

Plan 2009-2010



PAKISTAN

Executive summary

This is the 2009 plan of the Pakistan office of the International Federation. It is for information only, as the funds for this plan are covered through the Earthquake Emergency Appeal (M05EA022 - launched in 2005 and recently extended to the end of 2009) and Cyclone Yemyin/Floods emergency appeal (MDRPK001 - launched in July 2007 and extended to June 2009). The total budget for 2009 is CHF 15.5 million (of which CHF 15.1 million is covered under the earthquake appeal and CHF 435,000 under the floods appeal). Progress will be reported through the operations



Pakistan Red Crescent mobile health teams continue to provide health assistance in the earthquake affected areas in North West Frontier Province. International Federation

update of the two emergency appeals. With both the emergency appeals ending in 2009, it is expected that Pakistan will become a part of the International Federation's two-year rolling plan process starting with the 2010-2011 planning cycle. This document briefly describes the main outcomes that programmes seek to achieve in 2009 under the two emergency appeals. Both the appeals have entered the recovery phase and the main focus is on the long-term rehabilitation of the affected people.

The International Federation along with its global network works to accomplish its Global Agenda Goals, partnering with local communities and civil society to prevent and alleviate human suffering from disasters, disease and public health emergencies.

Country context

Pakistan is ranked 136th (out of 177) in the 2007-08 UNDP Human Development Index. Pakistan faces significant challenges in basic health care coverage (particularly maternal and child health care) and water and sanitation¹. According to the Human Development Index, the infant mortality rate across the country is 79 per 1,000 live births and the under-five mortality rate is 99/1,000. The maternal mortality rate is 530 per 100,000 live births. The country is prone to natural disasters such as seasonal monsoon flooding, landslides and earthquakes. Pakistan mostly comprises of scattered rural communities, many with limited access to basic infrastructure².

The Pakistan Red Crescent Society (PRCS) plan for 2009 is part of two ongoing emergency appeals. The Pakistan earthquake operation was launched in the aftermath of the massive earthquake that hit the country on 8 October 2005. Due to the scale of the earthquake operation, the normal annual appeal process was suspended and ongoing programmes were merged into the overall plan for the earthquake operation. The earthquake appeal has now been extended until the end of 2009 so that the planned activities can be completed.

After the flooding caused by heavy rains and Cyclone Yemyin, PRCS launched an emergency appeal for six months in July 2007. However, in order to implement long-term recovery activities and to further build capacity of the national society, Pakistan Cyclone Yemyin/Floods appeal has been revised and the time period has been extended until June 2009. The operation's emergency activities are finished and have now moved onto recovery.

¹ World Bank Country Assistance Strategy (2006-2009).

² Reference: Pakistan government's Poverty Reduction Strategy (2003).

The appeal is being extended and budgets have been revised. New objectives and expected results have been set in line with the available funds.

National Society priorities and current work with partners

Pakistan Red Crescent Society implements a wide range of programmes, including disaster management, health and care, organizational development and its emergency ambulance service. However, the priorities of the national society at the moment are disaster preparedness and risk reduction, health and care and capacity building. Under the earthquake emergency appeal, the PRCS is also doing reconstruction of essential public facilities which will be completed by the end of 2009.

The PRCS has a five-year rolling plan which covers branch development, community-based disaster risk reduction activities, development of disaster management cells, trainings in running emergency response units, volunteer capacity building and establishment of health centres.

Under the earthquake operation³, a cooperation agreement between the International Federation and the national society was signed in February 2007. A separate agreement for reconstruction was also signed in February 2007. Under the earthquake appeal, long-term support has been provided by partner national societies through multilateral and bilateral channels. Currently there are ten partner national societies operating in Pakistan; American Red Cross, Austrian Red Cross, British Red Cross, Canadian Red Cross, Danish Red Cross, German Red Cross, Japanese Red Cross (in the form of a delegate seconded to the International Federation), Qatar Red Crescent, Swiss Red Cross and Turkish Red Crescent. Regular Movement partnership meetings are held for coordination purposes. In the emergency phase of the floods operation⁴, various partner national societies including the Austrian Red Cross, British Red Cross, Danish Red Cross, Finnish Red Cross, Spanish Red Cross, Swiss Red Cross and Swedish Red Cross extended their assistance in the form of emergency response units.

The PRCS and the International Federation have been liaising closely with the government's Earthquake Reconstruction and Rehabilitation Authority (ERRA), National Disaster Management Authority (NDMA) and relevant United Nations agencies to coordinate interventions under the earthquake and floods operations.

Transition phase

The national society at the moment has two emergency appeals, which will both be ending in 2009. The PRCS programmes are already in line with the International Federation's strategies such as disaster risk reduction, building safer communities, community-based first aid in action, and youth peer education. The International Federation is in the process of scaling-down the country office and scaling-up the national society capacity in terms of material and human resources. The International Federation will be handing over most of the recovery projects to PRCS by the end of 2009. However, the International Federation is committed to continue to support the core programmes of the PRCS beyond 2009, and has started the process of mapping which partner national societies are interested to support PRCS beyond 2009. The plans will be included in the 2010-11 planning document.

