



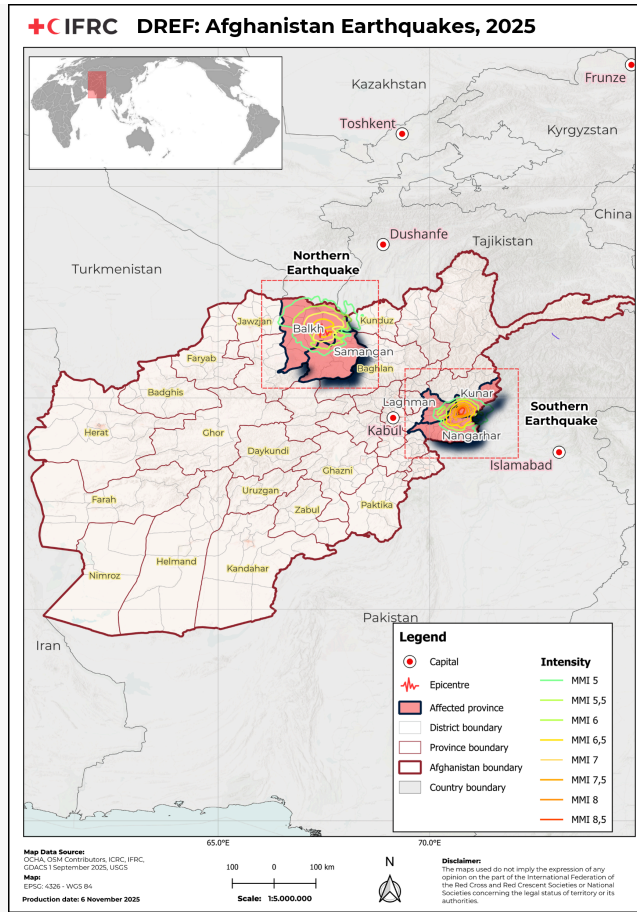
ARCS volunteers interviewing the families in Northern region. (Photo: IFRC)

Appeal: MDRAF019	Hazard: Earthquake	Country: Afghanistan	Type of DREF: Response
Crisis Category: Orange	Event Onset: Sudden	DREF Allocation: CHF 1,000,000	
Glide Number: EQ-2025-000202-AFG	People Affected: 110,000 people	People Targeted: 20,000 people	
Operation Start Date: 13-11-2025	Operation Timeframe: 9 months	Operation End Date: 31-08-2026	DREF Published: 14-11-2025
Targeted Regions: Balkh, Samangan			

Description of the Event

Date of event

03-11-2025



Map of the areas affected by earthquakes in Afghanistan. (Map: IFRC, IM)

What happened, where and when?

On Monday, 3 November 2025 at 00:59 local time, a powerful earthquake measuring magnitude 6.3 struck northern Afghanistan, near the border between Balkh and Samangan provinces at a depth of 28 kilometers. The tremor was felt widely across northern and central Afghanistan and in parts of Uzbekistan and Kazakhstan.

Preliminary reports from the Afghanistan National Disaster Management Authority (ANDMA) indicate that at least 26 people were killed and 1,172 others injured (616 in Balkh and 329 in Samangan). Casualty figures are expected to rise as assessments continue in remote areas. Up to 220,311 people (52% male and 48% female), including 9,129 internally displaced persons (IDPs), 12,032 IDP returnees, and over 16,404 returnees from abroad are in highly vulnerable conditions prior to the earthquake and about 1.53 million experienced strong shaking in the area surrounding the epicenter (IOM).

More than 2,000 houses were damaged alongside damage to health facilities. These figures are expected to rise as assessments continue. A mountain collapse in Tangi Ashburnham valley temporarily blocking the Balkh–Kabul highway due to falling rocks, though the route has since been cleared and reopened.

The earthquake caused widespread panic and damage to homes and community infrastructure across the affected districts. The Provincial Disaster Management Committees (PDMCs) in both Balkh and Samangan convened urgent meetings on the morning of 3 November, deploying joint inter-agency assessment teams to verify the extent of damage and identify immediate humanitarian needs.





People with non food items received from ARCS. (Photo: IFRC)

Scope and Scale

Preliminary reports indicate that at least + 26 people have been killed and more than 1,172 people injured, with an estimated 110,000 individuals directly and indirectly affected. These figures remain provisional and are expected to rise as search and rescue teams reach additional villages.

The recent earthquake in Balkh and Samangan has deeply shaken communities—both physically and emotionally—resulting in notable damage in the districts of Hazrat Sultan, Per Nakhshi and Kulam in Samangan, as well as Marol and Keshenda districts in Balkh province.

The damage to infrastructure has severely hindered access to healthcare, clean water, and basic shelter, leaving thousands exposed to the elements and struggling to meet their daily needs.

The populations most affected are those who were already vulnerable:

- Children, who are now at increased risk of malnutrition and illness
- Women-headed households
- Elderly individuals, many of whom have mobility issues and limited support
- People with disabilities, who face additional barriers in accessing aid
- Pregnant and breastfeeding women, who require specialized care

Many of these families reside in remote areas where roads are damaged or blocked, making it difficult to deliver assistance swiftly. The arrival of cold weather has placed these affected families at risk of exposure to freezing conditions. In previous earthquakes, similar regions experienced long-term disruptions to livelihoods, education, and health services, particularly when recovery efforts were delayed or under-resourced.

