

# ANNUAL REPORT



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

## AFGHANISTAN

May, 2001

*This Annual Report is intended for reporting on the Federation's Annual Appeals only.*

*Appeal No. 01.21/2000*

*Appeal Target: CHF 7,576,000*

### *The Context*

More than 20 years of war and internal strife ruined Afghanistan's economy and reduced the living conditions of most of its 20 million residents to a bare subsistence level. By all parameters, whether socio-economical, health and mortality, literacy, displacement, natural disasters or isolation, Afghanistan continued to be one of the most misfortunate countries in the world. No progress was made in reviving the collapsed government administration, infrastructure or health and social welfare systems.

The continuing drought felt in the entire south central Asian region, worsened the miseries of the Afghan population as harvests were ruined, water sources were diminished and the few resources many Afghans had left were depleted. The compounded problems resulting from war and drought caused a displacement of tens of thousands of families in search of alternative livelihoods, income and assistance in the emerging camps in the western city of Herat and around river banks in southern Afghanistan. Three earthquakes struck during the year, fortunately, leaving only minor damages.

Despite the drought and the many peace efforts by both the United Nations (UN) and the Organization of Islamic Conference, the strife between the Taliban and the Northern Alliance dragged on with no solution in sight by the end of the year. As the first set of UN sanctions imposed on the Taliban at the end of 1999 did not yield the results they were supposed to deliver, the UN's Security Council adopted further sanctions on 21 December. As a precautionary measure, the UN and several other international non-governmental organizations evacuated staff out of Afghanistan fearing possible repercussions. The Taliban, on 17 August, officially reopened the Afghan National Museum, and provided for the first time in a decade free public access to cultural heritage that remained in the country. The day after, the Taliban for the first time celebrated the country's independence day with military parades through the capital Kabul.

The International Federation has been operating in Afghanistan since 1990. Its decision in 1998 to focus on health and natural disaster relief programmes with the Afghan Red Crescent Society (ARCS) was reinforced again following three comprehensive reviews of the community health, disaster preparedness and response and local capacity building programmes. The ARCS, arguably the only indigenous, nation-wide humanitarian organization in the country, maintained its ability to work with all ethnic groups and to reach women through its services. Operational in 30 of Afghanistan's 32

provinces, and with an extensive network of branches, it reached more than three million beneficiaries, with support from the Federation and the International Committee of the Red Cross (ICRC) .

## ***Objectives, Achievements and Constraints***

### ***Disaster Preparedness (DP) and Response***

**Objectives:** The overall programme objective is to improve the efficiency and effectiveness of the community based disaster preparedness (CBDP) and response system of the ARCS and to reduce the impact of natural disasters on communities and their subsequent dependency on humanitarian aid.

#### **Achievements**

After the signing of the programme agreement, administration support was given to all offices of the CBDP regional supervisors. CBDP headquarters staff paid a number of visits to the regions to provide technical support and programme implementation guidance. In line with the programme plans for the year, the ARCS appointed an additional CBDP supervisor at the end of April for the central region as well as two support staff.

The head of the CBDP department at ARCS and the supervisor for the central region participated in a ten-day management training course in November 2000 conducted by AITM, a Pakistan based training centre, and organized jointly with community based first aid (CBFA) department staff, supervisors and trainers. In addition, the heads of both the relief and DP departments and the DP director at the ARCS participated in the South Asia Disaster Preparedness workshop held in Sri Lanka from 17-19 November. Computer training supported by the Federation further enhanced computer literacy of CBDP headquarters staff.

Of the four scheduled, only one planning and information sharing meeting was conducted from 14-19 August. The topics included the 1999 CBDP/CBFA review and its recommendations, DP training guidelines and activities in the first half of 2000. Finally, the meeting established the objectives, plans and budget for 2001 and 2002 on the basis of the review report.

The Federation procured 24,000 blankets, 3,800 cooking sets, 11,500 jerry cans and 200 emergency first aid kits during the year. Taking into account the overall RC/RC stocks of tents, no additional tents were procured during the year, but will become necessary due to depleted stocks from response to needs of the internally displaced. The remaining minimum required items could not be procured due to significant funding shortfalls towards the end of 2000.

During 2000, two vulnerability and capacity assessments (VCAs) were conducted in Kabul and Mazar regions. The reports need further analysis before conclusions can be drawn and a subsequent plan can be developed.

Within the specific context of Afghanistan, the Federation and the ICRC closely coordinated their efforts to support the ARCS in its response efforts to the widespread disasters. Although three earthquakes struck Afghanistan during the year (each measuring around six points on the Richter scale), the natural disaster most deepening the Afghan crisis was another period of severe drought.

Various drought assessment missions were carried out during April, and followed by a comprehensive survey undertaken by three joint ARCS/ICRC/Federation teams from early to mid-May covering the southern provinces of Uruzgan, Zabul, Kandahar and Helmand. These were followed by a rapid survey at the end of May by a joint assessment mission made up of national society experts in general relief,

agrovets, water and sanitation and health/nutrition as part of the Federation's drought response efforts in south Asia. Other rapid Federation/ARCS assessments were carried out in Nimrooz and Farah provinces, while the ICRC carried out a survey in Ghor province, completing the overall picture of the drought situation in the most affected regions by mid-2000.

After the assessments, the ARCS and Federation, supported by the ICRC, assisted 1,101 displaced, mostly Baluch, families (9,000 individuals), who fled the desert areas in southern Afghanistan as their water sources diminished and their flocks died off rapidly in result.

The assessments further resulted in the development of the International Red Cross and Red Crescent Movement's objectives and plan of action at the end of May for which a separate programme and funding mechanism was made in mid-June 2000 and reported on outside of this Annual Report. The ICRC, as lead agency of the Movement for Afghanistan, assumed the responsibility to cover the funding needs for further drought response activities of the ARCS, who will also be supported by the Federation.

The prepositioned disaster preparedness stocks remained an important source to cover immediate needs of drought affected internally displaced persons in (mainly) Herat, while over 1,040 bales of used clothes were provided to some 7,200 families in Ghor during ICRC's distribution of emergency food supplies to 30,000 families severely affected by drought. Finally, ARCS/Federation assisted 64 families in Kunar's Nowabad village following a flood at the end of September.

The following items were distributed from the Federation's relief stocks from May 2000, with the majority to families internally displaced by the drought:

<b>Distributed in Kandahar, Herat, Ghor and Kunar</b>	
<b>Item</b>	<b>Amount</b>
Tents	1,450
Blankets	11,670
Cooking sets	3,979
Jerry cans	4,043
Plastic sheeting (rolls)	37
Used Clothes (bales)	1,067

The items distributed in response to the drought are reimbursable by the ICRC under the agreement concluded between the Federation and the ICRC.

