

PD-ABA-405

64625

ASSISTANCE THROUGH PRIVATE VOLUNTARY  
ORGANIZATIONS

PVO Co-Financing (306-0201)  
Rural Assistance Project (306-0208)

### Background:

Since the beginning of its program, A.I.D. has financed European and American Private Voluntary Organization (PVOs) activities in Health, Food Aid, Education, and Agricultural production. In FY 1986, grants were made to sixteen PVOs (\$5.3 million from Mission and \$4.2 million from AID/Washington funds). Fifteen continuing activities received dols 9.4 million in FY 1987, PVOs received \$9.4 million in FY 1987. PVOs received another \$9.4 million in FY 1988, and expect to receive \$14 million in both FY 1989 and 1990.

A.I.D. funds PVOs in the Health Sector, both for direct provision of health services inside Afghanistan by expatriate and Afghans staff, and through training of Afghans by expatriate and Afghan staff at all levels of health care. Typically those trained will be supplied with pharmaceuticals and equipment appropriate to their skill level. Trained personnel are then to establish health post in association with parties, commanders and local councils (shuras). Monitoring operations are designed to assure, in so far as possible under the conditions, that the post are operating, salaries received, and records kept for purposes of resupply and retraining. Currently these training and supply efforts for Afghans are taking precedence over direct provision of health services by expatriates.

A.I.D. is financing the PVOs through two funding vehicles; the PVO Co-Financing Project and the Rural Assistance Project. Selection criteria under PVO Co-Financing are intentionally broad and flexible. Currently the project is primarily, but not solely, financing health activities (including support to the Committee for Medical Coordination, a group of health PVOs which are trying to standardize medical programs and coordinate their activities).

The Rural Assistance Project (RAP): this project was designed to encourage PVOs who were distributing cash for food to move into activities that are more developmentally-oriented and with an agricultural production bias. The project has four components: cash grants to families for survival in remote areas which are difficult to reach with commodities or other assistance; cash grants to families for emergencies created by military destruction or natural disasters; grants for agricultural development activities; and the grants for vanguard resettlement activities. The RAP is administered by the International Rescue Committee, which reviews proposals and recommends approval or disapproval to A.I.D., monitors PVO activities financed under the project, and assists them in strengthening their administrative capacities.

### Progress to Date:

There has been a heavy demand for resources under both the PVO Co-Financing and the Rural Assistance Projects. Three US PVOs have been

financed by A.I.D. to date, whereas several European organizations have been assisted with U.S. funds because some of their personnel are experienced practitioner within Afghanistan and because of their governments' inability to meet their financial requirements. Anticipating that the prohibition of travel of U.S. citizens inside Afghanistan will be lifted in the next year or so and that an increased number of U.S. PVOs will consequently be interested in Afghan operations, the Mission is encouraging European PVOs to look increasingly to their home governments for financial support.

The following is a list of PVOs to which the Mission has made grants over the past three fiscal years:

- American: International Medical Corps  
Mercy Corps International  
Freedom Medicine  
Care  
Save the Children Federation
- French: Amite Franco-Afghane  
Solidarite Afghanistan/Medical Refresher Course for Afghans  
Medicine du Monde  
Gilde du Raid
- Belgian: Aide Medicale International/Medical Training for Afghans  
Solidarite Afghanistan/Medical Training for Afghans
- British: Afghanaid
- German: German Afghanistan Committee
- Austrian: Austrian Relief Committee
- Swedish: Swedish Committee for Afghanistan
- Multiple  
PVO: Committee for Medical Coordination

Planned Future Activities:

The primary focus during the resettlement and rehabilitation period will be to help ensure that conditions inside Afghanistan are such that the existing and returning populations are able to sustain themselves. This will mean cooperating with the U.N. and other donors to ensure that the short-term needs of food, shelter, health and clothing can be met.