Most of the long-term programmes of PRCS have already been incorporated in the earthquake recovery operation. Beyond 2009, the programmes that will be carried out by the national society will be: disaster management (disaster risk reduction and disaster response), health and care (HIV, measles (under the global appeal), avian influenza (under the global appeal), organisational development/capacity building (branch development, trainings, fund raising) and humanitarian values (dissemination of material). The reconstruction programme will be finished by the end of 2009.

³ **The following partner national societies contributed to the Earthquake operation on a multilateral basis:** American Red Cross, Andorra Red Cross, Australian Red Cross, Austrian Red Cross, Barbados Red Cross, Belgian Red Cross, British Red Cross, Cambodian Red Cross, Canadian Red Cross, China Red Cross, Croatian Red Cross, Cyprus Red Cross, Czech Red Cross, Danish Red Cross, Estonia Red Cross, Egyptian Red Crescent, Finnish Red Cross, German Red Cross, Hellenic Red Cross, Hong Kong Red Cross (branch of China Red Cross), Icelandic Red Cross, Irish Red Cross, Italian Red Cross, Japanese Red Cross, Korea Republic Red Cross, Latvian Red Cross, Lithuanian Red Cross, Luxembourg Red Cross, Macau Red Cross (branch of China Red Cross), Macedonia Red Cross, Mauritius Red Cross, Monaco Red Cross, Nepal Red Cross, New Zealand Red Cross, Norwegian Red Cross, Qatar Red Crescent, Singapore Red Cross, Slovenian Red Cross, Spanish Red Cross, Swedish Red Cross, Swiss Red Cross, Taiwan Red Cross Organization, Trinidad and Tobago Red Cross, United Arab Emirates Red Crescent.

⁴ **The following partner national societies contributed to the Floods operation on a multilateral basis:** American Red Cross, Australian Red Cross, Austrian Red Cross, British Red Cross, Canadian Red Cross, Czech Red Cross, Danish Red Cross, Finnish Red Cross, German Red Cross, Hong Kong Red Cross (branch of China Red Cross), Icelandic Red Cross, Irish Red Cross, Japanese Red Cross, Liechtenstein Red Cross, Monaco Red Cross, Netherlands Red Cross, New Zealand Red Cross, Norwegian Red Cross, Singapore Red Cross, Swedish Red Cross, Swiss Red Cross, Taiwan Red Cross Organization.

Secretariat-supported programmes in 2009

Logical frameworks are available on FedNet⁵, or [upon request](#).

Pakistan earthquake emergency appeal:

The programmes under the Pakistan earthquake operation focus on the core areas of health, disaster management, organisational development and humanitarian values and seek to address the four Global Agenda goals. The earthquake related activities assist a population of approximately 1.1 million people across North West Frontier Province and Pakistan-administered Kashmir. The wider nationwide activities provide assistance under the core areas to the provinces of North West Frontier Province, Sindh, Baluchistan, Punjab, and Pakistan-administered Kashmir. The total budget of the earthquake appeal is CHF 164.5 million.

The earthquake operation was initially focused on providing basic needs to the affected people. With the emergency phase finished, the earthquake operation is now concentrated on longer term recovery, rehabilitation and development of the earthquake affected people and targeted nationwide.

There are five programmes under the earthquake operation, with various programme components. The programme objectives of the earthquake operation are as follows:

Achievements in the Earthquake operation since October 2005:

- Provided emergency relief to a total of 1.1 million people.
- The winter assistance “warm shelter” operation (from December 2006 until March 2007) assisted 18,200 families.
- Health and care provided to more than half a million people in the earthquake affected areas.
- Almost 60,000 people received psychosocial support.
- During the emergency phase, two water purification units provided 255,000 litres water per day to 25,000 people.
- A total of 29 water supply schemes have been repaired.
- Approximately 3,000 latrines have been constructed.
- In total, almost 9,500 families (60,000 people) have received some form of agriculture assistance through the livelihood project.
- Reconstruction of 36 public buildings, out of which ground work on 25 projects has started.

Disaster management programme: Vulnerability of communities to disasters has been reduced through effective disaster management systems of the Pakistan Red Crescent Society and better coordination between the local authorities and other key actors in the country.

Health and care programme: The health status of the most vulnerable communities in Pakistan is improved by revitalizing PRCS’s pre-earthquake health programme and through appropriate scaling-up in earthquake and non-earthquake affected areas.

Organisational development/capacity building programme: PRCS has a well functioning organisational base in order to provide quality assistance with greater impact and relevance to the most vulnerable people in all the core areas.

Reconstruction programme: Targeted communities affected by the earthquake gain access to health, educational and community services via the reconstruction of destroyed public health, education and community buildings.

