



Chaman Crossing point, Balochistan Pakistan. (Photo: PRCS)

Appeal: <b>MDRPK027</b>	Country: <b>Pakistan</b>	Hazard: <b>Population Movement</b>	Type of DREF: <b>Response</b>
Crisis Category: <b>Yellow</b>	Event Onset: <b>Slow</b>	DREF Allocation: <b>CHF 416,010</b>	
Glide Number: <b>CE-2025-000051-PAK</b>	People Affected: <b>800,700 people</b>	People Targeted: <b>60,000 people</b>	
Operation Start Date: <b>24-04-2025</b>	Operation Timeframe: <b>6 months</b>	Operation End Date: <b>31-10-2025</b>	DREF Published: <b>25-04-2025</b>
Targeted Areas: <b>Balochistan, Khyber Pakhtunkhwa</b>			

# Description of the Event

## Date when the trigger was met

11-04-2025

## What happened, where and when?

Since 1 November 2023, the Government of Pakistan has implemented the Illegal Foreigners Repatriation Plan (IFRP), with intermittent pauses. In March 2025, authorities issued a notification advising Afghan Citizen Card (ACC) holders and undocumented Afghan nationals to voluntarily leave the country by 31 March 2025, thereafter deportations will commence with the effect from 1 April 2025. In the period between November 2023 and March 2025, a total of 842,429 Afghan nationals returned to Afghanistan. Of these, 40,677 individuals were deported while 51,196 returned voluntarily through facilitated processes.

Currently, the Afghan population in Pakistan includes 1.43 million Proof of Registration (PoR) card holders, 800,700 ACC holders, and 143,900 unregistered members of registered families. The government estimates there are approximately 1.7 million undocumented Afghan nationals, although precise records are unavailable. Among the registered population, 444,439 individuals reside in refugee villages (camps), while 990,947 live outside these areas. According to UNHCR, approximate 600,000 Afghans arrived in Pakistan since the August 2021 changes in Afghanistan.

The ongoing repatriation policy is expected to primarily impact 800,700 ACC holders and an estimated 1.7 million undocumented Afghan nationals. Additionally, the situation may affect PoR cardholder families due to the presence of 143,900 unregistered members in their family composition, raising the possibility of family separations or forced return of otherwise registered households. Furthermore, the national contingency plan of the humanitarian actors considering a high-risk scenario anticipates the return of approximately 739,000 Afghan nationals over the next three months.

UNHCR-IOM latest Flash update on 11 April 2025, reported the return of 19,334 Afghans while the report shared on 17 April 2025 indicate that 55,426 Afghans returned in the week of 6-12 April 2025, through the Torkham, Ghulam Khan (located in Khyber Pakhtunkhwa), Chaman, Badini and Bahramcha (located in Balochistan) border crossing points to Afghanistan.

For the implementation of Illegal Foreigner Repatriation Plan (IFRP) the government has established a process that includes establishment of 44 holding centers across four provinces of the country. Of the total holding centers 38 have been established in Punjab, one in Sindh, two in Khyber Pakhtunkhwa (KP), and three in Balochistan. Forced returnees are processed at the provincial holding centres before being transported to designated border crossing points, while voluntary returnees can directly approach the holding centers at crossing points.

The national society's assessment reports and findings of coordination suggest needs of basic health services (including First Aid), Restoring family links and safe drinking water on Pakistan side of the border.





Pakistan Red Crescent Staff at Torkham Crossing point during assessment. (Photo: PRCS)

## Scope and Scale

Pakistan's Illegal Foreigners Repatriation Plan (IFRP), implemented since November 2023, has already resulted in the return of 842,429 Afghan nationals to Afghanistan as of March 2025, including 40,677 deportees and 51,196 voluntary returnees through facilitated processes. The scale of the potential humanitarian impact is significant, as the policy primarily targets approximately 2.5 million individuals, including 800,700 Afghan Citizen Card holders and an estimated 1.7 million undocumented Afghan nationals. Additionally, 143,900 unregistered Proof of Registration cardholder family members face possible family separation or forced return of otherwise registered households.

The situation continues to evolve rapidly, with humanitarian partners projecting the return of approximately 739,000 Afghan nationals over the next three months under a high-risk scenario. Recent reports indicate high cross-border movement, with 55,426 Afghans returning in one week (April 6-12, 2025) through multiple border crossing points. To manage this process, the Pakistani government has established 44 holding centers across four provinces, processing forced returnees before transportation to designated border crossings.

