

# DREF operation final report



International Federation  
of Red Cross and Red Crescent Societies

## Paraguay: Dengue and Yellow Fever Outbreak

DREF operation n° MDRPY003  
GLIDE EP-2008-000022-PRY  
27 November 2008

The International Federation's Disaster Relief Emergency Fund (DREF) is a source of un-earmarked money created by the Federation in 1985 to ensure that immediate financial support is available for Red Cross Red Crescent response to emergencies. The DREF is a vital part of the International Federation's disaster response system and increases the ability of national societies to respond to disasters.

### Summary:

**CHF 78,000 (USD 72,222 or EUR 48,447) was allocated from the Federation's Disaster Relief Emergency Fund (DREF) to support the Paraguayan Red Cross (PRC) in a nation-wide dengue and yellow fever prevention and awareness campaign to reach 38,100 families (190,500 beneficiaries). Unearmarked funds to repay DREF are encouraged.**

The DREF-funded operation was implemented over the course of three months, closing on 15 May 2008. Actions focused on the organisation of dengue and yellow fever awareness raising talks, taking place on a house-by-house basis in the country's most vulnerable communities. The community campaign was combined with a national awareness campaign broadcast in both Spanish and Guaraní, the country's official languages.

The operation has been successful, reaching a total of 137,585 families (687,925 people) from 252 communities through inter-institutional activities conducted within the national Emergency Operations Centre set up to provide a unified response to the outbreak. The national awareness campaign also had significant impact with over 3,500 spots being broadcast via 26 national, departmental and local radio stations, and announcements published in the nation's leading newspapers.

The dengue and yellow fever outbreak was contained without reaching epidemic proportions, indicating that the preventative response organised by the state, the Red Cross and other institutions involved may have had a positive impact in containing the spread of these mosquito-transmitted diseases.

[<click here for the final financial report, or here to view contact details>](#)

## The situation

In January 2008, a dengue and yellow fever outbreak struck Paraguay with suspected cases of both diseases escalating rapidly throughout the first two months of the year.

Paraguay had suffered previously from an increase in the *Aedes Aegypti* mosquito, the vector that carries the virus, most notably in 2007, when 17 confirmed deaths were reported, and a suspected 100,000 people were infected. Dengue had been present in Paraguay and neighbouring countries in South America and yellow fever in Brazil in recent years. At the start of 2008, the number of cases again reached alarming proportions during the hot and rainy summer months.

On 15 February, the Paraguayan government declared a national state of emergency for a period of 90 days. The rapid spread of the yellow fever virus and the large numbers of people susceptible to contracting the disease for a second or third time, as well as an unusually high density of the vector increased the national concern.

The dengue outbreak reached its peak relatively quickly, with new cases declining towards the start of March. The General Directorate of Health Surveillance (Dirección General de Vigilancia de la Salud - DGVS) of the Ministry of Public Health and Social Welfare (Ministerio de Salud Pública y Bienestar Social - MoH) registered a total of 1,837 cases of classic dengue fever from the start of the outbreak to the beginning of April, with a total of 1,565 cases unconfirmed. However, experience from previous operations and consultations indicate that real figures are far greater than official cases registered by the MoH. This is due to the high incidence of self-medication for potential symptoms of the disease amongst the majority of the population.

New suspected cases of yellow fever continued to be reported until the beginning of March. The latest figures from the DGVS reported a total of 62 cases to the end of April with a fatality rate of 31 percent (8/26), of which 26 cases were confirmed and 12 remained under surveillance. The greatest incidence was located in San Lorenzo and Laurety in the Central Department with 30 cases, followed by the Department of San Pedro with 21, and another 11 cases in different departments.

The Extended Immunization Programme (Programa Ampliado de Inmunizaciones – PAI) delivered 2,399,000 yellow fever vaccines in different regions of the country and stored an additional 1,045,000. Official reports indicate that by the end of April a total of 1,768,303 people were vaccinated.

## Coordination and Partnerships

Since the start of the outbreak, the PRC coordinated actions with the Federation's South American Regional Representation and the Pan American Disaster Response Unit (PADRU), which mobilized human and financial resources to assist the National Society in developing an efficient response to the emergency.

In the initial period, a Regional Representation health expert was deployed to support the PRC, followed by a Regional Intervention Team (RIT) team member specialized in health emergencies for a period of one month. The RIT assisted the PRC in consolidating its Plan of Action. It also provided vital technical support in the organization of training workshops to strengthen the PRC capacity to respond in future emergencies.