Source Name	Source Link
1. Relief Web	https://reliefweb.int/country/afg

Previous Operations

Has a similar event affected the same area(s) in the last 3 years?	No
Did it affect the same population group?	-
Did the National Society respond?	-
Did the National Society request funding form DREF for that event(s)	-
If yes, please specify which operation	-

If you have answered yes to all questions above, justify why the use of DREF for a recurrent event, or how this event should not be considered recurrent:

-

Lessons learned:

The ongoing response to the earthquake in eastern Afghanistan has heightened several key Lessons including the importance of integrated assistance particularly in shelter, health, wash, livelihood and food security. ARCS continues to learn lessons from this response which will be applied to the northern operations. Along with this, the Herat earthquake response emphasized the need for rapid coordination and strong local capacity amid severe winter, damaged roads, and overlapping crises that delayed aid. Conditional cash and transitional shelters proved effective but were slowed by financial service delays. Collaboration with authorities improved targeting, while training local masons promoted safer construction. Women’s participation grew through female volunteers, showing the importance of early gender planning and inclusive engagement.

Did you complete the Child Safeguarding Risk Analysis in previous operations, what was risk level?	No
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IFRC Network Actions Related To The Current Event

Secretariat	The IFRC immediately released CHF 100,000 from the DREF to support the Afghan Red Crescent Society’s rapid response. An IFRC rapid assessment team was deployed to assist ARCS in evaluating urgent needs, while non-food items for 500 households were dispatched and 10,000 households will receive multipurpose cash assistance. The ARCS and IFRC supply chain teams are ensuring the timely delivery of pre-positioned stocks and relief supplies—including trauma kits, tents, jerry cans, kitchen sets, blankets, and tarpaulins—to the affected provinces. Additional support is being provided in scenario planning, resource mobilization, coordination, and inter-agency engagement, and a situation report has been published on the GO platform.
Participating National Societies	ARCS convened the first Emergency Operations Center (EOC) meeting on the 3 November 2025 bringing together all Movement partners present in-country to ensure effective coordination, technical alignment, and collective support to ARCS’ response reports. The IFRC, ICRC, Danish Red Cross, Norwegian Red Cross, Qatar Red Crescent, and Turkish Red Crescent - are supporting the ARCS, as per their area of expertise and available capacity, with technical, financial and in-kind support.

ICRC Actions Related To The Current Event

The ICRC participated in the ARCS Task Force meeting on 3 November 2025 and committed an immediate financial contribution for ARCS as an operation cost to the ARCS staff and volunteers. On the same day of the earthquake, the ICRC provided direct Health support to Mazar Regional Hospital (56 boxes of WW25), Samangan Provincial Hospital (3 IVPs, 3 DPs and 2 Ops) and Kunduz Regional Hospital (1 DP, 1 OP, 1 IVP). Additionally, the ICRC supported ARCS in implementing the Safer Access Framework to ensure safe and



effective operations in the affected areas. The ARCS RFL and MoTD teams have also received technical support during the assessment phase.

Other Actors Actions Related To The Current Event

Government has requested international assistance	Yes
National authorities	ARCS is coordinating closely with national and local authorities as auxiliary to the authorities.
UN or other actors	<p>Following the recent earthquake in Balkh and Samangan provinces, UN agencies and humanitarian partners rapidly scaled up their response to support affected communities, working together in a coordinated approach to ensure resources are used efficiently and reach those most in need. OCHA is leading the emergency coordination on behalf of humanitarian partners, convening a joint Operational Coordination Team (OCT) meeting on the morning of 3 November 2025 with relevant partners from Balkh and Samangan provinces to assess the situation, map response capacity, and identify immediate priorities. An ad-hoc meeting of the Kabul-based Inter Cluster Coordination Team has also taken place to support broader response and recovery efforts, with the Humanitarian Country Team meeting scheduled for 4 November 2025.</p> <p>As part of the immediate relief interventions, UNICEF and partners have deployed health teams to affected areas to support trauma care and scale up essential services, including primary healthcare, mental health support, and psychosocial counselling. UNICEF WASH extenders and social mobilizers are also on the ground, conducting assessments and initiating the immediate response.</p>

Are there major coordination mechanism in place?

IFRC is closely coordinating with the various cluster members at national and sub-regional levels to ensure a coordinated approach to avoid duplication, ensuring meeting people's needs in a timely manner. At the national level, the Humanitarian Country Team (HCT) serves as a strategic, policy-level, and decision-making forum guiding principled humanitarian action in Afghanistan, with the IFRC attending weekly as a representative of the membership. Both ARCS and IFRC participate in monthly coordination meetings of sectoral clusters and working groups, including the Food Security and Agriculture Cluster, Cash and Voucher Working Group, Emergency Shelter and Non-Food Items (ES-NFI) Cluster, Accountability to Affected Populations Working Group, Health Cluster, WASH Cluster, and Gender in Humanitarian Action Working Group, while IFRC also attends the Inter-Cluster Coordination Team meetings.

The cluster system, coordinated nationally by lead agencies such as OCHA, carries roles and responsibilities of all partners, including NGOs, UN agencies, public authorities, and other stakeholders. At the national level, ARCS participates in sector-specific coordination, health, and WASH cluster meetings co-chaired by the Ministry of Public Health and WHO. IFRC maintains close coordination with cluster members at both national and sub-regional levels to ensure a harmonized approach that avoids duplication and meets affected people's needs in a timely and efficient manner.

