

# Plan 2010-2011



International Federation  
of Red Cross and Red Crescent Societies

## Afghanistan

### Executive summary

Afghanistan has experienced three decades of internal conflict which has seriously affected its socio-economical infrastructure, causing wide scale displacement of people both within and outside the country accompanied by widespread poverty. The cumulative impacts of the conflict and its aftermath have deprived many people access to basic facilities like water, electricity and basic health care. Besides the effects of these man-made disasters, the frequent occurrence of natural disasters which in most cases leads to loss of life and damage to infrastructure thus doubles the challenges for the people in Afghanistan. Discrimination among different ethnic groups and the plethora of gender related issues are other consequences of the ongoing conflict in the country.

In this unstable situation, the Afghan Red Crescent Society (ARCS), the only indigenous, nationwide humanitarian organization in Afghanistan since its establishment in 1934, has provided assistance to the most vulnerable communities, through its 34 branches spread across all provinces of the country, and its active volunteers and members. However, the ARCS, which was quite self-sufficient earlier, also suffered severe damage to its socio-economic and functional infrastructure as a result of many years of conflict and political upheaval. The current socio-political change process and the move towards the restoration of peace in the country have had a positive effect on the national society.

It is in this context that the ARCS programme support plan for 2010-2011 has been developed to provide need-based services to the most vulnerable communities in the country. The four programmes of disaster management (DM), health and care, organisational development and principles and values are aligned with the 4 Global Agenda goals and will be implemented in close collaboration with key government ministries, concerned UN agencies, and partners within the Red Cross Red Crescent Movement.

The ARCS strategic disaster management plan is linked with the government national disaster management plan (NDMP) and the regional and Global Agenda goal one (reduce the numbers of deaths, injuries and impact from disasters).

The programme will be implemented in line with the International Federation's Global Alliance on disaster risk reduction and commitment to the priorities outlined in the Hyogo Framework for Action, the Regional 'Building Safer Communities' concept and the Millennium Development Goals.

Under the health and care programme, the ARCS has been providing health facilities to vulnerable communities through its basic health centres, comprehensive community-based health intervention,



The Afghan Red Crescent volunteers are distributing relief items to the flood affected people in remote areas of Badakhshan province, north-eastern Afghanistan. Photo: Afghan Red Crescent Society.

emergency medical units, community-based first aid initiatives, HIV/AIDS prevention project and the *Marastoon* (social welfare) project. The overall goal of the programme is linked with the International Federation Global Agenda goal two (reduce the number of deaths, illness and impact from disasters and health emergencies).

The organizational development programme seeks to enable the ARCS towards becoming a well-functioning national society and increasing its institutional capacity by developing its human resources, financial systems, branches, legal base and management systems for its youth, volunteers and members. This would help the national society to provide effective and efficient services to vulnerable communities thereby contributing towards Global Agenda goal three (increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability).

The principles and values programme aims to address discrimination and stigma in targeted communities; thereby contributing towards Global Agenda goal four (promote respect for diversity and human dignity, and reduce intolerance, discrimination and social exclusion).

Support would be channelled through the harmonized operational plan which was developed in a participatory way. The first harmonized plan was developed in April-June 2008 through close consultation and coordination with the ARCS headquarter departments and branches, the International Federation and International Committee of Red Cross (ICRC) programmes and with back up support from the Asia Pacific zone office. This process was to harmonize support towards the ARCS five year strategic plan in order to achieve the set objectives of the plan.

This plans, over two years aims to target 4,586,000 people directly in some of the most marginalised communities.

The budget for 2010 is CHF 5,697,907 (USD 5.52 million or EUR 3.74 million) and the budget for 2011 is CHF 5,568,013 (USD 1.66 million or EUR 1.13 million).

[Click to go directly to the attached budget summary of the plan](#)

## Country context

Afghanistan is a landlocked, mountainous country in south-central Asia, with plains in the north and southwest. Despite impressive economic growth over the past five years, this rugged country remains one of the poorest in the world – with more than half the estimated population of 24.9 million living below the poverty line<sup>1</sup>.

The large number of refugees is still a major obstacle to be tackled by the Afghan government. Since major repatriation operations to Afghanistan resumed in 2002, more than 5 million Afghans have returned to their country, mostly from Pakistan and Iran, while another half million internally displaced people have gone back home. However, approximately 3 million Afghans still remain in the two neighbouring countries alone. Localized conflict continues to displace some communities within Afghanistan, while drought, poverty and lack of job opportunities oblige many Afghans to seek employment abroad. The violence is also linked to drug production and trafficking which obstruct the building of a viable and effective state.

In terms of food security, the National Risk and Vulnerability Assessment found that some 6.6 million Afghans do not meet their minimum food requirements. In addition, around 400,000 people each year are seriously affected by natural disasters, such as droughts, floods, earthquakes and extreme weather conditions. In 2008, drought conditions in the east, south and southwest have resulted in a far smaller cereal harvests than originally expected. Expectations for the 2009 harvest are more optimistic due to

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<sup>1</sup> Voice Of America news, 2008

good rains in many drought affected areas but whether this signals the beginning of seasonal stability and reliable productivity remains to be seen.

Besides all these socio-economical challenges, Afghanistan ranks in the top ten most corrupt countries in the world, according to a new league table of corrupt nations. The Global Corruption Report 2008 released by Transparency International, ranked Afghanistan 172 out of 180 countries.

The Afghan Red Crescent Society (ARCS) with the ongoing support of its two main partners – the International Committee of the Red Cross (ICRC) and International Federation – is working to meet the needs of vulnerable people (particularly those affected by natural and man-made disasters) through its core programmes of disaster management, health and care, organizational development and humanitarian values.

