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Emergency Appeal operation update

Afghanistan: Floods

 International Federation
of Red Cross and Red Crescent Societies

Emergency appeal n° MDRAF001

Operation update n°3

GLIDE n° [FL-2012-000087-AFG](#)

27 December 2012

Period covered by this

Ops Update: 1 September
to 5 December 2012

Appeal target (current):

CHF 1,017,115

Appeal coverage: To date, the appeal is 87 per cent covered in cash and kind. Funds are needed to support the Afghan Red Crescent Society in this operation to assist those affected by the floods and to replenish depleted stocks of relief items held by ARCS and IFRC. [<click here to go directly to the updated donor response report, or here to link to contact details >](#)

Appeal history:

- A revised appeal was launched on 14 August 2012 for CHF 1,017,115 for six months to be completed by 5 December 2012 to assist 2,000 families (14,000 individuals).
- A preliminary emergency appeal was initially launched on 6 June 2012 for CHF 1,186,873 for six months to assist 14,000 beneficiaries (2,000 households).
- Disaster Relief Emergency Fund (DREF): CHF 213,000 was allocated from the International Federation of Red Cross and Red Crescent Societies' (IFRC) Disaster Relief Emergency Fund (DREF) to support this operation. Unearmarked funds to replenish DREF are encouraged.

Summary:

Heavy rains in May resulted in flash flooding in the northern Afghan province of Sar-e-Pol. A total of 18,000 people were affected by the floods. The Afghan Red Crescent Society (ARCS), with support from the International Federation of Red Cross and Red Crescent Societies (IFRC), responded to the needs of the affected population through provision of health care and sanitation services as well as distribution of shelter and other non-food items. The distribution of non-food items has since been completed.



An International Federation of Red Cross and Red Crescent Societies staff observing the affected houses in Selbor Kocha Payeen village in Sar-e-Pul province. **Photo:** Ali Hakimi/IFRC.

Emergency health care was provided during the first phase of the operation. A total of 2,043 patients were treated by the ARCS's mobile health teams (MHT) and a further 3,170 people were reached through education and hygiene promotion activities.

Non-food items were made available to other flood-affected localities in northern Afghanistan during June and July 2012. In July 2012, flash flooding occurred in Kabul city and the IFRC provided non-food items for 111 families as part of ARCS's response. In other areas, IFRC has provided replenishment stocks to ARCS branches that have undertaken flood response activities this summer.

The operation is now under review to assess the effectiveness, efficiency and quality of the ARCS/IFRC response to the summer floods, and review outcomes will be made available in the final operations update, due March 2013.

The situation

Afghanistan continues to experience both natural and man-made disasters which often have a significant toll on human lives, livelihoods, properties and infrastructure.

Though the flood situation in Sar-e-Pol and other locations has abated, the after-effects still linger. Many families are either still unable to return to their damaged homes or face the problem of homes that are totally destroyed.

Compounding the flood damage is the lack of access to many areas due to poor security. However, ARCS supported by IFRC has been able to perform more assessments and undertake distributions of the shelter and non-food items to affected people.

Coordination and partnerships

ARCS is the lead Movement partner in this flood response, with support from the IFRC country office. ARCS has identified other flood affected areas and populations to which they have responded. The National Society has been providing some of the immediate needs to the affected people.

ARCS is working closely with IFRC and the Afghan National Disaster Management Authority (ANDMA) at both central and regional levels. The table below identifies and indicates the current floods response coordination which is chaired by the First Vice President of the Republic of Afghanistan with technical support of ANDMA, UN agencies and the National Society. This body meets regularly to discuss operational strategies, levels of implementation, and the roles of the different humanitarian actors.

Table 1: Intervention by organisations (as of 24 July 2012)

	Organization	Responsibility/Response
1	ARCS	Food, non-food items, health care and water, sanitation and hygiene promotion
2	IFRC	Technical support to ARCS in relief, health, water, sanitation and hygiene promotion and resource mobilization
4	Afghan National Police	Food distributions
5	International Security Armed Forces (ISAF)	Medicine and clothes
6	Afghan Ministry of Defence	Non-food items
7	Action Aid	Bread and water
8	Child protection	Non-food items
9	World Food Programme (WFI)	Biscuits and bread

National Society Capacity Building:

ARCS and IFRC are working in concert to ensure that all of requirements of international Movement support are understood, met and actioned.

