Members of a Red Cross Red Crescent response team working tirelessly to rescue individuals trapped in rubble after hundreds of houses collapsed due to the devasting earthquake. Their dedication and swift response are critical in life saving during the challenging time. (Photo: IFRC)

<table>
<thead>
<tr>
<th>Appeal No:</th>
<th>To be assisted:</th>
<th>Appeal launched:</th>
<th>Glide No:</th>
<th>DREF allocated:</th>
<th>Disaster Categorization:</th>
</tr>
</thead>
<tbody>
<tr>
<td>MDRAF007 (specific for Herat earthquake)</td>
<td>50,000 people</td>
<td>21/4/2021</td>
<td>EQ-2023-000184-AFG</td>
<td>CHF 750,000</td>
<td>Orange</td>
</tr>
<tr>
<td>Operation start date: 7/10/2023</td>
<td>Operation end Date: 31/12/2024</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**IFRC Secretariat Funding requirement:** CHF 9 million

**Federation-wide funding requirement:** CHF 20 million

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1 This Operational Strategy is part of the Afghanistan Humanitarian Crises – Revised Emergency Appeal (with an overall Secretariat funding ask of CHF 120M and Fed-wide funding ask of CHF 300M) and was developed to complement the responses in-country planned under the other three Operational Strategies published earlier. This specific Operational Strategy has a funding ask of CHF 8M and covers the IFRC response to the earthquake impacted areas in Herat.
An earthquake with of magnitude 6.3, followed by multiple aftershocks, struck western Afghanistan on Saturday 7 October 2023 between 11:00-12:00 local time. The earthquake’s epicentre was in Zinda Jan district, 40 km northwest of Herat City. It was felt strongly across four provinces (Badghis, Farah, Ghor, and Herat), with Herat bearing the brunt. The initial earthquake was followed by several aftershocks and strong earthquakes. The latest, of magnitude 6.3 on 15 October 2023, affected 30 new villages and increased damages in those earlier affected.

The Afghanistan National Disaster Management Authority (ANDMA) has indicated that the earthquakes have mostly impacted four districts of Herat: Guzara, Injil, Khushk, and Zinda Jan. The earthquake of 15 October affected additional districts. Official data indicates that over 2,000 people have been killed and over 9,000 injured.

There has been extensive impact on structures, with some 21,500 houses destroyed or damaged. In several affected villages, not a single house remains standing. Thousands of people are living in open space under tents or tarpaulins as their houses were destroyed or are afraid of returning home due to frequent aftershocks.

Afghan Red Crescent Society (ARCS) staff and volunteers from the Herat branch were among the first responders. They were augmented by teams from neighbouring provinces, with 32 response teams deployed in the affected areas thus far. ARCS has been engaging in lifesaving activities including search and rescue, emergency first aid, ready to eat food and water distribution, emergency shelter and household items distribution and transportation of the injured people to the hospital.

Under this Operational Strategy, interventions will be reoriented for multisector interventions focusing on basic needs and livelihood, health, shelter, and water, sanitation, and hygiene (WASH), with community engagement and accountability (CEA), disaster risk reduction (DRR), national society development (NSD), and protection gender and inclusion (PGI) mainstreamed. Cash and voucher assistance (CVA) will be the preferred modality for
delivering assistance, recovery interventions will be initiated alongside relief, and the Preparedness for Effective Response (PER) approach will be adopted from the outset of the operation.

**Severity of humanitarian conditions**

1. **Impact on accessibility, availability, quality, use and awareness of goods and services.**

Most affected households do not have food and financial means for buying very basic household items. The major destruction and damage to houses, buildings and infrastructure have compounded access to livelihoods among affected populations. Some households have lost food stocks and agricultural inputs, some have lost livestock, and traders have lost stocks that they would have sold to earn an income. People who were already in debt will struggle to repay due to a reduced means of income. Protection concerns for women and girls are on the rise with many women at risk of not obtaining information on earthquake preparedness and missing out on much needed assistance. There is, therefore, a need to support the re-establishment of livelihoods utilising in-kind or CVA.

In most of the affected districts, there were limited or no pre-existing static facilities. As such, there is a need to enhance accessibility of health services through mobilization of mobile health teams. Establishment of static facilities will be informed by consultations with the authorities and other health actors to ensure alignment with the basic package for health services (BPHS).

The earthquake has also damaged water and sanitation facilities. As such, the provision of safe water (including via water trucking or establishing water points where surface water is easily accessible) closer to the affected locations is needed in the immediate term. There is also a need for emergency sanitation facilities. In the medium-term, support for rehabilitating water and sanitation facilities will be crucial to enabling a swift recovery.

There is also a need to provide affected households with water storage containers, water purification tablets (for household water treatment, where necessary), and hygiene items that meet the needs of all groups, including the provision of appropriate sanitary materials for menstrual hygiene management.

The risk of communicable diseases, such as the spread of acute watery diarrhoea (AWD), is elevated in the context where water and sanitation facilities have been damaged and people are living in camp-like conditions. It is crucial that health and hygiene promotion efforts, linked to health awareness, be increased.

Field report reveals that approximately 21,500 houses (homes to some 150,000 people) have been destroyed or damaged. Observations by the Red Cross Red Crescent multisector team deployed to affected areas confirmed that no house remained intact in at least 12 villages of Zinda Jan district.

There is a need for emergency shelter assistance for those who lost their houses. Additionally, support is needed for households hosting those who have been displaced by the earthquake who often might be outside areas most affected by the quake.

Support for transitional shelter and rebuilding needs to be done alongside emergency shelter assistance because winter is on the way in one month.

Rebuilding efforts will need to ensure that new houses are resilient to future seismic shocks as well as to storms. Support may be delivered in-kind or by utilising CVA to provide affected households with choice and flexibility to rebuild their homes according to locally accepted means, and both would be accompanied by technical support around safe construction techniques.

Where original shelter locations are deemed vulnerable to future seismic shocks, adequate and suitable land for resettlement of affected households will be needed. Following the recent earthquakes, local authorities have swiftly established a commission to oversee the response efforts, with a particular focus on developing an effective shelter strategy. Preliminary assessments in the affected communities indicate that residents have a strong attachment to their ancestral land and would be reluctant to relocate.

The earthquakes struck less than one month before the onset of another imminent winter when the capacity of households to cope is already stretched.
and significantly constrained. There is a need to ensure that preparedness for seasonal adaptation (such as stocking relevant winterisation kits) is done before winter arrives.

2. Impact on physical and mental well being

In addition to killing at least 2,000 people, the earthquakes left more than 9,000 people injured, some severely. The need for emergency health services is critical, including the deployment of health teams to provide services in affected locations and referring serious cases to better-equipped facilities in other locations. There is also a need to provide health teams and health facilities with medicines, medical supplies, and equipment.

Initial analysis indicates that there were no pre-existing static health facilities in most affected districts. While health facilities have been damaged in some districts with those still functioning, especially in the capital, overwhelmed with patients as they were already operating at a limited capacity due to pre-existing challenges. There is, therefore, a need to support the rehabilitation and equipment of health facilities including in areas that were not most affected.

The earthquakes have caused severe mental anguish to people who have lost their close family members, homes, and livelihoods, and those whose underlying psychosocial issues have been escalated by the disaster/emergency.

According to assessments and anecdotal information, affected individuals have expressed shock, fear, and grief due to the situation. Addressing MHPSS will prevent the development of serious mental health and psychosocial support concerns. As such, provision of timely and targeted MHPSS interventions will be critical to promoting resilience, facilitating recovery, and enhancing the overall well-being of affected populations including staff and volunteers.

3. Risks & vulnerabilities

The earthquakes struck against the backdrop of a country reeling from effects of decades of conflict, protracted severe drought, the effects of other intense climate-related disasters, extreme economic hardship, a battered health system and system-wide gaps. There is also internal and cross-border displacement, with cross-border returns ongoing or anticipated. Impacts of the earthquakes in the Herat province compound an already dire humanitarian situation. Consequentially, timely response efforts are critical. Currently people are living under tarpaulins, tents, or in open spaces.

Children are particularly vulnerable and have suffered severe psychological distress from the earthquake requiring MHPSS. Additionally, some earthquake-affected households have experienced internal displacement, relocation, and the separation of families. Critical gaps identified to date include the limited number of partners available to provide specialized counselling and poor phone and signal connectivity in the affected areas which is disrupting communication and delaying the transfer of assessment data.

The earthquakes have left some children orphaned, women widowed, men as widowers, and some people with physical disabilities. There is a need to make sure that all services will incorporate and address the unique needs of groups which have higher vulnerabilities. This will include the identification of persons with specific needs for either direct assistance or referral to other suitable services available.

Reports from the affected areas indicate that some people lost identification documents. This group of people must be included in lists of those to receive assistance. Furthermore, mechanisms need to be put in place for affected people to be aware of the assistance they are entitled to, and to ensure that assistance is delivered in a safe and dignified manner. A two-way, cross-sectoral communication mechanism to allow for the reporting of complaints and any other issues needs to be prioritised. Furthermore, the earthquakes destroyed dozens of schools and community-based education facilities. Immediate needs include creating temporary learning spaces and replacing teaching and learning materials.

The houses in the affected areas were made of mud and had flimsy constructions that rendered them extremely vulnerable to earthquakes since they lacked structural integrity, reinforcement, and sturdy enough foundations. Because of their poor load-bearing capacity and low resistance, such
houses damaged during the earthquakes and subsequent aftershocks causing fatalities and casualties, extensive damage to household items, and the displacement of thousands.

Many people are living in open spaces under tents or tarpaulin as their houses were destroyed or are afraid of returning home due to frequent aftershocks. The situation was exacerbated by a strong storm on 12 October 2023 which blew away tents and tarpaulins provided by humanitarian agencies.

ARCS and IFRC teams on the ground have engaged to determine the information needs of affected communities. Based on observations, people need accurate information on the availability of services or assistance. There were rumors that another strong earthquake would strike again. It is necessary for accurate information about earthquakes, including that earthquake cannot be predicted, to be shared with the community. In addition, information on how the community can protect themselves during aftershocks or earthquakes is needed by the community. The Accountability of Affected Population (AAP) Working Group has shared some questions to facilitate collection of information from the community. These include questions about accessibility to aid, how to find missing family member(s), and dealing with stress because of earthquakes.
CAPACITIES AND RESPONSE

1. National Society response capacity

1.1 National Society capacity and ongoing response

The ARCS presence and local networks across the country are exceptionally well-established, which enables the National Society to reach vulnerable populations not served by other humanitarian actors, for instance, in highly remote and hard-to-reach areas. The ARCS has vast expertise with diverse types of programming through multilateral projects supported by the IFRC, as well as through programmes with other Red Cross Red Crescent Movement partners. This includes programming related to youth development, disaster risk management, community-based health and first aid (CBHFA), restoring family links (RFL), community resilience including WASH and livelihoods, dissemination of International Humanitarian Law (IHL), humanitarian values, Fundamental Principles of the International Red Cross and Red Crescent Movement, and physical rehabilitation for internally displaced persons (IDPs), people with disabilities (PWDs).

ARCS volunteers play a critical role at all stages of ARCS programmes. This includes the assessment, identification, and registration of target communities including IDPs. In addition, volunteers carry out hygiene promotion and community mobilisation.

ARCS provides access to healthcare services through a network of 200 plus facilities which includes a 50-bed hospital in Kabul, 46 fixed clinics, one comprehensive health centre (CHC), 23 health sub-centres and 101 mobile health teams (MHTs) and/or emergency MHTs active in all 34 provinces in the country. The above 168 facilities (71 are fixed) are augmented by temporary facilities known as health camps. There are 40 health camps focusing on polio eradication operational in 2023. Currently, 13 ARCS MHTs have been deployed to the earthquake-affected areas to provide trauma care and emergency health services.

With nationwide coverage through 34 provincial branches – including in Herat– and a network of at least 24,000 volunteers, of whom 28 percent are female, (source: https://data.ifrc.org/FDRS/national-society/DAF001) the ARCS as part of their auxiliary role can implement large-scale and long-term preparedness, response and recovery programmes in coordination with public authorities.

