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Emergency Plan of Action Final Report

Fiji: Tropical Cyclone Winston

International Federation of Red Cross and Red Crescent Societies

Emergency Appeal	**Operation n° MDRFJ001**
Date of Issue: 4 April 2018	**Glide number: TC-2017-000014-FJI**
Date of disaster: 20 February 2016	
Operation start date: 22 February 2016	**Operation end date: 30 September 2017**
Host National Society: Fiji Red Cross Society	**Operation budget: CHF 4,385,118**
Number of people affected: 350,000 people	**Number of people assisted: 77,000 people**
N° of National Societies involved in the operation: The Fiji Red Cross Society (FRCS) is working with the Australian Red Cross, New Zealand Red Cross, International Committee of Red Cross (ICRC) and International Federation of Red Cross and Red Crescent Societies (IFRC).	
N° of other partner organizations involved in the operation: The National Disaster Management Office leads the government response, under the National Disaster Committee (NDC), convened by the Prime Minister of Fiji. Fiji Red Cross Society is a member of the NDC. The Pacific Humanitarian Team was convened under UNOCHA, providing a coordinated approach for UN and NGOs, and the National Cluster System has been activated with the respective government ministries. The Fiji Meteorological Service has been monitoring Tropical Cyclone (TC) Winston and providing warnings and media releases to the public.	

This final report marks the conclusion of the Tropical Cyclone Winston Emergency Appeal operation that spanned a 19-month period from 22 February 2016 to 30 September 2017. The Fiji Red Cross Society, with IFRC support, reached 77,000 people in the areas of health and care; water, sanitation and hygiene promotion; shelter and settlements (and household items); shelter recovery; restoring family links; National Society capacity building and quality programming.

The Emergency Appeal sought CHF 4,385,118 of which CHF 4,384,632 was raised. The total expenditure recorded was CHF 4,364,988 (99.6 per cent of income), leaving a balance of CHF 19,643 as of March 2018. The balance funds will be transferred to Operational Plan 2018 for the IFRC CCST Suva to enable the country office to continue to support the Pacific National Societies long-term programmes. Details of the expenditure are outlined in the attached final financial report.

Reference and background documents:

- DREF allocation (22 February 2016)
- Emergency Appeal (1 March 2016)
- Operations update 1 (12 March 2016)
- Appeal Revision 1 (28 April 2016)
- Operations update 2 (5 August 2016)
- 6-month update (23 September 2016)
- Appeal Revision 2 (15 December 2016)
- Operations update 4 (22 May 2017)
- Operations update 5 (31 August 2017)
- Operations update 6 (30 September 2017)

Fiji Red Cross Society and IFRC built model houses and taught villagers how to build back safer. (***Photo: Paul Grierson/IFRC***)

A. SITUATION ANALYSIS

Description of the disaster

Between 20 and 21 February 2017, Category 5 Severe Tropical Cyclone (TC) Winston swept through the Fiji Islands with wind gusts of up to 325 kilometres per hour. The cyclone was deemed one of the most severe ever to hit the South Pacific and left a trail of destruction in its wake.

The Government of Fiji immediately declared a State of Emergency. The Fiji government reported more than 350,000 people (about 40 per cent of the nation's population), across the country's four divisions, were affected. A total of 44 people died. Up to 32,200 houses were damaged or destroyed. Water supply, power, health and educational services and infrastructure were significantly damaged including 229 schools, health centres and other public buildings. Substantial impacts were felt in farming and fishing communities. At the peak of the emergency, over 50,000 people were housed in over 1,000 evacuation centres.

On 7 April 2017, TC Zena struck Fiji, causing significant flooding in the Western Division that had already been affected by TC Winston, which compounded the impact on houses, crops and livelihoods. As a result of TC Zena, three people died and essential services were damaged due to flooding. At its peak, more than 12,000 people took shelter in 244 evacuation centres mostly in the Western Division.

Due to the extent of the disaster, a State of Emergency was extended until 19 April in the areas most severely affected. The authorities primarily focused on the provision of three months' food supplement targeting the most affected communities and restoration of critical infrastructure, which included the resumption of schools. In the emergency phase, FRCS has been the main humanitarian actor and has provided response with emergency shelter and essential non-food items covering a large part of the overall needs.

FRCS, IFRC and other Movement partners met in Suva on 13 to 14 April 2016 to create a harmonized recovery plan. The overall FRCS plan aimed to target up to 65,000 people (13,000 households) in communities most affected by TC Winston. By the end of this operation, 77,000 people were reached.

Summary of response

Overview of Host National Society

The Fiji Red Cross Society was registered in 1971 and recognised as an independent National Society in 1973. The National Society is officially recognised by the government of Fiji as a voluntary relief organisation, an auxiliary to public authorities and as the only Red Cross Society in Fiji. It is the most widely recognised and respected humanitarian organisation in the country.

FRCS has 16 branches with 45 staff members and 956 registered volunteers, of whom 570 were mobilized for emergency response and 245 volunteers were involved in TC Winston recovery operation. This mobilization includes 24 emergency response team (ERT) trained volunteers in the Northern Division and 27 in the Western Division who were deployed.

Overview of Red Cross Red Crescent Movement in country

The IFRC Country Cluster Support Team (CCST) for the Pacific region is based in Suva, and supports 13 Red Cross National Societies through integrated support for self-development, facilitating cooperation among National Societies and supports the enhancement of capacity in disaster preparedness and response, disaster risk management, climate change adaptation, disaster law and humanitarian diplomacy. It coordinates the work of the Red Cross Red Crescent Movement in the region, and supports programming to respond to community priorities in humanitarian assistance.

In support of FRCS's emergency and recovery response to TC Winston, IFRC established an in-country team to work directly with the National Society. Through the TC Winston operation, IFRC also provided organizational development support through branch organizational capacity assessment (BOCA) training and finance development assistance at the branch levels within the country. E-WASH training was also organized by the IFRC in Suva in March 2017.

The International Committee of the Red Cross (ICRC) in Suva supports the FRCS in the dissemination and communication of its activities and in International Humanitarian Law (IHL). FRCS with the support from the ICRC has produced communication material, such as posters on the seven Fundamental Principles in two local languages (Fijian and Hindi). ICRC's focus in country includes promoting IHL, as well as raising other humanitarian issues with government representatives, security forces, academia, media and civil society. ICRC supports FRCS in providing IHL training for the

National Society's staff and volunteers. Per its mandate, the ICRC also helps communities affected by conflict, detainees' visitations and supports the region's National Societies.

The New Zealand Red Cross (NZRC) supported the TC Winston operation through a one-month secondment of a Community Engagement and Accountability (CEA) delegate and as well as the extension of a psychosocial support (PSS) delegate.

Under the Fiji Government's 'Adopt a School' initiative NZRC and FRCS partnered to rebuild Vunikavikaloa Arya School, in Nalawa, Ra province in the Western Division of Fiji, as well as physical and psychosocial recovery in the Vunikavikaloa school community. Vunikavikaloa Arya School is a diverse school with a roll of 230 students, eight teachers and a large catchment area from the nearby rural villages. Construction of the eight-classroom school and four teachers' quarters commenced in early January 2017 and was completed in mid-2017.

The Australian Red Cross (ARC) worked bilaterally with FRCS on a recovery programme, planned for start in 2018. The ARC Recovery Programme aims to build on the work undertaken in the TC Winston operation and align this with the recovery programme as per FRCS's Strategic Plan. Concurrently, ARC provides financial support to FRCS's Community-Based Health and Disaster Management programme.

Overview of non-RCRC actors in country

Government authorities
The National Disaster Management Office (NDMO) coordinated the response efforts and activated the National and Divisional Emergency Operations Centres (EOCs). The FRCS coordinates closely with the NDMO and is a participant in the high-level National Disaster Council, which is chaired by the Prime Minister of Fiji. Under the State of Emergency, FRCS had access to logistics resources, including trucks and a ship.

FRCS regularly met with NDMO and government counterparts and provided regular situation reports on activities, including details of assessments, distributions and activities undertaken during relief and recovery phases as well as the challenges and gaps. These reports were shared with government, Pacific Humanitarian Team, UN and other civil society organisations.

Inter-agency coordination
The humanitarian community works through the Fiji National Cluster system. All clusters are led and co-chaired by a government officer with a humanitarian representative. The Pacific Humanitarian Team coordinates regular meetings for agencies, providing overall coordination of humanitarian actors in country.

The IFRC and Habitat for Humanity co-lead of the Fiji Shelter Cluster in times of preparedness and response, with the Ministry of Local Government, Urban Development, Housing and Environment (MOLGUDH&E). As part of the Appeal, IFRC supported a Shelter Coordination Team (SCT), including a coordinator, information manager and technical coordinator, down-scaled starting from July to the coordinator, whose deployment finalised in Fiji mid-September 2016.

Needs analysis and scenario planning

Shelter: Based on shelter cluster's findings from the earlier assessment in 2016, needs were identified to provide technical support and construction materials to affected communities and local carpenters to rebuild damaged and destroyed houses. Recommendations were followed at the local level to enhance the awareness and understanding of Build Back Safer (BBS) principles and techniques that are pivotal to achieving sustained improvements in post-disaster reconstruction. Analysis indicated that the most vulnerable families who cannot self-recover by provision of assistance to rebuild or repair using 'build back safer' methods required additional support. As a result of an earlier needs assessment, a revised approach to the shelter repair assistance component of the project was adopted. To complement the Government of Fiji's 'Help for Homes' programme the 'BBS materials assistance package' was developed and distributed together with messaging and information, education and communications (IEC) material.