Red Cross and Red Crescent action

Overview

In response to the various flood events, ARCS has acted directly through the provision of immediate basic health support and undertaken assessments to determine the needs of the affected populations. While the impact of the floods this year has been widespread, based on consultation with ANDMA and other humanitarian actors, ARCS has focused its assessment and subsequent response activities in specific districts and villages of the affected provinces.

In the provinces of Jawzjan, Faryab, Balkh and Samangan, the relative impact was small in terms of the number of families affected and the number of houses destroyed or damaged but still necessitated relief efforts. In each case, a combination of heavy rains and snow melt caused river levels to rise and inundate villages located on the banks.

In the case of the Sayward, Sozma Qala, Kohnistanat districts and Sar-e-Pol city of Sar-e-Pol province, and in the 5th, 6th and 13th districts of Kabul city and the Ishkamish district of Takhar province, the scale was larger and required greater assistance from ARCS.

In response to the larger event in Sar-e-Pol, ARCS's immediate actions included the deployment of its mobile health team (MHT) to provide first aid and basic health care to the affected population as well as conducting assessments to determine the need for further health assistance. In support of this action, the ARCS headquarters dispatched two medical kits to enable the MHT to continue operations. As a result of this action, ARCS is providing health support to 2,000 families within the targeted districts of Sar-e-Pol. In addition, the ARCS MHT has provided support to the Sar-e-Pol provincial hospital, easing the strain on hospital services. Soon after the floods occurred, ARCS responded at the branch level with immediate distribution of non-food items.

ARCS assessments also identified a need for the provision of safe drinking water due to the flood waters contaminating regular water sources. Complementing the immediate health assistance provided, ARCS mobilised its pre-positioned disaster response water and sanitation (WatSan) Kit 2 to Sar-e-Pol to provide up to 2,000 families (approximately 14,000 individuals) with access to safe drinking water. Training has been provided by the ARCS health officer and community based health and first aid (CBHFA) supervisor to 100 CBHFA volunteers in Sar-e-Pol on epidemic control for volunteers (ECV) and household water treatment and safe storage (HHWTSS) in the affected areas. These volunteers are providing household level training to 2,000 households in safe water use.

A total of 180 female volunteers in affected areas were trained in using hygiene kits and mosquito nets. The volunteers played an important role in providing information to female members of beneficiary households in utilization of hygiene kit contents and mosquito nets. Thirty (30) of these volunteers from Sar-e-Pol also participated in a household surveying activity, which sought feedback from beneficiary families on the support they received through the ARCS response.

In terms of supporting the relief needs of the affected population, ARCS responded immediately with the distribution of non-food and emergency shelter items from pre-position stock to 294 families in Sar-e-Pol city from 19-20 May 2012. This was followed by an assessment across 18 affected villages to determine the extent of needs. Following cooperation with the ANDMA and UN agencies, eight of these villages were allotted to ARCS for non-food and emergency shelter distribution. ARCS has completed the first round of distribution to a further 711 families in eight villages. A second round of distribution was completed on 12 August 2012 to fulfill the identified needs of the 294 families in Sar-e-Pol city and the 711 families in eight villages with items sourced from outside Afghanistan (i.e. hygiene kits and mosquito nets). A final distribution round was completed in Sar-e-Pol on 5 December, in which beneficiary families received a second hygiene kit.

Overall ARCS actions covered the following sectors.

Non-food items: provision of blankets, mosquito nets, kitchen sets, jerry cans and hygiene kits.

Shelter: provision of emergency shelter needs including tent and/or tarpaulins.

Health: curative and preventive health services.

WatSan and hygiene promotion: household water treatment, provision of safe drinking water, hygiene promotion.

Coordination: with government and other humanitarian actors.

