Afghan Red Crescent Society

Strategic Plan 2026-2030

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President's Message

The Afghan Red Crescent Society (ARCS) was established in 1934 with the humanitarian mandate to prevent and alleviate the suffering of disaster-affected, poor, and vulnerable populations, and to provide assistance in accordance with the fundamental principles of humanity and impartiality.

Afghanistan remains among the countries most severely affected by the adverse impacts of climate change. In recent years, the country has experienced several major disasters, including floods and earthquakes. Drawing on its auxiliary role to the public authorities in the humanitarian field, ARCS has endeavoured, within its operational capacity, to respond to these emergencies and has earned recognition as a trusted, community-based humanitarian actor.

Moreover, Afghanistan is emerging from decades of protracted conflict, the consequences of which continue to affect large segments of the population. The conflict has resulted in widespread displacement, both within and beyond national borders, leaving many without adequate shelter, livelihoods, and access to basic services. A significant proportion of the population continues to face compounded vulnerabilities, and restoring resilience and dignity requires sustained, coordinated, and long-term humanitarian engagement.

As a committed member of the International Red Cross and Red Crescent Movement, ARCS, through its Strategic Plan (2026–2030), seeks to reinforce its humanitarian action over the coming five years. The Plan prioritizes the delivery of timely, relevant, and sustainable services to those most in need, while strengthening the capacities of communities, volunteers, and staff. Through its implementation, ARCS aims to enhance resilience, promote well-being, and contribute to addressing the evolving humanitarian needs across the country.

In pursuit of effective service delivery and strengthened resource mobilization, ARCS has developed this five-year Strategic Plan in close consultation with its Movement partners, namely, the International Federation of Red Cross and Red Crescent Societies (IFRC), the International Committee of the Red Cross (ICRC), and sister National Societies. The Plan is aligned with the IFRC's strategic plan and has been informed by inclusive consultations with ARCS members, volunteers, youth, and staff, ensuring a participatory and coherent approach to its implementation.

Considering the increasing humanitarian needs—exacerbated by recurrent natural hazards such as earthquakes and floods, as well as the continued return of large numbers of Afghan nationals from neighbouring countries—there remains a critical demand for comprehensive assistance and support. It is envisaged that the effective implementation of this Strategic Plan will contribute to enhanced resource mobilization and strengthened engagement with partners and donors, thereby enabling ARCS to expand and sustain its humanitarian response in support of vulnerable communities across Afghanistan.

Sincerely,

Mawlawi Sheikh Ul Hadith Shahabuddin Dilawar
President, ARCS

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a) Dissemination of the Strategic Plan (2026–2030) to Internal and External Stakeholders
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Introduction

The Afghan Red Crescent Society's Strategic Plan for 2026–2030 outlines the organization's mission and objectives in alignment with the Fundamental Principles of the International Red Cross and Red Crescent Movement and the changing humanitarian context in the country.

The Afghan Red Crescent Society, established in 1934, is widely recognized as a trusted humanitarian organization in the context due to its principled and community-based work. As an independent humanitarian institution, it works in close coordination with relevant government authorities to deliver lifesaving assistance and promote sustainable community resilience across the country. It now aims to expand the delivery of humanitarian services to vulnerable populations in remote and underserved areas of the country; to recruit, engage, and organize a new generation of youth and volunteers; to strengthen planning and reporting through the effective use of modern technologies; and to ensure timely, rapid, and effective responses to disasters. At the same time, it seeks to provide integrated services across multiple sectors to support communities in becoming more self-reliant, resilient, and better prepared to withstand and respond to future shocks and hazards.

In accordance with its legal mandate, the Afghan Red Crescent Society holds a distinct auxiliary role to the public authorities. In situations where government institutions and other actors are unable to deliver services, the Society acts within this auxiliary capacity to provide humanitarian assistance in those areas of need.

In the development of the 2026–2030 Strategic Plan, extensive consultations were conducted across the organization. Inputs and feedback were collected from provincial branches and representative offices, as well as from relevant government ministries, United Nations agencies, and other active humanitarian and development actors in the country. These consultations helped ensure inclusivity, reduce duplication of efforts, and strengthen institutional capacities. They also contributed to identifying priority areas, reinforcing internal systems, and developing practical recommendations to guide effective implementation of the strategic plan going forward.

The Afghan Red Crescent Society, as a member of the International Federation of Red Cross and Red Crescent Societies, has developed this Strategic Plan in alignment with the Federation's 2030 strategic priorities, challenges, and transformation agenda.

Key Components of the Strategic Plan

1. Disaster-Affected Populations and Their Needs

This section prioritizes interventions aimed at strengthening the resilience and capacities of the most vulnerable groups within society. These include disaster-affected populations, returning refugees, internally displaced persons, orphans, persons with disabilities, malnourished children, elderly persons without family support, and poor and vulnerable households in remote areas of the country. The services provided by the Afghan Red Crescent Society (ARCS) are intended to address immediate humanitarian needs in the short term, while also contributing to long-term resilience, self-reliance, and sustainability.

1.1. Current Services Delivered

ARCS places strong emphasis on life-saving and complementary services that address existing gaps, including emergency health response services, mobile health clinics, psychosocial support services, and vocational training programs. These interventions are designed in a manner that avoids duplication or overlapping with the mandated services of relevant government ministries.

1.2. Services Designed to Avoid Duplication

In line with its auxiliary role, ARCS ensures coordination with the Ministry of Martyrs and Disabled Affairs, the Ministry of Refugees and Repatriation, the Ministry of Public Health, and the National Disaster Management Authority in planning, service delivery, and beneficiary targeting. This coordination ensures that ARCS delivers distinct, complementary, and non-duplicative services in accordance with the Fundamental Principles of the International Red Cross and Red Crescent Movement.

2. Distinct Capacities of the National Society

ARCS leverages its comparative advantages to deliver emergency response and specialized health services alongside long-term community-based support, particularly in areas with limited or no access by other actors. These strengths include its extensive volunteer network, nationwide presence at provincial level, strong community trust, and capacity to deliver mobile services.

3. Populations Accessible Exclusively through the ARCS

ARCS prioritizes populations in hard-to-reach areas where other organizations have limited or no access. These include internally displaced persons, disaster-affected populations, conflict-affected families, and children in vulnerable situations. Through mobile health teams and outreach mechanisms, ARCS provides essential and specialized health and humanitarian services to these populations.

4. Capacity Building

ARCS invests in strengthening human resources, including volunteers and staff, community engagement mechanisms, and international partnerships to enhance the effectiveness and scale of its services across the country.