Health: The cyclones and subsequent flooding left communities vulnerable to water and vector-borne diseases. People living in tents and poorly constructed temporary shelters were vulnerable to communicable diseases. Following serious disasters such as TC Winston, disruption to water and sanitation infrastructure, poor hygiene and overcrowding commonly leads to increased disease transmission and outbreaks. High risk diseases identified included typhoid, leptospirosis, dengue and diarrhoeal diseases. The background level of non-communicable diseases (NCDs) in Fiji is particularly high. The FRCS health and hygiene team messages included disease prevention and hygiene behaviours that were conveyed through household visitations and during community fun night sessions.

According to the Protection Cluster, the impact of TC Winston further exacerbated pre-disaster inequalities, vulnerabilities and protection risks based on gender, age, physical ability, ethnicity, sexual orientation and other factors. The prevailing protection needs and risks were highlighted as likely to be further compounded as communities struggled to meet basic needs including food, shelter, water, sanitation and hygiene.

WASH: Damage to water sources during the cyclone decreased water quality. The need to restore and improve existing water sources was identified and included in response to TC Winston Operation. Besides damages to water supply systems, sanitation facilities had been damaged in several communities. Repairs of individual household sanitation units were considered in the relief stage followed by construction of household and communal toilets and hygiene promotion activities in communities most affected by TC Winston.

During initial response 34 households received clean water safe sanitation facilities in areas most affected by TC Winston. WASH as an integral part of the operation, continued to be an active component of the recovery operation with provision and improvement of the following activities integrated with the shelter and health programs:

- Construction of WASH facilities (attached toilet, wash room and rain-water harvesting system) for each newly built model house in 35 communities.
- Construction of 10 communal toilets blocks (with each communal toilet which consist of 2 toilets and 2 shower rooms), including water connections.
- Construction of 100 household toilets with septic tanks. These households were included in 8,000 households that received integrated hygiene and health promotion messaging.
- Construction/rehabilitation of four water networks, including rehabilitation of spring boxes, piped networks and tap-stands providing clean drinking water for 10 communities in the cyclone affected areas.

Livelihoods: Due to operational timeframe, intervention under livelihood supported Cash Transfers Programme (CTP) in the form of incentive to the local carpenters in building WASH facilities and salaries for carpenter trainers in construction of model houses. In addition, a livelihoods approach was integrated into the FRCS resilience approach that guides on-going and future long-term integrated programming to enhance community resilience.

Community preparedness and disaster risk reduction: Disaster risk reduction (DRR) was an integral element of the TC Winston response in shelter, health and WASH. DRR investments protect lives, health, environment and development gains over the longer-term. The adoption of a community resilience approach was used to guide the implementation of other programmes in TC Winston-affected communities looking at ways to strengthen resilience to respond to future disasters, and is developed with the support of Australian Red Cross and IFRC CCST in Suva. Community preparedness, community resilience and risk reduction was an integrated approach in this operation. In addition, the above-mentioned analysis and learning from this recovery operation were translated and fed into wider learning processes on the sectoral contributions to DRR through a lesson learnt exercise and through the final evaluation.

Beneficiary selection: The main criteria for validation was to prioritize most vulnerable households directly affected by TC Winston and who did not receive or received insufficient assistance from the government or other organizations. Other considerations were made to select people who lack relevant resources to cope with basic humanitarian needs on their own; those belonging to the socially vulnerable households, including women-headed households and those with many dependent children; persons with disabilities; and the sick and elderly.

Assessments: Initial damage assessments were conducted by FRCS, with data collected electronically using the Magpi survey tool based on the Rapid Mobile Phone (RAMP)-based approach. Results from the assessment were used to design the response and have been highlighted in the previous operation updates published for this appeal.

Risk Analysis: Construction work faced delays at the peak rainy season due to deliveries of materials and physical implementation of shelter and WASH components. The pressure on suppliers is also a factor with many orders unfilled or partial in delivery that affected transport to target locations. Due to this, the operation increased its construction and logistical support to the programme and introduced a lump-sum implementation system. As a result of these measures, work accelerated to catch up to the implementation schedule.

B. Operational strategy and plan

Overall Objective

The overall objective was to ensure that people affected by this disaster receive appropriate assistance in a timely, effective and efficient manner, and were supported to recover with increased resilience to disasters.

The operation aimed to support the FRCS to responding recovery needs of the communities affected by TC Winston with focus on recovery shelter, safe water and sanitation assistance, health and hygiene promotion (including PSS). The following tables indicates the number of people met by this operation:

Intervention	Target	Status
Immediate household needs and emergency shelter	5,500 households (HH) 4,000 HH with emergency shelter	100%
Shelter and settlements	1,200 households	100%
	8,000 households	103%
	35 model houses	100%
Health	8,000 households with integrated software interventions	100%
	8,000 long-lasting insecticide-treated nets	100%
Water, sanitation and hygiene promotion	4,000 HH with distribution of water purification tablets (Aqua-tabs) during relief phase (10 per household)	100%
	35 model houses in 35 community with rainwater-harvesting systems	100%
	134 HH: 34 HH with partial repair of pour flush latrines 100 HH with construction of full single flush toilet with proper septic tanks	100%
	1,500 households reached with safe sanitation promotion integrated to build back safer shelter and other hardware interventions	100% Integrated to HP component
	10 communities with spring protection	100%
	10 communities with shared/ communal WASH systems.	100%
	8,000 HH reached with household hygiene promotion (integrated into health intervention)	125%

The early recovery intervention considered the funding coverage and priority geographical areas of intervention based on impact and vulnerability, e.g. more focus on Koro Island, Levuka, Tavua, Tailevu, Taveuni and Rakiraki. The demonstration houses were prioritised proportionately, with the Build Back Safer assistance kits to extend awareness of opportunities beyond the limited number of houses able to be built under the appeal. Through the building of demonstration houses, selected community trainees received training in carpentry, masonry and plumbing. It is considered that the knowledge and skills gained by the community trainees and participating community would add additional value to the large number of BBS assistance kits. The demonstration houses also extend impact into the community outside of those directly benefitting from the programme.

The relief phase ended in May 2016 with distributions of emergency relief items made to over 9,500 households in affected communities across the Northern, Eastern, Western and Central divisions of Fiji. These included blankets, jerry cans and plastic buckets, solar lanterns, hygiene kits, kitchen sets, baby kits, dignity kits for women and backpacks for families. Emergency items such as tarpaulins, tents and shelter toolkits were also distributed according to needs. Distributions of relief items were also carried out at assessment locations, as deemed necessary.

In the recovery period, the operation followed an integrated approach of shelter activities with WASH. The latter sector provided selected households with rain water harvesting, latrines and hygiene promotion.

Community engagement, consultation and participation in training was the vehicle for knowledge and skills transfer. Communities were directly involved in making decisions on site selections for WASH facilities, providing local carpenters and construction material such as sand and gravel, as well storage and security of construction material at the sites. Activities were monitored in the field by branch volunteers under the supervision of the FRCS shelter, WASH and health staff.

The recovery operation provided an opportunity to consolidate capacity across branches' knowledge of Build Back Safer, PSS, health and hygiene promotion and address community needs at scale. FRCS staff and volunteers received on-the-

job training and knowledge in areas of shelter, WASH and health to develop expertise that reinforces community resilience and adds value to their response and recovery work. Staff and volunteers continued to improve their knowledge during the response.

The three strategic goals of the FRCS Strategic Plan 2015-19 (Build Resilient Communities; Build a strong National Society; and Humanitarian Influence) were considered at all times in the design., The response provided an opportunity for the FRCS to scale up staffing and other organizational components. Specific FRCS capacity development activities were conducted in finance, administration, WASH, shelter and logistics.

Under the TC Winston response, FRCS increased their number of registered volunteers to 958 (529 males and 429 females) in all 14 active branches.

In the operation, 570 FRCS volunteers participated in assessment and distribution of relief items and 245 volunteers took part during recovery response through WASH, shelter and health activities.

Operational support services

Human resources (HR)

FRCS mobilized a total of 570 volunteers from different branches and 25 staff (13 in FRCS national headquarters) to support the response between March to June 2016. These staff and volunteers actively participated in the assessment, implementation and management of the early response. FRCS continued to be actively engaged by providing long-term staff and volunteers to support the TC Winston operation from July 2016 and continued until the end of operation in 2017. These 25 FRCS staff include headquarters management positions, field technicians, support services and branch administrators. A total of 245 volunteers were mobilized to implement shelter, WASH and health recovery activities in the field.

Apart from the FRCS registered volunteers and staff, 335 local carpenters and 35 carpenters from Ministry of Infrastructure and Transport (MoIT) supported to implement shelter and WASH components in the field. The FRCS operation manager, in cooperation with the IFRC TC Winston Operation Manager and the team, led the implementation until the TC Winton Operation was finalised.

Most of field work related to the recovery operation was finalized in mid-June 2017 with the operation continuing to move forward with a minimal number of delegates and national staff. Administration/HR, WASH and health activities were directly managed by the FRCS staff without delegate support. Delegate roles covered operation manager and shelter to support the operation and technical sectors. IFRC finance officer role also continued to be supported through local positions.

An exit-handover strategy was developed and finalized together with FRCS management and senior staff, IFRC operations manager and finance officer were the two final external positions to exit the operation.

Logistics and supply chain

Logistics activities aimed to effectively manage the supply chain, including mobilization, procurement, customs clearance, fleet, storage and transport to distribution sites in accordance with the operation's requirements and aligned to IFRC's logistics standards, processes and procedures. To ensure timely and efficient logistics support for this operation, the IFRC AP regional logistics coordinator was deployed immediately after the cyclone for one month to support the operation logistics activities. Additionally, during the emergency phase, four RDRT logistics and procurement delegates were deployed to support FRCS and the IFRC operation. Under the recovery phase, IFRC provided logistics technical support to the operation through a six-months deployment of a logistics delegate who worked alongside with NS logistics team.

