health team services passing through Mullah Dost village in Kandahar's district Panjwai. In Enjil district of Herat province, 23 volunteers reconstructed a flood bed of a stream to protect people living nearby from possible flooding, while 19 volunteers rehabilitated roads and 20 others renovated a bridge benefiting an approximate 8,600 people. In Herat, 16 volunteers mobilized support from their villages, collecting 1,500 loaves of bread, 15 bags of rice and some clothes and distributed these to IDPs in the camps. In Charasiab district of Kabul province, 20 volunteers motivated inhabitants of five villages to construct a five-kilometre long feeder road and six bridges to connect their villages, while contributing money for that purpose.

To enhance the understanding of volunteer work and strengthen the link of CBFA with ARCS branches and other departments' staff, the regional supervisor invited other ARCS and ICRC staff to activities. The regional DP supervisor participated in a training course, while the ICRC dissemination officer attended four times in follow-up sessions with volunteers. In Mazar-i-Sharif the CBFA department convened a meeting with the national society's dissemination, DP, health and youth departments to share programme objectives and activities.

ARCS/Federation in the Kandahar region organized a four-day workshop for 16 trainers (both ordinary and emergency) from all four provinces, facilitated by the Federation's CBFA delegate, the national society's CBFA assistant director and the Federation's office manager. The workshop was used to strengthen the trainers' understanding on programme objectives, the expected results, to assist the trainers in follow-up activity planning, reporting (including financial) and to upgrade their general knowledge and teaching skills.

In January, volunteer groups established three ARCS corners in Kabul's seventh and tenth districts to increase community contribution to the CBFA programme. Apart from motivating volunteers to use locally available old clothes as bandages to reduce dependency on refill materials purchased within the programme, no other cost sharing mechanisms were explored.

Youth Component

Objective 7: To expand the number of trained and equipped teacher volunteers and school youth.

No new recruitment and training of school teachers and youth volunteers took place during the period, as schools were closed during the winter season (except Jalalabad).

In Kabul, since mid-January five schools of five districts with 10 volunteer teachers and 70 ARCS school youth gathered on their own initiative twice a week and practised first aid techniques and

discussed volunteerism and the Movement. ARCS youth department staff and the Federation's CBFA/youth officer supported this initiative by loaning heaters and fuel for use during these activities.

In Mazar-i-Sharif, new recruitment of teachers was hampered by the authorities' requirement to obtain their written agreement prior to any new recruitment and was discussed with the ARCS youth supervisor who held two meetings with volunteer teachers. One of these meetings was supported by the Federation's CBFA/youth officer.

In Nangarhar province, the CBFA supervisor at the ARCS conducted monthly meetings with the volunteer teachers in which 80 per cent of the teachers participated. Discussions focused on pending problems, activity reports and the CBFA/youth programme for 2001. In January and March 2001 activities in a total of ten schools in Jalalabad city were monitored and the first aid boxes of two schools were refilled. The volunteer teachers continued training existing youth volunteers, recruited since the inception of the programme in 1999.

Institutional and Resource Development

With the turn of the year, all ARCS, ICRC, and Federation tripartite and bilateral ARCS and Federation programme agreements governing the international support for the ARCS automatically terminated, requiring the establishment of new agreements.

Consequently, the ICRC and the Federation prepared for new rounds of intensive talks with the ARCS Advisory Board on the tripartite General and Core Structure Support Agreements. These discussions included renewed recommendations made by the November 2000 ID/RD review mission, which visited Afghanistan again to measure progress on the various recommendations made in 1999. This mission was carried out by the same technical experts from ICRC and Federation that conducted the 1999 review.

Compared to last year, the discussions on the 2001 support modalities progressed significantly better and eventually led to the conclusion and signing of new tripartite agreements on 18 February 2001, one month earlier than the previous year. The Federation's ID/RD Department further played an important facilitatory role in the discussions on the various ARCS/Federation bilateral programme agreements that were eventually signed on 24 March.

During the period, preparations were made for the Strategic Planning and Country Assistance Strategy workshop (SP & CAS workshop) which was postponed from 2000 to June 2001. After a orientation visit to the ARCS branch in Jalalabad, the Federation's regional ID delegate based in Sri Lanka facilitated a preparatory three-day workshop in early February in Kabul, at which 20 ARCS staff participated, both from branches and the national headquarters.

As part of the preparations for this workshop, it was agreed that four ARCS staff from the senior leadership will visit the Nepalese Red Cross, focused mainly on national society organizational structure, governance, and programme management.

The activities below list activities against objectives covering a two-year period. Following the new agreement reached with the ARCS, the objectives slightly changed.

Objective 1: to raise awareness about the fundamental principles of the Movement among ARCS staff and public.

A proposal for a branch leadership workshop on Red Cross/Red Crescent principles and policies in Mazar-i-Sharif was reviewed and approved and is scheduled for May, jointly with the ICRC Co-operation Department.

A number of Red Cross/Red Crescent materials and reference documents were translated into Dari and Pashto, and are being distributed to ARCS branches and personnel.