Needs (Gaps) Identified



Shelter Housing And Settlements

Following the northern region earthquake, extensive destruction in Balkh and Samangan provinces, where many houses were destroyed and many more damaged. Preliminary assessments indicate that more than 2,000 houses have been completely destroyed and many others partially damaged, affecting an estimated 14,000 people, including women (49%), children under five (15%), the elderly (4%), and persons with disabilities (15–20%). In mountainous areas such as Tangi village, landslides triggered by the earthquake have further endangered entire settlements and severely restricted access to affected locations, posing significant challenges for the delivery of humanitarian assistance. Many households have lost essential household items, including bedding, kitchen utensils, and warm clothing, leaving them increasingly exposed to cold temperatures and health risks. With temperatures dropping each day and winter approaching rapidly, the situation is becoming more critical, heightening the urgency for timely shelter and winterization support to protect vulnerable families from further hardship.



The key gaps include the urgent need for emergency shelter and NFIs, rapid damage assessments, and technical support for safe shelter awareness including safer construction practices, identification of no-build zones, and risk mitigation measures to reduce vulnerability to landslides and aftershocks. Many households are living in makeshift structures or staying with relatives, which is unsustainable. Limited availability of local materials, poor construction practices, and settlement-level risks (landslide and ground instability) further constrain safe recovery. Coordination and data gaps persist, requiring strengthened ARCS-led assessments and community-based response.

The ES-NFI Cluster has identified emergency shelter (tents and tarpaulins), essential NFIs, winter assistance, and minor shelter repairs as the top priorities to meet the urgent needs of affected households. Many families remain without adequate protection against cold weather and are living in temporary or damaged structures.



Livelihoods And Basic Needs

Following the recent earthquake in Balkh and Samangan provinces, affected families are facing critical food insecurity, requiring immediate humanitarian assistance. The scale of need has overwhelmed existing response capacities, prompting local authorities and humanitarian partners to call for additional support. While emergency food aid is urgently needed, the lack of long-term food security and livelihood support poses serious challenges to recovery and resilience in these provinces. Vulnerable groups—including children, pregnant and lactating women and the elderly—are at heightened risk of malnutrition due to limited access to nutritious food. Without sustainable livelihood options, many families remain dependent on short-term aid, unable to rebuild their lives or contribute meaningfully to their communities. The absence of detailed assessments and direct engagement with affected populations further limits the effectiveness of food and livelihood interventions. To address these challenges, the response must prioritize scaling up emergency food assistance, ensuring the availability of ready-to-eat meals and food packages in affected areas. At the same time, comprehensive needs assessments are essential to guide tailored, context specific interventions. A multi-sectoral approach, including skills training, cash assistance and agricultural support will be key to promoting self-reliance and enabling families to recover with dignity and stability.

According to the Rapid Needs Assessment report, the majority of the population relies on agriculture, livestock, kitchen gardening, and small business enterprises for their livelihoods. The earthquake severely affected these communities, disrupting their main sources of income and threatening their overall economic stability and the winter is already there.



Health

Balkh province is facing a critical health emergency following the earthquake that happened on 3 November 2025, which has severely affected healthcare infrastructure and displaced hundreds of families. Continued support is urgently needed to support Balkh Regional Hospital, Samangan Provincial Hospital, and Khulm District Hospital to manage the high influx of injured patients. These facilities require additional medical supplies, emergency personnel, and logistical support to sustain life-saving services.

Primary Health Needs

The health system in Balkh remains underfunded and fragile, characterized by shortages of medical facilities, supplies, and trained staff - particularly female healthcare workers. These systemic weaknesses have been compounded by a high number of injuries caused by the recent earthquake. Major primary health needs and challenges include.

- **Poor access to health care:** Large portions of the rural population lack access to basic healthcare due to damaged infrastructure because of the earthquake, and closure of facilities following funding cuts since 2024. There is need to strengthen the referral system.
- **Lack of maternal and child health services:** There is a critical shortage of maternal and reproductive health services. Many women rely on untrained traditional midwives, contributing to high maternal and neonatal mortality rates.
- **Potential disease Outbreaks:** The province remains highly vulnerable to AWD, measles, ARI, and polio outbreaks due to poor immunization coverage and inadequate WASH infrastructure.
- **Staff, drugs and equipment Shortages:** Health facilities face acute shortages of qualified staff, especially female specialists, as well as essential equipment and medicines, reducing the quality of care.

To address the needs, there is urgent need for immediate and long-term funding, particularly to support existing health facilities and mobile health teams to provide life-saving interventions to victims of the earthquake. Deployment of Mobile Health Teams (MHTs) to reach remote and underserved communities remains critical. Provision of medical supplies, equipment, and rehabilitation or reconstruction of key health facilities in affected districts is a major concern too. Additionally, there is need to strengthen specialized care, particularly trauma care for injuries caused by the earthquake.

Two ARCS Mobile Health Teams (MHTs), supported by the Norwegian Red Cross are deployed in Balkh and Samangan to deliver primary health care to earthquake-affected populations. These teams operate from vehicles, enabling mobility across targeted communities based



on assessed needs. Cases that require high level clinical interventions will be referred to secondary and tertiary health care providers – Balkh and Samangan Provincial Hospitals. Highly complex referral cases (surgical cases including severe wounded cases, infectious and internal disease cases which need inpatient services) will be referred to the nearest higher level health facility. In line with the referral structure and mechanism, ARCS health teams, Regional Health Officers (RHOs) and head of branches have linkage and coordination with the field Provincial Public Health Directorates (PPHDs), Basic Package Health Services (BPHS) implementer organizations including their health facilities for management of the referral cases.

The 2 MHTs will deliver routine immunization services in alignment with the Ministry of Public Health (MoPH) guidelines. The Expanded Program on Immunization (EPI) will target children under five years of age, with one vaccinator assigned to each team. Additionally, awareness-raising activities on vaccination will be conducted, focusing on women of childbearing age (CBA) who will receive tetanus vaccination, complemented by health promotion and education sessions on the benefits of immunization.