5. Coordination at Provincial-Level

To ensure the delivery of effective, transparent, and standardized humanitarian services, ARCS strengthens coordination at provincial level through the establishment of joint coordination mechanisms, standardized reporting systems, improved emergency planning, capacity development initiatives, and the recruitment and deployment of technical expertise.

1. Afghanistan context and needs analysis

(i) External trends and needs analysis

The Afghan Red Crescent Society conducted a comprehensive analysis of its strategic position, capacities, and coordination mechanisms through the collection and assessment of primary and secondary data. These data were gathered through a nationwide survey conducted via all 34 provincial branches with the support of volunteers, and further validated through engagement with key institutions, including disaster management authorities and relevant ministries.

The main vulnerable groups identified by government authorities include disaster-affected populations, returnees, internally displaced persons, widows, orphans, persons with disabilities, malnourished children, elderly individuals without support, and families affected by conflict or living in remote and border areas with limited access to healthcare services. These groups require support across multiple sectors, including emergency response, healthcare, food assistance, psychosocial support, shelter, protection, livelihoods, education, and long-term self-reliance.

In 2025, approximately 22.9 million people—nearly half of Afghanistan's estimated population of 46 million—required humanitarian assistance, including 5.7 million women and 5 million men living in severe poverty (OCHA, March 2025). While humanitarian partners identified 145 districts out of 401 as priority areas, the Afghan Red Crescent Society further prioritized 95 districts as the most in need, including 60 districts where vulnerable populations reside and where the presence of other humanitarian actors is very limited or nearly absent.

Afghanistan continues to face significant natural hazards, including earthquakes, droughts, floods, avalanches, landslides, and heavy snowfall. In 2024, all 34 provinces were affected by such events. In 2025, nearly 21 million people required water, sanitation, and hygiene services (UNICEF). Additionally, around 5.8 million people required shelter and non-food items, particularly in areas affected by natural disasters, harsh winters, and large numbers of displaced and returning populations (IOM). Although there has been some gradual improvement in food security, it is estimated that approximately 14.8 million people will still face food insecurity, including 3.5 million malnourished children and 1.1 million women (OCHA, March 2025).

Since 2023, more than 3 million Afghans have returned to the country, including approximately 2.5 million in 2025 alone (OCHA, March 2025). Many of these returnees and internally displaced persons face unstable incomes and difficult living conditions. Most are settling in rapidly urbanizing areas where access to basic services—such as healthcare, safe drinking water, and education—is limited. Children living in areas contaminated with landmines and unexploded ordnance are at high risk. In 2025, approximately 4.4 million people required mine action services (OCHA, March 2025).

In October and November 2025, the Afghan Red Crescent Society conducted a nationwide assessment through its 34 provincial branches and 7 regional offices as part of the development of its strategic plan. The findings indicate that community-based response teams, along with national and international

organizations such as UNICEF, WFP, and MAAO, are active across all zones. However, their services remain limited and are primarily concentrated in provincial centers, leaving remote districts underserved.

In high-risk districts, particularly in border areas and disaster-prone locations, there is a need for expanded and sustained humanitarian services. Strengthening provincial emergency committees, expanding development programmes, improving health facilities, and enhancing coordination among national and international actors are identified as key priorities. Although beneficiary identification is conducted through volunteers and community-level assessments, there remains a strong need for sustained support programmes, improved basic infrastructure, and expanded humanitarian services. Afghan Red Crescent Society strengthens its public services, guided by its fundamental principles, to respond effectively to the increasing needs in Afghanistan. It complements critical, community-based interventions that other organizations are not fully able to implement. These services include emergency rescue operations, mobile health clinics, emergency ambulance services, blood collection and transfusion, medical referrals abroad (such as treatment for children with congenital heart defects and bone diseases), psychosocial support, orphan care, and vocational programs. A wide network of volunteers, a strong presence across provinces, and public trust enable the organization to deliver humanitarian services quickly and consistently, even in high-risk areas.

The Afghan Red Crescent Society will further strengthen its capacities to avoid duplication and ensure alignment with the auxiliary roles requested by the relevant ministries:

- With the National Disaster Management Authority: focus on operational activities and emergency response.
- With the Ministry of Public Health: provision of mobile and emergency health services in underserved areas.
- With the Ministry of Refugees and Repatriation: coordination of humanitarian assistance for returnees, internally displaced persons, and host communities.
- With the Ministry of Martyrs and Disabled Affairs: prioritization of support to persons with disabilities, widows, and orphans based on verified beneficiary lists.

Relevant government ministries and United Nations agencies have recommended that the Afghan Red Crescent Society focus on complementary and life-saving services that fill existing gaps rather than duplicating government roles and assistance. This is particularly important in remote and underserved areas where access to services is limited. Priority services include emergency health response, mobile health services, blood bank and transfusion support, emergency evacuation operations, and mental health support.

In addition, the Afghan Red Crescent Society is encouraged to further activate its volunteer network, youth programs, and first aid teams to strengthen rapid response capacities across the country. Those considered most vulnerable typically include widows, orphans, persons with disabilities, internally displaced people, and returnees. Nearly all identified groups require integrated support, including healthcare, nutrition, cash assistance, shelter, protection, psychosocial support, and livelihood opportunities. To achieve this, programs should be integrated and coordinated, assessments should be conducted, and communities should lead efforts in risk reduction and preparedness. A balance must be maintained between short-term emergency assistance and long-term solutions to reduce vulnerabilities and strengthen community resilience.

Overall, Afghanistan's mountainous, remote, and low-income areas require the greatest humanitarian attention and expansion of services. Floods, droughts, earthquakes, and limited access to health facilities are common risks across all regions, making prevention measures and rapid response more complex. At the national level, criteria for identifying priority areas and vulnerable populations should be strengthened and harmonized to ensure broad, coordinated, and effective coverage of all areas in need. To avoid duplication, ministries have emphasized the importance of regular coordination, including shared beneficiary lists, joint assessments, and coordination with the Ministry of Refugees and Repatriation on internally displaced persons and returnees, as well as with the Ministry of Martyrs and Disabled Affairs on orphans, widows, and persons with disabilities. Through coordinated planning and complementary programming, the Afghan Red Crescent Society can deliver effective, transparent, and non-duplicative humanitarian services that strengthen the overall national response. This also includes its important network of Marastoons, which support widows affected by conflict and female-headed households by strengthening their capacities, vocational skills, and resilience.

The presence of duplication in identifying target groups highlights the need for stronger sectoral coordination and unified information systems. The Afghan Red Crescent Society is particularly well positioned to lead emergency response, mobilize volunteers, deliver essential community-based services, and support integrated programs while avoiding duplication. Regular collaboration with ministries ensures effectiveness, transparency, and the sustainability of humanitarian assistance.