Since 2000, ARCS with the support of IFRC responded to 16 emergencies in Afghanistan. Out of which floods comprise the highest number (7) followed by earthquake and drought. Considering the significant impact and the shelter needs after the Khost and Paktika earthquake in 2022, IFRC/ARCS worked closely with ES-NFI members to address the shelter needs of the affected communities. A total of 2,083 shelter repair which is one-third of damaged shelter gaps identified by the shelter cluster was covered by ARCS/IFRC-supported programmes.

![Emergencies that were responded by ARCS with the support of IFRC since 2000.](https://go.ifrc.org/emergencies)
Applying principled humanitarian action, the ARCS enjoys an elevated level of acceptance and has access to communities across the whole country. The branches in targeted areas have teams of trained volunteers in disaster preparedness and response through established national and branch disaster response teams, mobile health teams, and community mobilisers as part of the CBHFA programme.

1.2 Capacity and response at national level

As an auxiliary to the public authorities, the ARCS is the primary national partner for responding to disasters across Afghanistan and facilitates disaster preparedness activities at the local level with its 34 provincial branches spread nationwide, including in the affected province of Herat. The ARCS, with the support of the IFRC’s Country Delegation, is coordinating closely and consulting with the local authorities, UN agencies, and other (inter) national humanitarian actors at the national and sub-national levels.

As of 21 October, ARCS reached more than 70,000 people from 10,149 households with emergency shelter and household items, food items, health services and WASH items in more than 40 villages in Herat provinces.

More than 5,500 households affected by earthquake received emergency shelter and household items in Herat province. Refer to chart 1 for key emergency shelter and household items that have been distributed by ARCS.

ARCS deployed five tractors from Khost and Paktika to Herat to support debris clearing efforts. The tractors were obtained with Government of Japan funding. Likewise, the National Society deployed three engineers, who were part of the shelter technical team supporting the Khost and Paktika earthquake response, to join multi sectorial assessment team in Herat.

ARCS reached more than 7,300 households with food items affected by earthquake. Refer to chart 2 for total items and quantity distributed.

ARCS has deployed 16 health facilities (13 MHTs and three static clinics) to support in management of injuries in the affected areas. The health facilities are supported financially by the Danish Red Cross, Norwegian Red Cross and IFRC. As of 19 October 2023, the health facilities have provided health services to 10,873 people. The services include first aid and transportation of serious cases to the hospitals in Herat City.

### Sanitation and hygiene items

<table>
<thead>
<tr>
<th>Items</th>
<th>Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jerry can</td>
<td>5,460</td>
</tr>
<tr>
<td>Hygiene kit</td>
<td>333</td>
</tr>
<tr>
<td>Mazari broom</td>
<td>227</td>
</tr>
<tr>
<td>Water bottle (1 l)</td>
<td>500</td>
</tr>
<tr>
<td>Water tank (small size)</td>
<td>3</td>
</tr>
<tr>
<td>Solar panel</td>
<td>3</td>
</tr>
<tr>
<td>Kettle</td>
<td>10</td>
</tr>
<tr>
<td>Cups</td>
<td>60</td>
</tr>
</tbody>
</table>
ARCS deployed MHPSS staff and 31 MHPSS volunteers (18 female and 13 male) in the field. The team are augmented by the DRC MHPSS team. Based on initial assessments, health related needs include emergency health, MHPSS, and rehabilitation or equipment of health facilities.

In addition, ARCS distributed 500 bottles of water, three water tanks (small size) along with 60 cups, 10 kettles and three solar panels and batteries and other relevant equipment for providing drinking water in the affected areas. Likewise, the National Society distributed jerry cans for storing water and hygiene kits to meet hygiene needs of the people. Refer to table 3 for detail.

Surge capacity
Alerts for four surge profiles were sent on 9 October covering communications, health coordination, information management, and shelter (engineer). As of 21 October, suitable candidates have been identified for three profiles: communications, health coordination, and shelter. Candidates for two other profiles – humanitarian diplomacy and Preparedness for Effective Response (PER) – have been identified and will be engaged via the IFRC fast-track recruitment process.

2. International capacity and response

2.1 Red Cross Red Crescent Movement capacity and response

The ARCS is supported by the IFRC Secretariat, the International Committee of the Red Cross (ICRC) and Participating National Societies (PNS) with an in-country presence or those supporting multilaterally.

**IFRC secretariat**

The IFRC Country Delegation for Afghanistan, established in 1990, continues to support the ARCS with the following: humanitarian operations related to disasters and crises caused by natural hazards; health services in hard-to-reach areas; longer-term resilience-building programmes; coordinating support by IFRC membership to the ARCS; enhancing the organisational development of the ARCS; and representing the ARCS internationally.

Following the earthquakes of 7 October, IFRC Secretariat, dispatched emergency shelter and household items comprising 10,000 blankets, 2,000 kitchen sets, 6,000 jerry cans and 4,000 tarpaulins, from existing prepositioned stocks to support ARCS in covering immediate needs of 2,000 households.

Furthermore, the IFRC Secretariat allocated a **DREF of CHF 750,000 on loan** for supporting the ARCS immediate response and relaunched [Emergency Appeal MDRAF007](#) encompassing the immediate and recovery needs arising from the earthquakes.

Representatives and spokespersons of the IFRC and Participating National Societies are participating in media interviews to highlight the humanitarian needs and to advocate for allocation of resources to support the Red Cross Red Crescent response.

IFRC is mobilizing four surge profiles covering communications, health coordination, information management, and shelter (engineer). Candidates for two other profiles – humanitarian diplomacy and preparedness for effective response (PER) – have been identified and will be engaged via the IFRC fast-track recruitment process. Surge for communication deployed to Afghanistan on 22 October 2023.

**IFRC membership**

PNS with presence in Afghanistan are the Danish Red Cross, Norwegian Red Cross, Qatar Red Crescent, and Turkish Red Crescent. In-country PNS supports various programmes including basic needs assistance, health, specialised mental health services, protection, and MHPSS. All the programmes are implemented in a coordinated manner responding to the ARCS Strategic Plan and Consolidated Operational Plan.
The IFRC network in Afghanistan deployed joint teams with ARCS for assessments and to support the immediate response. In-country support to the ARCS action (by sector) by the IFRC and PNS for the earthquake response cover:

<table>
<thead>
<tr>
<th>Sector</th>
<th>IFRC</th>
<th>DRC</th>
<th>NorCross</th>
<th>QRCS</th>
<th>TRC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shelter and household items</td>
<td>X</td>
<td></td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Livelihoods and basic needs</td>
<td>X</td>
<td></td>
<td></td>
<td>X</td>
<td>X</td>
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<tr>
<td>Health</td>
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<tr>
<td>WASH</td>
<td>X</td>
<td></td>
<td></td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

The IFRC network response to Herat earthquakes is also supported by PNS who do not have presence in Afghanistan either through bilateral channels or via the IFRC emergency appeal. Those who have channelled supported for the overall IFRC emergency appeal (covering multiple crises) are Albanian Red Cross, Austrian Red Cross, Bahrain Red Crescent Society, British Red Cross, Canadian Red Cross, Danish Red Cross, Finnish Red Cross, German Red Cross, Hong Kong Branch, Red Cross Society of China, Irish Red Cross, Italian Red Cross, Japanese Red Cross Society, Korean National Red Cross, Kuwait Red Crescent Society, New Zealand Red Cross, The Netherlands Red Cross, Norwegian Red Cross, Philippine Red Cross, Red Cross of Monaco, Red Cross Society of China, Singapore Red Cross, Slovenian Red Cross, Swedish Red Cross, and Taiwan Red Cross Organisation.

Specifically for the Herat earthquakes response, contributions have been received, or are in the pipeline, from:

- British Red Cross/ FCDO
- Finnish Red Cross
- Government of Japan
- Hong Kong Branch, Red Cross Society of China
- Indonesia Government
- Japan International Cooperation Agency (JICA)
- Japanese Red Cross
- Korean National Red Cross
- Norwegian Red Cross/Norway Government
- Singapore Red Cross
- Spanish Government (AECID)

The Iranian Red Crescent and the Red Cross Society of China have provided bilateral support directly to ARCS.

**Membership Coordination**

Collectively, Red Cross Red Crescent Movement partners have established coordination and cooperation mechanisms anchored in a Movement Cooperation Agreement. Movement partners hold tripartite Movement Platform Meetings (MPM) bringing together the ARCS leadership with the International Committee of the Red Cross (ICRC) and IFRC heads of delegations to address strategic issues. Furthermore, Movement Operational Coordination (MOC) meetings bring together the ARCS, ICRC, IFRC and Participating National Societies in-country to address operational issues and create shared understanding on operations strategies.

**ICRC**

The ICRC has been present in Afghanistan since 1986 and continues to be operational through its main delegation in Kabul, as well as through its field-based offices. The ICRC’s key operating areas in responding to Afghanistan’s protracted conflict include the promotion and respect of IHL, health services, for the wounded and sick, ensuring physical rehabilitation and social reintegration, monitoring the treatment of detainees across the country, and maintaining contact with their families, as well as their health and water sanitation conditions.
Collectively, the Red Cross Red Crescent Movement in the country has established coordination and cooperation mechanisms anchored under the Movement Cooperation Agreement. The Movement Platform Meeting involves the ARCS, IFRC and ICRC leadership focusing on strategic level engagements. Movement Operational Coordination (MOC) meetings bring together the ARCS, ICRC, IFRC and PNSs currently present in Afghanistan.

A Movement Platform Meeting (MPM) held on 14 October to serve as a Mini Summit. The MPM comprises ARCS President, ARCS Secretary General, ICRC Head of Delegation, and IFRC Head of Delegation. A Joint Statement will be issued on Heart Earthquake Response.

2.2 International Humanitarian Stakeholder capacity and response

The Humanitarian Country Team (HCT) serves as a strategic, policy level and decision-making forum that guides principled humanitarian action in Afghanistan. IFRC is an observer to the HCT and has participated in ad hoc HCT meetings focusing on the response to Herat earthquakes. These meetings discuss strategy, progress and challenges related to overall coordination.

The ARCS and IFRC are members of Food Security and Agriculture Cluster (FSAC), Cash and Voucher Working Group, Emergency Shelter and Household Items (ES-HI) Items Cluster, Accountability to Affected Population Working Group, Health Cluster, WASH Cluster, and Gender in Humanitarian Action Working Group. IFRC has participated – and will continue to participate – in Cluster meetings focusing on the response to Herat earthquakes and will augment its engagement with the ES-HI Cluster. These meetings discuss planning, coordination, progress, and challenges related to specific sectors.

Further, the IFRC participates in the Inter-Cluster Coordination Team (ICCT) which aims to enhance inter-cluster coordination.

3. Gaps in the response

The Herat Earthquakes response is among several others supported by the IFRC within a context of multiple humanitarian crises affecting Afghanistan. This Operational Strategy for Herat Earthquakes complements the wider Humanitarian Crises Operation Strategy also under the Emergency Appeal Emergency Appeal MDRAF007.

As of 21 October 2023, joint multisector team – comprising personnel of ARCS, the IFRC, Danish Red Cross, Norwegian Red Cross and Turkish Red Crescent assessed 20 villages (Aali Abad, Cha hak, Chank Galagh, Chashma Ha, Ganda olia, Ghalak, Hazrat Abad, Siyaab, Kariz Konjak, Kariz Marvi, Khushkak, Mir Abad, Naib Aisa, Naib Rafi, Nok, Safla, Saleh Abad, Seyed Abad, Shah Mohammad and Wazirabad) Zinda Jan district. Data collection to assess
the impact of the earthquake in other districts are still ongoing. The initial assessments indicated the following needs:

**Immediate needs**: food assistance, winterization assistance, cash assistance, emergency shelter, household items, emergency health, MHPSS including psychosocial first aid (PFA), restoring family links (RFL), emergency water, hygiene, and sanitation (WASH) support, including hygiene, menstrual hygiene management (MHM) kits and addressing protection needs of women, girls and children who have been orphaned and women who have been widowed.

**Medium-term needs**: support for transitional shelter, restoring livelihoods, provision clean water and sanitation. Primary health care and supporting rehabilitation and/or equipment of education and health facilities. The branch development framework will further strengthen the branch system process and procedure with volunteer management guidelines for integrated programme delivery. Continuous mental health and psychosocial support such as but not limited to PFA, recreational activities for children, and other activities to assist the recovery of the affected population.

**Long term needs**: durable shelter, restoring livelihoods and income generating initiatives, improving food security, education, water and sanitation facilities, disaster risk reduction and climate change adaptation activities, National Society Development including preparedness for effective response.

