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Afghanistan Annual Report 2012

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of Red Cross and Red Crescent Societies

MAAAF001

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**This report covers the
period 1 January to**

31 December 2012

*Volunteers distribute hygiene kits in
Sar-e-Pul on 14 and 15 August
2012. Photo: ARCS.*



Overview

During the reporting period, the Afghan Red Crescent Society (ARCS) focused on alleviating the suffering of vulnerable people and communities through contributing to the decline in deaths, injuries and impact from disasters, diseases and public health emergencies. This was done through increasing ARCS and community capacity to address situations of vulnerability and reduce intolerance, discrimination at the same time encouraging respect for diversity and human dignity through the disaster management (DM), health, and organisational development (OD) programmes.

In 2012 Afghanistan witnessed severe flooding due to the substantial accumulation of snow across the northern region as a result of the harshest winter in 15 years. The flooding resulted in vast quantities of water gushing across the plains where large populations reside, particularly in Sar-e-Pul province. In addition to this, a number of smaller flood events occurred in the same period in the northern provinces of Jawzjan, Faryab, Samangan, Balkh and Takhar. A total of 18,000 people were affected by the floods. ARCS, with support from the International Federation of Red Cross and Red Crescent Societies (IFRC), responded to the needs of the affected population through provision of health care and sanitation services as well as distribution of shelter and other non-food items.

The severe drought and resulting food insecurity in Afghanistan towards the end of 2011 was followed by a formal declaration of emergency and resulted in the United Nations (UN) agencies along with the Afghan government launching an appeal worth USD 142 million to respond to the immediate as well as longer term needs of 14 drought-affected districts in Afghanistan. The effects of the drought spilled into 2012.

ARCS, IFRC, and International Committee of Red Cross (ICRC) responded to the emergency by building on the achievements made by IFRC and ARCS in the 'IFRC disaster emergency response' projects supported by

the Japanese government in 2010 and 2011. The outcome of the assistance was to reduce vulnerability of the affected communities to acute hunger and malnutrition by providing immediate food support targeting 22,500 households. In addition to the food assistance, the intervention also aimed at strengthening the capacity of ARCS to undertake an effective drought response.

The ARCS OD programme had done well to promote organisational visibility riding on the organisation's activities. ARCS made significant progress in 2012 in its organizational strengthening agenda with the successful completion of a constitutional review, branch assemblies, and finally its first-ever general assembly. In addition a planning, monitoring, evaluation and reporting (PMER) unit was formed and, while in its infancy, has achieved some modest gains in disseminating key PMER concepts throughout ARCS programmes at headquarters and branch levels.

The security situation remains volatile across the country, with events occurring during the reporting period that have increased unrest and caused human casualties. In this context, ARCS must be prepared to take on increasing service delivery, particularly in the areas of primary health care service delivery, preventative care, water and sanitation, social welfare, and disaster preparedness and response as external resources including the number of external agencies dwindle. The conflict continues to cause increasing threat to individual freedom, human dignity and basic rights of the Afghan population, particularly those of vulnerable groups comprising of women, children, ethnic minorities, the elderly and people with disabilities.

Working in partnership

ARCS partners providing technical and financial support include the following:

| Operational Partners | Area of Collaboration |
|---|---|
| IFRC | Coordination, resource mobilisation, technical and programmes support |
| ICRC | Technical and programme support |
| Partner National Societies (PNS) – Norwegian Red Cross (in-country), Swedish Red Cross, Danish Red Cross, British Red Cross, Australian Red Cross, Canadian Red Cross, Finnish Red Cross, Japanese Red Cross, German Red Cross, Icelandic Red Cross, Netherlands Red Cross, Italian Red Cross | Financial, technical and programme support |
| Japanese Government | Food security |
| National Disaster Management Authority (ANDMA) | Disaster coordination |
| United Nations Office for the Coordination of Humanitarian Affairs (UN OCHA) | Disaster coordination |
| UNICEF | HIV |
| WHO | HIV and emergency response |
| WFP | Disaster relief |
| Action Aid | Disaster relief |
| Afghan National Police | Food distribution |
| Ministry of Defence | Disaster relief |
| Ministry of Education | Youth development and HIV |
| Ministry of Public Health (MoPH) | Health and HIV |

Progress towards outcomes

Business Line 2: To grow Red Cross Red Crescent services for vulnerable people

| Measurement | | | |
|---|-----|---------------------|--------------------------------|
| Indicators | BL | Annual Target | Year to Date Actual |
| Outcome 1: (DM) The ARCS is better organizationally prepared to respond to and cope with a rising number of natural disasters. | | | |
| Output 1.1: ARCS standard operation procedures, contingency plans, relief management guidelines and systems of disaster response are in collaboration with partners improved; standardized and enforced. | | | |
| A four-year strategic plan for DM along with standard operating procedures (SOPs) has been finalized | 0 | 1 | 1 |
| An earthquake contingency plan has been field tested and disseminated to all 34 ARCS branches. | 0 | 1 | Rescheduled |
| Output 1.2: Adequate trained human and logistic resources of ARCS are available at all levels in addition to a systemic pre-positioning of relief supplies in all ARCS branches. | | | |
| 50 ARCS headquarter and branch staff have been trained in relief management and logistics, NDRT and RDRT (including five female staff). | N/A | 50 | 26 (52%) |
| NFI packages for 6,000 families are procured and prepositioned in disaster prone provinces across the country. | N/A | 2,000 | 1,000 (50%) |
| ARCS trained volunteers (CBHFA; CBDRR) have conducted community needs assessments in selected disaster prone areas. | N/A | 9 | 9 (100%) |
| Output 1.3: 30 per cent of the drought affected communities in five conflict affected districts in Northern region is assisted with food assistance. | | | |
| 12,000 households (84,000 individuals) have been assisted with food relief assistance and at least three recovery projects have been initiated in drought prone areas. | N/A | 84,000 12,000 hh | 157,150 22,450 hh (187%) |
| Approximately 200 ARCS volunteers inclusive of three female volunteers have been trained and participated in field assessments and food distributions. | N/A | 500 | 375 |