Finally, all external partners have recognized and appreciated the Afghan Red Crescent Society's ability to deliver impartial, rapid, and context-appropriate humanitarian assistance, complement public services, and fill critical gaps.

(ii) ARCS internal needs analysis

Recognizing that strengthening capacities, standardizing coordination, and enhancing strategic partnerships are essential to improving access, effectiveness, and sustainability of services, the Afghan Red Crescent Society has conducted a number of internal assessments to define its future priorities.

In December 2024, the Afghan Red Crescent Society carried out an organizational capacity assessment to evaluate its institutional strengths and identify gaps requiring further development. In order to better respond to the needs of populations living in emergency and highly vulnerable conditions, and in alignment with the capacities of other actors, key priority areas for strengthening were identified.

These include expanding health and specialized services; increasing the number and capacity of volunteers; strengthening logistics and mobile service delivery; enhancing community engagement and public awareness; improving rapid response capacity; expanding access to sustained health and protection services in underserved areas; and leveraging the Society's neutral mandate to strengthen international cooperation.

Furthermore, the findings of the comprehensive capacity and vulnerability assessment conducted between October and November 2025 provide a clear direction for the 2026–2030 Strategic Plan. These findings indicate that the Afghan Red Crescent Society should maintain its central role in humanitarian response during both normal and emergency situations, while also placing greater strategic emphasis on sustainability, self-reliance, prevention, and development-oriented programming.

Strengthening the delivery of specialized services, improving data collection and analysis systems, enhancing staff skills and volunteer capacity, and designing programmes based on identified priority needs are essential to improving the effectiveness and impact of core services.

The following summary outlines the future direction of the Afghan Red Crescent Society to deliver more effective, sustainable, and needs-based services.

Strengthening coordination and strategic partnerships between directorates and provincial branches: At the headquarters and branch levels, strengthening coordination and strategic partnerships is essential to ensure effective cooperation among all departments and external stakeholders, enabling the implementation of programmes in a coherent and integrated manner.

Improving planning, monitoring, evaluation and reporting (PMER) systems and information management: Enhancing PMER systems and information management is critical to support evidence-based decision-making, track progress, and enable timely and effective responses during emergencies through improved data collection, analysis, and utilization.

Financial sustainability and standardization of services: Strengthening financial sustainability through the development of sustainable income sources and reducing reliance on short-term or temporary funding is essential. Standardizing services in line with established benchmarks will ensure quality, continuity, and long-term effectiveness.

Strengthening technical and professional staff capacity: Enhancing the technical and professional capacity of staff through targeted training programmes will improve managerial, administrative, technical, and analytical skills.

Enhancing prevention, resilience, and sustainability-focused programming: Expanding programmes focused on prevention, resilience, and sustainability is essential to reduce vulnerabilities and strengthen communities' ability to withstand shocks.

Increasing community, volunteer, and youth engagement: Strengthening participation of communities, volunteers, and youth in program design and implementation is important to ensure accountability, transparency, and local ownership.

Adoption of modern technology and digital systems: Promoting the use of modern technologies and digital platforms will improve data management, reporting, and the effectiveness of humanitarian response.

Strengthening technical and professional staff capacity: Providing continuous training opportunities for staff will enhance their technical, managerial, and analytical capacities.

During parallel discussions held in 2025 in preparation for the 2026–2030 Strategic Plan, government ministries, United Nations agencies, and other external partners recognized and appreciated the unique capacities of the Afghan Red Crescent Society. These strengths enable the organization to deliver services in the current context of Afghanistan that other actors are unable to provide.

The collected feedback indicates that, due to its trained national volunteer network, public trust, and neutral humanitarian mandate, the Afghan Red Crescent Society is able to operate in high-risk, remote, and conflict-affected areas that are difficult for other organizations to access.

For example, during natural disasters, the Afghan Red Crescent Society can rapidly deploy mobile health teams, provide community-based first aid and emergency response training, and deliver psychosocial support through its local branches. Its physical infrastructure, including health facilities, regional offices, and its ability to mobilize local resources and volunteers, provides it with a unique advantage. This enables the organization to deliver life-saving services and maintain a continuous presence even in unstable conditions.

Recommendations from external partners

- **Strengthening digital information systems:** Improving data collection, monitoring, and reporting tools to support evidence-based planning and coordination.
- **Training of staff and volunteers:** Expanding specialized training programmes, including psychosocial support, gender-sensitive programming, and climate resilience.
- **Logistics and infrastructure:** Strengthening logistics systems and operational infrastructure to ensure timely and effective delivery of humanitarian assistance, particularly in remote and hard-to-reach areas.
- **Volunteer engagement:** Enhancing the participation and role of volunteers in program implementation to improve service delivery and strengthen community-based response.
- **Strategic partnerships:** Expanding collaboration with development partners, including UNDP and other stakeholders, to improve coordination, avoid duplication, and ensure effective use of resources.

Recommendations shared with provincial branches by external stakeholders

1. Establish joint coordination committees with ministries and international partners at the provincial level.
2. Develop and implement joint emergency response plans to prevent duplication of efforts.

3. Activating standardized reporting and information-sharing systems.
4. Conduct joint capacity-building programs and workshops for staff and volunteers.
5. Establish joint operational teams to improve coordination for effective aid distribution.
6. Recruit experienced technical specialists to strengthen coordination with international organizations.

2. Vision, Mission and Fundamental Principles

Our Vision: The Afghan Red Crescent Society wants to have a resilient community with strengthened capacity to assist vulnerable people and to respond effectively during emergencies.

Our Mission: In line with its auxiliary role, the Afghan Red Crescent Society refreshes its humanitarian services in line with changing needs and strengthens capacities to reduce risks among highly vulnerable populations, taking steps toward a sustainable future.

Our Fundamental Principles

ARCS is guided at all times by the following Fundamental Principles of the Red Cross Red Crescent Movement.

Humanity: The Red Cross, born of a desire to bring assistance without discrimination to the wounded on the battlefield, endeavours – in its international and national capacity – to prevent and alleviate human suffering wherever it may be found. Its purpose is to protect life and health and to ensure respect for the human being. It promotes mutual understanding, friendship, co-operation and lasting peace amongst all peoples.

Impartiality: It makes no discrimination as to nationality, race, religious beliefs, class or political opinions. It endeavours only to relieve suffering, giving priority to the most urgent cases of distress.

Neutrality: In order to continue to enjoy the confidence of all, the Red Cross may not take sides in hostilities or engage at any time in controversies of a political, racial, religious or ideological nature.

Independent: The Red Cross is independent. The national societies, while auxiliaries in the humanitarian services of their governments and subject to the laws of their respective countries, must always maintain their autonomy so that they may be able at all times to act in accordance with Red Cross principles.