While providing first aid and trauma care, medical personnel and volunteers will assess and identify critically ill or injured patients and ensure their safe referral to higher-level or specialized healthcare facilities.



Water, Sanitation And Hygiene

The WASH infrastructure in the affected communities of Balkh and Samangan provinces has been severely damaged, leaving thousands of families in highly vulnerable situations. The devastating earthquake has destroyed many water sources, and people have been disconnected from their drinking water sources, forcing them to drink unsafe water. Household latrines have collapsed and become non-functional, pulling people to practice open defecation, which increases the risk of disease outbreaks.

As the houses of affected people were damaged, they furthermore lost all their necessary hygiene items. Menstruating women and girls have lost their hygiene products and basic hygiene items like soap. The lack of safe water, sanitation and hygiene materials poses a serious public health concern, making it urgent to restore the WASH facilities to prevent the spread of diseases and protect the dignity and safety of women, girls and other vulnerable groups.

In such conditions, the immediate priority is to provide safe drinking water and install sanitation facilities – rapid latrine installation and repair of old latrines- for the displaced and community people. To prevent the spread of waterborne and faecal-borne diseases, hygiene promotion activities should be implemented alongside the provision of hardware support. This includes the distribution of essential hygiene kits and menstrual hygiene management kits to ensure the health, dignity, and well-being of the affected communities, particularly women and girls. Volunteers need to be trained on hygiene promotion to conduct hygiene awareness among the affected population.



Protection, Gender And Inclusion

Aligned with the IFRC Minimum Standards on Protection, Gender and Inclusion (PGI) in Emergencies and the Movement's commitments to Community Engagement and Accountability (CEA), the revised operation aims protection and inclusion services across earthquake-affected areas. These efforts aim to mitigate risks such as gender-based violence, family separation, human trafficking, child labour, abuse, and barriers to essential services, ensuring dignity, safety, and equitable access, particularly for the most vulnerable.

Female ARCS volunteers have been deployed to support assessments, deliver essential health services, and respond to the urgent needs of their communities. Their engagement ensures that the voices and priorities of women, children, and other vulnerable groups meaningfully inform the operational strategy. They also play a key role in facilitating access to care, support, and information, helping to uphold protection and inclusion throughout the response and recovery phases. Identified protection concerns need to be referred to case management actors through a safe referral pathway, supported by strengthened monitoring and reporting mechanisms.



Community Engagement And Accountability

Earthquake affected families are in need of timely and reliable information about available assistance, registration procedures, and eligibility criteria for support planned. In several remote villages, limited network coverage and disrupted communication channels have made it difficult for people to raise concerns or receive updates about relief activities. There is also a lack of accessible feedback mechanisms in the affected areas, especially for women, elderly people, and persons with disabilities who may not feel comfortable approaching male staff or public offices.

Moreover, communities lack clear, consistent messaging on health, hygiene, and psychosocial support to prevent misinformation and



confusion. These gaps underline the importance of strengthening community engagement approaches and ensuring that affected people are receive timely information on available assistance and meaningful involvement in the response planning and monitoring processes.



Environment Sustainability

Emergency response activities, including shelter provision and distribution of NFIs and winterization support, create environmental pressures such as solid waste accumulation, unsustainable use of natural resources, and risks to fragile land. These challenges can increase health hazards and compromise recovery if not managed properly. Key needs include proper waste collection and disposal, promoting community awareness of hygiene and clean -site practices, and using locally available, durable and environmentally friendly materials. Shelter siting must avoid no-build zones and landslide-prone areas, and all interventions should align with local environmental regulations and disaster risk reduction guidelines. Addressing these issues ensures that humanitarian assistance protects both the well-being of affected families and the environment, supporting sustainable and dignified recovery.

Any identified gaps/limitations in the assessment

ARCS and IFRC have carried out rapid needs assessments and launched emergency relief efforts across northern region in Balkh and Samangan provinces. These assessments were done in close coordination with ANDMA, PMDCs, and other humanitarian partners. Alongside ARCS's field reports, secondary data were drawn, situation updates from OCHA, and media coverage to shape a clear picture of what communities need most.

Needs & Gaps.

Emergency shelter: is the most urgent priority. Many families have lost their homes entirely or are living in unsafe, damaged structures. With winter approaching fast, there's a real need for tents, tarpaulins, and proper guidance on how to install and insulate them. The forecasted snowfall in these affected provinces/ region makes this even more critical.

Food: is also a pressing need. Many households lost their food stocks when their homes collapsed, and others are staying with host families or outdoors, unable to earn income. While ARCS has plan to distribute food using its own and partner resources, food support is being managed separately from this plan.

Non-food items (NFIs): like hygiene kits, family tents, blanket, cooking sets, and bedding are essential. People need basic supplies to get through the coming weeks, especially as supply chains are disrupted and winter conditions threaten to cut access to markets.

Winter clothing: is another key need. Women and children are especially vulnerable to cold-related illnesses. ARCS/IFRC is planning to distribute winter kits like jackets for children, shawls for women, and patus (traditional wool wraps) for men to help protect against the cold.

Psychosocial support: is vital, especially for children who have experienced trauma. IFRC is also prioritizing support for ARCS staff and volunteers working in remote and high-risk areas under intense pressure.