### **Constraints**

Overall, objectives as outlined in the Appeal 2000-2001 programme description could only be met to a limited extent. The main reason was the change of direction made by the programme based on recommendations of a CBDP/CBFA review, finalized in early 2000 by a team from the Danish Red Cross. The change entailed a shift from community based activities, which risked duplication with CBFA and thus a waste of resources, to orientation of the programme to a DP goal that links all ARCS human and material resources into a "response constellation."

Consequently, the implementation of several objectives earlier included in the CBDP programme description for the year 2000 was put on hold. Finally, during a CBDP Federation/ARCS supervisors' meeting in August 2000 conclusions were drawn, leading to appropriate objectives and plans for the 2001 Appeal

Other constraints included a three-month suspension of all activities until new programme agreements were signed, the allocation of ARCS/Federation CBDP staff to various drought assessments and drought assistance operations throughout the year.

## *Health and Care*

**Objectives:** to improve the overall health of those people in Afghanistan lacking access to health care, with a special emphasis on decreasing morbidity and mortality rates of women and children, and reducing the need for more complex treatment of those living in rural and remote villages and in the poor urban areas.

### **Achievements and Constraints**

#### *Primary Health Care (PHC) programme*

The PHC strives to provide a variety of preventive and curative health services through a countrywide network of 48 clinics with an enhancing maternal and child health care component. During 2000, the 48 ARCS clinics provided over 1,993,000 different health services. Around 80 per cent of the beneficiaries were women and children who were targeted as the most vulnerable. It should be noted that November figures were not received from one clinic and the December figures were pending for two clinics at the time of writing this report.

In 2000, at least 25,390 women were fully immunized with tetanus toxoid (TT) and 28,400 children with three vaccine types. (The numbers included in the 2000 programme description refer erroneously to the number of individuals, but should have been number of vaccine doses). The number of vaccine doses for children increased with 20 per cent compared to 1999, while vaccination with TT (vaccine doses) for women increased by 32 per cent. Excluded here are 78,000 children immunized against polio by some 1,500 ARCS community based volunteers during the national immunization days (see also under community based first aid).

An attendance of 586,000 persons was registered for group and/or individual health education sessions conducted at the clinics. The topics at the sessions included: personal hygiene, mine awareness, nutrition, family planning, importance of immunization, breast feeding, prevention of accidents and specific diseases (such as tuberculosis and malaria).

It is estimated that over 630,000 patients were consulted and/or treated during the year, although it should be noted that one patient can have visited the clinic more than once. Also, 16,230 complicated cases were referred to the nearest hospitals.

The health departments of both the Federation and the ARCS played an important role in the initial identification of needs, strategy and initial set up of the drought response programme. Throughout the year, they continued the provision of needed technical support in the implementation of that operation, in particular to the mobile health teams.

All ARCS clinics functioned normally throughout the year and provided preventive health education, diagnostic services, treatment and referral to other health facilities, when needed. The services in the ARCS Parwan and Kapisa clinics were hampered for two months due to medicine supply constraints.

By the end of 2000, the Federation supported the following categories of health professionals:

**Technical medical staff employed in all 48 clinics**

<b>ARCS Position</b>	<b>Female</b> <i>54 per cent</i>	<b>Male</b> <i>46 per cent</i>
Doctors	32.00	38.00
Nurses	41.00	35.00
Mid wives	9.00	0.00
Pharmacists	14.00	33.00
Health educators	35.00	13.00
Vaccinators*	37.00	19.00
Laboratory technicians	1.00	8.00
Registrars	3.00	0.00
<b>Total</b>	<b>172.00</b>	<b>146.00</b>

\* funded both by the Federation and UNICEF

In addition to these staff, salary support was provided for 50 female and male clinic cleaners, 72 male watchmen, one driver for the mobile health team and 15 ARCS headquarters and five regional health department staff. It remains difficult to find qualified women and attract them with the current salary support levels the Federation is able to provide.

The Federation continued to provide essential medicines, medical items and other supplies to the clinics. Besides specific medical supplies for mother and child health (MCH) services, 373 full medicine kits were provided to the clinics throughout the year. However, from March to the end of May, the delivery of medicines to clinics was seriously threatened as the arrival of 500 medical kits from Europe was delayed. To ensure supply of essential items, an emergency purchase of 15 different types of medicine was made in Pakistan, while a few clinics had to refer patients to private pharmacies and some managed through privately donated medicines. Medical kits for Parwan and Kapisa for November and December could eventually not be transported to the clinics as the Anjuman pass was closed because of early snowfall.

In order to avoid hampering the supply of medicines to the clinics, an additional order was placed for 305 medical kits in August, with delivery expected in January 2001. The additional order brought the total number of medical kits accounted for in 2000 for the health programme at 805. CHF 20,300 was recovered from the supplier of the first shipment of 500 kits due to its failure to deliver on time.

In Logar and Samangan, ARCS constructed additional rooms and sanitation facilities for the expansion of MCH services. In Kunduz, the ARCS and the Federation agreed to construct a new clinic on ARCS premises as it was obliged to vacate the building rented previously. The construction was agreed to as the Kunduz branch allocated significant savings from 1998 and 1999 to the cost and secured a 40 per cent contribution from the community and local authorities.

Other works included painting, basic maintenance and placement of partitions to meet the need to expand the MCH services in eight clinics: one in Kabul; three in the southern region; and, four in the eastern region. Not all planned works could be executed before the end of the year due to initial interpretation differences of the programme agreement between the ARCS and the Federation, leaving a positive budget balance for construction.

In general, the implementation of the programme was hampered from 1 January to 27 March 2000. During this period a large proportion of the support from the Federation was postponed while it, the ARCS and the ICRC were discussing new general and programme specific support agreements.

The reduction of overall countrywide morbidity and mortality rates in Afghanistan were influenced by different factors. In the absence of comprehensive data collection it remains a challenge to ascertain how much was achieved in this regard though the PHC programme contributed to achieving improved health of the Afghan people.

A major task lies in increasing the capacity of MCH services in all the clinics and rural areas to address the special needs of women and children. The continuation of specialized and focused programming through a MCH delegate remains essential and the newly recruited female ARCS MCH supervisor proved to be extremely important for training and management of female staff. The late arrival of the MCH delegate caused delays.

The ARCS recruited and trained 80 new traditional birth attendants (TBAs) in four regions (northern, eastern, western and central). The 68 TBAs trained in 1998-1999 received a 10-day refresher course. The total number of TBAs by the end of 2000 was 161. The main obstacle to training more TBAs was the lack of qualified personnel at the different levels.