Comments on progress towards outcomes

- A four-year strategic plan for ARCS was developed, approved and launched towards the end of 2011. The strategic plan covers the period 2012 to 2014 and covers all programmes, including DM. The plan will ensure focussed and effective implementation and management of DM programmes.
- ARCS with support of IFRC had planned to preposition stocks of relief non-food items (NFIs) to cover 6,000 families. However, due to funding constraints the target was revised downwards to 2,000 families. During the reporting period the winter prepositioning was made possible using existing IFRC in-country stocks with funding for transportation allocated from other DM programme institutional preparedness activities. ARCS was able to achieve prepositioning coverage for 1,000 families consisting of 1,347 blankets, 1,742 jerry cans, 1,049 kitchen sets, 868 tarpaulin and 373 tents.
- ARCS conducted a field based mission training (FBMT) targeting 60 ARCS staff and volunteers from various departments, including DM and Health from 4 to 12 July 2012. A needs assessment carried out as part of the simulation resulted in the distribution of NFIs to 200 families from the most vulnerable

communities in two districts of Samangan province. Three other needs assessments were conducted in three disaster prone areas in the western region.

- A total of 250 volunteers including three females were trained in community-based disaster preparedness (CBDP) in October and November 2012 in preparation for winter emergencies to reach out to the five most disaster prone districts of Badakhshan Province (Kofab, Arghange Khowa, Shar-e-Bozorg, Yawan and Keran-o-Monjan). As a result of this, five disaster preparedness committees were established in each of the five targeted communities. In addition, 50 packages of NFIs were pre-positioned in each of the communities. The prepositioned NFI's included tents, blankets, tarpaulins, cooking sets and jerry cans.
- During the reporting period, ARCS provided food assistance to 22,450 drought affected families in five provinces of Balkh, Kunduz, Takhar, Samangan and Jawzjan. These included 2,534 internally displaced (IDP) families from Takhar, Faryab and Balkh provinces. The food distribution was completed in February 2013 and was made possible with funding from the Government of Japan. Whilst the target for the intervention targeted 12,780 households, the exercise was part of an integrated Red Cross Red Crescent Movement response, in which both ICRC and IFRC partnered with ARCS. For its part ICRC targeted 11,000 households. Thus, in the end, the combined Red Cross and Red Crescent action had a revised target to reach of 22,500 drought affected households in the affected regions in the northern part of Afghanistan.

| Measurement | | | |
|--|----|---------------|---------------------|
| Indicators | BL | Annual Target | Year to Date Actual |
| Outcome 2: (Health) Health emergency preparedness and response capacity of ARCS is enhanced. | | | |
| Output 2.1: ARCS preparedness capacity and ability to respond to the most common and frequent health emergencies is enhanced, including prepositioning of contingency stocks of essential supplies as preparation for early action. | | | |
| ARCS will have prepositioned five WatSan kits # two in each region. | 2 | 5 | 5 (100%) |
| At least 20 mobile health team (MHT) staff members have received training on emergency health topics (PSS, WatSan and vaccine preventable disease) and primary health in emergencies | 50 | 20 | 20 (100%) |
| Output 2.2: Through community assessments and consultations, communities are better prepared for health emergency response. | | | |
| Trained volunteers from 24 communities have conducted community need assessment in their respective areas integrated with CBDRR volunteers | 20 | 24 | 10 (42%) |

Comments on progress towards outcomes

- A four-day ToT training on epidemic control for volunteers (ECV) and household water treatment and safe storage (HHWTS) was conducted by ARCS targeting 16 CBHFA trainers from the northern region. The ToT was conducted from 13 to 16 May 2012. Three days after the training a serious flood occurred in Sar-e-Pul province. The trained volunteers further cascaded the knowledge they had acquired to 10 other volunteers who in turn trained the flood-affected communities on household water treatment and safe storage. The volunteers also distributed 45,000 water purification sachet and 400 water buckets using the WatSan kits-2 1 to 2,500 flood affected households.

¹ Kit 2 is for 2000 people: it contains water treatment chlorine sachets, hygiene promotion materials, and buckets

- In addition, ARCS deployed its mobile health teams (MHT) to Sar-e-Pul city to provide basic health care services as the main hospital had been closed as a result of the floods. During the 60-day operation, the MHT assisted 214 people with first aid services, 2,043 people (307 children under 5; 1,063 females; 673 males) with out-patient services and 3,170 people (1,744 female, 1,426 male) with health education and awareness raising services.
- Prior to the flood response, the Mazar-based MHT was mobilised to Kaldar district in Balkh province in response to a measles outbreak in the area. The team vaccinated 649 children between the ages of six and 12 months against measles. Similarly, in three villages in the Batikot district of Jalalabad, the MHT participated in the national immunisation day (NID) campaign as monitors. The MHT visited 5,554 households to monitor the immunization exercise and was able to identify 15 HH who had been missed by the campaign. The children in the identified households were vaccinated immediately.
- As part of the capacity building initiative in emergency health, IFRC supported ARCS to conduct a four-day training workshop on emergency health (EH) from 30 April to 3 May 2012. A total of 25 ARCS health staff, including 20 doctors and nurses attached to MHT, benefitted from the training. The training focused on the control of outbreaks of diarrhoeal diseases in addition to public health in emergencies. The training also provided the doctors and nurses with the necessary skills required to prevent and treat preventable disease in their communities.
- The psychosocial support (PSS) training manuals were adopted at a PSP ToT training that took place from 23-27 September 2012. A total of 25 ARCS staff from headquarters and regional branches participated in the training. The participants included staff from health, CBHFA, volunteer management, DM, OD, Logistics and IT departments. A follow up ToT is planned for 2013.
- Volunteers from 10 disaster-prone communities conducted community assessments to identify community needs and prepared action plans as part of their training in CBHFA. The integration of CBHFA with CBDRR remained limited to training of CBHFA volunteers in CBDRR only. However, there are plans to integrate CBHFA and CBDRR activities in future.