Progress towards outcomes

Relief distributions (food and basic non-food items)

Outcome: 1,430 affected families whose houses have been completely or partially destroyed were supported with non-food items* to relieve their immediate household needs in Jawzjan, Faryab, Balkh, Samagan, Takhar, Kabul, and Sar-e-Pol provinces

Outputs (expected results)	Activities conducted
Households receive non-food items to restore their daily living conditions.	<ul style="list-style-type: none"> • Conduct emergency needs and capacity assessments. • Mobilization and provision of relief training of staff and volunteers at national headquarters, province and district levels. • Development of beneficiary targeting strategy and registration system to deliver intended assistance. • Procurement of non-food items following IFRC procedures and standards. • Distribution of relief supplies on with control of supply movements from point of dispatch to end user. • Monitoring and evaluation of the relief activities and reporting on relief distributions.

* Relief items include blankets, kitchen sets, jerry cans and mosquito nets. The amount of non-food items distributed is based on actual needs and varies depending on the family size according to the detailed surveys conducted by ARCS when registering beneficiaries.

In Jawzjan and Faryab, non-food item stocks were mobilised for 84 and 30 families respectively from IFRC pre-positioned stocks in those provinces and action is underway to restock in these locations in preparation for the winter months. Non-food items for 73 families in Balkh province were mobilised from IFRC's warehouse located in Mazar-i-Sharif.

Immediately following the flash floods in Sar-e-Pol, ARCS provided relief support to 395 families from their own stocks based in Sar-e-Pol and Mazar-i-Sharif, and these stocks have since been replenished by IFRC. Following detailed assessments, a further 1,005 families were provided with non-food items from ARCS/IFRC pre-positioned stocks in Mazar-i-Sharif. Replenishment processes are underway.

In Samangan and Takhar, pre-positioned non-food item stocks were mobilised to assist 57 and 100 families respectively; these stocks have since been replenished.

In response to flash floods in Kabul city, IFRC assisted ARCS in the provision of non-food items to 111 beneficiary families.

All relief activities are now complete and ARCS stocks have been replenished from IFRC non-food items available in-country. In total, 1,460 families received non-food items, which is 30 families more than the original target.

IFRC has completed procurement processes for replenishment of non-food item stocks, and is awaiting delivery of the final consignment which is currently in Karachi, Pakistan, awaiting customs clearances.

Emergency shelter	
Outcome: 1,039 affected families whose houses have been completely or partially destroyed are supported with safe and adequate shelter solutions through the provision of tents and tarpaulins in Jawzjan, Faryab, Balkh, Samagan, Takhar, Kabul, and Sar-e-Pol provinces.	
Outputs (expected results)	Activities conducted
Households receive a tent and/or tarpaulins to meet their immediate shelter needs.	<ul style="list-style-type: none"> • Conduct rapid emergency needs and capacity assessments • Assess the extent of the shelter needs and preferred shelter solutions. • Develop beneficiary targeting strategy and registration system to deliver shelter assistance. • Procurement of emergency shelter items following IFRC procedures and standards. • Distribution of tents and tarpaulins while controlling supply movements from point of dispatch to end user. • Monitor and evaluate the relief activities and provide reporting on shelter distributions.

The preliminary emergency appeal identified emergency shelter needs for up to 700 families. Based on the further assessments conducted by ARCS as well as cooperation with ANDMA and UN agencies, this target was increased. This is a result of the needs in Sar-e-Pol and identifying additional need in other provinces.

The ARCS operation reached 55 families in Balkh province, 30 in Jawzjan, 100 in Kabul, 55 in Samangan, 700 in Sar-e-Pol and 100 in Takhar with emergency shelter. In total, the ARCS operation reached 1,040 families, achieving its target. Emergency shelter consists of tarpaulins and tents.

Emergency health and care	
Outcome: The health risks of the emergency on the affected population is reduced through the provision of preventive, community-level and curative services to 2,000 affected families in 8 villages in Sar-e-Pul for six months.	
Outputs (expected results)	Activities conducted
Families are able to access curative and referral health service through the ARCS's mobile health teams.	<ul style="list-style-type: none"> • Assess the health risks of the affected population in terms of health services, prevention, health needs and risk of communicable diseases. • Mobilisation of mobile health teams to the affected communities.
The resilience of the community is improved through better health awareness and knowledge.	<ul style="list-style-type: none"> • Training of 100 community volunteers in community-based health and first aid (CBHFA) and epidemic control for volunteers (ECV). • Print and distribute existing ARCS information, education and communication (IEC) materials in locations wherever ARCS is active, such as through NFI distributions and in hospitals and clinics. • Mobilization of volunteers to each conduct visits to ten targeted households four times each over a three-month period, as well as conducting health awareness campaigns at the community level.