## Source Information

Source Name	Source Link
1. Government Website	<a href="https://www.interior.gov.pk/afghan-citizen-card-acc-holders-to-leave-pakistan-by-march-31-2025/">https://www.interior.gov.pk/afghan-citizen-card-acc-holders-to-leave-pakistan-by-march-31-2025/</a>
2. UNHCR-IOM	<a href="https://pakistan.iom.int/sites/g/files/tmzbd11121/files/documents/2025-04/unhcr-iom-flash-update-37_1.pdf">https://pakistan.iom.int/sites/g/files/tmzbd11121/files/documents/2025-04/unhcr-iom-flash-update-37_1.pdf</a>
3. UNHCR-IOM	<a href="https://pakistan.iom.int/sites/g/files/tmzbd11121/files/documents/2025-04/unhcr-iom-flash-update-38.pdf">https://pakistan.iom.int/sites/g/files/tmzbd11121/files/documents/2025-04/unhcr-iom-flash-update-38.pdf</a>

Previous Operations

Has a similar event affected the same area(s) in the last 3 years?	Yes
Did it affect the same population group?	Yes
Did the National Society respond?	Yes
Did the National Society request funding form DREF for that event(s)	No
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:	
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**Lessons learned:**

Based on previous operation(s), PRCS has identified several important lessons learned, which will be taken into account for this IFRC-DREF operation:

- Efficient Resource Deployment:** The strategic location of PRCS Provincial warehouses near branches facilitated the rapid deployment of Water Treatment Plants (WTP) and dewatering pumps in previous operation. Future responses should leverage this logistical advantage and consider activating nearby PRCS Branch staff for rotational support. This approach will address resource constraints and ensure operational continuity. Additionally, conducting debriefing sessions for all involved personnel will foster learning and reflection.
- Real-Time Financial Monitoring:** Implementing real-time financial monitoring is crucial for enhancing the effectiveness and efficiency of emergency responses.
- Dedicated PMER Staff:** The involvement of dedicated PMER staff from both PRCS and IFRC has been vital in ensuring that reporting complies with IFRC standards, maintaining high quality and timeliness. Future operations should continue to prioritize dedicated PMER resources to support effective communication and accountability.
- Capacity Building:** Training and capacity building for volunteers and local staff are essential for effective disaster response.
- Adapting to Local Contexts:** Adapting interventions to the cultural, social, and political contexts of affected communities is crucial for effective response.

Current National Society Actions

Start date of National Society actions

25-03-2025

Coordination	PRCS is actively coordinating with government officials, including Commissionerate of Afghan Refugees national and provincial chapter, local district authorities and the District Coordination Officer (DCO), to gather comprehensive information related to repatriation of Afghan Nationals. This collaboration ensures that all details regarding needs of the migrants on the move are promptly collected. Additionally, PRCS National Headquarters is working closely with Chief Commissionerate of Afghan Refugees,
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	<p>provincial branches to obtain regular updates on repatriation to assess the specific needs of impacted migrants, enabling a timely and well-informed response.</p> <p>Furthermore, PRCS is closely coordinating with in-country Movement partners and two movement coordination meeting have been conducted.</p>
<b>National Society Readiness</b>	<p>To address the challenges posed by the repatriation of the Afghan Nationals in Pakistan, the Pakistan Red Crescent Society (PRCS) is fully prepared. With a dedicated Migration and Displacement team at National Headquarter, branch staff, trained volunteers, PRCS stands ready to provide immediate and effective assistance to the migrants on the move. The National Society has strategically positioned relief stock across key locations, ensuring swift relief during emergencies. Additionally, the Provincial Headquarters has well-stocked warehouses, allowing for the rapid deployment of additional relief items if necessary.</p> <p>A significant improvement in PRCS's capability for rapid field operations has been achieved through the training of over 76 staff members and volunteers as part of the National Disaster Response Team (NDRT). Furthermore, PRCS has conducted eight Disaster Management Response Teams (DDRT) training sessions.</p>
<b>Assessment</b>	<p>PRCS National Head Quarter with the support of provincial branches conducted the initial assessment at FS Gate crossing point in Chaman District and Torkham Border crossing point in Khyber District and in Khyber Pakhtunkhwa province in the last week of the March 2025. The provincial branches in Sindh and Punjab are conducting the assessments. Based on the findings of the assessment, the provincial branches in Balochistan and merged areas developed the response plan.</p>
<b>Resource Mobilization</b>	<p>PRCS National Headquarter is actively updating Movement Partners within the country on the current situation, seeking their support as needed. Two movement coordination meetings have been conducted to seek possible support. Simultaneously, the National Society plans to develop the consolidated action plan at country level to support the humanitarian needs of the migrants and explore the possible resource mobilization.</p>