Voluntary service: The Red Cross is a voluntary relief organisation not prompted in any manner by desire for gain.

Unity: There can be only one Red Cross society in any one country. It must be open to all. It must carry on its humanitarian work throughout its territory.

Universality: The Red Cross is a world-wide institution in which all societies have equal status and share equal responsibilities and duties in helping each other.

Goals, objectives, outcomes and indicators of success

In order to ensure that ARCS plays a significant role in the global implementation of IFRC's Strategy 2030, the following Goals, Objectives, Outcomes and Success indicators represent a national and contextualized set of priorities that link our local work and partnerships from a local to a global framework for humanitarian impact.

Goal 1: Communities most affected by disasters, conflict, health emergencies, climate-change related events, internal displacement and climate related shocks can quickly return to their normal lives.	
Objective 1: Strengthen readiness and response capacities through the establishment of community-based teams and the required structures in 17 most vulnerable Provinces.	
Outcomes	**Success indicators**
1.1.1. Community-based teams and supporting structures are established in 17 most vulnerable provinces for enhanced emergency responses.	1.1.1.1. 17 targeted branches have established a minimum of five Community based teams (CBT). 1.1.1.2. Community-based preparedness and response plans developed through participatory processes. 1.1.1.3. Coordination mechanisms established in targeted provinces for the deployment and management of established teams
1.1.2. All guidance documents, tools, trained human resources and pre-positioned supplies are in place for timely and effective responses.	1.1.2.1. Branch based Hazard specific contingency plans and standard operating procedures (SoPs) developed and disseminated. 1.1.2.2. Disaster management toolkits developed at local and national level. 1.1.2.3. Sectoral teams developed at regional and branch levels in alignment with contextual needs analysis.
1.1.3. Communities demonstrate enhanced readiness to respond to emergencies.	1.1.3.1. Annual refresher trainings conducted in most vulnerable communities. 1.1.3.2. At least one simulation or drill conducted for most vulnerable communities
1.1.4. Communities demonstrate increased resilience to climate related shocks through integrated disaster management and emergency health systems, resulting in	1.1.4.1. Targeted communities have functional early warning systems. 1.1.4.2. Community members in targeted communities trained in climate-adapted disaster management and emergency health practices.

reduced vulnerability, improved preparedness, and enhanced adaptive capacity.	1.1.4.3. Micro-mitigation projects undertaken where feasible in targeted communities. 1.1.4.4. Disaster Management committees established in extremely vulnerable communities.
Objective 2: To strengthen technical and training capacities of branches, regions and Headquarter in the areas of DM and emergency Health in 17 most vulnerable provinces.	
Outcomes	**Success indicators**
1.2.1. Technical capacities and training competencies in disaster management and emergency health enhanced.	1.2.1.1. Multi-sectoral training modules developed targeting 17 most vulnerable provinces. 1.2.1.2. Increased specialized trainings developed and offered at all NS levels.
1.2.2. Coordination and response efficiency improved at all levels	1.2.2.1. Internal coordination mechanisms developed and applied by HQ, regional offices and branches during operations and emergency responses 1.2.2.2. Branch reporting on emergencies improved and support informed decision-making of ARCS senior leadership. 1.2.2.3. Timely and relevant information is shared with Movement partners supporting decision making and response
1.2.3. Emergency health programs are sustained over the long term, communities demonstrate reduced vulnerability, and preparedness for future crises is strengthened.	1.2.3.1. At least 20 Most vulnerable communities trained in health, hygiene and disaster risk reduction in coping with health emergencies and natural disasters 1.2.3.2. Communities' have improved capacity in responding to health emergencies during and after disasters. 1.2.3.3. Emergency health services are incorporated in health plans
1.2.4. Staff acquired knowledge and skills in emergency preparedness and response.	1.2.4.1. HQ, regions and branches have standard protocols for disaster management and health emergencies. 1.2.4.2. Trainings systems are institutionalized and regularly updated 1.2.4.3. Targeted volunteers are equipped and provided required capacity building workshops.
Objective 3: To optimize specialized services to meet the needs of returnees, IDPs, conflict-affected populations in areas such as restoring family links, mine awareness, HRTP, health and first aid in targeted locations.	
Outcomes	**Success indicators**
1.3.1. ARCS specialized services including RFL, mine awareness, HRTP, health and first aid are	1.3.1.1 Effective Camp Coordination and Camp Management capacity strengthened at all levels of ARCS. 1.3.1.2. targeted branches have at least four (4) first aid trainers.

enhanced in terms of quality and accessibility of the target populations.	1.3.1.3. targeted branches have expanded RFL trained volunteers 1.3.1.4. At least two (2) RFL specialists employed in each regional office. 1.3.1.5. Expand HRTP specialist volunteers by ten (10) percent.
1.3.2. At least 20% of identified vulnerable communities report improved knowledge of available services and demonstrate safer practices (e.g., mine awareness, basic first aid).	1.3.2.1 At least five percent of the Afghan population receives mine awareness messages. 1.3.2.2 Information sessions routinely conducted at humanitarian service points and first points of crossing. 1.3.2.3 Community led initiatives promote safety and general knowledge on mines and ordinances
1.3.3. Community-based mechanisms (such as referral systems and trained first responders) are established in all targeted locations, ensuring continuity of support even after external interventions.	1.3.3.1 community members trained as first responders and equipped with information on referral systems in targeted provinces 1.3.3.2. Effective coordination in referral systems in place at all health facilities
Objective 4: To strengthen internal and external coordination and accountability through the establishment of partnerships and increased engagement for effective and efficient service delivery.	
Outcomes	**Success indicators**
1.4.1 Internal and external coordination and accountability are improved through effective partnerships and increased stakeholders' engagement, ensuring efficient and high-quality service delivery.	1.4.1.1 17 branches trained in the management and functioning of emergency operations centres (EOCs). 1.4.1.2 Response structures defined at all levels of the National Society. 1.4.1.3 Mapping of all response partners in country completed. 1.4.1.4 Database of suitable representatives created with the required rosters to participate in coordination forums at all levels.
1.4.2 Clear communication channels established across departments, reducing duplication of effort and improving transparency.	1.4.2.1 All directorates and independent use standard communication channels for crises-based information sharing. 1.4.2.2 All departments coordinate activities to plan, avoid duplication and ensure transparency at all levels
1.4.3 Service delivery enhanced through launched partnership initiatives for training and community engagement.	1.4.3.1 At least 5 new partnership initiatives established facilitating trainings and community engagement. 1.4.3.2 Community engagement and access to services facilitated through new partnerships