The 4,775 pregnancies registered and the 2,668 deliveries conducted by trained TBAs during 2000 was an increase of 97 per cent and 150 per cent, respectively, compared to 1999. The number of clean delivery kits distributed was reduced drastically in 2000 compared to the previous year (by 64 per cent) as the supply was rationalized.

Five newly identified midwives from among the existing group participated in the training of trainer trainers (ToT) course in October. Simultaneously, three midwife trainers participated in a refresher course. The training was done with co-operation from the Swedish Committee for Afghanistan.

The initial plan to upgrade facilities in the five clinics with MCH components and to identify seven new clinics for MCH expanded services changed during the year. Instead it was decided to expand different MCH services to all clinics with qualified, female staff.

Consequently, 17 ARCS clinics started growth monitoring for all children under three years of age (with *Road to Health* charts), bringing the total clinics supplying this activity to 21 by the end of 2000. The number of clinics providing ante natal care services was expanded by 16 in 2000, to a total of 20. The introduction of growth monitoring was done in co-operation with other organizations, especially with Action Contre Le Faim in Kabul.

By the end of 2000, 26 ARCS clinics provided family planning services, which included the provision of condoms and contraceptive pills and injections (and IUDs in five clinics). Contraceptives provided to women increased by 28.5 per cent compared to 1999.

A total of 11-day specific MCH workshops were held for nine female doctors, 11 midwives, eight nurses, eight health educators from eight clinics in Kabul and two clinics in Jalalabad. These workshops included subjects such as PHC, ante-natal care, growth monitoring, family planning and insertion of IUDs.

Promotion of reproductive health care for women and men, provision of antenatal and postnatal care for mothers and newborns and health education aimed at this part of the population continued.

#### **MCH services rendered**

<b>Type of Activity</b>	<b>Figures</b>
MCH services general (mostly obstetrical and gynaecological problems)	23,198
Women provided with contraceptives	15,751

Pregnancies registered by TBAs	4,775
Deliveries conducted by TBAs	2,668
Clean Delivery Kits distributed by TBAs	2,281
<b>Total</b>	<b>48,673</b>

In 2000, a total of 194,563 beneficiaries received group health education on MCH related topics (such as nutrition, family planning, immunization and breast feeding), or 45 per cent of the total attendance. Individual health education on MCH topics accounted for 65,342 beneficiaries, or 42 per cent of the number participating in individual health education.

In areas where TBAs are trained, referral points were identified and TBAs were informed of their location. However, the availability of emergency obstetric centres is insufficient especially in rural areas and hampers the facilitation of referral by TBAs.

Through attendance at the MCH task force meetings, Federation and ARCS health personnel closely followed the developments of UNICEF's Safe Motherhood Initiative which includes a special focus on emergency obstetric centres.

The necessary medical equipment, drugs and contraceptives were distributed to all clinics providing MCH services. The medical tools consisted of examination tables, speculums, sphygmomanometers, blood pressure machines, height and weight scales, baby scales, training models and basic furniture. The table below gives the quantities of contraceptives distributed of which the above mentioned 15,564 females were among the beneficiaries.

#### **Quantities of drugs, consumables and contraceptives distributed**

<b>Type</b>	<b>Number</b>
Condoms	67,152
Oral contraceptives (one month supplies)	6,581
Vials of injectible contraceptives (one vial for three months)	2,824
Intrauterine devices (IUDs)	127.00

Analysis of the family planning reporting formats revealed that errors occurred in the data provided in the 1999 annual report, that the formats need to be adapted and personnel better trained on their use to avoid future errors.

No extra laboratories were established during the year. The expected number of laboratories (nine at the end of 2000) already was reached at the end of 1999 when five additional facilities were established. Although the ARCS identified in various places lab technicians (Kunduz, Badakhshan, Takhar, Laghman), no agreement could be reached yet to activate additional ones, which will also depend on availability and accessibility of existing facilities around the proposed locations.

Laboratory equipment was procured for six facilities and placed in the Federation/ARCS stock. The existing laboratories were regularly supplied with reagents to perform routine examination of stool, urine and blood samples. As a result of the additional facilities established in 1999, the number of examinations increased by 57 per cent in 2000, contributing to improved medical diagnosis.

During the year an ARCS staff member/pharmacist worked with the Federation's pharmacist to introduce the former to medical stock management practices and procedures, with the aim to enhance the capacity of the ARCS to assume these responsibilities in the longer term.

The Federation's health co-ordinator checked the central medical stock every quarter and did routine checks in the regional stock facilities during field trips. The first-in, first-out policy for medicines was continuously applied and no medicines expired.

At the quarterly meetings of ARCS and Federation health officers, the medicine lists were reviewed and the currently listed medicines generally covered the needs according to the epidemiological situation. Consequently, the list was not expected to change soon.

Timely arrival of the health kits from Europe remains crucially important and over the past two years delays caused serious delivery problems. Funding stability throughout the entire year is a prerequisite to guarantee proper supply lines.

Starting 1 January 2000, the Health Information System (HIS) was modified according to the locally prevailing disease and illness patterns and based on international classification of diseases. The increased number of types of diagnosis on the HIS forms from 32 to 48 improved health data and capacity to respond to health concerns and needs.

HIS forms were distributed to the clinics on a monthly basis, and the data were collected, verified, analyzed and processed. Due to security conditions and availability of transportation, HIS reports were received late at times. Reports were issued to clinics on a quarterly to six-month basis. However, no reports were made to other organizations yet. Donors received regular information on the health services provided through standard situation reports, while the health department in Geneva regularly received HIS data including information on disease patterns.

The plans for 2000-2001 included closing of the clinic in Nooristan (Paroon clinic), in the Marastoon and to stop the mobile clinic in Pul-i-Khumri. Additionally, a clinic was opened in Kandahar in 1999 and is planned for Uruzgan in 2001. After two assessment trips to Nooristan in 2000, it was decided to maintain the clinic there as it is the only operational health facility serving an estimated population of 11,200 isolated people. During 2000, during the national immunization days, the ARCS clinic vaccinator immunized 1,622 children and the doctor recorded 7,489 treatments/consultations.

The ARCS mobile health team's activities in Pul-i-Khumri continued during 2000 as the branch could allocate its own vehicle and no additional investment was required. It is uncertain if the mobile clinic will be closed in 2001.

The ARCS reallocated the clinic from the ARCS Marastoon, previously not accounted for in the HIS as it served only a very small population. No additional costs were incurred with this reallocation as ARCS covered the cost related to the rehabilitation of the new premises. The clinic located in Khosal Khan Mina, in Kabul, now serves a larger population.

