Summary of the Operation

On 15 September 2015, the International Federation of Red Cross and Red Crescent Societies (IFRC) supported the Papua New Guinea Red Cross Society (PNGRC) through the Disaster Relief Emergency Fund (DREF) allocation, to deliver humanitarian aid to families affected by the frost and drought resulting from the El Niño effect.

The operation experienced some challenges in implementation, including visa difficulties for the food security team leader, security issues, and delays while negotiating with communities for safe access. As a result the operation was extended for three months to allow sufficient time to implement the activities.

The DREF operation has been successful on a number of levels:

The operation fully reached its target outcome, in total some 3,012 households (16,566 people) were reached with hygiene promotion and jerry cans.

1 First reported by the NDR; however the multi-agency assessment indicated 1.7 million people are affected in Highlands region, 170,000 in Momase and 646,000 in New Guinea Islands.
The DREF operation has built the capacity of the Mt Hagen branch of PNGRCS in a number of core areas including assessment, hygiene promotion, distribution, monitoring and beneficiary communications. Off the back of the operation, the Mt Hagen branch has launched a volunteer recruitment drive. The operation has also built the capacity and confidence at PNGRCS headquarters and the four branches that participated in the hygiene promotion training (facilitated by Touching the Untouchable).

As a result of this DREF operation, PNGRC has built partnerships with Care International and Touching the Untouchable, a local hygiene promotion NGO and has the opportunity to develop these relationships further.

The DREF operation recognized the need to train women hygiene promoters to reach the target communities and as a result, 55 women have been trained and empowered. The women will take these skills and confidence back to their own communities.

The DREF operation has highlighted the good cooperation between PNGRC, the IFRC and the ICRC in Papua New Guinea.

This DREF received major contribution from the European Commission Directorate-General Humanitarian Aid and Civil Protection (DG ECHO). The IFRC, on behalf of the Papua New Guinea Red Cross, would like to extend its appreciation to all partners for their continued support.

The DREF operation concluded on 15 March 2016, and has currently recorded an expenditure of CHF 129,999. The attached financial statement is issued on a preliminary basis as some provisions are being cleared. A final report will be issued by end of July 2016.

**Description of the disaster**

Papua New Guinea (PNG) has been experiencing a prolonged dry spell since May 2015 which is the consequence of changing climatic conditions caused by El Nino. The Government of Papua New Guinea estimated that up to 2.4 million people could be affected.

On 7 August 2015, the PNG National Weather Service (NWS) announced that the country was experiencing a severe El Niño event, which was forecasted to continue for eight to 10 months with reduced rainfall in all parts of the country. The worst frost took place between 11 to 14 August, affecting high altitude places (above 2,200m), which are mostly located in the Highlands.

The impact of the frost and drought has been classified into five categories\(^2\), according to the effects on food, water and health. Category 1 indicates no significant disruption to food supply, water supply or health problem, through to Category 4 – no food in gardens and/or water in short supply and possibly polluted, while the highest level, a Category 5 indicating an extreme situation, only famine food available, or water in very short supply. Towards the end of August 2015, the National Disaster Centre estimated the number of people in Categories 3 and 5 in the Highlands to be over 1 million.\(^3\)

The availability of food in the most affected areas remains low despite limited food distributions by government and some faith-based actors. The majority of staple food crop gardens including kaukau (sweet potato), potato and vegetables are affected and in areas where frosts have occurred, are almost totally destroyed.

The country had experienced reduced rainfall in all regions and the seasonal rains expected in November, arrived in January 2016 causing flooding and landslides. While some crops are growing, new kaukau crops are expected to take between six to nine months to mature, and be ready for consumption.

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\(^2\) NDC Highlands Region Drought and Frost Disaster Rapid Assessment Report 2015

\(^3\) NDC Highlands Region Drought and Frost Disaster Rapid Assessment Report 2015
Summary of response

Overview of Host National Society

In September, PNGRCS field team was mobilized with support from IFRC water sanitation and hygiene promotion (WASH) delegate and peer-to-peer support was deployed from the Solomon Islands. Coordination in Port Moresby was ongoing, in particular with governmental partners, such as National Disaster Management Office (NDMO), National Department of Health (NDOH) Disaster Management Team (DMT). In Mt Hagen, regular coordination meetings continued, mainly with Provincial Disaster Committee (PDC) and National Agriculture Research Centre (NARI). This information was used to select the targeted area.

PNGRCS organized hygiene promotion training, which took place at the beginning of October, and was attended by 30 people (21 men, nine women), consisting of PNGRCS staff, volunteers and governmental partners, most notably four members of PDC office. A team of 19 volunteers were mobilized to carry out a detailed assessment. The assessments covered 18,000 people (3,600 households) in the targeted area.

The PNGRCS assessments highlighted clearly that food quality and quantity was significantly reduced, that income was reduced or under stress and people were turning to alternative strategies for obtaining cash. In addition, the assessment highlighted that hygiene promotion and increased ability to store safe water for drinking or hygiene reasons was also required. Household surveys, focus group discussions and engagement with community leadership also highlighted that WASH interventions will not be acceptable without the communities food requirements being met as a first priority. The Government of PNG was the agency responsible for the distribution of food, and as such, following discussions with PNGRCS Board, it was decided not to include it in the emergency plan of action (EPoA). Additionally, distributing food, would have increased the risk to PNG staff and volunteers and would have had longer term implications on PNG.