## IFRC Network Actions Related To The Current Event

<b>Secretariat</b>	<ul style="list-style-type: none"> <li>• IFRC CD has been actively monitoring the situation in the country throughout the entire development process and maintained close coordination.</li> <li>• IFRC CD is actively participating in the Interagency coordination meetings with the NS and providing support for the preparation.</li> <li>• Coordinating with national society and providing technical support in planning the response plan and operational strategies</li> <li>• Closely monitoring the situation, coordinate and facilitate the national society efforts in addressing the needs of the affected population</li> <li>• Participating in Humanitarian Country Team (HCT) meetings</li> <li>• Sharing the information with the IFRC Afghanistan Delegation.</li> </ul>
<b>Participating National Societies</b>	<p>PRCS has organized two Movement Coordination meetings involving all PNSs, who have expressed their interest in gaining a deeper understanding of the current situation and PRCS's response efforts. In addition, technical inputs provided in planning response options.</p>

## ICRC Actions Related To The Current Event

<p>In coordination with PRCS and Movement Partners, the ICRC confirmed its commitment to support PRCS in delivering a principled humanitarian response. In line with its partnership, the ICRC is also coordinating with PRCS and movement technical teams to provide support in Restoring Family Links and First Aid services. The ICRC remains committed to enhancing operational and response capacity of the PRCS in line with its mandate and capacity.</p>
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# Other Actors Actions Related To The Current Event

Government has requested international assistance	No
National authorities	National authorities have defined the repatriation process and asked its relevant departments to facilitate the returnees during repatriation process.
UN or other actors	UN has developed a contingency plan, however, they are looking into the situation through protection lens and planning for targeted protection intervention. UN is also working on advocacy lines.

## Are there major coordination mechanism in place?

The Humanitarian Country Team (HCT), which operates at the national level, plays a key role in guiding humanitarian action in Pakistan. The IFRC is an active member of the HCT and regularly participates in its meetings. In addition, an Interagency Coordination Mechanism is in place, bringing together UN agencies and other humanitarian actors to ensure a coordinated response. A National Contingency Plan has been developed to respond to the humanitarian needs arising from the implementation of the Government policy of IFRP. Both IFRC and PRCS are actively engaged in these coordination forums and have contributed to the development of the contingency plan.

At the national and provincial levels, PRCS continues to coordinate closely with key stakeholders, including the Commissionerate for Afghan Refugees (CAR) and other relevant government and humanitarian actors.

Within the Red Cross and Red Crescent Movement, a coordination mechanism is maintained through regular Movement Coordination Meetings. Two such meetings have been held specifically to discuss the situation of Afghan nationals returning to Afghanistan and the potential response actions of PRCS. These meetings were attended by PRCS, IFRC, and Partner National Societies including the German Red Cross, Norwegian Red Cross, and Turkish Red Crescent.

## Needs (Gaps) Identified



Many returnees, including women, children, and elderly individuals, are traveling long distances, often from different parts of Pakistan to remote border crossings in KP and Balochistan provinces, under precarious and stressful conditions. Exposure to physical strain, psychological stress, extreme weather, malnutrition, water borne diseases and underlying medical conditions increases the risk of health complications. Health services, including basic clinical care, maternal health support, and referrals, are vital to safeguard the dignity and wellbeing of returnees at the point of return.

In the context with having weak health infrastructure, persons with the needs of basic medical care during transit and processing, individuals having minor injuries, dehydration, exhaustion, and chronic health issues exacerbated by the journey will be treated at PRCS basic medical health units. Similarly, the host community near the crossing points, will benefit from these services. The patients needing specialized care will be referred to nearby hospitals (District HQ Hospital of Chaman and District HQ hospital of Khyber).



Border crossing areas—especially in KP and Balochistan are often located in remote, arid regions with limited or no access to clean drinking water. Returnees spend extended periods waiting for documentation or transportation and are exposed to dehydration and waterborne diseases. Provision of adequate safe drinking water through is critical to uphold basic humanitarian standards, prevent illness, and maintain dignity.



## Protection, Gender And Inclusion

Afghan nationals residing across four provinces—Balochistan, Sindh, Punjab, and Khyber Pakhtunkhwa (KP)—are returning through various crossing points. On average, their travel time ranges from a minimum of 3–4 hours to a maximum of 20–25 hours and at times takes days, depending on their province of origin and the location they are traveling from. Travel time can vary significantly based on these factors.