In May 2000, regional health training teams (RHTTs) were established and trained in different teaching methodologies. Each RHTT is composed of an ARCS and Federation regional health officer, one clinic doctor and one health professional, selected from existing staff. During the year, these RHTTs, the Federation's MCH delegate and the ARCS MCH supervisor provided specialized training to nine female and 20 male doctors, 10 midwives and eight female health educators. The workshops for the remaining health staff could not be carried out in 2000, due to time constraints and staff turnover in Jalalabad, Mazar-i-Sharif and Herat.

Medical text books and reference reading materials were distributed regularly to all clinics.

No ARCS HIS officer could be trained, neither could additional specific training in management and financial management skills be provided for ARCS headquarters' health department staff. The training of an ARCS HIS officer was not possible due to resignation of the previously experienced Federation staff person for HIS early in the year.

It was also not possible to introduce a cost-sharing system for medical services nor to promote income generating in ARCS' clinics premises to decrease their dependency on external assistance.

The health co-ordinator visited 34 of the 48 clinics in the various regions during the year, while the MCH delegate visited 30 of these clinics. All other clinics were monitored at varying intervals by the Federation's field delegates and Federation/ARCS regional health officers (except the clinics located in Badakhshan, Kapisa and Parwan). Several attempt to visit these clinics failed due to security conditions and cancellations of flights. The visits to the clinics allowed clinic level discussions on overall activities, including availability of medicines and equipment, management of HIS, rational prescription of essential drugs, renovation of the premises, on the job training, etc.

### ***Community Based First Aid (CBFA) programme***

Through the ARCS network, the CBFA programme aimed to extend community health services and social assistance to the grass-roots level by training volunteers recruited from within village communities. This approach allowed for early intervention and primary access for villagers.

#### **Actual number of volunteers trained and villages covered compared to planned targets**

<b>Region</b>	<b>Planned</b>	<b>Volunteers trained</b>	<b>Villages covered</b>	<b>per cent trained as per target</b>
Central (Kabul)	470	1'105	1'115	235%
Eastern (Jalalabad)	469	469	469	100%
Western (Herat)	468	501	498	107%
Southern (Kandahar)	468	319	308	68%
Northern (Mazar-i-Sharif)	625	508	480	81%
<b>Totals</b>	<b>2'500</b>	<b>2'902</b>	<b>2'870</b>	<b>116%</b>

The ARCS recruited and trained more volunteers than initially targeted. All volunteers received training in first aid, hygiene and sanitation, health education (including family planning, breast feeding, prevention of malaria and eye diseases), mine awareness, disaster preparedness and the fundamental principles of the Movement. Each volunteer also received a first aid kit, containing first aid materials, a first aid manual including sections on mine-awareness, disaster preparedness, water and sanitation and basic information on the Movement.

Although the countrywide target was met, not all regional ones could be reached. As from September, ARCS had only two training teams, instead of the planned four in the northern region due to the fighting. As a result, only 65 volunteers were trained in Takhar and none in Badakhshan, in areas largely controlled by the Northern Alliance. In the southern region, implementation was slowed down as the ARCS reallocated CBFA staff to a large food relief distribution and its regional supervisor resigned. Across the country, all training activities were suspended in the first three months of 2000 until new programme agreements were established with the ARCS.

Since the inception of the programme, the ARCS established a strong network of 6,325 volunteers covering over 6,300 (mainly) villages, in 74 districts of 13 provinces. Taking the average of 300 inhabitants per village, the first aid volunteers covered a community population of 1,897,500 people.

During this year 9,141 volunteers attended follow-up training sessions which is less than 50 per cent of the projected attendance, due to a combination of factors: trainers' insufficient understanding of the different components of the programme; bad road conditions; unexpected turnover of staff; and, again, the suspension of activities pending signing of the new programme agreement.

The limited transport means reduced the number of follow-ups and was resolved in November 2000, after one year of numerous failed attempts to purchase motorbikes in-country. The motorbikes were procured directly from a factory in Pakistan and imported with help from the ICRC.

At these follow-up meetings first aid bag materials were refilled, while additional refresher courses were given mainly on hygiene, sanitation, importance of immunization, fractures, bleeding, shock, mine awareness and the Red Cross and Red Crescent Movement.

In total, four workshops (of three or four days duration) were held in the second quarter of the year, attended by 112 volunteer group leaders (team leaders) and 15 trainers of eight branches. Topics included: programme objectives, reporting systems, how to lead a team, how to establish an ARCS first aid point and the concept of volunteerism. The targeted number of ten such workshops could not be achieved due to planning difficulties as this activity was newly introduced.

To maintain volunteers' motivation and link to the ARCS, a skill and knowledge competition was held among 456 volunteers at the district level, 146 at the provincial, 33 at the regional and five volunteers at the national level. The competition measured knowledge of and skills in first aid, preventative health, ARCS history and the Movement.

Based on the activity reports, the volunteers were active in various fields in their communities: participating in vaccination and mine-awareness campaigns; providing first aid; spreading health messages through the mosques and to their families; liaising with other NGOs for assistance to their villages; and, maintaining roads and rebuilding bridges. Health messages included: how to prevent diarrhoea; how to make oral rehydration salts for diarrhoea; and the importance of vaccination and sanitation.

In 2000, the CBFA department of the ARCS organized a nation-wide two-day mine-awareness campaign in which 1,046 volunteers from all regions participated on 21-22 November. These volunteers reported an overall audience of 43,747 individuals, excluding individuals reached in the southern region from where no data was received.

During the national immunization days to eradicate polio, 1,662 ARCS volunteers vaccinated 78,067 children. Further, the volunteers handled 31,310 first aid cases, including bleeding, fractures, animal bites, burns, choking and diarrhoea.

A number of volunteers in the northern region participated in the building of seven bridges, repairing of roads, and encouragement of digging of wells for safe drinking water. In the central region, volunteers contacted the World Health Organization and other institutions to chlorinate wells, kill rabid dogs, clean canals and repair roads. In the southern and western regions, a number of ARCS volunteers assisted in food and non-food distributions for drought affected people and internally displaced and buried animals to prevent disease outbreaks.

It should be noted that the activity reports and collection of data is incomplete and not comprehensive enough yet. This is partly because the number of follow-up meetings was insufficient.

From the second half of the year, ARCS volunteers began training and by the end of 2000, trained 352 male and 426 female volunteers. The Afghan culture especially at the village level as well as the restrictive policies of the Taliban authorities imposed severe constraints in furthering the aims of a larger female volunteer base.

During the year, all CBFA trainers invited ARCS provincial branch presidents to attend the opening ceremonies of the training courses. Furthermore, CBFA regional supervisors organized three workshops for heads of branches and administrators of eight branches in the northern, eastern and central regions; in total 70 participants (including 12 ARCS headquarters departments' staff). The topics covered included CBFA programme objectives, activities, and its role and structure in the national society.