Business Line 3: To strengthen the specific Red Cross Red Crescent contribution to development

| Measurement | | | |
|---|-----|---------------|---|
| Indicators | BL | Annual Target | Year to Date Actual |
| Outcome 1: (Disaster Management) Through close work with communities and relevant institutions, the ARCS is increasing community resilience in selected areas. | | | |
| Output 1.1: A context-specific disaster risk reduction (DRR) approach complete with a community-based disaster risk reduction (CBDRR) training curriculum, and aligned, where relevant, with the CBHFA approach, is prepared, and a pool of minimum four ARCS master trainers is achieved. | | | |
| The DRR approach has been contextualized complete with CBDRR materials in close consultation with ARCS respective branches; regional ANDMA offices and communities. | N/A | N/A | 25 ARCS staff attended the DRR contextualisation workshop |
| 300 CBDRR volunteers have been trained. | | 300 | 30 (10%) |
| Measurement | | | |

| Indicators | BL | Annual Target | Year to Date Actual |
|---|-----|---------------|---------------------|
| Output 1.2: Vulnerability assessments and sensitization of communities are initiated in at least two regions under the guidance of the regional CBDRR/ CBHFA trainers. | | | |
| Two VCA training workshops for 50 participants from ARCS headquarter and branches as well as other stakeholders have been conducted at the regional level. | N/A | 50 | 28 (56%) |
| Identification of relevant sites and needs assessments have been carried out in preparation for two risk reduction projects. | N/A | 2 | 2 (100%) |
| Output 1.3: Targeted ARCS branches disseminate risk reduction awareness session through schools. | | | |
| Four schools in two different regions have been involved in DRR awareness sessions. | N/A | 4 | 3 (75%) |
| Comments on progress towards outcomes | | | |
| <ul style="list-style-type: none"> • A community-based disaster risk reduction (CBDRR) training and contextualization workshop was organized by ARCS with the support of IFRC. The workshop was facilitated by the regional disaster risk reduction (DRR) advisor from the South Asia regional delegation (SARD), IFRC Afghanistan's DRR officer and ARCS CBDRR team. A total of 25 people from ARCS, ANDMA and IFRC participated. • Vulnerability and capacity assessments (VCAs) were conducted in Herat as part of the VCA training for volunteers. The VCAs identified three villages (Roshnon, Qaisan and Rawzanak) for DRR interventions. This was followed by the formation of village DRR committees in the selected villages. Each DRR committee was composed of 10 community-based volunteer members who were trained on CBDRR concepts. • An integrated CBDRR/CBHFA training was jointly provided by the ARCS and IFRC health and DM teams to members of the three DRR committees. The objective of the training was to ensure sustainability of DRR activities by cascading the CBDRR training to the selected communities. • A CBDRR interim meeting was organized for 12 persons from the DRR committees and ARCS staff in Herat from 21 to 23 October 2012. The objectives of this meeting were to: <ul style="list-style-type: none"> ○ review and share CBDRR activity plans and recommendation from VCA reports and mitigation plans; ○ brief participants on achievements and challenges in implementing CBDRR activities. • A DRR flood mitigation project was completed in the village of Roshnon with the aim of reducing the risk of recurring flood hazard to farmlands adjacent to rivers and thereby protecting food security and livelihoods. • Other risk reduction activities included raising awareness among children through a DRR drawing competition held for 300 school students in Roshnon, Qaisan and Zang Saba villages. | | | |

| Measurement | | | |
|---|----------|---------------|----------------------|
| Indicators | BL | Annual Target | Year to Date Actual |
| Outcome 2: (Health) Increased access to improved curative and preventive health services at community level. | | | |
| Output 2.1: Greater equity and access for mothers and pregnant women to essential health services is achieved to ensure reduction in maternal and child-mortality. | | | |
| ARCS will have supported 44 clinics providing basic health care services to the communities particularly women and children. | 826,750 | 850,000 | 1,931,547 (227%) |
| ARCS clinics have increased immunization activities in close coordination with Ministry of Health and its inherent targets. | 380,000 | 400,000 | 534,132 (134%) |
| New buildings for existing clinics with delivery rooms have been constructed in remote areas increasing vulnerable mothers/ pregnant women's access to good quality health care. | 0 | 9 | 6 (67%) |
| Output 2.2: ARCS health care service delivery is improved through scaling up the knowledge and skills of its health professionals, including at community primary health care level. | | | |
| 88 Clinic staffs (doctors and midwife/nurses) have on a yearly basis received basic /refresher trainings on IMCI, EoC3, IP4 and MNCH sessions. | 227 | 227 | 227 (100%) |
| Output 2.3: Increased life skills and knowledge amongst youth in terms of sexual & reproductive health, safe health behaviour and practices. | | | |
| 50 male and 50 female youth volunteers have received master trainings on sexual reproductive health and STIs through four ToTs in four regions. | 100 | 100 | 100 (100%) |
| 500 youth peer educators are trained in sexual reproductive health and STIs using YPE approach. | 525 | 500 | 775 (155%) |
| 100 young people have contributed in VNRBD activities through establishing four club-25 approaches in four provinces. | 15 clubs | 11 | 8 (72%) |
| | 500 | 100 | 120 (120%) |
| Output 2.4: The capacity of communities to cope with communal diseases is enhanced – especially through provision of water and sanitation (WatSan) and CBHFA activities. | | | |
| 600 male and 240 female volunteers have received specialized training on specific common diseases as per specific community assessments. | 0 | 600 male | 270 males (45%) |
| | 0 | 240 female | 180 females (75%) |
| Six health committees in six CCBHI target areas have been established. | 9 | 6 | 6(100%) |
| 120 volunteers have been trained on hygiene promotion and campaigns in six CCBHI target areas. | 360 | 120 | 200 (229%) |
| Comprehensive Community Based Health Interventions have been expanded to nine new target areas, where 624 sanitary latrines (25% of targeted communities) and 100 wells have been dug. | 9 | 9 | 6(67%) |
| 11 wells and 170 latrines have been constructed in the current | 43 wells | 14 | 14 |

| | | | |
|-------------------------|-----|-----|-----------|
| six CCBHI project areas | | | (100%) |
| | 263 | 170 | 160 (94%) |