Due to the sensitive nature of information regarding Afghan migrants, there is limited data available. While sex, age, and disability disaggregated (SADD) data is currently lacking, only limited information is provided by the UNHCR that out of overall returns 50% are female, of which 29% are girls and 58% are children. Keeping this information in mind, it is assumed that the returnees include women, female widows, unaccompanied children, persons with disabilities, the elderly, and pregnant and lactating mothers. These vulnerable groups are undergoing a forced repatriation process. There is a high risk that many of them are experiencing mental stress, anxiety, and other psychosocial issues.

Given the diverse needs of these vulnerable groups, critical issues and gaps have been identified in addressing their protection needs, especially as they face a heightened risk of exploitation, abuse, and neglect during emergency situations. There is an urgent need for gender-sensitive approaches to ensure the equitable distribution of aid, protection from harm and abuse, privacy, and access to essential services for all vulnerable groups.

In addition, there is a risk of family separation due to the nature of crises, therefore, RFL services provision will be ensured at both locations.



## Community Engagement And Accountability

Keeping in view the nature of response at different identified locations addressing the needs for community engagement and accountability is paramount. Establishing effective communication channels is crucial, ensuring that information about the assistance is being provided to different vulnerable groups in the identified points.

In response priority will be given to the most marginalized groups and PRCS will establish robust feedback and complaint mechanism to actively seek their feedback regarding the services that will be provided to ensure they are effective and relevant to their needs, and will incorporate their feedback to improve services accordingly.

To achieve effective community engagement and accountability, PRCS field teams will organize dialogue with men, women, elderly and persons with disability separately considering the gender dynamics and cultural practices of population on move. Secondly, information related to services, especially health referral will be disseminated as per their requirement. It will be ensured that male and female staff and volunteers who understand the local language of Afghan migrants will be hired so that they can easily communicate with female Afghan migrants to understand their needs and provide the relevant information.

Transparent accountability mechanisms will be established, allowing the community to hold PRCS and IFRC accountable for the quality and effectiveness of the response interventions. These measures collectively ensure a more inclusive, responsive, and accountable response operation across the country. Furthermore, a help desk for information sharing will be established and trained volunteers will provide information, address their queries and collect feedback.



## Environment Sustainability

PRCS is committed in ensuring environmental sustainability throughout the response operation, adhering to the fundamental principle of 'Do No Harm.' In the context of environmental considerations, this commitment extends to employing eco-friendly practices during the response efforts, minimizing the ecological footprint of operations, and prioritizing the preservation of local ecosystems.

# Operational Strategy

## Overall objective of the operation

This DREF allocation aims to support 60,000 people returnees by providing health services, psychological first aid, ambulance services for referral, safe drinking water, restoring family links and essential information while ensuring CEA and PGI at Torkham, Khyber





## Operation strategy rationale

The Pakistan Red Crescent Society (PRCS), with support from the IFRC Country Delegation (CD), is implementing a comprehensive response strategy to address the urgent humanitarian needs of Afghan returnees at the Torkham crossing point in Khyber Pakhtunkhwa and the Chaman crossing point in Balochistan through services point with integrated approach of health, WASH, CEA/PGI, RFL and information dissemination.

Given the weak health infrastructure in both border districts—particularly at the crossing points—the strategy prioritizes the establishment of health facilities that offer Outpatient Department (OPD) services and essential medicines to respond to the immediate and emerging health concerns among returnees. To mitigate the risk of waterborne diseases, the operation also includes the provision of safe drinking water at both locations.

Recognizing the high likelihood of family separations during the mass deportations and movements, a Restoring Family Links (RFL) services will be provided. Trained PRCS staff and volunteers will be deployed to ensure the delivery of quality, safe and dignified services.

The following key services will be provided as part of this operation:

### A) Health Services:

To address the health needs of returnees, two Mobile Health Teams (MHTs) will be deployed—one at the Chaman border and one at the Torkham border. Each MHT will operate for a period of six months (180 days) and is expected to provide basic medical services to approximately 60,000 individuals. These teams will offer a comprehensive package of essential health services, including:

- 1) OPD services for the treatment of common illnesses and minor ailments,
- 2) Psychological First Aid (PFA) to address the immediate mental health and psychosocial support needs,
- 3) Provision of essential medicines to ensure the timely treatment of acute conditions, and basic treatment for the patients with non-communicable diseases (NCDs)
- 4) Ambulance support for referral services for cases requiring advanced medical care at secondary or tertiary health facilities.