The increased awareness of senior branch personnel on the CBFA programme and its role and structure in the ARCS helped to ease administrative regulations requiring trainers to ask prior permission when undertaking field trips. The planning and information sharing meetings with ARCS health, CDBP, dissemination and youth departments could not be held.

No significant developments were made in exploring cost sharing mechanisms and resource mobilization strategies for future sustainability of the programme in 2000. The achievement was limited to the establishment of five ARCS first aid points in three districts in Ghazni and two districts of Kabul province. These ARCS first aid points were set up in premises allocated by the local community and used by volunteers for provision of first aid, dissemination about basic health and the Movement. Here volunteers also collected locally available materials that could be used for refill of their first aid bags.

### ***Youth programme***

In total, 109 teacher volunteers of the planned 160 were recruited and trained at 56 schools, or 70 per cent of the annual target, in Kabul, Mazar-i-Sharif and Herat. The teacher volunteers subsequently trained 703 school students in these cities (45 per cent of the target), in first aid and health education, water and sanitation. All new volunteers received first aid materials and kits. First aid boxes were distributed to all schools in Mazar-i-Sharif, and partially to Kabul and Herat due to the start of vacation.

The youth department of the ARCS organized one football competition among 12 schools' teams from Kabul city on 3-17 October.

The youth department was not able to organize seminars for youth volunteers, but conducted a two-day seminar for 39 volunteer teachers from 20 schools in Kabul on first aid.

### ***Institutional and Resource Development***

**Objectives:** The objective is to reassert the pre-eminence of the principles and humanitarian values of the Red Cross and Red Crescent Movement and strengthen the capacity of the ARCS to manage, deliver and account for humanitarian services.

#### **Achievements and Constraints**

In 1999 a four-day national society leadership workshop was developed, aimed at all heads of branches and departments, providing the opportunity to come to a more formal type of self-assessment and identifying the following priorities for the future: a broad volunteer base and the re-establishment of membership systems, the development of own resources, more training for all ARCS staff and

volunteers, and more communication and exchanges with other National Societies. Two of these workshops were held in 1999.

In 2000, four such leadership workshops were held in which 120 branch and headquarters personnel participated from the eastern, northern, southern and central regions. These workshops were especially useful in the northern region where five of eight branch presidents were replaced since 1 January, followed by some changes in administrators and relief officers. However, the presence of the ARCS branch president of Takhar - at that time opposition held territory - was important.

Generally, the workshops positively affected the awareness of ARCS staff (leadership, support departments and programme departments at national and local levels). The ARCS is in a relatively better position to support initiatives to review the financial system and training of the department heads. Moreover, the turnover of leadership was relatively lower during this year.

The ARCS vice-president participated twice in the 'South Asia Secretary Generals Meeting' held in Bangladesh and Sri Lanka and the exposures to activities of the two sister national societies was beneficial to the learning process of the ARCS.

Although the ARCS was a member of the youth commission, it was not able to participate in the commission's meetings due to change of leadership and staff.

Starting in June, different planning meetings were held for the country assistance strategy (CAS) workshop originally scheduled for 2-5 September. This workshop aimed to teach self-assessment, establishment of a national society development plan, integration of the *Strategy 2010* into national society plans, building ARCS ownership of the CAS and specifying regional links.

Although a significant amount of preparations were made, the workshop unfortunately had to be postponed since the regional institutional development delegate, who would facilitate the workshop, was unable to attend. However, the delay will help in strengthening the preparatory steps and allow consideration for recommendations of the ID review mission that took place in November 2000.

The exploration of revenue generation that started in 1999 continued in 2000 with further income generation investments. The ARCS branch in Paktia started a second bakery project; Ghazni branch established a 'shop-construction-for rental' project; Bamyan set up an animal husbandry project; in Farah vegetable production was initiated; and Khost proposed a wheelbarrow project.

Although the ARCS' Logar bakery project generated profits in mid-2000, they declined towards the end of the year and the branch was no longer able to manage it properly. Thus, it decided to lease the bakery and collect the rent as income. The shop-keeping project of ARCS Ghazni generates a monthly revenue of approximately USD 40. The ARCS Paktia bakery reported no income until the end of the year, while the husbandry project of ARCS Bamyan had to be closed (due to high price of fodder).

During the year, the ID/RD unit visited the branches of the eastern and northern regions to introduce the revenue generation methodology and to further explore RD strategies.

Many factors directly or indirectly affected managing RD activities in Afghanistan. Firstly, the deplorable economic situation in Afghanistan and new legislation issued by the Islamic Emirate of Afghanistan not allowing former traditional ways of income generation (cinema, lottery, theatre, concerts, etc.). Secondly, instability of the local currency and dependency on the Pakistani Rupee required an adjustment of the original budget proposal twice. Thirdly, lack of timely and efficient reporting, including financial reports, hampered management to take timely decisions or required

adjustment on RD activities. Lastly, financial systems need to be reviewed to ensure better utilization of income generated and branches presently seem to have no decision making power about the income generated.

The ARCS governance, as provided for by its statutes, is suspended for the time being. The president is appointed by the highest authorities of the country and is at the same time the secretary general, managing some 1,200 staff (executives). Membership systems are not functioning, neither are branch assemblies or general assemblies. However, following extensive dissemination, the ARCS decided to re-establish its membership systems and a commission was put in place to review the different types of members required and the related rights and duties. A first draft proposal for the reintroduction of membership is under review.

The ARCS further decided to increase or re-establish regular contacts with all branches to improve the unity of the national society. This would prepare the ground for a re-establishment of governance when the conditions allow.

Although the turnover in the ARCS leadership was limited in 2000, the focus remained on national society leadership workshops to familiarize the leadership with the norms of the Movement in all regions. These workshops also covered topics related to governance and good leadership.

In July, the ARCS development unit, with support from the Federation, started a computer training course for 25 ARCS headquarters staff, which was completed in October. The planned English language classes for another 25 ARCS headquarters staff did not start in 2000, due to difficulties relating to the course location and delays in the procurement of class materials.

The ARCS vice-president participated in the secretary generals meetings. No other Movement regional events specifically raising governance issues were held during the year.

Throughout 1999 the ARCS became aware of the importance of transparency and decided for 2000 to review its financial management and control systems, to train all the branch heads and administrators, who are often new, and to prepare the publication of an annual financial report. Although it was originally planned to invite an external consultant (regional finance delegate/Pakistan Red Crescent finance manager) a different approach was taken, due to an arising opportunity and time constraints to involve regional staff.

During the visit of the senior finance development officer from the Federation's Secretariat, a first assessment was done of ARCS financial management systems, producing recommendations for the improvement of these systems and for staff training. A strong finance development component was included in the new agreements, aimed at improving the transparency of ARCS' financial management systems.