The PRC coordinated all its actions closely with the Inter-Institutional Operations Centre Against Yellow Fever (Centro de Operaciones Interinstitucional de la Lucha Contra la Fiebre Amarilla - COIFA). The COIFA system was set up by the Secretariat of National Emergencies (Secretaría de Emergencias Nacionales – SEN) to harmonize the government and civil society's response to the emergency. Notably, this was the first time that the government has activated such a system to coordinate a unified and effective response to an emergency.

As a permanent member of the SEN, the PRC naturally assumed technical, operative and political functions within the COIFA at national and local levels, coordinating all its actions and directly supporting the work of the centres. Community interventions were organized on a day to day basis, taking into consideration the spread of the virus and the need to contain areas with a high density of larval infestation, following data received by the National Service for Malaria Prevention (Servicio Nacional de Erradicación del Paludismo – SENEPA). At national level, the PRC assumed a key role in COIFA, providing precise information on the outbreaks, and systematizing the data collected from community interventions to monitor operational advances. Also, the PRC supported the formation and training of community health brigades, and, where possible, assisted with volunteers.

Given COIFA's primary focus on the elimination of larval breeding grounds, PRC community awareness raising materials (leaflets, stickers and banners) were distributed by the brigades to affected communities, greatly increasing the reach of the Red Cross actions alone. In addition, some materials distributed in the PRC campaign were produced in coordination with the MoH, the Pan American Health Organization (PAHO), and other collaborating institutions. This alliance helped to increase the visibility and the number of beneficiaries reached by the campaign.

Constant coordination was maintained throughout the outbreak via weekly meetings formally gathering all institutions working in the emergency response. Among these institutions were: SEN, MoH via SENEPA, the Secretariat for the Environment (Secretaria del Medio Ambiente – SEAM), the Secretariat for Technical Planning (Secretaria Técnica de Planificación – STP), the Institute of Social Welfare (Instituto de Previsión Social - IPS), the Armed Forces, the national police, the Paraguayan Voluntary Fire Brigade (Cuerpo de Bomberos Voluntarios del Paraguay – CBVP), the United Nations Development Programme (UNDP), UNICEF, PAHO, and various other public and private institutions. Moreover, COIFA continued carrying out actions at departmental level to control the proliferation of the diseases in high risk areas.

## Red Cross and Red Crescent action

The PRC prepared a Plan of Action (PoA) to support communities vulnerable to dengue and yellow fever for a period of three months, taking into account lessons learned from the 2007 dengue fever outbreak DREF-funded operation.

Early assessments by team members indicated a lack of clear information regarding the causes, care and prevention of the spread of the diseases among the population. It was also important to share information regarding vaccination programmes for yellow fever with the communities. Therefore, the PoA focused on the development and implementation of a national awareness campaign with two complementary elements: 1) a campaign conducted at community level, with brigades of volunteers visiting vulnerable communities on a house by house basis to conduct talks; and 2) the development of a national awareness campaign broadcast via the country's key radio channels and published in the press.

The community awareness campaign covered 11 geographical areas: five departments at regional level, Alto Paraná, Concepción, Itapúa, Ñeembucu and San Pedro; five areas in the central department, Capiatá, Itá, Mariano Roque Alonso, Ñemby and Nueva Italia, and the capital city of Asunción. The beneficiaries of the operation were communities directly affected by the diseases, or those at risk of infection. The campaign focused on ensuring that highly vulnerable groups (children, single mothers, the elderly, the disabled and those already suffering from exposure to the diseases) were prioritised in the actions undertaken.

The national awareness campaign targeted the whole country and was designed to appeal to as broad a range of the population as possible, being broadcast in the country's official languages in both rural and urban areas

Given the role of the Paraguayan Red Cross in the COIFA, the National Society focused not only on implementing its Plan of Action, but also on providing support to activities conducted on an inter-institutional basis. Additional actions taken by the PRC throughout the operation included: providing medical personnel to assist in local vaccination campaigns and support the overwhelmed local health centres; as well as the organization of community clean-up sessions to eradicate larval breeding grounds.

## Progress towards objectives

### Emergency Health

**Objective: Increased awareness and prevention of dengue and yellow fever through the description of the symptoms to the most vulnerable through a country-wide media campaign.**

Two national campaigns were designed to raise awareness amongst vulnerable communities on the prevention, detection of potential symptoms and patient care, as well as the necessity to vaccinate against yellow fever.