The deployment of these MHTs aims to ensure that returnees receive timely and dignified healthcare support at key border points, addressing both immediate and ongoing health concerns throughout the operation period.

### B) WASH:

During the initial two months of the operation, PRCS will prioritize the distribution of bottled water to address the immediate drinking water needs of returnees at border crossing points. This will be complemented by targeted hygiene promotion campaigns aimed at raising awareness on safe water practices and personal hygiene to reduce the risk of waterborne diseases.

To ensure continued access to safe drinking water, a water filtration plant will be installed in the third month, providing a temporary but sustainable solution for the remaining period of the operation. This setup will support the provision of potable water to returnees, helping to meet their basic water needs in a dignified and consistent manner throughout the response period.

In addition, PRCS will closely monitor the sanitation needs at the crossing point and if needed there are existing stock of rapid toilet available at PRCS warehouse that will be deployed including hand washing facilities. Furthermore, hygiene promotion campaigns/session will complement to the existing system in place.

### C) Protection Gender and Inclusion:

PRCS will deploy gender-balanced volunteer teams at every stage of the response—assessments, distributions relevant information sharing, —to ensure that women, children, older persons, ethnic minorities, PWDs, and other marginalized groups have their specific needs met. All staff and volunteers will attend a one-day Protection, Gender, and Inclusion (PGI) training on DAPS minimum standards, PSEA and children safeguarding followed by regular orientations and ongoing technical support, to guarantee that no one left behind, response do not create any harm and PGI principles are integrated across all sectors to make the response safe and dignified. In addition, restoring family links services will be ensured at both locations to address the risk of family separation due to the nature of crises.

Recognizing the unique needs of women, Pregnant and Lactating Women (PLWs) and adolescent girls, dignity kits will be distributed to women and girls based on their specific requirements. Dedicated safe spaces will be established adjacent to health facilities, where pregnant women, nursing mothers, unaccompanied children, and elderly women can rest, feed their infants, and access psychosocial support. To address any health emergencies, referral services along with ambulance support will be available at service points to assist pregnant women and elderly individuals with health concerns. Trained volunteers will conduct child-friendly activities to safeguard children's well-being during their stay. Finally, all team members will be regularly sensitized on protection, gender and inclusion, the Code of Conduct, and fundamental humanitarian principles—ensuring that medical services and relief assistance are delivered safely, accessibly, and with full respect for dignity.

#### D) Community Engagement & Accountability:

The operational strategy will go beyond using community feedback solely to enhance service delivery and will actively prioritize strengthening and maintaining trust within border areas and among Afghan nationals. This will be achieved through a comprehensive community engagement approach designed to capture developing community priorities, concerns, and coping strategies. The insights gathered will inform the continuous adaptation of both the operational strategy and humanitarian diplomacy efforts. Clear and accessible information will be delivered not only on available services but also on identified information needs such as procedures and entitlements. In addition, the role of PRCS and the Fundamental Principles guiding its humanitarian action will be consistently communicated to uphold transparency, accountability, and sustained community confidence in all interventions.

To enhance community engagement and accountability, PRCS will establish a feedback collection and information dissemination desk at the humanitarian service points to collect face-to-face feedback. The goal is to receive and address complaints through these mechanisms and improve the quality of services regularly. Staff and volunteers will be oriented on feedback processes and accountability to beneficiaries. Additionally, PRCS will conduct orientation sessions on CEA to ensure effective implementation and responsiveness to the affected population needs. This approach ensures that beneficiaries can voice their concerns and provide input, which will be used to inform and improve response efforts.

## Targeting Strategy

### Who will be targeted through this operation?

This operation will primarily target Afghan nationals repatriating from Pakistan through designated border crossing points because most of the returnees pass through these two points. In addition, the returnees travel from various areas of the country through different routes and gather at crossing points therefore response actions are planned at two locations near the border. Priority will be given to the most vulnerable individuals, including women, children, elderly persons, persons with disabilities, and those with urgent medical or protection needs. The intervention aims to provide immediate humanitarian assistance—such as primary health care, safe drinking water, psychosocial support, and protection services—to ensure the safety, dignity, and well-being of returnees during their transit and onward journey.