The PNGRCS assessments findings have proven consistent with assessment reports from other stakeholders. It became apparent that additional advocacy was required in Port Moresby and liaison with communities before activities could proceed. During October, the operation was hampered by a security incident, involving the hijacking of the only branch vehicle. Additionally, the car hijacking meant that transport was not available for the teams to carry out the activities. The teams hired a car to carry out operational activities, while repairs were undertaken on the damaged branch vehicle.

Following the assessment, it was clear that operation had to be placed on hold until a significant and acceptable food distribution is undertaken in the targeted communities. In areas of high insecurity and difficult community relations, moving ahead with WASH related activities without a food intervention carries risk of non-acceptance by communities and potential for unrest within the communities. These are consistent with other stakeholders’ assessments and approaches in-country.

In November, the PNGRCS had begun an engagement process with private sector, government and other actors to ensure food distributions occur in the areas of operation where the need has been highlighted and that these food distributions are undertaken in a timely and equitable manner. As part of the engagement process, PNGRCS shared assessment data with Movement partners, NDMO as well as DG ECHO, WFP and FAO and other humanitarian partners.

In December, PNGRCS was identified by CARE as a key partner under a DIP ECHO proposal for the drought response. CARE has a long-term presence in PNG and was requested by DG ECHO to submit a DIP ECHO proposal on El Nino Response and Resilience. Amongst other activities, this proposal intends to move into the Western Highlands to implement health and nutrition activities in Tambul plus three other districts. CARE planned to establish an office in Hagen for about four months. Under the proposal, CARE is keen to utilize PNGRCS’ network of volunteers in Tambul for food and non-food relief item distributions and potentially the post distribution monitoring. In November and December below average rain started in Tambul, which eased somewhat the severity of the food situation. PNGRCS saw an opportunity to continue liaison with communities over the relevance of WASH activities and proceeded accordingly.

In December, the PNGRCS interim secretary general arranged a meeting in the affected communities, where it was unanimously decided that WASH, in particular access to safe water continues to be a pressing need for the affected population and that assistance by Red Cross would now be welcomed. PNGRCS, with guidance from the IFRC Pacific country cluster support team (CCST), carried out procurement of jerry cans and they were delivered to PNGRCS Mt Hagen office in December. Hygiene kits were not purchased because assessment data revealed that they were not appropriate in this response, because of the unknown duration of the drought (and as such was not in line with limited timeframe of the DREF operation). The approach to focus on hygiene promotion and to discuss with communities the importance of good hygiene behaviour was more appropriate and sustainable and thus more likely to lead to a longer term improvement of health. This is in line with PNGRCS approach and capacity as well as of other agencies responding to the drought.
In January, IFRC mobilized the IFRC WASH delegate to provide technical assistance and IFRC country focal point to work together with PNGRCS to continue liaison with communities. This was seen as a pivotal step. In order to minimize the risk to the safety of the PNGRCS volunteers, discussions had to take place with community leaders, such as councilors and church leaders, who in turn were able to hold discussions with the communities to provide a safe space for the PNGRCS to carry out the activities. This was highlighted by an incident in week of 21 January, where the Tambul District Administrator’s compound was looted by nearby communities, in order to take the rice that was stored in the containers, to be distributed once additional supplies were received sufficient to cater for the whole affected population.

On 29 January, PNGRCS, together with the IFRC country focal point and the IFRC WASH delegate received confirmation from ward councilors to proceed with activities. PNGRCS took the opportunity to discuss with community leaders, the most appropriate way to carry out hygiene promotion activities, in order to reach the primary target, which were mothers of young children. It was agreed for hygiene promoters from the community to be engaged to best reach to their own communities and work alongside the PNGRCS teams to reach out to women in the community with participatory hygiene promotion messages.

Following a security incident on 4 February, during which the Mt Hagen branch chairman was carjacked in a marked Red Cross vehicle in the vicinity of the ICRC compound, PNGRCS had to reassess the security situation, and alter the project plan accordingly. As a result, PNGRCS carried out additional community consultation to manage the risk to the volunteers and revised the plan of implementation accordingly.

PNGRCS arranged training on the 8 February, which was attended by 55 community hygiene promoters. Distribution of jerry cans and hygiene promotion activities started on the 8 February and was completed on 4 March. A team of 20 PNGRCS volunteers worked together with community hygiene promoters and local health workers to carry out the activities; benefitting over 3,000 families in targeted area.

In the meantime, CARE International was able to develop a plan of action for food distribution in Tambul. The distribution and methodology was based on activities by PNGRCS. These responsibilities were detailed in the MoU between CARE International and PNGRCS that was signed on 26 February.

**Overview of Red Cross Red Crescent Movement in country**

The ICRC has a presence in PNG, including a delegation in Port Moresby and offices in Mt Hagen and Bougainville. ICRC Mt Hagen office branch coordinates activities in Hela and Western Highlands. ICRC supports PNGRCS in ongoing activities, including logistics and security. This support was extended to the IFRC country team, who were under the ICRC security umbrella during their stay in Hagen. ICRC was able to provide some assistance to drought and frost associated with El Niño in the communities in the areas where they are present.