MHTs were deployed by ARCS to provide first aid and basic health care to the affected population. A total of 2,043 patients were treated by MHTs and a further 3,170 people were reached through health education and hygiene promotion activities.

In the immediate aftermath of the flood, MHT provided surge capacity to the provincial hospitals.

The ARCS health officer and CBHFA supervisor provided training to 20 CBHFA volunteers in Sar-e-Pol on ECV. These volunteers provided household level training to targeted households in safe water use. Of the 100 volunteers planned for training, the remaining 80 are being managed under the general health programme, and costs for this training will not be charged to the Afghan Floods Appeal.

The delivery of medical services, as well as disease prevention and health promotion in communities were already completed. Please refer to the previous operations update for details.

In September, another set of community health campaigns conducted in Sar-e-Pul were carried out along with the distribution of hygiene kits and mosquito nets. The campaigns were again carried out in early December which was accompanied by a second round of distribution of hygiene kits. Distribution of hygiene kits and mosquito nets reached 1,005 families, while the community health campaigns reached many more through community and household activities.

Water, sanitation, and hygiene promotion

Outcome: The risk of waterborne and water related diseases has been reduced through the provision of safe water and hygiene promotion to 2,000 families in 8 villages in Sar-e-Pol for six months.	
Outputs (expected results)	Activities conducted
Target households have improved access to safe drinking water through correct household water treatment and safe storage mechanism.	<ul style="list-style-type: none"> • Develop beneficiary targeting strategy and registration system to deliver intended assistance. • Procurement of 50,000 water purification sachets for household water treatment – done and delivered in first phase, and replenishment stocks have been received. • Distribution of water purification sachets while controlling supply movements from point of dispatch to end user. • Procurement of one WatSan Kit 2. • Mobilisation of WatSan Kit 2 • Monitor the correct use of household water treatment.
The health status of the population is improved through hygiene promotion activities.	<ul style="list-style-type: none"> • Develop beneficiary targeting strategy and registration system to deliver intended assistance. • Procurement of hygiene kits following IFRC procedures and standards. • Distribution of hygiene kits while controlling supply movements from point of dispatch to end user. • Training of 100 mostly male community volunteers in ECV, household water treatment and safe storage (HHWTSS) and hygiene promotion. • Training of 160 female community volunteers in utilization of hygiene kits and correct hanging and use of mosquito nets. These volunteers will ensure households have adequate knowledge in correct use of hygiene kits and mosquito nets. • Conduct four hygiene promotion campaigns and explanation of use of household water treatment equipment.

Overall Progress

Some 50,000 water purification sachets for household water treatment were distributed by trained staff and volunteers from existing stocks in the first phase of the operation. Procurement of replenishment stocks is completed and are in-country.

The IFRC country office had in stock a WatSan Kit 2 and this was deployed to Sar-e-Pol in the first phase of the operation. A replacement WatSan Kit 2 was procured and has already been dispatched from stocks in Kuala Lumpur. This was the first time the ARCS staff and volunteers responded to a disaster using the WatSan kit 2, since attending the first ARCS WatSan Emergency Response training in December 2011.

Beneficiary targeting strategy and registration was not pursued under the water, sanitation and hygiene promotion sector, but rather activities at household level were based on the beneficiary registration undertaken for distribution of non-food items.

Hygiene kits were procured through the logistics service in the IFRC's zone logistics unit in Kuala Lumpur. In order to expedite delivery and ensure the hygiene items were more suitable for the Afghanistan context, it was decided that hygiene kits would be supplied from stocks available in

Pakistan through the Pakistan Red Crescent Society. However, this course of action was not as straight-forward as anticipated, and the hygiene kits were received in August 2012. The kits were distributed to registered beneficiaries in Sar-e-Pol immediately upon receipt in-country, and a second distribution to Sar-e-Pol beneficiaries was finalised on 5 December 2012. This experience has led to a review of the hygiene kit contents stored in the warehouse in Kuala Lumpur to ensure they are suitable for all context in Asia and Pacific.