Principles and values programme: National society staff/volunteers and targeted communities understand and exhibit tolerance and non-discrimination and communities are aware of the fundamental principles of the Red Cross Red Crescent Movement.

Pakistan cyclone Yemyin/floods emergency appeal:

The Pakistan cyclone Yemyin/floods appeal has been revised to provide long-term support to the flood affected people and help build the institutional capacity of the PRCS and resilience of the affected communities. The appeal comprises one main programme with three components covering the First, Second and Third Global Agenda goals. The floods operation is using an integrated programme approach with each programme component complementing the others. The operation targets four flood affected districts in Baluchistan and Sindh with an appeal budget of CHF 10.2 million. At the end of the emergency phase, the remaining funding was CHF

⁵ FedNet is an intranet and available to Movement members only

2.9 million. CHF 1.7 million will be utilized on the implementation of the activities on the ground, while the remaining funds will be used for the replenishment of the PRCS disaster preparedness stocks. The activities under this appeal will be carried out by June 2009.

The recovery operation is categorized as one programme, with three programme components under it. The post floods recovery operation therefore has three programme objectives:

1. To strengthen PRCS branch capacity and empower local communities in flood-affected areas in the provinces of Baluchistan and Sindh through an integrated community-based disaster management programme.
2. To provide appropriate quality basic health care services to the flood-affected population.
3. To enhance PRCS capacity in emergency health and water and sanitation preparedness through involvement of the PRCS volunteers and branch development.

<p>Achievements in the cyclone Yemyin/floods operation since July 2007:</p> <ul style="list-style-type: none"> • Non-food emergency relief items were distributed to 23,406 families. • Water and sanitation assistance was provided to more than 23,000 households. • More than 67,000 people received health care. • Shelter assistance was provided to 13,700 families (including 7,700 shelter kits). • Food assistance provided to over 27,000 families.

Programmes

Disaster Management

Programme component	Component outcome
1. Disaster management (disaster management programme component of earthquake operation)	The vulnerability of the communities is reduced by strengthening the PRCS disaster management capacity.
2. Livelihoods (disaster management programme component of earthquake operation)	Earthquake-affected people are able to optimize their own resources to improve their economic conditions and through communal efforts cope better with adverse events.
3. Gender and community participation (disaster management programme component of earthquake operation)	Implementation of recovery activities are enhanced by developing a better understanding of gender and community participation within communities and national society staff and volunteers.
4. Floods operation (integrated programme approach), Community based disaster risk management (disaster management programme component of floods operation)	Humanitarian assistance to the flood affected families in Baluchistan and Sindh is provided. Support is given to the communities for self recovery to contribute to the restoration of their basic living conditions and building safer communities.

Disaster management component: During the emergency phase of the earthquake operation, only a relief programme (assisting a total of 1.1 million people) was run, while the ongoing disaster management activities under the annual appeal (2005) were put on hold. However, in early 2006, the long-term disaster management programmes were incorporated into the earthquake appeal. The last relief distribution for the earthquake affected communities was carried out in March 2007 as part of the winter “warm shelter” assistance.

The disaster management programme is now in the recovery phase, with the main focus on the capacity building of the PRCS, volunteerism and building safer communities. Disaster preparedness and response is being conducted in the form of disaster management cells throughout the country and equipping them with disaster preparedness stocks. By the end of 2009, disaster preparedness stocks for 35,000 families will be placed in strategic positions nationwide. The breakdown of 35,000 families according to location is as follows: 10,000 at the national headquarters, 5,000 for each branch (3,000 stored at each provincial headquarters and 2,000 among ten disaster management cells), 1,500 each for Federally Administered Tribal Areas and Northern Areas branches, and 2,000 at the Pakistan-administered Kashmir branch. Apart from the hardware component, the disaster management programme also covers training of the national society staff; this includes trainings in capacity building in disaster response management, national disaster response team and regional disaster response team training. Community-based first aid components are also being used in community based disaster risk reduction, integrating health care and disaster management programmes. Safer communities are being built by first carrying out vulnerability capacity assessments and later on training community people through awareness sessions and community-based disaster risk reduction.

Lessons learnt: During the earthquake operation, one of the lessons learnt is that there were not many volunteers available right after the disaster for rapid assessment. PRCS and the International Federation prioritised the training and retention of volunteers. This lesson was fully utilized in the floods operation when volunteers trained during the earthquake operation in the north of the country were called in the emergency phase for floods.

Livelihoods component: The livelihood programme component was started in May 2006 as a recovery initiative for the earthquake affected people. Families have been supported through distribution of wheat and maize seeds together with fertilizers and tool kits. Apart from the seeds distributions, kitchen gardens (vegetables seeds) and fruit plants have also been distributed.