Logistics has been a challenge due to distances between islands and the limited infrastructure and transport options. Delivery of construction material to geographically dispersed locations was slow due to lack of commitment by the suppliers. As a result, the logistics costs for the operation were significantly higher in comparison to many other IFRC-supported operations. Most of the needed materials for model shelter houses, BBS kits and WASH programmes were procured locally by FRCS procurement team supported by IFRC logistics delegate following IFRC standards procurement procedures. IFRC standard NFI's were sourced by the IFRC Regional Logistics Unit (RLU) in Kuala Lumpur and shipped directly to Fiji.

As FRCS, did not have a permanent warehouse facility in Suva, a Mobile Storage Unit (MSU) donated for the operation was erected to enable receipt of non-food items, BBS kits and some building materials for shelter and WASH programmes.

Other construction material for the model shelters, communal and household toilets were delivered directly from the suppliers to the construction sites using FRCS truck and rented vehicles.

FRCS has pool of light vehicles and two trucks were used for operational purposes alongside with long-term programmes. IFRC supported the recovery operation with three Vehicle Rental Programme (VRP) vehicles to meet the fleet needs. All vehicles management has been coordinated by the FRCS fleet with the IFRC support. These vehicles were donated to the FRCS after completion of the programme, through de-registration process by the Land Transport Authority (LTA). IFRC RLU in Kuala Lumpur extended its technical support, such as general logistics matters, technical approvals of procurement files as well as deployment of regional fleet officer to Fiji to support FRCS with improving their fleet management system and the operation.

Communications

Communicating with key audiences was critical to maintain and increase public, government and donor support, both locally and internationally. IFRC communications efforts highlighted the humanitarian needs on the ground and positioned the response and recovery efforts of FRCS and Movement partners.

A proactive media engagement strategy was pursued with international news organizations and via social media, complemented by the production of communications materials, including regular key messages, facts and figures, infographics and talking points to inform, guide and support FRCS communications activities. Key anniversaries since TC Winston were marked, ensuring the profile and positioning of Fiji Red Cross and IFRC was enhanced a communications plan, stories, blogs, press releases, videos and photo galleries. This led to sustained visibility and credibility among key stakeholders. All TC Winston communications materials were shared with 190 National Societies in the weekly IFRC Newswire, on the IFRC website and with domestic and international media via avenues such as social media, field visits and individual proactive outreach.

There were 30 web stories on TC Winston, as well as 7 media releases and 5 edited videos. Two regional newsletters (Pacific Voices) also carried the Winston material. IFRC assisted in rebuilding the FRCS's website, which crashed during Winston; its relaunch was on the one-year anniversary.

Communications with the affected population was challenging due to distance, remoteness and the fast-paced nature of relief. FRCS volunteers were essential overcoming these barriers and contributed to lessons learned on information flows with communities and beneficiaries. Please see the community engagement and participation (CEA) section below.

Security

No significant security issues or threats for FRCS and IFRC staff were posed during this operation.

Planning, monitoring, evaluation and reporting (PMER)

Monitoring and evaluation was conducted throughout the operation to monitor the progress of implementation and to support the large number of activities. The TC Winston operation team held team meetings twice a month to track the progress of the operation; these were recorded in action sheets that were then communicated with the National Society for follow-up. The feedback, which was either from the Divisional Service Coordinators (DSC) or branches, were documented accordingly by the operation team.

An evaluation was undertaken in November 2017 guided by the IFRC evaluation framework. (See more information in achievement against Outcome 7 below)

Reporting on the operation was carried out in accordance with the IFRC minimum reporting standards, and included six operation updates and two revised emergency plans of action (EPoA). A significant number of pledge-based reports were produced for donors. With the limited dedicated PMER support available to the operations team, the PMER requirements were challenging.

Administration and Finance

Given the scale and pace of the initial relief phase, the verification and payment process for acquittals encountered delays; these caused a large backlog of finance and administrative work. This situation was compounded by the large volume of

procurements and delays by many suppliers. An additional finance position was created and a second finance officer was recruited for a short period to support with the backlog expenditures.

Information Management (IM)

During the relief response, the IM focused on data collection, analysis, management and presentation of data, plus logistics stock management. Information management practices continued to be improved to better support decision-making, increase transparency and enhance coordination. However, this remained a challenging area for FRCS. At the branch level, there was a wide variation on how well branches managed information and limited PMER support available to the operation seriously affected the management of information.

Information technologies (IT)

Under the operation, computers, laptops, tablets and printers were procured for FRCS staff and volunteers at the headquarters and branches. These were used for data collection, monitoring and reporting requirements, as well as raising skills in new technologies.

Community Engagement and Accountability

In the Fijian context and aligned with established protocols, the initial communication and engagement with the community was done through the district government administrator. Consequently, proposed plans were discussed with the community, and an agreement was signed between the community and FRCS to establish the community contribution to recovery actions, time lines and exit strategy.

Thereafter FRCS community-based volunteers entered the community around the demonstration house as an entry point. Community feedback and views were gathered through the community engagement and were incorporated into regular monitoring, evaluation and reporting processes. Templates and agreements were prepared, as well as key messages for consistent community approach and a community engagement overview. The agreements and plans were meant to ensure that expectations were managed on all sides and clear consistent messaging was delivered and received.

While there was much emphasis on ensuring community engagement, it was recognised that challenges existed in maintaining regular and consistent information flows with communities, particularly in communities where there was significant movement of people (for example in Koro) or in communities where there may not have been extensive community programmes or relationships. Delivery of services through volunteers created challenges for information flows and this operation identified several lessons learned on how to improve: better communication on site and beneficiary selection should be better communicated and full participation of a wide section of community members can increase engagement and understanding.

Gender and diversity

Gender and diversity considerations were mainstreamed throughout all sectors in line with the Minimum Standard Commitments to Gender and Diversity in Emergency Programming. Sex, age and where possible disability disaggregated data of the target population was collected. Gender and diversity analysis was an integral part of all assessments, service provision and monitoring. Beneficiaries criteria for shelter and WASH components strictly considered most vulnerable persons, such as elderly, pregnant or lactating mothers, chronically ill persons and single mothers.

Partnerships and Resource Development

FRCS and IFRC closely coordinated with Movement partners and external partners, maintaining close contact and sharing regular updates through fact sheets, information bulletins and teleconference calls. Discussions with partners were being led by the Partnerships and Resource Development (PRD) regional unit with support from the CCST team.

C. DETAILED OPERATIONAL PLAN

The activities in the operational plan are indicated as green for completed, yellow for partially created and red for not completed.

Health & care

The Health and Hygiene programme focused on integrated hygiene promotion, psychosocial support, gender based violence prevention, disease prevention messaging and health promotion activities. The sessions and trainings covered typhoid, leptospirosis, diarrhoea, dengue, zika virus, typhoid and basic hygiene promotion, aligned with Ministry of Health & Medical Services (MoHMS) clean up and source reduction messaging, including how to recognise and treat potential mosquito breeding grounds and reporting of environmental hazards. Inputs are provided to MoHMS Event Based Surveillance reporting system. FRCS had an extensive network of community based volunteers who were utilized to support the response.

Health and care	
Outcome 1. The immediate risks to the health of affected populations are reduced.	
Output 1.1 Psychosocial support provided to the target population.	
1.1.1. Coordinate with Health and Nutrition Cluster and Safety and Protection Cluster to assist in detailed assessment and share information to determine level of psychosocial support (PSS) needs.	
1.1.2 Psychological First Aid (PFA) ToT to FRCS counterpart Safety Coordinator.	
1.1.3: Training of 80 PFA Champions in PFA to be mobilized across affected Branches.	
1.1.4: FRCS staff and volunteers affected by TC Winston receive PSS.	
1.1.5: Prepare, in collaboration with Health and WASH teams, integrated Health and Hygiene community based volunteer training program, including preparation of IECs and referral pathways (PSS and GBV) with integrated messages on GBV and child protection (CP).	
1.1.6 ToT and refresher training to Health and Hygiene Community Trainers in collaboration with Health and WASH teams on PSS, GBV and CP.	
1.1.7 Health and Hygiene Community Trainers. Train 200 community based volunteers in affected Branches (target areas prioritized in collaboration with the MoH).	
1.1.8 House-to-house PSS (including referral using pathways of people requiring mental health or GBV support) and health awareness in affected communities target 8,000 households	
1.1.9 Develop FRCS PFA toolkit	
Output 1.2: Target population is provided with community-based disease prevention, epidemic preparedness and health promotion measures	
1.2.1 Coordinate with Health and Nutrition Cluster and the Public Health Intervention Sub Cluster to share information and determine health needs and priorities including FRCS activities as part of the National Zika Action Plan	
1.2.2 Prepare integrated Health and Hygiene community based volunteer training programme, including preparation of IECs and health referral pathways	
1.2.3 ToT (4 trainer per branches, a total of 16 TOT) and refresher training to Health and Hygiene Community Trainers in collaboration with PSS and WASH teams	
1.2.4 Health and Hygiene Community Trainers train 200 community based volunteers in affected Branches (target areas prioritised in collaboration with the MoH)	
1.2.5 House-to-house health awareness, including referral using pathways with further health needs in affected communities targeting 8,000 households	
1.2.6 Undertake awareness-raising and clean up campaigns in target communities in collaboration with the MoH. Refer environmental hazards to relevant authorities	
1.2.7 Distribute 18,100 mosquito nets to target households especially to pregnant women and households with children under 5	

1.2.8 Follow up visits to identified households to check on mosquito net usage	
1.2.9 Provide 200 volunteers with personal protective equipment, including mosquito repellent, hand sanitizer, gloves	

Progress towards outcomes

The Health component nearly achieved all its targets. It had intended to reach 50,000 people in 10,000 households (HH) by end of April 2017, and reached 51,647 and 11,092 respectively. This was done mainly via integrated health and hygiene interventions with psychosocial support, distribution of insecticide treated mosquito nets for prevention of vector-borne disease, gender awareness, health messaging, WASH and malnutrition screening for children from age six to 59 months.

