



YWAM Medical Ships - Australia Ltd ABN 45 070 160 904 is a company limited by guarantee. Its registered office is located at 215 Walker Street, Townsville, Queensland.

Charitable Status, Tax Concessions and Fundraising

YWAM Medical Ships – Australia Ltd is registered as an Income Tax Exempt Charity. YWAM Medical Ships – Australia Ltd is registered under applicable fundraising legislation as required in each state where it raises funds as follows:

Western Australia – Registration No. 21248
South Australia – Registration No. CCP1693
Tasmania – Registration No. F1A342
Australian Capital Territory – Registration No. 19000353

Registration is not required in Victoria, Northern Territory, and New South Wales and YWAM Medical Ships is exempt from registration in Queensland.

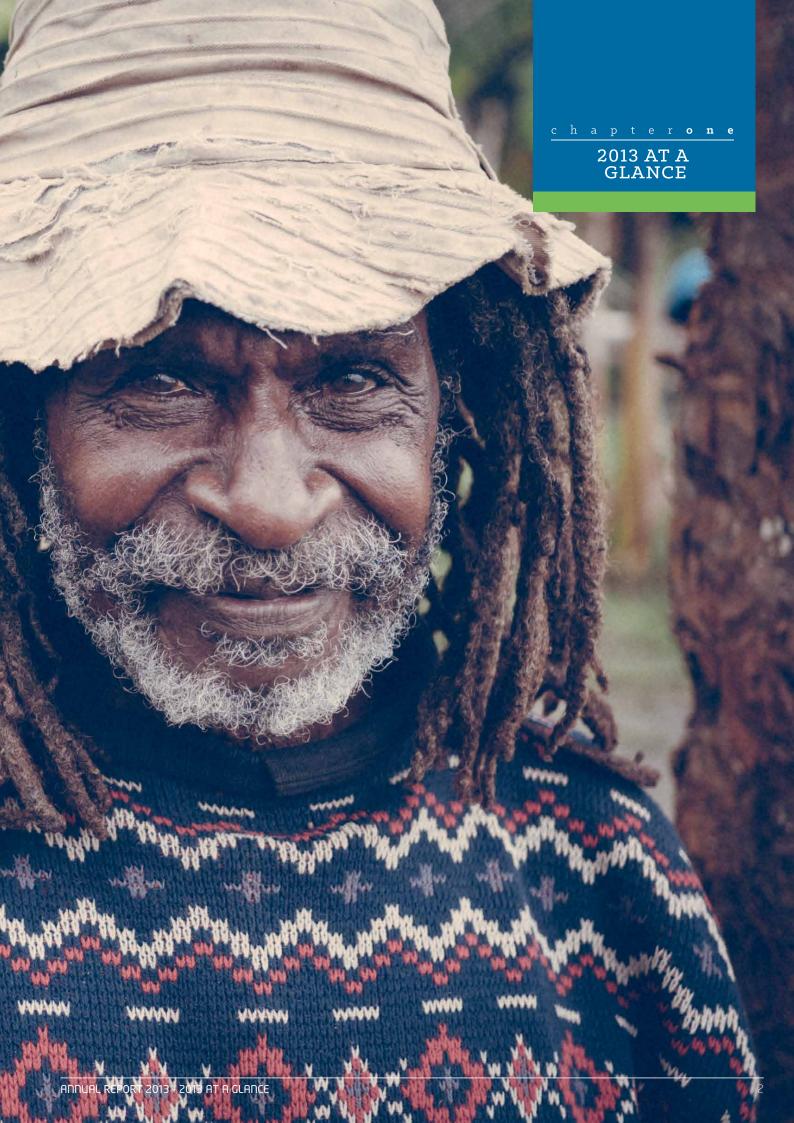
YWAM Medica Ships - Australia's auditor is Jessups North Queensland











1.1 Milestones and Highlights

The 2013 outreach season was another incredible year for YWAM Medical Ships – Australia (YWAM MSA). Milestones and highlights include:

Refurbishments and Improvements

The on board clinic was refurbished to improve efficiency in treating patients and to create additional space for storage and a new vaccine fridge. The mess hall and galley were also upgraded to improve liveability. These improvements made a significant impact on YWAM MSA's operations.

Equipping Rural Dental Workers

Solar powered portable dental chairs were distributed to six rural dental workers coupled with training to better equip them in providing services in remote locations in Papua New Guinea (PNG).

Expansion in the Southern (Papuan) Region

The first wave of land-based assessment teams were sent to Oro and Milne Bay Provinces in preparation for YWAM MSA's programming expansion in the Southern (Papuan) region with the new vessel in 2015, that YWAM MSA is progressing towards purchasing. Fifty villages were visited and surveyed in both provinces.

Progress Toward the Acquisition of a New Vessel

Significant meetings and discussions were held with key stakeholders in regard to the acquisition of a new vessel. A donation of four million PGK (Papua New Guinean Kina) was received toward the purchase of the new ship from the PNG Department of National Planning and Monitoring.

Tetanus Toxoid Supplementary Immunisation (SIA) Campaign

YWAM MSA collaborated with the nationwide tetanus toxoid SIA campaign for an integrated approach in achieving maternal and neonatal tetanus elimination. YWAM MSA administered 2,314 tetanus immunisations as part of the campaign.

Townsville-Port Moresby Sister City Relationship 30th Anniversary

YWAM MSA helped celebrate and champion the Townsville-Port Moresby Sister City Relationship through hosting and participating in a number of events in Port Moresby to commemorate the 30th anniversary of the relationship. Stakeholders involved included the Townsville City Council, National Capital District Governor, and the Chamber of Commerce. The anniversary was also acknowledged at the annual YWAM MSA fundraiser in Townsville.

Excellence in Ophthalmology Vision Award

YWAM MSA was awarded the Excellence in Ophthalmology Vision Award and a grant of €50,000 for reducing blindness from cataracts while empowering local ophthalmologists in PNG.

New Zodiac

A third Zodiac was added to the Medical Ship's small boat fleet to assist with transferring teams, patients, equipment, and supplies from ship to land.

Dr Edward B. Shils Entrepreneurial Award

YWAM MSA was a recipient of the Dr Edward B. Shils Entrepreneurial Fund's 2013 Special Recognition award along with YWAM MSA partner, 1300SMILES, for their public-private partnership dedicated to providing free health care, including oral screening and treatment to underserved populations in PNG.

Communication Improvements

A satellite communication system was installed on board the Medical Ship to improve communication in isolated and remote areas. VHF (very high frequency) radios were also upgraded to assist with communication between clinics.

Project Output Increase

Output volumes increased by 23% overall compared to 2012.



1.2 Summary Statistics

Clinic Outreach Statistics

Primary Health Care Patients	8,948
Immunisations Given	7.139
Dentistry Procedures	3.775
Dentistry Procedures	3.280
Ophthalmology Procedures	108
Ophthalmology Procedures	17.355
Preventative Health Resources Distributed	
Rural Health Workers Upskilled	,
Total health and training services provided	

Water, Sanitation, and Small Engine Activities

Total Water, Sanitation, and Small Engine Activities	.393
Attendees at Water and Sanitation Training	.99
Generators/Outboard Motors Serviced	.44
Attendees at Basics of Electricity Training	.100
Attendees at Basics of Two Stroke Engine Training	.150

TOTAL OUTPUTS.......63,548







2.1 Who We Are

Youth with a Mission (YWAM) is a worldwide Christian movement operating in more than 150 countries since 1960. YWAM is decentralised in structure; each centre is financially and legally autonomous, allowing locations to adapt and serve the specific needs of the community.

YWAM Medical Ships - Australia is a Christian charity that aims to serve, build, care, and connect with individuals and communities.

YWAM MSA values individuals' rights to quality of life. The shared motivation is to provide people with the following:

- Access to quality health care
- Food, clean drinking water, and shelter
- Opportunity for education
- Expression of culture, arts and entertainment
- Healthy relationships
- Exposure to Christian faith and values
- Fair and productive government
- Opportunity to work and develop

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YWAM MSA is actively developing communities by addressing the health care and training needs in Papua New Guinea (PNG) alongside the priorities and vision of the PNG National Health Plan, PNG National Department of Education and AusAID's commitment to the Millennium Development Goals. YWAM MSA is implementing programs with its Medical Ship and land-based teams in rural PNG communities in association with key stakeholders and partners. All of YWAM MSA staff, including senior project managers, are full-time volunteers.

YWAM MSA is a signatory to the World Relief Australia Code of Conduct.

Vision

YWAM MSA's vision is based on the need for a respectful and collaborative partnership with the people of PNG and Australia. The aim is to see major sustainable health improvement in PNG while simultaneously seeing relationships strengthened between Australia and PNG.

Mission

To see improved quality of life for the people of PNG through development-focused programs, with current emphasis on the health sector, while also building Australians' capacity to serve through volunteering.



2.2 History

The YWAM Medical Ship, MV *Pacific Link*, came under the management of YWAM Townsville in 2010. The *Pacific Link* was previously managed by YWAM Marine Reach New Zealand, primarily conducting its work in Fiji and Samoa before it began working in PNG with YWAM MSA.

Before YWAM MSA commenced operations in PNG, leaders met with the PNG Secretary for Health, Dr Clement Malau (2007-2011.) During this meeting, Dr Malau gave his endorsement of the project and invited YWAM MSA to commence operations in PNG. Dr Malau's advice was to focus predominantly on the Gulf and Western Provinces where healthcare services were most lacking.

YWAM MSA launched operations in February 2010 with a 16-port public relations tour along the east coast of Australia. During this campaign, 7.6 million people heard the 'I WANT TO LIVE' message, through a Ship tour, school presentation, civic reception, or media campaign. The tour was beneficial in building YWAM MSA networks across Australia, as well as strengthening the partnership between Australia and PNG.

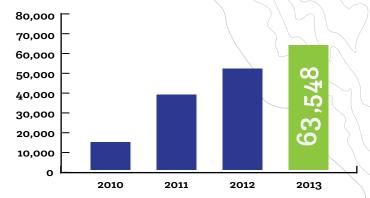
The YWAM Medical Ship made its maiden voyage to PNG in August 2010 to commence a three-month pilot program in the Gulf Province. Building on three years of surveys and assessments, YWAM MSA found the model to be successful and was invited to return the following year by the Gulf Provincial Government, village leaders, and rural healthcare workers.

In 2011, YWAM MSA expanded its operations and conducted a total of eight two-week outreaches across the Gulf Province, Western Province, and National Capital District of PNG. In addition to this, a Memorandum of Understanding (MOU) was signed between YWAM MSA and the PNG NDoH (National Department of Health) in October of that year.

In 2012, YWAM MSA conducted its third outreach season in PNG, increasing overall project output volumes by 24% in comparison to 2011.

In addition to conducting outreaches in the Gulf Province, Western Province, and National Capital District in 2013, YWAM MSA started sending land-based teams to Milne Bay and Oro Provinces in preparation for YWAM MSA's expansion into the Papua Region (with the new Servicing, Training and Medical Ship YWAM MSA is pursuing.)

Total Training and Medical Outputs





2.3 What We Do

Papua New Guinea

YWAM MSA has the ability to overcome isolation and lack of infrastructure through the use of a ship, allowing access to many PNG communities which lack basic service delivery. YWAM MSA facilitates outreaches with its Medical Ship and land-based teams to rural areas of PNG. The clinics include: dentistry, primary health care, immunisations, antenatal checks, malaria and haemoglobin testing and treatment, optometry, and ophthalmology. Training programs for rural healthcare workers and various health promotion initiatives for school children and the general community are incorporated into the clinics. In addition, training sessions on building water filters and fixing generators and outboard motors are run by the ship's on board engineers and crew.

YWAM MSA has a strong focus on training and empowering local healthcare workers and villagers to be able to serve themselves. YWAM MSA offers training, health awareness, community goodwill, logistical support, access to health care, preventative resources, and regular reporting and assessments. Furthermore, YWAM MSA engages with Papua New Guinean medical and dental students, offering them a place on board the Ship to complete their rural placement and/or gain further training and hands-on experience while exposing them to the need for medical and dental personnel in rural and remote areas.

YWAM MSA has land-based teams that carry out village assessments, primary healthcare clinics and lymphatic filariasis (LF) mass drug administration (MDA) in remote inland areas that the Ship is unable to access.

Australia

"PNG is our nearest neighbour. Improving the lives of poor people and promoting stability are central to Australia's interests. Australia is the largest donor to PNG. Australia's role as PNG's leading bilateral donor is globally recognised. Australian aid is having an impact on the lives of Papua New Guineans, and Australia will continue to play a leading role in supporting PNG's development, including through aid." ¹

YWAM MSA seeks to build on and enhance the current partnership that is established between PNG and Australia. The goal is to educate Australians on some of the challenges in PNG, while helping to generate practical involvement through providing volunteering opportunities as well as opportunities to donate finances, spectacles, toothbrushes, toothpaste, and medical supplies. YWAM MSA actively engages schools, churches, service clubs, businesses, and various community groups.

¹ AusAlD, "Why we give Aid to Papua New Guinea", Available: http://aid.dfat.gov.au/countries/pacific/png/Pages/why-aid.aspx [1 November, 2013]



2.4 Holistic, Asset-Based Approach to Our Programming

YWAM MSA takes a holistic, asset-based approach to developing its programs, currently focused in the health sector but with plans for considered diversification underway. The overarching goal is to empower communities to achieve long-term, sustainable development outcomes.

YWAM MSA's holistic approach involves engaging all spheres of society:

- Family (nuclear and extended)
- **Economics** (research and development, science and technology, business, and health care)
- Government (executive, legislative, judicial)
- Religion (local church and mission)
- Education (preschool, primary, secondary, tertiary, and vocational)
- Celebration (arts, entertainment, and sports)
- Communications/ Media (print, digital, broadcast)

YWAM MSA believes that the above are key building blocks in sustainable community revitalisation and development. YWAM MSA seeks to actively engage all spheres and to collaborate with PNG nationals to exchange skills and experience in order to empower and strengthen the nation.

YWAM MSA's community development philosophy is based on the asset-based community development (ABCD) model.¹ This approach focuses on building relationships, honouring authorities and appreciating and mobilising individual and community talents, skills and assets. This direct focus on strengths helps to empower communities by instilling hope and a positive vision of themselves and their collective future. This encourages self-mobilisation for change. Particularly in Western and Gulf Provinces, where there is great isolation, YWAM MSA uses its networks to facilitate partnerships to strengthen communities.

¹ The Asset-Based Community Development Institute, Northwestern Univeristy, Illinois, USA. www.abcdinstitute.org



2.5 Board of Directors and Project Management Team

Board of Directors: (based Australia wide)

David Skeat - Chair
Ken Mulligan OAM - Managing Director
Rebekah Hoover - Treasurer/Director
Anna Scott - Secretary/Director
Steven Aherne - Director
David Stephenson - Director
Jeremy Schierer - Director

YWAM MSA administrative and logisital support office is based at YWAM Townsville, Australia. The Board can be contacted via this office. See contact details backcover.

Project Management Team (based at YWAM Townsville)

Ken Mulligan OAM
Hannah Peart RN
Rebekah Hoover
Joanne Blaik
Ryan Booker
Fiona Saxby
Jared Hoover
Robyn Mulligan
Jennifer Rentsch

2.6 Message from the Board Chairman



Dear Friends,

What an amazing year it has been! The work in Papua New Guinea (PNG) continues to grow, as do the numbers of people we help. The volunteers who come to PNG to help us continue to do an amazing job, and the Government of PNG continues to be encouraged with the high standard of our work and the length of our commitment.

Into all the success we have seen over the past few years we are now looking at the purchase of a new ship. This vessel will enable us to do more, and stay longer (an outcome that we are very pleased about.)

All organisations have a story to tell. The basis of our story is found in partnership. The partnerships we have with the PNG Government and the people living in remote villages provide us with the opportunities we have to serve and connect. Our friends and donors who partner with us through financial donations and prayer empower us to make the most of these opportunities; and the partnership of our volunteer work force give us the muscle and the wisdom needed to do the job.

These documents are more than pages of information — they are the record of a journey of people who have partnered together and the wonderful outcomes that have come out of these relationships.

Thank you for your partnership and for the role you have played in writing this part of our story.



David Skeat

Board Chairman

YWAM Medical Ships - Australia

2.7 Message from the Managing Director

I am pleased to present to you the 2013 Annual Report. 2013 has been yet another full year with many victories, challenges and exciting developments as we progress toward seeing improved quality of life amongst PNG's rural majority.

One of my personal highlights from the year was the story of Makasi, a twenty-seven-year-old mother of three, who was one of 108 patients who received a sight-restoring eye surgery this year. Makasi had presumed congenital cataracts, a clouding of the lens that is present at birth, which had caused her eyesight to deteriorate throughout her life, causing her to go blind ten years ago. Makasi and her husband paddled for two weeks with their three children to meet the ship at Daru Island. When our ophthalmic team first met Makasi, she couldn't see a hand waving a metre in front of her, let alone an eye chart. Fortunately, Makasi was a surgical candidate. The team performed two 30-minute procedures to remove the cataracts from both eyes. The surgeries produced immediate results; Makasi not only could see almost to the bottom of the eye chart, but also saw her three children for the first time that day.

Makasi is just one of thousands of people that have been impacted by YWAM MSA's services and training in Gulf Province, Western Province, and the National Capital District. This year 63,548 outputs were achieved including immunisations, family planning, primary healthcare services, dentistry procedures, optical services and training for rural health workers. I am pleased to report that our outputs have increased year after year.

While we have been amazed at what has been achieved over the past four years with our current vessel, the need is still great; there are many villages in rural PNG that are not being reached with basic health services.

Our current vessel, the MV *Pacific Link* is now 34 years of age and is due to retire in 2015. Significant progress has been made this year in replacing the vessel with an aluminium catamaran that will enable us to deliver services to five times as many individuals on an annual basis in three additional provinces: Milne Bay, Central, and Oro. This year we started sending land-based assessment teams to these provinces to build relationship and gather information as we build our strategy for engagement in this region. It has been a real joy as we start to work with the provincial governments and their administrations, and we look forward to progressing this even further in 2014.

I would like to express my sincere gratitude to our supporters; our advisors, our patrons, the Right Honourable Sir Rabbie Namaliu GCL KCMG CSM and Honourable Mike Reynolds AM, our dedicated volunteer staff, and the hundreds of individuals who have served on board the ship this year to make the 2013 outreach season such a success.

ywani ywani

Ken Mulligan OAMManaging Director

YWAM Medical Ships - Australia

2.8 Message from the Patron - Papua New Guinea

This year represented my second year as Patron for YWAM MSA.

I have been amazed at the rapid rate YWAM MSA continues to expand and develop. Current projects in the Gulf Province, Western Province, and National Capital District have flourished year after year; in 2013 outputs increased by 23% compared to 2012.

In addition to continuing YWAM MSA's current work, my fellow Patron and I, Honourable Mike Reynolds AM, and the YWAM MSA team have been actively progressing towards the purchase of a new servicing, training and medical ship. This will replace YWAM MSA's current vessel, the MV *Pacific Link*, which is due to retire in 2015.

The new vessel will enable us to operate 11 months of year, in three additional provinces (Milne Bay Province, Oro Province and Central Province), reaching five times as many individuals on an annual basis.

