

Appeal 2004



Papua New Guinea

Appeal no. 01.71/2004

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This document reflects a range of programmes and activities to be implemented in 2004, and the related funding requirements. These are based upon the broader, multi-year framework of the Federation's Project Planning Process (PPP). The PPP products can be requested through the respective regional department. For further information concerning programmes or operations in this or other countries or regions, please also access the Federation website at <http://www.ifrc.org>

Programme title	2004 in CHF
Strengthening the National Society	
Health and Care	48,342
Disaster Management	219,144
Organisational Development	309,829
Representation, Management and Implementation	236,963
Total	814,278¹

¹ USD 610,709 or EUR 521,138

National Context

Papua New Guinea (PNG) is the largest and least developed country in the South Pacific. Ranking 132nd on the Human Development Index, the country faces immense social, political and economic problems.

Over 80 per cent of its 5.3 million people live in rural areas, most of them subsistence farmers. Many tribes in the isolated mountainous interior have little contact with each other, or with the outside world, and live within a non-monetarised economy. As urbanisation trends continue, there is also a growing underclass of marginalised people in urban areas, living in precarious conditions in squatter settlements such as in Port Moresby.

The overall health and nutrition status of the population is poor. Papua New Guinea has the lowest life expectancy in the South Pacific, and the worst infant mortality rate, estimated at 77 per 1,000 births. Only 28 per cent of PNG's population has access to safe drinking water, and only 22 per cent has access to adequate sanitation. The nation experiences the same profile of health problems as other developing countries, with infectious diseases representing the main burden of disease: malaria, diarrhoea, acute respiratory infections, tuberculosis and HIV/AIDS. The number of reported HIV/AIDS cases has grown at an alarming rate, giving PNG the highest prevalence in the entire Pacific region. Tuberculosis has re-emerged as a major public health problem.

The 1998 peace agreement has brought relative peace to Bougainville, and peace monitors were withdrawn in 2003. The island continues on its path to further autonomy, with a new draft of the proposed constitution being debated. Meanwhile the separatist struggle in the neighbouring Indonesian province of Irian Jaya spills over into Papua New Guinea from time to time. Serious law and order problems persist in the Highlands and other provinces, and an alarming crime rate has made Port Moresby one of the most dangerous capitals in the world.

The adult literacy rate is a low 45 per cent, and primary education is only reaching 56 per cent of school-age children. The language distribution in PNG is the most complex in the world, with over 800 languages or dialects in use. English is the official language for government, business and education.

Socio-economic development prospects are relatively low, and persistent inflation is adding further to poverty levels. The country remains heavily dependent on foreign aid. The largest donor, Australia, is reviewing its bilateral aid programme, prompted by both security issues in the region and concerns about its effectiveness and impact.

Red Cross Red Crescent Priorities

National Society Strategy

The PNG Red Cross (PNGRC) was formally established in 1976, having previously been a division of the Australian Red Cross Society until independence. Although well known, it is still a small national society, with about 400 members in eight branches covering seven of the 20 provinces. Currently there are two more interim branches in the process of being recognised as full branches: Bougainville and West Sepik provinces.

In 1999, the PNGRC drew up a four-year plan in line with the Federation's *Strategy 2010*. This plan was reviewed in November 2001 to cover the period 2002-2006. The national society is currently revising its strategic work plan, and a draft was presented to key partners in July 2003. Priorities outlined in the *Manila Action Plan*, and those agreed at the recent Pacific partnership meeting have been taken into account. The core areas include:

- HIV/AIDS - focusing on prevention, care, and fighting stigma and discrimination
- Disaster preparedness and response (DP/DR)
- Community-based self reliance (CBSR) – community-based first aid and risk reduction
- Promotion of the Fundamental Principles of the International Red Cross Red Crescent Movement and international humanitarian law (IHL)

- Organisational development/resource development (OD) – strengthening of the national society at headquarters/branch levels, and building the volunteer corps including youth

Most of these priorities are also closely linked to the *Millennium Development Goals* as illustrated in the table below. As the PNGRC develops its grassroots presence throughout the country, and establishes more strategic partnerships both within the Movement and with external partners, it is uniquely placed to make a sustainable contribution towards these goals. The collectively agreed priorities form the basis for all programmes and activities outlined in this appeal: (they are described in more detail in the following chapters.)