The health activities were implemented in coordination with the Health & Nutrition Cluster headed by the MoHMS concentrating on some disease hot spots and hard-to-reach areas. Strategy employed was based on house-to-house visitation and messaging where trained volunteers educate, demonstrate and advocate health promotion and disease prevention using developed and tested brochures and charts apart from distribution of NFIs.

Communities Covered

A total of 224 communities were covered for health intervention under the EPoA. These communities were selected based on some criteria such as having half or more than half of their shelters damaged, were difficult to access and / or had significant health issues such as disease outbreaks. The breakdown by divisions is noted below:

Divisions	No. of Communities
Central	39
Northern	72
Western	100
Eastern	13

Communicable Diseases

As indicated in the operational update 2, prevention strategies against typhoid, leptospirosis, dengue fever, chikungunya and zika remained priorities as sporadic cases remained in various communities. Apart from these, the most common of these communicable diseases noted in first 14 weeks of 2017 (to mid-April) were typhoid, leptospirosis and dengue (in addition to influenza) as reported by the Fiji Centre for Disease Control (FCDC) *Surveillance Update on Priority Communicable Diseases* (Week 14 – 9/4/17, FCDC, Ministry of Health).

Psychosocial Support (PSS)

Psychosocial support was an identified need in the early days of TC Winston. It is included in the EPoA and integrated into the Health component with intensive training of volunteers in administering support and recognizing needs for referral through established system of referrals.

The FRCS trained at least 104 volunteers and staff on Psychological First Aid (PFA) and psychosocial support. In this operation, more than 6,088 affected persons have been reached with PSS, which includes three persons referred for professional counselling, 130 for social welfare support and 50 to health facilities. It is anticipated that PSS will continue to be an on-going need for the next three to five years. The breakdown of referrals by branches are shown in table below:

Branch	Social Welfare	Health Dept	Counselling
Suva	50	14	1
Levuka	1	7	0
Bua	7	2	0
Savusavu	31	4	1
Taveuni	12	6	0
Rakiraki	110	79	0
Nalawa	24	10	1
Tavua	5	7	0
TOTAL	**130**	**50**	**3**

Brochures, Mosquito Nets and Hand Washing Soap Distribution

EPoA provided for development of various training tools and equipment including brochures on water treatment, hand washing, gender awareness, etc. The health team distributed 57,219 brochures in their house-to-house visits and other community

trainings around the four divisions. Though the mosquito nets were all distributed, only 50 per cent of the follow-up was conducted to these 6,997 households due to time constraints and human resource shortages. Of these were followed up occurred, 70 per cent of the people reached were correctly using the mosquito nets, based on observations and interviews.

The following table details the items distributed:

Item	No. Distributed
Health Brochures	57,219
Insecticide Treated Mosquito Nets	6,997
Hand Washing Soap	9,087

Gender & Protection

Gender was a cross-cutting issue in the response and recovery phases. With support from other portfolios, intensive and accelerated training for all volunteers and staff was made possible with gender integrated with other health trainings and activities. This increased awareness culminated (for the first time) in the drafting and endorsement by the Board of the FRCS of a new Gender Policy which is now in place.

The FRCS Code of Conduct and Child Protection policies were also widely disseminated through induction sessions at branch level requiring staff and volunteers to sign agreement of these policies. Furthermore, the heightened awareness also brought out gender / protection issues from evacuation centres, communities and even within the society. The EPoA also provided for the procurement of personal protective equipment (PPE) to volunteers for community outreach.

Malnutrition Cases in Children

FRCS, in collaboration with UNICEF and through this EPoA, to screen for Severe Acute Malnutrition (SAM) and Moderate Acute Malnutrition (MAM) in children from 6 to 59 months. A total of 8,462 children in the age category were screened of which only one was found to have SAM and was referred accordingly. The other mild and moderate cases were followed up by health officers at local levels and district hospitals. The parents or guardians were also counselled regarding the result and the steps to normalize nutritional status; these adults were advised to also seen assistance in health facilities for proper care. The following table classifies the malnutrition status found at the branch level (note: if a branch is not mentioned, no cases were identified in these locations):

Branch	Mild Malnutrition	Moderate Malnutrition	Severe Malnutrition
Suva	887	-	-
Koro	209	-	-
Levuka	418	-	-
Bua	641	2	-
Savusavu	849	3	-
Taveuni	843	2	1
Rakiraki	899	-	-
Nalawa	194	-	-
Tavua	1005	-	-
TOTAL	**5,945**	**7**	**1**

Fiji Red Cross Rakiraki Branch Volunteer conducting hygiene promotion to primary school class in Rakiraki. 2017. (***Photo: IFRC***)

Trained Health Volunteers
The proceeding sections of this health update mentions various training conducted in health during the TC Winston operation. A total of 227 health volunteers (65 per cent were female) were registered, inducted and received integrated training in the various areas of health. The following details the distribution of volunteers by branches:

Branch	Active Volunteers
Suva	23
Levuka	28
Bua	20
Savusavu	30
Taveuni	20
Rakiraki	24
Nalawa	21
Tavua	20
Ba	20
Lautoka	21
TOTAL	**227**

Water, sanitation, and hygiene promotion

Needs analysis: The WASH components were designed based on RAMP survey and discussion with FRCS, WASH Cluster and FRCS branches in terms of approaches and sustainability. The activities under WASH included:

- Providing safe drinking water to 10 identified communities affected by TC Winston through the provision of Spring Water Protection supply system.
- Installation of rainwater harvesting systems and attached toilet/shower for 35 model shelters
- Construction of 10 communal toilets in affected 10 communities in public locations and infrastructures
- Construct 100 household toilets per National standards in a district affected by TC Winston
- Hygiene promotion activities, including visits to 8,000 households, fun nights and distributions (see HP section)

Programmes were implemented following consultation with local authorities, communities and direct users. During the emergency response, household sanitation and safe water provision activities were implemented for 34 households in 2 communities in Naboutolu and Nokonoko in Ra province. WASH, shelter and health sectors worked together in dissemination of messages around good health and hygiene practices in the affected communities to reduce the risk of water-borne, water-related and vector-borne diseases.

Water
Based on the results of assessments, needs in various areas for water quality improvement was suggested. FRCS distributed drinking water, through filled jerry cans and bottled water in the immediate relief response. Damage to water sources occurred during and after the cyclone due to debris and other technical faulty water source structure. The need to restore and improve existing water sources have been identified and planned for ten communities to receive clean water through rehabilitation/construction of water supply system e.g. spring catchments/ gravity flow networks to provide clean water in disaster affected areas. Three spring water sources were upgraded into protected springs providing clean water to nine local communities in Ra, Lomaiviti Koro and Savusavu in the Northern Division with one ongoing construction in one of the remote areas in Ra.

Sanitation
Repairs of individual household sanitation units were only considered suitable in the relief stage. These repairs presented an example of best practice in an emergency. Faced with the cyclone and the potential for adverse effects of unhygienic conditions caused by lacking and damaged sanitation infrastructure, FRCS used the health and hygiene promotion to consider invest, when possible, in more sustainable sanitation options. During the emergency response, 34 partial repairs and construction of 5 communal toilets were completed (6 households per each full unit).

Communal toilets
Ten communal toilets were constructed and designed in two models. These WASH 1 model consists of 2 toilets with an outside hand wash tap-stand. WASH 2 has 2 toilets with 2 shower rooms with tap-stand designed for a larger community with inadequate sanitation access. These toilets are constructed at the community centres, community halls, churches, or other public locations. Five areas received WASH 1 model and 5 communities received WASH 2 models.

Household toilets
After the initial response FRCS was approached to repair existing toilets. The RAMP survey for secondary assessments and WASH cluster support found that most of the prioritized households had unimproved sanitation, unsafe toilet structures and leaking of sewage from an open waste drain or dumping pit.

Identifying the areas reached by other agencies and a follow-up on FRCS commitment, this operation built 100 household toilets and septic tanks in Ra Province with the following objectives:

- Provide a safe, resilient structure that can withstand Category 5 cyclone
- Introduce an improved model for modern techniques and skill to strengthens local awareness in sanitation.
- Introducing a cost-effective model

Beneficiary selection for the 10 households per village was undertaken in engagement with the village leaders and head of every household. Village heads were consulted on a set of eligibility criteria as a beneficiary of these units, such as; most vulnerable in terms of access, health, social and economic status, People living with disability (PLWD), elderly, single parent and having no access to any sanitation unit.

Implementation of these structures started, with each community given a target of 5 weeks upon receiving all the materials for 10 household toilets. Local carpenters were recruited on a volunteer basis with a small meal allowance to support construction. Selection of these households were finalized by the village council and verified by the branch administration. After completion of the project, the 10 households' beneficiaries signed an MoU fully stating the roles of FRCS and responsibilities taken by each household in the present and future. The handover was conducted by FRCS Management with the guidance of branch administration. Beneficiaries contributed in identifying accessible sites, provision of unskilled human resource, excavation of the septic tank, working together with the team and agreement to build and maintain the sign off household toilet agreement.