I have a personal belief and commitment to make this pursuit a success as we continue to work toward breaking down isolation to reach the rural majority; where essential health services are desperately lacking.

We have been delighted to receive such strong support towards the venture from the Southern Region's Provincial Governments and the National Government who have contributed 4 million PGK toward the new vessel through the Ministry of National Planning and Monitoring.

We would like to extend a sincere thank you for this significant contribution.

I would like to congratulate YWAM MSA for the incredible work and commitment to the work and mission of the organisation shown by Managing Director, Ken Mulligan, the management team and staff. They continue to display immense passion to make a difference to the lives of those we reach out to and work with in many isolated communities across PNG.

Right Honourable Sir Rabbie Namaliu GCL KCMG CSM

Patron - Papua New Guinea YWAM Medical Ships - Australia

2.9 Message from the Patron - Australia

As Patron of YWAM Medical Ships – Australia for my fifth year, I was able to once again see an enormous consolidation of our partnership with the people of Papua New Guinea. Indeed, the highlight of 2013 has been the successful partnerships that we have formed with PNG National Government Ministers and the Governors throughout the Southern Region.

We reach the end of 2013 with enormous support from the Prime Minister, the Honourable Peter O'Niell, and his Ministerial colleagues for the 167,839 health service delivery and training opportunities that have been delivered in the Gulf and Western Provinces over the last four years. During this year we have also received encouragement and support from the four Governors of Oro, Central, Milne Bay and National Capital District for YWAM MSA to expand our critical work into their provinces.

In October this year the Minister for Planning and Rural Development, the Honourable Charles Abel, showed the PNG National Government's support for our work with a donation of 4 million PGK towards the purchase of a new Servicing, Training and Medical Ship to service the Southern Region. This reflects the tremendous support we have received across PNG, in Australia, and internationally for the humanitarian work that we are undertaking in PNG.

Once again, it has been a great delight and a real privilege to work with the Managing Director, Ken Mulligan, whose outstanding vision continues to become a reality. As Patron, I am extraordinarily proud of the work that Ken, his wife Robyn, and the YWAM MSA team have contributed to ensure that we improve the quality of life of the people of PNG.



Miles

Honourable Mike Reynolds AM
Patron - Australia
YWAM Medical Ships - Australia



2.10 Advisors

Right Honourable Sir Rabbie Namaliu GCL,CSM,KCMG

The Right Honourable Sir Rabbie Namaliu served as the fourth Prime Minister of PNG from 1988 to 1992. In 2012 he became Patron - Papua New Guinea for YWAM MSA, providing valuable insight in regards to operating in PNG and achieving long-term outcomes.

Honourable Mike Reynolds AM

The Honourable Mike Reynolds AM is the former Speaker of the Legislative Assembly of Queensland and represented the electorate of Townsville. He served as Mayor of Townsville for nine years and established the sister city relationship between Townsville and Port Moresby in 1983. Mr. Reynolds has served as YWAM MSA's Patron - Australia since 2009 and offers advice and expertise when engaging government, business and the media within PNG and Australia.

Honourable Havila Kavo MP

The Honourable Havila Kavo, Governor of the Gulf Province, has been a great support to YWAM MSA. He has provided much-needed advice on liaising with village leaders and officials in a culturally relevant manner, particularly in the Gulf Province.

Alice Honjepari

Ms Alice Honjepari is the Director of Rural Health Services for the Western Province of PNG. She has offered input to YWAM MSA in respect to the outreaches conducted in the Western Province.

Robert Saliau

Mr Robert Saliau is the Director of Health Services for the Gulf Province of PNG. He has enabled YWAM MSA to connect with Provincial Health Administration and has provided valuable advice in regard to target locations and strategy.

Right Reverend Sir Samson Lowa

The Right Reverend Sir Samson Lowa is the former Moderator of the United Church in PNG. He has been a great support to YWAM MSA through networking with other ministers within PNG. He also helped provide food relief for the Western Province flood victims which was transported by the Medical Ship in August and September 2012.

Marc Avai

Gulf Provincial Administrator, Mr. Marc Avai, has been key in connecting YWAM MSA at a Provincial level. He has provided YWAM MSA advice on how to best align with the Gulf Province 2020 Vision Plan and has been instrumental in establishing a Memorandum of Understanding (MOU) between YWAM MSA and the Gulf Provincial Administration.



Melinda Susapu

Ms Melinda Susapu is the National Coordinator for Elimination of Lymphatic Filariasis & Intestinal Worms with PNG National Department of Health (NDoH). She has been active in initiating a partnership with YWAM MSA to help eradicate lymphatic filariasis in the Gulf Province. She offers ongoing advice and assistance for YWAM MSA's treatment program.

Dr. Jambi Garap

Dr Jambi Garap is a senior ophthalmologist at the Port Moresby Hospital in Papua New Guinea. She is very active in the development of eye care services in PNG and founded PNG Eye Care in 2008. Dr Garap also played a major role in the development of the PNG National Eye Plan 2011 - 2015 and continues to work to see these goals fulfilled. Since 2010, Dr Garap has acted as host ophthalmologist to YWAM MSA's ophthalmic teams as they serve in her home nation.

Kuriva Aivei

Ms Kuriva Aivei, originally from the Gulf Province, has worked with YWAM Australia for over 10 years. She helps advise YWAM MSA on their work in the Gulf Province. Ms Aivei has been instrumental in connecting YWAM MSA with local village leaders as well as members of the Gulf Provincial Government and is on the YWAM Papua New Guinea National Executive Team.

Gulf Christian Services

YWAM MSA has been working with Kikori and Kapuna District Hospitals since 2009. Gulf Christian Services staff have been helpful in providing on-the-ground knowledge and expertise as well as assisting with numerous patient referrals. They have also provided personnel for for YWAM MSA's outreaches in Baimaru and Kikori Districts.

Daru General Hospital

YWAM MSA has been working with the Daru General Hospital since 2011. The experience and knowledge of local staff has been of great assistance to YWAM MSA.

Jeffrey Wall OBE, CBE

Mr Jeffrey Wall is a Political Consultant and has served as Advisor to the former PNG Prime Minister, Sir Rabbie Namaliu. He has played a valuable role as advisor to YWAM MSA in engaging with various stakeholders within PNG and Australia.

Peter Honeycombe

Mr Peter Honeycombe is the Managing Director of Honeycombes Property Group which he founded in 1996 after working in Townsville on several tourism and large commercial projects. Mr. Honeycombe places huge value on the Townsville community and plays a pivotal part in establishing a home-base for the Ship in North Queensland.

Dr Daryl Holmes

Dr Daryl Holmes is the founder of 1300SMILES Limited and serves as Managing Director. He has practiced dentistry with the Royal Australian Air Force and, in 1991, established his own private dental practice in Townsville. Dr Holmes serves as a key advisor to YWAM MSA's dental services, and assists with networking between various dental companies within Australia and overseas. He has also volunteered on several Ship outreaches as an expert trainer to the PNG dental workforce.

Geoff Dutton

Mr Geoff Dutton is the Executive General Manager of a private Australian power company, Ratch Australia Corporation. He has been involved in strategic planning and leadership in power and mining projects in Australia, China, South-East Asia and PNG. Mr Dutton has been of great assistance in providing advice as YWAM MSA pursues acquiring a new medical ship.

Cristi Morf

Ms Cristi Morf is an international development and program management specialist with over 13 years of experience in the delivery of public health programming and aid within several developing countries. She has worked for nearly a decade with the United Nations in PNG, and is a valuable advisor for YWAM MSA's program planning.

Ivan Baxter

Mr Ivan Baxter is a lawyer and partner at O'Shea & Dyer Solicitors in Townsville and has over 20 years experience in litigation. He advises YWAM MSA on legal matters as operations continue to expand.

Carl Valentine

Mr Carl Valentine, partner in PricewaterhouseCoopers
Townsville, is a business and taxation advisor with over 16
years experience in Australia and PNG. He is a registered
tax agent and a member of the Institute of Chartered
Accountants in Australia. Mr. Valentine advises YWAM
MSA on establishing, managing, and growing operations in
Australia and PNG.

Lynette Grubwinkler

Mrs Lynette Grubwinkler works as an ophthalmic theatre nurse and Infection Control Coordinator at Queensland Eye Hospital and ophthalmic nurse at the Northside Eye Specialists in Brisbane. She has assisted in the development of the YWAM MSA ophthalmic program and helped source equipment. Mrs Grubwinkler has participated in multiple ophthalmic outreaches over the years and has a strong passion to see PNG nationals trained in the area of eye health.

Dr Alan Hauguitz

Dr Alan Hauquitz, senior lecturer at James Cook University, specialises in health economics, management, and policy. His research interests currently focus on PNG in the areas of HIV and other infectious diseases. Dr. Hauquitz provides advice to YWAM MSA on program monitoring and evaluation.

Reverend Bruce Cornish

Rev. Bruce Cornish is Chairman of the Uniting Church, North Queensland. He has a long association with PNG and has been instrumental in connecting YWAM MSA with United Church ministers in the nation.

Lloyd Honeycombe

Mr Lloyd Honeycombe is a mechanical engineer and naval architect with over 40 years of experience in ship design and construction. He now acts as a marine design consultant and has been of great assistance in offering advice as YWAM MSA pursues a new medical ship.

Ray Toman

Mr Ray Toman has been a practicing naval architect for the last 40 years. Ray is a member of Royal Institution of Naval Architects (RINA), and up until his recent semi-retirement in 2011, was a long-time member of the Institution of Engineers Australia. Ray provided YWAM MSA with a stability assessment on the MV *Pacific Link* free of charge in 2013, and has also provided valuable advice in regard to a replacement vessel that will suit the extensive river systems and coastal areas in PNG's Papua Region.

Gary Esdaile

Mr Gary Esdaile is an economist and naval architect. Gary studied naval architecture and in 1999 became a marine consultant. Gary has teamed with Mr Ray Toman since 2000, and together they have provided YWAM MSA with valuable advice in respect to a new vessel for PNG's Southern region as well as assistance on the stability assessment of the MV *Pacific Link*.

Brett Curtis

Mr Brett Curtis is the Director of YWAM Ships - Orange County, California, currently based in Kona Hawaii. Mr Curtis has had extensive experience with operating ships throughout the world and is a great source of knowledge in the maritime field.

Dr Doug Randell

Dr Doug Randell is a general practitioner (GP) whose interests include international health as well as military and aviation medicine. Alongside GP responsibilities in Canberra, he serves as Senior Contracted Clinician at the Royal Military College, Duntroon, and as an Aviation Medicine Specialist with the Australian Civil Aviation Safety Authority (CASA). Dr Randell's previous work has included primary healthcare projects in Australian Aboriginal communities, Afghanistan, East Timor, Indonesia, PNG, and Vanuatu. He provides advice to YWAM MSA regarding primary healthcare clinics.

Dr Bill Talbot

Ophthalmologist, Dr William (Bill) Talbot, has been practicing in Townsville, Queensland since 2000. Dr Talbot came on board as an advisor and volunteer with YWAM MSA's ophthalmic program in 2012, and has been a great asset to the team with his passion to bring vision to PNG and ability to engage the Townsville ophthalmic community to get involved.

Dr Jeff Warner

Dr Jeff Warner is a Senior Lecturer at James Cook University. He has extensively researched infectious disease epidemiology and is a key player in strengthening health institutions, medical laboratories, and science professional development in the developing world, particularly PNG. Mr Warner has spent time working in Western Province, PNG, developing medical laboratory services and engaging in research.

Matthew Colwell

Mr Matthew Colwell is an administrator and policy analyst with many years of experience in community development and finance. After a successful career in the Australian Government, he has served for the last 20 years in various leadership roles within YWAM. Mr. Colwell has been of great assistance to YWAM MSA on various projects and programs.

Dannielle Brougham

Ms Dannielle Brougham has ten years of experience as a qualified senior dental assistant and is heavily involved in operational projects and clinical training of support staff for 1300SMILES Limited. She has been on outreach three times since 2010 and is currently studying Oral Health Therapy at The University of Adelaide, South Australia. With this background and knowledge she provides dental industry insight to YWAM MSA which contributes to continuous improvements that not only aim to enhance the experience of dental volunteers, but ultimately also the standard of dental care that can be provided on outreach.





2.11 Key Partners

PNG National Department of Health

PNG National Department of Health (NDoH) signed a memorandum of understanding with YWAM MSA in 2011 supporting MSA's training, health, and community development programs in some of the most remote regions of PNG. YWAM MSA has been deliberate in aligning with the PNG National Health Plan 2011-2020 and has received strong support from NDoH including provision of medication and immunisations. NDoH has also been a key source of advice on how to strengthen existing healthcare systems in PNG.

Steamships Trading Company

Steamships' 95 years of experience in the Western Province of PNG, and the shipping industry overall, makes them an ideal partner for YWAM MSA. They have offered both financial and major logistical support including wharfage in Port Moresby, in-kind services, and valuable insights regarding shipping operations in PNG.

InterOil

Oil and gas company, InterOil, has extensive experience operating within PNG, particularly the Gulf Province. As YWAM MSA continues to actively address the health care and training needs of the Gulf Province, InterOil has been of support by supplying YWAM MSA's total fuel requirements 2013-2016.

Gulf Province of Papua New Guinea

The Gulf Provincial Governor, Honourable Havila Kavo, officially invited the YWAM Medical Ship to the Province in 2009. Since then, a strong partnership has been formed to extend healthcare delivery in the Gulf. The Provincial Government provides annual funding and have been instrumental in connecting YWAM MSA to various networks in the Province.

Western Province of Papua New Guinea

The Western Provincial Government signed a memorandum of understanding with YWAM MSA in 2013 supporting MSA's training, health and community development programs in some of the most remote regions of the Western Province. As YWAM MSA continues its health programs in the Province, the Western Provincial Government have been of support by providing funding on an annual basis.

Curtain Bros

Major civil construction company, Curtain Bros, has a long history of working in PNG and Australia. Their experience and expertise in shipping in PNG has been of great value to YWAM MSA. Curtain Bros has provided logistical support and wharfage at their shipyard on Motukea Island in Port Moresby.



Rotarians Against Malaria

Rotarians Against Malaria's (RAM) objective is to improve and strengthen the local and national capabilities in malaria control. With malaria now affecting over 90% of the PNG population, YWAM MSA has partnered with RAM through assisting with the distribution of mosquito nets in remote villages.

United Church of Papua New Guinea

The United Church is one of the key health service providers in PNG's Gulf Province. YWAM MSA collaborates with United community health workers, maximising the reach of services and providing further training to workers in their own rural setting.

Living Light Health Services

Founded in 2000, Living Light Health Services (LLHS) is an operation of Foursquare Church, Kaugere settlement, Port Moresby. Under contract with PNG NDoH, LLHS provides a range of health services to desperately underserviced settlement communities. LLHS has dual aims of 'training and treating,' with services including well child and antenatal checks, TB treatment, HIV Voluntary Counselling and Testing (VCT), and acute primary health care services. YWAM MSA partners with LLHS during Port Moresby-based outreaches.

1300SMILES

providers in Australia. It has been a key partner of the YWAM MSA dentistry program by providing dental personnel, funding, and advocacy amongst dentistry networks. The company has also facilitated the donation of dental supplies and equipment.

Honeycombes Property Group

Honeycombes Property Group's focus on regional growth in North Queensland has made them a strong advocate for the YWAM Medical Ship to be based in Townsville. The organisation has been instrumental in making the YWAM Medical Ship a Townsville venture and has helped create ownership for PNG in the Townsville community through its networking and influence.

Henry Schein Halas

Henry Schein Halas (HSH) is one of Australia's largest providers of dental products and has a priority objective to demonstrate global social responsibility in respect to disadvantaged countries. HSH provides many of the consumables and equipment needed to operate the YWAM MSA dentistry clinics in PNG.

Network Communications

Network Communications is recognised as the largest Optus regional dealer in Australia. Network Communications supports YWAM MSA through their Charity Mobile Plan, offering customers the opportunity to donate 5% of their monthly bill to YWAM MSA.

Lions Australia

Lions Australia's long history of community service has made them an ideal partner to promote volunteerism and assist the disadvantaged. They greatly facilitate the YWAM MSA spectacle donation program by assisting with sorting, cleaning, tagging, and repackaging spectacles for distribution in PNG. In 2011, Lions Australia also donated a Zodiac to YWAM MSA, improving transport logistics for teams and patients to and from the Medical Ship.

Port of Townsville

The Port of Townsville is a cornerstone of North Queensland's economy and has been a generous supporter of YWAM MSA. The Port has provided in-kind services, new life jackets, and berthing at the Marine Precinct when the Medical Ship is in Townsville.

Townsville Bulletin

The Townsville Bulletin has given strong support to YWAM MSA and shares the vision to encourage Australian youth to volunteer. The *Bulletin*'s weekly Newspapers in Education program devotes a page of its section once a month to educating over 3,000 students about PNG and the YWAM Medical Ship. It offers practical ways for students to engage both locally and abroad.

City of Townsville

Townsville is the unofficial capital of North Queensland and continues to be one of the fastest-growing cities in the state, with a population surpassing 170, 000. The city has embraced the YWAM Medical Ship as its own. There has been much community support from schools, service clubs, churches, businesses, and individuals.

Alcon Australia

Alcon is a global leader in eye care. Its mission is to enhance quality of life by providing innovative products that improve vision. Alcon provides a significant volume of ophthalmology consumables for YWAM MSA in 2012, helping restore vision and enhance the sight of individuals in PNG.

YWAM Institute of the Nations

YWAM Institute of the Nations offers both accredited and non-accredited training programs. Partnership with the Institute enables YWAM MSA to extend the "train the trainer" approach of its programs. The Institute's Introduction to Primary Health Care (in developing nation communities) training program, for example, enables YWAM MSA to mobilise primary healthcare workers who can provide training support to their PNG counterparts.

Australian Mercy

Australian Mercy has over 20 years' experience in aid and development work both in Australia and overseas. Australian Mercy joined forces with YWAM MSA in 2012 as part of their BUZZ-OFF campaign. This is a direct, multifaceted action campaign which offers education, testing and treatment to prevent and combat malaria. Since 2012, BUZZ-OFF has provided mosquito nets, malaria testing kits, and hemoglobin test kits for YWAM MSA outreaches in PNG.

North Queensland Cowboys

The Cowboys have a strong influence in PNG. Cowboys players Matty Bowen and James Segeyaro have been spokesmen for YWAM MSA's education programmes in PNG, helping to promote the use of mosquito nets to prevent malaria and regularl exercises to ease knee and back pain. Their high profiles help us communicate the message in a relevant way.