Risks & Challenges: The situation is complex. These provinces face not only natural hazards but also security risks from armed groups. While some actors have expressed neutrality toward humanitarian workers, recent incidents reminds that safety can't be taken for granted. Security assessments are essential before any distributions take place. With heavy snow expected, delays could grow—and that risks losing community trust. IFRC/ARCS need to act fast and responsibly.

Target beneficiaries: ARCS is focusing on the most vulnerable households including those who have not received enough support from other sources. This includes families who lost loved ones or have injured members, people displaced and living in tents or with host families.

[Assessment Report](#)

Operational Strategy

Overall objective of the operation

To address the immediate humanitarian needs of 20,000 people affected by the earthquake in Balkh and Samangan provinces by providing life-saving assistance and supporting community resilience. The operation will ensure access to safe drinking water, emergency shelter, essential household items, and hygiene kits, including menstrual hygiene management kits, alongside hygiene promotion and



latrine rehabilitation. The interventions will also deliver one-time multipurpose cash assistance to 2,500 households to meet urgent needs such as food and medication. Additionally, the response will strengthen community engagement and accountability (CEA) through clear, consistent communication, inclusive feedback mechanisms, and active involvement of vulnerable groups, ensuring transparency and trust throughout the operation.

Operation strategy rationale

This operation is part of the overall Operational Strategy under the Earthquake Emergency Appeal, which has been launched to address humanitarian needs in the aftermath of the recent earthquakes. The activities supported by the DREF will complement and reinforce the broader Emergency Appeal, ensuring a coordinated and phased approach that addresses both immediate life-saving needs and longer-term recovery priorities.

The strategy focuses on delivering comprehensive assistance to 20,000 people affected in Balkh and Samangan provinces. It combines emergency shelter, essential household items, WASH interventions, health services, and multipurpose cash assistance with strong community engagement. Psychosocial support (MHPSS) will be integrated within the broader health interventions outlined in the revised Operational Strategy, ensuring a holistic approach to health and well-being.

Urgent needs identified through rapid assessments include emergency shelter for displaced families, access to safe drinking water and sanitation facilities, hygiene kits (including menstrual hygiene management kits), and hygiene promotion sessions. Health-related priorities include Community-Based Health and First Aid (CBHFA) and other essential health services. Multipurpose cash assistance will enable households to meet essential needs such as food and medication, while hot meals and drinking water will address immediate sustenance requirements.

The main priorities including life-saving support, WASH and health services, cash assistance, and community engagement were chosen based on the severity of the impact, harsh winter conditions, and lessons learned from previous operations. These priorities directly address the most pressing gaps and align with the Red Cross and Red Crescent Movement's commitment to dignity, resilience, and inclusion. Community engagement and accountability (CEA) will be central to the strategy, ensuring that aid is relevant, transparent, and responsive to feedback.

Operation methods include mobilizing ARCS volunteers and leveraging established community networks to deliver assistance efficiently and build trust. Key actions involve distributing emergency shelter materials and household items, rehabilitating latrines, conducting hygiene promotion and CBHFA sessions, and delivering one-time multipurpose cash grants to 2,500 households. CEA activities such as community meetings, feedback mechanisms, and inclusive communication channels will ensure accountability and responsiveness. These methods were selected for their effectiveness in addressing immediate needs while fostering community ownership.

Several factors influenced the strategy, including harsh winter conditions and difficult terrain requiring flexible delivery mechanisms, the need for community engagement to foster transparency and trust, and lessons learned from past operations emphasizing timely registration and effective communication. Coordination with local authorities and humanitarian partners is critical to avoid duplication and ensure harmonized response efforts.

While the DREF operation addresses immediate life-saving needs, the Earthquake Emergency Appeal will scale up efforts for longer-term recovery in Balkh, Samangan, Kunar, Laghman, and Nangarhar provinces. This includes livelihood and basic needs support, shelter and household items, WASH in emergencies, community health and health emergency activities (including MHPSS), and multipurpose cash assistance. With adequate funding, these efforts will help communities recover with dignity and resilience.

Targeting Strategy

Who will be targeted through this operation?

Since the earthquake struck Balkh and Samangan provinces, many families have been displaced and urgently need support, particularly pregnant women, mothers with young children, elderly individuals with mobility challenges, and those living with disabilities or injuries.

Up to 220,311 people (52% male and 48% female), including 9,129 internally displaced persons (IDPs), 12,032 IDP returnees, and over 16,404 returnees from abroad are in highly vulnerable conditions prior to the earthquake and about 1.53 million experienced strong shaking in the area surrounding the epicenter. Additionally, an estimated 2,000 households in these provinces have experienced complete or partial destruction of their shelters and lost their livelihoods, including agricultural land and livestock.

The ARCS aims to reach 20,000 of the most affected individuals from this devastating earthquake. This response is being prioritized in the affected provinces to ensure that the most vulnerable are not left behind. Services will include primary healthcare, medical kits,



temporary shelters/tents, clean water and sanitation, hot meals, non-food items (NFIs), cash assistance for rent, and winter kits. The goal is to ensure that everyone, regardless of age, health, or ability, receives the support they need to recover with dignity and feel safe during this challenging time.

Explain the selection criteria for the targeted population

When responding to the recent earthquake in Balkh and Samangan provinces, ARCS will make sure that support reaches those who need it most. The communities and humanitarian teams typically identify and prioritize people for assistance:

- Families whose homes were destroyed or badly damaged.
- Pregnant women, breastfeeding mothers, and young children.
- Elderly people and those with disabilities.
- People with injuries or chronic illnesses.
- Families with no income or support system.

Local volunteers, elders, and community leaders would help to verify who needs what, making sure the process is fair and transparent. ARCS would ensure that no one is left behind, covering the most vulnerable group of communities.