Water, sanitation and hygiene promotion	
Outcome 2: Risk of waterborne, water-related and vector-borne diseases in targeted communities reduced	
Activities planned	
Output 2.1: Access to safe water by target population in affected communities increased	
2.1.1: Deploy a WASH RDRT to support WASH-related activities	
2.1.2: In coordination with national WASH cluster, assist in specific assessment to determine level of support needs	
2.1.3: Conduct joint secondary assessments, design approach and procure materials	
2.1.4 Distribute 4,000 cards of aqua tabs (10 tabs per card) through 10 branches received from MOHMS and WHO (1 card per household).	
2.1.5 Provide 10 communities with assistance with access to water.	
2.1.6 Install 35 household rainwater harvesting system (for each demonstration house).	
2.1.7 Conduct beneficiary satisfaction surveys, following provision of relief and recovery WASH services	
Output 2.2: Access to adequate sanitation facilities by target population in affected communities increased	
2.2.1: Conduct joint and coordinated secondary assessments, design approach and procure materials.	
2.2.2: In Rakiraki, 8 communities, provide 750 households (3,750 persons) direct assistance of • 34 households with partial repair of pour flush latrines • 100 households with construction of full single flush toilet with proper septic tanks (national certified standards) • 10 communities with construction of 10 communal sanitation systems - optional to install in household area	

2.2.3 Provide adequate sanitation facilities in 35 demonstration houses as assisted by Shelter component	
2.2.4: Complement additional shelter activities in these 35 communities – 1,200 households. The additional assistance will be complemented by WASH activities and strongly supported with ongoing technical support	
2.2.5: Conduct beneficiary satisfaction surveys following provision of relief WASH services in an integrated manner with other sectors	
Output 2.3: Knowledge, attitude and practice on safe water, sanitation and hygiene by target population increased	
2.3.1: Train 200 community volunteers in hygiene promotion and work alongside Red Cross volunteers and other sectors – same as Community Base Development Project (CBDP) volunteers	
2.3.2: Mobilize 200 community volunteers, ensuring gender and diversity balance to form part of the multi sector teams	
2.3.3: Reproduction of awareness materials and communication methods/ mode of delivery	
2.3.4: Complement hygiene kit distributions with hygiene promotion messages	
2.3.5: Assist 8,000 households with hygiene promotion messages in coordination with the health team	
2.3.6: Assist 6 communities in Rakiraki and other target areas with increased knowledge of source to mouth including operation and maintenance of gravity water supply systems	
2.3.7: Conduct beneficiary satisfaction surveys following provision of relief WASH services in an integrated manner with other sectors	

Progress towards outcomes

Community water supply networks

FRCS has completed three spring sources supplying nine communities, seven villages and two settlements. These spring project implemented in Naboutolu Ra province, Tuatua village in Koro Island and Dromuninuku village in Savusavu. The last spring box was connected in Veidrala Ra province. These water networks are connected to fresh water springs with higher flow rate to supply an adequate quantity of water to the communities. FRCS branches, local authorities and communities are working on the installation water meters in the future to control water consumption. In addition, FRCS is working together with MoH and other agencies in developing village water committees that will be responsible for the operation and maintenance of the networks and the communities will take full ownership of their water supply facilities.

This is the first recovery work rolled out by the FRCS, which demonstrated confidence and ownership at all levels of these actions.

Fiji Red Cross Society branch and community members build a safe water supply in the Tuatua Village in Koro Island. January 2017. (***Photo: FRCS***)

All four spring catchment systems were completed and handed over to beneficiaries. These gravity water systems provide safe drinking water to ten communities (eight villages and two settlements). Water projects were implemented in Naboutolu in Ra province, Tuatua village in Koro Island, Dromuninuku village in Savusavu and Veidrala village in Nalawa. FRCS branches, local authorities and communities are working on the installation water meters in the future in order to control water consumptions

WASH RDRT support played an essential role in community engagement and negotiations at different levels. The FRCS has growing interest in water operations within water project activities understood as part of regular programming in future operations.

Rain water harvesting

Installation of rainwater harvesting systems was completed along with the implementation of the shelter component. The water spring protection was installed in the following communities.

FRCS Branch	Community	Households reached
Rakiraki Branch	Naboutolu	47
	Draunivau	34
	Veidoko	30
	Namuaimada	79
	Biribiri Settlement	4
Koro Island	Tuatua	78
	Naunu Settlement	3
Savusavu Branch	Dromuninuku	78
	Nailawa Settlement	8
Nalawa	Veidrala	68
	Total water projects	**429**

Sanitation
Communal sanitation was completed for 10 communities in Ra Province, Savusavu and Namacu in Koro Island.

With support from the WASH RDRT, 100 household toilets were completed in Ra province, which was most affected. Building of these structures served the need for improved sanitation facilities as well as building WASH resilience in the communities. Selection of these facilities was based on vulnerability and capacity assessments of families affected by TC Winston. The design of these toilets was discussed with WASH cluster in terms of accessible and relevancy to the local settings. As some of these communities are typhoid and dengue-affected areas, these measures enhanced the capacity and accessibility of local communities to reduce the effects of these diseases. The following table details the installation of household toilets and the location of the 100 household toilets built:

Community	Handed over to	Number of households
Naserelagi	Women Committee	13
Vunisea	Village Council	8 households and 1 kindergarten
Barotu	Village Council	9
Matawailevu	Village Council	12
Nayaulevu	Village Council	14
Vatukacevaceva	Village Council	10
Vivili	Village Council	10
Dromuninuku	Village Council	9
Namacu, Koro	Village Council	8
Malake Island	Village Council	6
Total	**10 facilities**	

Branch	Community	Number of HH toilets
Rakiraki Branch	Balabala	10
	Mataveikai	10
	Manyava	10
	Nativi	10
	Namara	10
	Nausori	10
	Navitilevu	10
	Nailawa	10
	Burelevu	10
	Malake Island	10
Total	**10 communities**	**100**

Hygiene promotion
Hygiene promotion is an integral part of WASH interventions. FRCS reached 8,000 households for house-to-house hygiene awareness promotion through messaging and fun night activities, to draw attention of the elderly to young generations.

Fiji Red Cross Society and community members constructing a single household latrine in Ra, April 2017. (***Photo: FRCS***)

Shelter and settlements (and household items)	
Outcome 3: The immediate shelter and settlement needs of the target population are met.	
Activities planned	
Output 3.1: Essential household items are provided to the target population.	
3.1.1 Mobilize volunteers and provide gender and diversity balanced volunteer teams with orientation on distribution protocols	
3.1.2Distribute non-food relief items to 5,500 households	
3.1.3 Conduct post-distribution surveys with communities	
Output 3.2: Emergency shelter assistance is provided to the targeted population.	
3.2.1 Train 120 volunteers in use of tarpaulins and shelter tool kit including skills around passing on knowledge	
3.2.2 Select and register households that will receive emergency shelter assistance – tarpaulins and shelter tool kits	
3.2.3 Distribute emergency shelter items (shelter tool kits and tarpaulins) up to 4,000 households	
3.2.4 Provide technical orientation to families on the use of shelter toolkits and tarpaulins	
3.2.5 Conduct beneficiary monitoring and post distribution surveys.	

Progress towards outcomes

A total of 119 volunteers (48 women and 71 men) and 99 community members in 8 communities were trained in shelter tool kit training. Feedback from the participants indicated that the training was useful and easy to understand. The trained volunteers feel confident that they can pass on knowledge to the community.

The following table summarizes the essential non-food items distributed, which included a back pack:

Distribution location	Back pack	Tarps	Hygiene kit	Dignity kit	Kitchen set	Blanket	Solar lights	Jerry can	Shelter tool kits
Rakiraki	158	3,134	977	260	1,169	941	1,586	1,414	1,247
Ba	1,239	1,585	311	159	648	1,337	124	1,289	80
Tavua	482	994	999	44	557	641	378	304	442
Lautoka	532	739	658	7	344	963	0	1,039	64
Nadi	134	119	94	64	85	127	16	138	0
Sigatoka	399	124	378	172	158	497	0	328	0
Levuka	317	317	51	29	171	317	158	89	0
Savusavu	839	708	711	174	365	470	4	548	102
Taveuni	99	517	372	89	90	93	0	279	49
National Office	519	3,175	1,165	221	837	3,611	1,202	1,895	825
Total	**4,718**	**11,412**	**5,716**	**1,219**	**4,424**	**8,997**	**3,467**	**7,323**	**2,809**

Shelter recovery	
Outcome 4: Affected households have recovered safer shelter and gained awareness and skills on safer shelter.	
Activities planned	
Output 4.1 Affected households whose houses were damaged have repaired or rebuilt back better.	
4.1.1 Conduct training-of-trainers (TOT) sessions for 20 FRCS volunteers and staff in 'All under one roof' (disability inclusive shelter and settlements in emergencies) for both National Society preparedness and awareness during recovery phase	
4.1.2 Continue market analysis and identify modality for providing shelter materials	
4.1.3 Identify households or communities that will receive shelter repair and rebuilding assistance, revalidate their eligibility and register them (all in consultation with communities and according to existing community processes)	
4.1.4 Identify and train local construction teams on repair and reconstruction methods to the agreed 'build back safer' standards and 'All under one roof' guidelines	
4.1.5 Provide selected households with orientation on the shelter recovery programme, process and obligations	
4.1.6 Construction of 35 demonstration shelters (1 per community) with local builders and community	
4.1.7 Provide 1,200 selected households with fully damaged houses with shelter materials, technical guidance and labour support through either voucher or conditional cash system	
4.1.8 Provide ongoing technical advice and regular monitoring to ensure that repairs or rebuilding works have been correctly implemented in accordance with 'build back safer' principles	
4.1.9 Conduct beneficiary monitoring on the impact and use of skills acquired and the usefulness of shelter solutions provided	
Output 4.2: Awareness of target communities on build back better for shelter is raised.	
4.2.1 Collaborate with the Shelter Cluster in the development of IEC materials and 'build back safer' messaging	
4.2.2 Conduct 'build back better' ToT training for 20 FRCS volunteers and staff so they can better support and monitor implementation of shelter activities in communities	
4.2.3 Using IEC materials developed by the shelter cluster, raise awareness of how households targeted by shelter interventions can improve their houses to be safer against future cyclones	
4.2.4 Facilitate activities for safe shelter awareness and risk reduction in selected 'at risk' communities targeting 8,000 households	
Progress towards outcomes	
Demonstration House Demonstration houses are designed to better withstand future cyclones through BBS principles of building on strong foundations; tying down structures from top to bottom; bracing them for future storms; ensuring joints are strong and a proper roof; and the location of a house o safe site and ground. These houses are also designed to provide good indoor ventilation. Each house was provided with attached toilet and washroom facilities, a kitchen area, and ramps for greater mobility access and a rainwater harvesting system. To enable families to put this principle into action, IFRC provided technical orientation for builders and beneficiaries.	