The Australian Red Cross (ARC) country representative was able to travel to PNG, to work together with PNGRCS and IFRC project team to develop a country-wide El Nino plan. The country El Nino plan is based on the methodology developed for the DREF operation. The plan is building on existing activities carried out by other branches by PNGRCS, who were assisting areas affected by El Nino with hygiene promotion activities utilizing knowledge gained in hygiene promotion training supported by DREF that took place in Mt Hagen in October 2015.

**Overview of non-RCRC actors in country**

Government-led National Disaster Response Committee meetings take place on a weekly basis. A humanitarian assistance tracking form was used by all partners to indicate activities and locations to assist the government with coordination.

The government’s initial allocation of PGK 5 million (approximately CHF 1.69 million) was used for the deployment of four multi-agency rapid assessment teams and the purchase of the first batch of food supplies for the most affected communities in the Highlands region. The first phase of the government response was completed in PNGRCS target communities in September 2015. The response includes food distribution to communities in the Highlands, in provinces and districts that are assessed as either Category 4 or 5. Another PGK 25 million (approximately CHF 8.46 million) has been committed by the government for their relief operation.

At provincial level, the Provincial District Councils (PDC) continue to monitor the situations and have started small scale initial responses in some affected areas. The PDCs are coordinating with humanitarian partners in key provinces. This is carried out through regular meetings, which are used to update the NDC.

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3 See Security section for details
Coordination for the WASH sector was carried out through the water and sanitation (WatSan) sub-committee of the NDRC, newly established for the drought response. This will complement the WASH committee within the National Department of Health, which has a developmental focus. Coordination with other humanitarian agencies by PNGRC continues in Port Moresby.

The Baptist Union of PNG (BUPNG) is focused on four districts in PNG, these are Telefomin in Sandaun Province, and Baiyer, Dei, and Hagen Central in Western Highlands Province, where assistance is provided through nutrition; with support from the Australian Department of Foreign Affairs and Trade (DFAT). The United Church is supporting communities in the Highlands through an established network of church partners.

The International Organisation of Migration (IOM) with support from USAID and DG ECHO, is present in Mt Hagen, where work aims to reduce risk of potential disasters by stabilizing the communities worst affected by the El Niño induced drought and frost in PNG through WASH interventions. The targeted communities in Mt Hagen include Enga (specifically Kandep and Laiagam), Jiwaka (specifically Nondgul and Banz) and Simbu (specifically Gumine and Saltnomane-Karamui).

Other humanitarian agencies include World Vision, who are coordinating WASH cluster meetings in Port Moresby and have a presence in Madang, Bougainville, Highlands and East Sepik. Other agencies that are active in PNG include Caritas and Save the Children.

**Needs analysis and scenario planning**

A detailed needs assessment was undertaken in the early stages of this operation in the Western Highlands Province. The target location consisted of 19 communities across 14 council wards in Lower Kagul in Tambul-Nebilyer District. These locations were prioritized in coordination with NARI (National Agriculture Research Centre) as well as Provincial and National Disaster Coordinator's (NDC) office based on severity of the impact of drought. It was the only district in Western Highlands Province assigned a Category 5 rating by NDC, as additional to the drought, it was one of the high altitude communities affected by frost.

The methodology for the assessment included focal person as well as household person interviews, observation walks and visits to schools. Cross cutting issues such as gender and disability were included throughout the assessment. It is recognized that various groups of the community, such as women, men, disabled, children, youths are not affected by disasters in the same way and as such have different needs. One way of capturing those needs was through targeted discussions with women in villages conducted by women PNGRC volunteers. It was then identified that young mothers were the target audience by hygiene promotion activities. They were to be reached through women community hygiene promoters that were trained and accompanied the PNGRC volunteer teams during the hygiene promotion activities.

The needs assessment identified the following key points:

- The vast majority of communities assessed practice subsistence farming and kaukau (sweet potato) is the main staple. Across the region it is estimated that the crop contributes to the food security and cash incomes of more than 90% of the Highland region population.

- Food assistance is the priority need as the main staple food, kaukau (sweet potato), has been damaged by frost in August resulting food shortages due to failed root crops.

- Communities are working harder to obtain sufficient quantity of food as the food available for consumption is reduced. This is particularly affecting women, especially pregnant and breastfeeding, children, elderly and people living with disabilities.

4 Climate Change, food security and socioeconomic livelihood in Pacific Islands, International Food Policy Research, ADB, 2015
New kaukau crops are expected to take between six to nine months to mature, ready for consumption. It is expected that communities will remain food insecure until this time.

Most assessed communities are drinking contaminated water from open rivers increasing the risk of disease outbreak.

Based on 70 households interviewed, 56 per cent of families have explained the current food situation as ‘No food in gardens, famine food (frost damaged food) only being eaten’. Further to this, 31 per cent of those interviewed identified that the situation was difficult, with shortage of food and some famine or unusual foods being eaten. This puts pregnant, breastfeeding mothers and children, at particular risk.