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

As part of the three-day workshop in Kabul, held in early February, the 20 ARCS participants discussed the relation between strategic planning and the Country Assistance Strategy, definitions of national society vision and mission statements, the different components of a national society's strategic plan, and practical steps to be taken before the upcoming workshop in June.

Based on the recommendations of last year's review, a first draft project planning guideline was prepared and is being shared with different staff for review. The guideline covers aspects such as (a) introduction of management functions and planning; (b) project cycle; (c) reporting; and (d) assessing project proposal quality. The purpose of the guideline is to ensure a coherent approach towards planning and budgeting at all levels with emphasis on regional and provincial branches. In subsequent months it will be tested in different branches and first preparations were made for a project planning workshop in April for ARCS staff from the headquarters and branches in the central region.

The 22 participants of the computer course that started in 2000 graduated on 22 March from the Afghan Turk Institute For Computer and Languages. The ID department will assess the impact of the training during the year. An English course started for 40 participants in January, with classes for intermediate and beginners, each with 20 staff from ARCS.

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

Due to lack of proper financial and narrative reports on the income generation projects initiated in 2000, a decision to review these projects was taken. Consequently, it was decided to stall the husbandry project of Bamyan branch which lost its income earning capacity because of increased fodder prices due to drought.

In mid-March, the ARCS and Federation's field officers visited three income generating projects: Logar's bakery, Paktia's bakery and Khost's wheelbarrow project. Both bakery projects faced problems as wheat prices had increased. In addition, the bakery run by ARCS Paktia was located in the wrong area. Due to these problems, ARCS Logar apparently decided to lease the bakery to a third party for a fixed monthly fee. After these visits it was agreed to close both bakeries and to initiate a discussion on how to use the funds. ARCS Khost still did not receive approval from the local municipality for its wheelbarrow project and the branch will seek other alternatives to use the available funds.

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

The membership system was approved by the ID/RD departments of the Federation and ARCS and is pending approval from the society's advisory board and leadership. After approval, the membership should be implemented in a number of branches in the central region as a pilot.

Following the discussions on the tripartite general and core structure agreements, the ARCS agreed to: improve its organizational structure and management by separating the headquarters from the regional branch; carry out an overall branch assessment during 2001 to justify international support on the basis

of performance indicators; solve problems caused by accumulated balances and improve ARCS financial systems; and to limit itself to the present number of staff for its core structure.

To carry out the branch assessment the ARCS and Federation approached the Nepalese Red Cross (NRC) through the Federation's regional delegation to nominate a team leader with branch development experience for the assessment. A draft terms of references was prepared and shared with the NRC and ICRC. It is intended that this assessment will additionally include representatives from the ICRC, ARCS and Federation and possibly an external consultant.

In February, the Federation's finance development officer visited the branches in Ghazni and Wardak branch to establish a new accounting system. In the northern region, the Federation's administrator and regional accountant of the ARCS conducted one-day training sessions for the administrators of branches in Samangan, Pul-i-Khumri and Kunduz.

A joint ICRC and Federation visit was made to the ARCS headquarters' finance department to review the accounting system and to analyze the accumulated balances of 2000. In the 2001 Core Structure Agreement it was agreed that ARCS could use these balances on the basis of proposals submitted and approved prior to 31 March.

Co-ordination and Management

To ensure good working relations with the ICRC, weekly meetings were held between the heads of delegation of both organizations. Further, particularly in the framework of the discussions on the new programme agreements and general support agreements with the ARCS, bilateral and tripartite meetings were facilitated, and when needed attended by the Federation's head of delegation.

In January, visits were paid to the embassies of the Netherlands, United States of America and Japan in Islamabad to share the Federation's humanitarian concerns and discuss possible support for the its humanitarian assistance programmes in Afghanistan. At the end of March, the British Red Cross' desk officer and senior information officer began their visit to Afghanistan.

In general, financial management and accounting of transactions were carried out as planned, although software problems caused some delays in submission of the February financial records and reports. The logistics department was actively involved in the receipt and distribution of 350 medical kits and 24,000 blankets from Europe. Additional inputs provided by the logistics department included support to the relief distribution for displaced persons in southern Afghanistan,.

The Federation's field delegates and staff attended regional co-ordination meetings with other international non-governmental organizations and specialized UN agencies to ensure a complementary approach and to avoid duplication of efforts.

Outstanding needs

Although the confirmation of financial support from the Netherlands Government/Netherlands Red Cross and UNFPA contributed significantly to allow smooth continuation of the programme activities, significant and immediate support is required to enable the Federation to purchase essential medical supplies, to support the running of the health clinics and to start the procurement of disaster preparedness relief supplies, including tents, blankets and other materials.

If proposals pending with different donors cannot be confirmed immediately, international orders cannot be placed, reducing the response capacity in the short term and endangering continuous normal support in the long term.

For further details please contact: Satoshi Sugai, Phone: 41 22 730 4273; Fax: 41 22 733 03 95; email: sugai@ifrc.org

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

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

Peter Rees-Gildea
Head a.i.
Relationship Management Department

Hiroshi Higashiura
Head
Asia and Pacific Department