2.12 Other Supporters

Atlas Copco

B. Braun Australia Pty Ltd

Bamu Trust

Belgian Gardens State School

Bendigo Bank

Biomedex

BOC Ophthalmic Instruments

Brakemart Townsville Pty Ltd

Carl Zeiss

Carlyle Automatics & Vehicle Repairs

Carmichael Motors

Cattani

Combined Churches Townsville

Commonwealth Bank

Coutts Redington

Critical Dental

Designs for Vision

Ela Motors PNG

Ergon Energy

Foothills Community Church

G-Layer

GP After Hours Doctors

Hatz Diesel Australia

Hayman Island Medical Centre

Hermit Park State School

Hervey Bay Baptist Church

Hope Community Church (Windmill Ministries)

Inner Wheel Club of Townsville

International Paint

Jeppesen Marine

Jessups North Queensland

Lancini Group

Lennox Head Pharmacy

Lex Electrix

Lions Club of Castle Hill

Lions Club of Newcastle

Lions Club of Thuringowa

Maidment Development Group

Main Street Pharmacy

Marine & Industrial Marketing Pty Ltd

Mater Health Services North Queensland

Medical Dental Solutions NQ

Milne Bay Provincial Government

M.O.B. Enterprises

Multigate Medical Products pty Ltd

Oro Provincial Government

Pacific Marine Group

Pharmatex Aust Pty Ltd

Pickerings Auto Group Townsville

Pinard Francois

PricewaterhouseCoopers

Queensland Eye Hospital

Rapp-it

Rose Point Navigation

Rotary Club of Townsville

South West Healthcare

St Anthony's Catholic College

St Dominicks Primary School

St James School

St Paul's Lutheran Church

Summerland Christian Life Centre

The Drill Guys

The Townsville Hospital

Toll Global Forwarding/Toll Sea Cargo

Townsville & Suburban Medical Practice

Townsville Central Rotary Club

Townsville Orthodontic Specialists

UDP Consulting Engineers

Uniting Church Presbytery North Queensland

Vetta Productions

Vital Medical Supplies

Waters Abrasive Blasting and Industrial Coatings

William Talbot Eye Care

YWAM Darwin

YWAM Southlands





3.1 Kikori District (Gulf Province)

This was YWAM MSA's fourth consecutive year in the Kikori District of the Gulf Province. The following villages were engaged during the 2013 outreach season¹:

East Kikori Rural

Waitari Karati Era Kiti Era Maipua Nahoromere Wowou Irimiku Fro Samoa Gigbi Meagoma Buri Ema. **Imei** Kotere Sotau Era Goilave Torai

West Kikori Rural

Kikori Station Doibo
Veiru Babaguina
Kopi Arial
Lalau

Highlights

Health Workforce Development

It was a delight to return to many of the locations that YWAM MSA visited in previous years. YWAM MSA has developed strong relationships in working alongside health workers in these locations, and returning for the fourth consecutive year spoke even deeper commitment and partnership. These often isolated, rural health workers were again strengthened and encouraged in their work through the up-skilling they received as well as the camaraderie of working together with YWAM MSA personnel.

Of particular value were the sessions run for Traditional Birth Attendants from around the Kikori District and the days spent at the Kikori Hospital. Due to the absence of a doctor at the Hospital towards the end of the visit, YWAM MSA was asked to provide a doctor to see inpatients. This provided YWAM MSA with incredible opportunity to get beside the staff at the hospital and provide on-the-job upskilling and training. Conducting the ophthalmology clinic out of Kikori Hospital also gave YWAM MSA the opportunity to help support the various nurses and health care workers from the hospital.

The following healthcare workers in the Kikori district received education and training on various topics and training from YWAM MSA throughout 2013:

- Sixteen nurses and CHWs at Kikori General Hospital
- One doctor at Kikori General Hospital
- Eleven nurses and CHWs from various villages across the district
- Thirty-one Traditional Birth Attendants

Community Empowerment

YWAM MSA crew expanded their community development services this year to include water sanitation, domestic violence intervention and sexual health training. This was in addition to the two-stroke engine, basic outboard, and basic electrical trainings, that were offered to the men in many villages across the Kikori District. Water filters proved to be of particular interest with all-around amazement regarding the simplicity of creating such a needed resource.

Challenges

Communication

Significant attempts were made well in advance to communicate with village or community leaders in every location that YWAM MSA visited. Communication continues to prove to be challenging and YWAM MSA often found that face-to-face communication via Zodiac transport proved to be the most effective way of ensuring clear communication. In cases where this was necessary, it meant additional personnel and resources were needed to make these sometimes lengthy journeys in person.

Surveying

Hydrographic charts of the Kikori District are limited, affecting the provision of, and access to, basic services for rural communities. Hydrographic survey in 2013 in YWAM MSA's small support vessels (tenders) revealed a substantial shift in the deep-water channel between Aird Hills and Doibo Village. A new channel was found allowing the Ship access directly to Kikori. However, the margin of water available is considered small enough that anchoring near Kikori in the future with the current YWAM Medical Ship is unlikely. The next closest anchorage is South West of Aird Hills. A vessel with a more shallow draft will be necessary to confirm continued access directly to Kikori.

¹ YWAM MSA mobile clinics were set up in these villages. Clinics served a broader area, however, as individuals from other villages traveled to receive treatment.

Saving Immunisations, Saving Lives

Who knew that a solar panel could potentially save lives? In the village of Karati in the Gulf Province of Papua New Guinea, a solar panel has enabled power for a refrigerator that will now be able to store vaccinations for the whole surrounding region!

The refrigerator and solar panels were donated to the village two years ago, but without the means of making it work, it had just been sitting there. YWAM MSA engineers on board were able to set up the solar panels and connect the refrigerator alongside locals in the village, making it operational to store life-sustaining immunisations for Karati and its neighbouring villages!



3.2 Baimuru Rural (Gulf Province)

This was YWAM MSA's fourth consecutive year in the Baimuru Rural District. The following villages were engaged during the 2013 outreach season:

Akoma Korovake
Baimuru Maipenairu
Kapuna Mirimalau
Kivaumai Veraibari

Highlights

Partnerships with Local Health Service Providers

It was a privilege to return to the Baimuru region and to work alongside Gulf Christian Services for the fourth consecutive year at Kapuna Hospital. YWAM MSA partnered with Kapuna Hospital through assisting with ward rounds, providing training sessions for the hospital staff, and helping strengthen their supply chain through delivering tuberculosis (TB) and family planning medication, fuel, and other medical supplies.

Health Workforce Development and Innovation

Dental: YWAM MSA's dental team continued their strong working relationship with local dental worker, Morea Joseph, who has now worked alongside the YWAM MSA dental team for four years. Over the last 12 months, Morea has trained a second dental worker, Manu Laiko, to keep up with the demand in the Baimaru district. Both Morea and Manu worked alongside YWAM MSA's dental team to gain more knowledge and experience in the Medical Ship's on board clinic and on land using the portable dental units. YWAM MSA provided Morea and Manu with a portable dental unit, which includes a dental chair, a hand drill, pneumatic foot-operated and speed-control pedal, instrument tray and solar panel. The entire kit folds into a 15 kg backpack and can be taken down in just over a minute. The portable dental unit has enabled Morea and Manu to expand their services outside the hospital when the teams are on immunisation patrols throughout the Baimaru area.

Optical: YWAM MSA had the opportunity to train three optical workers in the use of the innovative I-SEE unit. The I-SEE unit is designed to train PNG locals with the skills needed to identify and treat common eyesight problems. The unit includes 400 pairs of glasses, two lens ladders, eye charts, a repair kit, and non-verbal training tools to equip locals to fit glasses.

Two community health workers from the Baimaru area were trained to use the unit and worked alongside YWAM MSA's optometry team, providing optical services to three villages throughout the area.

After working with the team for one week, the health workers were given an I-SEE unit so that they could continue to provide optical services at Kapuna hospital and alongside the hospital patrol teams.

Community Health Workers, Traditional Birth Attendants, and Nurses: The presence and strength of the Kapuna General Hospital in the Baimuru Rural area greatly decreased the acute cases that YWAM MSA personnel encountered. This enabled YWAM MSA to shift their focus and spend the majority of their time providing immunisation and family planning services as well as up-skilling and education. Throughout the nine clinic days that YWAM MSA was in Baimuru Rural, 102 professional development education services were provided. Included in this were 42 women from around the region who tookpart in up-skilling education sessions surrounding Traditional Birth Attendant training.

Oral Health Improvements

During 2012 outreach season, the third consecutive year in this region, a noticeable shift from emergency extraction services to restorative dental work was a significant point of celebration for YWAM MSA's dental team. During 2013, it was encouraging to see further tangible progress toward improved oral health. Not only were a higher percentage of services delivered restorative in nature, but, a total of 109 (approx. 1 in 5) patients needed only a check-up, as further services were unnecessary.

Challenges

The presence and strength of the Kapuna Hospital in the Baimuru Rural area significantly changes the major health issues in the area. YWAM MSA encountered many more chronic cases than acute medical concerns. A substantial need for up-skilling in regards to some of these more complex issues was recognised. In one village this began to be addressed through having the CHW spend the day alongside YWAM MSA's physiotherapist learning to treat chronic knee and back pain. In future years it will be explored how health workforce development education can have a greater focus on chronic case management.

Surveying

Hydrographic survey confirmed that river passages now used for the fourth consecutive year, in 2013, remain viable. Additional approaches to the region from the Gulf of Papua were confirmed via Port Romilly and Deception Bay. While in this district, additional surveying confirmed that the draft of the current YWAM Medical Ship is too deep to allow passage from the sea into the rivers East of Port Romilly to Orokolo Bay.

First I-Dent Trip an Incredible Success

Morea and Manu are PNG men on a mission. The dental workers in the Gulf Province were the first to receive an I-Dent kit when the Medical Ship visited Baimaru District in the Gulf this year. They have received training from volunteer dentists on board over the last four years, and now that they have an I-Dent kit, they have everything they need to continue dental services after the ship has gone.

"Our first time out with the new dental chair bringing dental services to their door step was a big surprise and eye opening to everyone. It was a great relief to the people of the Gulf seeing this new chair operated in front of their home with no cost," said Morea.

Their first patrol took them to Orokolo village, then to Wabo village, where Manu met a few interesting cases. "There was a man who came with his wife for tooth extraction. As I investigated, he told me that he had been having a toothache for two months," Manu said. This man became so desperate that he used the urine of his 14-month-old baby to decrease the pain. "He said that the pain reduced after 5 minutes and the relief lasted for about 20 minutes, but then the pain came on again," Manu said. He was one of many who took advantage of the free service that Manu and Morea brought so close to home. In those two villages, they were able to do 54 extractions, and relief to many people in the villages.





3.3 Port Moresby (National Capital District)

This year marks the second annual outreach in Port Moresby, NCD. Over five clinic days the following eighteen suburbs were engaged:

5 Mile 6 Mile Baruni East Boroko Gabi Gerehu Hanuabada Hohola 1 Hohola 4 Joyce Bay Kila Kila Kaugere Pari Rainbow Sabama Tatana Waterfall Tibuserei

During this time, YWAM MSA also held several meetings on board the Ship with the aim to continue to expand networks in PNG and strengthen the partnership between PNG and Australia. The outreach provided opportunities to engage with many different individuals and groups from various spheres of society and YWAM MSA established new partnerships with groups already doing work within the city.

Highlights

Support Local Clinics

This was YWAM MSA's second year working alongside the local staff at the Living Light Ministries Clinics. YWAM MSA was also able to provide Living Light Ministries with an I-Dent portable solar powered dental chair, and I-SEE kit, both innovative tools developed by I-TEC. These tools will assist the clinics to expand and strengthen their services on-site and when on patrol.

Supplementary Immunisation Campaign

YWAM MSA worked in close partnership with the National Capital District Health Services (NCDHS) for the first time this year to support their efforts with the Supplementary Immunisation Activity (SIA) campaign in Port Moresby. SIA is a special immunisation campaign that the Department of Health has been carrying out in all provinces and districts in PNG to provide tetanus immunisations to women aged 15 to 45, including pregnant women. YWAM MSA served alongside local staff at five different NCDHS clinics throughout the city to deliver immunisations to women within their catchment areas. Clinics were mobile in nature and YWAM MSA staff would join local clinic staff in travelling to markets, settlements, and roadside meeting places. Once there they would make a megaphone announcement as to the services being provided, and then begin immunisation to all who presented. Over 1,900 tetanus immunisations were delivered during this time.



Engaging in Schools

YWAM MSA undertook health and value-based school programs in nine schools across Port Moresby, engaging 1,145 students. Topics such as prevention of drug and alcohol use, prevention of bullying, self-esteem, and malaria prevention were covered during these programs.

Partnerships

Partnerships were again strengthened and networks expanded during this second annual YWAM MSA outreach in Port Moresby.

YWAM MSA hosted several government officials on board the ship including Honourable Justin Tkatchenko, Minister for Sport and Pacific Games; Honourable Titus Philemon, Governor of Milne Bay Province; Elva Lionez, Deputy Secretary for Health – Corporate Service; the Moderator and Bishops from the United Church of Papua New Guinea; and the PNG National Prevention of Blindness Committee.

YWAM MSA was also very privileged to take part in the 30th Anniversary Celebration of the Sister City Relationship between Townsville and Port Moresby. The ceremony highlighted the importance of Australia and PNG working together and the strength that has come from this friendship.

A new partnership between YWAM MSA and PNG Eye Care (an NGO facilitated by Brien Holden Vision Institute) was established during this outreach. Two refraction workers from PNG Eye Care who joined the YWAM MSA optometry team in Port Moresby found the team's approach to eye care very refreshing; and YWAM MSA learned much from PNG Eye Care and their processes for assessment and distribution of prescription glasses.

YWAM MSA was also very excited to strengthen the partnership with Vetta Productions of Townsville, Australia, who played a great role in assisting YWAM MSA capture the essence of the work of our volunteers in PNG through photography.

Health Workforce Development

YWAM MSA was pleased to work alongside a total of 55 PNG health professionals during the outreach in Port Moresby in 2013. These nationals included a doctor, dentists, dental assistants, nurses, CHWs, and refraction workers. On-the-job up-skilling took place in each of YWAM MSA's clinics, and both Port Moresby and Townsville professionals benefitted from the exchange.

3.4 Bamu Rural (Western Province)

In 2013, YWAM MSA returned to the Bamu region for the second year. During nine clinic days YWAM MSA engaged the following 34 villages:

Torobina	Nemaiti	Bamio
Aniadaiq	Emeti	Bunigi
Upati	Wakau	Piru Piru
Binruie	Balimo	Matakaya
Mapane	Daru	Depana
Musura	Viney	Meero
Gama	Koperami	Bamaramio
Sepi	Gopi	Bina
Miruwo	Shokita	Morpawi
Kuria	Sogere	Mawoy
Oropai	Bina 1	Bina 2
Sisiami 2	Kuruo	

Highlights

Mosquito Net Distribution

Prior to outreach six, YWAM MSA received mosquito nets from BuzzOff to distribute throughout the Bamu Region.

This became a major focus for the Community Assessment Team. Coupled with malaria-prevention education, 1,188 nets were distributed across the region.

Immunisation and Family Planning Service Provision

The extreme poverty in the region, along with the significant distance to health centres, means that immunisation and family planning services in the Bamu are particularly challenging to sustain. Many children did not have up-to-date immunisations, although immunisation patrols had been visiting the region once or twice a year, but with insufficient supply.

YWAM MSA's Primary Health Care team administered a total of 977 immunisations, and 317 family planning services were provided. These were eagerly sought after, as it was common for families in this region to have between eight and ten children.

Gama River Visit

A highlight of YWAM MSA's time in the Bamu Rural was a day trip to the Gama River. Due to the shallow depth of the river, YWAM MSA's current Ship is not able to make it up the Gama, so it was a small support vessel with medical professionals and a community assessment team that made the visit. It was a wonderful day and the team was able to complete a number of village assessments. The midwife on board was called upon to assist a woman experiencing complications, and a number of malaria-preventing mosquito nets were delivered. Beyond all this, the highlight was seeing the hope that was renewed in the villages that were visited. YWAM MSA was encouraged to be a part of reminding the Gama people that they are not forgotten.

Challenges

Poverty

While visiting the Bamu region, YWAM MSA volunteers were struck by the level of poverty and hardship that villagers were experiencing. The lack of food, clean water, and basic amenities was shocking. Basic necessities such as clothing and cooking pots are desperately lacking.

Access to health care is a great challenge for the residents of the area. In order to reach an aid post or healthcare centre, they are forced to fight river currents and manoeuvre through tidal bores in their canoes. Aid posts are often underserviced and lacking fundamental supplies.

Malnutrition

The level of malnutrition found within the Bamu region was shocking. During nine clinic days, YWAM MSA performed healthy child checks on 414 children. An appalling 107 of them were suffering from malnutrition — more than 1 in 4 — a drastically higher percentage than was found in any other region that was visited.

Village Access

Tides and mud made it very difficult to access many of the villages in the Bamu Region. The transportation of medical equipment and supplies was particularly challenging.

Birthing Conditions and Traditional Beliefs

In the Bamu Region, women often give birth in small, temporary shelters behind their homes. Traditionally, they are to remain there until they stop bleeding – anywhere from two to four weeks following the birth.

This custom is held very closely and those who break it are looked down upon. YWAM MSA came across a number of elderly men in the Bamu Region who believed their poor eye conditions were a direct punishment because of breaking this cultural standard many years earlier. Traditional beliefs often overshadowed confirmed professional health opinions and added a further element of difficulty in providing education.

Health Workforce Development

Across the Bamu Region there was an alarming lack of health professionals. YWAM MSA found most villages either had no aid post, or where aid posts had been built, found that there were no health workers present.

Surveying

Hydrographic survey work verified the 1,560 kilometers of river passages that had been located and used in 2012. A wide range of tidal variations, (days when there is almost nil tide fluctuation for 18 hours, to days when the water level changes by four metres in six hours), continued to create voyage planning challenges. Tidal bores associated with the largest tides, which are necessary to reach certain villages, added to the dynamic of determining when the vessel could access villages along the rivers. Surveying was conducted as a step toward improved access (PNG National Health Plan Objective 1.1) and strengthened primary healthcare transport infrastructure (Objective 1.2).

Life in the Gama River Region

At this point, our only way into the Gama River is by small Zodiac, which is exactly what we did on one occasion. We were called to one village to help a mother who had given birth the day before. Her baby had been delivered safely, but complications left her exposed to a high risk of haemorrhaging and infection.

In a dark hut, curled up by a fire, she was laying on boards and a few scattered bits of cloth, smeared with blood and dirt. Lydia, our midwife, quickly solved the problem with little trouble. She then administered immunisations to both mother and baby. We left with warm smiles from the villagers as they waved farewell, thanking us and imploring that we come back one day.

Our day trip into the Gama was a successful one. On our way out we dreamt of the day when we would be able to further navigate these difficult river systems and reach more people with life-giving services, encouragement, and hope!





3.5 Daru and the South Fly District (Western Province)

This year YWAM MSA returned to the Daru and South Fly District for the third consecutive year. Outreach five was spent in various villages in the South Fly River and outreach seven's efforts were focused on Daru Town and the surrounding settlements. The following villages and settlements were engaged:

South Fly:

Teapopo Legoten Baidowa Negoter Rual Saweni Madiri Baramera Mutam Bugumo Lewada Kename Balimo Kease Domora Wapi Arato Demago Muta Gabama Dimgalu Aduru Tirutumaderi Wariobodori Wasua Doumori **Tapila** Kawiyapo Abam

Daru:

Mabaduan Somare
Tureture Madame
Wabada Katatai
Sepe Seremabu
Uuwo Ipasea
Waparu Bamu
Parama

Highlights

Daru Hospital

Returning for the third consecutive year to partner with Daru General Hospital, YWAM MSA was ready to implement new strategies and to build upon services provided in the past.