## National Society priorities and current work with partners

The Afghan Red Crescent Society has built up a five year strategic plan (2008-2012), which has been directing the implementation of the national society programmes based on its strategic directions. The development of the ARCS five year strategic plan was done in a participatory way in close coordination with the ARCS departments at the headquarters and ARCS branches. The International Federation and ICRC country delegations as well as the joint International Federation and ICRC technical team in Asia Pacific zone office provided support. A harmonized support plan was initiated by the Movement partners in Afghanistan and was developed in close collaboration with South Asia regional office and the zone. In April 2008, a joint International Federation and ICRC organizational development and capacity building team's visit to Afghanistan initiated the harmonized planning process and resulted in the development of a harmonized operational plan for 2008 and 2009. This plan was finalised in May 2008 and presented at the partnership meeting for Afghanistan in June 2008. A follow up mission took place in November 2008 to review the implementation process and to make recommendations on how to strengthen the harmonized process further. The next step will be to encourage and delegate greater responsibility to the branches to develop their own annual plans and have a key role in contributing to the development of the overall ARCS plan. This will enable the impact and outcomes of the harmonized operational plan to benefit the general situation of the ARCS and its beneficiaries in particular.

The disaster management, health and care, organizational development and principles and values (under the youth and membership programme) are the core programmes having clear objectives to be achieved during the period of the strategic plan. Based on the ARCS strategic plan and Global Agenda goals, the national society has set up the following priorities to be achieved during 2010 and 2011:

Under disaster management, the priorities are:

- Strengthen the capacity of the ARCS in terms of disaster management planning, organizational preparedness, community preparedness, disaster response and recovery, cooperation and coordination. This will be undertaken through an analysis and comparison between ARCS and well prepared national society phase II and phase III (to be completed in 2009) surveys in order to fill the gaps; and
- Promote and development of the ARCS capacities in human resources, material, financial and technical support for effective disaster management through an integrated Movement approach to the harmonized operational plan for 2010-2011.

Under health and care, the priorities are:

- Improvement of the health status and capacity of communities to cope with health and disaster challenges through integrated community-based health and first aid (CBHFA);
- Improvement in access to safe drinking water, establishment of positive health and hygiene practices of communities in the targeted areas and an increase in sanitation facilities;
- Improvement in access to curative and preventive health services in targeted areas during emergencies and normal circumstances;
- Improvement in access to targeted vulnerable populations to enable the introduction of curative and preventive health services with a focus on maternal, newborn and child health care; and

- Expansion of the existing ARCS voluntary non-remunerated blood donation programme in Kabul, Herat and Mazar-e-Sharif to include Jalalabad and Kandahar as a part of the HIV and AIDS project during the appeal period.

Under organizational development, the priorities are:

- Supporting the national society organizational development process which includes human resources development, logistics development, financial management and sustainability development, and branch and membership development;
- Supporting the national society leadership and management development;
- Support youth development in major cities all over the country;
- Volunteering development to pave the way for a well-balanced and sustainable development of the ARCS; and
- Ensuring the national society capacity is enhanced and can deliver quality services to the most vulnerable people of Afghanistan.

Under principles and values, the priorities are:

- Promotion of humanitarian principles and values;
- Promotion of its fundamental principles and humanitarian values 'in action'; and
- Seeking the partnership from ICRC in terms of provision of the dissemination and proper consultation on the implementation of the Fundamental Principles.

The programmes will employ a comprehensive and integrated approach to programme management ensuring more realistic and sustainable interventions. The aim is to integrate the various programmes to meet the needs of the vulnerable in a more holistic way. This is in line with an "Integrated Programming Approach" initiative currently being implemented in South Asia.

The ARCS has good working relationships with the Movement partners as well as with external bodies including the Afghanistan National Disaster Management Authority, UNAMA, OCHA, UNHCR, UNICEF, World Health Organization, 12 key ministries and many international non-governmental organizations, either through meetings and/or unilateral and integrated approaches. Some other government and non-governmental agencies such as the Afghanistan Independent Human Right Commission, the ministries of social and labour affairs, education, public health and religious affairs, and some UN agencies could be direct or indirect partners for the implementation of the principles and values programme.

The table below shows the partner national societies supporting the ARCS programmes.

<b>Partner</b>	<b>Programme component</b>
International Federation	National society capacity building, disaster management, health and humanitarian principles and values.
ICRC	Promotion of humanitarian principles and values, disaster management and response in conflict areas, health, mine awareness, protection and tracing.
Norwegian Red Cross	Disaster management and health programmes.
Finnish Red Cross	Disaster management, health and organizational development programmes.
Swedish Red Cross	Health programme.
Danish Red Cross	Disaster management programme.
Japan Red Cross	Disaster management, health, and organizational development and capacity building.
British Red Cross	Health and organizational development programmes.
Australian Red Cross	Health programme.
Canadian Red Cross	Disaster management, health programme.

# Secretariat supported programmes in 2010-2011

## Disaster Management

### a) The purpose and components of the programme

<b>Programme purpose</b>
Reduce the numbers of deaths, injuries and impact from disasters

The disaster management programme budget for 2010 is CHF 2,078,803 and for 2011 is CHF 2,027,234.

The disaster management programme is designed to increase the self-reliance of individuals and communities with an aim of reducing the impact of disasters in targeted disaster prone areas. This will be achieved through improving the capacity of the ARCS in human and material resources, and systems and procedures for effective implementation of risk reduction, response and recovery activities that meet the needs of populations affected by disasters. This will further be undertaken through an integrated approach and coordination with other involved actors in the country.