**Needs as per sector**:

**Shelter**

The earthquake is estimated to have affected at least 50,000 people, many of whom are staying in open areas. There is a need for basic household items, and sustainable shelter solutions. Moving from emergency shelter (tents) to transitional shelter is a priority in most of the impacted villages where community members have been assessed as having major concerns, mostly about shelter prior to the onset of winter.

The affected people need material or cash support to obtain necessary inputs as well as guidance plus technical support to ensure they build back better and safer. As per the recent data from the Shelter Cluster as of 16 October 2023, out of the assessment completed for 112 villages (out of 289 villages), 2,637 houses are moderately damaged, 5,006 houses are severely damaged, and 3,728 houses are destroyed. There is need for emergency shelter as the weather is getting cold; women, children and older people are vulnerable to cold and other respiratory infection. Likewise, the hot desert climate of Herat poses challenges in terms of water availability and heat management, requiring appropriate infrastructure.

There is a need to address the immediate, medium-term, and long-term recovery needs of affected communities.

The preliminary data related to shelter collected during the initial assessments from the ARCS, Shelter Cluster partners, and related local/governmental organizations can be further validated by the IFRC/ARCS engineers' team through the ongoing technical field assessment survey, similar to the process used in the shelter response in the provinces of Khost and Paktika.

The primary objective of shelter response is to safeguard the health, safety, security, privacy, and dignity of affected populations. Shelter response programme shall abide by the social and cultural norms, promote indigenous practices, and will be community-centric that builds and reinforces participatory approaches to program implementation. The community people/beneficiaries will be involved from the initial design phase till the handover of the programme where community will enhance their knowledge and capacities in terms of the long-term recovery.

Shelter solutions are dependent on the context. Appropriate solutions can only be recommended after the field assessment from the team comprising of technical personnel(enginers). Detailed study of the existing houses must be taken into consideration. The huge destruction of houses and the nature of the damage showed that there have not been consistent practices in building the houses. The houses which have survived the earthquake
and stood robust against the earthquake have been built with appropriate technology and materials. Thus, the community people must be made aware and sensitized to follow appropriate building techniques to minimize the loss in the future. Shelter Strategy shall focus on the repairing/rebuilding using locally available materials and technology and practices and efforts should be made in the improvement in existing technologies and practices.

In contrast to the Khost and Paktika earthquakes of 2022, which occurred in June and allowed for adequate planning of a shelter intervention prior to winter and allowed for the successful repair of 2,083 homes prior to winter, the Herat earthquakes struck less than two months before the onset of winter. Thus, covering immediate and emergency shelter needs is on the top priority. To cover the immediate needs, emergency shelter improvements like the replacement of damaged shelter can be done. Stringent monitoring of emergency shelter has to be done to account for the wind load. Drainage channels should be provided around the shelter to divert surface water and wherever practical, the ground must be raised to prevent water entering the homes of people. After the consultation with the locals, it is found that the area is prone to harsh and heavy winds, therefore tents may not be able to withstand the force of the wind. There is a common practice of making “bunkers” in those areas which are built by digging 2 metres deep in the group and making 1-metre-high clay walls and covered by steel or wooden beams. The roof is composed of flat clay roof supported by steel beams, and these temporary shelters will provide a safe and warmer environment for people to weather the freezing winter. This is also one of the recommendations provided by the Miyamoto International, one of the technical support partners for ES-HI Cluster. Feasibility of this option can be carried out by IFRC/ARCS technical team.

Since winter is already on the way, feasibility study for suitability of rental housing options shall also be explored. For this, better clarifications can only be obtained from the field assessment data/report which gives information on the status of the people there: as to where these people are now including whether they are already hosted by relatives/friends. Another question is to look at the possibility to support these hosting arrangements.

Many of the houses have been destroyed and rubble still needs to be cleared. There may be some salvaged materials like stone, timbers, window frame which could be reused in the rebuilding process. Thus, to prepare the sites and clear the rubble from individual households, IFRC/ARCS will make use of the existing tractors to support the community for rubble transportation and later for transporting building materials during rebuilding.

**Emergency Health and WASH**

There is need to support with emergency health services, including MHPSS, with specific focus on provision of first aid and emergency basic health services to the affected population including via deployment of health teams to provide services in affected locations and referring serious cases to better-equipped facilities in other locations. There is also a need to provide health teams and health facilities (including those in the capital, accommodating referrals) with medicines, medical supplies, and equipment. Further consultations with the authorities and health partners may will the need for establishing static health facilities in the affected districts.

Initial assessments have identified needs for the WASH sector to include repair/rehabilitation of damaged water facilities as well as rehabilitation of latrines. Detailed assessments are planned to ensure that WASH needs are identified comprehensively because it is anticipated that there will be significant gaps.

An estimated 114,000 people are in urgent need of health assistance following the earthquakes, which injured more than 1,800 people. At least 21 health facilities across nine districts were damaged, as well as damage to the Herat Regional Hospital, resulting in severe disruptions in access to health services for an estimated 580,000 people.

The earthquakes generated needs for health services including trauma care and physical rehabilitation, as well as mental health and psychosocial support (MHPSS). Further support is needed to provide medical supplies and equipment, provide essential primary health care services, and repair damaged health facilities to ensure continued access to health services. The earthquakes also increased the risk of communicable diseases due to insufficient shelter and sanitation, raising the need for disease outbreak prevention, detection, and response.
A total of 114,000 people is estimated to have WASH needs as a result of the three earthquakes since 7 October. The earthquakes' impact has been particularly severe, leading to substantial damage to essential water points and sanitation facilities in the affected districts, increasing the potential for disease outbreaks.

**WASH in schools**

The earthquakes destroyed at least 21 schools, as well as an estimated 70 community-based education facilities. Immediate needs include setting up 500 tents to create temporary learning spaces and replacing teaching and learning materials—such as textbooks, teaching and learning kits, and recreation kits. In the longer term, the education cluster will reconstruct and rehabilitate more than 20 destroyed schools to ensure children are able to safely access education. *(UNOCHA- Herat Earthquake response plan October 2024).*

**Food Security, Cash and Livelihood**

The affected families in the target districts were already living with very poor livelihood and food security due to widespread poverty, unemployment, severe prolonged drought, and economic hardship. Due to earthquake, many families lost their food stocks and herder households lost livestock. The families will need cash to address their immediate basic needs and inputs or cash for re-establishing their livelihood. Initial analysis indicates that markets in nearby urban areas are functioning.

**PGI and CEA**

According to Gender in Humanitarian (GiHA) Working Group, there are protection concerns for women and girls. Advocacy for women's participation is crucial because women are at risk of being left behind due to restrictions imposed in 2022. The restrictions continue to limit services provided to women, or by women. As such, ARCS will need to mobilize its vast volunteer network, which includes female volunteers, to support services for women by women.

The temporary and inadequate shelters in the wake of the earthquake present threats to the protection of women and girls' safety and security. Response actions should consider the provision of dignity kits, offering mental health and psychosocial support to men, women, and children, providing cash aid for protection, installing solar lights, creating child-friendly areas, among other relevant interventions.

Because of inadequate systematic feedback mechanism, questions and concerns may go unanswered. Such a scenario can increase misinformation and deprive communities of potentially lifesaving and life-improving information. It will be crucial to establish a systematic feedback mechanism using multiple channels (minimum two) to ensure that questions from community members can be answered promptly and that information and engagement with communities can be tailored according to their needs. The communication channels to communities in affected villages will include face-to-face interactions and utilization of local radio stations.

**Preparedness and strengthening local response capacity**

Following the initial earthquake on 7 October 2023, first responders came from the affected communities and included community members, the local business community, local authorities, staff and volunteers of the ARCS Herat branch, local civil society organizations, and community-based organisations, among others. Additional support, by International Red Cross Red Crescent actors, was mobilised hours after the disaster but was slowed by initial limitations including remoteness of affected villages and a lack of cellular or internet connectivity. The aftershocks are a jolting reminder of the need to invest in institutional and community preparedness to maintain appropriate level of readiness. As such, in addition to addressing the immediate, medium-term and recovery needs of affected communities, it is of paramount importance that a portion of resources obtained for the operation be allocated to community preparedness and strengthening local response capacity.
OPERATIONAL CONSTRAINTS

Assessment Capacities Project (ACAPS) ranks Afghanistan as facing “extreme constraints” to humanitarian access, particularly for people in need of assistance who must deal with physical, environmental, and security constraints. The ARCS, however, has unimpeded countrywide access. Operational constraints are factored into the analysis of the risk management section of this document and include disruptions in public services, fluctuations in the local currency, security risks, resource acquisitions, and overstretched National Society capacities.

Despite the UN Security Council Resolution (SCR) 2615 which provides exception for humanitarian action, disruption of financial services and cash flow continue to be felt. Hurdles in making money transfers and payments or completing transactions occasionally cause operational delays. The IFRC continues to closely monitor and assess the situation to manage these risks including in private meetings with various stakeholders among them financial institutions.

Although there is availability of supplies and services in the local market, some local vendors lack crucial documentation required for competing in tenders for supplies and services. The IFRC supply chain management has undertaken a rapid market assessment and planned vendor orientation sessions to socialize them about the IFRC procurement policy as well as the fraud and corruption prevention policy. In addition, the IFRC compliance and risk management team ensures screening of vendors against UN and OFAC sanctions lists prior to engaging them. Operational flexibility is also maintained by keeping the option to deliver assistance via cash-based assistance or in-kind modalities as may be informed by contextual circumstances.

There are unpredictable and increasing restrictions on humanitarian actors including limitations on participation of female humanitarian workers. For now, programmes and operations of the IFRC network continue with engagement of female staff and volunteers. Priority of the IFRC network remains to alleviate human suffering whenever it is found, and that means continuing to deliver services to as many people, wherever possible, and as much as resources permit, pragmatically finding solutions to ensure the inclusion of women and all groups in the process.

Imminent winter and storms: The earthquakes struck less than two months before the onset of another winter when the capacity of households to cope is already stretched and significantly constrained. There is a need to ensure that preparedness for seasonal adaptation (such as stocking relevant winterization kits) is done before winter arrives. Furthermore, Herat province like many other regions in Afghanistan, faces challenges related to infrastructure and accessibility. Poor road conditions in the affected areas, limited transportation network and the rugged terrain make it difficult to reach remote areas and deliver aid effectively, especially during winter. Infrastructure rehabilitation and coordination with local authorities and communities are necessary to address these constraints.

Climate change induced hazards including floods and sandstorms are common in Herat province. On 12 October 2023, a strong sandstorm affected some villages in earthquake affected areas promoting the evacuation of hundreds of people to locations that were deemed safer, including Herat City.

FEDERATION-WIDE APPROACH

The Emergency Appeal is part of a Federation-wide approach, based on the response priorities of the Operating National Society and in consultation with all members of the IFRC contributing to the response. The approach, reflected in this Operational Strategy, will ensure linkages between all response activities (including bilateral activities and activities funded domestically) and will assist to leverage the capacities of all members of the IFRC network in the country, to maximize the collective humanitarian impact.

The Federation-wide funding requirement for this Emergency Appeal comprises all support and funding to be channeled to the Operating National Society in the response to the emergency event. This includes the operating National Society’s domestic fundraising ask, the fundraising ask of supporting Red Cross and Red Crescent National Societies, and the funding ask of the IFRC secretariat.
OPERATIONAL STRATEGY

Emergency Appeal MDRAF007 has been revised to incorporate needs wrought by the earthquakes. This is a specific new Operational Strategy for the response to the Herat Earthquakes.

The revised emergency appeal now has four operational strategies:

- Initial operational strategy for the wide humanitarian crisis – timeframe ends on 31 December 2023.
- Revised operational strategy for the wide humanitarian crisis – timeframe to end on 31 December 2024.
- Operational strategy for the Khost and Paktika earthquake – timeframe ends on 31 December 2023.
- This operational strategy for Herat earthquakes – timeframe to end on 31 December 2024.