The YWAM PHC team worked alongside the hospital staff for the duration of the first week in Daru. The team members split up throughout the wards to maximise input and increase one-on-one interaction with local staff. Team members worked in the TB, Paediatric, Outpatient, and Obstetrics and Gynaecology Wards, seeing patients and building relationship with staff. During this time, areas of need for future education sessions were identified and a number of up-skilling sessions were run at the hospital.

The second week the team focused on immunisation and healthy child check patrols in the settlements around Daru Island. It was found that despite being so close to the main hospital many children hadn't received their immunisations, so the team was kept very busy. Furthermore, YWAM MSA visited a number of schools on the island and administered tetanus immunisations to students entering and leaving school.

The hospital staff were also invited to the Ship for a morning of up-skilling and professional development in the areas of maternal health and nursing assessment. It was a wonderful time to host these hard-working health professionals on board and a great opportunity to present much-desired teaching and training.

Optical Service Provision

Returning for the third year to Daru, it was a joy to arrive and see many community members proudly wearing the glasses they had received from YWAM MSA over the last few years. It was a particular joy to meet a patient who had received a very strong script in 2012 — one that had enabled him restored life and freedom to move without an escort. Upon arrival, YWAM MSA personnel were delighted to find him happily engaged in a community event. He had renewed confidence and joy and his glasses were in seemingly mint condition. He was very forthcoming with his delight and praise and excited to have YWAM MSA back in Daru providing this same service to others.

The YWAM MSA optometry team primarily worked out of a building on the hospital premises. This was a wonderful facility and having the luxury of tables, chairs, and electricity increased the team's capacity of the team exponentially. Throughout the time in Daru, 1,072 patients received vision assessments, and approximately 900 corrective lenses were provided. Many other patients received UV-protective sunglasses or were referred to the ophthalmology team for further service.

Daru Settlement Initiative

A highlight this year was YWAM MSA's deliberate initiation in engaging surrounding settlements on the island. Having been alerted to the fact that last year many settlements had been unaware of YWAM MSA's presence and services, a concerted effort was made in 2013 to be sure that all were aware and had opportunity to engage. YWAM MSA partnered with Western Province Provincial Government presenting to the majority of settlements on the island to triage ophthalmology and severe-case optometry patients and to invite residents to partake in other services provided. Over the following days a significant number of these patients arrived at the hospital and it was clear that the settlement initiative had been successful. YWAM MSA also arranged transport for a grouping of largely immobile elderly patients and was able to return them home with either new glasses or having received cataract or pterygium surgery. YWAM MSA was delighted to provide such life-changing, tangible results.

Provincial Health Administration

Being based out of Daru for two weeks gave great opportunity to connect with the Western Provincial Health Administration. This allowed YWAM MSA collaborate with various health authorities, including the Director of Rural Health Services.

Ophthalmology

YWAM MSA's ophthalmology team ran a highly successful clinic based out of Daru hospital. Seventy-one patients received sight-restoring surgery, with a further 117 engaging in consults throughout the two-week period. Makasi's heartening story of regained sight stands out as an inspiration from this time. (See Makasi's Story p.70)

Strengthening dental health workforce

YWAM MSA was greatly encouraged by a dental worker named Jack who took the initiative to paddle some 30 hours from his village to join YWAM MSA while in Daru. Jack joined the team on board each day and eagerly soaked up new knowledge and skills. It was wonderful to see Jack's incredible commitment and passion and YWAM MSA gifted him an I-Dent Chair before his departure, to better equip him to continue to serve his village community. (See Jack's full story p.74)

Challenges

On Location Training

Education seminars that were facilitated within the Daru Hospital had difficulty in reaching maximum number of trainees. This was due to a shortage in nursing staff and very little flexibility in getting time off for training. It was found that even though training was highly valued, urgent care needs continued to pull staff away.

Dental Registration

There were logistical issues in registering dentistry patients from the hospital. Patients were allocated a day that they could be seen, but would show up on a different day. This resulted in some patients being unable to be seen because of the high patient load on certain days.

Violence against Women

YWAM MSA teams are frequently confronted with instances of violence against women. Patients presented to clinics with injuries resulting from beatings. Especially common cases involved women who had lost sight due to beatings. Another disturbing case involved a women who had been beaten so severely the week before YWAM MSA arrived that her ear drum had burst and there was a large infected laceration on her head. These situations highlight the importance of continued advocacy surrounding the value of women and the importance of a safe community for all, an issue that is widespread across the nation.

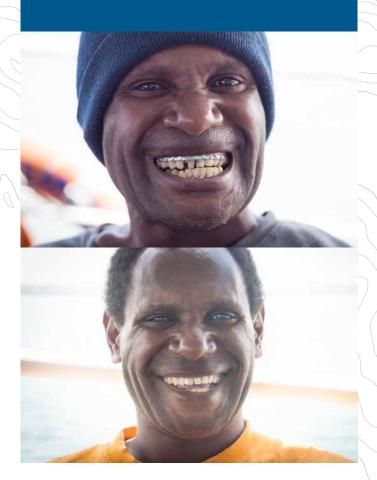
Surveying

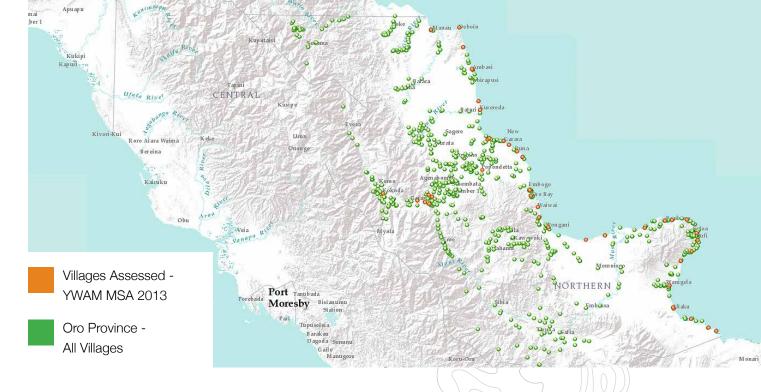
In 2013 hydrographic survey work in YWAM MSA's tenders verified river passages located in 2011 and used in 2012. A PNG shipping company provided additional local knowledge that established a basis for route-specific survey work that was conducted.

All Smiles for Warumai

Six months ago Warumai suffered a broken jaw in three places and was in desperate need of medical attention. Against all odds he made it to Port Moresby, to have his jaw wired shut in place to heal. After six weeks, circumstances left him unable to get the attention he needed. Six weeks turned into six months before the Medical Ship showed up to his village.

You can imagine Warumai's joy when the Ship with a team of dental professionals came. Having been on a soft food diet and unable to open his mouth, he welcomed the relief and regained freedom. The procedure was done and when Warumai returned a few days later for a check up, along with being happy with his progress, our team was able to further assist him by performing a few restorations on his front teeth. That day as Warumai left our Ship he was able to open his mouth to share his thanks. As he flashed his new beautiful smile for all to see, it was clear that he was leaving as a more joyful man than he had come.





3.6 Oro and Milne Bay Provinces

Advance Assessment Teams

YWAM MSA sent the first wave of assessment teams to Oro and Milne Bay Provinces this year with the aim of building relationship with provincial government authorities, local health providers, maritime authorities, and village leaders. The teams also gathered on-the-ground information in preparation for YWAM MSA's programming expansion into the Papua Region with YWAM MSA's new Serving, Training and Medical vessel in 2015.

In Oro Province, 43 villages were surveyed in Ijivitari and Sohe Districts. In Milne Bay Province, 7 villages were surveyed in Alotau and Samarai-Murua Districts.

The information gathered from the teams, including discussions from provincial government authorities, health providers, village leaders, and other key stakeholders will be utilised to help plan and prepare for YWAM MSA's ongoing work in the Papua Region.



3.7 Provincial Government Reports

Gulf Province 2013 Report Back

In July, representatives from YWAM MSA visited Kerema to give a presentation on YWAM MSA's work in the Gulf Province. Attending the presentation were the Provincial Administrator, a representative from the Governor's office, the Acting Director for Provincial Health, and about 35 other representatives from Provincial Health, the Provincial Administration, the Provincial Government, and local healthcare workers with interests in YWAM MSA's work in the region.

The first part of the presentation gave a general overview of YWAM MSA's work in Gulf Province to date, including showing of the recap video from 2012 and a presentation of statistics from 2013. Also included was an overview of each clinic run by the ship including dentistry, ophthalmology, optometry, training, and primary health care. The second part of the presentation focused on YWAM MSA's plans for the future of operations in the Gulf. This included the prospects of acquiring and running a newer, larger vessel in the province; expanding to broader regions; and sending more land-based teams into the regions inaccessible by the current vessel.

To close the presentation, a time was given for those attending to have a chance to present their questions and feedback. This time was very beneficial, and changes and suggestions mentioned will be taken into consideration for future outreaches.

Overall, this was a very successful time of building and strengthening YWAM MSA's relationships and partnerships within the Gulf Province. YWAM MSA will continue to partner with the Gulf and hopes to be able to provide updates like this in the future as a key to working together with the province.

Western Province 2013 Report Back

Representatives from YWAM MSA met in Daru with Director of Rural Health Services, Alice Honjepari, and Western Provincial Health Advisor, Phil Dowton, in September. This was an opportunity for YWAM MSA to connect with on-the-ground personnel and further strengthen these key relationships.

During this meeting an overview of the work that YWAM MSA had completed across the Western Province to date was given and a report compiling the 2013 statistics was presented. Plans and strategy for health service delivery in the future was discussed, and increased opportunities to collaborate with relevant stakeholders was explored.

Overall, this was a successful time and YWAM MSA was encouraged about the future of health service delivery in the Western Province.

Port Moresby 2013 Report Back

Upon completion of a successful week of outreach in Port Moresby, a presentation was held on the *Pacific Link*, in August, to acknowledge the work and partnerships established with various clinics of the National Capital District Health Services (NCDHS.) Attending the gathering were representatives from Six Mile Clinic, St John Hospital Gerehu, Lawes Road Clinic, and St Therese's Clinic.

The presentation included a tour of the *Pacific Link*, as well as a showing of the 2012 YWAM MSA recap video and a report back of the work that had been accomplished together. An invitation of continued partnership and teamwork was extended in looking towards the coming years.

In closing, each clinic involved was presented with a report outlining what had been achieved through their partnership. A similar report was given to the officer in charge of Living Light Health Services and Dr Jerry Tanumei, Director of Curative Health for NCDHS.

Dr. Tanumei was pleased with the partnerships achieved during YWAM MSA's outreach four and reiterated his desire to continue to develop and strengthen this partnership.







4.1 Primary Health Care (PHC)

Focus: Collaborative Service Provision

PHC 1: Provide primary healthcare services

Background: PNG's significant burden of illness and disease, coupled with health workforce challenges, are most pressing in remote rural areas where the vast majority of the population reside.¹ YWAM MSA collaborates with Provincial Health authorities to provide services to some of the most isolated communities. Direct service provision runs parallel to YWAM MSA capacity-building initiatives to develop local workforce and community resources to improve health and wellbeing.

Target: Partner with local health workers to provide primary healthcare clinics to serve 720 people per outreach.

Outcome: Mean number of people provided with primary health care clinic services per outreach: 1,278 (range 851-3,021)

YWAM MSA PHC clinics consistently exceeded target numbers and provided services for a minimum of 851 people per outreach. This number was often greatly exceeded.

YWAM MSA acquired a new Zodiac for the 2013 outreach season, which served in maximising capacity through reliable transportation between the Ship and villages. YWAM MSA personnel, along with many supplies, are transported to shore each clinic day. This new addition to the existing fleet strengthened service provision and consistency.

Throughout 2013, the most common diagnoses were related to respiratory, gastrointestinal, musculoskeletal/connective tissues, skin and wound, female health, and malnutrition and suspected TB.

Focus: Health Promotion and Community Empowerment

PHC 2: Empower communities to improve health status through education

Background: Community empowerment, possible in part through health education, is a central pillar of development¹ and an important strategy in achieving YWAM MSA's goal of helping PNG realise its hopes of improved health outcomes for all.²

Target: Equip communities by providing health and hygiene education to 500 community members per outreach.

Outcome: Mean number of PHC education services provided per outreach: 2,149 (range 437 - 3,665)

N.B.: The mean PHC education average includes child education and is an aggregated figure of attendees at PHC education sessions. The same individuals may have attended multiple sessions.

YWAM MSA leadership for each outreach sought to engage with local village leaders regarding topics and mode of delivery of community education. This resulted in a program of services tailored to each area as much as possible. Commonly requested health topics included HIV/AIDS, maternal health, general hygiene, and malaria.

Target numbers were met and exceeded on six of seven outreaches this year. Outreach two fell below target due to having a smaller PHC team.

Availability of YWAM MSA personnel to be released from direct clinical duties was sometimes a limiting factor. This was addressed in part by drawing on personnel from outside the PHC team. Flip-chart training aids, coupled with a basic induction, were used to equip general volunteers as basic health educators, thus maximising education opportunities.



Focus: Health Workforce Capacity Building

PHC 3: Strengthen primary healthcare capacity building workforce

Background: PNG National Health Plan Key Result Area 3 focuses attention on health workforce development (Objective 3.2).² The most recent published workforce data for PNG (2005) indicate 0.5 medical officers per 10,000 population (Western Pacific Region [WPR] average 14.8) and 4.6 nurses or midwives per 10 000 (WPR average 18.4.)³ Anecdotal evidence suggests that these numbers are much lower in many of the rural areas that YWAM MSA services. Strengthening the PNG health workforce is a key objective of all YWAM MSA operations.

Target: Provide primary healthcare professional development training to five local health workers per outreach.

Outcome: Mean number of heath workers provided with PHC professional development training per outreach, including Traiditional Birth Attendants: 25 (range 0 – 79)

Across PNG's Gulf and Western Provinces, 172 health workers received formal primary healthcare professional development from YWAM MSA in 2013. Up-skilling health workers is of primary importance for YWAM MSA and was a major focus for the duration of the outreach season. This target was met on all but two outreaches in 2013.

During outreach four, YWAM MSA worked with 273 local health workers in Port Moresby. No formal training was presented during this outreach, but on-the-job up-skilling took place in each clinic.

YWAM MSA encountered the poorest area and the worst conditions during outreach six in the Bamu region. Throughout the entirety of the outreach, only two health workers were present in communities visited. These individuals received one-on-one professional development and up-skilling.

- ¹ Tsey, Komla, "Community development and empowerment". In: Population Health, Communities and Health Promotion. Oxford University Press, 2009, Melbourne, VIC, Australia, pp. 215-231.
- ² Government of Papua New Guinea, "National Health Plan 2011-2020", 2010.
- ³ World Health Organisation, "Country Profile Papua New Guinea", 2012. Available: http://www.who.int/gho/countries/png.pdf [Oct2012]



4.2 Maternal Health (MH)

MH Goal: Decrease maternal mortality

Background: Maternal health is a significant problem in PNG. The most recent Maternal Mortality Ratio (MMR) reported by local health authorities estimates 733 maternal deaths per 100,000 live births. This is the highest in the Pacific Region; more than three times that of Fiji and more than 150 times that of Australia. According to these reports, the MMR increased between 1996 and 2006.

YWAM MSA is committed to collaborating with the PNG NDoH and Provincial Health Administration to address this issue. MH Goal 1 correlates with United Nations Millennium Development Goal (MDG) 5: Improve Maternal Health (includes a focus on reducing MMR and improving access to family planning services) and PNG's National Health Plan Key Result Area 5: Improve Maternal Health.

Focus: Collaborative Service Provision

MH 1: Provide antenatal checks

Background: Quality antenatal care is a key evidencebased intervention to reduce maternal mortality supported by the WHO Making Pregnancy Safer Initiative and outlined in the WHO guide to quality in maternal health services.³

Target: Perform 30 comprehensive antenatal checks per outreach.

Outcome: Mean number of comprehensive antenatal checks provided per outreach: 32 (3 – 50)

Throughout 2013, YWAM MSA contributed to maternal health by meeting felt needs and performing comprehensive antenatal checks in each village that was visited.

Apart from outreach three, each outreach included a registered midwife on the PHC team. Outreach three included a GP with special interest in women's health and tropical medicine. Every woman who presented at the PHC clinic received a comprehensive antenatal check and initiative was taken in every village visited to encourage all pregnant women to receive such services.

During the 2013 outreach season this target was met on all but two outreaches. Outreach three had a lower number of pregnant women present at clinics, and due to the varied nature of outreach seven in Daru, the team was primarily focused on training and up-skilling health professionals and completing immunisation patrols. Maternal health services were available on a consistent basis at the Daru General Hospital. Therefore, as directed by Western Provincial Health and Daru General Hospital, YWAM MSA focused their efforts on in-service training in hospitals and immunisation patrols in settlements.

MH 2: Provide family planning services to women

Background: The PNG National Health Plan emphasises the need for women, especially the isolated, rural majority, to receive improved family planning services (Objective 5.1.) This has a direct positive impact on maternal mortality and wellbeing in addition to child health and economic indicators.³

Target: Provide family planning services to 50 women per outreach.

Outcome: Mean number of women who received family planning services per outreach: 57 (range: 6 -151)

Medical forms of contraception offered by YWAM MSA clinics in 2013 were injectable progestogen and oral contraceptives. The most popular choice among women who accessed these services was Depo-MedroxyProgesterone Acetate (DMPA, common trade name Depo-Provera), though differing regions had a preferred choice of contraceptive method.

Total DMPA injections administered: 242

Total oral contraceptive packets dispensed: 157

MH 3: Support maternal health supply chain logistics

Background: A clean birthing environment is essential to reducing the incidence of maternal mortality. Therfore, clean birth kits are included in international guidelines for birthing in developing nations. These kits have been shown to contribute to safer birthing practices for rural women in low resource healthcare settings.

Target: Deliver 100 birth kits per outreach to rural distribution networks.

Outcome: Mean number of birth kits distributed per outreach: 99 (range 0 - 154)

YWAM MSA continues to partner with rural health networks across the Gulf and Western Provinces. During the 2013 outreach season, strengthening the resource supply of partners through the provision of birth kits was considered a great achievement.

Outreaches four and seven were both in urban settings where distribution of birth kits was unnecessary. This affected the overall distribution targets during these outreaches since no kits were distributed. During the other five outreaches, the mean averages exceeded target.

Target: Deliver 300 family planning consumables per outreach to rural distribution networks.

Outcome: Mean number of family planning consumables delivered per outreach: 594 (range 0 – 3280)

The distribution mean was affected by outlying results from outreaches four and seven; both were in urban settings where local hospitals made distribution of family planning consumables unnecessary. Distribution was reduced on other outreaches due to lack of clarity for some staff regarding target distribution goals.

Focus: Health Promotion and Community Empowerment

MH 4: Provide antenatal and family planning education

Background: Provision of antenatal education to pregnant women is included as an element of 'essential care' in WHO Making Pregnancy Safer guidelines,⁶ as well as in the PNG National Health Plan, Objective 5,2.3.

Family Planning education falls in line with the PNG National Health Plan, Objective 5.1.2 – Advocate for the advantage of having fewer children and increasing spacing of children; Objective 5.4.1 – Increase the knowledge of adolescents about sexual and reproductive health; and Objective 5.4.2 - Increase cross-sectoral collaboration with schools to strengthen education of students in sexual and reproductive health.