Secondary needs are related to safe water. In normal times, springs and streams were abundant, providing ample access to drinking water. The drought has resulted in vast majority of those springs drying up forcing the communities to walk to the main river to access drinking water. The main river is being used for other activities, such as washing and by animals. It is contaminated by fecal matter, as confirmed by indicative microbiological water testing. People are restricted in the search for water (and food) by tribal boundaries.

Out of those interviewed, 29 per cent described the current water situation as usually dry but no major drinking water issues or other problem, 47 per cent identified that it is difficult, water was available but at a greater distance than normal, taking longer to collect and the remaining 23% felt that conditions are bad, water is in short supply or possibly polluted.

Kinship is an important community and family cohesion factor in all PNG communities and also in the highlands. Reliance on kin as a support net in times of disaster includes support from extended families, family members married into other clans and tribes or working in cities and towns. This support provides a buffer to alleviate suffering and also to reduce and spread out burden facing families or communities. Traditional coping mechanisms of kinship are in existence but are being tested, as indicated by some increased tensions within family units.

Aside from kinship, other coping mechanisms taking place at the moment and expecting to evolve over the coming weeks and months include:

- Reduced food consumption
- Eating of natural alternative foods, that not regularly consumed, or consumed only on special occasions. Such foods include ferns, certain types of mushrooms, wild breadfruit leaves.
- Selling of pigs for a reduced amount of money to buy food for the family. Pigs in normal times were sold, depending on the size of the pig, from PGK 3,000 – 5000. At time of assessment families were are selling pigs for PGK 1,000 and below. Apart from immediate economic effect, this is expected to have longer term cultural implications with wealth and prestige associated with pig ownership.
- Receiving money from family members working in larger towns and cities are able to send money to affected families to assist with purchase of food
- Isolated cases of migration into towns and cities, where they are able to find work, mostly selling goods at markets, such as beetle nut and cigarettes in order to purchase food. Often funds from selling of pigs, are used as start-up funds to establish street sales in towns and cities.

In Mt Hagen, while below average rainfall was recorded in November, in December and January, above average rainfall was recorded by the Climate Monitoring Network of PNG. This allowed some green vegetables, such as broccoli and cabbage to be grown in targeted areas. In January, Development Policy Centre 5 stated that whilst recent rainfall has eased the water supply situation in many parts of PNG, the rainfall did not reach all locations. Despite this rain, subsistence food supplies are likely to be scarce for periods ranging from several months to one year. It was estimated that 27 of the 271 rural Local Level Government Authorities (LLGA), food supply from all sources is very scarce or extremely scarce. Furthermore, the report went on to estimate that some 770,000 people live in locations where food is very or extremely scarce. The report recommends that there is an urgent need for action to alleviate food shortages in those locations.

**Risk Analysis**

The paramount risk to this operation was undertaking WASH intervention before food distributions had taken place. Often in disaster situation where relief response, particularly from the government, is slower than anticipated, tension or violence can occur among the affected population. This can significantly affect the overall response and safety of the in-

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5 Estimated Impact on Drought and Frost on Food supply in Rural PNG in 2015
country humanitarian actors. The security situation in the Highlands region of PNG is volatile and changes rapidly. Tensions between tribes can lie dormant for a number of years and can be reignited at any time. This can involve damage to property, in particular burning of houses and possession as well as loss of lives in particular men, as women and children tend to be spared. It is common for outsider's neutrality to be respected and that fighting remains between members of conflict.

Following the assessment, it was clear that operation had to be placed on hold until a significant and acceptable food distribution is undertaken in the targeted communities. In areas of high insecurity and difficult community relations, moving ahead with WASH related activities without a food intervention carried risk of non-acceptance by communities; and potential for unrest within the communities. The operation mitigated this risk through negotiation with affected communities and their leaders. In the background, PNGRCS has collaborated with CARE International on food distributions in affected areas.

B. Operational strategy and plan

Overall Objective

The priority of this DREF operation is to enable the PNGRCS to address immediate concerns associated with shortage of water in affected communities through provision of jerry cans complemented with hygiene promotion messages. The EPoA included the provision of hygiene kits, however these were never procured or distributed. This is because of the prolonged nature of a drought response, and the limited duration of DREF. This was implemented via PNGRCS branch volunteers who were trained in WASH/Health.

Proposed strategy

The assessment focused on finding local capacity and knowledge, in particular existing coping mechanisms that were already in place. This was particularly important during this slow onset disaster, where the scale of impact and the length of response would not be accurately known and existing coping mechanisms were to be counted on. It was found that affected families were having to find alternative sources of food, since kaukau was no longer available. According to assessments, purchase of rice is one of the only other viable options. The main income source has been affected, and as such obtaining funds to purchase rice is an essential way to cope with the current situation.

Kinship is an important community and family cohesion factor in all PNG communities and also in the highlands. Reliance on kin as a support net in times of disaster includes support from extended families, family members married into other clans and tribes or working in cities and towns. This support provides a buffer to alleviate suffering and also to reduce and spread out burden facing families or communities. Traditional coping mechanisms of kinship are in existence but are being tested, as indicated by some increased tensions within family units.