Total Targeted Population

Women	5,300	Rural	-
Girls (under 18)	5,000	Urban	-
Men	4,900	People with disabilities (estimated)	4%
Boys (under 18)	4,800		
Total targeted population	20,000		

Risk and Security Considerations (including "management")

Does your National Society have anti-fraud and corruption policy?	Yes
Does your National Society have prevention of sexual exploitation and abuse policy?	Yes
Does your National Society have child protection/child safeguarding policy?	Yes
Does your National Society have whistleblower protection policy?	Yes
Does your National Society have anti-sexual harassment policy?	Yes

Please analyse and indicate potential risks for this operation, its root causes and mitigation actions.

Risk	Mitigation action
Occurrence of aftershocks	Conduct assessments of buildings or locations where operations will be conducted. Risk of deployed volunteers and staff members that were engaged in distribution and community work, because of aftershocks. Proactive security measures are in place, and team leaders are aware of the mitigating measures to be taken to avoid such risks.



Harsh weather conditions.	Timely prepositioning of materials and project planning.
Border closure between Pakistan and Afghanistan due to security issues may delay international shipments and replenishment of shelter stocks.	As sufficient stock is currently available in-country, replenishment can be deferred temporarily. If border closures persist and international transport routes remain disrupted, procurement will be shifted to local or regional markets to ensure continuity of shelter response without significant delay.
Access to the affected communities and delivery of assistance (cracked roads, debris, damaged infrastructure)	<p>Duty of care as a priority – mitigating and avoiding any risks caused by immediate danger from damaged infrastructure to volunteers and staff who are frontliners. Considering the significant earthquake-related hazards in the Balkh and Samangan, including disrupted road access, landslides, and potential aftershocks, and the heightened security risks stemming from criminality and insurgent activity, comprehensive measures will be implemented to ensure the safety and security of all RCRC personnel engaged in the operation.</p> <p>These measures include but are not limited to continuous monitoring of the situation, timely security and safety updates, tracking of staff movements (via phone or WhatsApp), security assessments in operational areas, and pre-deployment safety briefings on the current security environment.</p> <p>Contingency plans and completion of relevant IFRC e-learning courses (e.g., Basic Knowledge and Prevention Measures for Responders, Personal Security, Security Management, Volunteer Security) are mandatory. The IFRC CD security team maintains close coordination with external humanitarian actors in the country, particularly regarding the earthquake-affected areas, and collaborates closely with ARCS branches and local administrations in the operational regions.</p>

Please indicate any security and safety concerns for this operation:

Considering the recent earthquake in Balkh and Samangan provinces, and the associated risks such as damaged infrastructure, landslides, and potential aftershocks, ARCS will prioritize the safety and security of all Red Cross and Red Crescent personnel engaged in the response.

To this end, a series of precautionary and operational measures are being implemented, including:

- Continuous monitoring of the evolving situation
- Timely dissemination of safety and security updates
- Tracking of staff movements via mobile communication tools
- Security assessments in all operational areas
- Pre-deployment safety briefings tailored to the current context

In addition, completion of relevant IFRC e-learning modules—such as Basic Knowledge and Prevention Measures for Responders, Personal Security, Security Management, and Volunteer Security is mandatory for all personnel involved. The IFRC Country Delegation security team is maintaining close coordination with external humanitarian actors and working collaboratively with ARCS branches and local authorities in the affected regions to ensure a harmonized and secure operational environment. These efforts reflect shared commitment to safeguarding teams while delivering timely and effective humanitarian assistance to those most in need.

Has the child safeguarding risk analysis assessment been completed?

No



Planned Intervention



Shelter Housing And Settlements

Budget: CHF 392,000

Targeted Persons: 9,275

Indicators

Title	Target
# of households received winterization kits	1,500
# of families received non food items	500
# of targeted households reached with orientation on safer construction, no-build zones, and landslide risk mitigation.	1,325

Priority Actions

1. Needs identification and beneficiary verification to confirm affected and most vulnerable households.
2. Procurement and distribution of winterization kits (including warm clothing such as coats, sweaters, socks, shoes, shawls, gloves, and caps for adults and children, along with carrying bags - designed to help families cope with the cold season) and NFIs (including 1 tent, 2 tarpaulins, 2 jerrycans, 1 kitchen set, and 7 high-thermal blankets) in coordination with the ES-NFI Cluster and other stakeholders.
3. Volunteer mobilization for relief delivery and community engagement activities.
4. Orientation on safe shelter awareness, including key messages on no-build zones and safer construction practices.
5. Post-distribution monitoring (PDM) and community feedback to ensure relevance and accountability.



Multi Purpose Cash

Budget: CHF 335,000

Targeted Persons: 17,500

Indicators

Title	Target
# of households provided with multi-purpose cash	2,500
% of households surveyed reported that the cash provided was sufficient to cover their most important needs	60
% of people surveyed reporting that satisfaction with the cash distribution process	80
# of post distribution monitoring conducted	1

Priority Actions

1. Support households with the cash grants to cover their basic needs, such as food items, medication and basic household needs.
2. Provide one-time multipurpose cash assistance of AFN 10500 (CHF 170) to each of 2,500 households to meet their essential emergency
3. Conduct exit survey to capture feedback from the recipients at distribution points for improving the ongoing distribution.
4. Conduct post distribution monitoring to assess to what extent the cash was used for the indented purposes and identify gaps to inform future operations.