<i>Programme/project</i>	<i>Related Millennium Development Goal</i>	<i>Comments</i>
HIV/AIDS	MDG 4: Combat HIV/AIDS, malaria and other diseases	HIV prevention, home-based care and fighting stigma
First aid/CBSR	MDG 3: Reduce child mortality	Community health promotion
Disaster management	MDG 1: Eradicate extreme poverty and hunger	Reducing household vulnerability
Humanitarian values / organisational development	MDG 2: Promote gender equality and empower women	<i>Code of Conduct</i> Human resources and volunteer policy
Cooperation and partnerships Representation and advocacy	MDG 8: Develop a global partnership for development	Partnerships and advocacy

Over the past few years the PNGRC has focused on rebuilding and strengthening its headquarters staff as part of its efforts to expand its programmes, and to provide or extend support to its branches. The national society is now in a position to consolidate programme activities including CBSR, community-based disaster preparedness, HIV/AIDS prevention, first aid, blood recruitment, dissemination and youth. The development of effective and relevant programmes, retention of qualified national society staff, good support from the governance to management, mutual understanding and good cooperation between national headquarters and branches, and achieving a better level of funding both from inside and outside the country have all been identified as key issues.

Movement Context

The Federation-supported programmes in organisational development, disaster management and health and care have helped to build basic capacity in core areas. During 2004, the Federation will continue to support the programmes as described in this appeal. Within the priorities listed above the Federation will focus especially on the following:

- Organisational Development - governance and management, branch development and volunteers and youth.
- Health and Care - HIV/AIDS awareness and community-based first aid/CBSR
- Disaster Management - disaster preparedness and response and CBSR
- Humanitarian Values - fundamental principles and values and IHL
- Federation Coordination – cooperation agreement strategy (CAS) and regional meetings
- International Representation - NGOs, government donor offices and UN agencies.

The Japanese Red Cross Society is currently supporting disaster management through the Federation, and the Australian Red Cross will continue to support health activities, particularly in the area of HIV/AIDS. The ICRC will provide support in dissemination, and conflict preparedness. The New Zealand Red Cross and the Red Cross of China have also indicated their interest in supporting programmes in 2004.

1. Health and Care

The overall health and nutrition status of the population is poor. Papua New Guinea has the lowest life expectancy in the South Pacific, and the worst infant mortality rate, estimated at 77 per 1,000 births. Only 28 per cent of the population has access to safe drinking water, and only 22 per cent has access to adequate sanitation. The country experiences a wide range of health problems, with infectious

diseases representing the main burden of disease: malaria, diarrhoea, acute respiratory infections, tuberculosis and HIV/AIDS. Tuberculosis has re-emerged as a major public health problem.

HIV/AIDS

The number of reported HIV/AIDS cases has grown at an alarming rate, giving PNG the highest prevalence in the entire Pacific region. By the end of 2002 there were 4,792 reported cases of HIV, but actual numbers are feared to be significantly higher. The high incidence of HIV among female sex workers and the high incidence of sexually transmitted infections (STI) are indicators that the potential impact of the HIV epidemic in PNG is extremely serious. A 2002 UNAIDS report indicates that a wide range of social, economic and cultural factors in PNG have led to an environment where sexual risk behaviours (including low levels of condom use in casual partnerships) are widespread.

Over the next years, the PNGRC will consolidate its HIV/AIDS programme by focusing on youth peer education, community-based counseling, and fighting stigma and discrimination. Through consultation with branch volunteers, UNAIDS, the National AIDS Council (NAC) and other organisations, young people have been identified as a particularly vulnerable group to STI including

HIV. The PNGRC will further develop the pilot Youth Peer Education programme, ensuring links to schools and advocating inclusion in the national curriculum. Public awareness campaigns will be carried out on the occasion of World AIDS Day and World Red Cross Red Crescent Day.