**Community Education Campaign:** The PRC developed a community education campaign to work on the prevention of the disease through its national headquarters and ten regional and sub-regional branches in at-risk parts of the country.

Workshops to build volunteer capacity were held at central level, and later replicated at regional level at the start of the campaign. Volunteers were trained to conduct awareness raising talks and to act as community health promoters. In addition to the basic training workshops on disease prevention, the PRC organized a Health in Emergencies workshop with valuable technical input provided by the RIT supporting the operation. This workshop trained trainers from the same branches working in the operation to replicate the methodology at local level.

Informative materials, including two leaflets and various stickers were distributed to families and throughout communities to facilitate awareness-raising. All the PRC materials were created using common design elements to ensure continuity and increased visibility. Large banners on disease prevention were distributed to sixty leading hospitals located in the areas of intervention. Volunteers also received T-shirts and baseball caps to stimulate, provide identity and to increase the dissemination of the campaign's core messages.

Awareness raising talks were conducted by all afore-mentioned regional and sub-regional branches from 25 February until 15 May. Brigades of volunteers carried out the talks through home visits in each community, as well as in schools and other community focal points, including neighbourhood commissions and clubs.

### Progress:

Initial projections aimed to mobilize a total of 350 volunteers to reach a total of 38,100 families (190,500 people) from 55 communities. These figures have largely been surpassed with the development of joint actions within the national emergency response system, as well with the support from affected communities themselves.

In total, the PRC mobilised 539 volunteers to work in the operation, of which 389 were already Red Cross volunteers, whilst 150 volunteers were recruited from affected communities eager to contribute to raise public awareness to combat the diseases. Many of these community volunteers also participate in the National Society's risk reduction programmes.

The following table outlines the results obtained at the closure of the operation:

| Branches                     | Projected communities | Communities reached | Projected families | Families reached |
|------------------------------|-----------------------|---------------------|--------------------|------------------|
| <b>Headquarters</b>          |                       |                     |                    |                  |
| Asunción                     | 13                    | 12                  | 2,000              | 2,102            |
| Asunción PRC-COE*            | -                     | 15                  | -                  | 2,197            |
| Asunción PRC-COE**           | -                     | 48                  | -                  | 109,232          |
| <b>Sub-regional branches</b> |                       |                     |                    |                  |
| Capiatá                      | 3                     | 12                  | 1,000              | 914              |
| Ita                          | 4                     | 5                   | 1,200              | 684              |
| Mariano Roque Alonso         | 4                     | 33                  | 10,200             | 7,230            |
| Nemby                        | 3                     | 7                   | 4,000              | 795              |
| Nemby PRC-COE*               | -                     | 4                   | -                  | 399              |
| Nueva Italia                 | 3                     | 12                  | -                  | 1,084            |
| <b>Regional branches</b>     |                       |                     |                    |                  |
| Alto Paraná                  | 5                     | 8                   | 1,500              | 733              |
| Concepción                   | 5                     | 2                   | 1,200              | 136              |
| Concepción PRC-COE*          | -                     | 1                   | -                  | 405              |
| Itapúa                       | 5                     | 15                  | 5,100              | 2,226            |
| Neembucú                     | 5                     | 12                  | -                  | 342              |
| Neembucú PRC-COE*            | -                     | 26                  | -                  | 7,011            |
| San Pedro                    | 5                     | 19                  | 11,900             | 2,095            |
| <b>Total</b>                 | <b>55</b>             | <b>231</b>          | <b>38,100</b>      | <b>137,585</b>   |

\* COE joint interventions in areas as defined by the operation.

\*\* COE joint interventions in emerging high-risk areas.

### Impact:

The community education campaign in dengue and yellow fever prevention has had a significant impact in the communities intervened, reaching a total of 137,585 families or 576,545 people. These results were achieved not only through actions defined by the PRC Plan of Action, but also through joint activities undertaken within the national response system. This reflects the commitment of the National Society, governmental and non-governmental partners to work in coordination to ensure that actions reach as many people as possible.

Although previous activities had ensured that information on dengue prevention had been widely circulated, a need to reinforce prevention messages still existed. Specifically, the population required more information on the identification of potential symptoms, on the importance of medical consultations as opposed to self-medication, as well as the measures to tackle the breeding grounds of the mosquito vector. Little information

on yellow fever was available at the start of the outbreak. This coupled with resistance to vaccinations in some areas due to the fear of possible side-effects resulted in a general feeling of panic amongst the population.