Lessons learnt: Distributions so far done under the livelihoods programme were family based which showed deficiencies in the needs assessment. The lesson learnt has been to plan the recovery programmes based on community needs, which is beneficial for the whole community in the long run. It has been addressed under the new concept of livelihoods. The new concept also gives much more prominence to organisational capacity building.

Gender and community participation: Gender and community participation is a cross-cutting component of the disaster management programme. It is designed to provide support and guidance to all other programmes to ensure community mobilization and participation in various recovery/rehabilitation activities. The gender and community participation team, which is based in Mansehra, gets involved with various programmes and plays an advisory role regarding the gender and community participation integration in the recovery programme.

Floods operation (Integrated programme approach)- Community-based disaster risk management: The floods appeal is using an integrated programme approach, which is integrating disaster management, health care and organisational development as programme components. The community based disaster risk management activities will be carried out in the same areas where the emergency operation was conducted.

b) Profile of target beneficiaries

The first programme component of disaster management (for the earthquake operation) will cover all the provinces of Pakistan and will include the pre-positioning of disaster preparedness stock and capacity building of the PRCS staff and volunteers. A disaster preparedness stock for 35,000 families will be maintained across the country including the national headquarters, provincial branch headquarters and district branches present in disaster prone areas. A total of 43 disaster management cells will be established in identified districts by the end of 2009, 22 of which are already put in place. Training of the PRCS staff and volunteers as well as the communities is an integral component of the capacity building part of the disaster management programme. The target population for all the provinces is 250,000 people.

The second programme component (for the earthquake operation) focuses on revitalizing the social and economic activities in the targeted communities. This project targets 100 earthquake affected communities in the North West Frontier Province encompassing 140,000 people.

The third programme component (for the earthquake operation) is designed to be "cross-cutting" across the entire recovery operation. As this is a cross cutting project, the target population will correspond with those targeted by health and disaster management.

The fourth programme component (for the floods operation with an integrated programme approach) will be carried out in four flood affected districts (two in Baluchistan and two in Sindh), targeting approximately 39,000 families. For successful implementation and sustainability of community based disaster risk management activities, it is important to have functioning branches of PRCS in these four districts.

The PRCS along with the International Federation Pakistan country office has established a disaster management working group which is based on the same structure and is a follow-up of the regional disaster management working group. Other than the International Federation country office, the disaster management working group involves people from PRCS national, provincial and regional branches and partner national societies present in the country. A technical committee has also been formed under the disaster management working group which addresses disaster management related issues arising nationwide.

A disaster risk reduction officer in the country office is being funded under the DiPECHO project. The idea is to build safer communities so that the impact of disasters is kept to a minimum. The plans of action for both the emergency appeals have been revised keeping in view this concept and integrating it with planned activities.

The World Bank has initiated a pilot project, as part of a global facility for disaster risk reduction in eight countries. In Asia Pacific, it has been applied in three countries, of which Pakistan is one. Under the pilot project PRCS will focus on education and community based disaster risk reduction. This is a long-term project and will continue beyond 2009.

c) Potential risks and challenges

As most of the activities under disaster management are community based, there is a risk that the communities might not accept the interventions. To overcome this, the national society is working to build community trust. Furthermore, Pakistan is a country prone to disasters, there is therefore always a risk that another disaster might occur and all the present resources might get consumed in responding to it.

For the floods operation, a potential risk for the flood operation area is another disaster of the same magnitude, which would put ongoing projects on hold.

Strategic interventions to be adopted under the above programme components:

1. Disaster management (earthquake operation): a) disaster preparedness and disaster response, b) community based disaster risk reduction, c) volunteerism.
2. Livelihoods (earthquake operation): a) organizational capacity building of communities, b) basic community infrastructure rehabilitation with provision of maintenance skills to the communities, c) provision of agriculture training with necessary agriculture inputs, d) provision of skills/vocational training and necessary tools kits.
3. Gender and community participation (earthquake operation): a) monitoring and assessment of ongoing programmes to enhance the gender and community participation integration, b) awareness raising in gender and community participation and institutional capacity building, c) strengthen the gender and community participation integration with the sectors and partner national societies, d) capacity building of the staff of PRCS and partner national societies.
4. Floods operation (integrated programme approach), community based disaster risk management: a) community based disaster risk management, b) create and strengthen branches in flood affected areas.

Long-term perspective: The disaster management activities under the earthquake and floods operations have been aligned with the concept of building safer communities over a period of time. The idea is to develop coping mechanisms and resilience of the identified communities so that the effects of any future disasters are minimized.

In order to build the national society capacity in the long-term, the Federation country office organizes national disaster response team trainings, based on the regional disaster response team concept. So far two trainings have taken place and a national disaster response team roster has been developed which gives an overview of the trained people, their expertise and availability. In addition, approximately ten people are trained in regional disaster response team in the country office and national society.