All 35 demonstration houses were completed and handed over to beneficiaries in 35 communities in the country's 4 divisions in Fiji as of end of July 2017. In total 335 carpenters received skilled training in house construction, including reception of full safety gear for each member to continue their construction livelihood. Skills covered by the two-week demonstration house construction included carpentry, masonry, and plumbing for housing and safe sanitation, BBS installation instructions and principles of All under One Roof, especially improved access.

Demonstration Shelter Model in Delaikuku in Tailevu. April 2017. (**Photo: FRCS**)

Demonstration House Design

Using quality design and materials, the demonstration houses were designed to better withstand future cyclones through BBS principles. These principles include building on strong foundations; tying down structures from top to bottom, bracing them for future storms; ensuring joints are strong, a proper roof and the house on safe site and ground. These houses walso deere signed to provide good indoor ventilation. Each house has an attached toilet and washroom facilities, a kitchen area, and where needed a ramp for greater mobility access. Each house has a rainwater harvesting system.

BBS Materials Assistance & Awareness Sessions

All 1,200 BBS kits were delivered and installed during from mid-April to mid-July 2017. The kit is low-tech and basic hand tools are provided with each kit. If the house was already built, the kit could be fitted to be 'non-invasive' increasing the cyclone resistance of any house. BBS assistance included BBS awareness sessions, hardware strengthening materials (strapping, roofing screws, truss gussets etc.) and cash for labour. Together with IEC, BBS sessions and demonstration house trainings, hand tool sets and safety gear were used by the community and the trainees for the installation of the BBS assistance kit on 1,200 houses. In the same communities, households not receiving shelter repair support received build back safer awareness messaging. The Build Back Safer Assistance, is aligning with disaster risk reduction practices for shelter in the affected areas.

A total of 8,272 households were reached with BBS awareness messaging and demonstration led by the local trainers, through these sessions. Open house sessions were held for both the demonstration houses and the BBS kit installation; construction was paused at various stages so the community could visit the on-going project, observe and participate in discussions around construction and BBS. The IEC materials – Build Back Safer booklets, developed by the Shelter Cluster through FRCS and IFRC's participation and was finalised in mid-September. The 34-page booklet was translated into local dialects of I-taukei and Hindi was completed in mid-February. Screen printed signboards (1.2 square metres) were fabricated by a local supplier and installed in each village beside the FRCS/IFRC demonstration house. Four A1 size messages were printed in the local iTaukei dialect portraying Shelter Cluster BBS messages and disaster preparedness advice. In addition, A4 size plaques were produced and installed on each demonstration house indicating funding and implementing organisations.

Each demonstration house has been provided with rain water harvesting, latrines and hygiene promotion. Shelter response was partly funded by the European Commission's Humanitarian Aid and Civil Protection department (ECHO) through a multi donor contribution to the appeal. DG-ECHO and Australian Red Cross contribute to the construction of the demonstration houses.

Shelter/ WASH Integration

With regards to integration of shelter activities with WASH, the WASH sector provided selected households with rain water harvesting, latrines and hygiene promotion. In addition, there was livelihoods sector support around cash for work for skilled and unskilled labour. The income earned from the integrated activities enabled the targeted groups to meet their immediate needs and to invest in their livelihood recovery. Reconstruction was slow due to significant issues in country with procurement of materials for building during recovery. This was experienced by all agencies supporting recovery efforts. For the FRCS it impacted the speed in which demonstration houses were built and in which demonstration of the finished product was observed by communities.

Restoring Family Links (RFL)	
Outcome 5: Restoring Family Links (RFL) service is enhanced within the National Society	
Activities planned	
Output 5.1: People in affected areas and relatives outside these areas have access to appropriate means of communication to re-establish and maintain contact with loved ones	
5.1.1: FRCS teams will facilitate communication for people in affected areas to re-establish contact with their families.	
5.1.2: Active tracing is considered support to persons who have not succeeded in re-establishing contact with loved ones in and outside of Fiji	
5.1.3: National Society staff and volunteers' knowledge and skills in providing RFL services are improved	
Progress towards outcomes	
As of October 2016, all tracing cases related to TC Winston were closed. The remaining cases that were still pending were closed following a visit to Koro and Cicia by the FRCS teams, who confirmed that the families had been reunited or moved to the mainland. Up to 39 recorded family tracing cases have been successfully concluded. FRCS staff and volunteers delivered two Red Cross messages in the community from people in detention who had not received news of their families. ICRC conveyed replies from families to those in detention. A RFL delegate from Australian Red Cross was deployed in Fiji in October 2016 and worked with FRCS to enhance volunteers' knowledge of responding to RFL needs in disasters based on the experience of TC Winston response.	

National Society capacity building

FRCS branches in the most affected areas were impacted and damaged by TC Winston and some required renovation or new facilities. Damage assessments were conducted for most of the branches affected by TC Winston.

National Society capacity building	
Outcome 6: A clear and comprehensive domestic plan covering the short- and long-term needs is developed by the National Society	
Activities planned	
Output 6.1: The National Society's branches have the resources required to deliver on the operation	
6.1.1: Assess the damage to FRCS branch offices and containers	
6.1.2: Support procurement and construction of branch offices	
6.1.3: Support capacity development of branch executives, administrators and division service coordinators through leadership, finance and administration trainings	
Output 6.2: The National Society's headquarters has the resources required to deliver on the operation	
6.2.1: Set up Emergency Operations Centre (EOC) at FRCS headquarters	
6.2.2: Procure vehicles and IT equipment	

6.2.3: Recruit staff to support the operation	

Progress towards outcomes

The FRCS EOC was set up at the headquarters in Suva, and procurement of necessary equipment and facilities was completed. Recruitment of local staff to support the scale-up of integrated shelter and WASH components also was completed.

During TC Winston operation, FRCS staff and volunteers increased their capacities through on job training in finance, logistics and technical areas of shelter and WASH. In addition, IFRC supported branches' financial development through TC Winston operations. Furthermore, FRCS staff and volunteers increased their capacities in community based PSS, health and hygiene programmes.

Furthermore, IT equipment, such as desktop computers, lap tops, sat phones and internet facilities were provided to FRCS HQ and branches.

The BOCA training was completed during the operation.

Quality programming

Outcome 7: Continuous and detailed assessment and analysis is used to inform the design and implementation of the operation

Activities planned

Output 7.1 Needs assessments are conducted and response plans updated according to findings.	
7.1.1: Mobilise FRCS staff volunteers for assessment	
7.1.2: Deploy regional tools to support assessments	
7.1.3: Procure electronic tablets and review assessment templates for Gender and diversity to support FRCS in conducting assessments.	
7.1.4: Following an analysis of the response plan and the beneficiary needs, mobilize assessments teams to carry out early recovery assessments and draft an early/longer term recovery strategy.	
Output 7.2: Mechanisms are in place to facilitate two-way communication with disaster affected beneficiaries and ensure transparency and accountability.	
7.2.1: Provide appropriate information, including on the scope of projects to disaster affected people.	
7.2.2: Ensure that effected people can deliver feedback on the programming and report any complaints, in confidence, and that such are actioned by FRCS and its partners	
Output 7.3: Additional assistance is considered where appropriate and incorporated into the plan.	
7.3.1: Ensure that any adjustments to initial plans are informed by continuous assessment of the needs and monitoring of relief and recovery services provided to date.	
7.3.2: Evaluations	

Progress towards outcomes

During initial response, FRCS deployed teams to undertake assessments and to determine the needs of affected people. Initial needs and detailed assessments informed the revisions of the emergency plan of action. FRCS, with the support of IFRC further revised the recovery strategies based on the latest assessments and continuous monitoring of the operation.

Each FRCS branch in affected areas deployed assessment and distribution teams consisting of trained first aiders, shelter kit trainers and psychosocial support volunteers. The volunteer teams were led by trained ERT personnel. FRCS uses a pre-

determined initial damage assessment (IDA) format that is in line with Fiji national IDA standards. The assessment forms were uploaded onto tablets to support rapid data collection and analysis in the field. For example, three visits were made to Koro Island:

- First visit – Emergency relief for seven high priority villages, distribution of relief items supported by Australian Red Cross, New Zealand Red Cross, UNICEF, MoH, and Oxfam, as well as household RAMP survey.
- Second visit – Relief distribution for remaining communities (seven villages and two settlements), construction of communal flush toilet as well as water testing and onsite assessment.
- Third visit – The assessment finding was shared through the WASH cluster and all relevant organizations. The detailed assessments provided the base for the FRCS approach for recovery focus on Shelter – demonstration house and WASH for Communal Sanitation and Water Spring Project.

Strengthening the FRCS capacity for data management and implementation of technological solutions was part of the response. Initial and secondary RAMP assessments were conducted across the areas of intervention at household level. Further data was referenced for triangulation, such as damage assessment from NDMO, which measured the number of partially and fully destroyed houses affected by TC Winston. Population data was used to measure the percentage damage per village and settlement. The areas targeted were those with larger populations and heavy damage in the more remote affected locations. The damage to the villages was further examined by comparing aerial imagery pre- and post-Winston, which was further verified in field visits. Maps of all areas in Fiji, supplied by the Lands and Survey department in Suva, provided detail, such as place-names, small dirt-roads etc. at a better scale than mapping software. Coordination with other actors was essential to avoid overlap and to ensure effective coverage of affected areas.