Existing community knowledge was captured through discussion with health centre staff, district hygiene promoters and through household interviews. Existing hygiene practices were captured through household survey that were carried out in consultation with council ward leaders, who were present during the process.

Upon completion of the assessment, a detailed plan of action was developed by Western Highlands Branch staff and volunteers. Based on assessment findings, the following key alternations to the EPoA were recommended:

- Solid jerry cans were to be distributed, as opposed to collapsible ones, because of community preference for a product they are able to use post disaster. Assessment results indicated that most households (80 per cent) had

Hygiene promotion session in Tambul aimed at women. Photo credit: Pauline Ross, PNGRCS
access to one jerry can, and as such it was recommended to supply one jerry can per household. The decision to procure solid rather than collapsible jerry cans did however have cost implications for the budget.

- Hygiene kits were not procured as per the Plan of Action. It was concluded that since the duration of the disaster was unknown, and the length of the DREF was limited and unlikely to be able to sustain a continuous supply of hygiene items, it was more effective to solely carry out extensive hygiene promotion messages that focused on good hygiene behaviours and importance of having hygiene items, in particular with knowledge that a longer term distribution of hygiene items was not likely to be supported.

Taking existing hygiene practices and promotion activities into account it was concluded to continue with extensive hygiene promotion campaign to allow community members to take action to mitigate against the risk of water borne disease.

The PNGRCS team was integrated in the communities during the assessment and response activities and as such were continuously receiving feedback in an informal setting, which was fed back to PNGRCS senior volunteers for action. Additionally, following the activities a more formalized mechanism was established that included receiving feedback from beneficiaries using a beneficiary feedback form.

### Operational support services

#### Human resources (HR)

Originally a team leader was planned and budgeted for, however the team leader was never deployed from Geneva due to problems receiving a visa. After a number of weeks, the plan was revised, and both the IFRC development coordinator (and PNG focal point) and the IFRC WASH delegate from Pacific CCST managed the operation in-country. The original budget of 23 days for the team leader was insufficient to manage an operation in such a complex context.

As the National Society has limited experience and capacity in WASH activities, IFRC deployed a technical specialist, as well as additional support to participate in inter-agency coordination.

The IFRC focal point for PNG had to make two trips to PNG for the DREF operation. These costs were not anticipated when the DREF EPoA and budget were prepared, however were necessary in particular to support the coordination in Port Moresby. The need was identified following assessments that recommended a key activity being advocacy on behalf of the affected communities. This contributed to the communities receiving food support from elsewhere.

<table>
<thead>
<tr>
<th>Dates</th>
<th>Mission</th>
<th>Support by</th>
<th>Location</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>-</td>
<td>Team leader</td>
<td>-</td>
<td></td>
<td>Cancelled on 9 October</td>
</tr>
<tr>
<td>24 Sept – 10 Nov</td>
<td>Technical support for assessments and hygiene promotion</td>
<td>IFRC WASH regional delegate</td>
<td>Mt Hagen / Field</td>
<td></td>
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<tr>
<td>4 Oct – 18 Oct</td>
<td>Peer technical support</td>
<td>Solomon Islands Red Cross (SIRC) DM</td>
<td>Mt Hagen</td>
<td></td>
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<tr>
<td>8 Nov – 8 Dec</td>
<td>IFRC team leader / coordination support</td>
<td>IFRC country focal point</td>
<td>Port Moresby</td>
<td></td>
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<tr>
<td>20 Jan – 15 Mar</td>
<td>Technical support for implementation</td>
<td>IFRC WASH regional delegate</td>
<td>Mt Hagen / Field</td>
<td>Supported by NZRC</td>
</tr>
<tr>
<td>28 Jan – 3 Feb</td>
<td>Community liaison assistance</td>
<td>IFRC country focal point</td>
<td>Mt Hagen / Field</td>
<td>Supported by NZRC</td>
</tr>
</tbody>
</table>

PNGRCS Western Highlands Branch has one permanent staff member (supported by a vast volunteer network). As a result, the disaster management officer from National Office was mobilized to assist with the operation, work together with the branch to ensure processes followed are in line with PNGRCS processes and procedures and ensure that learning from this operation is taking forward to other responses. The disaster management officer was in Mt Hagen assisting the branch during field activities, including assessment and distribution/hygiene promotion activities.
Logistics and supply chain

Relief items were locally available, and with support from IFRC CCST, procurement was completed in-country. The supply of jerry cans were procured in Port Moresby and transported to Mt Hagen Branch. The jerry cans were paid for directly by the IFRC.

Communications

The National Society interim secretary general has given some radio interviews about the situation and the operation in Mt Hagen. The trip undertaken to Hagen to consult with communities was reported on 15 December in a widely read local newspaper. Additionally, IFRC published a news article on the public webpage on the 28 December.

A series of Movement talking points had been developed by IFRC in consultation with PNG Red Cross and the ICRC and these were distributed via newswire. Informal updates from the IFRC county team were being compiled on a weekly basis and shared with partners as required.

Security

On the 4 October, Mt Hagen Branch chairman was carjacked in a marked Red Cross vehicle in the vicinity of the ICRC compound. He received a number of injuries as a result of a beating and was treated in the local hospital and later discharged. The vehicle was later recovered however it had sustained significant damage. It was a contributing factor to revision of rules and procedures PNGRCS, most notable travel protocols, which included tighter security call schedule.