Health and Care

Programme component	Component outcome
1. Basic health care (health and care programme component of earthquake operation)	Earthquake affected people in northern Pakistan and other areas have access to appropriate basic health care.
2. HIV (health and care programme component of earthquake operation)	Vulnerability to HIV and its impact is reduced through community based HIV prevention and support activities.
3. Capacity building in health (health and care programme component of earthquake operation)	Pakistan Red Crescent capacity in emergency health preparedness and community based health is enhanced.
4. Water and sanitation (health and care programme component of earthquake operation)	The health status of vulnerable people in Pakistan is improved through hygiene promotion, health education, provision of sanitation facilities and safe drinking water.
5. Floods operation (integrated programme approach), programme component: basic health care and capacity building	The health status of the catchment population is improved in health care and water and sanitation.

Health and care component: Basic health care was provided to the earthquake-affected people right after the disaster through mobile health units. The mobile health units continue to provide curative and preventive health care in the communities where no alternative health options are present, and will continue to provide basic primary health care services until the third quarter of 2008, later on focusing more towards mother and child health. In 2009, the plan is for the mobile health teams to deliver preventive health care only.

The International Federation country office has worked with the PRCS to develop an avian Influenza proposal under the global appeal. Avian influenza activities will be incorporated under this programme component for integration purposes.

Lessons learnt: The establishment of mobile health units has been crucial in terms of providing health care to the most vulnerable right after the outbreak of a disaster. The experience in the North West Frontier Province, where male doctors are not allowed to examine female patients, also highlighted the need to be culturally sensitive. To address the issue, a female doctor, a female nurse and a lady health worker were included as members of each mobile health team.

HIV component: A voluntary counselling testing centre became operational in 2004 in the PRCS Punjab provincial branch, and is being funded by the Swedish Red Cross multilaterally. The centre carries out group sessions, and individual counselling and tests for HIV.

Capacity building in health component: Capacity building activities include the enrolment of volunteers for various activities, including community-based first aid and the celebration of significant events like World First Aid Day. This component also covers the training of PRCS health staff.

Water and sanitation component: The water and sanitation component was initiated after the earthquake through water and sanitation emergency response units which provided clean drinking water to the affected communities till mid-2006. The hygiene promotion component was also integrated early into the operation. The water and sanitation component now focuses on the recovery with rehabilitation of water supply schemes, latrine construction and hygiene promotion.

Lessons learnt: During the emergency phase, distributed items in the hygiene kits were inappropriate and unacceptable to the communities. These items had to be replaced with more culturally-acceptable items, emphasising the importance of being culturally-sensitive.

Floods operation (integrated programme approach) component- Basic health care and capacity building: The floods appeal used an integrated programme approach while integrating disaster management, health care and organizational development activities. Health care activities will be carried out in the same areas where emergency relief operations are being conducted. In addition to providing health care to flood-affected communities, the programme will also focus on training PRCS staff in the maintenance and operation of emergency response units.

b) Profile of target beneficiaries

The health and care component (under the earthquake operation) seeks to prevent disease and death through the continued provision of appropriate quality basic health care services, while strengthening PRCS capacity in responding to public health emergencies through community -based health care, first aid, sanitation and hygiene promotion activities. The target population includes 200,000 people in the earthquake-affected areas of North West Frontier Province and other parts of Pakistan.

The HIV component (under the earthquake operation) seeks to provide community-based HIV prevention and support through a voluntary counselling and testing centre at the PRCS' branch in Lahore. The centre is targeting a beneficiary population of 30,000 people.

Capacity building in the health component provides support to ongoing nationwide health programmes (under the earthquake operation) through static and mobile health units in various provinces.

The fourth component of the water and sanitation (under the earthquake operation) programme has three integrated aspects; hygiene promotion, sanitation and water supply. All three are inter-dependent and carried out by three teams working closely together in three targeted areas – Balakot, Batagram and the Allai Valley. The main target population consists of 160,000 people in communities of the North West Frontier Province.

Under the floods operation (integrated programme approach) component, four static health units have been proposed. These health units will provide all the components of basic primary health care including curative care, basic diagnostic facilities, mother neo-natal child health, ante-natal care, post-natal care, vaccination, nutrition, family planning, communicable diseases and health education. The health units are expected to provide curative care to approximately 30,000 people, while an estimated 60,000 people are expected to benefit from the preventive health and health education activities. PRCS staff and volunteers will be trained in various topics such as community-based first aid, public health in emergencies, reproductive health, communicable diseases and rational use of medicines. The emergency response units donated by partner national societies shall be maintained by the staff and a core team will be trained by foreign experts.

Long-term perspective: Aside from activities specific to the earthquake and flood appeals, public health is the main strategic direction of the national society, in line with the global health and care strategies (capacity building, social mobilization, and partnerships, health in emergencies, advocacy and community empowerment). The PRCS has ten basic health units in different locations all over Pakistan and plans to open eight more. HIV interventions are specifically long-term, using strategies which involve youth peer education. For "community-based first aid in action" activities, the International Federation guidelines will be applied. Priority will be given to areas in the North West Frontier Province, Punjab and Karachi for "community-based first aid in action" and avian influenza interventions.