The disaster management programme has been developed following the lesson learnt from the regional building safer communities programme and the regional disaster management review. At the national level, ARCS will draw on the outcomes of the well-prepared national society phase II and phase III surveys (to be completed in 2010). This will be further supported by the national society's earthquake and flash floods contingency plans that were developed in 2009.

To increase the overall reduction of risk within vulnerable communities the disaster management programme will work closely with other programmes. In the field of health, integration will be sort through public health in emergencies, mobile units, and community-based health and first aid. The organizational development programme will engage in the area of volunteer management and branch development. Principles and values are incorporated into all disaster management and disaster risk reduction training and into assessments and beneficiary selection criteria. International disaster response law (IDRL) will be integrated with the national disaster risk reduction framework and IDRL will be promoted in dialogue with the Afghanistan National Disaster Management Authority to enhance the understanding of the fundamental humanitarian principles and values of the Movement.

The disaster management and disaster risk reduction activities conducted by the ARCS shall be made visible and advocated through a communication plan developed with the planning, monitoring, evaluation and reporting (PMER) unit. As the PMER unit does not have a specific budget for its activities, this has been integrated into existing programmes; for example, training, evaluation and monitoring, reporting and publishing visibility materials, and assistance to the disaster ,management department in establishing a monitoring and evaluation system for all disaster management relevant activities.

The ARCS organizational preparedness activities at national and branch levels will ensure that non-food relief supplies are available as required for the immediate assistance to 16,000 families (96,000 individuals; 45 per cent women and 30 per cent children under 15 years of age) of the total targeted population. A total of 153,000 people who will be indirectly reached, (including 45 per cent women) will benefit from the International Federation support through disaster risk reduction awareness campaigns in targeted areas.

<b>Programme Component 1: Community preparedness</b>
<b>Outcome 1:</b> Increase the self-reliance of individuals and communities and reduce the impact of disasters in targeted disaster prone areas.
<b>Key activities:</b> <ul style="list-style-type: none"><li>• Provide technical input into national society disaster risk reduction programmes in the areas of community based disaster risk reduction (CBDRR) training, vulnerability capacity assessment learning by doing, advocacy and awareness.</li></ul>

- Promote the ARCS capacity to enhance coordination and cooperation with the government's National Disaster Management Authority and other internal and external partners and increase local sustainability of CBDRR and disaster management programmes.
- Implement a school earthquake safety programme in up to three schools in Kabul City.

### **Programme Component 2: Organizational preparedness**

**Outcome 1:** Increase the capacity of ARCS to reduce the impact of disasters in targeted disaster prone areas.

**Key activities:**

- Improve the capacity of the ARCS through the recruitment, training and mobilizing 1,000 new CBDRR volunteers in disaster prone areas.
- Enhance ARCS response and recovery capacities by standardization and development of the national disaster response team tool/ equipments capacities, development of contingency plans, simulation exercises, training programmes/ refresher for national disaster response team/disaster response unit and maintaining database, re-establishing the emergency operation centre function.
- Assist the ARCS to strengthen strategies for delivering humanitarian assistance in conflict affected areas through special strengthening of disaster management services in the areas of increased mobilization of volunteers, expanded warehouse capacity, improved security training and support and the recruitment of volunteers.
- Develop and/or update the ARCS relief manual in the local language.
- Develop a monitoring and evaluation system for reporting disaster management progress against the agreed minimum standard of the well functioning branch.
- Explore the possibilities of participating in activities in targeted areas to enhance data collection, management information systems and dissemination of the ARCS role at community level. Pre-position ARCS disaster preparedness stocks with non-food items for 16,000 families across the country.
- Provide and routinely replenish standard operational kits, equipments and tools.

### **Programme Component 3: Disaster management planning**

**Outcome:** Improve the capacity of ARCS systems and procedures for effective response and recovery to meet the needs of those people affected by disasters.

**Key activities:**

- Provide technical support to identify and develop joint programme activities with ICRC including mechanisms for greater cooperation in disaster response and preparedness, particularly for the areas of conflict.
- Update and develop the Movement's harmonized operational plan according to the prioritization process.

#### **b) Potential risks and challenges**

Due to the lack of proper human resource and financial systems and procedures at the ARCS headquarter and a branch level, the national society has not improved its capacity to a sustainable level. The national society is strongly committed to continue its efforts in strengthening these organizational development aspects to be able to improve service delivery. The unstable security situation in the country due to the on-going conflict is probably the major challenge for the ARCS and the International Federation at this time. The ARCS is attempting to accelerate implementation of its activities but the security constraints, frequent staff turn-over, transfer of experienced ARCS disaster management staff to other national society departments and involvement of staff and volunteers in

response to disaster and emergency situations affect the implementation of other programme planned activities such as trainings, workshops, etc.

## Health and Care

### a) The purpose and components of the programme

<b>Programme purpose</b>
To reduce the number of deaths, illness and the impact from diseases and public health emergencies.

The health and care programme budget for 2010 is CHF 2,473,743 and for 2011 is CHF 2,413,119.

All the health components are in line with global health strategies, guidelines and initiatives<sup>2</sup>.

The plan for the next two years (2010-2011) is focused on the six different ARCS health projects - community-based health and first aid, water and sanitation, emergency health, mother, new born and child health, HIV and voluntary non-remunerated blood donation, and the social welfare *Marastoon* through which the ARCS will provide integrated health services (preventive, promotional and curative) to around 4,000,000 (direct 3,000,000 and 1,000,000 indirect) people. The majority of the beneficiaries will be women and children, mainly in remote areas, who are in need of health services.