Over recent years the PNGRC developed and conducted HIV/AIDS awareness workshops in eight of its branches. Awareness materials (posters, brochures, T-shirts, banners, stickers and so on) have been developed and disseminated throughout the branch structure. So far, 360 people have been trained, including teachers, women's groups, health workers, police and community leaders. Cultural taboos on issues of sex and condom promotion remain a large problem, with many people unwilling to even talk about HIV/AIDS. The PNGRC is active in

addressing this problem by training volunteers in all aspects of HIV/AIDS awareness and advocacy. In consultation with key local stakeholders in HIV/AIDS counselling and care and social work, the national society developed the PNGRC Counselling and Care manual. Three counselling pilot workshops were conducted in 2002, and counselling workshops will be implemented in five remaining branches in 2004.

Two full-time HIV programme officers are based at headquarters, and HIV coordinators have been nominated in each of the eight branches and three interim branches, working in close consultation with the branch development programme. Branch volunteers and workshop participants are drawn from a large geographical area in each province, and thus the programme reaches remote communities.

Community-based first aid

Throughout PNG people are confronted with a range of diseases, accidents, natural disasters, violence and at times conflict. It is important that communities and individuals have knowledge and skills in the application of first aid, especially in the more remote areas of the country where people do not have access to healthcare facilities. In remote areas, where there are no ambulance services and roads are impassable, people are left in an extremely vulnerable state, and it is not uncommon for people to die as their carers do not have basic first aid skills.

The PNGRC therefore focuses on community-based first aid, as one of the major components of the CBSR strategy that is currently being promoted across the region. The CBSR programme was reviewed in 2002. As a result, branches are now more directly involved, allowing them to deliver a series of shorter community workshops and follow-up.

In addition, commercial first aid training generates much needed income, including for the provision of community-based programmes. First aid quality standards are promoted throughout the region through regular quality audits, training and certification of first aid instructors, and exchange visits. Modules on basic emotional support and first aid in conflict will be integrated into the curriculum, in consultation with the ICRC.

It will also support PNGRC develop its capacity in community-based first aid and in the implementation of its revised CBSR programme. Over the course of the next two years the Federation will encourage the national society to revise the existing programme in accordance with Federation guidelines. This revision should consider negotiating a new memorandum of understanding between the national society and the Ministry of Health (MoH), which would clearly outline each other's responsibilities.

Voluntary blood donor recruitment (VBDR)

Blood programme activities will focus on the recruitment of voluntary non-remunerated blood donors, in accordance with Federation recommendations and guidelines. The Federation's *Making a Difference* manual will be used to train staff and volunteers in effective recruitment and support, including the setting up of a donor database. Realistic targets will be set for headquarters and branches, in consultation with the MoH and the World Health Organisation.

Water and sanitation

As a large part of the population still lacks access to safe drinking water and improved sanitation, the PNGRC will explore the possibilities of developing a water and sanitation programme. It has already been included in the newly revised strategic plan as a new priority area where the national society can make a substantial difference by addressing basic needs. The Federation will assist the PNGRC in the careful design of appropriate methodologies as well as the organisational structure required. Such a programme is likely to combine the introduction of village water and sanitation systems with hygiene promotion activities, to be delivered mainly by branch volunteers and adopting participatory community self-help models.

Overall Goal

PNGRC is able to deliver effective and relevant health and care programmes for vulnerable people.

Programme Objective

PNGRC is a leading provider of quality programmes for vulnerable people in the areas of HIV/AIDS, first aid and voluntary blood donor recruitment.

Expected Results

- To combat the spread of HIV/AIDS by changing peoples' perceptions, attitudes, policies and behaviour, and to promote adequate care and support for people living with HIV/AIDS (PLWHA)
- To provide quality training in both commercial and community-based first aid
- To recruit sufficient voluntary blood donors to ensure an adequate and safe blood supply