The Emergency Appeal is part of a Federation–wide approach, based on the response priorities of the ARCS Strategic Plan 2021-2025 and in consultation with all IFRC membership in-country as well as out-of-country. The IFRC network is collectively contributing to the response. This is complementary to existing Movement coordination and cooperation mechanisms and has included fortnightly coordination meetings at the leadership level, regular technical meetings among programmes, as well as reporting tools such as regular situation reports. During the reporting period, the IFRC Country Delegation in Afghanistan engaged with the membership who support Afghanistan bilaterally or multilaterally in moving forward with the ‘Agenda for Renewal New WoW’ mechanism. In the meantime, the approach, reflected in this Operational Strategy will ensure linkages between all response activities (including bilateral activities and activities funded domestically) and will assist in leveraging the capacities of all members of the IFRC network in the country, to maximize the collective humanitarian impact. Other benefits include the utilization of the IFRC’s financial and procurement services, resulting in value for money and timeliness especially when utilizing established framework agreements.

Revision 6 of emergency appeal MDRAF007 has a federation-wide funding requirement of CHF 300 million, of which the secretariat funding requirement is CHF 120 million. There has been no increase in overall funding requirement because interventions planned in response to the Herat Earthquakes will be absorbed within the funding requirements of Revision 5. The earthquakes are localized to a specific geographical area and the caseload was part of the population targeted to be reached with some interventions under Revision 5. Further, this approach fits with Pillar 1 of the framework outlined in Revision 5 of the emergency appeal: delivery of urgent humanitarian assistance as well as addressing the recovery needs of people affected by various humanitarian crises. The federation-wide funding requirement for the Herat earthquake response is CHF 20 million, of which the secretariat funding requirement is CHF 8.8 million.

Vision
This Emergency Operation will contribute to meeting immediate food and basic needs, delivering emergency health assistance, supporting emergency and transitional shelter, supporting livelihood recovery, rehabilitation of health and WASH facilities, readiness for winter, and building the resilience of affected communities of Herat province in Afghanistan.

The complementarity of Movement partners and stakeholders is critical to ensuring that the Operational Strategy can be implemented with proper coordination mechanisms and oversight. Every effort will be made to ensure there is mutual collaboration and understanding of the interventions to achieve an effective and well-coordinated response.

The new operations strategy related to the Herat Earthquake response operation draws upon the experiences and knowledge gained from the former response (Khost and Paktika). It incorporates lessons learned, utilizes successful shelter designs, optimizes human resources, and capitalizes on existing expertise to enhance the effectiveness and efficiency of the response operation. This approach helps ensure a more coordinated, informed, and tailored response to the needs of the affected population.

Proposed strategy

a. Integrated assistance
A comprehensive and coordinated strategy that involves combining various components to address the multifaceted needs of the affected communities will be adopted to effectively address the interconnected needs of the affected population. NSD in Emergency framework will guide the affected Branches to improve the response capacity, preparedness, and effective response for integrated programme delivery. Target population will receive emergency and durable shelter solution, household items, food, primary health and care services as well WASH, livelihood strengthening socio economic resilience targeting vulnerable groups while bridging gaps towards sustainable development. The livelihood interventions will focus more on optimal uses of the natural resources and towards building community resilience. Specific focus will be provided to environmental sustainability including waste management initiatives. To meet the response and recovery objectives, and to create long term institutional capacities, NSD will be given priority with special focus on capacity enhancement at the NHQ and branch level.

Likewise, the intervention will provide support for coping with winter, and integration of risk reduction measures as well as streamlining of protection, gender, and inclusion (PGI) and community engagement and accountability (CEA) across all interventions. The operation will also invest in strengthening local response capacity of ARCS and state entities for humanitarian services.

**Proposed interventions targeting 50,000 people:**
- Support for search, rescue, and retrieval
- Provision of food assistance
- Provision of multipurpose cash assistance
- Provision of emergency shelter assistance
- Provision of PFA and mental health and psychosocial support (MHPSS)
- Deployment of health facilities and medical kits for emergency health services
- Screening and referral of malnourished children, and nutrition promotion
- Support for access to treatment for children with congenital heart defects
- Provision of safe water, water storage containers, and water treatment solutions
- Community health and hygiene promotion
- Provision of assistance to cope with winter
- Provision of shelter repair assistance
- Provision of transitional shelter assistance
- Provision of assistance to build durable shelters
- Awareness and technical support on ‘building back safer’ techniques
- Provision of livelihood re-establishment (livestock and agriculture kits) support
- Rehabilitation/construction and equipment of health facilities
- Rehabilitation/construction of WASH facilities, including waste management
- Provision of tailored and needs-based assistance to widows, widowers, and orphans
- Mainstreaming of PGI and CEA across all intervention areas
- Mainstreaming of safeguarding across all intervention areas
- Prepositioning of winterization kits and essential household items
- Enhancing the response capacity of ARCS headquarters and base units
- Support for green response and community environmental initiatives

Shelter recovery will be informed by ongoing consultations with the authorities and the ES-HI Cluster. Along with the construction of transitional shelter, targeted population will receive socio-technical and financial support for the construction of latrines by IFRC/ARCS as Shelter Strategy aims to include integrated resilience component through an enhanced safer construction practice. This should include but not limited to participatory approach for safe shelter awareness (PASSA), build back safer, livelihood, winterization readiness, water harvesting and construction of latrines.

Community mobilization and community awareness/sensitization will be a major part of the intervention. The shelter intervention will be carried out in participatory and inclusive approach where the community members will be consulted and involved in participatory monitoring which in turn will help to build the capacity of the community people in interventions related to disaster risk reduction. As far as possible, vernacular, and indigenous construction practices shall be adopted, and accessibility considerations shall be considered, and
sphere standards and local construction regulations shall be followed. Regular coordination/collaboration with ES-HI Cluster and other partners will be carried out to avoid duplication in the support. Throughout the construction process, construction quality and adherence to existing norms shall be maintained.

All shelter types, including existing structures, will require a heating strategy during the winter. The response shall consider the availability of heating options, associated fuel supply, and the safety of the shelter occupants.

Capacity building of staff and volunteers will be integral part of the intervention. Capacity building efforts will include on-the-job training for masons, technical training for engineers, and training for volunteers. Likewise, regular coordination and collaboration will be maintained with all the key players working for shelter response, gender, diversity, and protection issues are among the many concerns in this operation. People with vulnerabilities such as person with disability and older age people will be given special priority and their meaningful participations shall be ensured by including them in community consultations.

The rebuilding process will not utilize materials and construction techniques that could cause harmful impact to the environment. This is in line with incorporating “do no harm” approaches in IFRC response operations, in particular as part of the commitment to contribute to protecting the environment.

To ensure the sustainability of the shelter intervention, elements of disaster risk reduction like hazard analysis, communities’ capacities for responding to disasters, and resources needed for disaster management will be ensured in the later stages. The shelter intervention will be carried out in participatory and inclusive approach where the community members will be consulted and involved in participatory monitoring which in turn will help to build the capacity of community members on disaster risk reduction. Before setting up emergency/transitional shelters, thorough site assessment shall be conducted to identify and clear any debris as well as to ensure that the selected locations are safer from potential hazards.

b. Cash-based assistance
Cash-based assistance will be offered to meet people's emergency needs immediately, as well as for livelihoods and shelter support. Cash-based assistance enables populations affected by the earthquake to make decisions according to their own priorities, boost local markets, and cost less than other aid options. Community Engagement and Accountability approach will be integrated in all cycle or process as well as to ensure community participation and provide feedback mechanism. For the cash disbursement, the partner financial service providers (FSPs) will be deployed in the earthquake affected area. ARCS/IFRC will continue to prioritize the cash-based assistance modality as needed in the operation. IFRC is currently mapping additional FSPs to develop framework agreements that will enhance capacities to meet the humanitarian evolving needs using the cash modality.

c. National Society Development and localized action
Investing in local institutions is critical to delivering humanitarian assistance that can reach those most in need during the most critical moments, including when access by international actors is constrained for whatever reason. ARCS is a legitimate national actor with the trust, access, expertise, and ability to reach those most in need including those in hard-to-reach areas. As part of this operation, IFRC is supporting ARCS in developing its human resource capacity through national/provincial level training to the staff and volunteers and strengthening logistics and warehousing capacity such as the preposition of relief items. Further, IFRC will support ARCS in institutionalising capacities and establishing a stronger enabling environment where organisational policies and strategies are reviewed/updated/introduced that eventually govern future response, recovery, and community resilience engagement of ARCS.

d. Protection and prevention
The operation will streamline PGI as well as CEA in all activities. Through the initial assessment and household registration, ARCS will use vulnerability criteria such as seniors with responsibility for children, households headed by widows or single mothers with young children, households with chronically ill members, households with a member with a disability and households with pregnant and lactating women for prioritising assistance.
in the communities. The operation will reach different layers of the community such as supporting single-parent households in addressing their livelihood needs.

e. Community mobilization
Community members will be mobilized in different interventions such as dissemination of safer shelter awareness, environmental sanitation activities, health awareness activities.

IFRC will support ARCS to replicate the establishment of the grandmother committee as successful and culturally acceptable approach for engagement of women into community-based health awareness raising, health promotion and feedback. The grandmother committee are selected women by the community representatives who are trained/oriented on basic maternal health, nutrition, and communication skills. They can play important role in collecting feedback from the women, respond to it if they can or refer the feedback to the concern staff. This approach is effective in reaching to women at local level and can contribute to gender inclusive emergency response. Community-based health committee is another such platform that can facilitate community engagement in the target district.

f. Safeguarding

Safeguarding responsibilities of IFRC/ARCS will be integrated in all stages of the programme and through all sectors including WASH, shelter, health, household items and cash distributions. The sexual exploitation and abuse (SEA) risks will be assessed as well as child safeguarding risk analysis will be done for this emergency programme, and necessary mitigation actions will be taken accordingly.

The staff and volunteers will be trained on IFRC PSEA, Child Safeguarding, Anti-Harassment and whistle blower protection policies and their responsibilities in creating and maintaining safe environment for staff (IFRC/ARCS personnel, contractors, volunteers, and consultants) and communities (men, women, children, adult at risk, minorities group and LGBTI). The vendors involved in providing services at community will be briefed on IFRC Safeguarding Policy. The community members will be consulted regarding their understanding of Safeguarding and how they would prefer receiving IFRC/ARCS services safely (without being harmed, abused, exploited, neglected, or discriminated against) by humanitarian. The community will be sensitized on key safeguarding issues and will be provided with information on what services are available for them which is free of cost for vulnerable and eligible community members affected and where to log their report confidentially and without fearing retaliation. They will be provided with information about the process of handling reports and services available for them including post-exposure prophylaxis (PEP) kits for the persons suffered by SEA.

ARCS will mobilise effective channels (IFRC/ARCS staff, including PMER and operation staff) engaging with community, programme IEC materials, programme awareness sessions, banners at the service site, assessments and focus group discussions and other meetings with communities, grandmother group committees, religious leaders/other influencing persons of the community) for community sensitization on Safeguarding, available reporting channels and services for people of Safeguarding violation. IFRC ensures affective investigation process for reports/allegation of Safeguarding violation and availability of required services/referral pathway for people of safeguarding violation.

Anticipated climate related risks and adjustments in operation

Climate change is increasing the risks and hardships for people in Afghanistan. Millions of Afghans have faced two severe droughts in just four years, causing crop failures and devastating food shortages. Temperatures are rising, leading to changes in snowfall cover, snowmelt, and related water supplies while rainfall is becoming more erratic, with an increased risk of droughts and flash floods. People across Afghanistan are very resilient after four decades of conflict, yet repeated climate and weather-related disasters coupled with COVID-19 are making it more difficult to bounce back and cope.

Herat province has particularly suffered serious environmental degradation and their natural resource management have worsened over the years due to a combination of factors. The degradation has occurred due to extensive deforestation, soil erosion and diminishing volumes of water in major rivers. Inadequacy of water supply infrastructure and management has led to over-grazing around water points, accelerating soil erosion. A
combination of political, governance, security, economic and environmental factors has complicated local and international efforts to deliver effective assistance to drought-affected people and alleviate the impact of humanitarian crisis. These factors together have created endemic conditions under which the vicious cycle of crop failures, livestock loss, food insecurity with most of the population trapped in poverty and deprivation.

Greater efforts are needed to provide more sustainable options for Afghans who are facing regular droughts and extreme weather with risks heightening due to climate change. Considering that the earthquake is an emergency within a wider catastrophic humanitarian crisis affecting Afghanistan, urgent investments are needed to prevent further malnutrition, hunger, and deterioration of converging crises in the two affected provinces. The operation will make necessary adjustments to minimise disruptions to ongoing activities.