Comments on progress towards outcomes

- During the reporting period, almost three million people were reached with various interventions which include maternal newborn and child health (MNCH), immunization, emergency health and community based health and first aid (CBHFA) services and through ARCS's MHT, and basic health centres (BHC). A total of 1,931,547 beneficiaries were reached through basic health centres, the majority (67 per cent) of whom were women and children.
- A total of 227 ARCS staff comprising of doctors, midwives and nurses received basic /refresher trainings on emergency obstetric care (EoC), infection prevention (IP) and MNCH.
- Eight rounds of the National Immunization Day campaign were carried out, which resulted in the successful mobilization of communities to immunize their children against polio. Throughout the whole campaign, ARCS administered polio drops to 534,132 children through CBFHA volunteers (249,933), MHTs (24,462) and clinics (259,737) in Nangarhar, Kunar, Laghman and Nuristan provinces.
- A total of 450 ARCS volunteers (270 male and 180 female) conducted assessments in 24 villages to determine health and hygiene needs of communities in the targeted villages. Following the assessments, the volunteers received CBFHA training focussing on the specific health problems identified during the survey.
- In addition to the CBHFA training, 200 (100 male and 100 female) volunteers in Balkh province were trained in health and hygiene promotion with another 80 volunteers (40 male and 40 female) receiving training in reproductive health in the same province.
- A total of 775 volunteers, 55 per cent more than the planned 500, were trained on youth peer education and sexual and reproductive health across the four main cities of Kabul, Jalalabad, Herat and Mazar. Through the trained peer educators, ARCS was able to reach 85,000 people with information on HIV and AIDS, STIs as well as stigma and discrimination.
- Another 100 youth volunteers and teachers (50 male and 50 female) were trained as master trainers on sexual reproductive health and STIs through four ToTs workshops conducted in the four cities. In addition, ARCS jointly with the Ministry of Public Health (MoPH) marked World AIDS Day in Kabul, Jalalabad, Mazar and Herat.
- ARCS completed construction of six more clinics, 50 per cent less than the initial target of 12 clinics. In addition renovation of three ARCS clinics was completed in Kandahar, Wardak, Jalalabad and Badghiz. In order to improve quality of services to its clients, ARCS with the support of IFRC provided medical and non-medical items to all the 44 ARCS clinics and 17 MHTs.
- The CCBHI¹ project was expanded to six new villages (in addition to the existing project in nine villages) in Balkh province following a rapid assessment that was undertaken by project the staff in 2010. The findings of the assessment indicated significant need for health and hygiene promotion activities, safe drinking water, and sanitation facilities in these newly identified villages.
- In order to facilitate the measuring of project impact at mid- and end-term, ARCS conducted a baseline study of the targeted areas before the activities were implemented.

- Some of the anticipated funding for the CCBHI project did not materialise resulting in the scaling down of the project. In addition, the unstable security situation in targeted villages resulted in the termination of planned activities in some CCBHI target areas. This necessitated a downward revision of planned activities. The number of the 263 planned latrines was therefore revised downwards to 170 of which 160 were constructed. Eleven water wells were also constructed in the CCBHI target areas. The CCBHI project received funding from the British, Swedish and Spanish Red Cross Societies.

| Measurement | | | |
|---|-----|---------------|--|
| Indicators | BL | Annual Target | Year to Date Actual |
| Outcome 3: (Organisational Development) The institutional capacities of ARCS is enhanced at all levels to achieve a stronger and more sustainable National Society able to provide effective and higher quality services in keeping with broader levels of acceptance countrywide. | | | |
| Output 3.1: Updated statutes, Red Crescent - and Emblem Law are developed and enforced; governance board at all levels is put in place and discharging their duties, roles and responsibilities accordingly. | | | |
| An ARCS revised constitution has been approved by government and disseminated to staff, volunteers and governance departments. | N/A | 1 | 1(100%) |
| Provincial assemblies have been established and a general assembly (GA) has been held. | N/A | 2 | 2(100%) |
| Output 3.2: Policies, procedures, guidelines and systems on management and skills building of Afghan Red Crescent are developed in line with Strategy 2020. | | | |
| Most ARCS policies and guidelines on HRD and HRM have been initiated and app. 20% of ARCS managerial staff has access to management- and technical skills building opportunities in or outside the country. | N/A | N/A | N/A |
| Output 3.3: The financial management capacity of ARCS is strengthened at all levels through the installation of an enhanced computerized accounting and updating of financial regulations and procedures. | | | |
| Account keeping, financial reporting, internal control mechanism and financial management system of ARCS at HQ and Branches has improved. | N/A | N/A | The financial management capacity of ARCS has been strengthened at HQ through the installation of the NAVISON system |
| Output 3.4: The functional capacity of branches has been strengthened – leading to improved services and response to emergencies in line with its strategic and operational plan. | | | |
| 15% of branches are better functioning according to the well functioning branch standard. | N/A | 15% | There has been improved branch coordination and cooperation during emergencies. |
| Output 3.5: ARCS headquarter; regional offices and branches are connected through installation of digital divide. | | | |
| Five regional offices and four provincial branches have been connected with digital divide. | N/A | 9 | 9 (100%) |