The table shows number of people to be reached (direct and indirect) by the projects:

<b>Projects</b>	<b>Direct</b>	<b>Indirect</b>	<b>Total</b>
Basic health centres	2,000,000	80,000	2,080,000
HIV/AIDS	48,000	192,000	240,000
Community-based health and first aid	520,000	500,000	1,020,000
Avian influenza	20,000	100,000	120,000
Comprehensive community-based health intervention	40,000	0	40,000
Emergency mobile units	400,000	36,000	436,000
<i>Marastoons</i>	4,000	0	4,000
<b>Total</b>	<b>3,032,000</b>	<b>908,000</b>	<b>3,940,000</b>

The water and sanitation project is quite new; the national society and International Federation have neither water and sanitation capacity, nor the human resource (water and sanitation specialist). However, having experience in the areas of water and sanitation, the national society with the support of the International Federation is working closely with the communities to involve them and build their capacity right from the start of the project. In the mean time the ARCS has supported the communities to form water user committees who have been trained on the maintenance of wells and water hand pumps. In the coming two years, the ARCS is planning to construct 240 sanitary latrines and 50 wells in targeted areas.

The clinics are mainly targeting women and children both in urban and remote areas in provision of all relevant maternal and child health care activities that includes immunization, antenatal and postnatal cares, family planning, health promotion and health education as well as out patients' services.

Through the HIV prevention project with focus on HIV and sexually transmitted infections, the national society is targeting schools and youths. Indirectly, the parents, siblings and other community members are also reached with HIV awareness.

The national society has been involved in community-based first aid for more than a decade through more than 20,000 volunteers; however the national society is now working on the new approach of

<sup>2</sup> Global health and care strategy, Global Water and Sanitation Initiative, Global measles initiative, Global H2P initiative, Global Alliance on HIV, CBHFA framework

'community based health and first aid in action' which is focusing not only on first aid, but also on community health and disaster preparedness.

The health emergency component includes two area-emergency medical units and avian and human influenza preparedness activities. The emergency medical unit work closely with disaster management and community based health and first aid volunteers during emergencies to provide services to the vulnerable people.

The social welfare (*Marastoon*) project will cover the needs (food, non-food and vocational training needs) of 1,800 residents (900 per year) who are currently staying in five *Marastoons* of the national society.

The ARCS conducted external evaluations of the community based first aid and clinic projects during the second quarter of 2009. The main findings of the community based first aid programme included: improve the monitoring and supervision, enhance knowledge of volunteers (no refresher courses for volunteers), provide training materials, review the quantities of first aid refilling materials, coordinate and integrate the distribution of first aid refilling materials with other ARCS programmes particularly health and disaster management. Similarly, for the clinics the main findings were:

At policy level:

- Quality rather than quantity;
- Duplication of services with the ministry of public health; and
- Different styles of support from the Movement partners.

At management level:

- Human resources (qualified staff), low financial incentives (encouragement and allowances) for clinic staff by comparison to other basic package of health services implementers: the quality is questioned all the time;
- Different medical logistic system and supplies of medicine from the ARCS, International Federation and ICRC; and
- Insufficient supervision and monitoring.

Clinic level

- Lack of guidelines;
- Outreach immunization programmes need to be improved; and
- Professional training (integrated management of child illness, mother and child health).

#### **Programme Component 1: Community-based health and first aid (CBHFA)**

**Outcome:** Improved health status and capacity of communities to cope with health and disaster challenges through integrated community-based health and first aid.

**Key activities:**

- Conduct training courses for 1,000 new volunteers and volunteer team leaders with a new community-based health and first aid framework.
- Establish 25 ARCS volunteers' corners in 11 provinces.
- Mobilize volunteers to celebrate world AIDS day and First Aid Day.
- Carry out community-based health and first aid activities and integrated approach activities with emergency mobile units and other relevant ARCS programmes.
- Deploy national society staff and volunteers in emergencies to gain experience in cross border disaster response.
- Conduct refresher training of trainers' course in a community based first aid new approach (CBHFA in action) for trainers.
- Conduct social mobilization before/during national immunization days through community bases first aid volunteers.

#### **Programme Component 2: Water and sanitation**

**Outcome:** Access to safe drinking water and sanitation facilities is increased; positive health and

hygiene practices of community people are improved in the targeted areas.

**Key activities:**

- Expand project in new targeted areas.
- Dig 50 wells in all project areas.
- Select houses for construction of 240 sanitary latrines.
- Establish a water user group/health committee in each targeted community.
- Select and train new volunteers on first aid and health education/promotion in targeted areas and conduct at least 100 house to house hygiene campaigns in all project areas.
- Train project management staff on environmental health.
- Train targeted communities in waste disposal at house to house level.
- Conduct midterm evaluation of the project.

**Programme Component 3: Emergency health**

**Outcome:** Access to curative and preventive health services in normal and disaster situation is improved in target areas.

**Key activities:**

- Provide medical kit and essential equipment.
- Provide health services (during emergencies and normal situations) and participate in national immunization days.
- Continue to conduct orientation sessions on avian and human influenzas to all AR CS staff and volunteers in targeted areas.
- Development and distribution of information, education and communication/behavioural change communication materials in targeted areas.
- Organize public awareness and mass media campaigns (for the general public) during outbreaks of diseases in coordination with the ministry of public health and other agencies.
- Develop operational guidelines and training manuals.
- Provide surveillance and monitoring through ARCS staff and volunteers during outbreaks of diseases.
- Procure and distribute personal protective equipment kits.
- Conduct public health in emergencies workshop to emergency mobile unit staff.
- Contribute input to publicise the Movement involvement through Information bulletins, articles and imagery on the intervention.

**Programme Component 4: Mother, new born and child health**

**Outcome:** Access to targeted vulnerable populations for curative and preventive health services is improved; maternal, newborn and child health care is improved.