On 4 February, the PNGRCS team travelled to a community to make arrangements for a hygiene promotion training with PNGRCS and community hygiene promoters. During that field trip, eight members of the community threatened the PNGRCS vehicle with bush knives, because they were not satisfied with receiving assistance with WASH, whilst their primary need, food, was not met. Following the incident, as a security protocol, all field trips were put on hold for IFRC personnel. Stakeholder analysis was carried out and the programme was slightly revised. The police and other authorities were notified and made aware of upcoming activities. This was treated as an isolated incident.

There was one fatality from a landslide in PNGRCS area of operation on 15 February. Funeral arrangements and associated local custom resulted in delay in implementation of activities. Precautions were taken during funeral to ensure all PNGRCS staff acted in accordance with local custom, whilst keeping respectful separation from proceedings including any potential acts of violence.

Planning, monitoring, evaluation, & reporting (PMER)

Reporting on the operation was accordance with the IFRC minimum reporting standards with three updates issued during the DREF timeframe.

A baseline survey during the assessment stage can be used to evaluate the impact of the response. Additionally a beneficiary satisfaction survey was carried out at the end of the response and is discussed in sectorial plans. Methodology of beneficiary satisfaction survey included asking beneficiaries about their outcomes of the activities, in particular timeliness and relevance. The beneficiary satisfaction survey was carried immediately following the distribution. Developing, carrying out beneficiary survey and adjusting activities accordingly even further strengthened the PMER capacity of PNGRCS.

Administration and Finance

Funds were transferred in tranches to PNGRCS in line with the working advance agreement. Funds were transferred from IFRC CCST in Suva to PNGRCS main account at Headquarters, and subsequently from Headquarters in Port Moresby to Mt Hagen Branch account. Each working advance was cleared as quickly as possible by the finance team in Suva, then by ensuring that implementation in the field was as smooth as possible.
C. DETAILED OPERATIONAL PLAN

Quality Programming / Areas Common to all Sectors

<table>
<thead>
<tr>
<th>Needs assessment</th>
<th>Outcome 1: Continuous and detailed assessment and analysis is used to inform the design and implementation of the operation.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Output</td>
<td>Activity</td>
</tr>
</tbody>
</table>
| 1.1 Needs assessments are conducted and response plans updated according to findings. | • Mobilize PNGRCS staff and volunteers for assessments.  
• Mobilize/deploy IFRC delegates and regional peer exchange available in the region and Geneva to support PNGRCS in conducting assessments.  
• Undertake assessments to determine specific needs of beneficiaries in the target affected areas.  
• Develop a response plan with activities that will meet identified beneficiary needs. |
| 1.2: Additional assistance is considered where appropriate and incorporated into the plan | • Ensure that any adjustments to initial plans are informed by continuous assessment of needs and through established feedback mechanisms. |

Achievements

- PNGRC DMO has been deployed to PNGRC Western Highland branch to assist volunteers in response
- Branch EOC is being opened and branch concept of operation for El Nino response developed detailing roles, responsibilities and mode of operation
- Peer to peer support mechanism and IFRC WASH technical delegate were mobilized to PNG to support with assessments
- Selection of targeted communities took place. There were 19 communities in the Lower Kagul in Tambul-Nebilyer District of the Western Highlands Province selected for the PNGRCS to undertake assessments. Tambul Nebilyer district was selected, as it was the only district assigned a Category 5 rating by NDC. Advice was then sought from the Provincial Disaster Coordinator and the NARI research staff based in Tambul to identify areas where the frost of mid-August had impacted together with the drought. The assessed area is located in a valley between Mt Hagen in Western Highlands Province and Mt Giluwe in the Southern Highlands Province. The cloud that brought with it the frost that occurred on 11 – 14 August was ‘stuck’ between the two mountains, causing severe damage to the crops.
- Assessments have been completed, which provided insights into the changing needs of the affected population. The assessments highlighted that food assistance has been identified as the priority need, as main staple food (sweet potato) has been damaged by the frost in August resulting in a failure of root crops. As such, communities are working harder to obtain sufficient quantity of food, as the food available for consumption is reduced. A secondary need has been identified as access to improved water. Most communities who have been assessed have reported drinking untreated water from open rivers, in which increases the potential risk of a disease outbreak in the future. The assessment included collection of baseline data, that can be used to monitor the impact of the project in future activities. Baseline data summary is available upon request.
- An additional role for the PNGRCS in working with actors (government and non-government) to advocate on behalf of communities to ensure food distributions take place. The advocacy was a contributing factor in the communities being included in CARE response locations for Health support that included food distribution. CARE was able to utilize beneficiary list developed by PNGRCS in distribution process. MoU was signed between CARE and PNGRCS to detail roles and responsibilities during food distribution.
- Response plan for activities in targeted areas developed based on findings from assessment. The plan was used as basis for PNG wide plan that was developed in coordination with Australian Red Cross.
- Cooperation with ICRC was even further strengthened, throughout the response. ICRC was able to benefit from Hygiene Promotion (HP) training and as a result incorporate some of the learning’s into their planning. The ICRC was able to incorporate some leanings from the activities into the activities into their planning, especially in terms of gender inclusion.
- Relationship with CARE International was further strengthened during this response through the collaboration which was detailed in the MoU. This has set up a good platform for any future collaboration between PNGRCS and Care.