The health technical committee meets every other month to discuss technical issues and make recommendations to the PRCS management. The health personnel in PRCS are provided with training opportunities in areas such as public health in emergencies, project management, and rational use of medicines, report writing, reproductive health, community-based first aid and HIV. The capacity building of PRCS is constantly being enhanced through the continued technical support of the International Federation.

c) Potential risks and challenges

Pakistan is a country prone to disasters, and a high risk exists that all current resources will be diverted in the eventuality of another disaster. The PRCS is keen to make water and sanitation a long term project. However, their priorities may change and the project can be taken out of the programme. The local society has many taboos including HIV, therefore there is a high disinterest in visiting voluntary counselling and testing centres for testing.

Organizational Development/Capacity Building

Programme component	Component outcome
1. Institutional capacity building and branch development (organizational development programme component of earthquake operation)	The institutional capacity of the PRCS is developed and strengthened through expansion of PRCS branches in disaster-prone areas. Overall PRCS governance, management and programme planning is improved to enable better service delivery.
2. PRCS has a sustainable resource development, mobilization and fundraising strategy and cooperation agreement strategy (organizational development programme component of earthquake operation)	PRCS has developed a long-term and well-integrated development plan in line with the strategic direction of the society and the Movement. A bottom-up participatory planning culture has been developed at all levels of the national society. PRCS has finalized cooperation agreement strategy with Movement partners and other donor agencies.
3. Communications (information and planning, monitoring, evaluation and reporting) and advocacy development (organizational development programme component of earthquake operation))	PRCS has the capacity to meet communication and advocacy needs.
4. Floods operation (integrated approach), Programme component: Capacity building	New branches are developed and strengthened in the flood affected areas.

Organizational development component: The organizational development programme advocates for a strong organizational structure within the national society, and aims to support existing PRCS branches and help develop new ones in disaster-prone areas. Another focus of the programme is on building the institutional capacity through the development of a unified constitution, resource mobilization and fundraising, and the

strengthening of communications capacity (which includes information and planning, monitoring and evaluation, reporting).

Lessons learnt: Progress under the organizational development programme has been slow as all stakeholders have to be involved to make the programme a success.

Reconstruction component: Reconstruction is the largest programme under the earthquake operation, initiated in 2006, with an initial plan to build 52 public buildings. However, based on the projects allocated by the government, only 36 public buildings are being built. These include 16 educational facilities and 12 health facilities. There are also plans for the construction of eight new vocational/community centres. The reconstruction programme is focused on building safer communities by building earthquake resistant buildings.

Lessons learnt: Based on the experience of previous International Federation operations, the in-country office decided not to be involved in the construction of housing.

b) Profile of target beneficiaries

The establishment of a network of district branches (under the earthquake operation) in vulnerable districts throughout Pakistan is a priority for the PRCS. The programme will support the human resource needs of the PRCS, both at headquarters and branch level. The branch expansion will have a direct impact on the populations of 33 communities. Overall, the programme will benefit some one million people.

The programme will help to strengthen PRCS’s programme monitoring and evaluation, financial management, narrative reporting, and communication (information and, planning, monitoring, evaluation and reporting) and advocacy, and enhance the national society’s image and credibility. Increased organizational capacity will enable the PRCS to scale up its potential response to disasters. However, the enhancement of quality assistance delivery to the current target population is the immediate focus.

Long-term perspective: Currently, the national society has 80 branches throughout Pakistan. The development of new branches will help the PRCS to scale up its programmes and reach a wider population. The unified constitution which is in the process of being finalized will help various branches to implement activities in a synergized manner. Fundraising activities will help the national society to deliver and implement sustainable programmes.

c) Potential risks and challenges

A major challenge is to ensure that the organizational development programme remains a priority for the national society after the end of the earthquake operation. At the start of the earthquake operation, it took some time before the PRCS viewed organizational development as a core activity.

For the floods operation, a potential risk is another disaster of the same magnitude which will put most of the activities under this operation on hold.

Reconstruction

Programme component	Component outcome
1. Reconstruction	36 public buildings encompassing health, education and community centre facilities are completed and used by communities by end of 2009.

b) Profile of target beneficiaries

In close coordination with communities, school authorities, local government and the Earthquake Reconstruction and Rehabilitation Authority (ERRA), this project aims to reconstruct 36 public buildings. Thirty of the buildings will be built through multilateral projects, while the remaining six are bilateral. The PRCS and International Federation have signed a project agreement as part of a cooperation agreement which outlines the technical requirements and minimum standards, as well as the protocols and standards for engineering firms and building companies to carry out the construction.

c) Potential risks and challenges

An ongoing challenge for the reconstruction programme is the continuous increase in the prices of construction materials. The PRCS and the International Federation construction team has to monitor the situation closely and take the necessary measures to address the problem.