Goal 2: Most vulnerable populations are made more resilient through the provision of health and integrated risk reduction interventions and sustainable services.	
Objective 1: To address prioritized gaps by providing primary healthcare services, vaccination implementation, nutrition support, mental health and psychosocial support to the most vulnerable and remote populations, including women and children.	
Outcomes	**Success indicators**
2.1.1 Vulnerable and remote populations have improved and equitable access to integrated primary healthcare services, including RMNCAH, immunization, nutrition, MHPSS, and CBHFA, leading to reduced preventable morbidity and mortality.	2.1.1.1 ARCS has fully functional and equipped health facilities (100MHTs, 38 HSCs, 47 BHCs, 57 Health Camps and 01 CHC), and five new fixed HFs along with MHNTs as per emergency need established. 2.1.1.2 ≥ 90% coverage of screening of acute malnutrition for children under 5 years of age, and proportion of operational health facilities. 2.1.1.3 All health facilities in 34 provinces have a functional, documented community feedback and accountability mechanism (e.g., health committees, and complain box feedback mechanism). 2.1.1.4 Proportion of operational health facilities (BHCs/SHCs) delivering Community-Based Management of Acute Malnutrition (CMAM). 2.1.1.5 Unique individuals reached by Mobile Health & Nutrition Teams (MHNTs) with integrated services. 2.1.1.6 Disability screening with support services are integrated in all health facilities for rehabilitation services and established disability prevalence mapping in all provinces. 2.1.1.7 Health staff trained in inclusive and disability-responsive service delivery with assistive devices included in PHC supply chains.
2.1.2 Enhanced quality, equity, and consistency of RMNCAH, MHPSS, CBHFA, nutrition, and immunization services across ARCS health facilities, achieved through the adoption of standardized clinical protocols, modernization of infrastructure, and sustained capacity building of health providers.	2.1.2.1 90% of supported health facilities implement standardized RMNCAH, nutrition, and EPI protocols aligned with MoPH requirements. 2.1.2.2 100% of ARCS health care staff trained on updated RMNCAH, nutrition, and EPI protocols. 2.1.2.3 95% of supported health facilities are fully equipped to deliver functional RMNCAH, nutrition, and EPI services. 2.1.2.4 90% of PHC facilities provide skilled maternal and child health services (ANC, PNC, FP, and delivery) with essential supplies, equipment, and established emergency referral and transport systems. 2.1.2.5 95% of PHC facilities will report maternal and child health service data into DHIS-2 with complete and timely records.

2.1.3 Routine immunization services are expanded and strengthened through mobile outreach, improved cold chain systems, and active defaulter tracing, resulting in higher full immunization coverage and reduced disparities in access.	2.1.3.1 At least 90% routine immunization coverage achieved in high-priority districts, white and hard to reach areas. 2.1.3.2 90% of children under five years are fully immunized in ARCS-supported districts 2.1.3.3 RI-MHTs deployed across prioritized areas as guided by EPI of MoPH. 2.1.3.4 At least a 10% reduction in dropout rate between Penta 1 and Penta 3 achieved. 2.1.3.5 Full identification and vaccination of children in hard-to-reach and white area achieved. 2.1.3.6 Implementation of functional cold chain system for maintenance of quality.
2.1.4 Communities demonstrate sustainable ownership and accountability for health services, with trained volunteer networks effectively leading health promotion, disease prevention, and first aid delivery.	2.1.4.1 6000 new Community Health Volunteers (CHVs) trained, actively mobilized. 2.1.4.2 CBHFA volunteers linked to health facilities to facilitate to healthcare services. 2.1.4.3 Volunteers trained using community response mechanism (CRM). 2.1.4.4 Community feedback mechanisms established to for health services 2.1.4.5 20% increase in number of grandmother committees, health shuras, community influencer and health volunteers.
Objective 2: To strengthen and expand the provision of quality specialized curative services for conditions such as cardiac surgery and central hospitals, mental health, rehabilitation with a focus on integrating services across the continuum of care.	
Outcomes	**Success indicators**
2.2.1 The Quality and continuity of **specialized curative services** have been strengthened **to ensure continuous and coordinated care from diagnosis to recovery**.	2.2.1.1 High-quality, integrated and people-centred health services accessible to at least 90% of catchment population of Kabul, Badam Bagh hospital. 2.2.1.2 Fully functional cardiac hospital with increased admission capacity of 30 percent.
2,2,2 Increase availability and accessibility of mental health & rehabilitation centers and MHPSS services have been strengthened through health facilities & community awareness.	2.2.2.1 Seven new Mental Health Treatment and Rehabilitation Centres (MHTRCs) functional and operationalized at the zonal level with 50% health facilities (MHNTs, HSCs, BHCs, CHC, and Health Camps) with integrated routine MHPSS screening and basic psychosocial support. 2.2.2.2 500 health facilities' staff, emergency response teams, and non-health sector staff trained in Psychological First Aid (PFA), MHPSS, and referral with 80% of MHTRCs outpatients (OPDs) with digitally recorded healthcare plans. 2.2.2.3 National MHPSS awareness and anti-stigma campaigns are delivered biannually with 10% increase in community help-seeking behaviour for psychosocial support services in ARCS-supported areas.

Objective 3: To strengthen community engagement and resilience against the increasing frequency and severity of climate and conflict-related hazards and health risks.	
Outcomes	**Success indicators**
2.3.1 Communities are well prepared to protect their health during climate shocks (floods, droughts, heatwaves) and conflict-related emergencies.	2.3.1.1 At least 90% of ARCS supported health facilities upgraded with essential equipment, skilled staff, and functional EmONC services with submission of complete and timely data through surveillance, HMIS, and DHIS-2. 2.3.1.2 Maternal Mortality Ratio in ARCS-supported health facilities are reduced to align with global best outcomes benchmarks during emergencies.
Objective 4: To strengthen and expand the delivery capacity of WASH services and best practices in the most vulnerable communities and health facilities.	
Outcomes	**Success indicators**
2.4.1 Vulnerable communities and health facilities and schools have increased access to safe water and improved sanitation and hygiene services.	2.4.1.1 Water harvesting and purification facilities installed in select communities 2.4.1.2 Context specific IEC materials developed and shared especially in times of emergencies. 2.4.1.3 6000 trained volunteers and health shura to deliver health and WASH messages to the communities. 2.4.1.4 Awareness regarding WASH messages at schools and HFs level. 2.4.1.5 Community surveillance capacity developed in most vulnerable provinces.
2.4.2 Improved emergency preparedness and continuity of safe health service delivery through strengthened WASH infrastructure, institutional capacity, and availability of essential emergency supplies.	2.4.2.1 Seven regional warehouses with emergency health and WASH kits. 2.4.2.2 All targeted health facilities where WASH infrastructure has been rehabilitated to meet minimum standards 2.4.2.3 Capacity development of staff at HQ and field level for quality implementation of WASH programme.
Objective 5: To strengthen institutional capacity for effective readiness, preparedness and response by improving the skills of staff and volunteers, enhancing infrastructure in existing emergency health services, and expanding innovative areas (including blood bank and ambulance services).	
Outcomes	**Success indicators**
2**.5.1** New flagship services (blood bank and ambulance) expanded at National and Regional levels.	2.5.1.1 One fully equipped functional blood bank established at central level meeting safety standards providing safe blood transfusions. 2.5.1.2 Seven fully equipped ambulances and operational with dispatch and communication system in 07 zones having 02 trained staff as well. 2.5.1.3 Ambulance and blood service units linked with regional health facilities and trauma centres for coordinated emergency care.