**Targeting**

1. **People to be assisted**

The following eligibility criteria are anticipated and will be verified through community engagement processes:

- Households whose houses have been destroyed or damaged by the earthquake.
- Households whose breadwinners have been killed by the earthquake.
- Households whose livelihood assets/means have been destroyed or damaged by the earthquake.
- Host families accommodating people who have been displaced by the earthquake; and
- Households with two or more children under the age of five who are unable to meet their basic needs.

Within this, the following vulnerability criteria will be used to prioritise selection:

- Seniors with responsibility for children in the household.
- Households without livestock.
- Households headed by widows or single mothers with young children.
- Households with members with chronic medical conditions.
- Households with a member with disability.
- Pregnant and lactating women
- Households with a member with congenital heart defect.

These targeting criteria, together with specific criteria related to other sectors (like health, shelter, IDPs, etc.) will be further discussed and then finalised in consultation with community elders, relevant government departments, and other (inter)national organisations that are operational in these provinces. The ARCS will coordinate closely with other organisations working in the areas that are also implementing emergency food security programming in these provinces to avoid duplication.

2. **Considerations for protection, gender and inclusion and community engagement and accountability**

Inclusive community participation is crucial in selection criteria which the approach should be designed as all community groups can safely and meaningfully participate in the planning and process. During the assessment process, ensuring the protection, gender, and inclusion cultures and capacities are included to have better understanding on the community's context. Within communication with community, the information and approaches are tailored to meet the needs of all community groups and sensitive issues are discussed safely. Lastly, the feedback mechanism should be open to all community group through preferred and trusted channels by community, with a process to manage the reports of non- and sensitive feedback – harassment, abuse, child protection, fraud and corruption issues.

Leveraging on its strong understanding and experience in CEA, inclusivity, and “do no harm” at the national level, ARCS will invest and strengthen those capacity in at all levels – districts, province and headquarters - including
by developing and institutionalizing a CEA policy, Gender and Diversity values, and standard operating procedures (SOPs) that are endorsed by ARCS and disseminated across all sectors and at all levels.

IFRC supports ARCS in mainstreaming CEA and PGI into the programme and response. The CEA and PGI integration plan developed that entail training of trainers (TOT) on CEA and PGI at regional level. Then, cascading training at branch and field levels. The TOT completed for Herat region and cascading plan and the budget prepared in first half of 2023. The trained staff from Herat branch will be tasked to training volunteers both male and female on CEA and PGI.

The operations resources and interaction with ARCS leadership will be utilized to gain their buy-in for the PGI policy and development of the operational framework.

**PLANNED OPERATIONS**

**INTEGRATED ASSISTANCE**

<table>
<thead>
<tr>
<th>Shelter, Housing and Settlements</th>
<th>Female &gt; 18: 4,200</th>
<th>Female &lt; 18: 2,750</th>
<th>Female &lt; 18: 2,850</th>
<th>Total target: 14,000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male &gt; 18: 4,200</td>
<td></td>
<td></td>
<td></td>
<td>Total target: 14,000</td>
</tr>
</tbody>
</table>

**Objective:**

Communities in disaster and crisis affected areas restore and strengthen their safety, well-being and longer-term recovery through shelter and settlement solutions.

**Immediate Response Emergency:**

1. Support for search, rescue, and retrieval
2. Support for emergency shelter improvements, makeshift shelters.
3. Explore suitability and feasibility of rental housing options and “bunkers”.
4. Provide emergency shelter assistance to 2000 households.
5. Provide household items to 2000 households.
6. Conduct community sensitization awareness on safe construction practices i.e., build back safer approach.

**Medium term:**

1. Repair and upgrade existing shelters as per the standards and guidelines.
2. Provide shelter solutions to 500 households (rental support) based on the feasibility study of this option.
3. Conduct community sensitization awareness on safe construction practices.
4. Build capacity of engineers, masons, and volunteers.

**Long term:**

1. Provide support for shelter rebuilding/transitional shelter to 500 households.
2. Design prototype of earthquake-resilient buildings.
3. Engage with the authorities and other stakeholders to ensure that suitable land is allocated for households that need to resettle from sites that are deemed vulnerable to future seismic shocks.
4. Conduct builds back safer training.
5. Build capacity of engineers, masons and volunteers and community as a whole
6. Mobilize community in community sensitization/awareness activities.
7. Disseminate build back safer messages.

**Other actions include:**
1. Assess shelter needs, capacities, and gaps.
2. Act on debris clearance before the initiation of emergency or transitional shelters and safer disposal of debris.
3. Build capacity building of all the concerned personnel involved in the shelter intervention including engineers, masons, and volunteers.
4. Disseminate build back safer messages across all phases of shelter construction—emergency, transitional and long-term shelter.
5. Engage with cluster and shelter actors to agree on a minimum package for shelter repair and rebuilding.
6. Integrate local construction technology and practices, align with building codes, adhere to Sphere standards, and embrace relevant construction standards to ensure the quality and adherence to established norms during shelter construction process.
7. Develop, print and distribute awareness materials on safer shelter.
8. Engage, train, and equip teams that will support community members to repair or rebuild shelters.
9. Provide technical support, guidance, and awareness on the construction of transitional shelters applying the adopted design.
10. Consider environmental sustainability and green building practices to minimize the ecological impact by reconstruction efforts.
11. Conduct monitoring, supervision, and technical guidance for shelter intervention

### Livelihoods

<table>
<thead>
<tr>
<th></th>
<th>Female &gt; 18: 4,830</th>
<th>Female &lt; 18: 3,160</th>
<th>Funding Ask: CHF 869,000</th>
</tr>
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<tbody>
<tr>
<td>Male &gt; 18: 4,830</td>
<td>Male &lt; 18: 3,280</td>
<td>Total target: 16,100</td>
<td></td>
</tr>
</tbody>
</table>

**Objective:**
Communities, especially in disaster and crisis affected areas, restore, and strengthen their livelihoods.

**Priority Actions:**
1. Assess livelihood needs, capacities, and gaps.
2. Provide livelihood support (livestock, agriculture) to 1,000 households.
3. Provide temporary employment opportunities to 500 earthquake affected households through organization of cash for work (CFW) in line with the cash and voucher working group (CVWG) guidance on transfer value for CFW.
4. Provide vocational training to 300 people.
5. Provide soft skill training to 300 people.
6. Provide business development training to 200 people.
7. Support 200 people in income generation activities.
8. Monitor progress of livelihood assistance

<table>
<thead>
<tr>
<th>Multi-purpose Cash</th>
<th>Objective: The most affected communities are able to access and purchase essential food and household items and services in a secure and dignified manner.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female &gt; 18: 4,200</td>
<td>Funding Ask: CHF 247,000</td>
</tr>
<tr>
<td>Female &lt; 18: 2,750</td>
<td>Total target: 14,000</td>
</tr>
<tr>
<td>Male &gt; 18: 4,200</td>
<td>Male &lt; 18: 2,850</td>
</tr>
</tbody>
</table>

**Priority Actions:**

1. Assess immediate food and non-food needs gaps by taking into consideration community's coping strategy capacities, existing intervention from other actors.
2. Conduct a rapid market assessment to determine the suitability of cash assistance.  
3. Engage with the cash working group to determine the package for cash assistance.
4. Train staff and volunteers on Standard Operational Procedures for cash assistance.
5. Identify target households to receive assistance based on average household composition.
6. Provide multipurpose cash to selected 2,000 households in line with Afghanistan Cash and Voucher Working Group Guidance for minimum expenditure basket.
7. Conduct post-distribution monitoring and analysis.
8. Ensure and implement the inclusive dignity, accessibility, and engagement of persons of all gender (ages, religions, disabilities, and background) are consulted about their specific needs and concerns, during the assessment and implementation of cash assistance.

**HEALTH & CARE INCLUDING WATER, SANITATION AND HYGIENE (WASH)**

**(MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT / COMMUNITY HEALTH)**

<table>
<thead>
<tr>
<th>Health &amp; Care (Mental Health and psychosocial support / Community Health / Medical Services)</th>
<th>Objective: The immediate risks to the health of the affected populations are reduced through improved access to health care</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female &gt; 18: 15,000</td>
<td>Funding Ask: CHF 872,000</td>
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<tr>
<td>Female &lt; 18: 9,800</td>
<td>Male &gt; 18: 15,000</td>
</tr>
<tr>
<td>Male &lt; 18: 10,200</td>
<td>50,000</td>
</tr>
</tbody>
</table>

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³ ARCS and IFRC are the members of Cash and Voucher Working Group where findings of market assessment by other implementers are shared.
Primary Health Care:
1. Deploy emergency health teams (static or mobile) to provide primary health care and emergency health services to the affected population.
2. Procurement and supply of essential medicines, medical consumables/supplies and medical equipment to the ARCS health teams/ clinics providing services to the affected populations.
3. Provide temporary structures (heated tents, prefabricated containers, localized structures) equipped with solar power for provision of appropriate spaces for health service delivery.
4. Procure standard vehicles for the ARCS MHTs operating in the targeted earthquake-affected province.
5. Provide primary health and immunization services through mobile and fixed health facilities.
6. Conduct infection prevent and control (IPC) activities.
7. Include WASH components in health facilities and MHTs.

Mental Health and psychosocial support:
1. Conduct MHPSS needs assessment to identify potential medium-long term MHPSS needs of the population.
2. Provide psychological first aid and other MHPSS interventions to the target population as well as to RCRC volunteers and staff.
3. Provide MHPSS and PFA refresher trainings to staff and volunteers.

Emergency health preparedness and response at the community level

Key activities:
1. Establish 15 Grandmother committees with the membership of 225 grandmothers.
2. Establish 15 community health committees with the membership of 225 community elders, leaders, and heads of shuras to maximize the community leadership structures.
3. Train 450 community volunteers (members of established committees) on Community-based Health and First Aid (CBHFA) and Epidemic Control for Volunteers (ECV) through 30 batches of training sessions.
4. Equip 450 trained volunteers and 1,550 families with First Aid kits.
5. Train 450 volunteers on nutrition screening.
6. First aid services.
7. Carry out health awareness messaging through campaigns and households’ visits.

Water, Sanitation and Hygiene

<table>
<thead>
<tr>
<th></th>
<th>Female &gt; 18:</th>
<th>Female &lt; 18:</th>
<th>Male &gt; 18:</th>
<th>Male &lt; 18:</th>
<th>Funding Ask: CHF 800,000</th>
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<tbody>
<tr>
<td>Water, Sanitation and Hygiene</td>
<td>8,027</td>
<td>7,409</td>
<td>12,253</td>
<td>11,311</td>
<td>Total target: 39,000</td>
</tr>
</tbody>
</table>

Objective:
Immediate reduction in risk of waterborne and water-related diseases in targeted communities.
To respond to basic needs in water and hygiene, ARCS is planning to distribute hygiene kits across the devastated areas and conduct hygiene promotion campaigns among the affected population coinciding with the distribution. Through these activities, 4,000 families (28,000 people) will be reached. WASH in school (WinS) software and hardware activities will be implemented in the 10 affected schools and 4,000 students will be reached. Through implementation of five water supply network/community water facilities 7,000 people will be reached with drinking water.

**Priority Actions:**

1. Distribute essential WASH items including hygiene kits and dignity kits and conduct hygiene promotion campaigns among the affected population coinciding with the distribution.
2. Deliver hygiene promotion activities awareness raising and sensitizing the affected population on water-borne diseases, AWD prevention, ARI and other communicable diseases.
3. Implement 5 Community Initiative Micro Project (CIMP)/water supply network.
4. Implement WinS in 10 affected schools.
5. Establish WASH clubs in 10 affected schools.
6. WASH in affected 10 health facilities. This will be part of Connexus for the collapsed health facilities.

**PROTECTION AND PREVENTION**

**(PROTECTION, GENDER, AND INCLUSION (PGI), COMMUNITY ENGAGEMENT AND ACCOUNTABILITY (CEA), MIGRATION AND DISPLACEMENT, RISK REDUCTION, CLIMATE ADAPTATION AND RECOVERY, ENVIRONMENTAL SUSTAINABILITY, EDUCATION)**

CEA self-assessment conducted as part of regional TOT on CEA and PGI for Herat region in the year 2022 and will be used as good reference to address the identified gaps at regional and branch level. The main action points of the self-assessment will be implemented in the target district. These are: (1) Strengthening community engagement in all phases i.e. assessment, design and planning, implementation and monitoring and evaluation, (2) train volunteers and women including grandmother committee members on importance of CEA and PGI, (3) Regularly share information about the programme with community members, using the best approaches to reach different groups, (4) Collect, analyze, and respond to community feedback, ensuring people know how they can ask questions, make suggestions or raise concerns about the response; and (5) Review and adjust emergency operations activities and approaches regularly based on community feedback and monitoring data. In addition, the CEA materials available in local languages will be used for awareness raising and highlighting importance of CEA during the operation response and recovery.