Target:

- Provide antenatal education to 40 pregnant women
- per outreach
- Provide pregnancy and birth education to 100 community members per outreach.
- Provide family planning education to 100 community members per outreach.

Outcomes:

- Mean number of pregnant women who received antenatal education per outreach: 32 (range 3-50)
- Mean number of community members who received pregnancy and birth education per outreach: 85 (range 18 150)
- Mean number of community members who received family planning education per outreach: 141 (range 0 - 335)

Powering the Delivery Room

Antonia is the head nurse and midwife for the heath station at Emeti in the Bamu River region of the Western Province. Every year she delivers baby after baby with very little resources at her disposal, including not having electricity. This year we were able to make her job a little bit easier, and hopefully make childbirth a whole lot safer, by presenting the health center at Emeti with a solar suitcase.

The solar suitcase, designed and made by the American-based We Care Solar, is outfitted with solar-powered lights, battery chargers, a phone charger, headlamps, and a fetal doppler to monitor the baby's heartbeat.

The Ship's engineer coached the health workers in how to use it before mounting it to the wall of the delivery room for safekeeping. Antonia and her coworkers were stunned and joyful for this gift, making birth safer for both mother and baby alike.





Antenatal and family planning flip charts as well as baby/pelvis models were used again this year with positive responses from the community. In antenatal teaching, an emphasis was placed on maintaining wellbeing during pregnancy as well as early recognition of symptoms and signs indicating the need to seek urgent medical assistance.

Family planning teaching focused on empowering community members to make well-informed decisions regarding their reproductive health.

During the 2013 outreach season, YWAM MSA received a request from village leaders to conduct specialised family planning sessions for men. This initiative was rolled out across the Gulf and Western Provinces with topics focusing on Sexually Transmitted Diseases, contraception, and healthy relationships. Favourable results were reported from this new initiative.

N.B.: Family planning community education sessions were run on four of the seven outreaches throughout the 2013 outreach season. Outreaches in Kapuna, Port Moresby, and Daru, where greater access to health education was available, focused efforts elsewhere. This affected the mean averages of the year.

Focus: Health Workforce Capacity Building

MH 5: Increase maternal health workforce capacity

Background: The presence of a trained attendant during birthing is an essential element of quality maternal health services. It is reported that maternal mortality and severe labour-related morbidity could be reduced by 95% if 'essential care', such as the assistance of a trained attendant, was available to all birthing women. Current estimates of service delivery in PNG indicate that the majority of women birth without such assistance. This is of particular concern for women in isolated, rural communities.

Target: Provide maternal health professional development to five local health workers (including traditional birth attendants, where appropriate) per outreach.

Outcome: Mean number of health workers at maternal health professional development sessions per outreach: 15 (range 0 – 42)

N.B.: This is an aggregate figure of attendees at all sessions; as individual health workers may have attended more than one session.

A wide spectrum of healthcare personnel received maternal health training during the 2013 season ranging from trained professionals to traditional birth attendants in the various settings encountered. Content was tailored to the audience and delivered by a range of YWAM MSA personnel. Standardised training resources were available and supplemented by materials produced directly by MSA volunteers.

YWAM MSA personnel observed that it was not common practice for traditional birth attendants to examine the placenta after birth. Favourable feedback was received regarding training in this practice and this was highlighted numerous times as a valuable asset received through YWAM MSA's maternal health sessions.

Lessons Learned: During outreach seven in Daru, it was found that the most successful education sessions took place on board the Ship. Due to the busy nature of the hospital setting, as well as the draw of being on board, YWAM MSA found attendance and attention levels rise when education sessions were held on board.

¹ National Statistical Office, "Demographic and Health Survey 2006," Papua New Guinea, 2009.

² Government of Papua New Guinea, "National Health Plan 2011-2020," Chapter 3 "State of Our Health", 2010.

World Health Organisation, "Packages of Interventions," 2010. WHO/ FCH/10.06

Department of Making Pregnancy Safer, "Pregnancy, Childbirth,
Postpartum and Newborn Care: A guide for essential practice," World
Health Organisation, 2009.

⁵ Balsara et al. "Impact of clean delivery kit use on clean delivery practices in Beni Suef Governorate, Egypt," J Perinatol. 2009 Oct; 29(10):673-9

World Health Organisation, "Recommended Interventions for Improving Maternal and Newborn Health," WHO/MPS/07.05

World Health Organisation, "Country Profile – Papua New Guinea," 2012.
Available: http://www.who.int/gho/countries/png.pdf [Oct2012]



4.3 Child Health (CH)

CH Goal: Decrease infant and child mortality

Background: PNG has some of the highest infant and child mortality rates in the Pacific (61 under-five child deaths per 1 000, 2010 data). YWAM MSA is focused on implementing programmes to help PNG move toward reducing under-five mortality and the corresponding PNG Health Key Result Area (KRA) 4: Improve Child Survival. CH 1 and CH 2 address two of UNICEF's 'Priority Child Survival Interventions': immunisation coverage and a focus on feeding, including deworming and treatment of malnutrition.²

Focus: Collaborative Service Provision

CH 1: Provide child immunisations

Background: Immunisation significantly reduces child mortality, including in PNG.³ Promotion of immunisation is included in quality guidelines for child health in developing nations ^{4,5} and increasing immunisation coverage is a specific objective of the PNG National Health Plan (Objective 4.1).⁶ YWAM MSA follows the PNG NDoH childhood immunisation schedule including coadministration of vitamin A.

Target: Provide 270 child immunisations per outreach.

Outcome: Mean number of child immunisations provided per outreach: 689 (Range 463 + 996)

N.B.: Although data has been manually cleaned, a small number of adults may still be included in the aggregated child immunisation statistics.

Child immunisations were a major focus for the PHC team throughout the 2013 outreach season. In some villages YWAM MSA found that many children were up-to-date with their immunisations due to the diligence of patrol teams in those areas. In other areas YWAM MSA found vast need, and it was reported that patrol teams had not been through in quite some time. YWAM MSA continues to partner with local health authorities and is confident to report that the Gulf Province and Western Province Immunisation Patrol coverage is increasing as collaboration continues to grow.

Along with providing child immunisations, YWAM MSA participated in a nationwide Tetanus Toxoid Supplementary Immunisation Activity. Four YWAM MSA outreaches took part in this 'Round 3' campaign, and 2,314 immunisations were administered. Many women presented with yellow cards, indicating that YWAM MSA was providing the third-dose vaccine, while others reported only receiving only one dose previously.

YWAM MSA's newly-acquired vaccine refrigerator ensured a more reliable cold chain and increased immunisation storage capacity for the 2013 outreach season.

Lessons Learned: It is good practice to err towards overestimating vaccine stock, especially early in an outreach season. There is capacity to well maintain stock in the on board vaccine fridge, while underestimating can mean that immunisation opportunities are missed.

YWAM MSA is in a unique position to assist in supply chain logistics and help fill existing gaps in coverage. Due to the remoteness of the locations visited restocking rural supply depots is unlikely to interfere with established providers or patrols: YWAM MSA continues to deliberately work to complement existing services.

CH 2: Provide child nutritional assessments

Background: WHO regards assessment of nutritional status and feeding counselling as basic interventions at first level health services. 4 YWAM MSA uses growth charting as a prompt to standardise the assessment of child nutrition, growth and development. Coupled with education and intervention where indicated, this goal is designed to help improve child nutrition in accordance with the PNG National Health Plan (Objective 4.4.)

Target: Provide 200 child nutritional assessments per outreach.

Outcome: Mean number of children provided with nutritional assessments per outreach: 263 (range 75 – 503)

Throughout the 2013 outreach season YWAM MSA provided 1,838 healthy child checks, which included nutritional assessments. Targets were exceeded and YWAM MSA is pleased with the services that were provided.

Focus: Health Promotion and Community Empowerment

CH 3: Provide child health focused education

Background: Ensuring the healthy growth and development of children is regarded as a prime concern for WHO. Newborns are particularly susceptible and children are vulnerable to malnutrition and infectious diseases, many of which can be effectively prevented or treated. YWAM MSA recognizes that education is a key to prevention.

Target: Equip communities by providing child health education to 100 community members per outreach.

Outcome: Mean average of community members per outreach that received child health education: 886 (range 168 – 1,720)

N.B.: This is an aggregated figure of attendees at child education sessions. The same individuals may have attended multiple sessions.

Child health education was a main focus of primary healthcare teams during the 2013 outreach season. In most locations visited, child health education was specifically requested. YWAM MSA exponentially surpassed target numbers and, throughout the areas visited, saturation in child health awareness has taken place. Particular topics of focus included "Knowing When Your Child is Sick," "Weaning Foods for Your Baby," "Nutrition," "General Hygiene," and "Hand and Body Washing."

Education was often conducted alongside the primary healthcare clinic and incorporated both waiting patients and other community members. Further education sessions took place in schools (focusing primarily on hygiene) and often enabled YWAM MSA to deliver soap and other hygiene resources, sparking children's interest and understanding while promoting the importance of healthy living.

A Chance at Life

Baby Naomi didn't come into this world seamlessly. While the Ship was in Emeti village, midwives on board were called to help with a delivery that wasn't going well.

Mum, Joycie, had several complications but the team was able to assist her in the final stages of birth. When baby Naomi finally came, she was limp; not breathing and no heartbeat.

The midwives worked on resuscitating her and prayed for a miracle. Several minutes later she was breathing and several more seconds passed before they heard a cry!

Childbirth continues to carry great risk for the women (and their babies) of the remote regions in Papua New Guinea where there is little access to medical help if something goes wrong. Joycie has already delivered one son who was lost in childbirth; thankfully, her baby girl's story has a different ending.





4.4 Malaria (ML)

Focus: Collaborative Service Provision

ML 1: Support malaria treatment services

Background: Ninety-four percent of the PNG population live in areas classified as having high transmission rates of malaria (≥1 case per 1,000 population). In many areas, case rates exceed 100 per 1,000 population.⁴ Malaria remains a leading cause of death in PNG, especially for children less than five years old.²

Target: Primary healthcare clinics serve 720 patients per outreach (including patients presenting with fever work-up.)

Outcome: Mean number of patients seen per outreach: 1,278 (range 851 – 3,021)

Target patient numbers were exceeded on every outreach throughout the 2013 season. YWAM MSA was greatly encouraged to find a drastic decrease in patients presenting with malaria. These statistics fall in line with WHO's projected case incidence decrease of <50% by the year 2015.

ML 2: Add capacity to rural distribution networks

Background: Use of long-lasting insecticidal nets (LLIN) is a key evidence-based intervention to reduce the incidence of malaria.⁵ YWAM MSA, in partnership with Rotarians Against Malaria (RAM) and Buzz Off Campaign, provides

strategic capacity to deliver nets and associated training to isolated rural communities.

Target: Deliver 200 LLIN per outreach.

Outcome: Mean number of LLIN distributed per outreach: 513 (range 0 – 2,239)

YWAM MSA partnered with RAM as well as Buzz Off and was privileged to assist with remote delivery of nets provided by these organisations. Through the first five outreaches of the year, nets were provided by RAM and delivered inline per guidelines, specifically targeting pregnant women.

During outreach six and seven in the Western Province YWAM MSA undertook a wide scale distribution campaign and provided nets to every family in the villages that were visited as well as many of the surrounding areas. In Daru, nets were distributed to the majority of the settlements on the island. Furthermore, YWAM MSA was able to provide nets for each hospital bed at the Daru General Hospital as well as for some of the staff who were in need.

LLIN distribution was a major success of the 2013 outreach season.

Lessons Learned: There is an immense need for LLINs across PNG. YWAM MSA again was made aware of the incredible need for such distribution and reminded how

desired such services are. With this in mind, incredible wisdom is needed in regards to distribution, and thorough research and clear communication is vital in order for ongoing success to be achieved.

Target: Deliver 350 Rapid Diagnostic Tests (RDT's) per outreach

Outcome: Mean number of RDTs delivered per outreach: 317 (range 0 – 1000)

RDTs were delivered throughout the 2013 outreach season to Aid Posts, Hospitals, CHW's, and other health care workers who were in need of such supplies and were in a position to utilise them effectively.

Focus: Health Promotion and Community Empowerment

Background: See also ML 1.1. Empowering communities to break malaria transmission through delivering quality health education is a driving force of anti-malarial programmes worldwide.5 YWAM MSA is committed to taking every opportunity during outreaches to reach communities with malaria prevention education.

ML 3: Equip and empower communities by providing malaria education

Target: Provide malaria prevention education to 300 community members per outreach.

Outcome: Mean number of community members receiving malaria prevention education per outreach: 131 (range 15-400)

Preventative education is a key to sustainable development and regarded as highly valuable by YWAM MSA. Various villages visited throughout the 2013 outreach season had been visited in the past by YWAM MSA. Many community members had received malaria prevention education during these previous visits. Upon returning this year, many village leaders requested that education focus be shifted to topics their communities were less familiar with. Taking this into account malaria prevention education numbers were below target for the 2013 outreach season.

See PHC 2 for further information on community educational programmes.

Focus: Health Workforce Capacity Building

ML 4: Strengthen workforce through malaria-focused professional development

Target: Provide malaria-focused professional development training for five local health workers per outreach.

Outcome: Mean average of local health workers receiving malaria-focused professional development per outreach: 2 (range 0 - 8)

YWAM MSA was encouraged to find that throughout the Gulf and Western Provinces, not only is the instance of malaria decreasing, but the knowledge of health workers continues to increase. In contrast, YWAM MSA encountered numerous cases in 2012 in which remote health workers had received new RDT kits, but these new supplies were sitting unopened, as health workers had not been trained in their use or relevant procedures. Therefore, became a major focus for YWAM MSA throughout 2012. Returning to many of these same villages in 2013, it was found that the training YWAM MSA had delivered in 2012 continued to be implemented and applied.

Malaria-focused professional development continued throughout the 2013 outreach season, and YWAM MSA was pleased to find that urgent demand for up-skilling in this area had decreased because of what had been accomplished in previous years.

- ¹ World Health Organisation, "Country Profile Papua New Guinea," 2012. Available: http://www.who.int/gho/countries/png.pdf [Oct2012]
- ² Government of Papua New Guinea, "National Health Plan 2011-2020," Chapter 3 "State of Our Health," 2010.
- ³ United Nations, "Millennium Development Goals." Available: http://www.un.org/millenniumgoals/ [Oct 2012]
- ⁴ World Health Organisation, "PNG Country Profile: World Malaria Report 2012." Available: www.who.int/malaria/publications/country-profiles/profiles_png_en.pdf
- World Health Organisation, "Community Based Reduction of Malaria Transmission," 2012. ISBN: 9789241502719

4.5 Tuberculosis (TB)

Focus: Collaborative Service Provision

Background: Tuberculosis is a major cause of morbidity and mortality in PNG. Excluding obstetrics, TB uses more in-patient bed resources than any other disease.² In 2010, prevalence was estimated at 465 cases per 100, 000 population (WHO WPR estimate of 139 cases per 100,000.)1 Co-existence with HIV and the emerging threat of multi-drug resistance (MDR) are major concerns.² A November 2010 WHO report on PNG's progress toward commitments under the Stop TB programme, described the situation as "an emerging health emergency". This was principally due to concern regarding large disease burden coupled with rising MDR as well as poor laboratory and technical capacity to support treatment. YWAM MSA plans to assist Gulf and Western Provincial Health Administration to deliver quality diagnostic services to isolated communities currently receiving limited, if any, services in this area. Where possible, HIV testing (VCT) will be offered in conjunction with TB tests.

TB 1: Support Tuberculosis Laboratory Services

Target: Provide Mobile TB testing (via Xpert MDG/RIF unit) to isolated communities in the Gulf and Western Provinces.

Outcome: The target was not achieved during the 2013 outreach season as YWAM MSA was not able to secure funding for this initiative.

TB 2: Support Tuberculosis Supply Chain Logistics

Background: Over 85% of the population live in rural areas of PNG, many of which are hard to access and very remote from central medication depots, which makes supply chain management difficult. YWAM MSA has strategic capacity to provide reliable medication delivery, including TB medication, to these areas.

Target: Deliver TB Medication to rural health centres (as directed by PNG NDoH.)

Outcome: YWAM MSA delivered 1,932 courses of TB Medication to Kapuna Hospital in the Gulf Province during the 2013 outreach season.

Focus: Health Promotion and Community Empowerment

TB 3: Equip communities through TB focused education

Target: Provide TB education to 100 community members per outreach.

Outcome: The mean number of community members receiving TB education per outreach: 40 (range 0-193)

In order to align with PNG national TB educational standards, YWAM MSA partners with on-the-ground organisations and training guidelines. YWAM MSA was not able to secure this meeting before the 2013 outreach season began; therefore TB education promotion was delayed awaiting this training and the accompanying educational tools. All areas of YWAM MSA's TB program remain under development.

Focus: Health Workforce Capacity Building

TB 4: Strengthen workforce through TB training services

Background: Goals three and five of the six-point WHO Stop TB strategy are to strengthen the primary healthcare system and empower people to foster quality TB care within their communities.

YWAM MSA is committed to collaborating with various partners in PNG to strengthen local health services and provide training in remote settings to help achieve Stop TB strategic goals.

Target: Facilitate certification of five PNG nationals as TB support workers over the 2013 outreach season.

Outcome: YWAM MSA is in active communication with World Vision and PNG's NDoH in regards to receiving the training needed to certify such workers. YWAM MSA's TB programme remains under development. Training of TB support workers is yet to commence, though throughout the 2013 outreach season significant developments were made towards this goal.

Tuberculosis and Two

Justin, a precious two-year-old boy from Naharomere, was diagnosed with Tuberculosis (TB). When the team from the YWAM Medical Ship saw him, his health was rapidly decreasing. Justin had taken his first round of medication, but because his mother, a widow with three other children, could not take him to Kapuna Hospital, he was unable to get the much-needed second dose. This meant Justin was again contagious and in danger of developing a resistance to the medicine. This was a great opportunity for the team to discuss with the village leaders the importance of working together to control TB within the village. The YWAM team arranged to take Justin and his mother to the hospital in Kapuna. Shortly after, the medical team was able to see Justin and his mother on the following outreach. Justin is now back on his medicine and again has a smile on his face!



¹ World Health Organisation, "Country Profile – Papua New Guinea", 2012. Available: http://www.who.int/gho/countries/png.pdf [Oct2012]

² Government of Papua New Guinea, "National Health Plan 2011-2020", Chapter 3 "State of Our Health", 2010.

³ Integrated Regional Information Networks (IRIN), "PNG – MDR an emerging 'health emergency'", Available: http://www.irinnews.org/Report/91096 [Oct 2012].

⁴ World Health Organisation, "The STOP TB Strategy" 2006. WHO/HTM/ TB/2006.368



4.6 Lymphatic Filariasis (LF)

Background: According to WHO classifications, LF is a neglected tropical disease and the second most common cause of chronic disability worldwide (principally through physical impairment and the social stigmatisation of massive lymphoedema and scrotal hydrocele).¹ The disease is endemic in PNG with a prevalence thought to be among the highest in the world.² Eradication is possible through a systemic approach with at least 65% of the population in an affected area treated with appropriate medication annually for five years. Currently, this target is not being met in PNG.¹ YWAM MSA is partnering with Provincial and National Health Administration to support service delivery by supplying human resources, training and health promotion activities, and innovative transport solutions to access isolated populations.