**Key activities:**

- Provide health care services to the targeted communities.
- Conduct health management information system and mother and child healthcare refresher trainings to clinic midwives and nurses.
- Conduct integrated management of childhood illnesses course to clinic doctors.
- Provide relevant guidelines and update medical books to clinic staff.
- Implement the ARCS psychosocial support programme.
- Provide mother and child healthcare (antenatal, natal, post natal care and family planning).
- Conduct sexually transmitted infection training workshop to ARCS clinic midwives and provide STI kits.
- Provide outreach immunization through ARCS clinics.
- Assist in the renovation of up to ten ARCS clinics.
- Contribute input to publicise the Movement involvement through information bulletins, articles and imagery on the intervention.

**Programme Component 5: HIV and voluntary non-remunerated blood donation**

**Outcome:** Vulnerability to HIV and its impact is reduced through prevention of further infection and reducing stigma and discrimination; access to safe blood for children and mothers is improved.

**Key activities:**

- Expand the project in the existing target branches and in new branches.
- Conduct baseline survey.
- Conduct 12 training of trainers and 80 youth peer education courses (each course targets 25 persons).
- Mark the celebration of World AIDS Day and World Blood Donor Day.
- Organize at least two anti-stigma and discrimination campaigns and 40 symposiums on voluntary non-remunerated blood donation.
- Conduct 20 voluntary non-remunerated blood donation motivation trainings to 200 youth peer educators in Kabul, Herat and Mazar and Jalalabad branches and establish 20 club 25 in mentioned cities.
- Conduct 250 voluntary non-remunerated blood donation sessions for 5000 students, teachers and principals in Kabul, Balkh, Herat and Nangarhar provinces.
- Conduct four counselling training sessions to 100 ARCS health staff and teachers selected as counsellors.
- Conduct 58 refresher trainings to 1,440 people (HIV and AIDS trainers, district coordinators, YPEs, counsellor, and community-based first aid trainers).
- Conduct 1,000 sessions through 1,300 peer educators to 10,000 peers at targeted areas.
- Conduct training of trainers for HIV prevention treatment care and support trainers (CBVs), conduct training for HIV positive volunteers as peer educators and provide training session for 350 CBFA team leaders.

**Programme Component 6: Social welfare (Marastoon)**

**Outcome:** The living (shelter, food and non-food) and health conditions of the residents of the *Marastoons* are improved.

**Key activities:**

- Offer at least 10 vocational training alternatives to 250 people.
- Provide health and care services to up to 25 per cent (450 individuals) of the beneficiaries.
- Conduct a management training workshop to *Marastoon* key staff.
- Follow up of the residents returned to mainstream society.

**b) Potential risks and challenges**

Security is identified as the major risk for the programme, while access to disaster prone and disaster affected areas is always a challenge. Access to women in the community is difficult due to social and cultural practices and this poses a real challenge to the provision of effective services to this group and their children who are often among the most vulnerable. Although the security situation is outside the control of the national society, efforts will be made to reach out to women and their children in the community through increasing female health workers and staff when possible.

**Organisational Development/Capacity Building**

**a) The purpose and components of the programme**

**Programme purpose**

Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability

The organizational development/ capacity building programme budget for 2010 is CHF 988,632 and in 2011 is CHF 970,931.

For 2010 and 2011 the organizational development programme seeks to lead the ARCS towards becoming a strong and well-functioning national society and increasing its institutional capacity by developing its human resources, financial systems, branches, legal base and management systems for its youth, volunteers and members. This will help the national society in providing effective and efficient services to vulnerable communities thereby contributing towards Global Agenda goal three (increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability). The expected outcomes of the programme are: i) supporting the ARCS organizational development process, which will cover human resource development, branch development, financial management and sustainability development, planning, monitoring and reporting development; ii) leadership and management development; iii) youth development; and iv) volunteering management development. The volunteering development project will be a continuation of the ICRC-Swedish Red Cross integrated programme project activities. Only those activities will be included in the International Federation budgets which are not included under the integrated programme project of the ICRC. In 2010-11 a total number of 125,000 people be reached and will benefit directly and indirectly from the organizational programme. About 30 per cent of the people would be female.

<b>Project</b>	<b>Direct</b>	<b>Indirect</b>	<b>Total</b>
General capacity building	1,500	0	1,500
HR	60	1,500	1,560
Finance	40	1,500	1,540
Membership	2,200	9,200	11,400
Youth/volunteers	40,000	60,000	100,000
Branch development	1,000	8,000	9,000
<b>Total</b>	<b>44,800</b>	<b>80,200</b>	<b>125,000</b>

This programme will channel support to the ARCS organizational development projects through the developed harmonized operational plan. The 2008 harmonized plan was a major learning process for all programmes of the ARCS. It not only helped the ARCS programmes to achieve their set objectives through a harmonized approach but it also enabled them to share experiences between themselves, the International Federation and ICRC programmes while developing the 2009 harmonized plan. The youth and volunteering component of the organizational development programme is integrated with community-based development programmes, community based first aid and HIV components of the ARCS health and disaster management programmes. The humanitarian value programme (discrimination and anti-stigma) is implemented through school students and community volunteers of the ARCS. The disaster response activities of the ARCS are mainly implemented by community volunteers. During the planning process, the organizational development, health and disaster management programmes developed their respective projects and activities following the integrated approach, which will also be considered during implementation process. The Afghanistan organizational development programme is aligned with the “enabling action 1” of the International Federation Strategy 2020, which will contribute to build strong national society. This will also capitalize on progress made in activating the governing board during the first half of 2009 and working towards the proper separation of executive and management functions. With the further development of the membership programmes at branch level and building branch capacity, it is planned to conduct a general assembly within this timeframe and strengthen the representative membership of the board as well.