Expected Results	Indicators	Risks/Assumptions	Activities
Project one: HIV/AIDS			
Effective action to fight stigma leads to community acceptance of PLWHA where PNGRC has branches	50% of branches have active PLWHA members/volunteers by mid-2004; Information education communication (IEC) materials distributed; Campaigns completed	Branch support mechanism is in place; Branch volunteers/ members are committed; PLWHA fully involved	IEC materials developed, distributed and support ed; Inclusion of PLWHA, World Aids Day & RCRC Day campaigns
Peer education programme focusing on HIV/AIDS prevention among youth contributes	Youth peer education model and manual developed; 10 youth peer educators	Branch support mechanism in place; Effective follow-up in place;	Baseline surveys/KAB; Develop peer education model and

to prevention and further spreading of the disease	for each branch in place; No. of youth reached	Effective coordination with MoH, Ministry of Education, UNAIDS etc	pilot programme; Advocate inclusion in youth curriculum in schools
Increased community access to counseling and support through Red Cross branches	Appropriate community support for PLWHA defined; 75 volunteers in 5 branches trained in counseling skills; Support mechanism in place	Community based counseling is considered appropriate, and is closely coordinated with MoH, National Aids Council etc.	Conduct training for the five remaining branches; Develop/review local branch model for counseling services and support
HIV/AIDS programming is integrated into all other programmes	3 HIV/AIDS branch coordination and planning meetings; 8 PNGRC branches active; Programme fully integrated in other core programmes	PNG able to position itself as key actor in HIV/AIDS prevention; PNGRC leadership, staff and volunteers fully committed;	Train staff/volunteers; Mainstream HIV/AIDS in all existing programmes; HIV programme planning meetings at headquarters/branches; Establish PNGRC HIV/AIDS committee
Project two: First aid			
All first aid programmes meet agreed quality standards	Quality audits; Instructor job descriptions and database in place	Limited number of first aid instructors in the national society; Active support for branches	Regular first aid audits; Exchange of instructors Collect best practices
Market share of PNGRC first aid services increased	No. of people trained; Income up; Marketing plans adopted	Higher quality leads to higher market share	Training; World First Aid Day Communications plan
New modules developed, tested and introduced	First aid in conflict, health in emergencies, and basic emotional support modules developed	Joint Geneva Federation/ICRC curriculum finalised; First aid instructors able to deliver new modules	Adopt new modules Joint Federation/ICRC training; Integrate basic emotional support into the training
Community-based first aid CCSR scaled up	CCSR strategy developed; National CCSR/VCA* workshops	Strategy builds on branch development	CCSR strategy/plans; VCA/CCSR workshops; Exchange of instructors
Project three: Voluntary blood donor recruitment			
PNGRC has adequate resources to carry out its mandate in VBDR	Staff/volunteers trained National society use <i>Making a Difference</i> manual; blood donor databases	Effective collaboration with MoH and WHO	<i>Making a Difference</i> manual introduced and supported with tools, materials and communication
PNGRC able to recruit sufficient safe donors and meet targets	Plans and targets defined; MoU updated No. of young /general donors	Effective collaboration with MoH and WHO	National 'safe blood' campaigns and donor drives

* Vulnerability capacity assessment

2. Disaster Management

Background

Papua New Guinea is one of the most disaster-affected countries in the region, ranking eleventh in the list of most disaster-prone countries in the entire Asia Pacific region according to OCHA. Over the last few years, PNG has experienced major disasters including earthquakes (Wewak, measuring 7.5 on the Richter scale), volcanic eruptions (Mt Pago), landslides and floods (Morobe province), a

devastating tsunami (Aitape) and droughts. In addition, there are frequent smaller disasters such as landslides, not only affecting vulnerable communities directly, but also hampering economic development through their cumulative impact. The country is also subject to man-made disasters, with parts of the country caught up in secessionist or tribal conflict, political corruption or the outburst of violent crimes.

Over the next two years the Federation's disaster management (DM) programme will work in collaboration with the PNGRC to strengthen its preparedness and response capacity in times of emergency. The 'Papua New Guinea Red Cross Society Disaster Preparedness and Response Plan' was launched in 2002, and is presently under revision. It will form part of the government's National Disaster Management Plan, which currently is being drafted.

An emergency response unit has been created within the PNGRC, and 35 staff and volunteers have been trained at headquarter and branch levels. A national emergency assessment and response team (NEAT) has been deployed to various emergency assessments, and is now on standby for immediate response to disaster-prone areas.