Focus: Collaborative Service Provision

LF 1: Support Provincial Administration health authorities LF program

Target: Administer LF Mass Drug Administration (MDA) resulting in 65% of Kerema Town receiving these services throughout the 2013 outreach season.

LF 2: Support LF supply chain logistics

Target: Deliver LF MDA to isolated villages via trekking teams (as directed by PNG NDoH) with aim of 65% coverage of villages visited.

Focus: Health Promotion and Community Empowerment

LF 3: Provide LF health promotions

Target: Provide health promotion to Kerema Town residents en masse via open air market presentations (in association with local radio campaign.)

Focus: Health Workforce Capacity Building

LF 4: Provide LF workforce strengthening

Target: Provide training services for ten local health workers to gain certification in LF MDA throughout the 2013 outreach season.

LF Overall Outcome: The YWAM MSA LF program remains under development and has yet to commence.

Throughout the 2013 outreach season, significant developments were made towards implementation. YWAM MSA joined the NTD TWG (Neglected Tropical Disease Technical Working Group) aimed at strategic collaboration in regards to LF MDA in PNG. The NTD TWG sourced and secured medication for PNG through the WHO FHI (Family Health International). Furthermore, the Gulf Provincial Government added LF MDA to their 2014 Annual Implantation Plan and formally expressed their interest to the Department of Health making LF MDA a heightened priority.

The next step is for NDoH, Gulf Provincial Government, and James Cook University to undertake base line research and surveys before starting MDA. This proposal is currently with the PNG Ethics Committee. Once approval has been granted, YWAM MSA will collaborate with Gulf Provincial Government and other strategic partnerships to clarify implementation strategies.

- ¹ Department of Neglected Tropical Diseases, "Global Program to Eliminate Lymphatic Filarisasis: progress report 2011," World Helath Organisation. Available http://www.who.int/wer/2012/REH_37.pdf [Oct 2012].
- ² Bockarie et al, "Lymphatic filariasis in PNG: prospects for elimination," Med Microbiol Immunol 2003;192(1):9-14.



4.7 HIV/AIDS (HIV)

Focus: Collaborative Service Provision

HIV 1: Support HIV Testing Services

Background: PNG has been classified as having one of the most severe HIV/AIDS epidemics in the Asia-Pacific sub-regions. YWAM MSA is collaborating with local health workers and government authorities to see this issue addressed and improved. The spread of HIV in PNG is fuelled by various contributing factors and influences including: early sexual debuts; multiple premarital and extramarital sexual partners; the high prevalence of transactional sex; and the sharing of needles in both tribal practices as well as in correlation with the growing use of recreational drugs.

YWAM MSA is collaborating with NDoH to provide services that will help to meet KRA 6, Objective 6.3 of the National Health Plan (2011-2020.)

Target: Provide Voluntary Counselling and Testing (VCT) in conjunction with the onboard TB testing program to isolated communities in the Gulf and Western Provinces.

Outcome: YWAM MSA's HIV/AIDS initiative has continued to be under development throughout the 2013 outreach season. VCT has not commenced to date and as recommended by NDoH, YWAM MSA will now be working towards Provider Initiated Counselling and Testing (PICT) in place of VCT as development continues.

Partnerships with the NDoH continue to strengthen, and in 2014, anticipated collaboration with the National AIDS Counsel will help to propel this initiative.

Focus: Health Promotion and Community Empowerment

HIV 2: Empower communities to improve health status through education

Background: YWAM MSA is partnering with the NDoH in correlation with the PNG National HIV and AIDS Strategy 2011-2015, Priority Area 1: Prevention aims to reduce the transmission of HIV and STIs in PNG using a combination of prevention approaches. Across PNG, especially in rural and isolated communities, awareness and education is lacking. YWAM MSA's health promotion initiative aims to meet this current deficit and empower individuals and communities.

Target: Equip communities by providing HIV/AIDS education to 100 community members per outreach.

Outcome: Mean average number of community members receiving HIV/AIDS education per outreach: 85 (range 0-262)

Throughout 2013, HIV/AIDS teaching was presented in combination with general hygiene teaching in many high schools across the Gulf and Western Provinces. Further education took place alongside the PHC clinic. YWAM MSA's HIV/AIDS teaching was presented within the framework of the National HIV/AIDS Strategy.

During the 2013 outreach season, YWAM MSA also strengthened initiatives focused on educating men in rural settings. Teachings on HIV/AIDS, as well other STIs, and issues of domestic violence, were presented alongside training and up-skilling in outboard motor, generator, and water sanitation. Coupling practical hands-on training with health education proved successful and generated much interaction and engagement for the men in attendance.



4.8 Optometry (OPT)

OPT Goal: Reduce low vision and prevent the risk of avoidable blindness

Background: Almost 30% of the population of PNG over the age of 50 are visually impaired and close to 10% are functionally blind. Refractive error was the most frequent cause of vision impairment (45.7%) in eyes examined. "The identification and treatment of refractive error and cataracts need to be priorities for eye health services in Papua New Guinea if the burden of vision impairment and blindness is to be diminished." Across PNG, there are seven functioning eye clinics, the majority of which lack sufficient stocks of surgery supplies or prescription glasses.²

PNG is close to the equator and many live in coastal regions where sun exposure is high. Ultraviolet (UV) radiation causes acute and chronic damage to the eyes. This can be prevented by wearing protective eyewear (sunglasses.) ³ Chronic effects of UV radiation include cataracts and pterygia.

Focus: Collaborative Service Provision

OPT 1: Provide corrective glasses

Target: Provide 270 pairs of corrective glasses per outreach.

Outcome: Mean number of corrective glasses provided each outreach: 401 (range 107 – 910)

Providing sight through spectacle distribution continued to be a highlight for YWAM MSA throughout the 2013 outreach season. With the motto "I WANT TO LIVE" and the goal of seeing Papua New Guineans living life to their fullest potential, spectacle distribution continues to be a major focus for YWAM MSA. With a total of 2,406 pairs of corrective glasses provided throughout the season, there are just as many stories of renewed life, youth, and sight. The story of Aaron*, a little boy who captured the heart of YWAM MSA's optometry team, is just one of so many successes. His story can be read on page 60.)

Target distribution goals were met on all but two of this year's outreaches. During outreach one in the Gulf Province, the Ship returned to some villages for a fourth year in a row. It was found that there were fewer individuals visiting the optometry clinic due to the fact that many optical needs had been met in years past. This was highlighted even more in villages with smaller populations.

On outreach six in the Bamu River region where there was greater poverty, YWAM MSA found that there were fewer elderly residents (e.g. over age 50) and therefore, fewer needs for vision correction. All presenting patients who would benefit from corrective glasses were provided for.

YWAM MSA greatly exceeded this target for the other four outreaches of the year. The greater populous of people in Port Moresby, Kapuna, and Daru, coupled with a greater understanding of the benefits of vision correction in these more urbanised areas, increased patient numbers dramatically.

Lessons Learned: It was observed in some of the more remote locations traditional customs were observed with men presenting to the clinic first. It was only after noting this, and deliberately extending the invitation to women as well, that YWAM MSA was able to service the needs of all.

OPT 2: Provide UV-protective sunglasses

Target: Provide 100 pairs of UV-protective sunglasses per outreach.

Outcome: Mean number of UV-protective sunglasses distributed per outreach: 173 (range 83 – 386)

YWAM MSA was able to distribute more than the target number of sunglasses on four of the six optometry outreaches during the 2013 outreach season. Due to available numbers of supplies, sunglasses were distributed primarily to individuals who already had signs of chronic UV radiation effects to the eyes, i.e. pterygia, cataracts. The lower patient numbers on two outreaches in 2013 decreased numbers presenting with chronic effects, and therefore targets were not met on these two outreaches.

OPT 3: Provide vision assessments

Target: Conduct 360 Vision Assessments per outreach.

Outcome: Mean number of Vision Assessments conducted per outreach: 547 (range 187 - 1,072)

Overall, YWAM MSA met this target and is pleased to report that 3,280 visual assessments were conducted.

It was not reached on two outreaches because of a lower number of presenting patients due to differing circumstances. (See OPT 1, as the same circumstances apply for OPT 3.)

YWAM MSA's outcomes for optometry align with KRA 1: Improve Service Delivery, KRA 2: Strengthen Partnerships and Coordination with Stakeholders, and KRA 3: Strengthen Health Systems with respect to the PNG National Health Plan 2011 - 2020.

OPT 4: Provide ophthalmic referrals

Target: Identify and refer ten ophthalmic patients per outreach.

Outcome: Mean number of ophthalmic referrals per outreach, excluding outreach 6 (see Lessons Learned below for extenuating circumstances): 61 (range 25-123)

The target was met and greatly exceeded on all optometry outreaches of the year except for outreach six. During outreaches three and seven, when YWAM MSA's ophthalmic team was working alongside the optometry team, referrals became a large responsibility, and much of the team's efforts went into triaging and referring operable patients.

Lessons Learned: During outreach six in the Bamu Region, it was found that patients had no viable means of transport to reach Daru where the ophthalmic team was to set up the following outreach. During the 2012 outreach season, referrals were made when appropriate in hopes that transport could be arranged. No referred patients from the Bamu Region presented in Daru in 2012. During the 2013 outreach season, bearing in mind lessons learned from the previous year, each patient's access to transport was assessed before referrals were made. Very few felt the journey was viable, and in these cases, acute care was provided where possible instead of referring. Potential referral numbers were tracked and YWAM MSA is actively looking into how the ophthalmic needs of the Bamu Region can be addressed.



Advancing Optometry in PNG

Amoko and Mailau are two community health workers at Kapuna Hospital. When the Ship sailed to Kapuna and met them, they were ready and willing to do something about the problems surrounding eyesight in the region.

Amoko and Mailau went through a training session with the optometry clinic leader, and then worked alongside the Ship's optometry team, providing optical services to three villages throughout the Baimaru District.

After working with the team for one week, Amoko and Mailau were given an I-SEE kit so that they could continue to provide optical services at Kapuna hospital and alongside the hospital patrol teams.

'I see my people with their eye problems and I want to help them live better. Passing on training to us has been good because we can carry on helping them when you have gone and even get to places the Ship cannot get to', Mailau said.

Focus: Health Promotion and Community Empowerment

OPT 5: Promote eye health education

Target: Provide eye health education to 360 community members per outreach.

Outcome: YWAM MSA's eye health education is still under development and no formal education was presented throughout the 2013 outreach season.

Most optometry patients presenting at the clinic received informal eye health education as well as spectacle-care teaching. YWAM MSA aims to expand preventative eye health education in order to greater empower the communities.

Lessons Learned: YWAM MSA sees many individuals that work at the local sawmills as well as significant numbers who have sustained eye injuries due to domestic violence and fights. There is a need to develop additional eye health promotion that aligns with the PNG National Eye Plan 2011 – 2015. This eye health education can include warnings about the risk of trauma, fights, domestic violence, lime burn, and the need for eye protection in the workplace.

Focus: Health Workforce Capacity Building

OPT 6: Provide training and delivery of I-SEE Units

Target: Provide associated training and delivery of eight I-SEE Units throughout the 2013 outreach season.

Outcome: I-SEE Units and associated training provided throughout 2013 outreach season: 2

YWAM MSA delivered the innovative I-SEE programme for the second year this 2013 outreach season. The I-SEE programme includes a short training DVD that educates the user how to assess an individual's visual acuity for

distance and reading vision. Using a 'lens ladder' with varying prescriptions of glasses, a layperson is then able to assess an individual's vision and proceed to dispense the appropriate pair of glasses. The I-SEE kit includes several hundred pairs of predetermined prescription and reading glasses for dispensing.

Throughout the 2013 outreach season, YWAM MSA identified and established relationship with two organisations who were positioned to be able to take on responsibility for an I-SEE kit and implement its use to full capacity. One unit was delivered to Kapuna Hospital and three CHW's were equipped and trained. These individuals have been empowered with both the skills and equipment needed to continue to provide visual assessments and corrective lens services. Another unit was gifted to Living Light Ministries Clinic where three individuals were trained and equipped in use and delivery.

During the 2012 outreach season I-SEE Kits were trialled and 2013 is the first year that YWAM MSA has been involved in distribution. Success and further implementation strategies will be based upon Kapuna and Living Light Ministries developing initiatives.

N.B.: Throughout the 2013 outreach season YWAM MSA strengthened an ongoing partnership with PNG Eyecare/Brien Holden Institute. During outreaches four and five, refraction workers from PNG Eyecare joined YWAM MSA in clinical service.

- ¹ National Prevention of Blindness Committee, "PNG National Eye Plan 2011 2015," 2011.
- ² Integrated Regional Information Networks (IRIN), "PNG Poor eye care worsens rural suffering." Available: http://irinnews.org/Report/95005 [Oct 2012].
- ³ World Health Organization, "Ultraviolet radiation and human health," 2009. Available: http://www.who.int/mediacentre/factsheets/fs305/en/index.html [Oct 2012].



Going the Extra Mile

Mark* brought his 7-year-old grandson, Aaron* to the optometry clinic for a vision test. He had vision problems from age three, and as they tested his sight, realized that there might not be a pair of glasses strong enough for Aaron.

A temporary pair was given to Aaron until volunteer Optical Dispenser, Warren Stark, could get back to Australia and specially make a pair that would be a strong enough prescription. He even fitted Aaron with child frames from the clinic, and took them back to use for the lenses!

Aaron has gone from seeing clearly only about 30 centimetres in front of him, to having a bright new world open all around him.

*names changed for privacy



4.9 Ophthalmology (OPH)

OPH Goal: Restore and enhance sight

Background: The prevalence of blindness and visual impairment in PNG is high. An estimated 146,000 people over the age of 50 are visually impaired, and 44,000 of these people are blind.¹

Cataract surgery has virtually eliminated cataract blindness in the developed world. However, in the economically developing areas of the world, it is a staggering and escalating problem and a leading cause of blindness. Modern cataract surgery with intraocular lens implantation has been shown to be a safe and effective means of restoring visual function and improving vision-related quality of life,² As there are no known effective means of preventing the most common forms of cataract, access to surgery is vital to addressing the scourge of cataract blindness.³

YWAM MSA's outcomes for ophthalmology align with WHO Key Result Areas: Improve Service Delivery, Strengthen Partnerships and Coordination with Stakeholders, and Strengthen Health Systems, with respect to the PNG National Health Plan 2011-2020.

Focus: Collaborative Service Provision

OPH 1: Provide cataract and pterygium surgery.

Target: Restore and enhance sight by providing ophthalmology procedures to 54 individuals during the 2013 outreach season.

Outcome: Ophthalmology procedures provided during the 2013 outreach season: 108

Ophthalmology Procedures:

Cataract surgery 84
Pterygium surgery 16
Other surgery 8

Other Achievements:

Consults with no surgery

YWAM MSA had a successful year in the delivery of ophthalmic services. More patients were seen than in years previously, team moral was high, and patients continued to be extremely grateful for these highly specialized services that YWAM MSA provided.

Ophthalmology clinics ran during outreaches three and seven, the last outreaches of the year in the Gulf and Western Provinces respectively. This enabled our optometry and primary healthcare clinics to spend the prior two outreaches referring patients and beginning to set up case loads for the ophthalmology team. Even so, the first few days in both the Gulf and Western Provinces were slower than expected.

In the Gulf Province, during outreach three, the clinic was set up at Kikori Hospital and ran smoothly and successfully. YWAM MSA sent a Zodiac with a small team out to surrounding villages to triage and refer patients in order to maximize the team's efforts. A large number of the patients that presented had complex cases and surgeries took longer than expected. Overall the team operated on 37 patients. In the future, referral guidelines will be implemented to help the team concentrate their efforts.

Having a very skilled optometrist, as well as a highly qualified team, enabled the clinic to function very efficiently during outreach seven in the Western Province. Further triage and referral teams were sent into the settlements, and follow-up on Callan's Services' previous referrals drastically increased presenting patient numbers. This was a very busy outreach for the team and some wonderful life-changing stories emerged from the commitment and service of YWAM MSA. (See Makasi's story p.70)

Prior to the 2013 outreach season YWAM MSA obtained ownership of an OcuScan® RxP Ophthalmic Ultrasound System and the loan of a portable vitrector. The Ultrasound System provided enhanced patient care and the vitrector assured volunteer ophthalmologists peace of mind in surgery. These upgrades assisted YWAM MSA in meeting and greatly exceeding operational targets during the 2013 outreach season.

Lessons Learned: Communication and preparation are values of YWAM MSA and vital to the success of each outreach. With this in mind, along with preparing team member and needed supplies, greater emphasis needs to be placed on ensuring that patients are aware of the teams presence and arrive at clinics in a timely manner. Sending a preliminary scouting team would help to maximize capacity, and having a highly skilled optometrist or orthoptist enables teams to function more efficiently.

Focus: Health Promotion and Community Empowerment

OPH2: Provide eye health education.

Target: Equip communities by providing eye health education to 54 recipients during the 2013 outreach season.

Outcome: Eye health education was provided to 138 individuals.

YWAM MSA greatly exceeded target numbers throughout the 2013 outreach season. Every patient who presented during outreach three received eye education and all who received surgery during outreach seven were educated.

Lessons Learned: Not all forms of visual impairment can be corrected through surgery. Education is key to empowerment and even in cases where visual improvement cannot be obtained, simply gaining understanding can relieve the stress of visual impairment.

Focus: Health Workforce Capacity Building

OPH 3: Strengthen workforce through professional development.

Target: Provide training to two PNG national ophthalmic doctors during the 2013 outreach season.

Outcome: This target was not reached during the 2013 outreach season. During outreach three in Kikori,

YWAM MSA provided valuable experience and exposure to Amoko Ivaa, a CHW from Kapuna. Mr Ivaa has a particular interest in optical health and was trained and equipped with an I-SEE unit during outreach two by YWAM MSA in Kapuna. The team then invited him to join the ophthalmology team for the duration of the following outreach for further up-skilling and experience.

During outreach seven, YWAM MSA had a registered RANZCO trainer as part of the ophthalmic team. PNG national ophthalmic registrars in training were invited, but during this particular outreach, they were all unavailable as they were preparing for exams. The service registrars were not at the stage to benefit from surgical training yet. Trained ophthalmologists were also pursued with the intent of YWAM MSA providing sought-after up-skilling; however, none were able to get away from their busy workloads for the duration of the outreach.

Lessons Learned: The availability of ophthalmic registrars and trained ophthalmologists for outreach must be established and considered in the planning stages of ophthalmic outreaches. With the exceptionally flexible nature of Papua New Guinea it is difficult to solidify such availability. YWAM MSA is actively working to liaise with such personnel for the 2014 outreach season. Relationships with the National Prevention of Blindness Committee were strengthened during the 2013 outreach season and will be called upon to help in finding ophthalmic registrars for next year.

In light of the successful achievement of receiving the Excellence in Ophthalmology Vision Award (XOVA) funding, up-skilling ophthalmologists will be a major focus of YWAM MSA throughout the 2014 outreach season.

¹ National Prevention of Blindness Committee, "PNG National Eye Plan. 2011 - 2015," 2011.