Nonetheless, volunteers noted that people were receptive to the visits, and that talks and accompanying materials helped to clarify common myths and doubts surrounding both diseases. It is also possible that the talks may have had a wider impact on the quality of life of the families, given their focus on other health and hygiene topics related to the propagation and spread of the diseases.

In many communities volunteers worked alongside community members in the clearing of abandoned plots of land. Also, both cooperated to collect additional data including the mapping of potential larval breeding grounds, surveys on the numbers of people vaccinated and infected, and the systematization of community needs. Results of these activities were shared with local authorities during and after the campaign in an effort to improve preparedness and response to future health emergencies.

### **Challenges:**

The national presidential elections held at the end of April, and subsequent change of political party for the first time in sixty-three years, impacted substantially the implementation of the campaign at community level. Focus was naturally diverted prior, during and following this event, with some limitations on the availability of volunteers and interest on the behalf of the communities themselves.

The PRC has a small but dedicated body of volunteers trained and available to work on community activities. Most volunteers work and/or study limiting time available to participate in activities on a consistent basis, although this factor has been ameliorated through the recruitment of support from volunteers recruited from the communities.

**National Awareness Raising Campaign:** The national awareness raising campaign on dengue and yellow fever prevention was designed to: a) create a national consciousness to take effective preventive action, and b) deliver clear messages on the causes and symptoms of the diseases. Incorporating lessons learned from previous campaigns, the 30-day campaign was aimed at national and local radio stations, as well as the national press.

The publicity campaign had four main key messages linked to the global aim of the operation, focusing public awareness on the following points: On the urgent necessity of the elimination of larval breeding grounds, on the importance of vaccination against yellow fever, on the dangers of self-medication and on the importance of joint, organised community action.

Radio spots were prepared in the official national languages (Spanish and Guarani), using colloquial dialogue and familiar day to day settings with the objective of reaching a broad a range of the public as possible. Printed graphics were designed incorporating information from the community level campaign.

Consistent negotiations with the media were vital for the development of the campaign, ensuring its broadcast at no, or reduced, cost to maximise the number of transmissions per channel. Also, the regional and sub-regional branches working in the operation identified local media to ensure that the campaign obtained both regional and local reach. A national press conference was organised to mark the start of the campaign engaging both national press and radio in the campaign and officially launching the campaign in the process.

### **Progress:**

Initial targets aimed to broadcast the radio spot on three national AM and FM radios, to publish printed material in five national newspapers and one magazine, as well as the organisation of interviews of Red Cross volunteers and medical staff.

The national awareness-raising campaign commenced in early April, with spots broadcast on national and local radio stations, and announcements in the national press. The campaign was also accompanied by the construction of a website dedicated to the emergency, providing information on the prevention of the diseases, as well as the operation's advances, including interviews with Red Cross medical staff.

- Radio: 45 second and 60 second radio spots (Spanish and Guarani respectively) on 26 radio stations with national and local coverage, including five AM and five FM stations with a total confirmed number of 3,605 spots broadcast free of charge.
- Press: Publication of announcements in five national newspapers and one magazine.

**Impact:**

The national awareness-raising campaign has had a significant impact being broadcast by the country's principal radio channels and published in the key stakeholders of the national press, and reaching a substantial sector of the population. The diffusion of the radio spots via the regional and sub-regional branches has been particularly valuable in spreading the campaign's messages throughout the country. Moreover, at community level the national awareness-raising campaign complemented the work undertaken during the community education campaign.

Negotiations with the media concerned have been particularly successful, obtaining a vast number of free radio transmissions, and discounts in the press despite the pressures of the national elections during the campaign.

**Challenges:**

In a similar way to the community education campaign, the implementation of a national awareness-raising campaign in the run-up to the general elections proved problematic, given the vast number of spots taken by the different parties concerned.

Given current political pressures and the fact that all radio stations granted free distribution, data regarding exact transmissions was not made available by all stations. 11 stations did not report on the number of transmissions, thus indicating that results may have been higher than officially registered.

## Conclusion

At the operation's close, the PRC has achieved its objectives developing complementary actions in public awareness-raising on the necessity to take preventive measures against dengue and yellow fever. Of particular note in the results achieved is the importance of the role taken by the Paraguayan Red Cross in inter-institutional activities as a key member of the COE (COIFA). As previously mentioned, the COIFA was set up to coordinate an effective and unified response to the emergency, made possible through the launching of the PRC's DREF-funded operation. The provision of technical, operative and political assistance has served to widen the results obtained in this operation, and most importantly, to reach a larger number of people than initially planned thus contributing to halt the spread of the diseases.