The pre-positioning and updating of essential emergency supplies in all Red Cross branches have been identified as priorities, and the programme will be further expanded. Supplies are stored in containers either in Red Cross compounds or in safe government compounds, and stock reports are updated on a regular basis. Disaster management policies, standards and procedures will be developed further in accordance with Federation best practices. Unfortunately there has been a high turnover of senior staff, and the recruitment and retention of a national DM programme manager is now crucial. Networks between the national and provincial disaster management offices need to be further strengthened. The Federation will also continue to assist the PNGRC in providing training for branch staff and volunteers as well as members of the community in disaster management and logistical and material support.

Conflict preparedness will be integrated with disaster preparedness, in order to ensure safe access to those in need during emergencies involving civil tension, unrest, conflict and/or violence.

First introduced in 2001, the CBSR programme addressed community risk reduction and preparedness as a component of an integrated approach that also includes first aid and community health promotion. The programme will be further developed during 2004, and lessons learned in PNG and elsewhere will form the basis of a revision of methodology and tools. This will be carried out in close collaboration with health programme staff, as well as those involved in branch and organisational development.

Overall Goal

PNGRC is able to respond effectively to the needs of vulnerable people in times of emergency, and contributes to risk reduction.

Programme Objective

By the end of 2004, the PNGRC has the disaster management capacity to provide quality services to the most vulnerable in a timely and efficient manner.

Expected Results

- The PNGRC has a well-functioning disaster management programme, which is well maintained by trained staff and volunteers.
- Staff and volunteers are able to apply vulnerability and capacity assessments (VCA) as a tool for identifying needs and reducing vulnerabilities at community level.
- The PNGRC disaster preparedness and response plan guides disaster related activities.
- The DP Container project covers the entire country and is managed in a sustainable manner.

Expected Results	Indicators	Assumptions	Activities
Project one: Disaster management capacity building			
Effective disaster response plan in place	Red Cross DM plan; MoU on Red Cross role with authorities	National disaster plans ideally include Red Cross role	DM planning workshop ; Review/develop MoU re national plan
Relief supplies /containers pre-positioned throughout PNG	20 containers in place (2/branches)	PNGRC able to maintain /restock; Safe compounds available	Consolidate DP container project, limited expansion – purchase containers and materials ; Replace expired goods Support management and tools, including distribution exercises
NEAT team in place at national level; Branch staff and volunteers trained in basic DM	12-15 NEAT members trained ; NEAT in place; Branches trained	DP officer in place; PNGRC able to limit staff turnover	2 NEAT workshops + follow-up; Review/develop/organise basic and advanced training – one workshop per branch; Integrate conflict preparedness
Project two: Community risk reduction			
National society promote effective community risk reduction	Branches use VCA tool; Villages targeted and better organised	Branches able to carry out VCA and follow-up once trained	Identify target communities, recruit volunteers; VCA training and pilots in branches
Community-based self-reliance consolidated	Approach and tools reviewed	Close integration with health and OD projects	Review of CBSR and tools; Training and support ; Regular CBSR workshops

3. Humanitarian Values

Background

The PNGRC has been in existence as an independent national society since 1976 and, before that, as a division of the Australian Red Cross. However, despite its many years of existence in the country, the general public, authorities and potential partners have only limited knowledge and awareness about the Red Cross Movement in general and the PNGRC in particular. In a country plagued by violence, the PNGRC has a key role in promoting humanitarian values based on fundamental principles of humanity, impartiality, independence and voluntary service in particular. It can also contribute to the building of civil society by advocating and acting on behalf of those in need.

The PNGRC therefore faces an important challenge in raising the profile and the image of the Red Cross, to ensure better support to its programmes and activities, and safer access for its personnel and to people in need. Areas of concern include the use of the Red Cross emblem, the dissemination of the IHL to the general public, and the general promotion of the Movement's seven fundamental principles, and its humanitarian values.