Subsequently, members of the ARCS negotiation commission and of the ARCS finance department, together with the ICRC's co-operation department and the Federation's finance and ID departments, designed a financial management workshop to familiarize all relevant ARCS staff with the new agreements and to train them in the new planning, budgeting, financial reporting and activity reporting requirements. It also represents an opportunity for ARCS to reintroduce its own financial management and accounting systems and procedures to all its branch and headquarters offices (no such training took place in the last five years in most regions and most ARCS heads and administrators are relatively new, without a financial background).

Before the end of May, all five regional workshops were held with a total of 130 staff members from all 31 ARCS branches and the headquarters participating. Consequently, the new financial management systems were in effect from 1 June 2000 and the workshops offered an excellent opportunity to discuss new agreements in an open atmosphere and to make all concerned parties comfortable with their practical aspects. Additionally, the participation in the workshops of the branches located in the areas under the control of the Northern Alliance (Takhar, Badakshan, Kapisa and Parwan) proved that the principle of unity is alive in the national society of this war-torn country.

It was also clear that the ARCS in general and many of the branches in particular still need considerable time to fully understand and assimilate all the implications in terms of programme ownership, programme management, reporting, financial management procedures, etc. In order to continue to assist the ARCS in developing its accounting and financial management capacities, the position of finance development officer (FDO) was created in the Federation's delegation. Throughout the remainder of the year, the FDO visited all the branches in the central, southern and eastern regions to review financial reporting and accounting practices. Results were generally satisfactory as regards reporting on the Federation and ICRC programme activities and on the core structure. The internal ARCS accounting system is not well practised and thus the objective of improving ARCS financial management systems remains a challenge for years to come.

Following the joint Federation/ICRC review process in 1999 on all ID and co-operation related issues with the ARCS, the 1996 agreement between the ARCS, ICRC and Federation that had become completely obsolete, was terminated on 31 December 1999. Consequently all financial support was stopped. This opened the path for discussions on a new framework agreement with the national society, covering: a tripartite ARCS/ICRC/Federation general agreement, a tripartite ARCS/ICRC/Federation core structure support agreement and various bilateral programme agreements between either the ARCS and the ICRC or the ARCS and the Federation.

In the meantime, following the appointment of a new president/secretary general on 1 February 2000, the expected series of replacements of heads of departments and some branches took place. In order to demonstrate concern, the Federation delegation suspended discussions on agreements for one week, allowing the delegation to consult the ICRC and the Secretariat and explore ideas to address ARCS integrity issues.

The new president/secretary general mandated the second vice-president to continue the process of preparing new agreements and set up a commission of competent and experienced senior staff from the health, inspection, international relations, dissemination and personnel departments.

Extensive discussions then commenced with the newly created negotiation body in mid-February and continued until the end of March 2000. On the tripartite (ARCS, ICRC and the Federation) issues, agreements were reached concerning the earmarking of budgets to programmes, the reduction of the core structure, the increase of incentives for ARCS staff, a new standardized grading system in the ARCS, the formalization of counterpart relations, and the issue of internal centralization. These agreements included an implementation time frame.

Agreements could finally also be reached on all outstanding bilateral issues (on ARCS programmes supported by the Federation only), so that on 27 March, the ARCS, the ICRC and the Federation signed new agreements, replacing the memorandum of understanding and co-operation agreements of January 1996.

Co-operation between the three parties had a new basis, promoting improved quality, transparency and accountability in the delivery of humanitarian services in Afghanistan, and initiating a process of

restructuring in the ARCS. The signing of the agreements prepared the ground for resumption of all activities and the following months were used to introduce the new agreements to all concerned parties.

In line with observations from several review missions (ID, CBFA, CBDP) and partner national society visits, the ARCS implemented a reduction of its core structure by 15 per cent in the headquarters (i.e. some 35 positions) from 1 July and of another five per cent (10 positions) by the end of the year. Additionally, during the month of July, the ARCS leadership, helped by its advisory board, developed a new staff grading system, and re-graded all current positions in the ARCS accordingly. Thus, a fair and uniform system was introduced countrywide.

The ICRC and the Federation accepted to increase the incentive levels of ARCS staff, which was again in line with recommendations of several review missions in 1999, and taking into account the depreciation of the national currency over the last years, this was a positive impetus for all staff that are working hard in the respective programmes. Although incorporated into the agreement, the ARCS did not manage to review the structures and staffing needs of its regional branches during the year. This process will be brought forward in the planning for 2001.

Towards the end of the year, in November, progress on the various recommendations made in 1999 were reviewed and measured by the same technical experts from ICRC and Federation that carried out the 1999 review. Additional recommendations for 2001 relate to the (a) decentralization process and the advantages of such process for the regions and branches; (b) structures and staffing system; (c) skills and human capacities; and, (d) resource development and self-reliance approach.

The roles and responsibilities of the regional, provincial and the headquarters levels are not well defined which affects the staffing and the recruitment system. In many cases the headquarters interferes with the appointment of staff at the branch level. Moreover, recruitment is not based on position requirement and personnel needs. Although the application of a counterpart system and the introduction of programme agreements positively influenced the quality of required staff, further efforts need to be undertaken especially regarding human resource management of core staff. In general, too many unqualified staff at ARCS headquarters and the turnover of staff had a negative impact on the society's structures and hindered the process of change. Discussion on separating the headquarters from the regional office of the central zone continued with the ARCS.

The best promotion on behalf of women's issues was done through the Federation's MCH programme component, its delegate and the long awaited appointment of a female MCH supervisor. Further, from the second half of the year, the society's CBFA department emphasized training of female first aid volunteers, but achievements were limited due to cultural and legal constraints. Unfortunately, during the year, the ID/RD department itself could not directly make significant advances in the co-ordination of reinforcing the gender perspective.

## ***Conclusions***

The first phase of a long and intense review process, involving the three components of the Red Cross Red Crescent Movement in Afghanistan and in Geneva, came to completion in 2000. A new basis for essential co-operation between the three parties was established, promoting improved quality, transparency and accountability in the delivery of humanitarian services, and initiating a process of restructuring in the ARCS. Functional co-operation improved significantly, benefiting the programmes. Efforts must continue to further strengthen co-operation, to promote synergy and, where applicable, a common approach to address the sufferings of the Afghan population.

The operation continued satisfactorily during the year and generally plans of action could be carried out and objectives achieved. The limited level of staff turnover at ARCS during the year improved the impact of technical support to it. However, safeguarding technical competency of essential staff required enormous efforts. Lack of available qualified staff and the political culture within the ARCS remain areas of concern.