Challenges

- The estimated costs in the DREF budget were underestimated, in particular costs such as accommodation that was in line with security guidelines. IFRC staff adopted ICRC security procedures; which meant staying in certain hotels, which had budget implications. The cost associated with community consultation were also underestimated, especially in light...
of the consultation that had to be carried out to mitigate risks that arose throughout the operation, as discussed above. There were also cost implications related to volunteers, as the number of volunteers required to carry out the activities increased. In addition, the costs per volunteer required for overnight deployment were under budgeted, and more overnight trips were required because the distance to the branch.

- Late cancellation of team leader's mission (due to problems obtaining a visa) left a gap in ability to provide support to PNGRCS. This was filled by the IFRC CCST surge, the IFRC country focal point and WASH delegate.
- Assessment highlighted security concerns associated with carrying out assistance with secondary need, WASH, whilst primary need of food not being addressed. Acting against these recommendations would pose serious security risks on PNGRCS volunteers working in the targeted communities. Accurate project planning, whilst allowing for security concerns to be mitigated and additional delays associated with carrying out community based activities on a community timetable. This resulted in delay of project with a three-month extension being granted.
- PNGRCS Mt Hagen branch does not have extensive regular programming and as such carrying out response to this magnitude is not considered day to day business. As such, extensive training related to assessments, distribution, beneficiary satisfaction surveys etc. had to be carried out in order for all to gain familiarity in putting processes and procedures into practice.

Lessons Learned

- Additional flexibility should be allowed in programming to allow for unexpected delays due to security concerns and community
- Additional consultation with the community regarding the community calendar would have streamlined the operations, and ensured even bigger impact to the affected community within required timeframe
- Further training of volunteers during non-emergency time would have assisted with the readiness of the branch to respond, and as such may have had a positive impact on the programme.

Water, Sanitation and Hygiene Promotion

**Needs analysis:** Streams and rivers that were used as primary water sources had dried up. Populations in affected areas resorted to secondary water sources (traditionally used for washing and bathing) as drinking water and in food preparation. This increases the risk of diarrhoea and typhoid already prevalent in PNG, of which are associated with poor water, sanitation and hygiene (WASH) access and practices.

Access to safe water and improved sanitation in PNG is and has been an on-going challenge. The distance between homes and available water sources is increasing, which further places an increased burden on women who are primarily responsible for managing household water and also puts them at greater risk of violence.

In affected communities, water treatment of secondary water sources can reduce water related health risks. Such risks were ameliorated by mobilizing a Kit 2 (safe water, sanitation and hygiene promotion kit using predominantly household water treatment and storage methods for 2,000 people). The mobilization of the Kit was facilitated through existing funding earmarked for emergency WASH development for PNG, and is therefore not included in this DREF plan and budget; however, the Kit 2 and the relevant parts of the hygiene promotion (HP) box were mobilized in this response.

Hygiene promotion activities were also needed to improve hygiene behaviour and bridge knowledge and practice of safe water and food handling as well as hygiene practices such as hand-washing so as to mitigate the threat of preventable diseases. The operation used an external consultant, a local NGO called ‘Touching the Untouchable’ to facilitate hygiene promotion training. The opportunity to engage a local consultant, with years of experience, was taken up in order to provide context specific examples and lessons learned. The outcome was excellent and is likely to result in partnerships between PNGRC and the NGO. The training also included five project planning, whilst allowing for security.

**Population to be assisted:** The 3,000 households targeted with jerry cans (two jerry-cans of 10-litre capacity each per household, according to Sphere standards) and hygiene kits have been reached with hygiene promotion in Oro and Highlands region (Tambul Nembilyer, Henganofi, Bena Bena and Kandep). Families provided with water containers have access to water via the Watsan-Kit-Z’s deployed by IFRC. The households reached benefit from a safer access to clean water in addition to enabling better hygiene conditions via non-food relief items and hygiene promotion activities.
Water, sanitation and hygiene promotion

Outcome 2: Risk of waterborne, water-related and vector-borne diseases in communities affected by the drought and frost reduced.

<table>
<thead>
<tr>
<th>Output</th>
<th>Activity</th>
</tr>
</thead>
</table>
| 2.1: Knowledge, attitude and practice on safe water, sanitation and hygiene by target population increased. | • Collaborate with the relief sector in providing jerry cans and hygiene kits, compliment with hygiene promotion for the safe hygiene practices and usage of safe water storage containers.  
• Mobilize existing WASH/Health branch volunteers to participate in hygiene promotion activities, in coordination with the relief team  
• Coordinate with the NDC, WASH and Health Clusters to develop hygiene promotion and disease prevention dissemination/ awareness campaigns |

Achievements

- Hygiene promotion training took place in Mt Hagen from 6 to 9 October. It was attended by 30 persons including volunteers from Western Highlands Branch, as well as Oro, Eastern Highland Branch, Madang and Lae Provinces, ICRC, as well as members from PDC office and Caritas. The operation used an external consultant of a local NGO called ‘Touching the Untouchable’ to facilitate the hygiene promotion training. The opportunity to engage a local consultant, with years of experience, was taken up in order to provide context specific examples and lessons learned. The outcome was excellent and is likely to result in partnerships between PNGRC and the NGO. The training also included five branches, because at that time of the training, the focus area for the DREF had yet to be determined based on the assessments. The other branches not included in the DREF are making use of the training they received in their own hygiene promotion activities.