Overall Goal

The PNGRC and its principles are well-known and respected, ensuring support and safe access to people in need

Program Objective

To promote awareness and respect for the Red Cross, its fundamental principles and humanitarian values, and to generate support and acceptance of its programmes and activities

Expected Results

- The people of PNG, authorities and partners respect and support the PNGRC
- IHL training is promoted throughout the PNG security forces

- The Red Cross emblem is protected and respected

Expected Results	Indicators	Assumptions	Activities
Project: Promotion of Red Cross principles and values			
National society staff and volunteers know and apply Red Cross fundamental principles	Greater respect and understanding of fundamental principles by PNGRC governance, management, volunteers, and staff	ICRC promotes and supports dissemination Mainstreaming feasible	Training and support Internal dissemination Mainstreaming into all programmes & activities
Increased public awareness of PNGRC and respect for its principles	Increased support membership; Awareness activities for target audiences	ICRC promotes and supports dissemination	Public dissemination, lectures and campaigns, Develop material in Tok Pisin, Motu and English
Red Cross emblem better respected	Emblem legislation adopted; Emblem abuse reduced	If needed, legal action is favourable	Address unauthorised use of Red Cross emblem on products and services
IHL instruction takes place in the PNG defense force (DF)	IHL promoted in PNG DF training syllabus	PNGDF willing to maintain programme	IHL dissemination to/ workshops with the PNG defense force
Partners and media more aware about Red Cross principles and values	National society able to strengthen independent position; Media coverage	Appropriate tools and tech support available	Produce materials and communications tools; Basic presentations; Special events

4. Organisational Development

Background

In 1998 the PNGRC requested the Federation to assist its organisational and resource development programme. In 1999 the PNGRC carried out a self-assessment, setting initial direction for capacity building activities, and identifying concrete priorities. During this process, the need for change at all levels of the national society was agreed, especially in the areas of training, organisation and management structures, the public image context, and programme development.

The OD programme has, in the last three years, been considered “to be in the right direction and with the appropriate approach.” Working within the programme objectives and activities, the programme has contributed significantly to PNGRC capacity building.

Based on needs identified, the OD programme focused on the “development of abilities of individuals and the organisation (PNGRC) to perform functions effectively, efficiently and sustainably.” On-the-job training of staff and volunteers will therefore continue at both the national and branch level.

Difficulties in recruitment and retention of key staff have been major obstacles in recent years, and the national society has now adopted policies for HR recruitment and management, which will be further implemented and supported. Policy guidelines will aim at engaging capable staff, with attractive working conditions and benefits, challenging assignments, and wherever possible, opportunities for advancement, within the PNGRC limits. In order to enable the national society to carry out the various programmes, salary support for eight headquarters programme staff will continue.

A review of the four-year strategic plan was carried out in 2003, with the aim of re-prioritising the national society’s areas of intervention. The revised plan - which is described in more detail above - forms the basis both for this appeal, and for negotiation with key partners through the CAS process. The Federation will continue to provide further guidance and support to PNGRC governance regarding its strategic directions and policy-setting. In addition, ongoing technical support will be provided to management.

The PNGRC has identified branch development as one of the priorities for the coming years, with emphasis on both hardware (infrastructure, communications) and software (staff and volunteer development, procedures, systems). A branch development officer is working on policies and plans to improve existing branches, to establish new branches, and to increase membership. The ultimate aim of the national society is to achieve full coverage of its entire territory through a network of well-functioning branches.

While the ‘Miss PNG Quest’ continues to be a key fundraising event at national level, it is recognised that fundraising needs to be stepped up and diversified to ensure more sustainability and less donor-dependence. By the end of 2003, a dedicated fundraising officer was recruited with a mandate to generate further funding at national level, as well as support local branch efforts.

With the direction and supervision of the OD delegate some 1,000 youth, staff and volunteers were trained as part of the youth programme, enabling them to take an active role in their communities. Under the programme, young people are trained in areas such as first aid, HIV/AIDS and disaster preparedness, as well as youth leadership. In collaboration with the Ministry of Education, the programme will be expanded to include new schools.

Overall Goal

PNGRC works as an efficient and effective organisation, maximising its impact in all its core areas of intervention.

Program Objective

The PNGRC increasingly meets the ‘characteristics of a well-functioning national society’.