Although financial support during the year provided sufficient stability for the achievements of the objectives, the midyear projections of funds for the end of the year and the beginning of 2001 caused serious concerns. A minimum degree of funding security is essential in the Afghan context and therefore donors are urged to make longer term commitments if the progress made during the past two years is to be sustained.

Continued support for the implementation costs of the ARCS remains pivotal for a successful operation as is the need for a minimum of 10 delegates for intensive monitoring and supervision. Only these can ensure development of the capacity of the ARCS, its financial management, improved financial transparency and humanitarian service delivery. A possible extension of the drought programme beyond the tentative project end date of 30 June 2001 as reflected in the 2001 annual appeal may require additional human resources.

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

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

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## *Annual Financial Reports 2000*

### *- Explanatory Note -*

#### **1. Consolidated Response to the Appeal**

- This report provides a global picture on the funding situation of a specific appeal at a specific time.
- The cash column indicates all cash contributions channelled through the Federation, together with the balance carried forward from the previous year. Financial statements in support of the reported income are available upon request.
- The in-kind contributions (goods and services provided in response to the appeal objectives) are registered in a stand-alone system, based on the information provided by the respective donor. The values of these donations are based on information received from donors, and will be reported as such in the income and expenditure part of the consolidated report.
- Direct cash or in kind contributions made to Operating National Societies or in kind donations made to the Federation Delegations in response to the appeal are recorded as in-kind contributions in the report.

#### **2. Balance of Funds - Cash Only**

This report is a summary cash statement, providing the information on the balance carried forward from the previous year, cash income (including reallocations), cash expenditure (including reallocations - ref. part III of the consolidated report), and the closing balance at the end of the year.

#### **3. Budget Analysis / Breakdown of Expenditures**

This section of the report provides a comparative analysis of the total expenditures (cash and in-kind) versus the last approved budget of the appeal.

- The cash column reports on all expenditures booked against the Federation projects and cost centres . It relates only to the use of cash contributions received by the Secretariat for the specific appeal. Financial statements in support of the reported expenditure are available upon request.
- The in-kind columns (goods/services and personnel) report on the in-kind contributions donated in response to appeals, as per the information received from donors. This information is shown both as contribution and as expenditure against the specific appeal, and is consolidated, together with the cash expenses, against the appeal budget. As financial information is not always available from PNS, and for consistency reasons, a flat rate is applied for the calculation of personnel costs.
- The consumption rate represents the level of total expenditures (cash and in-kind) compared to the total income available (opening balance, cash and in-kind contributions),

#### **4. Pledges vs. Contributions**

Attached to this financial report is the list of pledges against the respective appeal.

- The comparative analysis of the list of pledges and the list of actual contributions provides a clear insight into any outstanding pledges in response to the appeal.
- Any differences in values between the two reports are due to fluctuations in exchange rates at the time of booking and the time of reception of the contribution.

INTERNATIONAL FEDERATION OF RED CROSS AND RED CRESCENT SOCIETIES					
				Interim report	
				Annual report	x
				Final report	
<b>Appeal No &amp; title: 01.21/2000 Afghanistan</b>					
<b>Period: year 2000</b>					
<b>Project(s): AF000, 004, 006, 160, 503, 506</b>					
<b>Currency: CHF</b>					
<b>I - CONSOLIDATED RESPONSE TO APPEAL</b>					
	<b>CASH</b>		<b>KIND &amp; SERVICES</b>		<b>TOTAL</b>
<b>FUNDING</b>	<b>Contributions</b>	<b>Reallocations</b>	<b>Goods/Services</b>	<b>Personnel</b>	<b>INCOME</b>
Appeal budget	7,575,509				
less					
Cash brought forward	2,320,496				
<b>TOTAL ASSISTANCE SOUGHT</b>	<b>5,255,013</b>				
<b>Contributions from Donors</b>					
British RC (DNGB)	78,570				78,570
Canadian RC (DNCA)	3,953				3,953
Icelandic RC (DNIS)	8,294				8,294
Icelandic RC (DNIS)	2,765				2,765
Japanese RC (DNJP)	188,940				188,940
Kuwait Red Crescent (DNK)	13,396				13,396
Netherlands Govt. via RC (D)	36,754				36,754
Netherlands Govt. via RC (D)	70,270				70,270
Netherlands Govt. via RC (D)	96,933				96,933
Netherlands Govt. via RC (D)	65,277				65,277
Netherlands Govt. via RC (D)	94,584				94,584
Norwegian Govt. via RC (DG)	18,299				18,299
Norwegian Govt. via RC (DG)	68,622				68,622
Norwegian Govt. via RC (DG)	265,340				265,340
Norwegian Govt. via RC (DG)	105,221				105,221
Norwegian RC (DNNO)	11,687				11,687
Norwegian RC (DNNO)	29,473				29,473
Norwegian RC (DNNO)	5,401				5,401
Norwegian RC (DNNO)	2,221				2,221
Norwegian RC (DNNO)	22,000				22,000
Norwegian RC (DNNO)	2,033				2,033
Swedish Govt. via RC (DGN)	147,000				147,000
Swedish Govt. via RC (DGN)	358,288				358,288
Swedish Govt. via RC (DGN)	31,500				31,500
Swedish Govt. via RC (DGN)	76,776				76,776
Swedish RC (DNSE)	22,812				22,812
Swiss RC (DNCH)	6,920				6,920
Swiss RC (DNCH)	13,970				13,970
Swiss RC (DNCH)	6,650				6,650
Swiss RC (DNCH)	82,460				82,460
Japanese RC (DNJP)		26,000			26,000
Belgium				30,061	30,061
Denmark				60,123	60,123
Greece				8,871	8,871
Japan				84,928	84,928
Netherlands				94,127	94,127
Norway				8,378	8,378
Sweden				40,246	40,246
Switzerland				32,690	32,690
USA				45,174	45,174
UNFPA			31,193		31,193
UNFPA			4,143		4,143
UNFPA			14,571		14,571
UNICEF			6,657		6,657
UNICEF			200		200
<b>TOTAL</b>	<b>1,936,410</b>	<b>26,000</b>	<b>56,764</b>	<b>404,598</b>	<b>2,423,772</b>
<b>Coverage</b>	<b>36.8%</b>	<b>0.5%</b>	<b>1.1%</b>	<b>7.7%</b>	<b>46.1%</b>
<b>II - Balance of funds</b>					
				Opening balance	2,320,496
				CASH INCOME Rcv'd	1,962,410
				CASH EXPENDITURE	-4,378,812
					-----
				CASH BALANCE	-95,906