**Programme Component 1: Supporting the national society organizational development process.**

**Outcome:** The service delivery capacity of ARCS is enhanced at all levels (headquarters and branches) and achieving towards the status of strong and well-functioning national society will provide effective services to the vulnerable countrywide.

**Key activities:**

- Support the implementation process of the human resource development policy, regulation,

- procedures and plans for both headquarters and branch levels.
- Support development of ARCS warehousing system including procedures, policy, hardware, communications, workshop and training through the bi-lateral partnership with Norwegian and Danish Red Cross projects.
  - Continue providing technical support to ARCS planning, monitoring and reporting systems development.
  - Continue supporting ARCS accounting and financial management system's development process.
  - Technical support to ARCS.
  - Engage an external consultant and support the ARCS fundraising and resource mobilization development process.
  - Support ARCS branch and membership development programme in 34 branches and establish local assemblies and conduct training/workshops for the local assembly members of the branches.
  - Support and strengthen ARCS regional offices for better coordination and organize regional movement coordination meetings in five regions.
  - Support ARCS by reviewing its organizational development and capacity building needs, revising the ARCS strategic plan 2008-2012 and making the necessary changes in line with the International Federation's Strategy 2020.

**Programme Component 2: National society leadership and management development.**

**Outcome:** Capacity of the ARCS's governance board members and senior management to effectively lead the organization and its service delivery is improved.

**Key activities:**

- Organize orientation for the ARCS board members and senior management.
- Explore the opportunities for ARCS board members and senior management to have access to training and workshops according to their needs.
- Support ARCS to hold an annual general meeting/general assembly at headquarters.
- Support ARCS leadership to convene regular board meetings.
- Provide technical support and investigate training opportunities for ARCS board members at regional and global levels.
- Provide support to the ARCS president and secretary general /deputy secretary general to attend statutory meetings and suitable conferences at both regional and global levels.

**Programme Component 3: National society youth development.**

**Outcome:** The ARCS base of youth volunteers is strengthened.

**Key activities:**

- Review and adopt the youth policy on the quality service delivery of the youth programme and the retention of the youth volunteers.
- Maintain a sound procedure on youth club activities in ten branches.
- Facilitate one national training workshop on volunteer management for the headquarters and branches.
- Conduct youth campaigns on promotion of Red Cross Red Crescent, principles and values and international Red Cross day events.
- Support an annual national youth camp for 400 male and female youth volunteers and exchange visit at national and international level.
- Conduct two training workshops for youth supervisors on leadership development.

**Programme Component 4: National society volunteering development.**

**Outcomes:** ARCS volunteer mobilization and management system is improved and strengthened.

**Key activities:**

- Provide technical support to ARCS by developing and implementing volunteer policy, a

systematic volunteer database and a volunteer management plan of action through the “integrated programme” project between ICRC-Swedish Red Cross.

- Provide technical support to ARCS to organize training and workshops on volunteer management for the headquarters and branches.
- Implement the newly developed volunteering policy in the national society headquarters and five branches.
- Support ARCS plans to strengthen the volunteer management department.

**b) Potential risks and challenges**

There is an essential need to define the roles and responsibilities of the ARCS president (chair of the governance board); the secretary general and deputy secretary general. Once their level of authority is defined it will assist with decision making and the implementation of programmes. Employment of too many unskilled, unsuitable and unprofessional staff in the organization is another major challenge for the ARCS in respect of human resource management. Security is another key constraint which hampers the programmes at branch level. Due to the high level of security threats at branch level, access to do proper monitoring and evaluation is another significant issue for all programmes. The International Federation through the leadership and management development programme is helping the national society to understand and appreciate the roles and responsibilities of the president, secretary general, deputy secretary general and heads of regional offices. The ARCS will be able to identify an appropriate organizational structure with an optimum number of positions and minimum required skills, qualifications and experience through a human resource development initiative which will help the national society to address its human resource related issues. The ICRC and International Federation continuously remind the ARCS about the maintenance of its neutrality and independence, building its image, defining and understanding the roles and responsibilities of branches and the volunteers which will enable/assist the ARCS to operate in the conflict areas.

**Principles and Values**

**a) The purpose and components of the programme**

<b>Programme purpose</b>
To strengthen ARCS for the best practice of the principles and values and to advocate for gender and marginalized groups.

The principles and values programme budget for 2010 is CHF 23,529 and for 2011 is CHF 23,529.

The principles and values programme will train the staff and volunteers of the health and disaster management programmes on how to incorporate the principles and values into their action whilst implementing programmes and conducting activities. The principles and values programme will advocate for gender issues at all levels of the national society staff and volunteers and the community as well. This will be achieved by conducting gender mainstreaming workshops, seminars and meetings with different ARCS programmes and other stakeholders in order to focus on the accessibility of women, children, and elderly people and marginalized members of the community as well.

The principles and values programme will mainly target the existing national society staff and volunteers with training and giving them orientation on the incorporation of principles and values into their behaviour and action. Currently, there are 1,500 programme and non-programme staff in the national society and around 40,000 volunteers. The direct beneficiaries of principles and values will be 3,000 ARCS employees (1,500 each year) and 20,000 volunteers (10,000 each year) in 16 provinces (30 per cent of whom are female). The indirect beneficiaries of principles and values will be the targeted beneficiaries of health, disaster management and organizational development programmes, because the principles and values programme is a cross cutting activity and is carried out by the operational programme staff and volunteers demonstrating the principles and values to the field.

<b>Programme component 1: Promotion of humanitarian principles and values.</b>
<b>Outcome:</b> The ARCS is regarded by the community as a well functioning humanitarian organization

through the promotion of the Fundamental Principles.