### Explain the selection criteria for the targeted population

1. Repatriating Afghan Nationals crossing into Afghanistan via designated border points (e.g., Torkham, Chaman).
2. Individuals without access to immediate health services, safe drinking water, or means for referral in case of medical emergency.
3. Prioritized Vulnerable groups, including:
  - o Pregnant and lactating women
  - o Children under 5 years
  - o Persons with disabilities or chronic illnesses
  - o Elderly people (aged 60+)
  - o Unaccompanied and separated children
  - o Female-headed households
  - o Survivors of or those at risk of violence or exploitation
4. Individuals showing signs of physical or psychological distress who require first aid, psychosocial support, or further medical assessment

# Total Targeted Population

Women	13,800	Rural	50%
Girls (under 18)	12,000	Urban	50%
Men	16,200	People with disabilities (estimated)	10%
Boys (under 18)	18,000		
Total targeted population	60,000		

## Risk and Security Considerations

Please indicate about potential operation risk for this operations and mitigation actions

Risk	Mitigation action
Delays in Procurement of Medicines and other items	<ul style="list-style-type: none"> <li>• IFRC CD will take the lead in the local procurement to conclude it with in the DREF timeline while ensuring IFRC Standards for medical procurement.</li> <li>• Medicine and other items will be utilized from PRCS existing stock and will be replenished accordingly.</li> </ul>
Delays in the procurement of medical supplies	<ul style="list-style-type: none"> <li>• Country Delegation is working in various options for the procurement of medical supplies</li> <li>• Initially, the medicines for MHTs will be provided from the existing stock of the national society and parallelly the procurement process will be initiated.</li> </ul>
Deteriorating Security Situation around the border areas may limit access for staff and pose risks to both personnel and returnees.	<ul style="list-style-type: none"> <li>• Close coordination will be maintained with local authorities to receive timely security updates.</li> <li>• Establish a robust security protocol for staff and volunteers.</li> <li>• Pre-position supplies and resources to ensure continuity of critical services in case of temporary access restrictions.</li> <li>• Engage community volunteers and local partners for service continuity if staff access is limited.</li> </ul>
A significant increase in the number of repatriating individuals may overwhelm the existing capacity of mobile units and services	<ul style="list-style-type: none"> <li>• Pre-position additional supplies (medicines, water, hygiene kits) to handle sudden influxes.</li> <li>• Coordinate closely with other humanitarian actors and government agencies to share responsibilities and avoid duplication.</li> <li>• Regularly monitor movement trends and update contingency planning accordingly.</li> </ul>

Please indicate any security and safety concerns for this operation

Considering the complex and sensitive nature of the ongoing repatriation of Afghan nationals from Pakistan, comprehensive measures are in place to safeguard all IFRC personnel involved in this operation.



Key risks include civil unrest, roadblocks and checkpoints, arbitrary detentions, access restrictions, and the potential for sudden crowd escalations, particularly in border areas and urban centers with high concentrations of Afghan populations.

Additional risks stem from the possibility of cross-border armed incidents, especially in high-tension zones. Past events have included exchanges of fire, abrupt border closures, and disruptions to repatriation activities, all of which remain plausible amid rising political and military sensitivities.

To mitigate these risks, we are implementing strict security protocols, including continuous monitoring of real-time developments, regular and ad-hoc security updates, and tracking staff movements via phone or WhatsApp to ensure immediate support in case of emergency.

The National Society's security framework will be applicable for the duration of the operation to their staff and volunteers. For personnel under IFRC security's responsibility, including surge support 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. All IFRC and RC/RC staff and volunteers are encouraged, to complete the IFRC Stay Safe e-learning courses, i.e. Stay Safe Personal Security, Stay Safe Security Management and Stay Safe Volunteer Security online training. Lastly, staff and volunteers will be briefed on the security situation and before deployment in the operational areas.

Has the child safeguarding risk analysis assessment been completed?

No

## Planned Intervention



**Budget:** CHF 193,212

**Targeted Persons:** 60,000

### Indicators

Title	Target
# of people reached, assisted with emergency health care and medical treatment through RCRC primary healthcare services or different clinical ERU configurations of the RCRC Movement	60,000
# of ambulances operated by the NS to provide medical transportation and pre-hospital care	2
# of people who received mental health and psychosocial services in emergency situations from RCRC	1,800
# of staff and volunteers trained in MHPSS	40

### Priority Actions

1. Establishment of Mobile Health unit
2. Conduct Basic patient consultation
3. Provide Psychological First Aid (PFA)
4. Deploy two ambulances for referral, one at each MHU
5. Provide Free medicines