<table>
<thead>
<tr>
<th>Protection, Gender, and Inclusion</th>
<th>Female &gt; 18: 15,000</th>
<th>Female &lt; 18: 9,800</th>
<th>Consolidated funding requirement for PGI and Safeguarding: CHF 474,000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male &gt; 18: 15,000</td>
<td>Male &lt; 18: 10,200</td>
<td></td>
<td>Total target: 50,000</td>
</tr>
</tbody>
</table>
**Objective:** Ensure protection and safety through strengthening existing protection capacity of the affected community and ensuring all facilities, goods and services are dignified and safe to access for all backgrounds.

**Priority Actions:**

1. Assess the specific needs of the affected population based on criteria selected from the minimum standards for PGI in emergencies.
2. Ensure the safe and accessible provision of basic services, considering different needs based on gender, vulnerability, and other diversity factors.
3. Support dignity kit of women, girls, or babies, including improving safety and mobility, and to provide information about reproductive health.
4. Support sectoral teams to include measures to address vulnerabilities specific to gender and diversity factors (including persons with disabilities) in their planning.
5. Develop basic guidance PGI minimum standards for emergency response.
6. Adapt and use standard operating procedures for protection/SGBV and SEA, with protection cluster support and that which is available in the ARCS on SGBV, including the mapping of referral pathways.
7. Establish a system to ensure that IFRC and National Society staff and volunteers have signed the Code of Conduct and have received a briefing in this regard.
8. Organize training on protection and social inclusion as well as on the basics of child protection standards for staff and volunteers.
9. Map and make accessible information on local referral systems for women, girls, boys, and children on protection concerns.
10. Support for widows and orphans in earthquake affected communities.

### Safeguarding and SEAH

<table>
<thead>
<tr>
<th></th>
<th>Female &gt;18:</th>
<th>Female &lt;18:</th>
<th>The PGI funding requirement comprises Safeguarding as well.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>15,000</td>
<td>9,800</td>
<td></td>
</tr>
<tr>
<td>Male &gt;18:</td>
<td>15,000</td>
<td>Male &lt;18:</td>
<td>10,200</td>
</tr>
<tr>
<td>Total target:</td>
<td>50,000</td>
<td>Total target:</td>
<td>50,000</td>
</tr>
</tbody>
</table>

**Objective:** Ensure safe programing and prevention of harm/SEA to people IFRC/ARCS serve.

**Priority Actions:**

1. Conduct a refresher training to volunteers (male and female), the response management team and IFRC/National society staff on PSEA and Safeguarding.
2. Apply minimum standards as a guide to support sectoral teams to include PSEA and measures to mitigate the risk of SGBV.
3. Conduct a sensitization on PSEA and Safeguarding to ARCS/IFRC to institutionalize it in programme, emergencies, and organizational through a development of policies.
4. Strengthen the Safeguarding in ARCS and IFRC as well as to establish the referral pathway for reporting issues.
5. Conduct meetings with community in the designing of the services delivery in a safe and accessible way for them.
6. Carry out community sensitization/awareness on IFRC key safeguarding messages and their right of protection from retaliation should they share any concern or feedback regarding IFRC services.
7. Ensure availability of trusted and feasible reporting channels for the community to share their concerns.
8. Share key safeguarding messages (referral pathway, PSEA, GBV) widely with all group of people including women and girls, children, and disabled community members.
9. Collect community ideas especially women to know about their concerns regarding safe delivery of services and their accessibility to the services which will help IFRC adopt the safest way of program delivery.

10. Conduct Safeguarding orientation for grandmother groups and other influencing committees within the community, and their support in widely sharing the messages to the community especially women, girls, children, and other vulnerable groups, regarding accepted and unaccepted behaviors by humanitarian and available reporting channel for any misconduct.

<table>
<thead>
<tr>
<th>Community Engagement and Accountability</th>
<th>Female &gt; 18: 15,000</th>
<th>Female &lt; 18: 9,800</th>
<th>Funding Ask: CHF 76,000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male &gt; 18: 15,000</td>
<td>Male &lt; 18: 10,200</td>
<td>Total target: 50,000</td>
<td></td>
</tr>
</tbody>
</table>

Objective: Ensure the operation is integrating meaningful community participation, timely, open, and honest communication, and mechanisms to listen, respond to and act on feedback to collaboratively understand and address community needs, priorities, and the context.

Priority Actions:

1. Integrate CEA across the response so that staff and volunteers (particularly in Herat) have the knowledge and capacity to engage affected communities effectively, including marginalized and vulnerable groups such as persons with disability, older people, women.

2. Conduct community meetings to engage communities (male and female) in the planning and designing the response (selection criteria, priority needs, and the socialization of ARCS programme, services, and activities)

3. Inform community (male and female) well regularly about operation plans, intervention area, activities, selection criteria, distribution processes, feedback channels, and any challenges faced through at least two or more trusted channels.

4. Establish a systematic cross-sectoral feedback mechanism which considers the men and women (face-to-face, Hotline call/SMS, radio) collecting, analysing, and responding to feedback as well as using feedback to adapt the response and operational planning.

<table>
<thead>
<tr>
<th>Migration and Displacement</th>
<th>Female &gt; 2,100</th>
<th>Female &lt; 18: 1,370</th>
<th>Funding Ask: CHF 86,000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male &gt; 18: 2,100</td>
<td>Male &lt; 18: 1,430</td>
<td>Total target: 7,000</td>
<td></td>
</tr>
</tbody>
</table>

Objective: Host communities support the needs of IDPs and returnees and their families and assist them with reintegration at all stages (origin, transit, and destination).

Priority Actions:

1. Assess the specific needs of IDPs and returnees.

2. Provide protection services to IDPs, returnees and their families in coordination and engagement with local and national authorities.
3. Set up a referral mechanism for IDPs and returnees, mapping the organisations and governmental services.
4. Develop and implement a feedback mechanism to engage returnees and displaced people.
5. Set up Humanitarian Service Points along migratory routes. Including RFL services
6. Distribute multipurpose cash grant assistance to IDPs and returnees.

### Risk Reduction, Climate Adaptation and Recovery

**Objective:** Communities in high-risk areas are prepared for and able to respond to disasters.

**Priority Actions:**

**Integrating DRR**
1. Ensure that the designs of transitional shelter, health facilities, WASH facilities and education facilities factor resilience to future seismic shocks to ensure ‘build back better’ and include climate change considerations and designs will be ‘climate smart’.
2. Engage with the authorities and other stakeholders to ensure that suitable land is allocated for households that need to resettle from sites that are deemed vulnerable to future seismic shocks.

**Strengthen the preparedness of National Societies**
1. Provision of assistance to cope with winter to 2,000 households.
2. Preposition winterization kits.
3. Increase ARCS operational capacity by training volunteers and staff including women.
4. Retrain and equip branch, regional and national disaster response teams on earthquake response.
5. Adopt the Preparedness for Effective Response (PER) approach to identify and plan for critical, longer-term preparedness and response capacity strengthening efforts.

<table>
<thead>
<tr>
<th>Gender</th>
<th>Female &gt; 18</th>
<th>Female &lt; 18</th>
<th>Funding Ask</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>3,700</td>
<td>3,160</td>
<td>CHF 451,000</td>
</tr>
<tr>
<td>Male &gt; 18</td>
<td>3,860</td>
<td>Male &lt; 18: 3,280</td>
<td>Total target: 14,000</td>
</tr>
</tbody>
</table>

### Environmental Sustainability

**Objective:**

<table>
<thead>
<tr>
<th>Gender</th>
<th>Female &gt; 18: 15,000</th>
<th>Female &lt; 18: 9,800</th>
<th>Funding Ask: CHF 107,000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male &gt; 18</td>
<td>15,000</td>
<td>Male &lt; 18: 10,200</td>
<td>Total target: 50,000</td>
</tr>
</tbody>
</table>
**Objective:** Improve the environmental sustainability of the operation and ensure that any harm done to the local environment by interventions is minimized and mitigated.

**Priority Actions:**
1. Carry out community led waste (garbage) management initiatives.
2. Mobilize vehicle for collecting garbage collection and dumping into the safe place.
3. Organize environmental sanitation campaigns

<table>
<thead>
<tr>
<th>Education</th>
<th></th>
<th>Funding Ask: CHF 49,000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female &gt; 18: 4,200</td>
<td>Female &lt; 18: N/A</td>
<td></td>
</tr>
<tr>
<td>Male &gt; 18: 4,200</td>
<td>Male &lt; 18: NA</td>
<td></td>
</tr>
<tr>
<td>Total target: 8,200</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Objective:** Ensure/support safe, continued, and equitable access to education for affected populations, especially children and young people, vulnerable and marginalized groups.

**Priority Actions:**
1. Engage with the Education Cluster and Ministry of Education to identify education facilities in need of support.
2. Set up temporary safe spaces for community-based learning, psychosocial support and/or protection purposes.
3. Rehabilitate and equip damaged education facilities.
4. Monitor the provision of support to education facilities.

**Enabling approaches**

<table>
<thead>
<tr>
<th>National Society Strengthening</th>
<th></th>
<th>Funding Ask: CHF 489,000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female &gt; 18: 0</td>
<td>Female &lt; 18: 400</td>
<td></td>
</tr>
<tr>
<td>Male &gt; 18: 0</td>
<td>Male &lt; 18: 600</td>
<td></td>
</tr>
<tr>
<td>Total target: 1,000</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Objective:** Ensure that the ARCS has the necessary legal, ethical, and financial foundations, systems and structures, competencies, and capacities to plan and perform.

**Priority Actions:**
1. Strengthen ARCS processes, systems, and procedures, and enhance service delivery and support innovation.
2. Strengthen the logistics structure (warehouses, procurement, and fleet management) with defined criteria at all levels; with an enhanced capacity to deliver logistics services in normal and emergency situations.
3. Enhance digital capacity at the branch level which includes IT equipment, items and training for branch staff and volunteers.
5. Strengthen resource mobilization capacity of the National Society
6. Develop youth leadership skills and capacity to leverage youth engagement for programmes and services and their active representation will be ensured in branch and NHQ governance.
7. Renew branch development to further strengthen their response, recovery, and long-term capacity.
8. Review and strengthen financial management systems.
9. Ensure human resource optimization at all levels of ARCS.
10. COVER insurance of the volunteers who are mobilized in the operation.
11. Conduct governance and leadership development activities at the branch and headquarters.
12. Adopt preparedness for effective response (PER) approach through conducting emergency drills, risk assessment, trainings, contingency plans.
13. Conduct CVA preparedness activities for ARCS (workshops, SOP development and capacity building).
14. Develop ARCS headquarters and branch level warehousing capacity for household items, food, non-food, and medical storage.
15. Establish software-based warehouse operation.
16. Develop logistics and procurement capacity of ARCS through training.

**Coordination and Partnerships**

| Female > 18: NA | Female < 18: NA | Funding Ask: CHF 657,000 |
| Male > 18: NA | Male < 18: NA | Total target: NA |

**Objective:**

Technical and operational complementarity through the cooperation of Movement partners while engaging effectively with outside actors to influence actions at the local, regional, and global levels.

There is a need to invest more to better articulate the auxiliary role of the National Society with all stakeholders, and accordingly, strengthen the IFRC’s network footprint in the response.
**Priority Actions:**

1. **Membership Coordination**
   - Consolidate and harmonize multilateral and bilateral support provided to the ARCS through a Federation-wide approach.
   - Apply Federation-wide planning, monitoring, and reporting with the ARCS at the lead and IFRC providing strategic coordination.
   - Hold coordination meetings for in-country RCRC partners.
   - Organise virtual coordination meetings for RCRC partners supporting the operation but with no in-country presence.
   - Ensure continued engagement through a dedicated coordinator for Membership Coordination.