2.**5.2** Staff and Volunteers have enhanced skills and infrastructure to deliver services at scale.	2.5.2.1 ARCS's seven regional offices are able to initiate a coordinated health response within 24 hours of a disaster alert. 2.5.2.2 Updated ARCS Health Emergency Preparedness and Response Plan (EPRP), aligned with national protocols and approved by leadership. 2.5.2.3 30 percent of staff and volunteers trained in epidemic preparedness, outbreak response, and emergency medical services. 2.5.2.4 Emergency Medical Teams (EMTs), ambulance units, and rapid response teams equipped and operational, that communities are more resilient through early warning and community-based surveillance. 2.5.2.5 All ARCS emergency health interventions systematically integrate safeguard and social inclusion minimum standards. (e.g., safe access for women, dignity kits). 2.5.2.6 100 percent of ARCS branches CBS data linked to MoPH early warning systems.

Goal 3: Communities benefit from strengthened inclusive, equitable, accountable, and sustainable humanitarian, social, and livelihood services that ensure access to a dignified life.	
Objective 1: To increase the quantity, capacity, resources, and quality of Marastoon and its services, enabling it to reach more internal and external beneficiaries.	
Outcomes	**Success indicators**
3.1.1 Expanded and equitable access for vulnerable populations to supportive, educational, health, and livelihood services.	3.1.1.1 Case management systems and competencies developed and operationalized. 3.1.1.2 ARCS role in social protection is defined. 3.1.1.3 At least 5 percent of the widows receive ARCS specialized services. 3.1.1.4 Decreased level of challenges faced by homeless, poor and unaccompanied families. 3.1.1.5 At HQ and regional levels, joint vocational training, small-scale income-generating (livelihood) programs, and initiatives related to incidents, health, and community engagement have been implemented. 3.1.1.6 Basic training on community engagement is provided to 3,000 individuals. 3.1.1.7 3 new Marastoons are established in new target areas.
3.1.2 Strengthened role of m*arastoons* as effective and active social support institutions nationwide.	3.1.2.1 The Marastoons have used standard models for community support and resource mobilization to ensure sustainability. 3.1.2.2 The role of Marastoons in social welfare has been formally incorporated into the approved mission and strategic documents of the Red Crescent.

	3.1.2.3 Formal cooperation agreements/Memoranda of Understanding (MoUs) have been signed with relevant government authorities to strengthen the services of the Marastoons. 3.1.2.4 Financial resources for the Marastoons have been increased to provide improved services in the targeted communities. 3.1.2.5 Marastoon services have been enhanced at the national level.
3.1.3 Enhanced capacity of beneficiaries to pursue independent and sustainable livelihoods.	3.1.3.1 50 percent of residents leaving marastoon centres self-sufficient in society. 3.1.3.2 Business incubator established at select Marastoons 3.1.3.3 Livelihood pursuits linked to economic assessments and capacity of beneficiaries 3.1.3.4 New income generation opportunities created. 3.1.3.5 One business support centre established in each marastoon 3.1.3.6 10 percent of women benefitting from marastoon services have expanded access to educational and skills opportunities. 3.1.3.7 Improved quality of life for households with people with disabilities through effective training interventions. 3.1.3.8 The living standards of families with members with disabilities improved through effective training programs.
3.1.4 Strengthened capacity and quality of health, educational and psychosocial support services for internal and external beneficiaries based on more comprehensive case management and exit strategies.	3.1.4.1 Specialized marastoon centre services better integrated with ARCS health services. 3.1.4.2 Partnerships established with specialist institutions to provide support to targeted beneficiaries. 3.1.4.3 Livelihood initiatives have established sustainable programs at the regional level. 3.1.4.4 Marastoons have new specialised services in the areas of health, education and psychosocial support services. Beneficiaries have increased access to standard health and psychosocial services at Marastoons. Increase in referrals to specialised or psychotherapeutic centres achieved for beneficiaries in need. Procedures or operational guidelines developed for community reintegration of beneficiaries.

Objective 2: To enhance sustainable livelihoods and build economic resilience among vulnerable populations by expanding skills development, fostering inclusive income-generation opportunities and livelihood support systems.	
Outcomes	**Success indicators**
3.2.1 Community-driven livelihood support systems are strengthened, leading to local ownership and long-term economic stability for vulnerable groups.	3.2.1.1 Livelihood support systems managed by community-led committees with documented decision-making processes established and linked to marastoon centres. 3.2.1.2 30 percent reduction reliance on external aid for basic needs among targeted communities 3.1.4.5 : Livelihood initiatives have locally developed sustainability plans.
3.2.2: Enhanced vocational training and expanded educational opportunities for target groups, specifically women and households and persons with disabilities.	3,2,3,1: increase in delivery of vocational training in targeted branches. 3.2.3.3: All training centres are equipped and operational in target areas. 3.2.3.4: The participation of women and persons with disabilities in training workshops has increased. 3.2.3.5: All training programmes designed align to market needs.
Objective 3: To strengthen community engagement, accountability, and evidence-based practices to enhance community resilience, build trust, and improve ARCS access to communities.	
Outcomes	**Success indicators**
3.3.1 Increased active community participation in decision-making and programme implementation.	3.3.1.1 Branch membership increased across targeted provinces. 3.3.1.2 Branch services reflect community consultation across all sectors. 3.3.1.3 Activities planned or adapted with direct community participation
3.3.2 Improved transparency and accountability in the delivery of humanitarian services.	3.3.2.1 Feedback and complaint mechanisms continuously evaluating changing community needs established in the 17 most vulnerable provinces to include care centres. 3.3.2.2 Communities are aware of their rights and the accountability mechanisms.
3.3.3 Data-driven and evidence-based decision-making and planning increased.	3.3.3.1 Humanitarian services planning and delivery guided by enhanced data gathering and analysis capacity 3.3.3.3 Emergency needs assessment capacity strengthened at all levels. 3.3.3.4 Digitalized feedback mechanism introduced across all branches

Goal 4: The Afghan Red Crescent Society is a strong, capable and well-structured National Society that continuously delivers impartial, neutral, effective, sustainable and relevant humanitarian services to vulnerable people, while being accountable to its partners.