6. Deploy male and female doctors

7. Coordination with authorities and stakeholders



## Water, Sanitation And Hygiene

**Budget:** CHF 114,820

**Targeted Persons:** 60,000

### Indicators

Title	Target
# of litres of safe water distributed through RCRC Emergency Water Supply (Cumulative)	1,500,000
# of people reached with WASH actions in emergency response	60,000
# of people covered with hygiene promotion activities	60,000

### Priority Actions

1. Provision of safe drinking water
2. Assessment and feasibility for SETA plant deployment
3. Deployment of Water SETA Plant
4. Hygiene Promotion Sessions



## Protection, Gender And Inclusion

**Budget:** CHF 52,917

**Targeted Persons:** 5,000

### Indicators

Title	Target
# of people trained on implementing the PGI Minimum Standards	40
Programme has completed the IFRC Child Safeguarding Risk Analysis	1
# of girls, female adolescents and women reached by information dissemination sessions on Menstrual Hygiene Management (MHM)	5,000
# of target locations covered by the RCRC which have safe spaces established by RCRC	2

### Priority Actions

1. Orientation on Protection, Gender and Inclusion (PGI), Protection from Sexual Exploitation and Abuse (PSEA) and Child Safeguarding for 50 PRCS volunteers and staff (25 each in 02 districts) will be organized to sensitize the staff on the rights to safety, security and dignity of displaced persons.

2. A Child Safeguarding Risk Analysis will be carried out in the two target districts to identify, assess, and mitigate potential risks of harm to children in these areas.
3. Awareness sessions and distribution of 5,000 dignity kits (customized as per their needs) among women and adolescent girls will be ensured in the two target districts. The customised dignity kits will include sanitary pads, undergarments, torch lights, soap, paper bags and cloth bag for disposal of waste. Additionally, Menstrual Hygiene Management (MHM) session on the usage and disposal of dignity kit items will be held in the safe spaces by female volunteers.
4. Safe spaces, one in each location will be established in collaboration with the health facility or separate tent for the safe space based on the situation will be set up for women, Pregnant and Lactating (PLWs) mothers and children.
5. Volunteers/staff will be trained on Child Friendly spaces interventions
6. Provision of RFL services



## Migration And Displacement

**Budget:** CHF 998

**Targeted Persons:** 60,000

### Indicators

Title	Target
# of people reached through humanitarian service points (migrants and displaced people)	60,000
# of humanitarian service points established (migrants and displaced people)	2

### Priority Actions

1. Engagement with external government and non-government/UN partners on the Movement's position, Migration policy and principles for engaging in contexts of return of migrants.
2. Provision of services mentioned under other areas of interventions through Humanitarian Services Points - HSP. This approach will facilitate safe and secure access for those returning to the assistance provided by PRCS.
3. Training for volunteers on Migration and displacement (IFRC Principles and approach/PRCS new M&D strategy).



## Community Engagement And Accountability

**Budget:** CHF 11,462

**Targeted Persons:** 6,000

### Indicators

Title	Target
# of people reached through dissemination of key information and messages	6,000
% of community members, including marginalized and at-risk groups, who know how to provide feedback or make a complaint about the operation	70
# of staff and volunteers oriented/trained on CEA	50



## Priority Actions

1. Orientation sessions for staff and volunteers of the target districts on how to collect and maintain feedback, and the overall complaint mechanism will be organized at the start of the operation. The aim of the sessions will be to develop a basic understanding of the staff and volunteers on the use/purpose of feedback mechanisms and accountability to beneficiaries.
2. A structured feedback system will be put in place (e.g., face-to face feedback and feedback desks) to monitor, address and act on the questions, suggestions, concerns, disclosure and misinformation received through these sources, to adapt and improve the response through evidence-based information.
3. Maintain feedback logs for analysis and informed decision-making during project timeframe.
4. Printing of IEC material banners and standees in local language to inform affected population that aid is free/information related to services on other side of the border.



## Secretariat Services

**Budget:** CHF 19,802

**Targeted Persons:** -

## Indicators

Title	Target
# of IFRC staff engaged to support the PRCS in implementing the response activities	10
# of surge deployed	1
# of monitoring visits conducted by IFRC staff	10
# of movement/membership coordination meetings	3

## Priority Actions

1. Provide regular technical support to PRCS staff for timely implementation of the planned operational activities.
2. Ensure movement/membership coordination mechanism is in place for complementarities across the response.
3. IFRC monitoring visits to support the operation.
4. Planning and review meetings at national and provincial level
5. Deployment of surge support