Expected Results

- PNGRC governance and management work together effectively to formulate and implement strategic directions and policies, within their respective roles and mandates.
- The PNGRC is able to manage its programmes, resources, staff and volunteers effectively.
- Two interim branches are formally endorsed, and two new interim branches are established.
- All branches have relevant programmes and skilled volunteers to meet community needs.
- An increased number of schools participate in Red Cross youth activities and leadership development.

Expected Results	Indicators	Assumptions	Activities
Project one: Governance and management			
Governance provides effective leadership and direction	Leadership training Council meetings effective	Support from Geneva to develop modules; OD delegate in place	Governance/management workshops and support
Strategic planning / CAS strengthened	Strategic plans updated	Collective buy-in for PNG CAS process	Support self-assessment, strategic planning and CAS
Improved management systems, finance, HR planning, administration and fundraising	Annual plans/budgets Annual reports/audit	Secretary-general/senior management remain in position; PNGRC able to attract and retain key staff	Ongoing tech support; HR tools and support; Staff salary support; Develop fundraising
Improved volunteer management	More volunteers, good gender and diversity balance; Volunteer policies adopted and applied	PNGRC able to attract new volunteers; PNGRC promotes policy on gender and diversity	Adapt basic tools and policies, train key staff; Develop database; Advocate youth, gender, volunteering policies
Project two: Youth			
PNG has active youth programme attracting new youth volunteers, and carrying out regular activities	Youth programmes in all branches; No. of schools participating increased; No. of youth members	OD delegate in place; No large-scale disasters; Continuous good relationship with MoE.	Produce posters / videos; Run 12 youth camps; Revise leadership manual; Organise 10 leadership

	increased; Youth programme meet ings held regularly		workshops; Provide materials to 50 schools
Project three: Branch development			
Active branches are able to carry out relevant programmes, and are increasingly self-sustainable	No. of volunteers and members increased; Regular branch reports ; Interim/new branches formally endorsed; Erect 2 new buildings; Bi-monthly magazines ; Increased participation in training.	Close relationship with monitoring and evaluation committee continues; Effective coordination / integration with other programmes	Monthly programme plan; Follow up branch visits; Support branch reporting; Edit monthly newsletter; Establish two more branch buildings; Produce video on the history of PNGRC. Develop materials in other languages

5. Representation, Management and Implementation

Coordination, cooperation and strategic partnerships

With the adoption of a draft revised strategic plan, the PNGRC is now in a position to consolidate its programmes in the areas of health, disaster management, humanitarian values, and organisational development and capacity building. The focus is gradually shifting from a short-term project approach towards a more strategic long-term programme framework, and all current partners have been invited to support this process through a cooperation agreement strategy (CAS) process which kicked off formally in July 2003. The Federation will support the PNGRC in further developing the framework in close cooperation with all stakeholders, including Red Cross partners.

A more comprehensive cooperation approach will be developed with the ICRC, focusing on areas such as the promotion of Red Cross' fundamental principles and IHL. The Federation and the ICRC will also work more closely on issues such as leadership training and statutes renewal, and will seek to integrate conflict preparedness and safe access concepts into emergency response training. A draft three-year ICRC strategy for PNG will be finalised by January 2004.

Effective representation and advocacy

Although Papua New Guinea faces enormous human development challenges, and is among the most disaster-prone countries in the Asia Pacific region, it has surprisingly few aid agencies working within its borders. A handful of UN agencies and very few NGOs are actively involved in relief or development work, supported by donors such as the Asian Development Bank, AusAID, NZAID and the European Union. These agencies are often seen as the initiator of assistance as well as the de-facto facilitators of coordination. There is only limited regular interagency cooperation in terms of scheduled meetings or consultations in general.

The PNGRC and the Federation will aim at contributing to more effective interagency cooperation in future, including at the crucial early stages of disaster intervention. Special attention will be given to developing more intensive contacts with relevant authorities (including the National Disaster Management Office), UN agencies, the diplomatic community, and other humanitarian actors. A monthly newsletter will be widely distributed to share information about ongoing Red Cross programmes, and to raise the profile and visibility of the PNGRC.