2. **Engagement with external partners**
   - Represent the IFRC network at various external forums involving other stakeholders (authorities, donor community, humanitarian community) including the possibility of deployment of a liaison officer to ensure that representation is adequate.
   - Accompany and support the ARCS in enhancing dialogue with the authorities and other relevant stakeholders.

3. **Movement Cooperation**
   - Promote a Movement-wide approach, as well as support to the ARCS, wherever possible.

### Shelter Cluster Coordination

<table>
<thead>
<tr>
<th>Gender</th>
<th>Female &gt; 18</th>
<th>Female &lt; 18</th>
<th>Male &gt; 18</th>
<th>Male &lt; 18</th>
<th>Funding Ask</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
</tbody>
</table>

**Objective:**

The IFRC network's capacity for influencing the prioritization, design, resourcing, implementation, and quality of shelter interventions in favor of affected populations is optimized.

1. Engage actively in Emergency Shelter and NFI Cluster.
2. Engage a Shelter Delegate and technical team.
3. Engage actively in Shelter Technical Working Groups

**Priority Actions:**

Note: Budget linked with shelter, housing, and settlements since IFRC is not co-convenor of the Cluster in Afghanistan

### IFRC Secretariat Services

<table>
<thead>
<tr>
<th>Gender</th>
<th>Female &gt; 18</th>
<th>Female &lt; 18</th>
<th>Funding Ask</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>NA</td>
<td>NA</td>
<td>CHF 535,000</td>
</tr>
<tr>
<td>Male &gt; 18</td>
<td>NA</td>
<td>NA</td>
<td>Total target: NA</td>
</tr>
<tr>
<td>Male &lt; 18</td>
<td>NA</td>
<td>NA</td>
<td></td>
</tr>
</tbody>
</table>

**Objective:**

The IFRC Secretariat ensures high quality support services to in-country IFRC member societies.

**Priority Actions:**

1. Maintain security assessments and plans in the two operational areas including enhancement of security protocols in-country in coordination with all in-country partners.
2. Take adequate measures to ensure safety and security of all RCRC personnel involved in this operation.
   - All IFRC must, and RCRC staff and volunteers are encouraged, to complete the IFRC Stay Safe 2.0 e-learning courses.
   - The IFRC Country Delegation security team is maintaining close coordination with external humanitarian actors in-country on the situation particularly at the earthquake affected areas.
   - The security team will also be maintaining close coordination with the ARCS units and local administrations in the operational areas.
   - The National Society's security framework will be applicable throughout the duration of the operation to their staff and volunteers.
   - For personnel under the IFRC security's responsibility, including surge support and integrated PNS deployed to the area, the existing IFRC country security plan, including security regulations, contingency plans for medical emergencies, relocation and critical incident management will be applicable.
   - Any field missions undertaken by IFRC personnel will follow the current IFRC travel approval process.

3. Maintain and follow an enhanced Federation-wide risk management process.


5. Facilitate global supply chain and logistics services including procurement of in-kind items (for distribution) and engaging financial service providers (for cash assistance activities).

6. Facilitate joint monitoring, quality assurance and evaluations.

7. Support improved financial management and implement financial audits.

8. Provide key services to integrated National Societies, including but not exclusively on procurement, transportation, accommodation, and security management.

PMER – IM and learning
1. Develop a PMER/M&E framework.
2. Develop and maintain a monitoring system, including an appropriate data-management mechanism (e.g., a centralized database for storing and retrieving data)
3. Conduct exit survey at distribution points
4. Conduct post distribution monitoring
5. Mobilise third party monitoring.
6. Conduct monitoring activities including joint monitoring visit.
7. Provide PMER-IM support enabling the effective planning and implementation, as well as reporting of the operation.
8. Conduct review meetings and lessons learned workshop.
9. Conduct final evaluation.
10. Develop a follow-up mechanism to implement the recommendations from review/evaluation.
11. Provide training to staff and volunteers on information management, PMER.

Communication
1. Develop and implement an emergency communications strategy for the earthquake impact and response.
2. Coordinate with PMER on evidence-based messaging from research and evaluations, and SPRM for donor visibility requirements.
3. Generate in-depth and success stories from the implementation.
4. Regularly promote earthquake response on social media and media.
5. Regularly generate photos and videos to support promotion and visibility of the earthquake response.
6. Coordinate with the humanitarian diplomacy, operations, and programmes team on relevant angles to be included in the communication materials planned to be produced for this operation.

**Supply chain management.**
The IFRC country delegation has well-established procurement system to ensure required local procurement of goods and services under proper risk management and mitigations and in close coordination with the Regional Logistics unit in Asia Pacific within the IFRC Secretariat's of Global Humanitarian Services and Supply Chain Management structure.

- Utilize framework agreement (FWA) for food parcels procurement.
- Reorder household items locally if needed. The Delegation procurement team already completed several household items procurement locally. Based on the urgency, re-order may process, and this will save time for having new tender procedures.
- Import standard and replenish household items through Global Humanitarian Services and Supply Chain Management, Asia Pacific, Kuala Lumpur under the global FWA.
- Standard vehicles can be imported through IFRC Global Fleet Unit in Dubai, UAE.
- Based on need, urgency, and available opportunities, PNSs support and sourcing process may take place under the signed agreement between IFRC and PNSs.

**Surge capacity**
- Deploy surge personnel to support the operation to cover communications, health coordination, information management, shelter (engineer, humanitarian diplomacy, and preparedness for effective response).
- Additional role profiles may be considered depending on the needs of the operation.

**Finance**
- Finance unit supporting on plan and budget, account booking, coordination on procurement and expense validation.
- Ensure review of project proposals and financial compliances which support on audit process.
- Ensure timely submission of pledge analysis and financial report in accordance with donor/partner requirement.
Risk management

In accordance with IFRC’s Risk Management Framework, IFRC Country Delegation in Afghanistan has living risk register documents capturing risks relevant to the office and the organization, including safeguarding risks. The documents are regularly updated, operations and security risk register documents are reviewed bimonthly. Risks analysed and considered outside of the risk appetite are escalated to the regional and global levels.

Since 1 September 2021, IFRC is handling all procurement files in Afghanistan. The IFRC country delegation has well-established procurement systems and team to ensure procurement is open, fair, competitive, and transparent. The country delegation’s procurement processes follow the global IFRC procurement procedures. In compliance with its internal policies, IFRC screens its staff and suppliers in Afghanistan against UN sanctions lists. It also undertakes its own screening of all new ARCS staff at both headquarters and branch levels. All IFRC project managers have been trained in fraud and corruption, with training for new ones to be done within a month of joining. IFRC screens all individuals and vendors paid by ARCS with funds from IFRC and supports ARCS to ensure that sanctioned individuals are not responsible for the management of IFRC funds and resources.

Furthermore, there is a 100 per cent completion rate of the IFRC online course on fraud and corruption prevention. Awareness on Integrity Line, the IFRC Whistleblowing and Case Management System, is reinforced with posters in the corridors as well as during staff meetings. From 1 May 2023, the country delegation will have a dedicated risk and compliance team that will be responsible for reinforcing the systems of financial controls and risk management and it will work with the ARCS’s audit and compliance department to regularly review all transactions and processes for compliance.

Additionally, IFRC has hired a Senior safeguarding officer based in Kabul who focuses primarily on the prevention of and response to sexual exploitation and abuse and misconduct related to child safeguarding as well as whistle blower protection Policy. The officer develops and deliver safeguarding communication strategies, tools, and guidance for affected people, and personnel of the IFRC network. The Safeguarding Senior Officer, coordinate with IFRC global safeguarding team to review and update the IFRC Afghanistan country delegation safeguarding policy and rollout, to ensure that the policy aligns with the Movement Protection from PSEA policies. The Senior Officer is responsible for the development and delivery of safeguarding training to personnel of the IFRC network and implementing partners as well as providing strategic support to the ARCS to enhance knowledge and understanding of safeguarding issues and support the establishment and/or strengthen safeguarding systems within the National Society. A PSEA self-assessment, is on the ground for assessing and ensuring best safeguarding practices within IFRC and National Society. SEA Risk Assessment and Child Safeguarding Risk Analysis will be conducted for each Project to ensure all IFRC programmes are safe and mitigations actions are in place for the possible Safeguarding and SEA risks.

Despite the regular PSEA, Child Safeguarding and whistle blower protection Policy training for the staff and volunteers, during/after a disaster the emergency response teams are oriented on the afore mentioned Policies before they deploy to the field and community sensitizations are done regarding IFRC Safeguarding Policies. For the community sensitization, the key Safeguarding messages, available reporting channels and referral pathway is discussed during assessments, distributions, heath services, Post distribution monitoring, Help desk, IEC (Information, Education and Communication) material and other face to face meetings with communities. This helps the service providers receive a refresher training on IFRC PSEA and Safeguarding Policies as well as community are sensitized on IFRC do no harm policy and their right for receiving free services from IFRC/National Society and sharing any concerns or feedback confidentially through available and discussed reporting channels.

Here is a list of the risks that were anticipated during the planning phase and mitigation measures followed during the operation period.

<table>
<thead>
<tr>
<th>Risk</th>
<th>Likelihood</th>
<th>Impact</th>
<th>Mitigating actions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Natural hazards such as harsh winter, floods and landslides,</td>
<td>High</td>
<td>Medium</td>
<td>To mitigate the risk, ARCS and IFRC will:</td>
</tr>
</tbody>
</table>

constraining access, and distributions.

- Preposition supplies at strategic locations in zone and branch levels. Map out alternative road options for access.

**Situations of violence in target provinces/districts that impact on:**
- Access
- Safety of staff and volunteers
- Supply chain

Medium | Medium
-------|-------
The IFRC security plans will apply to all IFRC staff throughout the operation. To mitigate the risk, ARCS and IFRC will:
- Negotiate with the authorities and groups that may be controlling specific areas.
- Engage local volunteers and community leaders at all stages of service delivery.
- Provide security briefing to staff and volunteers.
- Ensure that staff and volunteers are equipped with identification and visibility items.
- Disseminate the Fundamental Principles of the Red Cross Red Crescent Movement.
- Conduct area-specific security risk assessment for any operational area should any IFRC personnel deploy there.
- Identify and implement risk mitigation measures.
- Make the IFRC Stay Safe e-learning courses; Stay Safe 2.0 Global edition Level 1-3 mandatory for all IFRC staff and encourage RCRC staff and volunteers complete the course.
- Preposition supplies at strategic locations in zone and branch levels. Map out and use alternative road options for access.

**Major supply chain risks in Afghanistan:**
- Logistics bottleneck and delays in procurement impact programme delivery timelines.
- Limited supplies in the markets hinder procurement.
- Delay on international procurement due to the global supply chain disruption.

High | High
-------|-------
- Strengthen supply chain management team and continuously review processes to make improvements.
- Based on need, urgency and available opportunities, PNSs support and sourcing process may adopt under the signed agreement between IFRC and PNSs under the Fund Transfer system for PNS present in
• Restricted banking services affect cashflow, including for payment of suppliers.
• Number of checking, screening, and verifications must conduct due to sanction country. Lack of documentation like financial audited report during financial due diligence checking, hence this is not abundant by the local authority.
• Fraud and/or corruption.

Risks associated with community-based cash and/or in-kind distribution activities

<table>
<thead>
<tr>
<th></th>
<th>Risk Description</th>
<th>Level</th>
<th>Precaution Measures</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Afghanistan whom have undergone the CRRA process.</td>
<td></td>
<td>• Diversify sourcing options, including from neighbouring countries.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Preposition readiness stocks in strategic locations across the country for timely response.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Engage financial service providers who are licensed by the Central Bank and thoroughly screened as well as use the UN Cash Bridge.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Undertake regular context analysis to inform adjustments in approaches or implementing modalities, and thus switching between cash assistance or in-kind modalities as needed.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Screen all vendors and service providers against UN and OFAC sanctions lists prior to entering contracts.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Socialize the IFRC fraud and corruption prevention policy to vendors and service providers.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Apply relevant control measures, including having the IFRC Country Delegation as the first-line defence.</td>
</tr>
<tr>
<td></td>
<td>Establish proper community engagement and accountability mechanism in place.</td>
<td>Medium</td>
<td>• Sustain private diplomacy for the female staff and volunteers to continue operating in the fields and offices.</td>
</tr>
<tr>
<td></td>
<td>Put in place crowd control mechanisms, including gender-segregated queuing structures outside of the distribution centres and will mark queues using hazard tape inside the distribution centres.</td>
<td></td>
<td>• Ensure that all staff are equipped with identification and visibility items.</td>
</tr>
<tr>
<td></td>
<td>Invite people receiving assistance to come to the distribution centres in groups, thereby reducing the amount of time they spend queuing outside.</td>
<td></td>
<td>• Localize and customize arrangements.</td>
</tr>
</tbody>
</table>
### Quality and accountability

In the ongoing earthquake response, proactive measures will be taken to ensure both quality and accountability. This involves clearly defining the roles and responsibilities of response teams, external partners, communities, and individuals involved. A structured hierarchy with designated leaders and decision-makers will streamline the decision-making process. Robust communication systems will be maintained to facilitate real-time information sharing among response teams, and regular updates will be provided to stakeholders on the response status.