Principles and Values

Programme component	Component outcome
1. Reducing discrimination and intolerance	PRCS has contributed to creating a culture of tolerance and non-discrimination in society by raising public awareness of the Movement's Fundamental Principles.
2. Dissemination of Red Cross Red Crescent principles and values	The Red Cross Red Crescent image and awareness of the Movement is enhanced among vulnerable groups and communities.

Humanitarian values is a cross-cutting programme and focuses on reducing discrimination and intolerance and the dissemination of Red Cross Red Crescent principles and values.

b) Profile of target beneficiaries

For budgetary and organizational reasons, humanitarian values-related activities are incorporated into the organizational development budget. The humanitarian values components are cross-cutting and are already being implemented in various programmes via the gender and community participation project as well as the HIV project under the health and care programme.

While humanitarian values apply to the entire target population of the various PRCS programmes, there is a particular focus on marginalized groups such as women, children, the elderly and people living with HIV. In addition, the PRCS aims to promote the Fundamental Principles among the wider public through publications, briefings as well as the media and promotional events.

Role of the secretariat

a) Technical programme support

Under the earthquake operation's plan of action, the International Federation provides support across all programme areas through international and local staff. If there is a need, the technical departments in Geneva, the region and the zone are also contacted. In 2009, technical support will be needed from the South Asia regional office and Asia Pacific zone office for training purposes. Technical support will also be required in the core programmes to ensure they are aligned with global initiatives and trends.

Through a process of localizing positions and increasing national society ownership of the programmes, the number of expatriate staff will be reduced to ten in 2008 and five in 2009. The International Federation will also reduce the number of local staff from 140 in 2007 to 100 during the 2008-09 period. There was a steep rise in the number of local staff in 2007 due to the extensive floods operation. The floods operation will be implemented by the national society with technical support from the International Federation office.

b) Partnership development and coordination

Under the ongoing 2005-09 earthquake operation, the Pakistan Red Crescent Society and the International Federation have a cooperation agreement and a construction-related project cooperation agreement (both signed February 2007). These agreements formalised the relationship between the national society and the International Federation in operational matters.

The International Federation and the ICRC now hold fortnightly coordination meetings (these meetings were held weekly at the onset of the operation). The PRCS, International Federation and ICRC meet on a monthly basis. Weekly reconstruction coordination meetings are held involving PRCS senior management (secretary general and a board representative) and the International Federation (reconstruction delegate and finance delegate).

Health technical meetings are held every two months and bring together representatives of the Pakistan Red Crescent, International Federation and in-country partner national societies. Similar technical meetings for disaster management are planned.

The International Federation disaster management team along with the national society organizes quarterly national disaster management working group meetings. The aim of these meetings is to gather disaster management personnel from all over the country at the PRCS national headquarters, share information on the progress achieved in the previous quarter and discuss issues which require the feedback from all quarters. The

PRCS and International Federation also attend the regional disaster management working group meetings on a regular basis.



There are nine partner national societies operating in Pakistan under the earthquake recovery plan of action. Their activities will continue in 2008 and some, through to 2009. The PRCS hosts monthly partner national society coordination meetings. Each partner national society generally has about two expatriate and local staff. Although, some of the partner national societies are operating under bilateral arrangements with the PRCS, their activities contribute to the overall plan of action to support the PRCS.

The International Federation continued to provide its support to the PRCS in assisting the most vulnerable communities in the country. International Federation

The PRCS at the moment has different agreements with various partner national societies that are present in the country, the contents of which vary from document to document. In order to ensure consistency, the national society is in the process of developing a cooperation agreement

strategy. The cooperation agreement strategy will include all PRCS partners, who will be involved in the process of finalizing the document. The national society plans to finalize the document by the end of 2008.

ICRC and PRCS work in the conflict-affected areas. At the moment, the ICRC supports programmes in Pakistan-administered Kashmir and will soon extend the programmes to the Federally Administered Tribal Area. The ICRC supports the PRCS in the following programmes:

- Law and Fundamental Principles.
- Emergency preparedness (safe first aid and CPR⁶).
- Re-establishing of family links (tracing).

In summary, the partner national society in-country presence and associated activities are:

Partner national society	Project/activity	Planned project length (provisional)
Turkish Red Crescent	Disaster management, psychosocial support, reconstruction	End 2009
British Red Cross	Livelihoods, disaster risk reduction	June 2009
Canadian Red Cross	Health and care	End 2010
American Red Cross	Mother and child health	End 2009
Danish Red Cross	Health and care	End 2011
Swiss Red Cross (under Swiss/Austrian Red Cross consortium)	Water and sanitation	Aug 2008
Austrian Red Cross (under Swiss/Austrian Red Cross consortium)	Water and sanitation	Aug 2008
German Red Cross	Health and care	End 2011
Qatar Red Crescent	Health and care	Oct 2008
Japanese Red Cross	In the form of a field delegate seconded to the International Federation	

It is planned that some partner national societies will send teams to train PRCS staff and volunteers in emergency response unit operations and response under the floods operation.

c) Representation and Advocacy

⁶ Cardio pulmonary resuscitation.