Comments on progress towards outcomes

- The first ever ARCS General Assembly was held in Kabul in October 2012. Each of the 34 branches of ARCS was represented by three elected members, achieving a total membership representation of 102 people. The Vice President of the Islamic Republic of Afghanistan, members of the upper and lower houses of parliament, and representatives from different ministries of the Afghan government and ICRC were present.
- Another achievement during the reporting period was the approval of the ARCS constitution by the general assembly. This was the first time the ARCS membership voted the constitution into being. In the past the constitution was passed by the country's president in consultation with the Justice Ministry. This was a significant step in the democratization of the National Society.
- Seven regional Movement coordination meetings were conducted in the seven regional offices of ARCS with the secretary general participating in all. The main purpose of these meetings was to review the ARCS implementation plan and to initiate the process of developing the annual plan for 2013.
- ARCS assigned a committee to coordinate the organizational capacity assessment certification (OCAC) process. The first phase of the OCAC process was completed in December 2012 and plans were made for the second phase of the OCAC process which was completed in March 2013. The second phase of the OCAC process was facilitated by IFRC.
- The reporting and information management systems of the National Society were revitalised through the enforcement of standards to guide finance, logistics, warehousing, human resources and fleet and assets management procedures. The finance development manual was also reviewed and is being translated into local languages.
- IFRC supported the ARCS finance development project by providing new finance software (Navision). The Navision accounting software was aligned to the specific requirements of ARCS taking into account software adaptability to the local language. The Navision project was successful in achieving activity coverage ranging from system set up and configuration, master data migration, training of trainers and user training and performance testing.
- ARCS's five regional offices were equipped with IT and networking capacity. The main purpose was to strengthen the communication system between the ARCS headquarters, regional office and provincial branches.

Measurement

| Indicators | BL | Annual Target | Year to Date Actual |
|---|-----|---------------|--|
| Outcome 4: (Organisational Development) Youth programme of ARCS in youth clubs and schools is strengthened and expanded to promote youth's skills development and ensuring that youth becomes a relevant contributor to positive social development including promotion of tolerance in the community. | | | |
| Output 4.1: Youth policy; guidelines and training curriculums have been developed including plans for youth programmes in schools and communities. | | | |
| An ARCS youth policy has been developed | N/A | 1 | The youth policy was not developed, but draft youth guidelines are in use. |

| | | | |
|--|-----|-------|-------------|
| Four new youth clubs have been established | N/A | 4 | 2 (50%) |
| Twenty new youth corners have been established | N/A | 20 | 10 (50%) |
| Four-thousand new youth volunteers recruited | N/A | 4,000 | 2,808 (70%) |
| Output 4.2: Red Cross Red Crescent Movement knowledge, humanitarian values and social development issues are disseminated to youth in schools and communities enabling them to become proactively engaged in community development, awareness raising and service delivery for the community. | | | |
| 13 existing youth clubs have been supported by relevant department training to youth and volunteers as well as equipment in conformity with recommendations of the youth review. | N/A | 13 | 17 (130%) |
| Output 4.3: The ARCS volunteering management system is improved and better harmonized ensuring a trained pool of volunteers capable at producing solutions and participating in efforts to reduce risk and vulnerability at all levels. | | | |
| Volunteering management policies and guidelines, hereunder with clear indication of retaining activities for volunteers have been applied in 30% of ARCS branches and the ARCS youth volunteer department strengthened. | N/A | 30% | 50% |

Comments on progress towards outcomes

- The youth policy has not been developed but draft youth guidelines are in use across all the branches of ARCS. A training of trainers (ToT) workshop was organized for 26 youth supervisors and youth club managers from seven regions and 17 branches. The workshop was successful in standardizing the training curriculum for the youth clubs and in the development of guidelines for youth activities.
- Two new youth clubs were established in the northern and north-eastern regions of Samangan and Badakhshan. These youth clubs are expected to reach out to 600 youths in the country with ARCS working as an auxiliary to the Ministry of Education to build the educational capacity of youth as future leaders of Afghanistan. The expansion of the youth clubs is also a strategy to encourage youth participation in humanitarian work.
- A total of 10 youth corners were established in Kandahar, Helmand, Herat, Farah, Jalalabad, Kunar, Mazar-e-Sharif, Kunduz, Takhar and Kapisa branches. The youth clubs have a capacity to reach out to 10,000 youth in 10 schools. The youth corners with 50 per cent female representation serve as a platform for promoting the work of ARCS in schools and surrounding communities.
- During the reporting period a total of 2,808 youth (1,685 males and 1,123 females) from 69 schools were recruited and trained as volunteers in the eastern, western and northern regions of ARCS. The recruitment increased the total number of ARCS youth to 11,808.
- Volunteering registration process was completed in four regions which comprised of 19 branches. The registration process will be continued in other three remaining region and 15 branches. The main purpose of the intervention is to improve the management of the volunteers, involve them in the ARCS operation and provide necessary training.
- A ToT on volunteer management was conducted for 21 supervisors and youth volunteers. The purpose of the training was to deepen understanding of the volunteer management cycle and volunteering policy. This ToT training workshop was successful in enhancing the knowledge of volunteer management at the regional level.