The community engagement and accountability process was central strengthened two-way communication and dialogue with communities through all stages of the operation These CEA mechanisms included face-to-face methods through social mobilization and community visits. Vulnerability criteria and beneficiary identification and selection regarding potential recipients was discussed. Through orientations, FRCS ensure branch volunteers can deal with questions and complaints and give key messages. Community feedback and views gathered through the CEA mechanisms, by working closely with PMER, were incorporated into regular monitoring, evaluation and reporting processes.

CEA guidance and support was additionally provided through a one-month surge support mission. During this mission, several field visits were undertaken to develop mechanisms appropriate to the Fijian context. Template agreements were prepared as well as key messages for consistent community approach and a community engagement overview. These agreements and plans ensured that expectations were managed on all sides and clear consistent messaging was delivered and received.

The initial response proposed reaching the Northern and Western Divisions. However, informed by continuous assessment of needs through first hand observations and discussions with various cluster groups, FRCS and IFRC expanded its area of operation to include Koro Island, in the Lomaiviti Island group located in the Eastern division. Koro was the most affected region following TC Winston. The reason for the increased and re-directed focus on Koro is due to the slower rate of recovery on Koro Island compared to other affected areas. Areas with more favourable access to construction suppliers with better transport infrastructure (roads, bridges etc.) have recovered quicker. Koro is 12 hours by sea from Suva and therefore sea freight costs are high and less frequent. The costs to ship the materials have impeded the rate of recovery and widened the gap with those with favourable access compared to isolated areas and those with affected access. These were areas where FRCS did not have a branch presence and this non-presence made community engagement, in a response and recovery timeframe, more challenging.

An evaluation was undertaken during October through November 2017 (summary is outlined in Annex 1). While not finalized and socialized at time of the final TC Winston report some of the programming discussions were highlighted with FRCS during the process of the evaluation, which included:

- FRCS is well regarded by beneficiaries and seen as ‘first on the scene’ in providing help in the emergency phase.
- FRCS’s strength is its extensive organization in branches that cover a wide geographical area despite logistic challenges. Locally-placed containers with basic relief items enabled rapid distribution to people in need in the emergency. An increased database of volunteers makes mobilization more rapid and effective.
- FRCS national office staff are highly motivated and respond well in emergencies situations. However, the new situation with operations into recovery phase is a challenge for FRCS. Since it was a first-time experience, it put a lot of stress on the organisation.
- Women and girls often require special attention and protection in times of disaster, but FRCS as an organisation must also recognize the unique capabilities of women and girls and create space for them to participate in recovery and development. It is important for FRCS to consider community engagement and information gathering in different response phases as part of the process and to learn lessons for improving in future responses.

D.THE BUDGET

The Emergency Appeal sought CHF 4,385,118 of which CHF 4,384,632 was raised. The total expenditure recorded was CHF 4,364,988 (99.6 per cent of income), leaving a balance of CHF 19,643 as of March 2018. The balance funds will be transferred to Operational Plan 2018 for the IFRC CCST Suva to enable the country office to continue to support the Pacific National Societies long-term programmes. Details of the expenditure are outlined in the attached final financial report.

Contact information

Reference documents ↘

Click here for:

- Previous Appeals and updates
- Emergency Plan of Action (EPoA)

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

In the Fiji Red Cross Society

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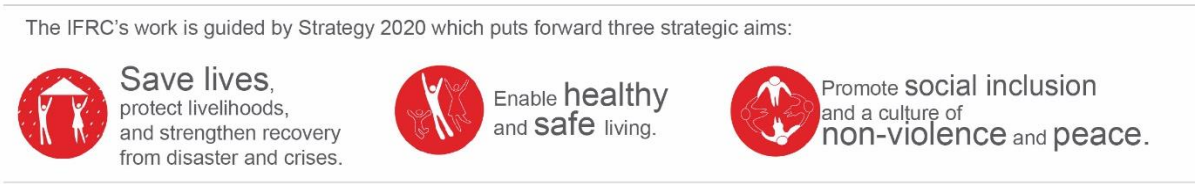
How we work

All IFRC assistance seeks to adhere to the **Code of Conduct** for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) 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.



Annex 1: Final Evaluation of FRCS's operations related to the Tropical Cyclone Winston (TCW) in Fiji, for the period 1 June 2016 to 31 July 2017

Date: 24 November 2017

Summary of findings

This review covers the IFRC Emergency Appeal (EAs) and response actions undertaken by the Fiji Red Cross Society (FRCS) (collectively referred to hereafter as the 'TCW Operation') in response to the tropical cyclone Winston that caused widespread damage and loss of life across parts of Fiji on 20 February 2016.

The FRCS TC Winston Operation (TCW) covered the immediate **relief phase**, as well as the subsequent **recovery phase** of the TCW event, and this assessment focus on Shelter and WASH sectors during the recovery. Briefly, the task for this evaluation is to assess the relevance, coverage, coordination, effectiveness, and aspects of the impact and sustainability by the support given by the FRCS. The evaluation covers the recovery phase from 1 June 2016 to 31 August 2017. This final report focused on best practices, lesson learned and recommendations for improvements in these sectors. The assessment is meant to give advice and recommendations that can improve FRCS procedures, capacity to respond and to achieve higher impact in its operations.

Key Findings

General

- FRCS is well regarded by beneficiaries and seen as 'first on the scene' in providing help in the emergency phase.
- FRCS strength is their extensive organization in branches covering a wide geographical area despite logistic challenges. Locally placed containers with basic relief items gives in emergency rapid distribution to people in need. A build-up of a database over volunteers makes mobilization more rapid and effective.
- FRCS national office staff are highly motivated and respond well in emergencies situations. However, the new situation with operations into recovery phase is a challenge for FRCS.
- Women and girls often require special attention and protection in times of disaster but FRCS as an organisation must also recognize the unique capabilities of women and girls and create space for them to participate in recovery and development.
- It is important for FRCS to consider community engagement and information gathering in different response phases as part of the process.

Shelter

- The model house is a significant improvement from the core shelter model. It is more durable, it incorporates water and sanitation facilities with a rainwater harvesting system. As such, it is more sustainable and provides a better protection in cyclone situations.
- FRCS – TC Winston Operation decided to go in to recovery with the model house shelter program. Even though with well-intentioned goals the RT question this strategy on several grounds. 35 model houses were distributed and constructed, only one per village, creating problematic community distribution criteria's and site selection.
- In many cases, the late provision of the houses did not address the aim that the houses should serve as "showcase" in the reconstruction and recovery, and also to be a complement to the government "Help for home" program.
- Several model houses were not completed, in Nacamaki village, in Koro, the house was not equipped with the rainwater harvesting system. Many houses, for instance in Nukubalavu village in Savusavu, was not connected to water making flush toilets and shower useless.
- The cost for building a model house is far above the house provided by "Help for homes" and many villagers question if they ever will afford to build a model house. As said in Naboutolu "there are a lot of nuts and bolts used in the model house, which are expensive parts".
- Provision of the house was directed towards individual beneficiaries as a private property and selection of beneficiary was handed over to the village head to decide. This strategy violated several of Red Cross (RC) movement standards and made the operation weaker than it ought to be due to unclear selection criteria.
- The selection of beneficiaries was not transparent or inclusive for the entire community, but individual beneficiaries are satisfied and happy about the house and most villages or communities find the model appropriate and a good idea; however, the women wanted a more consultative process. The criteria for selection was also not consistent through the different regions.
- FRCS – TC Winston Operation could have sought partnerships with other stakeholders who are known shelter

implementers such as government program (Help for Homes), churches and other NGOs. These stakeholders have longer-term programs with affected communities.

- Context: achieving sustainable outcomes in post emergency/recovery stage is challenging and FRCS needs to strengthen capacity to respond effectively on the demands in recovery, if continuing to do so.
- Other alternatives, for instance practical guidance to reconstruction by the BBS program could have been a more effective support to the community. Another alternative could be the provision of trained and paid carpenters to assist in re-construction.
- The need to strengthen social inclusion and child protection aspects of project delivery, for instance prevent access by children to building sites and a facilitated learning process for village settlers.
- The need to review/revise the selection criteria for communities and beneficiaries as well as the communicating of these criteria within FRCS and branches.
- The will to provide assistance is strong but higher effectiveness might be accomplished through more focused recovery assessment to identify the most in need.

Water and sanitation

- The design standard and norm for sanitation is through flush toilets with septic tank (ST). This was the situation before TCW, with some exceptions with pit toilets. After TCW other solutions such as pit toilets for recovery and reconstruction were not acceptable by the beneficiaries, they wanted a through flush toilet.
- People have and was used to private toilets in their homes before TCW and most households were connected to a ST. The toilet facility was located at some distance from the house and it was also common that three families shared toilet and shower connected to one ST.
- Emptying of STs is not yet happening. When ST is being full, beneficiaries are not sure about what to do. Some expressed that a 'pump out´ can be costly. The solution said in many places, to the problem is that they dig a hole and empty the ST content there. This has not yet happened in the villages visited so the feasibility of this method and associated health risks could not be judged at time of this report.
- Water provision has been a general problem in many villages due to prolonged drought. TC Winston destroyed a lot of the pipes and piping so the main problem for example Jerusalemi and Naboutolu have been facing since then is water shortage.
- In Naboutolu Village in Ra and Tuatua Village in Koro Island, the spring (water source) was 20 tap stands placed in strategic locations around the village and they were for communal use. The water source serves 4 village with a population about 800 or more, particularly in Naboutolu village. After TCW the reservoir was repaired by FRCS engineers but it could be seen that most of the water is flowing outside and is not feeding the second catchment. The water level has gone drastically low and many times they have no water flowing down to the communities from the reservoir.
- Before TCW women were involved a lot in the carrying water for household use. Some houses, for example in Tuatua, Koro Island have now water in the house, but most are using communal tap stands.
- The team is not sure if the implementation of water and sanitation projects followed the Department of Water - Guidelines for Rural Water Supply Management Plan and a Rural Water & Sanitation Policy (Oct 2012)

Recommendations

- Liaise with other shelter actors i.e "Help for home" to complement or fill gaps in shelter recovery needs, not as a standalone FRCS project. The TCW model house concept could have been more successful if given additional support in terms of improved construction details for the government´s recovery program.
- FRCS cannot be everywhere; the model house project should have been focused on fewer communities but reaching more beneficiaries.
- Set clear criteria and procedures in community and beneficiary selection to give priority to the most vulnerable communities and groups. Private ownership of provided houses put FRCS in doubt, was the selection fair, transparent and reached the most vulnerable?
- Identify areas that are most needed for livelihood and daily life, i.e water and sanitation. Support multi tasked villages committees with training and to foster community ownership.
- FRCS, if to be continuing in recovery, should fill gaps and support with guidance on BBS and with expertise. For

instance, training of carpenters and volunteers.