UN inter-agency standing committee (IASC) meetings are held monthly. The International Federation's head of country office is an observer at these meetings. The International Federation also frequently attends general coordination meetings with the government, UN agencies and other NGO/INGOs.

There is liaison with Earthquake Reconstruction and Rehabilitation Authority on all activities in the quake-affected areas. Similarly with non-earthquake related disaster activities (e.g. floods), the national society has a close working relationship with the government's National Disaster Management Authority, which responds to natural disasters at provincial and district levels.

The PRCS and International Federation have close relationships with the World Health Organization (WHO), UNAIDS, and the Ministry of Health. The PRCS has field-level relationships with numerous NGOs. This is vital, particularly in times of emergency, as cooperation is essential in getting swift assistance to beneficiaries.

d) Other areas

An organizational development delegate will be supporting the national society in organizational development/capacity building issues. The delegate will join the country office during the third quarter of 2008. The International Federation is in the process of scaling-down its country presence as the PRCS strengthens its organizational capacity. The International Federation country office has applied for legal status with the government. Benefits of a legal status agreement are wide, and include an easier process for the issuance of visas for international staff.

The International Federation's South Asia regional office, the Asia Pacific zone office and the secretariat in Geneva have extended technical and operational support under support services (human resource, administration, finance, security, communications, IT/telecommunications and logistics) since the start of the earthquake operation. Finance support is required from the finance department in the South Asia regional office due to the introduction of accounting software to PRCS in 2008. Procurement support and trainings from the regional logistics unit in the zone will be sought in the future. Support from the South Asia regional office and zone office on training in the area of planning, monitoring and evaluation and reporting will also be needed.

Promoting gender equity and diversity

Gender equity and diversity issues are promoted under the gender and community participation project. As cross-cutting issues, they are already integrated into the livelihoods, water and sanitation, and primary health care projects.

The aim of the project is to ensure that gender issues/needs are addressed, and encourage community participation in rehabilitation activities. It will focus on marginalized members of communities such as women, children, the elderly and disabled. A key component of the project is trying to ensure women in culturally-conservative areas, such as those in northern Pakistan, have access to the benefits of recovery programmes.

The gender and community participation team conducts trainings for field staff to sensitize them to the needs of marginalized groups and to incorporate these factors into their programme design. The project's field staff also works directly with local communities.

Quality, accountability and learning

The International Federation country office is in the final stages of appointing a consultant to evaluate the earthquake operation. The evaluation is likely to take place by September 2008. Programmes are designed and implemented following the International Federation's guidelines on minimum standards in disaster response. The national society implements programmes only after detailed assessments and consultation with beneficiaries. All programme managers have the responsibility to monitor, evaluate and report on activities against the planned activities through programme and operations updates. Various pledge based narrative and financial reports are also provided to individual donors as required. The national society also ensures that its financial management systems meet International Federation standards and requirements.

How we work	
<p>The International Federation's activities are aligned with its Global Agenda, which sets out four broad goals to meet the Federation's mission to "improve the lives of vulnerable people by mobilizing the power of humanity".</p>	<p>Global Agenda Goals:</p> <ul style="list-style-type: none"> • Reduce the numbers of deaths, injuries and impact from disasters. • Reduce the number of deaths, illnesses and impact from diseases and public health emergencies. • Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability. • Reduce intolerance, discrimination and social exclusion and promote respect for diversity and human dignity.
Contact information	
<p>For further information specifically related to this plan, please contact:</p> <ul style="list-style-type: none"> • In Pakistan: Pakistan Red Crescent Society contact: Ilyas Khan, Secretary General; phone: + 92 51 925 0407; mobile: + 92 333 511 4223; email: sec.general@prcs.org.pk. • In Pakistan: Federation country office contact: Azmat Ulla, Head of country office; phone: +92 51 925 0416; mobile: +92 300 850 3317; fax: +92 51 925 0418; email: azmat.ulla@ifrc.org. • In India: South Asia regional office contact: Al Panico, Head of regional office; phone: +91 11 2411 1125, fax: +91 11 2411 1128; email: al.panico@ifrc.org • Asia Pacific zone office in Kuala Lumpur: phone: +603 9207 5700; fax: + 603.2161.0670 <ul style="list-style-type: none"> ○ Jagan Chapagain (deputy head of zone office); email: jagan.chapagain@ifrc.org; ○ Penny Elghady (resource mobilization and planning, monitoring and evaluation, and reporting (PMER) coordinator); email: penny.elghady@ifrc.org; ○ Please send pledges of funding to zonerm.asiapacific@ifrc.org 	

[**<Map below, please click here to return to title page>**](#)