- Development of information, education and communication (IEC) materials in coordination with government counterparts. The materials include simple messages for good hygiene promotion practices. Additionally, in coordination with CARE, the IFRC tool: Epidemic Control for Volunteers was translated in PNG Tok Pijin and printed.

- Additional refresher training was provided to key PNGRCS volunteers in coordination with Providential Hygiene Promoter, who has more than 20 years’ experience in carrying out community hygiene promotion in target areas.

- In total, 55 community hygiene promoters were trained to be part of PNGRCS hygiene promotion team. IFRC’s minimum standards for Gender and Disability in Emergencies was utilized throughout the implementation of activities. This has further strengthened PNGRCS’s ability to view projects through a ‘gender and disability’ lens. This can be brought forward and will be used in future responses.

- Hygiene promotion was carried out in a participatory manner, and attended by 3,012 households from 19 communities in 14 council wards. Additionally hygiene promotion activities took place in all primary schools in target area benefitting over 840 students.

- Distribution of 3,342 jerry cans took place. Details of distribution of jerry cans and hygiene promotion can be seen in table blow.
### Area Council ward name

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<th>No of HH attended HP</th>
<th>No of jerry cans distributed</th>
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- Beneficiary satisfaction survey took place following distribution, which included interviewing of 49 households regarding relevance, timeliness and quality of the items and activities of the response. The beneficiary satisfaction survey together with informal feedback from beneficiaries forms part of the beneficiary communication strategy. Generally positive response to PNGRCs presents highlights acceptance by communities for further engagement by PNGRCs through hygiene promotion or other activities, such as community first aid. It is recommended that this is followed by a recruitment drive for volunteers in the area of responsibility.

### Challenges

- There were on-going delays due to two security incidents, as detailed above. The risks associated with those incidents were mitigated using appropriate action, however they resulted in delays to activities.
- A sense of urgency in a slow onset response from communities is comparable to standard planning and not the same as compared to a sudden onset disaster. As such, hygiene promotion activities were slotted in, as and when the community timetable allowed. This resulted in delays to the implementation of the programme, because it was not appropriate to carry out activities during certain times, such as when women were busy with essential farming for their family livelihoods or enrolling children in school. Funeral services, that are attended by majority of the community also delayed programme. Regular rain in the target areas also posed a challenge for implementation, as members of the community had to walk long distances on mud roads to reach central distribution points.
- Beneficiary satisfaction survey highlighted that some women reported safety as one of the concerns when walking to the distribution points that were designated in coordination with ward councillors.
- Beneficiary satisfaction survey also highlighted that they would have preferred consultation on the sub-clan member level (which consists of ward councils) rather than ward councillors. The perception is that the ward councillors had preferences and excluded certain families from the distribution list. This became clear as distributions were undertaken and was addressed through on-going discussion with community.

### Lessons learned

- Consultation of all members of the community, including women representatives, and church groups. This would have brought to light the need to consult on the sub-clan level during the assessment and eventually reduced the risk to women travelling to distribution sites selected by the ward councillors.
- Additional consultation with the community regarding the community calendar would have streamlined the operations, and ensured even bigger impact to the affected community.
- Additional flexibility in overall programme would have further allowed for delays that were outside of the control of the implementation team.
Budget
In general, operational costs in PNG are very high, particularly in light of security issues, and the budget didn't accurately reflect these realities. Some of the contributing factors are listed below:

- The IFRC does not have existing infrastructure in PNG, this adds to cost, but also added extra time needed in country.
- While the operation was extended, however the extended timeframe means that there were budget implications.
- Delays in implementation due to the situation in regard to food and associated insecurities resulted in additional cost in terms of the continuation of the operation.
- Target communities were approximately three-hours drive from the branch. This meant that overnight trips were necessary to carry out such community consultation, which impacted on the budget.
- Heavy rains also impacted on the ability to implement as road access was restricted and transport was delayed.

Contact information
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IFRC Asia Pacific regional office, Kuala Lumpur (phone: +60 3 9207 5700):
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↓
Click here
1. Preliminary final financial report below
2. Click here to return to the title page

How we work
All IFRC assistance seeks to adhere to the Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGOs) in Disaster Relief and the Humanitarian Charter and Minimum Standards in Humanitarian Response (Sphere) in delivering assistance to the most vulnerable. The IFRC’s vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

The IFRC’s work is guided by Strategy 2020 which puts forward three strategic aims:
I. Funding

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<th>Raise humanitarian standards</th>
<th>Grow RC/RC services for vulnerable people</th>
<th>Strengthen RC/RC contribution to development</th>
<th>Heighten influence and support for RC/RC work</th>
<th>Joint working and accountability</th>
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* Funding source data based on information provided by the donor

II. Movement of Funds

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