- Follow up in water provision and sanitation, for instance with desludging of ST and repair of water reservoirs.
- The long-term consequences of the system with septic tank is the need for desludging and treatment of the disposals off-site. This requires a truck or manual pumps to empty the ST and to ensure safe handling. The environmental concern about the emptying of ST needs further support and training since villages seems ignorant about how to handle the sludge.
- Provide reliable support and improve communication with beneficiaries and the community.
- FRCS should establish routines and ways how to handle complaints from beneficiaries and branches.
- Integrate training for both FRCS volunteers and communities in BBS.
- Support water and sanitation committees at community level.

Disaster Response Financial Report

MDRFJ001 - Fiji - Tropical Cyclone Winston

Timeframe: 22 Feb 16 to 30 Sep 17

Appeal Launch Date: 29 Feb 16

Final Report

Selected Parameters			
Reporting Timeframe	2016/2-2018/2	Programme	MDRFJ001
Budget Timeframe	2016/2-2017/9	Budget	APPROVED
Split by funding source	Y	Project	*
Subsector:	*		

All figures are in Swiss Francs (CHF)

I. Funding

	Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/ RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability	TOTAL	Deferred Income
A. Budget		**4,385,118**				**4,385,118**	
B. Opening Balance							
Income							
Cash contributions							
American Red Cross		*240,017*				*240,017*	
Australian Red Cross		*1,433,074*				*1,433,074*	
Australian Red Cross (from Australian Government)*		*284,721*				*284,721*	
British Red Cross		*66,367*				*66,367*	
British Red Cross (from Great Britain - Private Donors)*		*10,536*				*10,536*	
China Red Cross, Hong Kong branch		*5,930*				*5,930*	
Estonia Government		*21,847*				*21,847*	
European Commission - DG ECHO		*524,869*				*524,869*	
Hewlett Packard Co. Foundation		*23,285*				*23,285*	
Italian Government Bilateral Emergency Fund		*108,901*				*108,901*	
Japanese Red Cross Society		*43,830*				*43,830*	
New Zealand Red Cross		*366,061*				*366,061*	
Red Cross of Monaco		*27,299*				*27,299*	
Singapore Red Cross Society		*47,700*				*47,700*	
Swiss Red Cross		*51,800*				*51,800*	
Swiss Red Cross (from Swiss Government)*		*48,200*				*48,200*	
The Canadian Red Cross Society (from Canadian Government)*		*259,118*				*259,118*	
The Netherlands Red Cross		*10,883*				*10,883*	
United States Government - USAID		*484,024*				*484,024*	
VERF/WHO Voluntary Emergency Relief		*5,000*				*5,000*	
Western Union Foundation		*34,772*				*34,772*	
C1. Cash contributions		***4,098,235***				***4,098,235***	
Inkind Goods & Transport							
Australian Red Cross		*122,095*				*122,095*	
C2. Inkind Goods & Transport		***122,095***				***122,095***	
Inkind Personnel							
Australian Red Cross		*75,352*				*75,352*	
Danish Red Cross		*69,079*				*69,079*	
New Zealand Red Cross		*19,871*				*19,871*	
C3. Inkind Personnel		***164,302***				***164,302***	
C. Total Income = SUM(C1..C4)		**4,384,632**				**4,384,632**	
D. Total Funding = B +C		**4,384,632**				**4,384,632**	

* Funding source data based on information provided by the donor

II. Movement of Funds

	Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/ RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability	TOTAL	Deferred Income
B. Opening Balance							
C. Income		4,384,632				**4,384,632**	
E. Expenditure		-4,364,988				**-4,364,988**	
F. Closing Balance = (B + C + E)		19,643				**19,643**	

Disaster Response Financial Report

MDRFJ001 - Fiji - Tropical Cyclone Winston

Timeframe: 22 Feb 16 to 30 Sep 17

Appeal Launch Date: 29 Feb 16

Final Report

Selected Parameters			
Reporting Timeframe	2016/2-2018/2	Programme	MDRFJ001
Budget Timeframe	2016/2-2017/9	Budget	APPROVED
Split by funding source	Y	Project	*
Subsector:	*		

All figures are in Swiss Francs (CHF)

III. Expenditure

Account Groups	Budget	Expenditure						Variance
		Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/ RC contribution to development	Heighten influence and support for RC/ RC work	Joint working and accountability	TOTAL	
	A						B	A - B
BUDGET (C)			**4,385,118**				**4,385,118**	
Relief items, Construction, Supplies								
Shelter - Relief	1,045,552		976,150				**976,150**	**69,402**
Shelter - Transitional	6,224		6,224				**6,224**	**0**
Construction - Facilities	13,525		13,525				**13,525**	**0**
Construction Materials	31,266		36,612				**36,612**	**-5,345**
Clothing & Textiles	68,528		68,528				**68,528**	**0**
Food	96		96				**96**	**0**
Water, Sanitation & Hygiene	168,732		171,942				**171,942**	**-3,210**
Medical & First Aid	511		311				**311**	**200**
Teaching Materials	573		573				**573**	**0**
Utensils & Tools	124,251		124,251				**124,251**	**0**
Other Supplies & Services	10,393		10,941				**10,941**	**-548**
Total Relief items, Construction, Sup	1,469,651		1,409,151				**1,409,151**	**60,500**
Land, vehicles & equipment								
Vehicles	76,258		74,920				**74,920**	**1,337**
Computers & Telecom	44,661		40,782				**40,782**	**3,879**
Office & Household Equipment	5,513		5,643				**5,643**	**-130**
Others Machinery & Equipment	112		112				**112**	**0**
Total Land, vehicles & equipment	126,544		121,457				**121,457**	**5,087**
Logistics, Transport & Storage								
Storage	42,963		45,404				**45,404**	**-2,440**
Distribution & Monitoring	374,178		374,178				**374,178**	**0**
Transport & Vehicles Costs	204,894		226,181				**226,181**	**-21,287**
Logistics Services	49,884		50,849				**50,849**	**-965**
Total Logistics, Transport & Storage	671,919		696,611				**696,611**	**-24,692**
Personnel								
International Staff	734,727		665,503				**665,503**	**69,224**
National Staff	41,761		55,164				**55,164**	**-13,403**
National Society Staff	214,163		231,139				**231,139**	**-16,976**
Volunteers	275,955		306,823				**306,823**	**-30,868**
Other Staff Benefits			17,439				**17,439**	**-17,439**
Total Personnel	1,266,606		1,276,069				**1,276,069**	**-9,463**
Consultants & Professional Fees								
Consultants	55,000		28,740				**28,740**	**26,261**
Professional Fees	20,041		40,041				**40,041**	**-20,000**
Total Consultants & Professional Fee	75,041		68,780				**68,780**	**6,261**
Workshops & Training								
Workshops & Training	191,542		142,994				**142,994**	**48,549**
Total Workshops & Training	191,542		142,994				**142,994**	**48,549**
General Expenditure								
Travel	122,821		150,408				**150,408**	**-27,587**
Information & Public Relations	34,572		42,657				**42,657**	**-8,085**
Office Costs	60,046		58,398				**58,398**	**1,648**
Communications	24,683		24,690				**24,690**	**-7**
Financial Charges	28,335		46,522				**46,522**	**-18,186**
Other General Expenses	12,287		2,093				**2,093**	**10,194**
Shared Office and Services Costs	10,254		30,843				**30,843**	**-20,589**
Total General Expenditure	292,997		355,610				**355,610**	**-62,613**

Disaster Response Financial Report

MDRFJ001 - Fiji - Tropical Cyclone Winston

Timeframe: 22 Feb 16 to 30 Sep 17

Appeal Launch Date: 29 Feb 16

Final Report

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Split by funding source	Y	Project	*
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All figures are in Swiss Francs (CHF)

III. Expenditure

Account Groups	Budget	Expenditure						Variance
		Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/ RC contribution to development	Heighten influence and support for RC/ RC work	Joint working and accountability	TOTAL	
	A						B	A - B
BUDGET (C)			**4,385,118**				**4,385,118**	
Contributions & Transfers								
Cash Transfers to 3rd Parties	6,000		6,000				**6,000**	**0**
Total Contributions & Transfers	6,000		6,000				**6,000**	**0**
Indirect Costs								
Programme & Services Support Recove	266,520		252,447				**252,447**	**14,073**
Total Indirect Costs	266,520		252,447				**252,447**	**14,073**
Pledge Specific Costs								
Pledge Earmarking Fee	12,297		27,770				**27,770**	**-15,473**
Pledge Reporting Fees	6,000		8,100				**8,100**	**-2,100**
Total Pledge Specific Costs	18,297		35,870				**35,870**	**-17,573**
TOTAL EXPENDITURE (D)	**4,385,118**		**4,364,988**				**4,364,988**	**20,129**
VARIANCE (C - D)			**20,129**				**20,129**	