## National Society Strengthening

**Budget:** CHF 22,798

**Targeted Persons:** -

## Indicators

Title	Target
# of volunteers provided with equipment for protection, safety and support (e.g. PSS) appropriate to the emergency	40



# of volunteers involved in the response operation that have increased their skills in response and management of operations	40
# of lessons learned workshop conducted	1

## Priority Actions

1. Recruitment drives to engage and mobilize volunteers in the target locations for supporting the PRCS DREF operation
2. Volunteer orientation sessions to give them an overview of the response operation and their role and responsibilities as the representatives of the NS in the field.
3. Capacity building trainings like Volunteering in Emergencies and other integrated trainings for volunteers on First Aid, ERT, DRR, Climate Change and Youth as Agents of Behaviour Change (YABC).
4. Provision of Personal Protective Equipment (PPE) kits to the respective branches for volunteers' safety.
5. Provision of Emergency Response Kits including FA kits for target branches.
6. ERT (Emergency Response Team) trainings for the PRCS branches.
7. Regular monitoring visits by PRCS staff to the implementation areas during planned activities.
8. Lesson Learnt Workshop to share and identify challenges, best practices and recommendations for future responses.

## About Support Services

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

PRCS NHQ and IFRC will provide technical support and guidance. Two Provincial Branches headquarters will ensure the implementation, and the field team will execute the activities. 40 staff and Branch Disaster Response Teams (BDRTs) volunteers will be engaged at different levels of the operation.

### Will surge personnel be deployed? Please provide the role profile needed.

Surge support will be deployed with the PMER profile to support the Planning, Monitoring, Reporting and Evaluation of the Operation.

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

Procurement of the medicines, drinking water bottles, PPEs, dignity kits, and visibility items are planned in operation. However, medicines, PPEs and visibility items are available in PRCS existing stock which will be utilized and replenished accordingly. Furthermore, procurement for drinking water-bottles and dignity kits will be initiated locally promptly. The procurement process will be led by IFRC CD with the technical support of APRO and Geneva and will be concluded within the set timeline.

### How will this operation be monitored?

DREF monitoring tools will be developed to monitor the response operation for a transparent and equitable response. The CD PMER will develop Indicator Tracking Table (ITT), Monitoring and Evaluation (M&E) Plan, implementation plan and the people reached tools for tracking the implementation of the response, while ensuring that these efforts are effective and accountable. These documents help monitor progress, identify challenges, adapt strategies and ensure that disaster response programmes achieve their intended goals. M&E framework will be established for monitoring and evaluating the entire disaster response, since it outlines how data will be collected, analyzed and used to inform decision-making and improve programme effectiveness throughout the DREF timeline.

The operation will be monitored by the PRCS provincial headquarters as well as National headquarters. Regular monitoring visits will be

conducted to the operation areas. In addition, IFRC will also conduct monitoring visits. Post distribution monitoring will be carried at each location and lesson learned workshop will be conducted.


## **Please briefly explain the National Societies communication strategy for this operation**

IFRC will be supporting PRCS communications capacity through the existing capacities at CD and regional office. More precisely, IFRC will aid in media relations and content gathering, producing and distributing communication material and resources, as well as using public social channels (e.g., Facebook, Twitter) to promote advocacy messages through the global and regional platforms.

In turn, PRCS will provide the necessary access and support in said content gathering efforts which include on-the-ground photos and video taking, conducting interviews with RCRC staff and volunteers and beneficiaries when needed. Furthering this, IFRC will support in managing reputational risk at country level and will ensure that the Movement actors at the country level speak and act with a unified voice to build trust towards partners, donors, and stakeholders. For visibility, PRCS will ensure that staff and volunteers of PRCS will uphold the visibility of PRCS and IFRC.



# Budget Overview



DREF OPERATION

MDKLCXXX - Pakistan Red Crescent Society, Population Movement

Afghan National's Return From Pakistan April 2025

Operating Budget

Planned Operations	373,410
Shelter and Basic Household Items	0
Livelihoods	0
Multi-purpose Cash	0
Health	193,212
Water, Sanitation & Hygiene	114,820
Protection, Gender and Inclusion	52,917
Education	0
Migration	998
Risk Reduction, Climate Adaptation and Recovery	0
Community Engagement and Accountability	11,462
Environmental Sustainability	0
Enabling Approaches	42,600
Coordination and Partnerships	0
Secretariat Services	19,802
National Society Strengthening	22,798
TOTAL BUDGET	416,010

all amounts in Swiss Francs (CHF)

[Click here to download the budget file](#)



# Contact Information

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

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