Of the 100 male Sar-e-Pol-based volunteers planned for training in household water treatment and safe storage (HHWTSS), 20 received training, and participated in the distribution of water purification tables to 2,500 families in Sar-e-Pol. The trainees were the same CBHFA volunteers that were trained in ECV as referred to in 'emergency health' above. The volunteers conducted one hygiene campaign during this reporting period, and a second campaign was conducted in December 2012. Given that the flooding situation in Sar-e-Pol stabilized more quickly than predicted, the ARCS and IFRC health teams consider that two hygiene campaigns will be sufficient for this operation. The balance of 80 male volunteers for HHWTSS training will be conducted under the general health programme, and will not be charged to the Afghan Flood Operation.

Training has been conducted with 160 female volunteers from Sar-e-Pol province in the utilization of hygiene kits and correct erection and management of mosquito nets. These volunteers were trained by the Mazar-based ARCS female CBHFA trainers prior to the distribution of hygiene kits and mosquito nets, and were actively involved in explaining the uses of the items to female householders of the Sar-e-Pol beneficiary families. These same volunteers participated in the second round of hygiene kit distributions which was concluded on 5 December 2012.

Logistics

IFRC is in the process of delivering replenishment items to Afghanistan. The zone logistics unit (ZLU) in Kuala Lumpur supports, through the procurement and shipping of items and the set-up of a mobilization table, the tracking all in-kind donations and international procurements. This mobilization table is available on DMIS.

All procurement processes are now complete, with the IFRC Afghanistan office awaiting a final consignment of replacement non food items (as per table below), which is currently in Karachi port awaiting clearance by the Pakistani customs authority, before transfer by road to Afghanistan.

Items	Quantities
Blankets	12,940
Jerry cans	4,650
Kitchen set	2,378
Tarpaulins	4,205
Family tent	1,039

Mosquito nets were delivered by air from the IFRC's Global Logistics Centre in Dubai; this was made possible by taking advantage of an air consignment that was pre-arranged for vehicle transportation (not included in the Appeal).

Communications – Advocacy and Public Information

A news story, [Red Crescent responds to devastating floods in northern Afghanistan](#), highlighting the preliminary emergency appeal and the immediate needs and the Red Cross response was drafted and posted on the IFRC website. A second piece, [Surprise downpour causes flash floods in Kabul](#), was posted on the website highlighting the flash floods in Kabul. High quality visual materials were gathered and provided to the global IFRC online gallery, av.ifrc.org to be shared with media, National Societies and partners to highlight the impact of the National Society's efforts. Blog articles written from the field by the IFRC operations coordinator and communications officer were also posted on the IFRC [Our World Your Move](#) blog site and Reuters Alertnet site. The web stories were also cross promoted through the IFRC social media platforms including Facebook, Twitter and Flickr.

An operational review of the flood operations with support from IFRC is now underway, and a review report will be available by 31 December 2012. The review will focus on the effectiveness and efficiency of the operation, and cover areas such as assessments, internal and external coordination mechanisms, distribution planning and management, and programming activities. The aim for this review is to assist ARCS to better streamline its disaster response activities and guide IFRC to help support ARCS to strengthen its disaster response capacity. As part of the review, a survey of 10 per cent of Sar-e-Pol beneficiary families was undertaken and a workshop was held for key IFRC/ARCS stakeholders in October 2012.

Review outcomes will be reflected in ARCS/IFRC disaster preparedness and disaster response programming in 2013.

Contact information

For further information specifically related to this operation please contact:

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How we work

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

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

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The IFRC's work is guided by [Strategy 2020](#) which puts forward three strategic aims:

1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.
 2. Enable healthy and safe living.
 3. Promote social inclusion and a culture of non-violence and peace.
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International Federation of Red Cross and Red Crescent Societies

MDRAF001 - Afghanistan - Floods

Interim Report

Selected Parameters	
Reporting Timeframe	2012/1-2012/10
Budget Timeframe	2012/6-2012/12
Appeal	MDRAF001
Budget	APPROVED

All figures are in Swiss Francs (CHF)