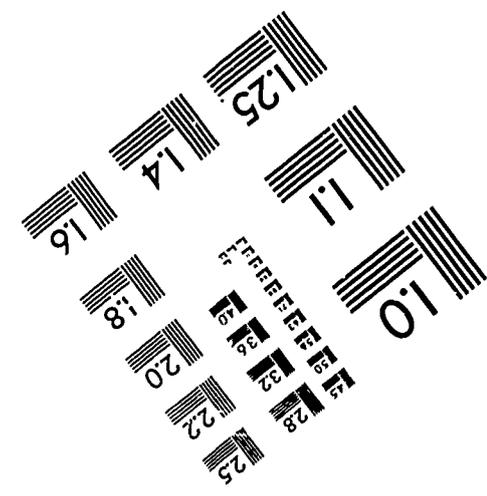
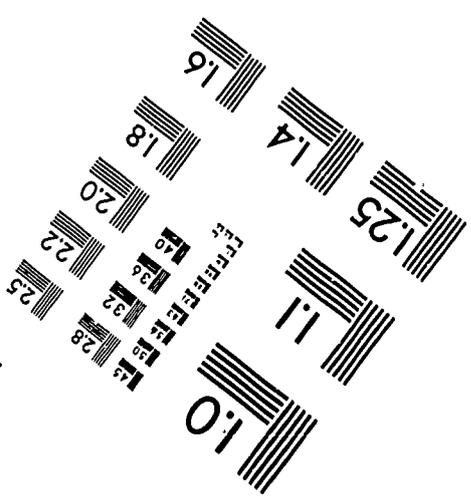
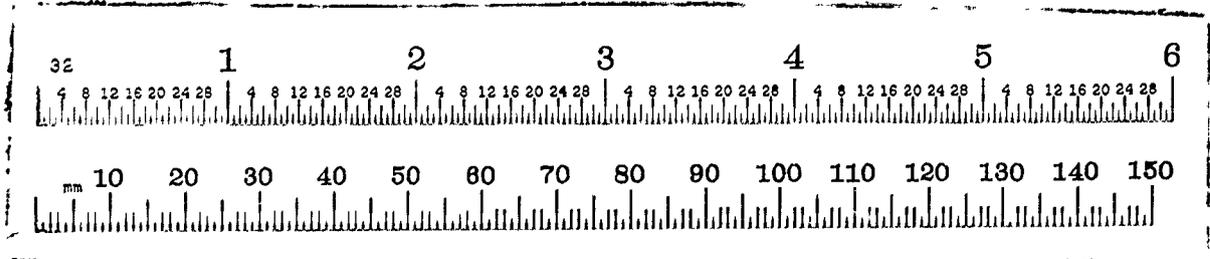
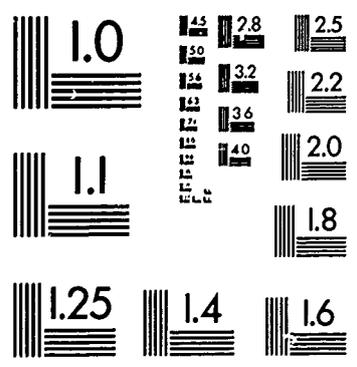
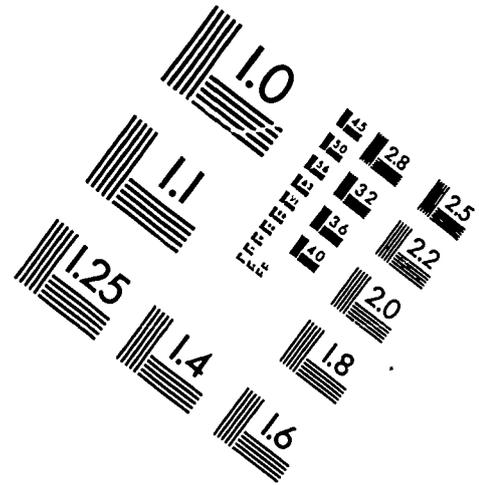
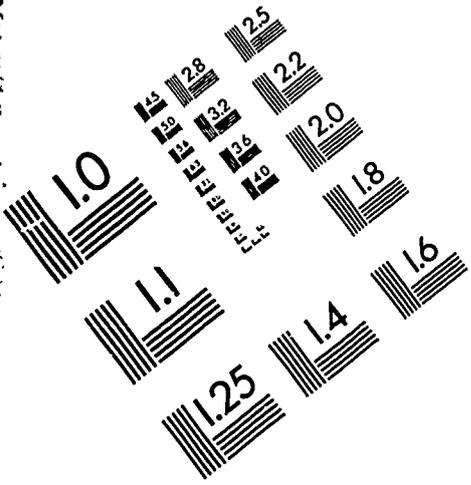
However, if sustained resettlement is to be accomplished, the provision of relief assistance must be designed so as to avoid retarding self-help and local commercial and agricultural development. Similarly, relief

assistance cannot be provided in the absence of activities that will reduce the period of the recipients' dependency on such assistance. To the extent U.S. Government resources and U. N. resettlement capabilities permit, A.I.D. intends to support activities that will facilitate the transition from relief to rehabilitation and construction.

A.I.D. has a number of activities that are already contributing to reducing the dependency of the Afghans on outside assistance, such as the rehabilitation of irrigation channels and farm-to-market roads under the Agriculture Sector Support Project. It would be a mistake to choke these activities or in any way dismantle the institutions and systems that make them possible.

The success of resettlement and rehabilitation will likewise be dependent on the continued willingness and ability of A.I.D. and other donors to "Afghanize" the effort--outsiders cannot do it all; nor will Afghans allow them to do so.

A.I.D. will continue to provide assistance through PVOs during resettlement and rehabilitation but increasingly it will shift its resources from European to U.S. PVOs. European governments are being encouraged to increase their contributions to the PVOs of their respective countries so that A.I.D. funding to non-U.S. PVOs can decrease.



90

50