Objective 1: Strengthen and expand the overall and specialized capacities of branches in the most vulnerable provinces and establish minimum standards for improved service delivery in alignment with the context and the national society's strategic goals.	
Outcomes	**Success indicators**
4.1.1 Branches in the most vulnerable provinces demonstrate strengthened specialized capacities and meet minimum service delivery standards, resulting in more timely, equitable, and context-appropriate humanitarian support.	4.1.1.1 Minimum structural and service standards developed and implemented. 4.1.1.2 Branch capacities fully mapped with skills and resource gaps identified and addressed. 4.1.1.3 Services aligned to the changing needs of the operational areas confirmed and applied.
4.1.2 Branches have capable leadership and updated management structures to guide and support their operations	4.1.2.1 Good Leadership modules developed. 4.1.2.2 New provincial branch model with district representation piloted.
4.1.3 Branches have increased presence in most vulnerable communities	4.1.3.1 Volunteers and members presence in the most vulnerable and remote communities expanded.
4.1.4 Branches have sufficient resources to support their operations and maintain their presence in communities.	4.1.4.1 Branch resource mobilization strategies developed and implemented. 4.1.4.2 Agreements established with diverse partners to support branch operations and services.
4.1.5 The protection and safety of staff, volunteers, members, assets, and ARCS's humanitarian operations have been ensured in accordance with the seven Fundamental Principles, the Safe Access Framework, Risk-Informed Health Care Guidelines, and protection and safety guidelines and procedures.	4.1.5.1 Investment has been made in the skills development of staff and volunteers, and they have become agents of community support. 4.1.5.2 100% of operational staff, members, and volunteers of the ARCS received guidance and training on protection, safety, and HCiD. **4.1.5.3** To ensure protection and safety standards and promote a culture of good security practices, 100% of national society offices have undergone safety assessments, and all offices are equipped with protection and other safety tools. **4.1.5.4** The protection and safety plan and framework have been fully implemented at the central, zonal, and field office levels.
Objective 2: Enhance and expand ARCS' volunteering and youth management capacity to increase recruitment, engagement and retention by 40% in the most vulnerable provinces across Afghanistan.	
Outcomes	**Success indicators**
4.2.1 ARCS achieves a 40% increase in youth and volunteer recruitment, engagement, and retention in the most vulnerable provinces	4.2.1.1 Increased diversity of youth and volunteer profiles across all provinces. 4.2.1.2 Updated volunteering and youth policies and strategies. 4.2.1.3 Volunteer Management system expanded to all provinces

	4.2.1.4 Volunteers and youth have been effectively motivated in all provinces. 4.2.1.5 Safety and security of youth and volunteers significantly entrenched in the humanitarian services deliver.
4.2.2 Volunteer Corps professionalised for the delivery of specialised services or interventions across Afghanistan	4.2.2.1 Technical teams developed to supplement ARCS staff with specialized tasks. 4.2.2.2 Agreements established with authorities and technical organizations to support specific technical functions as needed.
Objective 3: Strengthen ARCS' resilience and accountability by modernizing systems, diversifying resources, and investing in human resources to ensure transparency, standardization, and the timely delivery of operational support and services at all levels.	
Outcomes	**Success indicators**
4.3.1 ARCS operates as a resilient and accountable National Society with modernized systems, diversified resources, and skilled human capital, ensuring transparent, standardized, and timely delivery of operational support and humanitarian services across all levels.	4.3.1.1 The resource mobilization capacity at branch level has been strengthened for financial sustainability through relevant training initiatives. 4.3.1.2 Organizational structure aligned to operational needs to support service delivery. 4.3.1.3 Contextualized Sectoral and Administrative Policies/ Manuals updated to support human resource management and operational activities. 4.3.1.4 Standard systems for financial resource mobilization have been established. 4.3.1.5 50% of investors have been engaged for financial resource mobilization.
4.3.2 ARCS operations fully digitalized for improved efficiency and accountability.	4.3.2.1 All branches provided with internet connection and adequate technical support. 4.3.2.2 Essential standard digital systems for operational support have been established with new platforms, and relevant staff have acquired IT/IM skills. 4.3.2.3 Data management guidelines have been developed and implemented at all 4.3.2.4 80% of paper-based processes are digitized.
Objective 4: Establish new leadership and operational model aligned to the national context and organizational vision and mission.	
Outcomes	**Success indicators**
4.4.1 Updated ARCS Constitution aligned to its revised legal base.	4.4.1.1 The law and statute have been amended as needed. 4.4.1.2 Internal procedures and policies have been organized, arranged, and aligned with the revised statute and law, in accordance with the Movement's policies. 4.4.1.3 Awareness and monitoring regarding the law and statute have been improved.
4.4.2 Membership Base and system strengthened and aligned with the statute	4.4.2.1 Policies, procedures, and guidelines for membership have been developed and approved in accordance with the statute.

	4.4.2.2 A mechanism for members' rights and responsibilities has been established and implemented.
Objective 5: The ARCS has a unified, transparent, and responsible system covering planning, monitoring, evaluation, reporting, information management, community engagement, and learning from response operations. This system enables evidence-based decision-making at all organizational levels and ensures accountability to partners.	
Outcomes	**Success indicators**
4.5.1 ARCS staff and volunteers at headquarters, regional, and branch levels possess the knowledge, skills, and practical competencies in planning, monitoring, evaluation, reporting, information management, community engagement and accountability, and the documentation of lessons learned.	4.5.1.1 At least 90% of directorates and technical units at headquarters, regional, and branch offices will have developed and implemented annual and mid-term review plans in accordance with the Strategic Plan objectives and based on a standardized planning framework. 4.5.1.2 At least 90% of programmes and projects will consistently use standardized and updated planning, monitoring, evaluation, and reporting tools and formats to enhance transparency and accountability. 4.5.1.3 Advanced and standardized information management system at headquarters, regional, and branch offices fully implemented and operational, 4.5.1.4 Programmes and projects effectively implement standardized gender, community engagement and accountability (CEA), and feedback and complaints mechanisms in accordance with the accepted standards of the National Society and the International Movement.
4.5.2 ARCS staff and volunteers at headquarters, regional, and branch levels demonstrate enhanced capacities in planning, monitoring, evaluation, and reporting, contributing to more effective and accountable organizational.	4.5.2.1 At least 90% of relevant staff and volunteers at headquarters, regional, and branch levels have completed standardized training in planning, monitoring, evaluation, and reporting, and possess the capacity to develop annual operational plans aligned with the Strategic Plan, as well as to implement and monitor project progress. 4.5.2.2 At least 80 percent of staff and volunteers involved in programme implementation effectively apply standardized monitoring and evaluation tools and methodologies, including strategic indicators and the logical framework. 4.5.2.3 At least 80 percent of staff and volunteers involved in humanitarian response will have received the necessary training in community engagement, feedback and complaints mechanisms, and standardized community accountability approaches, and will be effectively applying these in practice.