I. Consolidated Response to Appeal

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL
A. Budget	1,017,115					1,017,115
B. Opening Balance	0					0
Income						
Cash contributions						
<i>American Red Cross</i>	48,919					48,919
<i>British Red Cross</i>	37,307					37,307
<i>Danish Red Cross (from Danish Government)</i>	48,396					48,396
<i>Finnish Red Cross</i>	19,237					19,237
<i>Finnish Red Cross (from Finnish Government)</i>	173,136					173,136
<i>Japanese Red Cross Society</i>	39,200					39,200
<i>Swedish Red Cross</i>	284,565					284,565
<i>The Canadian Red Cross Society</i>	46,906					46,906
<i>The Netherlands Red Cross (from Netherlands Government)</i>	180,072					180,072
<i>VERF/WHO Voluntary Emergency Relief</i>	500					500
C1. Cash contributions	878,238					878,238
Inkind Goods & Transport						
<i>British Red Cross</i>	4,040					4,040
C2. Inkind Goods & Transport	4,040					4,040
Other Income						
<i>Programme & Services Support Recover</i>	190					190
C4. Other Income	190					190
C. Total Income = SUM(C1..C4)	882,468					882,468
D. Total Funding = B + C	882,468					882,468
Appeal Coverage	87%					87%

II. Balance of Funds

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL
B. Opening Balance	0					0
C. Income	882,468					882,468
E. Expenditure	-710,454					-710,454
F. Closing Balance = (B + C + E)	172,014					172,014

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III. Budget Analysis / Breakdown of Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination		
A		B					A - B	
BUDGET (C)		1,017,115					1,017,115	
Relief items, Construction, Supplies								
Shelter - Relief	447,135	410,052				410,052	37,083	
Clothing & Textiles	62,033	69,853				69,853	-7,820	
Water, Sanitation & Hygiene	66,740	57,002				57,002	9,738	
Utensils & Tools	58,849	59,771				59,771	-922	
Total Relief items, Construction, Supplies	634,756	596,677				596,677	38,079	
Land, vehicles & equipment								
Computers & Telecom	5,000						5,000	
Total Land, vehicles & equipment	5,000						5,000	
Logistics, Transport & Storage								
Storage	6,000	2,601				2,601	3,399	
Distribution & Monitoring	45,000	14,116				14,116	30,884	
Transport & Vehicles Costs	124,000	1,250				1,250	122,750	
Logistics Services	5,000	31,103				31,103	-26,103	
Total Logistics, Transport & Storage	180,000	49,070				49,070	130,930	
Personnel								
International Staff	12,000	68				68	11,932	
National Staff		457				457	-457	
National Society Staff	4,800	2,240				2,240	2,560	
Volunteers	46,200						46,200	
Total Personnel	63,000	2,764				2,764	60,236	
Consultants & Professional Fees								
Consultants		613				613	-613	
Total Consultants & Professional Fees		613				613	-613	
Workshops & Training								
Workshops & Training	28,000	2,478				2,478	25,522	
Total Workshops & Training	28,000	2,478				2,478	25,522	
General Expenditure								
Travel	30,000	5,154				5,154	24,846	
Information & Public Relations	3,000						3,000	
Office Costs	2,400	1,623				1,623	777	
Communications	3,000	206				206	2,794	
Financial Charges	3,000	6,010				6,010	-3,010	
Other General Expenses	1,700	381				381	1,319	
Shared Office and Services Costs	1,181						1,181	
Total General Expenditure	44,281	13,374				13,374	30,907	
Indirect Costs								
Programme & Services Support Recov	62,077	43,151				43,151	18,927	
Total Indirect Costs	62,077	43,151				43,151	18,927	
Pledge Specific Costs								
Pledge Earmarking Fee		1,627				1,627	-1,627	
Pledge Reporting Fees		700				700	-700	
Total Pledge Specific Costs		2,327				2,327	-2,327	
TOTAL EXPENDITURE (D)	1,017,115	710,454				710,454	306,661	
VARIANCE (C - D)		306,661				306,661		

International Federation of Red Cross and Red Crescent Societies

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IV. Project Details

Project	Name	Opening Balance	Income	Expenditure	Closing Balance	Budget	Variance
		A	B	C	A + B + C	D	D - C
Disaster_Management							
PAF013	Floods	0	882,468	-710,454	172,014	1,017,115	306,661
Sub-Total Disaster_Management		0	882,468	-710,454	172,014	1,017,115	306,661
Total	Afghanistan - Floods	0	882,468	-710,454	172,014	1,017,115	306,661