Both dengue and yellow fever were contained before reaching epidemic proportions. This was achieved given that the actions taken by the state, the Red Cross and all other institutions working in the response, as well as actions taken by the general public, have had a positive impact. Although the colder winter months led to a reduction in optimum conditions for mosquito breeding, current trends and accompanying high temperatures indicate a need for continued monitoring of larval density.

Over and above the operation's specific objectives, the operation also had positive impacts on the institution, which will assist in the implementation of future emergency operations:

- **Recruitment, training and stimulation of new volunteers:** The operation served as a motor to recruit new volunteers, many of whom were directly at risk. At the same time, it has provided resources to train and stimulate old and new volunteers.
- **Institutional capacity building:** The development of this emergency operation has united different departments and regional branches. Also it contributed to institutional capacity building in key areas, including: the central regional branches, volunteering and communication offices, as well as strengthening operational processes on the ground itself.
- **Strengthening of inter-institutional links:** The role of the PRC in the national response required close coordination with all leading actors involved, consolidating existing partnerships, as well as opening new ones which will serve as the basis for improved coordination in future projects.
- **Public and media relations:** Monitoring undertaken in intervened communities indicates that the operation has had a positive impact through its goals in raising public awareness on the diseases; and also through the increased awareness about the institution itself. It is hoped that the public in general has gained a better understanding of the work of the institution through its interventions in affected vulnerable communities and through the diffusion of the national campaign.

Given the probability of future outbreaks, the PRC is continuing its work on preventive measures in dengue and yellow fever and organizing community talks via its risk reduction programme implemented in the Departments of Boquerón, Alto Paraná, Concepción, Ñeembucu, Itapúa, San Pedro and the city of Asuncion until the end of the year.

## How we work

*All International Federation 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 is committed to the [Humanitarian Charter and Minimum Standards in Disaster Response \(Sphere\)](#) in delivering assistance to the most vulnerable.*

The International Federation's activities are aligned with its Global Agenda, which sets out four broad goals to meet the Federation's mission to "improve the lives of vulnerable people by mobilizing the power of humanity".

### Global Agenda Goals:

- Reduce the numbers of deaths, injuries and impact from disasters.
- Reduce the number of deaths, illnesses and impact from diseases and public health emergencies.
- Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability.
- Reduce intolerance, discrimination and social exclusion and promote respect for diversity and human dignity.

## Contact information

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

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[<Final financial report below; click here to return to the title page>](#)

**International Federation of Red Cross and Red Crescent Societies**

MDRPY003 - Paraguay - Dengue Epidemic

Final Financial Report

| Selected Parameters |               |
|---------------------|---------------|
| Reporting Timeframe | 2008/2-2009/5 |
| Budget Timeframe    | 2008/2-2009/5 |
| Appeal              | MDRPY003      |
| Budget              | APPEAL        |

All figures are in Swiss Francs (CHF)

**I. Consolidated Response to Appeal**

|                                      | Goal 1: Disaster Management | Goal 2: Health and Care | Goal 3: Capacity Building | Goal 4: Principles and Values | Coordination | TOTAL  |
|--------------------------------------|-----------------------------|-------------------------|---------------------------|-------------------------------|--------------|--------|
| <b>A. Budget</b>                     | 78,000                      |                         |                           |                               |              | 78,000 |
| <b>B. Opening Balance</b>            | 0                           |                         |                           |                               |              | 0      |
| <b>Income</b>                        |                             |                         |                           |                               |              |        |
| <u>Other Income</u>                  |                             |                         |                           |                               |              |        |
| <i>Voluntary Income</i>              | 70,731                      |                         |                           |                               |              | 70,731 |
| <b>C5. Other Income</b>              | 70,731                      |                         |                           |                               |              | 70,731 |
| <b>C. Total Income = SUM(C1..C5)</b> | 70,731                      |                         |                           |                               |              | 70,731 |
| <b>D. Total Funding = B + C</b>      | 70,731                      |                         |                           |                               |              | 70,731 |
| <b>Appeal Coverage</b>               | 91%                         |                         |                           |                               |              | 91%    |