Business Line 4: To heighten Red Cross Red Crescent influence and support for our work

| Measurement | | | |
|--|-----|---------------|--|
| Indicators | BL | Annual Target | Year to Date Actual |
| Outcome 1 (Disaster Management and Health): Partnership and coordination are strengthened with Afghan government department and local authorities to support Red Cross Red Crescent integrated preparedness modalities and disaster law legislation. | | | |
| Output 1.1 Improved understanding of the auxiliary role of ARCS is reflected in government strategic plans for risk reduction activities and legalization of the Disaster Law in Afghanistan. | | | |
| At least two key IFRC messages are reflected in the Afghan Government's preparation of national disaster laws. | N/A | 2 | 0 |
| A MoU has been signed between ARCS and ANDMA on disaster risk reduction activities. | N/A | 1 | 1 (100%) |
| Output 4.2: Red Cross Red Crescent Movement knowledge, humanitarian values and social development issues are disseminated to youth in schools and communities enabling them to become proactively engaged in community development, awareness raising and service delivery for the community. | | | |
| Output 1.2 Coordination and advocacy efforts with relevant ministries is undertaken to promote integrated disaster management and health response and preparedness in the country. | | | |
| IFRC and ARCS in close collaboration with Ministry of Health and Ministry of Disaster Preparedness have conducted at least one context specific Field Based Mission Trainings (FBMT) (Balkh province). | N/A | 1 | 1 (100%) |
| Output 1.3 ARCS capacity at headquarter and branch level to respond to and assist victims of disasters in line with ARCS strategic and operational plans is strengthened through coordination and cooperation between partners. | | | |
| A strengthened cooperation with ICRC on assistance to drought affected areas has raised the standing and the respect of the Movement's neutral action and ability for humanitarian access. | N/A | N/A | Through its partnership with ICRC, ARCS was able to access inaccessible areas during the drought response. |
| IFRC/ARCS will have improved its technical knowhow and capacity for food assistance and recovery work. | N/A | N/A | IFRC/ARCS capacity strengthened through training in beneficiary registration and food distribution. |

Comments on progress towards outcomes

- One of the major achievements of ARCS during the reporting period was to conduct a field based mission training (FBMT) from 7-12 July 2012 using the IFRC standard field school approach in Samangan. The training benefitted 35 ARCS staff and 80 community based volunteers, 40 of whom were female. The focus of the trainings was to simulate the emergency response mission cycle in the event of a cholera outbreak. The communities targeted for the training were those at a high risk of diarrhoeal disease outbreaks. The training was led by ARCS with the support from the IFRC health team and an external

consultant. The training resulted in enhanced capacity of ARCS in preparedness and ability to respond to the most common and frequent health emergencies.

- In August 2012, ARCS and ANDMA signed a Memorandum of Understanding (MoU) to conduct research into existing laws, policies and practice to address the current and potential legal issues arising from national and international response to disasters in Afghanistan. This research was supported and coordinated by the IFRC Asia Pacific Disaster Law Programme.
- Coordination meetings were conducted with ANDMA with regards to preparation of two key IFRC messages to be reflected in the Afghan government's preparation of national disaster laws.
- The emergency relief operation in the five drought affected provinces necessitated a coordinated response by the Movement partners, ARCS, ICRC and IFRC. ARCS and its Red Cross partners convened regular coordination meetings to identify relevant and conflict-sensitive intervention strategies. Such regular coordination meetings continued to take place during the operation.
- To enhance a more coherent and effective intervention during the drought operation, the Movement partners coordinated the intervention in consultation with the drought coordination cell established in 2011 by the Afghan government and UN agencies. As the target areas are in areas prone to armed conflict, insecurity and inaccessibility, the close collaboration and information-sharing with the ICRC benefitted both ARCS and IFRC. Owing to their mandate, ICRC led the necessary consultation with parties to the conflict in Afghanistan to ensure necessary access as well as security of the overall operation.
- Joint monitoring and coordination between ARCS, ICRC and IFRC ensured effective distribution of food packages during the operation. The distribution was conducted in two phases targeting the same households.

| Measurement | | | |
|---|-----|---------------|---------------------|
| Indicators | BL | Annual Target | Year to Date Actual |
| Outcome 3: (Organisational Development) The capacities among young people and especially youth volunteers in the ARCS to actively engage with civil society on humanitarian action and promotion of humanitarian access in Afghanistan have been strengthened. | | | |
| Output 3.1: ARCS staff capacity to educate youth and volunteers in the 'understanding humanitarian law' learning package; humanitarian principles and psycho social support has been strengthened and integrated. | | | |
| 10 ARCS governance have a working knowledge and skills in basic elements of humanitarian law; humanitarian principles and values (HP&V). | N/A | 10 | 10 (100%) |
| 33 programme staff have a working knowledge and skills in basic elements of humanitarian law; humanitarian principles and values. | N/A | 33 | 33 (100%) |
| 2,000 youth volunteers in schools and youth clubs have a working knowledge and skills in basic elements of humanitarian law; humanitarian principles and values. | N/A | 2,000 | 1,208 (60%) |
| Output 3.2: A culturally appropriate psychosocial support system is set up for ARCS staff and volunteers. | | | |
| 40 staff are better able to cope with working under challenging | N/A | 40 | 35 (88%) |

| | | | |
|---|-----|--------------|---|
| emergency situations. | | | |
| 2,000 volunteers are better able to cope with working under challenging emergency situations. | N/A | 2,000 | 1,040 (52%) |
| Volunteers retention increased by 20%. | N/A | 20% increase | High youth participation in ARCS activities is a proxy for high retention |