**Key activities:**

- To develop a principles and values policy to outline the intervention of the programme in the Afghanistan context.
- Revise the principles and values training manual.
- Organize principles and values awareness workshops and co-ordination meetings for the different ARCS programme staff and volunteers in the headquarters and 15 branches.

**Programme Component 2: Operation of Fundamental Principles and humanitarian values.**

**Outcome:** Beneficiaries and the community feel content, comfortable and proud of the ARCS programme service delivery.

**Key activities:**

- Organize 40 training workshops for youth, community based first aid and disaster management volunteers about principles and values. Raise awareness of discrimination and intolerance through the ARCS operational programmes in the field.
- Monitor ARCS field activities to locate gaps where the principles and values can be highlighted.
- Determine the extent of female participation in the national society activities at all levels.
- Address the side effects of discrimination, stigma and intolerance throughout meetings, workshops and seminars to ARCS staff and volunteers.
- Conceptualize and disseminate a culture of peace and co-existence into the principles and values components.

**b) Potential risks and challenges**

The commitment from the ARCS leadership, staff and volunteers is very important for the integration of the principles and values components into their activities. The unstable security situation in the country is another risk which will prevent access to women and marginalized groups in remote areas. To attract the full support of the ARCS leadership and enhance staff awareness, meetings and workshops will be conducted for them. Although the security constraints are beyond the control of the programmes, they may still focus on the areas where there are fewer risks, and adopting the community approach of community-based first aid and disaster management volunteers would help to apply and practise the principles and values at community level.

## Role of the secretariat

**a) Technical programme support**

The International Federation Afghanistan country office has four main programmes including disaster management, health and care, organizational development and principles and values. It is worth mentioning that the principles and values programme is under the organizational development umbrella. The Secretariat is being restructured to serve the needs of its constituent national societies and the field. The devolution of operational responsibilities from Geneva to the zones is underway and further rationalization of guidance is being incorporated into the Strategy 2020 document. The role of the national society will assume greater significance in accordance with the stated priorities of the secretary general of the International Federation and the country office will form an integral part of its host national society. The principles and values programme is supported under the organizational development programme and one officer is partially assigned to take responsibility of the principles and values file. There will be six expatriate delegates including head of delegation, programme coordinator, organizational development, health, disaster management and finance/administration delegates to support the ARCS core programme activities.

The International Federation's country office currently provides technical support to the ARCS's disaster management, health, organizational development and principles and values programmes. Additional support is provided by the International Federation's South Asia regional office in New Delhi

and the Asia Pacific zone office in Kuala Lumpur. These offices will provide further technical support to key projects including human resource development, finance development and logistics development. These supports are mainly technical expertise and advice in the field of human resource development and human resource management, financial development and resource mobilization and financial resources.

The organizational development and capacity building department has been providing technical and financial support to the ARCS harmonized plan mainly by assisting the national society to develop its institutional infrastructure and developing the necessary policies, procedures, guidelines, rules and regulations for this to occur, and enhancing the capacity of the ARCS staff by conducting training and workshops. For some specific technical support or professional expertise, the International Federation will engage a consultant for a short period. Technical and consultancy support mentioned above will also be sought from South Asia regional office and Asia Pacific zone organizational development coordinator if needed.

#### **b) Partnership development and coordination**

The harmonization operational plan has enhanced and improved the coordination among the Movement partners. Furthermore, the ARCS have been holding regular tripartite coordination meetings with Movement partners. In the field of organizational development and capacity building there is close cooperation and coordination with the ARCS, partner national societies (Norwegian, Danish, Swedish and Japanese Red Cross Societies) and ICRC (cooperation department) to achieve the objectives set in the ARCS five-year strategic plan. A number of other project cooperation agreements for logistics development have also been put into practice through partnership projects. The International Federation will play a vital role in the implementation of the ICRC-Swedish Red Cross integrated programme project on the ARCS volunteering management and development. There are signed partnership agreements with several ministries of the Afghan government and partner national societies which fully support the organizational development and capacity building programme plan. The national society and country office take part in the regional coordination meetings and networks such as the regional health and HIV meetings, the disaster management working group meetings as well as organizational development, PMER and communication network meetings.

As the only nationwide indigenous organization in Afghanistan, ARCS is a well recognized humanitarian organization and works in close cooperation with the Government and the UN agencies. The ARCS is a member of the national commission for disaster management, the government's disaster management coordinating body. The ARCS branches are also members of the provincial commissions. The ARCS has been implementing the basic package of health services through its 47 clinics and ten emergency mobile units, which is the strategy of the ministry of public health. The ministry has officially recognised the ARCS as one of its strongest partners in the implementation of the government health strategy (a memorandum of understanding has been signed between the ministry of public health and the ARCS). The ARCS has been a member of the Inter-Agency emergency task force, comprising the World Health Organization, other UN agencies and government ministries to deal with avian and human influenza at national level. The national society has been a regular participant in the inter-agency health cluster meeting led by the World Health Organization and it is also a member of the national AIDS control programme led by the ministry of public health. In addition the ARCS has been implementing a drug abuse harm reduction programme through one drug abuse rehabilitation centre in the central region, which is supported by the ministry of counter narcotics. The ARCS has also signed memorandum of understanding with the ministry of education and ministry of public health for the ongoing implementation of HIV and AIDS programme.

At community level, the ARCS has developed a good working relationship with the community elders and school head masters to run its membership and volunteers programmes in the communities which give the national society a widespread, functioning and energetic base.

The principles and values programme close partnership will be sought with the ICRC, UN agencies, CARE International, the Afghanistan independent human right commission, and the government ministries of education and religious and social affairs.