² Khadem, M. "Outcomes of cataract surgery: implications for the developing world." J Med Syst. 1999;23(4):281-9.

³ World Health Organization, "Vision 2020 The Right to Sight: Global Initiative for the elimination of avoidable blindness. Action Plan 2006 – 2011," 2007. Available: http://www.who.int/blindness/Vision2020_report. pdf. [Oct 2012]







Makasi a 27-year-old mother of three, was one of 65 patients who received a collective 71 eye surgeries at Daru hospital over the two weeks that the Medical Ship was in Daru.

The outreach was part of the fourth year of health and training service delivery in Papua New Guinea, helping to restore sight and improve quality of life.

Makasi had presumed congenital cataracts, a clouding of the lens that is present at birth, and had caused her eyesight to deteriorate throughout her life. She became blind ten years ago at age 17.

Makasi's husband, Wiesa, did the gardening, made sago, fished, and took care of the children while she remained house-bound, unable to provide for their family.

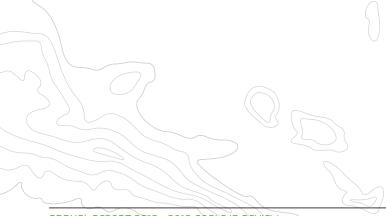
The couple paddled for two weeks by canoe with their children (ages 5, 3 and 1) from their village in the South Fly, Orio, to meet the Medical Ship in Daru to have her eyes tested.

When the Ship's team first met Makasi, she could not see a hand waving one metre in front of her, let alone an eye chart.

The Ship's optometrist, Julie Jones, volunteering from New Zealand, recalls meeting the woman, "When Makasi walked in the room, she had to be led in by her husband. Her eyes were downcast and her face was expressionless. When we asked her to sit down, she had to put her hand out to feel where the chair was."

After undergoing testing, the Ship's ophthalmic team concluded that Makasi was a surgical candidate. The two 30-minute procedures to remove cataracts from both eyes produced immediate results and Makasi saw her three children for the first time in her life. "When Makasi came in the day after her surgery for post-op, she was a completely different person. She didn't need anyone to guide her around the room; she was independent and engaged, and could see almost to the bottom of the eye chart!" said Julie.

Makasi is just 1 of 84 patients that recieved cataract surgery in 2013.





4.10 Dentistry (DEN)

DEN Goal: Improve Oral Health

Background: The incidence of oral disease in PNG remains incredibly high and continues to worsen. According to the PNG National Health Plan 2001- 2010, a large percentage of teenage children have dental cavities. PNG has a shortage of dentists as well as a lack of job opportunities for those who go through dental training. This, coupled with lack of education, awareness, and access to oral health care increases the incidence of oral disease.¹

Oral health is essential to overall quality of life. The freedom from oral pain, disease, and decay severely enhance an individual's wellbeing.²

Addressing common risk factors of oral disease can decrease the burden of illness. Preventative measures include:

- Decreasing sugar intake and maintaining a well balanced diet
- Stopping tobacco use
- Decreasing alcohol consumption
- Maintaining oral hygiene ²

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Focus: Collaborative Service Provision

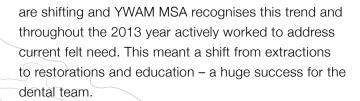
DEN 1: Provide dental clinic services

Target: Provide dental clinic services to 230 people per outreach.

	Average (range)	lotal
Individuals treated	296 (179 - 426)	2,072
Extractions	322 (109 - 515)	2,252
Restorations	134 (83 - 520)	939
Cleanings/check ups	32 (5 - 111)	223
Other Procedures	52 (10 - 115)	361
Total Dental Procedures	539 (365 - 630)	3,775

The target was met on all but two outreaches. The Port Moresby outreach; mainly because this outreach was half the length of the other outreaches of the year; and due to the team's lack of experience which reduced the number of patients seen per day during outreach 6 in Western Province.

YWAM MSA was greatly encouraged to observe that oral health in the Gulf Province, has significantly increased in regions that have been serviced the last four years consecutively. The demand for emergency dental care, continues to decrease. In its place, opportunities for restorative work and ongoing preventative oral care are developing. Presenting patients in such regions



In preparation for the 2013 outreach season, YWAM MSA's onboard clinic underwent refurbishment and upgrading. Extra workspace and more efficient storage capacity improved the overall outputs YWAM MSA was able to provide in 2013.

DEN 2: Provide toothbrushes and toothpaste

Target: Provide 230 toothbrushes and 150 toothpaste tubes per outreach.

Outcome: Mean average of toothbrushes provided per outreach: 487 (range: 176 – 1386)

Mean average of toothpaste provided per outreach: 351 (range: 154 – 599)

The toothbrush target was met on all outreaches except outreach four. Toothbrushes were distributed to most dental patients alongside oral hygiene teaching. Further distribution was coupled with education sessions at schools and amongst the community.

The toothpaste target was met on five outreaches this season, which was a wonderful success.

Patients across PNG were delighted to be the recipients of such an initiative.

Focus: Health Promotion and Community Engagement

DEN 3: Provide oral health education

Target: Deliver oral health education to 300 community members per outreach.

Outcome: Mean average of community members receiving oral health education per outreach: 330 (range: 200 – 426) This target was exceeded for all dental outreaches in 2013. Every individual who received treatment from the dentist received one on one oral health education, including a demonstration on how to brush teeth on a model set of teeth. Many patients also received education outlining how to maintain the health of their mouth, gums, and teeth by avoiding foods that promote tooth decay, and how to improve and maintain oral health. This education was often delivered in groups within the local community.

When the opportunity was available on outreach, the dental team would visit local schools to deliver oral health education to students.

After four consecutive years in certain areas of the Gulf Province, the demand for emergency dental care, i.e. extractions, continues to be significantly decreasing. In its place, opportunities for restorative work and ongoing preventative oral care are developing. With this progression, education on the importance of preventative health care needs a greater focus, including how to maintain oral health with local resources when toothbrushes and toothpaste are not available.



Dental Worker Paddles 30 Hours to Receive Training

It was a precious moment when the YWAM MSA team reunited with local dental worker, Jack at Daru Island in the Western Province.

Jack paddled almost 30 hours in his canoe from his village to meet the YWAM Medical Ship at Daru to receive further dental training alongside YWAM MSA's volunteer dentists.

Jack is one of four Community Health Workers in his village and the only one that is offering dental services for his village and the surrounding communities. Jack works from a simple plastic chair, his tools are very few, and his consumables are limited to what he can obtain from the local health centre; yet patients travel for many miles to receive Jack's services.

Jack shares about the oral health challenges in his community, "Many, many people have tooth pain. Often people stop eating or don't sleep because there is too much pain. I do what I can, but I am very limited."

The YWAM team first met Jack during their fifth outreach for the year in the South Fly District where they set up mobile primary health care, optometry, and dentistry clinics in his village, Wasua.

When the YWAM Medical Ship arrived in Jack's village, Jack was eager to jump onboard and see the dental clinic in action. It had been over 20 years since he had even met another dental worker, let alone receive further training or work in a proper dental clinic.

Jack spent one day onboard the ship's dental clinic where he observed restoration procedures and performed extractions. The team saw enormous potential in Jack and invited him to join the dental team on Daru Island where the ship would be in four weeks time.

Jack arrived the day after the ship arrived in Daru; eager and willing to help with the hundreds of patients that were waiting to be seen while receiving in-service training from New Zealand dentist, Joo and Papua New Guinean Dentist, Vasity.

"Jack is a rare find in rural PNG, and needs all the extra support, resources and training we can give him to serve the enormous need in his community," share Vasity.

At the end of Jack's two weeks onboard the ship, YWAM MSA gave Jack an Ident kit; a portable solar powered dental chair with basic tools and a drill that all folds into a backpack weighing just 15 kilograms.

The Ident kit will not only allow Jack to improve the services he is providing out of his local health centre, but will also enable him to provide dental services to surrounding communities when the health centre conducts immunisation patrols.

"This chair will allow me to do better work and reach people with the care that they need. I am very happy to receive this gift," shares Jack.

The Oral Health Atlas states that oral health is a worldwide neglected health issue. Papua New Guinea has an extreme shortage of dentists with only 17 working dentists in PNG* currently. This equates to one dentist per 372,412 people. The majority of these dentists are in urban centres, leaving the rural majority with almost no access to dental care.

YWAM MSA is helping to bridge this gap by training and empowering dental workers in rural areas of PNG with the resources and skills they need to deliver services in isolated, remote communities. Jack is the third dental worker in PNG to receive an Ident kit this year.

Focus: Health Workforce Capacity Building

DEN 4: Provide oral healthcare professional development

Target: Provide oral healthcare professional development to five local healthcare workers throughout the 2013 outreach season.

Outcome: Nine PNG nationals received oral healthcare professional development throughout the 2013 outreach season.

As an extension of the capacity building goal from PHC to train local healthcare workers, YWAM MSA took every opportunity to train and up-skill local dental professionals. It was a great achievement to have been able to reach this target and connect with dental workers on every outreach throughout the 2013 outreach season.

Throughout the year, YWAM MSA hosted six national dentists (or dental therapists) on board. This was the first time that PNG national's contributed to the volunteer professional services provided to this magnitude. On every outreach, nationals worked alongside overseas professionals and a mutual exchange of skills and experience took place. Less formal training was needed as a natural interchange took place. In the area of cultural understanding and language proficiency, national volunteers were invaluable in the smooth proceedings of the clinic. Rural exposure and working alongside international colleges was considered a highly valuable training for these mostly urban based national professionals.

Furthermore, five rural based oral healthcare professionals partnered alongside YWAM MSA throughout the 2013 outreach season (two later joined us on board). This was the fourth year in which the dental team was able to support and up-skill the dental therapist at Kapuna Hospital, Gulf Province. In Wasua, Western Province, the dental team met Jack, a local oral service provider with very little professional experience. Jack joined YWAM MSA's dental team for a day and valued the experience very highly. He was so keen to learn that the team invited him to join them in Daru for the final outreach of the year. (see Jack's story p.74)

DEN 5: Provide training and delivery of I-Dent units

Target: Provide associated training and delivery of eight I-Dent units throughout the 2013 outreach season.

Outcome: Associated training and delivery of five I-Dent units took place throughout the 2013 outreach season.

In order to see the effects of such an innovative tool maximised, I-Dent units were delivered in both the Gulf and Western Provinces as well as the National Capital District. Units were left when YWAM MSA identified individuals and organisations with the capacity to use the Unit to help continue to build capacity in PNG workforce service development and delivery. Five such individuals or organisations were identified throughout the 2013 outreach season.

Units were gifted to dental workers from Kapuna Hospital, Kotingdanga Ministry - That They May Know Him, Port Moresby's - Living Light Ministries, as well as with Jack, a dental worker from Wasua, Western Province, and the Daru General Hospital.

Government of Papua New Guinea, "National Health Plan 2001- 2010.

Program Polices and Strategies Volume II", 2000.

² World Health Organisation, "Oral Health", 2012. Available: http://www. who.int/mediacentre/factsheets/fs318/en/index.html [Oct 2012]



4.11 Engaging Australians (EA)

EA 1: Increase the social consciousness of youth

Background: A snapshot of today's Australian youth shows:1

- 28% of teenagers binge drink on a regular basis
- 37.7% have used illicit drugs
- 48% of females will try extreme weight loss methods
- 1 in 3 will have suffered from depression by age 18
- 10 young Australians commit suicide each week
- Self-harm increased by 50% between 1996 and 2006

Today's Australian youth belong to a generation that understands the plight of the poor and needy. When given the opportunity to respond to injustice, they often do so with incredible passion. Evidence clearly indicates that providing young people with the opportunity to address some of these needs can drastically improve their behaviour and lifestyle.³

Target: Build Australia's capacity to contribute to our region through equipping young people by sending eight Australian teenagers to join LF MDA team in Kerema Town.

Outcome: A group of four teenagers from Townsville travelled to Port Moresby and the Central Province to work alongside YWAM MSA. Due to restrictions regarding LF MDA (See: Goals in Review - Lymphatic Filariasis) the team's focus shifted towards health promotion and

community empowerment. This experience was lifechanging for the youth on the team and upon their return, propelled them to engage in an awareness initiative. The youth shared their experiences at a community youth program and in high schools, using their new perspective to empower others.

Target: Providing education resources to 25 schools in Townsville via a monthly Newspapers In Education programme.

Outcome: Townsville Bulletin's Newspapers in Education (NIE) programme has made an active focus on PNG, the Millennium Development Goals, and the YWAM Medical Ship. In 2013, the programme delivered information to more than 25 schools each month.

Target: Facilitating a Youth Leadership Forum event in Townsville.

Outcome: YWAM MSA took part in NIE's Award Presentation where connections were made with young leaders from North Queensland. Stories from PNG were shared and those in attendance were inspired. During the ceremony YWAM MSA congratulated the youth on their significant involvement in 2013 and shared the need and opportunities to engage in 2014.

Target: Provide Social Media Awareness seminars in five high schools during 2013

Outcome: Social Media Awareness seminars were conducted by YWAM MSA in two schools in North Queensland as well as with a group of youth in Papua New Guinea.

Furthermore, an "I WANT TO LIVE" event was run in Townsville with 540 youth in attendance. The aim of the event was to encourage 'Life to the Full' and a focus on Papua New Guinea and YWAM MSA's efforts were highlighted.

Many schools have also carried out toothbrush, toothpaste, and spectacles drives and fundraisers for YWAM MSA.

EA2: Strengthen the Townsville – Port Moresby sister city relationship

Background: Port Moresby is Townsville's oldest sister city, established in 1983. Since that time, significant economic development has occurred between the two centres with some \$500 million in two-way trade now flowing between the ports. Townsville has many contacts in Port Moresby due to the strong business relationships and close proximity of the two centres (Townsville is closer to Port Moresby than it is to Brisbane.)

Target: Build on sister-city relationships between Townsville and Port Moresby (POM) by Facilitating a week of engagement and collaborative service through a Port Moresby based Ship outreach in 2013.

Outcome: YWAM MSA facilitated a week focused on fostering friendship and understanding, as well as helping to form strategic international partnerships, in Port Moresby in July 2013. The aim was to engage and expose more businessmen, politicians, health professionals, and other individuals from Townsville to the needs in PNG, and to help them understand their role in helping and supporting the nation. As YWAM MSA's long-term presence in both Townsville and PNG is further established, a sense of partnership between Townsville and Port Moresby residents continues to grow and develop.

YWAM MSA had the privilege of taking part in the 30th Anniversary Celebration of the sister city relationship between Townsville and Port Moresby. The ceremony highlighted the importance of Australia and Papua New Guinea working together and commended the strength that has come through this on going friendship.

Townsville delegates included:

- Mayor of Townsville
- Mayor of Charters Towers
- Chair of Sister City Committee
- Manager Development Governance, Infrastructure & Development; and Project Hetura
- Deputy Director, Learning Partnerships
- Principal, Direct Action
- 1300SMILES Managing Director
- Townsville Mater Hospital, Nurse Townsville General Hospital, Midwife
- Chairperson of Presbytery of North Queensland Uniting Church
- Vetta Productions Director of Photography
- 1300SMILES Dental Assistants
- General Volunteers from Townsville and PNG

YWAM MSA is also an active member of the Townsville Sister Cities Forum.

¹ Statistics courtesy of Australian Bureau of Statistics (2001)

² Research courtesy of Community Responding to Eliminating Suicide (Cores)

³ Research courtesy of National Youth Affairs Scheme (2004)



4.12 Financial Report

Profit & Loss - Previous Year Comparison

January through December 2013

Income	Jan - Dec '13	Jan - Dec '12
Volunteers - Gift in Kind	1,876,293	1,712,514
Donations - Gift in Kind	436,592	494,450
Grants & Sponsorship	735,811	439,859
Donations - General	293,410	117,239
Crew Fees	72,409	83,667
Donations - Care Trust Fund	31,865	23,707
Outreach Fees	44,239	31,036
Miscellaneous Income	5,843	12,936
Total Income	3,496,462	2,915,408
Expenses	Jan - Dec '13	Jan - Dec '13
Volunteer Labour	1,876,293	1,712,514
Employee Expenses	38,300	36,489
Ship Expenses	382,262	272,732
Medical Expenses	49,034	253,226
Office/Administration	139,823	116,670
Donations	66,853	96,059
Travel	115,501	75,877
Insurances	60,823	44,550
Other Outreach Costs	114,705	67,066
Depreciation	82,282	48,755
Miscellaneous	64,164	58,268
Advertising/Marketing	10,842	1,558
Total Expenses	3,000,884	2,783,763
Net Income	495,578	131,645







5.1 A New Servicing, Training and Medical Ship for the Southern Region

YWAM MSA's current vessel, the MV *Pacific Link*, now 34 years of age, has reached its optimal lifespan and has extended to the limits of its geographical and programming service capacity. A new vessel will enable YWAM MSA's operations to continue and significantly expand. Acquiring a new Servicing, Training and Medical Ship will exponentially increase YWAM MSA's programming impact, helping to support basic service delivery, build capacity in communities and address some of their current work in the Gulf Province, Western Provinces, and National Capital District. It will also broaden services into the entire southern region, including Milne Bay, Oro, and Central Provinces.



Proposed New Vessel, the MV Ammari

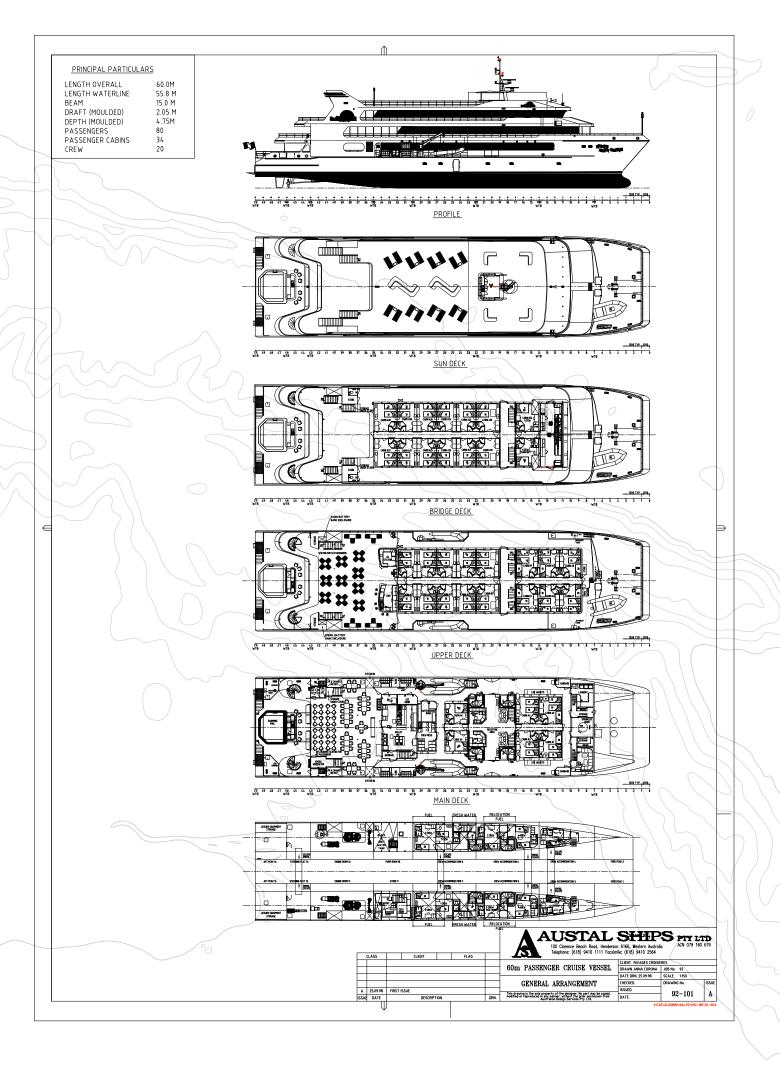
YWAM MSA has conducted thorough research and sought advice from expert naval architects in regard to a new vessel that will suit the extensive river systems and coastal areas in PNG's Southern region.