The IFRC will facilitate a Federation-wide approach to support the ARCS PMER unit to enhance these processes. This will include training in data quality, ethics, and management, planning, monitoring, and reporting as well as digital transformation. Various reporting tools, including situation reports and operations updates, will be regularly presented to promote transparency, document actions, inform decision-making, engage affected communities, ensure accountability to donors/partners, and support continuous improvement in the response operation. Additionally, documenting findings through written reports and photographs will play a crucial role in ensuring accountability, transparency, and effective communication. These records will provide evidence of aid distribution, conditions at distribution sites, and community feedback, supporting decision-making, resource allocation, monitoring, evaluation, and legal requirements, while also contributing to lessons learned for future response efforts and advocacy and fundraising initiatives. Moreover, the IFRC will have field officers who will,

<table>
<thead>
<tr>
<th>Risk</th>
<th>Probability</th>
<th>Impact</th>
<th>Actions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Utilize community-based volunteers and groups such as grandmother committees.</td>
<td>High</td>
<td>Medium</td>
<td>Plan all activities involving air travel in advance. Regularly monitor and update list of available, both commercial and humanitarian flights to Heart Fragility of the national banking system affected liquidity and exchange rate</td>
</tr>
<tr>
<td>In the event of resurging COVID-19 cases and its impact on physical health and business continuity</td>
<td>Medium</td>
<td>High</td>
<td>Ensure safety of the people receiving assistance and the staff who will be involved in distributions, Follow the COVID-19 standard operating procedure and COVID-safe programming guide, Maintain physical distance, Make masks, handwashing facilities, and sanitizers available at distribution sites.</td>
</tr>
<tr>
<td>Risk of outbreak such as AWD due to limited access to water, unsafe sanitation practices and disrupted health services.</td>
<td>High</td>
<td>High</td>
<td>Carry out health and hygiene promotion activities</td>
</tr>
</tbody>
</table>
among others, undertake regular monitoring together with ARCS counterparts at zone or branch levels to complement remote monitoring. In addition, pledge-based, situation reports, and a 3W dashboard to be issued on the Afghanistan page of IFRC GO.

Furthermore, initiatives will be launched to conduct third party monitoring and evaluations. These assessments are pivotal for assessing the impact and performance of response operations, gauging effectiveness, and efficiency, and providing data-driven insights and timely feedback. They enable informed decision-making, resource allocation, and risk mitigation, while also promoting accountability, quality assurance, and continuous improvement. The findings of these monitoring and evaluations serve as evidence of performance to external stakeholders and empower response teams to learn from experiences and enhance future preparedness and response efforts.

Compliance with relevant industry regulations, standards, and legal requirements will also be ensured, with regular monitoring of changes in regulations and timely updates to quality control measures to maintain compliance and mitigate associated risks.

Efforts to ensure quality and accountability in this operation encompass a broad spectrum. This will include regular financial audits, exit surveys, post distribution monitoring and a lessons-learned workshop. The monitoring findings are regularly shared with programming teams to inform improvements and to enhance the quality of services.

Key indicators for monitoring and evaluation are as follows. These may subject to further changes:

<table>
<thead>
<tr>
<th>Sector</th>
<th>Indicators</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shelter, Housing and Settlement</td>
<td>Number of earthquakes affected people provided with emergency shelter and household items.</td>
</tr>
<tr>
<td></td>
<td>Number of households provided with cash/voucher/in-kind and technical assistance for transitional/durable shelter construction that is safe and adequately enables essential household and livelihoods activities to be undertaken with dignity.</td>
</tr>
<tr>
<td></td>
<td>Number of people who attended training/awareness raising sessions on safe shelter.</td>
</tr>
<tr>
<td>Livelihoods</td>
<td>Number of targeted households reached with livelihood support (livestock, agriculture)</td>
</tr>
<tr>
<td></td>
<td>Number of people receiving temporary employment opportunities (cash for work)</td>
</tr>
<tr>
<td></td>
<td>Number of people receiving vocational/soft skill training (disaggregated by types)</td>
</tr>
<tr>
<td></td>
<td>Number of households receiving support for income generation activities.</td>
</tr>
<tr>
<td></td>
<td>Number of households and/or community groups (disaggregated by types) received working capital or inputs for livelihood activities in line with their proposals.</td>
</tr>
<tr>
<td></td>
<td>Number of women and youth at risk received support for vocational training and tools for starting income-generation activities</td>
</tr>
<tr>
<td>Multi-purpose cash</td>
<td>Number of households who successfully received cash for basic needs.</td>
</tr>
<tr>
<td>Health &amp; Care</td>
<td>Number of health facilities (mobile/fixed) supported with staff, equipment and/or running costs for the provision of primary health services.</td>
</tr>
<tr>
<td></td>
<td>Number of people reached with primary health services.</td>
</tr>
<tr>
<td></td>
<td>Number of staff and volunteers trained on CBHFA/ECV</td>
</tr>
<tr>
<td></td>
<td>Number of people reached with first aid service</td>
</tr>
<tr>
<td></td>
<td>Number of people provided with MHPSS interventions including PFA</td>
</tr>
<tr>
<td></td>
<td>Number of people trained on PFA and other MHPSS technical trainings.</td>
</tr>
<tr>
<td>Water, Sanitation, and Hygiene</td>
<td>Number of water sources constructed or rehabilitated (wells with pumps, spring protection, community ponds with filtration).</td>
</tr>
<tr>
<td></td>
<td>Number of constructed household/communal sanitation facilities (this is more than excreta disposal).</td>
</tr>
<tr>
<td></td>
<td>Number of people reached with safe water.</td>
</tr>
<tr>
<td>Number of people (and households) reached by hygiene promotion activities</td>
<td></td>
</tr>
<tr>
<td>Number of people reached by protection, gender and inclusion programming.</td>
<td></td>
</tr>
<tr>
<td>Percent of people surveyed who report receiving useful and actionable information.</td>
<td></td>
</tr>
<tr>
<td>Percentage of staff and volunteers working on the operation who have been briefed on community engagement and accountability and trained on the community feedback mechanism.</td>
<td></td>
</tr>
<tr>
<td>Number of feedback comments collected, disaggregated by sex, age and disability, including sensitive feedback linked to SEA, fraud, corruption or protection concerns.</td>
<td></td>
</tr>
<tr>
<td>Percentage of people who received a response to their feedback about the operations.</td>
<td></td>
</tr>
<tr>
<td>Number of children and adults with access to safe and accessible channel to report SEA.</td>
<td></td>
</tr>
<tr>
<td>Number of children and adults reached through awareness raising activities and community mobilizations on PSEA.</td>
<td></td>
</tr>
<tr>
<td>Number of sites where awareness raising campaign activities on how to report SEA and how to access victim /survivor centered assistance.</td>
<td></td>
</tr>
<tr>
<td>Number of personnel trained on PSEA guidelines and protocols.</td>
<td></td>
</tr>
<tr>
<td>Number of returnees and internally displaced persons reached with services for assistance and protection.</td>
<td></td>
</tr>
<tr>
<td>Number of ARCS staff and volunteers trained in different sector(s) (disaggregated by sector and gender).</td>
<td></td>
</tr>
<tr>
<td>Number of warehouses extended/renovated/ constructed.</td>
<td></td>
</tr>
</tbody>
</table>

Key indicators identified will be used to establish an M&E framework to monitor the operation, including the approach, quality of work, as well as tracking of planned activities.

A Compliance, Risk Management, and Safeguarding Department has been established within the IFRC Country Delegation. In addition to a manager, it includes personnel specializing in compliance, risk management, and safeguarding. The team ensures adherence to internal/external compliance requirements, response to sexual exploitation and abuse including misconduct related to child safeguarding, and ensures all possible risks are identified and mitigated.

A Supply Chain Management Department exists within the IFRC Country Delegation. In addition to a manager, it includes personnel specializing in customs, fleet management, logistics, procurement, and warehousing. Procurement of goods and services will be conducted according to the IFRC’s procedures and standards, in close coordination with the Regional Logistics unit in Asia Pacific within the IFRC Secretariat’s of GHS&SCM structure.
## FUNDING REQUIREMENT

### Federation-wide funding requirement*

<table>
<thead>
<tr>
<th>Federation Wide Funding Requirement including the National Society domestic target, IFRC Secretariat and the Partner National Society funding requirement</th>
<th>IFRC Secretarian Funding Requirement in support of the Federation Wide funding ask</th>
</tr>
</thead>
<tbody>
<tr>
<td>20 million CHF</td>
<td>9 million CHF</td>
</tr>
</tbody>
</table>

*For more information on Federation-Wide funding requirement, refer to section: Federation-wide Approach*
Breakdown of the IFRC secretariat funding requirement

*Figures illustrated below represent IFRC Secretariat funding ask only*

### OPERATING STRATEGY

**MDRAF007 - Afghanistan – Herat Earthquake**

#### IFRC SECRETARIAT FUNDING REQUIREMENTS

<table>
<thead>
<tr>
<th>Planner Operations</th>
<th>Amount (CHF)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shelter and Basic</td>
<td>3,180,00</td>
</tr>
<tr>
<td>Household Items</td>
<td>869,000</td>
</tr>
<tr>
<td>Livelihoods</td>
<td>247,000</td>
</tr>
<tr>
<td>Multi-purpose Cash</td>
<td>872,000</td>
</tr>
<tr>
<td>Health</td>
<td>800,000</td>
</tr>
<tr>
<td>Water, Sanitation &amp; Hygiene</td>
<td>474,000</td>
</tr>
<tr>
<td>Protection, Gender and Inclusion (including Safeguarding)</td>
<td>49,000</td>
</tr>
<tr>
<td>Education</td>
<td>86,000</td>
</tr>
<tr>
<td>Migration</td>
<td>451,000</td>
</tr>
<tr>
<td>Risk Reduction, Climate Adaptation and Recovery</td>
<td>76,000</td>
</tr>
<tr>
<td>Community Engagement and Accountability</td>
<td>107,000</td>
</tr>
<tr>
<td>Environmental Sustainability</td>
<td>107,000</td>
</tr>
<tr>
<td><strong>TOTAL FUNDING REQUIREMENTS</strong></td>
<td><strong>9,036,000</strong></td>
</tr>
</tbody>
</table>

#### Enabling Approaches

<table>
<thead>
<tr>
<th>Enabling Approaches</th>
<th>Amount (CHF)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coordination and Partnerships</td>
<td>657,000</td>
</tr>
<tr>
<td>Secretariat Services</td>
<td>586,000</td>
</tr>
<tr>
<td>National Society Strengthening</td>
<td>582,000</td>
</tr>
</tbody>
</table>

All amounts in Swiss Francs (CHF)
Contact information

For further information, specifically related to this operation please contact:

At the Afghan Red Crescent Society:
- Mohammad Nabi Burhan, Secretary General; email: sg@arcs.af
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- Rad Al Hadid, Operations Manager; email: rad.alhadid@ifrc.org
- Tara Devi Gurung, Planning and Reporting Delegate; email: tara.gurung@ifrc.org

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- Maz Afiqah MOHAMMAD KH, SPRM, Asia Pacific Regional Office; email: PartnershipsEA.AP@ifrc.org

For Performance and Accountability support (planning, monitoring, evaluation and reporting enquiries)
- Mursidi Unir, PMER in Emergencies Coordinator, email: mursidi.unir@ifrc.org

Reference

Click here for:
- Previous Appeals and updates (Emergency Appeal Revision 6) https://adore.ifrc.org/Download.aspx?FileId=746756