5. Carry out assessments in the affected areas
6. Register target households for MPCA in Red Rose



Budget: CHF 24,500
Targeted Persons: 1,800

Indicators

Title	Target
# of CBHFA and Health Promotion training conducted	2
# of CBHFA volunteers mobilized and trained	100
# of first aid and community awareness session conducted	100

Priority Actions

1. Provide the CBHFA and Health Promotion training to ARCS staff and volunteers.
2. Conduct first aid and community awareness session.
3. Organize field visit for health related activities



Budget: CHF 67,500
Targeted Persons: 5,000

Indicators

Title	Target
# of WASH assessments conducted	2
# of people reached for improved water sources in emergencies	2,500
# of family hygiene kits distributed	1,000
# of MHM kits distributed	1,000
# of women reached by MHM awareness sessions	1,000

Priority Actions

1. Conduct a technical assessment for WASH to prioritize the activities
2. Mobilize volunteers and distribute safe drinking water (bottled water or water trucking) among the affected people
3. Installation of rapid latrines or rehabilitation of community latrines through cash grant
4. Procurement and distribution of essential hygiene kits and menstrual hygiene management kits
5. Provide hygiene promotion training to the volunteers and conduct sessions among the affected communities to reduce the risk of water and faecalis-borne diseases





Protection, Gender And Inclusion

Budget: CHF 10,000

Targeted Persons: 80

Indicators

Title	Target
# of female volunteers mobilized and trained in PGI minimum standards, safeguarding, and sensitive feedback mechanisms.	40
# of staff trained on PGI minimum standards and the PGI checklist for emergency response.	40

Priority Actions

1. Train staff and volunteers on a) PGI sensitive assessment, b) PGI mainstreaming, under technical sectors and c) sex and age disaggregated data (SADD) collection.
2. Mobilize female volunteers and enhance their capacity
3. Design, print, and distribute IEC materials
4. Capacity building training on PGI minimum standards and sensitive feedback, for male and female staff
5. Conduct coordination meetings with PNS and ARCS relevant department.



Community Engagement And Accountability

Budget: CHF 11,500

Targeted Persons: 100

Indicators

Title	Target
# of staff and volunteers trained on community engagement and accountability (CEA)	100
# of feedback channels established	4
% of individuals who report they received sufficient, timely, and understandable information about the assistance they receive	80
# of feedback and complaints recorded, acknowledged and addressed within a set timeframe	70

Priority Actions

1. Provide clear, consistent information in local languages through multiple channels (community meetings, radio, posters).
2. Establish continuous dialogue with communities and address misinformation promptly.
3. Set up accessible feedback options (help desks, suggestion boxes, community visit).
4. Track, respond to, and close feedback cases in a timely and transparent manner.
5. Engage women, people with disabilities, and other vulnerable groups through tailored approaches and safe spaces.
6. Involve community leaders and volunteers to ensure inclusive decision-making and trust.
7. Train staff and volunteers on CEA principles, communication skills, and feedback handling.
8. Assign CEA focal points within operations to ensure consistent implementation.
9. Regularly analyze feedback to identify key trends and inform decisions.



10. Share feedback with communities to maintain transparency and accountability.
11. Provide consistent messaging and share tools among ARCS, IFRC, ICRC, and partner societies.
12. Align CEA actions with national and inter-agency coordination structures for a harmonized approach.



Coordination And Partnerships

Budget: CHF 18,000

Targeted Persons: -

Indicators

Title	Target
# of movement coordination meeting conducted	4
# of HD meeting conducted	2
#of partnership meeting conducted and participated	2

Priority Actions

1. Conduct the movement coordination meetings.
2. Conduct and organize the HD meetings.
3. Participate in the partnership meetings.



Secretariat Services

Budget: CHF 24,000

Targeted Persons: -

Indicators

Title	Target
% of financial reporting compliance to IFRC procedures	100
# of monitoring visits conducted	4

Priority Actions

1. Provide technical and management support for the operation
2. Provide membership services, including security, reporting, procurement, communication, and resource mobilization.
3. Conduct monitoring visits for all intervention to understand the perception of beneficiaries and the quality of the services we deliver.



National Society Strengthening

Budget: CHF 56,467

Targeted Persons: 300



Indicators

Title	Target
# of volunteers recruited and mobilized	300
# of lesson learned workshop conducted	1
# of Contingency Plans updated/ revised	2
# of warehousing operations optimized	2
# of Standard Operating Procedures (Manuals) developed	2
Guideline to guide engagement of human resources (staff & volunteers) developed.	1

Priority Actions

1. Strengthen logistics and warehousing capacity at regional and branch levels.
2. Support the digitalization of operations at the regional and branch levels for efficiency and overall accountability.
3. Conduct trainings in emergency needs assessments for staff and volunteers.
4. Update/revise contingency plans to guide preparedness and response actions at the regional and provincial/ branch levels.
5. Develop standard operating procedures to ensure standardization of response processes at the branch level.
6. Provide support for the expansion of volunteer capacity and integration in response operations.
7. Strengthen interorganizational coordination mechanisms
8. Support the incorporation of duty of care considerations into the operations for staff and volunteers.

About Support Services

How many staff and volunteers will be involved in this operation. Briefly describe their role.

In response to the recent earthquake in Balkh and Samangan provinces, 15 ARCS staff and volunteers will be partially supported under the IFRC-DREF operation, with a system in place to ensure proper time allocation. These staff members will be drawn from the affected provinces and operational areas, including four staff per branch (totaling sixteen), four from relevant regional office, and one roving staff member from headquarters. The core team formed will be responsible for activating and operationalizing the lifesaving activities in the earthquake-affected areas. The team includes specialists such as PSS counselors, RFL officers, volunteer management officers, safety and security officers, and DRR officer, ensuring a multi-sectoral and rapid response. There are existing technical resources to support this operation. These include the IFRC operations manager, disaster management coordinator, PMER staff, CEA staff, senior emergency cash officer, two information management officer, PGI officer, senior monitoring, evaluation and learning officer, all backed by Programme support services.