Comments on progress towards outcomes

- A tripartite MoU for the HP&V and exploring humanitarian law (EHL) and PSS was signed between IFRC, ARCS and the Danish Red Cross (DRC). This MoU clearly defined the roles and responsibilities of each party in the implementation of HP&V and EHL activities.
- During the reporting period, the HP&V and EHL learning package was translated in local languages (Dari and Pashto). A total of 25 (13 male and 12 female) master trainers comprising of senior youth managers and supervisors and youth volunteers from ARCS youth clubs and youth corners were trained on HP&V and EHL. The plan was for the master trainers to cascade their training to 175 youth educators, 25 from each of ARCS's seven regions to equip them with skills to roll out HP&V in youth clubs and youth corners targeting 4,000 youth around the country. It was not possible to reach the planned 4,000 youth due to logistical problems and plans are in place to continue with the planned activities in 2013.
- A master training for 35 persons composed of CBHFA regional supervisors, regional health officers, and IFRC regional programme officers was conducted for five days jointly with the ARCS health programme on PSS. The expectation is for the master trainers to train 1,600 staff of the ARCS on psychological first aid (PFA) and stress management and at later stages they will cover 1,250 volunteers' team leaders from different CBHFA, DM and HIV/AIDs programmes.
- A total of four ARCS master trainers conducted a youth educators training workshop on HP&V and EHL which benefitted 35 youth educators from two youth clubs and 12 youth corners in Farah and Herat branches of ARCS. In Mazar-e-Sharif and Kunduz two youth educators' trainings were conducted benefitting 48 youth educators from six youth clubs and 12 youth corners. These trainings were facilitated by the ARCS headquarters and regional master trainers. Mentoring and coaching were provided by the IFRC organizational development (OD) and ARCS youth departments. A further 25 youth educators from Jalalabad were trained on HP&V and EHL bringing the total number of youth educators trained to 108.
- The youth educators further cascaded the training to 1,100 youth (650 male and 450 female) in the youth clubs of Jalalabad, Laghman, Herat and Mazar-e-Sharif.
- With support from DRC, ARCS conducted a rapid assessment of the PSS needs of ARCS volunteers in the western region of Afghanistan using 40 volunteers, 20 of whom were drawn from the community based health and first aid (CBHFA) project. The objective of the assessment was to develop and establish a PSS support system for ARCS staff and volunteers. The assessment revealed that the incorporation of PSS within the framework of peer to peer support among volunteers can result in a positive reduction in stress caused by the conflict situation in Afghanistan.
- A total of 40 volunteer team leaders (20 in Jalalabad and 20 in Herat) were trained on PFA, stress management and supportive communication. The training resulted in the establishment of a peer-to-peer support system amongst the participants. Refresher training on PSS was provided to the same volunteers in the eastern and western regions. Twenty of the team leaders were drawn from the eastern region (Laghman, Jalalabad and Kunar) and the remaining 20 came from the western region (Herat, Badghis,

Ghor, Nimroz and Farah).

- The 40 team leaders comprised of 29 males and 11 females. They cascaded the training to 1,000 volunteers from the existing pool of ARCS volunteers, benefitting 725 male and 275 female volunteers respectively.

Business Line 5: To deepen our tradition of togetherness through joint working and accountability

| Measurement | | | |
|--|-----|---------------|---------------------|
| Indicators | BL | Annual Target | Year to Date Actual |
| Outcome 1: (PMER) Quality and overall impact of ARCS programmes improved at community level by setting up a PMER unit. | | | |
| Output 1.1 ARCS develops a PMER system at HQ, Regional and Branch level that cross-cuts main programme departments and supports their activities. | | | |
| ARCS has a functioning PMER unit extending across the organization supporting programmes and projects in communities | N/A | 1 | 0 |
| Output 1.2 ARCS develops detailed job descriptions for PMER officers, and assists programme departments adapt/create job descriptions that include PMER responsibilities. | | | |
| ARCS has job descriptions for all PMER officers, and programme departments have included PMER responsibilities for appropriate staff in job descriptions. | N/A | 5 | 5 (100%) |
| Output 1.3 ARCS (with support from IFRC PMER delegate) administers a training schedule for PMER Officers at HQ to promote integration between programme departments and PMER. | | | |
| All PMER officers have knowledge/ experience of main programme activities within ARCS and all programme departments are aware of the benefits of PMER to programmes. | N/A | 5 | 0 |
| Outcome 2: PMER capacity of programmes strengthened across the organization. | | | |
| Output 2.2 Knowledge and practices related to the four components of PMER increase through training. | | | |
| By end of 2012, 34 programme staff in branches have received training in monitoring, data collection and basic reporting methods. | N/A | 34 | 50 |
| By end of 2012, five programme staff per region have received training in monitoring, data collection and report writing | N/A | 35 | 50 (147%) |
| By end of 2012, one programme staff per region and have received PMER training in PMER. | N/A | 7 | 7 (100%) |
| By end of 2012, five PMER Officers from HQ have received PMER training in PMER. | N/A | 5 | 5 (100%) |
| Output 2.3 ARCS increases the training skills of PMER-related staff across the organization. | | | |
| All PMER-related staff have received training in training, to cascade relevant skills (e.g. monitoring and data collection methods) to regional staff from HQ staff, to branches from regional and HQ staff, and to community leaders from branch staff. | N/A | 5 | 3 (60%) |

| | | | |
|--|-----|---|---|
| Output 2.4 Knowledge and practices related to statistics increase through training. | | | |
| PMER officers at HQ have received training in basic statistics in relation to ARCS programmes. | N/A | 5 | 0 |

| Measurement | | | |
|-------------|----|---------------|---------------------|
| Indicators | BL | Annual Target | Year to Date Actual |

| | | | |
|---|-----|---|---|
| Output 2.5 ARCS is introduced to the Federation-wide Reporting System (FWRS) for its programmes and interventions. | | | |
| ARCS programme departments have been introduced to and started to implement the Federation wide reporting system (FWRS). | N/A | 3 | 0 |

| | | | |
|--|-----|---|---|
| Outcome 3: Programme coordination and management strengthened across the organization | | | |
| Output 3.1 Coordination of programme departments has been strengthened alongside cooperation with internal as well as external partners. | | | |
| ARCS with the support of IFRC has successfully implemented several integrated programme initiatives and the delegation in close consultation with partners has ensured an increasingly harmonized approach in the country. | N/A | 2 | 0 |