<b>Appeal No &amp; title: 01.21/2000 Afghanistan</b>						
<b>Period: year 2000</b>						
<b>Project(s): AF000, 004, 006, 160, 503, 506</b>						
<b>Currency: CHF</b>						
<b>III - Budget analysis / Breakdown of expenditures</b>						
Description	Appeal Budget	CASH Expenditures	KIND & SERVICES		TOTAL	Variance
			Goods/services	Personnel	Expenditures	
<b>SUPPLIES</b>						
Shelter & Construction	524,190	37,681			37,681	486,509
Clothing & Textiles	240,476	136,448			136,448	104,028
Food/Seeds	75,000					75,000
Water		63			63	-63
Medical & First Aid	1,437,688	919,185	56,764		975,949	461,739
Teaching materials	93,195	10,775			10,775	82,420
Utensils & Tools	241,244	49,837			49,837	191,407
Other relief supplies	108,445	45,496			45,496	62,949
<b>Sub-Total</b>	<b>2,720,238</b>	<b>1,199,487</b>	<b>56,764</b>		<b>1,256,251</b>	<b>1,463,987</b>
<b>CAPITAL EXPENSES</b>						
Land & Buildings						
Vehicles	92,550	44,184			44,184	48,366
Computers & Telecom equip.	142,242	54,666			54,666	87,576
Medical equipment	68,150	5,357			5,357	62,793
Other capital expenditures	64,389	33,748			33,748	30,641
<b>Sub-Total</b>	<b>367,331</b>	<b>137,955</b>			<b>137,955</b>	<b>229,376</b>
<b>TRANSPORT &amp; STORAGE</b>	<b>581,770</b>	<b>322,641</b>			<b>322,641</b>	<b>259,129</b>
<b>Sub-Total</b>	<b>581,770</b>	<b>322,641</b>			<b>322,641</b>	<b>259,129</b>
<b>PERSONNEL</b>						
Personnel (delegates)	941,702	376,247		404,598	780,845	160,857
Personnel (local staff)	1,551,026	1,150,834			1,150,834	400,192
Training						
<b>Sub-Total</b>	<b>2,492,728</b>	<b>1,527,080</b>		<b>404,598</b>	<b>1,931,678</b>	<b>561,050</b>
<b>GENERAL &amp; ADMINISTRATION</b>						
Assessment/Monitoring/experts		5,855			5,855	-5,855
Travel & related expenses	137,319	88,270			88,270	49,049
Information expenses	94,289	25,771			25,771	68,518
Administrative expenses	302,448	292,932			292,932	9,516
External workshops & Seminars	46,080					46,080
<b>Sub-Total</b>	<b>580,136</b>	<b>412,829</b>			<b>412,829</b>	<b>167,308</b>
<b>PROGRAMME SUPPORT</b>	<b>833,306</b>	<b>473,454</b>			<b>473,454</b>	<b>359,852</b>
<b>OPERATIONAL PROVISIONS</b>		<b>305,366</b>			<b>305,366</b>	<b>-305,366</b>
Transfer to National Societies						
<b>TOTAL BUDGET</b>	<b>7,575,509</b>	<b>4,378,812</b>	<b>56,764</b>	<b>404,598</b>	<b>4,840,174</b>	<b>2,735,335</b>
<b>Consumption rate:</b>						
	Expenditures versus income		200%			
	Expenditures versus budget		64%			

Afghanistan						ANNEX 1
APPEAL No. 01.21/2000		PLEDGES RECEIVED				26.06.2001
DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
<b>CASH</b>						
REQUESTED IN APPEAL CHF ----->				<b>7576000</b>		<b>TOTAL COVERAGE 57.6%</b>
Cash carried forward from 1999				<b>2320495</b>		
AMERICAN - RC				13800	28.07.00	CONTRACT EXTENSION FOR 3 MONTHS FOR FIELD DELEGATE
AMERICAN - RC				50900	28.07.00	SALARY & MISSION COST 12 MONTHS FOR FIELD DELEGATE
BRITISH - RC		30000	GBP	77700	19.01.00	HEALTH CLINIC PROG. KITS PURCHA.
CANADIAN - RC		3454	CAD	3805	19.12.00	HEALTH
ICELANDIC - RC		500000	ISK	11209	30.03.00	
JAPANESE - RC		12000000	JPY	188736	26.06.00	
KUWAIT - RC		2440	KWD	12626	15.05.00	
NETHERLANDS - RC				30900	18.01.00	DELEGATE
NORWEGIAN - RC				22000	23.06.00	DELEGATION CORE COSTS FOR HOD
NORWEGIAN - GOVT/RC		2178649	NOK	414691	20.09.00	ID & RD/DP, HEALTH, ID/RD DELEGATE
NORWEGIAN - GOVT/RC		496607	NOK	94526	20.09.00	HOD COSTS, ID/RD DELEGATE
SWEDISH - GOVT		2800000	SEK	527240	29.05.00	HEALTH PROGRAM - CLINIC SUPPORT
SWEDISH - GOVT		600000	SEK	112980	29.05.00	CBFA / YOUTH
SWEDISH - RC		120000	SEK	22596	29.05.00	CONTRIBUTION FOR HOD/ DELEGATION CORE COSTS
<b>SUB/TOTAL RECEIVED IN CASH</b>				<b>3904204</b>	<b>CHF</b>	<b>51.5%</b>
<b>KIND AND SERVICES (INCLUDING PERSONNEL)</b>						
DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
Belgium	Delegate(s)			30,061		
Denmark	Delegate(s)			60,123		
Greece	Delegate(s)			8,871		
Japan	Delegate(s)			84,928		
Netherlands	Delegate(s)			94,127		
Norway	Delegate(s)			8,378		
Sweden	Delegate(s)			40,246		
Switzerland	Delegate(s)			32,690		
USA	Delegate(s)			45,174		
UNFPA		18349	USD	31193	22.06.00	20'000 CLEAN DELIVERY KITS & TRANSPORT TO KABUL
UNFPA		2437	USD	4143	22.06.00	100 TBA KITS & TRANSPORT TO KABUL
UNFPA		8950	USD	14571	25.11.00	PHC, MATERNAL HEALTH CARE COMPONENT
UNICEF		4080	USD	6,657	08.11.00	51'000 SACKETS ORS
UNICEF				200	20.11.00	10 BABY SCALES
<b>SUB/TOTAL RECEIVED IN KIND/SERVICES</b>				<b>461362</b>	<b>CHF</b>	<b>6.1%</b>
<b>ADDITIONAL TO APPEAL BUDGET</b>						
DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
<b>SUB/TOTAL RECEIVED</b>				<b>0</b>	<b>CHF</b>	
<b>THE FOLLOWING PROJECTS ARE LINKED TO THIS APPEAL:</b>						
PAF000, PAF004, PAF006, PAF160, PAF503, PAF506						