### **c) Representation and advocacy**

The ARCS has an auxiliary role to the Afghan government, and the ARCS has been supporting the ministry of public health to achieve its set objectives by implementing various health projects. The International Federation has been regularly working with the ARCS to strengthen the coordination and communication between the two stakeholders at country level. The International Federation health programme staff members are participating together with ARCS in the key stakeholders meetings and conferences to advocate for the national society as mentioned above. Similarly, the International Federation has been supporting the ARCS health team members to participate in international conferences regularly, where the national society health programmes are highlighted and have an interest.

## Promoting gender equity and diversity

The ARCS has considered gender balance a central component in each phase of the programme planning and implementation, making for a better impact in the community. Further, the recruitment of female personnel at all levels of the organization has been emphasized and included in the human resource policy document which is currently under development. The International Federation and the national society have been working together to promote gender balance in its programmes and support areas and in the basic health centres (clinics) have been providing services primarily focused on women and children aimed at reducing morbidity and mortality. Altogether, 65 female health professionals (doctors and midwives) are working in, or running activities for, the 37 International Federation supported community health centres. Similarly more focus has been given to recruit female community-based first aid volunteers and youth peer educators in different parts of the country. Through the HIV and AIDS prevention programme, the national society has recruited 450 female youth peer educators (45 per cent) among a total of 1,013 youth peer educators. Approximately 25,000 youth volunteers are benefiting through their involvement in eight youth clubs in five regions of the country. Almost 38 per cent of them are female. This is a positive indication for gender development in the youth network in Afghanistan. In the on-going membership development programme which recruited more than 6,000 members, among them 28 per cent are female. However, the security situation is a major threat to the ability of female employees and volunteers to work in many parts of the country. There are many cultural and religious issues that also prevent full acceptance of the affirmative action being taken by the national society in this regard.

One of the main humanitarian activities is to advocate for gender equity at all levels in the national society. This includes staff, volunteers and beneficiaries. The principles and values programme is monitoring activities to ensure that women and men are taking an active part in national society programmes, social activities and decision making. In the meantime gender is mainstreamed for all ARCS operational programmes in the field.

## Quality, accountability and learning

In order to ensure quality of work, the health department of the ARCS will carry out monitoring and supervision visits to the field on a quarterly basis. The health officers and trainers (at regional and provincial levels) will carry out monthly monitoring visits. By the end of the programme (appeal timeframe) an internal rapid assessment of all projects as well as mid-term evaluation of the comprehensive community-based health intervention and final evaluation of the HIV and AIDS project will be carried out to evaluate the effectiveness of the programme. The International Federation health department will provide technical support to the ARCS health department in designing and developing monitoring, supervision and evaluation formats and would be a part of the monitoring and evaluation team.

There will be a review of the ARCS disaster management programme (strengthening disaster response and preparedness for response) supported by Danish Red Cross in 2010. The last well-prepared national society review has been done in 2007 and the next round will be done in 2011.

The principles and values programme staff in the national society and International Federation country delegation with the support of the PMER unit are dedicated to establishing a monitoring and evaluation

mechanism on a monthly, quarterly and annual basis. The PMER aspect of the principles and values programme will continue to be strengthened in the coming years.

Currently PMER in Geneva is finalizing a revision of the planning training module based on the project planning process approach and monitoring and evaluation training. This training will be rolled out in 2010-11 to enhance the quality and accountability of programmes. Additionally, work is ongoing for the finance development system, with the ARCS finance manual and accounting forms already developed.

How we work	
<p>The International Federation's activities are aligned with its 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".</p>	<p><b>Global Agenda Goals:</b></p> <ul style="list-style-type: none"><li>• Reduce the numbers of deaths, injuries and impact from disasters.</li><li>• Reduce the number of deaths, illnesses and impact from diseases and public health emergencies.</li><li>• Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability.</li><li>• Reduce intolerance, discrimination and social exclusion and promote respect for diversity and human dignity.</li></ul>
Contact information	
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## MAAAF001 - Afghanistan

### Budget 2010 - 2011

#### Budget 2010

All figures are in Swiss Francs (CHF)

	Disaster Management	Health and Care	Capacity Building	Principles and Values	Coordination	Total
Supplies	1,104,300	943,427				2,047,727
Land, vehicles & equipment	14,000		39,000			53,000
Transport & Storage	126,158	197,570	9,492			333,220
Personnel	291,668	503,392	362,185	15,000	124,542	1,296,787
Workshops & Training	252,000	193,650	246,000			691,650
General Expenditure	148,352	466,340	264,268	7,000		885,960
Depreciation	7,203	8,571	3,426			19,200
Contributions & Transfers						
Programme Support	135,122	160,793	64,261	1,529	8,658	370,364
Services						
Contingency						
<b>Total Budget 2010</b>	<b>2,078,803</b>	<b>2,473,743</b>	<b>988,632</b>	<b>23,529</b>	<b>133,200</b>	<b>5,697,907</b>

#### Budget 2011

All figures are in Swiss Francs (CHF)

	Disaster Management	Health and Care	Capacity Building	Principles and Values	Coordination	Total
Supplies	1,251,000	955,927				2,206,927
Land, vehicles & equipment	4,000		39,000			43,000
Transport & Storage	88,763	198,087	9,370			296,220
Personnel	238,134	512,534	351,217	15,000	124,542	1,241,427
Workshops & Training	200,000	135,660	241,000			576,660
General Expenditure	106,507	445,301	263,852	7,000		822,660
Depreciation	7,060	8,758	3,382			19,200
Contributions & Transfers						
Programme Support	131,770	156,853	63,111	1,529	8,658	361,921
Services						
Contingency						
<b>Total Budget 2011</b>	<b>2,027,234</b>	<b>2,413,119</b>	<b>970,931</b>	<b>23,529</b>	<b>133,200</b>	<b>5,568,014</b>