	4.5.2.4 At least 80 percent of programme and response teams will be able to systematically document lessons learned and effectively use monitoring and evaluation findings, integrating them into improved planning and subsequent response operations.

3. Implementation of the Strategic Plan 2026-2030

a. Disseminating the Strategic Plan 2026-2030 internally and externally

Disseminating the Strategic Plan to Internal Stakeholders

Printed copies of the Strategic Plan will be shared with internal stakeholders. The vision, mission, goals, and objectives of the Strategic Plan will be presented through clear infographics displayed at Headquarters, Regions and Branches. Following internal awareness and guidance sessions, five-year operational plans aligned with the Strategic Plan will be developed. These operational plans will be presented clearly and visually, including through Gantt charts, and displayed at headquarters, regional offices, and branch levels. This will enable all internal stakeholders to easily track implementation progress and remain continuously informed. To ensure accessibility and understanding for all internal audiences, the plans will also be produced in simplified formats, including concise printed versions tailored for members, volunteers, and youth.

A. Dissemination of the Strategic Plan to External Stakeholders

Printed and digital versions of the Strategic Plan will be shared with key partners and external stakeholders. An electronic version will be published on the Afghan Red Crescent Society's website, accompanied by regular progress updates and infographics. These infographics will be disseminated through digital platforms, print materials, and social media to inform the wider public. Tailored formats will also be developed for key external stakeholders, including government ministries, United Nations agencies, and donors/partners.

In early 2026, official launch events for the Strategic Plan will be organized both in-person and online. These will be followed by continued presentations at various international and regional forums, including Doha meetings and roundtable discussions with Movement partners and external stakeholders.

B. Monitoring, Evaluation, and Reporting of progress

Existing draft annual and sectoral plans and strategies of the Afghan Red Crescent Society will be aligned with the new Strategic Plan. Implementation of roadmaps will be developed for each central department, regional office, and branch, clearly outlining:

- The vision of success by 2030
- Annual milestones toward achieving the 2030 targets
- Identification of responsible stakeholders (relevant departments, regional offices, and branch management)
- Leadership roles, participating departments, and accountability arrangements
- Contributing partners, where applicable

Each plan and strategy will include clearly defined objectives, outcomes, indicators, activities, budgets, responsibilities, annual milestones, and participating partners. Annual reviews will be conducted to strengthen coordination and effectiveness.

The Afghan Red Crescent Society is committed to transparency in monitoring and reporting, open data sharing, meaningful participation of affected populations in planning and monitoring processes, efficient use of resources, and institutional learning. This approach ensures that constructive feedback is systematically integrated to enhance humanitarian impact, supported by mid-term and annual evaluations.

Regular reports will be provided to all stakeholders—including communities, leaders, volunteers, youth, staff, and partners—on progress against objectives and measurable results. These analytical reports will include findings and recommended corrective actions to strengthen trust among stakeholders. Regular updates will also be submitted to the International Federation of Red Cross and Red Crescent Societies' data and reporting system (FDRS).

Effectiveness, accountability, and transparency remain core commitments of the Afghan Red Crescent Society. Accordingly, performance indicators are embedded within the Strategic Plan framework. Updated operational reporting systems will leverage digital processes to collect and consolidate real-time data from branches to regional offices and headquarters. Over the five-year strategic period, the National Society will establish and maintain a unified, standardized, and sustainable information management system, covering data collection, analysis, storage, and sharing to support evidence-based decision-making at all organizational levels. Data protection, confidentiality, and security will be ensured in line with internal regulations and IFRC standards, in both routine and emergency contexts. Capacity-building workshops will be conducted at headquarters, regional, and branch levels to strengthen skills in monitoring, evaluation, and information management.

Community Engagement and Accountability (CEA) will serve as a foundational enabler of effective, trusted, and people-centered humanitarian action throughout the 2026–2030 Strategic Plan period. The Afghan Red Crescent Society will strengthen systematic, inclusive, and safe community engagement processes, and expand mechanisms for receiving and responding to community feedback and complaints across all operational contexts. This will ensure that the voices of women, men, youth, older persons, and persons with disabilities are meaningfully reflected in decision-making processes.

CEA will be institutionalized as a core organizational principle across the entire program cycle—from assessment and design to implementation, monitoring, and learning—rather than treated as a standalone activity. Investments will be made in staff, volunteer, and leadership capacity at both headquarters and branch levels through clear policies, standard operating procedures, digital and non-digital feedback systems, and continuous learning initiatives. Strengthening information sharing, managing expectations transparently, responding to feedback in a timely manner, and integrating CEA with Protection, Gender and Inclusion (PGI) and Monitoring, Evaluation, Accountability and Learning (MEAL) functions will enhance community trust, improve program quality, and further position the Afghan Red Crescent Society as a credible, responsive, and accountable national humanitarian organization.

C. Resource Mobilization at Regional, National, and Global Levels

The Afghan Red Crescent Society is committed to strengthening and expanding its humanitarian partnerships, diplomacy, and engagement at regional, national, and global levels, in line with the Fundamental Principles. Through active participation in Movement coordination platforms and implementation of Movement decisions, the National Society will continue to broaden partnerships and promote innovative approaches to humanitarian service delivery.

At the national level, while continuing to generate reliable income through its auxiliary role, the Afghan Red Crescent Society aims to further expand its capacity for developing humanitarian partnerships. This will be pursued through online fundraising systems, engagement with individual donors, collaboration with the Afghan private sector, effective asset management, membership contributions, and initiatives such as Afghan Red Crescent Week.

At the international level, the Afghan Red Crescent Society will work in coordination with Movement components and other national and international partners to deliver effective and sustainable humanitarian services. This will include participation in humanitarian forums, expanded collaboration through regional and global networks, and engagement in Movement coordination mechanisms. Institutional and technical capacities of the National Society's international relations function will be strengthened to support strategic objectives, maintain effective partnerships, and ensure active participation in these forums. Partnership agreements, memorandum of understanding aligned with Movement principles, and well-developed proposals for resource mobilization will be further strengthened through regular, sustained, and structured coordination meetings with Movement partners and other national and international stakeholders.