| Comments on progress towards outcomes | | | |
|---|--|--|--|
| <ul style="list-style-type: none"> PMER was identified as a key development issue in the ARCS's Strategic Plan 2012-2015. Created in 2012, the PMER unit currently exists as a fledgling sub-unit of the ARCS OD department, rather than an independent department reporting to the Secretary General. The PMER staff has limited capacity and experience and require significant training and support. During the reporting period, IFRC spent considerable time building capacity in planning at zone and branch levels using the IFRC project/programme planning (PPP) approach. The approach emphasizes on monitoring and reporting ensuring that programme managers have information on outputs and quality necessary to improve management of interventions. There has been considerable emphasis on reporting for donors without enough reflection on how such data informs programme management. In 2012 the PMER delegate prematurely ended his contract resulting in challenges for PMER initiatives. However, the IFRC PMER officer, with the support of the programme coordinator, did their best to fill the gaps by revising the PMER plan of action and speeding up the process of PPP trainings and building the capacity of the ARCS PMER unit. Between 25 and 28 June 2012, IFRC with support from the Asia Pacific Zone Office conducted PPP training attended by 22 participants from the ARCS DM and health programmes. Six of the participants were from headquarters and the rest from the regions. The training covered results-based project management, the project cycle, the logical framework approach, monitoring, evaluation and reporting. The training was further cascaded to the regional offices. A further two PPP workshops were conducted in the central (north-west) and north-east regions in September. In both workshops, the PMER unit collected pre- and post-test results to track the progress in participants' knowledge and to understand areas in which participants found to be more challenging. | | | |

Stakeholder participation and feedback

Tripartite meetings between three Movement partners – ARCS, ICRC and IFRC – established an appropriate and useful platform for sharing information, ideas and challenges, and discussing and agreeing to solutions. One major agreement was the decision of the Movement partners to work together to responding to the humanitarian needs of 22,500 drought affected families in the country. During the drought operation, the affected communities, community leaders, elderly people, local councils and government authorities were involved in the assessment and distribution operations. The participation of all involved ensured that the operations were implemented with a minimum of disruptions.

Participation of beneficiaries in programming is at the foundation of Red Cross Red Crescent activities. ARCS have a wide network of volunteers throughout the country. These volunteers are members of the communities where ARCS implements its various interventions. The needs assessment at the start of any programme intervention is carried out in close coordination with volunteers at the local level. Based on their coordination and direct link with the community members' needs are identified in target communities.

These priorities are then shared at the village/branch levels where resources are mobilised and decisions on the most appropriate interventions are made. The needs assessments provide critical information for gaps identification and programme design, but are part of the process in data collection through community mobilisation.

The village committees in CCBHI and CBHFA programme areas were instrumental in programme implementation. During the reporting period, six new village committees were established in new programme areas. The follow up visits from ARCS programme staff were coordinated with these committees and they provided regular feedback on progress in implementation of activities.

Positive feedback was received from ARCS programmes, including health, DM, OD, youth and volunteers, food for work, and others. The feedback included recognition of involvement in planning and their contributions to the planning process.

Partner National Societies supporting ARCS and IFRC in implementing its programmes include Australian, British, Canadian, Danish, Finnish, German, Japanese, Icelandic, Netherlands, Norwegian and Spanish Red Cross Societies. In addition ARCS and IFRC have partnerships with the Canadian International Development Agency (CIDA), Italian Development Organization, and the Japanese government.

Key Risks or Positive Factors

One of the potential risks likely to impact programme progress is the occurrence of disasters of an unprecedented nature, which always present challenges to the entire disaster response mechanism in the country. Therefore, efforts have been made to increase the human resource capacity of the ARCS's DM department.

Security remained a major constraint and challenge during the reporting period as one of the mobile health teams was abducted by armed groups in Herat in October 2012. This had a temporary negative impact on the operations of the MHTs in the area. In Mazar the operations of the MHTs was for a period of two months affected by a high staff turnover. During the drought response operations some target communities had to be dropped due to the security concerns and replaced with communities in safer areas. This made it difficult to provide much needed food assistance to the communities affected by the drought.

Limited capacity of staff in various areas has not yet been resolved to meet the needs and requirements of the ARCS strategic and operational plan at headquarters, regional and branch levels.

Monitoring of the ARCS activities at the branch level is another key challenge. Poor coordination and communication between the ARCS programmes as well as branches, lack of reporting mechanism and clear job division at the management level can be highlighted as areas of concern that need to be addressed as a matter of priority.

Recommended Action

OD and capacity building is a high priority for the ARCS management and leadership. Branch capacities will be enhanced and strengthened to deliver services through strong and elected provincial governance boards, members and volunteers.

Branches will be allowed to lead the ARCS operation at the field level. More focus will be given in the development and strengthening of systems at branch level and on enhancing coordination between the branches, regional offices and ARCS headquarters to the benefit of the community at large.

Lessons learned and looking ahead

Cooperation and coordination with Movement partners on programme activities needs to be strengthened, as noted through the VCA exercise in Herat, in which coordination was identified as an area of weakness. This included the planning phases, and the necessity of consulting appropriately with potential villages and following the defined selection criteria.

The experience gained during this integrated community-based programme has provided impetus to ARCS to plan for more areas in other provinces to meet diverse needs of communities. The skills and knowledge gained has contributed in ARCS Long Term Planning Framework (LTPF) 2012-2015. ARCS staff and volunteers require further trainings in the areas of CBDRR, disaster management planning, monitoring, evaluation as well as reporting to improve quality services, programming, implementation and accountability.

Drought conditions and food insecurity are frequently occurring disasters in Afghanistan, building community's capacity to reduce risks of droughts and food shortages, ARCS community-based programmes will integrate disaster risk reduction activities focusing food insecurity during 2012 and beyond. Activities like kitchen gardens, household livestock and knowledge dissemination on drought resistant crops will be piloted in CBHFA programme areas in addition to safe water and improved sanitation.

Financial situation

[Click here to go directly to the financial report.](#)

How we work

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

The IFRC's vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

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Saving lives, changing minds.



The IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:

1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.
2. Enable healthy and safe living.
3. Promote social inclusion and a culture of nonviolence and peace.

Find out more on www.ifrc.org

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