**II. Balance of Funds**

|                                         | Goal 1: Disaster Management | Goal 2: Health and Care | Goal 3: Capacity Building | Goal 4: Principles and Values | Coordination | TOTAL   |
|-----------------------------------------|-----------------------------|-------------------------|---------------------------|-------------------------------|--------------|---------|
| <b>B. Opening Balance</b>               | 0                           |                         |                           |                               |              | 0       |
| <b>C. Income</b>                        | 70,731                      |                         |                           |                               |              | 70,731  |
| <b>E. Expenditure</b>                   | -70,731                     |                         |                           |                               |              | -70,731 |
| <b>F. Closing Balance = (B + C + E)</b> | 0                           |                         |                           |                               |              | 0       |

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### III. Budget Analysis / Breakdown of Expenditure

| Account Groups                        | Budget        | Expenditure                 |                         |                           |                               |              | TOTAL         | Variance       |
|---------------------------------------|---------------|-----------------------------|-------------------------|---------------------------|-------------------------------|--------------|---------------|----------------|
|                                       |               | Goal 1: Disaster Management | Goal 2: Health and Care | Goal 3: Capacity Building | Goal 4: Principles and Values | Coordination |               |                |
| A                                     |               |                             |                         |                           |                               |              | B             | A - B          |
| <b>BUDGET (C)</b>                     |               | <b>78,000</b>               |                         |                           |                               |              | <b>78,000</b> |                |
| <b>Transport &amp; Storage</b>        |               |                             |                         |                           |                               |              |               |                |
| Storage                               |               | 79                          |                         |                           |                               |              | 79            | -79            |
| Distribution & Monitoring             |               | 602                         |                         |                           |                               |              | 602           | -602           |
| Transport & Vehicle Costs             | 13,932        | 4,894                       |                         |                           |                               |              | 4,894         | 9,038          |
| <b>Total Transport &amp; Storage</b>  | <b>13,932</b> | <b>5,576</b>                |                         |                           |                               |              | <b>5,576</b>  | <b>8,356</b>   |
| <b>Personnel</b>                      |               |                             |                         |                           |                               |              |               |                |
| International Staff                   | 6,480         |                             |                         |                           |                               |              |               | 6,480          |
| Regionally Deployed Staff             | 3,780         | 1,575                       |                         |                           |                               |              | 1,575         | 2,205          |
| National Staff                        | 1,620         | 987                         |                         |                           |                               |              | 987           | 633            |
| National Society Staff                | 14,040        | 14,178                      |                         |                           |                               |              | 14,178        | -138           |
| Consultants                           | 4,890         |                             |                         |                           |                               |              |               | 4,890          |
| <b>Total Personnel</b>                | <b>30,810</b> | <b>16,740</b>               |                         |                           |                               |              | <b>16,740</b> | <b>14,070</b>  |
| <b>Workshops &amp; Training</b>       |               |                             |                         |                           |                               |              |               |                |
| Workshops & Training                  |               | 4,875                       |                         |                           |                               |              | 4,875         | -4,875         |
| <b>Total Workshops &amp; Training</b> |               | <b>4,875</b>                |                         |                           |                               |              | <b>4,875</b>  | <b>-4,875</b>  |
| <b>General Expenditure</b>            |               |                             |                         |                           |                               |              |               |                |
| Travel                                | 2,700         | 7,000                       |                         |                           |                               |              | 7,000         | -4,300         |
| Information & Public Relation         | 22,248        | 22,611                      |                         |                           |                               |              | 22,611        | -363           |
| Office Costs                          |               | 5,011                       |                         |                           |                               |              | 5,011         | -5,011         |
| Communications                        | 1,080         | 1,043                       |                         |                           |                               |              | 1,043         | 37             |
| Financial Charges                     | 2,160         | 3,272                       |                         |                           |                               |              | 3,272         | -1,112         |
| Other General Expenses                |               | 5                           |                         |                           |                               |              | 5             | -5             |
| <b>Total General Expenditure</b>      | <b>28,188</b> | <b>38,942</b>               |                         |                           |                               |              | <b>38,942</b> | <b>-10,754</b> |
| <b>Programme Support</b>              |               |                             |                         |                           |                               |              |               |                |
| Program Support                       | 5,070         | 4,598                       |                         |                           |                               |              | 4,598         | 472            |
| <b>Total Programme Support</b>        | <b>5,070</b>  | <b>4,598</b>                |                         |                           |                               |              | <b>4,598</b>  | <b>472</b>     |
| <b>TOTAL EXPENDITURE (D)</b>          | <b>78,000</b> | <b>70,731</b>               |                         |                           |                               |              | <b>70,731</b> | <b>7,269</b>   |
| <b>VARIANCE (C - D)</b>               |               | <b>7,269</b>                |                         |                           |                               |              | <b>7,269</b>  |                |