On the ground, ARCS has mobilized three Branch Disaster Response Teams (BDRTs), each with around 20 active volunteers to support relief efforts in the affected provinces. Furthermore, four ARCS Mobile Health Teams (MHTs) are actively providing essential health services to displaced families and communities in temporary shelters. This coordinated response aims to ensure timely, inclusive, and effective support to those most impacted by the earthquake.

Does your volunteer team reflect the gender, age, and cultural diversity of the people you're helping? What gaps exist in your volunteer team's gender, age, or cultural diversity, and how are you addressing them to ensure inclusive and appropriate support?

In ARCS ongoing response to the earthquake in Balkh and Samangan provinces, ARCS made a conscious effort to ensure that the volunteer teams reflect the gender, age, and cultural diversity of the communities. Many volunteers are from the affected areas themselves, which helps build trust and ensures that ARCS assistance is both locally informed and culturally appropriate.



There are still gaps in representation, particularly in the active participation of women, youth, and persons with disabilities. These gaps can limit ARCS ability to fully understand and respond to the unique needs of certain groups, especially those who are most vulnerable in post-disaster settings.

To address this, ARCS is:

- Actively recruiting and empowering female volunteers, including in leadership and decision-making roles
- Engaging youth to support outreach, community engagement, and psychosocial support activities
- Collaborating with local organizations to improve the inclusion of people with disabilities in volunteer efforts
- Providing training and orientation to all volunteers on inclusive practices and respectful engagement with diverse communities

By strengthening the diversity of the volunteer teams, ARCS aims to deliver support that is not only effective but also inclusive, dignified, and responsive to the real needs of the people affected.

If there is procurement, will it be done by National Society or IFRC?

All procurements are handled by IFRC. Food and other supplies available locally will be procured in the country, while nonfood items will be imported and procurement of them will be done by IFRC Asia Pacific regional office. Non-food items comprise of family tents, blanket, tarpaulin, jerrycan and kitchen sets which will pose some challenges in the supply chain to be procured within the required timeframe. Recognizing the challenges, the CD Logs and APRO is working on several options.

How will this operation be monitored?

The ARCS leadership with IFRC Head of Delegation will be accountable for the timely implementation, compliance, financial management and required reporting of the operation. This will be undertaken with the technical and managerial support of the Operations Manager. The ARCS Operations Team, in close coordination with the IFRC, will be responsible for monitoring and oversight of activities at the operational level.

The ARCS and IFRC PMER, IM and CEA teams will provide technical support to the Operations Team in the development of a Monitoring and Evaluation (M&E) plan, ensuring that feedback from affected populations is systematically collected and integrated into program delivery. The participatory planning approach will be carried out from the planning phase. M&E activities will be implemented in accordance with the established plan to ensure continuous performance, tracking and accountability. Regular and systematic monitoring visits will be carried out by IFRC and ARCS HQ, as well as at the local level.

IFRC will support ARCS on summarizing progress, challenges, and lessons learned including a monitoring plan, implementation plan and indicator tracking table to document the collection and analysis of key performance indicators. Similarly, timely situation report dissemination along with monthly reports and a final report will be done. Progress updates will be regularly shared with the IFRC Asia Pacific Regional Office (APRO) to ensure regional coordination and oversight. After the implementation of the operation, PDM and an exit survey will be conducted.

At the conclusion of the operation, a Lessons Learned Workshop will be conducted to review operational performance, capture key insights, and document findings to inform ongoing emergency appeal (MDRAF019) emergency response and recovery interventions.

Please briefly explain the National Societies communication strategy for this operation

The IFRC will support the ARCS Communications Team in engaging with external audiences, focusing on the humanitarian situation and the Red Cross and Red Crescent response efforts to assist affected communities. Communication activities will aim to enhance visibility, raise awareness of humanitarian needs, and generate public and partner support for the ongoing response. ARCS and IFRC will maintain the visibility while working on the ground with visibility materials and required IEC materials. ARCS will collect testimonials/stories from the field by volunteers or IFRC staff from the site. IFRC and ARCS communications focal will support staff and volunteers for the coverage and use the materials for internal and external communications.

Close coordination will be maintained between the ARCS, the IFRC Country Delegation, and the IFRC Asia Pacific Regional Communications Unit to ensure a coherent, consistent, and well-aligned communications approach across all channels and stakeholders.



Budget Overview



DREF OPERATION

MDRAF020 - Afghan Red Crescent Society(ARCS) Afghanistan Northern- Earthquake

Operating Budget

Planned Operations	895,133
Shelter and Basic Household Items	417,480
Livelihoods	0
Multi-purpose Cash	356,775
Health	26,093
Water, Sanitation & Hygiene	71,888
Protection, Gender and Inclusion	10,650
Education	0
Migration	0
Risk Reduction, Climate Adaptation and Recovery	0
Community Engagement and Accountability	12,248
Environmental Sustainability	0
Enabling Approaches	104,867
Coordination and Partnerships	19,170
Secretariat Services	25,560
National Society Strengthening	60,137
TOTAL BUDGET	1,000,000

all amounts in Swiss Francs (CHF)



Contact Information

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

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[Click here for the reference](#)