International disaster response

In case of a major disaster requiring an international response, the delegation will closely coordinate with the regional delegation in Suva, and with partner national societies in the region that are most likely to respond. Where necessary, further support will be mobilised through an international appeal, and/or by applying directly to donors such as the European Commission Humanitarian Aid Office (ECHO). For any major disasters that exceed the response capacities available within the region, the

delegation will also be able to mobilise Federation global disaster response tools including field assessment and coordination teams (FACT), and emergency response units (ERU).

Delegation management

Over the last few years the nature of the Federation's presence in PNG has changed significantly. Having played a direct and operational role during the Bougainville operation and in the aftermath of the Aitape tsunami response, the delegation is now focusing on supporting capacity building and organisational development. The PNGRC has assumed full ownership and responsibility for all ongoing programmes in health, disaster management, youth and branch development.

The delegation continues to play an important advisory role, and it is envisaged that the delegation will normally comprise two delegates (including the head of delegation), as requested by the PNGRC. Between them they are expected to cover the OD and DP technical areas. The delegation is also likely to host an Australian Red Cross delegate for the HIV/AIDS programme. In addition, the Federation's regional delegation in Suva will provide further technical support in areas such as health (blood, first aid), disaster management and OD where feasible.

Security remains an important concern, especially in Port Moresby, and strict guidelines are in force. The delegation recently moved to a renovated building within the PNGRC compound, freeing up some much-needed office space for headquarters staff in the process.

The PNG programme remained severely under-funded in 2003, with support for core costs especially difficult to generate. As the challenges for human development in the most troubled country in the Pacific region remain huge, and as the PNGRC enters a crucial stage in building sustainable capacity, delivering effective programmes and contributing to civil society, it is hoped that the ongoing CAS process will provide a platform for negotiating appropriate donor support.

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BUDGET 2004

PROGRAMME BUDGETS SUMMARY

Appeal no.: 01.71/2004

Name: Papua New Guinea

PROGRAMME:

	Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation	Emergency	Total
	CHF	CHF	CHF	CHF	CHF	CHF	CHF
Shelter & construction	0	0	0	0	0	0	0
Clothing & textiles	0	0	0	0	0	0	0
Food	0	0	0	0	0	0	0
Seeds & plants	0	0	0	0	0	0	0
Water & Sanitation	0	0	0	0	0	0	0
Medical & first aid	0	0	0	0	0	0	0
Teaching materials	0	0	0	0	0	0	0
Utensils & tools	0	0	0	0	0	0	0
Other relief supplies	0	52,000	0	0	0	0	52,000
SUPPLIES	0	52,000	0	0	0	0	52,000
Land & Buildings	0	0	0	30,000	0	0	30,000
Vehicles	0	0	0	0	0	0	0
Computers & telecom	0	10,500	0	0	0	0	10,500
Medical equipment	0	0	0	0	0	0	0
Other capital exp.	0	0	0	0	0	0	0
CAPITAL EXPENSES	0	10,500	0	30,000	0	0	40,500
Warehouse & Distribution	0	18,000	0	0	0	0	18,000
Transport & Vehicules	0	0	0	0	5,460	0	5,460
TRANSPORT & STORAGE	0	18,000	0	0	5,460	0	23,460
Programme Support	3,142	14,244	0	20,139	15,403	0	52,928
PROGRAMME SUPPORT	3,142	14,244	0	20,139	15,403	0	52,928
Personnel-delegates	0	0	0	123,400	116,400	0	239,800
Personnel-national staff	6,000	40,200	0	30,000	30,500	0	106,700
Consultants	0	0	0	0	0	0	0
PERSONNEL	6,000	40,200	0	153,400	146,900	0	346,500
W/shops & Training	31,200	72,200	0	62,290	3,000	0	168,690
WORKSHOPS & TRAINING	31,200	72,200	0	62,290	3,000	0	168,690
Travel & related expenses	0	0	0	26,000	32,800	0	58,800
Information	4,000	8,000	0	18,000	0	0	30,000
Other General costs	4,000	4,000	0	0	33,400	0	41,400
GENERAL EXPENSES	8,000	12,000	0	44,000	66,200	0	130,200
TOTAL BUDGET:	48,342	219,144	0	309,829	236,963	0	814,278