An aluminium catamaran currently in on the Gold Coast, the MV *Ammari*, has been recommended to be the most suitable for accessing remote coastal communities with training and medical services.

The vessel was built in 1999 and has the capacity to operate year-round due to its improved maintenance profile. Its versatile two metre draft will also provide excellent accessibility to remote villages and improved launching sites for land-based teams.

The vessel will have the following features and capabilities:

- Operating theatre with general anaesthetic capacity
- Dental clinic
- · Outpatient medical/surgical clinic facility
- Medical laboratory
- Full optometry service capacity
- Targeted medical supply transport and distribution capacity
- Lecture room (fully information technology equipped)
- Self-sustaining accommodation for up to 100 people
- Patrol tenders for transportation of patients and teams in the field
- Capacity to facilitate medical survey and research initiatives
- Storage capacity to assist with strengthening supply chain logistics in rural areas





Mother Ship Concept

The new vessel will operate as a 'Mother Ship;' partrol tenders will be deployed from the vessel to operate in different locations within a target area. The team will stay on location for up to a week at a time. As each boat travels to specific areas within the district, operations will be tailored to local goals through partnership with the community. Areas of programming would include:

- Primary health care
- Maternal health services and training
- Child health services and training
- Immunisations
- Optometry
- Dentistry
- Dental and optical worker training
- Lymphatic Filariasis treatment and eradication
- Health promotion seminars
- · Water and sanitation projects including training
- Construction projects including training
- Collegial mentoring and Continuing Professional Development ('in-service') programs for local health professionals.

Through the Mother Ship implementation strategy, it is projected that the equivalent of 24 weeks of development activities will be conducted in each province per annum (based on the Mother Ship deploying four boats per week in each province for 6 weeks per year.).

Progress on Acquiring the New Vessel

YWAM MSA has received strong support from both the Government of PNG and the Provincial Governments in the southern region in regard to the acquisition of the new vessel. In October, the PNG Department of National Planning and Monitoring contributed 4 million PGK toward the new ship.

5.2 Extending into the Southern Region

YWAM MSA has consulted with each Provincial Government in the Southern region in regard to the expansion of YWAM's work in their provinces. The response has been very positive with each Governor extending an invitation to YWAM MSA.

Land Based Assessment Teams

YWAM MSA sent their first teams to Oro and Milne Bay Provinces this year with the aim of building relationship with provincial government authorities, local health providers, maritime authorities, and village leaders while gathering on-the-ground information in preparation for YWAM MSA's expansion into the Southern region.

In Oro Province, 43 villages were surveyed along the province's coastline, and in Milne Bay Province, 7 villages were surveyed in Alotau and Samarai districts.

In 2014, YWAM MSA will continue sending land-based assessment teams to Milne Bay, Central and Oro Provinces.

The information gathered from the teams, including discussions with provincial government authorities, health providers, village leaders and other key stakeholders, will be used to help plan and prepare for YWAM MSA's ongoing work in the Southern region.

Pilot Outreaches in Milne Bay and Oro Provinces

YWAM MSA will be conducting two two-week pilot outreaches in Oro Province and Milne Bay Province in 2014 with the MV *Pacific Link*. During the outreaches, dentistry, primary health care, optometry, and health promotion services will be delivered, as well as ongoing assessments and networking activities. The outreaches will be aimed at raising awareness of YWAM MSA's new ship commencing operations in Milne Bay and Oro Provinces in 2015, while gathering important information in respect to depths, tides, and communities that can be accessed with YWAM's new vessel.

2014 Outreach Dates

	Location	Dates	CE	PHC	DEN	ОРТ ОРН	
1	Western Province	3 April - 20 April	x	x	$\langle \mathbf{x} \rangle$	\mathbf{x}	
2	Western Province	24 April - 11 May	x	x	$\boldsymbol{x} \setminus \langle$	x	
3	Western Province	15 May - 1 June	x	X	x	XX	
4	Gulf Province	12 June - 29 June	X	x	X		
5	Gulf Province	3 July - 20 July	x	x	X		
6	Gulf Province	24 July - 10 August	x	x	x		
7	Port Moresby	16 August - 24 August	x	x	x	\boldsymbol{x}	
8	Oro Province	28 August - 13 September	x	x	x	x	
9	Milne Bay Province	19 September - 5 October	X	X	x	x x	

Legend:

CE - Community Engagement Team; PHC - Primary Health Care Clinic; DEN - Dentistry Clinic; OPT - Optometry Clinic; OPH - Opthalmology Clinic



5.3 Empowering Local Ophthalmologists in Remote Communities

YWAM MSA will be upgrading their ophthalmology program in 2014 to include training initiatives for local ophthalmologists.

YWAM MSA was the proud recipient of the Excellence in Ophthalmology Vision Award or XOVA (pronounced 'zoh-vah',) sponsored by Novartis Pharma and Alcon. This award provides a grant that is intended for medical specialists who have devised initiatives that are expected to have significant impact in unmet needs in the field of ophthalmology and optometry.

The XOVA funding will allow YWAM MSA to strengthen the existing ophthalmic program in which the aims are to restore sight to Papua New Guineans through cataract and pterygia surgeries, and to train and up-skill PNG ophthalmologists and allied health workers to empower them to provide ophthalmic services in their own nation. More specifically, the XOVA funding will allow YWAM MSA to upgrade ophthalmic equipment to add to the longevity of the current ophthalmic program, to purchase training equipment to assist in the training of local PNG ophthalmologists, and to develop training resources.

5.4 Establishing a Training Centre in Port Moresby

As YWAM MSA continues to expand and develop its training, medical and community services, establishing a training centre in Port Moresby is a key component in the strategy.

The combination of a YWAM training centre and the operation of a Servicing, Training and Medical Ship will extend opportunities for quality education, growth of a highly skilled workforce, and strengthening the extension of basic health and education services in rural areas.

YWAM's proposed training centre would be based on live-learn philosophy where students, staff, teachers and families live, eat, study, work, and plan in close proximity for maximised learning and mentoring.

Potential training areas are diverse and may include:

- Clinical healthcare services
- Health promotion and community education
- Health system management
- Mechanical engineering
- Agriculture, horticulture, and fisheries
- Maritime sciences
- Construction
- Communications and media
- Education and linguistics

YWAM MSA has received positive feedback from key stakeholders in regard to the proposal and will be progressing the project further in 2014.





5.5 2014 Goals

Maternal Health

Collaborative Service Provision

Support maternal health services, partnering with local health workers wherever possible to provide:

- 30 women per outreach with comprehensive antenatal checks
- 50 women per outreach with family planning consumables
- Start providing long-acting family planning methods such as the upper arm implant in the 2014 outreach season.

Support supply chain logistics by adding capacity to rural distribution networks delivering:

- 200 family planning consumables per outreach
- 100 birth kits per outreach

Health Promotion and Community Empowerment

Equip communities by providing maternal health education to community members:

- 30 pregnant women per outreach
- 100 maternal health education outputs (including family planning) per outreach

Health Workforce Capacity Building

Workforce strengthening through maternal health focused professional development training provided to:

- 10 local health workers (including traditional birth attendants where appropriate) per outreach
- Run one training session for Provincial Health staff
 with collaboration with NDoH and YWAM MSA for
 health workers on providing long-acting family planning
 methods (arm implants) in the 2014 outreach season

Child Health

Collaborative Service Provision

Support child health services, partnering with local health workers wherever possible to provide:

- 400 child immunisations per outreach
- 200 nutritional assessments per outreach

Health Promotion and Community Empowerment

Equip communities by providing child health focused education to community members:

200 education outcomes achieved per outreach

Health Workforce Capacity Building

Workforce strengthening through child health focused professional development training provided to:

 10 local health workers (including identified community leaders where appropriate) per outreach

Malaria

Collaborative Service Provision

Support supply chain logistics by adding capacity to rural distribution networks delivering:

- 180 long-lasting insecticide-treated nets (LLIN) per outreach
- 250 malaria rapid diagnostic tests (RDTs) per outreach

Health Promotion and Community Empowerment

Equip communities by providing malaria prevention education to community members:

200 education outcomes achieved per outreach

Health Workforce Capacity Building

Workforce strengthening through malaria focused professional development training provided to:

 10 local health workers (including identified community leaders where appropriate) per outreach

Primary Health Care

Collaborative Service Provision

Support primary health care services, partnering with local health workers wherever possible to provide:

Primary health care clinics serving 900 people per outreach

Health Promotion and Community Empowerment

Equip communities by providing primary health care education to community members:

 500 primary health care education outcomes achieved per outreach

Health Workforce Capacity Building

Workforce strengthening through professional development training provided to:

 10 local health workers (including identified community leaders where appropriate) per outreach

Dentistry

Collaborative Service Provision

Support dental services, partnering with local oral health workers wherever possible to provide:

• Dental clinics serving 230 people per outreach

Support supply chain logistics by adding capacity to rural distribution networks delivering:

- 230 toothbrushes per outreach
- 230 tubes of toothpaste per outreach

Health Promotion and Community Empowerment

Equip communities by providing oral health education to community members:

 230 oral health education outcomes achieved per outreach

Health Workforce Capacity Building

Workforce strengthening through oral health care professional development training provided to:

• 8 PNG oral health care workers per outreach season.

Optometry

Collaborative Service Provision

Support optometry services, partnering with local workers wherever possible to provide:

- 250 vision assessments per optometry outreach
- 150 pairs of corrective glasses both reading and prescription per optometry outreach
- 100 UV-protective sunglasses per optometry outreach

Health Promotion and Community Empowerment

Providing eye health education to community members:

250 eye health education outcomes per optometry outreach

Health Workforce Capacity Building

Infrastructure development (with associated training) for non-professional optometry personnel:

Work alongside I-SEE workers that were trained last year.

Ophthalmology

Collaborative Service Provision

Support ophthalmology services, partnering with local health workers wherever possible to provide:

- 54 ophthalmic procedures per opthalmic outreach.
- Ophthalmic assessments to 120 people per ophthalmic outreach (includes surgical and non-surgical patients).

Health Promotion and Community Empowerment

Equip communities by providing opthalmic aftercare eye health education to:

 54 recipients of ophthalmology procedures per ophthalmic outreach

Health Workforce Capacity Building

Workforce strengthening through professional development training provided to:

 5 PNG national ophthalmologists/registrars and support staff in the 2014 outreach season

Tuberculosis

Collaborative Service Provision

Support supply chain logistics by adding capacity to rural distribution networks delivering:

 TB medication to rural health centres (as directed by PNG NDoH)

Health Promotion and Community Empowerment

Equip communities by providing TB focused education to community members:

• 100 TB education outcomes per outreach

Health Workforce Capacity Building

Workforce strengthening through networking and partnerships resulting in:

 Strengthened relationships with NDoH's TB Program Officer, throughout the 2014 outreach season.

Lymphatic Filariasis

Collaborative Service Provision

Support the Provincial Administration health authority LF MDA program resulting in:

- Base line surveys be conducted to allow for LF MDA to start.
- Gulf Provincial Health, PNG NDoH and YWAM MSA create a clear strategy on how to begin with LF MDA in the chosen districts.

HIV/AIDS

Collaborative Service Provision

Support HIV testing services, partnering with local health workers wherever possible to provide:

Provider Initiated HIV Counselling and Testing (PICT)
 started, in conjunction with YWAM MSA clinics, in the
 2014 outreach season

Health Promotion and Community Empowerment

Equip communities by providing HIV/AIDS education, in conjunction with the Provincial AIDS Committee, to community members:

100 HIV/AIDS education outcomes per outreach

Engaging Australians

Increase the Social Consciousness of Youth

Build Australia's capacity to contribute to our region through equipping young people:

- 4 Australian teenagers to come on board an YWAM MSA Outreach
- Facilitate a Youth Leadership Forum event in Townsville
- Provide education resources to 25 schools in Townsville via a monthly Newspapers In Education program
- Provide 5 seminars targeted at teenagers, highlighting social consciousness

Australian Health Professionals

Make room for Australian Health Professional to engage social responsibly and further experience by volunteering within PNG:

- 50 Australian Health Professionals to join YWAM MSA outreach in the 2014 season
- 5 James Cook University medical students to join YWAM MSA as part of their sixth year placement in 2014

Support the Townsville - Port Moresby Relationship

Build on the sister-city relationship between Townsville and Port Moresby (POM):

 Facilitate a week of engagement and collaborative service through a POM based Ship outreach in 2014







6.1 Clinical Data

Gulf Province

Summary of Child Health Tally Sheets

Child Attendance

Children <1 New	80	Children <1 Returning	149
Children 1-4 years New	57	Children 1-4 years Returning	454

Nutrition

	<1yr	<60%	4	60-80%	90	>80%	135
	1-4 years	<60%	15	60-80%	221	>80%	263

Immunisations

BCG

Within 24 Hours of birth	1	< 1 week	6	> 1 week	58

Hep B

· · - p -			
Within 24 Hours of birth	1	> 24 hour	71

Quinvax/Pentvax

	1 st dose	93	2 nd dose	49	3 rd dose	29
	4 th	211				

Sabin

Jabiii							
1 st dose	98	2 nd dose	51	3 rd dose	42	4 th dose	191

Measles

6-8 Months	45	9-11 months	56	> 1 yr	295

Vitamin A

V 16041111117 1					
6 months	30	12 months	51	> 1 yr	392

School Health Tally Sheet

School Entry T.Toxoid	232	School Leaving T.Toxoid	335
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T.Toxoid ISA Round 1

1st	35	2nd	83	Booster	112
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Summary of Maternal and Women's Tally Sheets

Family Planning Tally Sheet

	Breast feeding pills	28	Combination pills	32	Depo	96
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Antenatal Tally Sheet

Attendances 1 st visit	3	4 th visit		Other	91
Immunisations 1 st dose	3	2 nd dose	1	Booster	67

Education Sessions that Gulf Health Workers Attended

Topics	Number of Attendees
Traditional Birth Attendants Women's health e.g. conception,	73
safe birth etc.	
On the job mentoring Text	56
Pre-Eclampsia	16
HB Testing Kit	13
Pharmacy Review	9
Wounds	3
Other:	35
Hygiene	
Family planning	
 Nutrition 	
 Danger signs in pregnancy 	
Team work	
Malaria testing kits	
Breath sounds	
 Worms 	
Antennal Checks	
When do you refer in a labour	
General assessment skills	
New malaria treatment	
Responding to emergencies/resuscitation	
Partogram/Cervicogram	
PNG treatment guidelines for labor monitoring	

Break down of statistics

Health Promotion Attendees

Nutrition	148	Malaria	118	Oral health	1137
Child Health	201	Back/knee	545	Hygiene	1293
		care			
Tuberculosis	93	HIV/STI	333	Haemoglobin Testing	2
Weaning Foods	117	Danger Signs	142	Maternal Health	162
(for infants)		in Pregnancy		(Antenatal Care)	
Maternal Health	471	Other	83		
(Family Planning)					

Medical Resources Distributed

Toothbrushes	1186	Toothpaste	1181	Mosquito Nets	119
Baby bundles (clothes)	11	Soap	601	Birth kits	287
	260	LID Teeting Kite	0	TD Madiantian	1022
Malaria RDT	360	HB Testing Kits	8	TB Medication	1932
Family Planning	3567	Immunizations	161	Other	428
Medication		Supplied			
		(bottle/vial)			

Dental Procedures

Extractions	1011	Restorations	400	Cleaning	82
Total number of	1107	Check ups and other	277	Total number	1770
patients		procedures		of procedures	

Optometry and Ophthalmology Clinic

Prescription Glasses	108	Reading Glasses	458	Sun - glasses	288
Number of patients who	838	Cataract	29	Pterygium	7
received a vision assessment		Surgeries		Surgeries	

Summary of Outpatient Tally Sheets

New Cases	Male	Female
Measles (suspected)		
Pertussis		
Simple Cough	97	69
Pneumonia: <1yr	6	8
1-4 yrs	8	10
5 yrs +	13	11
Cr Obst Pulmon Dis	10	4
Asthma	10	8
Other Resp	9	11
Diarrhoea: <1yr	1	
1-4 yrs	6	11
5 yrs +	2	1
Malaria Clinical Diagnosis: 0-4 yrs		•
5-14yrs		
15 yrs +	3	1
Pregnant		'
Malaria Slide or RDT: 0-4 yrs		
5-14yrs		
15 yrs +	1	
Pregnant	1	
Fever of Unknown Cause	3	3
Anaemia	3	1
		4
Malnutrition <1yr	24	10
1-4 yrs	24	10
Sexual Violence: 0-4 yrs		
5-16yrs		
17yrs +	26	20
Other Accidents/Injury	26	20
Genital Ulcers	1	
Urethral Discharge		
Vaginal Discharge		
Pelvis Infam Disease		2
Genital warts		
Latent Syphilis (blood tst)		
Other STI	- 10	1
Pulmonary TB Suspect	18	20
Leprosy		
Yaws	9	156
Other Skin Disease	163	158
Ear Infection	14	10
Eye Infection	4	3
All Other New Cases	259	478
Total new cases		
Reattendencs <5ys	360	324
Other Reattendencs	436	635

Port Moresby

Summary of Services Delivered in Port Moresby

Immunisations

Hep B	1	Sabin	749	Tetanus	1951
BCG	5	Measles	5		
Quinvax	20	Vitamin A	749		

Maternal and Women's Health (Family Planning)

Oral Contraceptive Pills	19	Depo	21

Break Down of Statistics

Health Promotion Attendees

Nutrition	267	Malaria	75	Oral health	287
Know when your	360	Back/knee care	274	Hygiene	137
child is sick					
Weaning Foods	90	Danger Signs in	50	Maternal Health	150
(for infants)		Pregnancy		(Antenatal Care)	
Washing Hands	320	Other	1,235		

Medical Resources Distributed

Toothbrushes	176	Toothpaste	15/	Other	2
Toolibrusiles	170	Toolinpaste	104	Other	_

Dental Procedures

Extractions	109	Restorations	104	Cleaning	111
Root Canals	1	Check ups and other			
		procedures			
Total number of	186	Total number of	365		
patients		procedures			

Optometry and Ophthalmology Clinic

Prescription	122	Reading	375	Sunglasses	199
Number of patients who	686				
received a vision assessment					

Western Province

Summary of Child Health Tally Sheets

Ch	bli	Atter	nda	nce
	IIU	\neg uci	Iua	

Children <1 New	164	Children <1 Returning	141
Children 1-4 years New	46	Children 1-4 years Returning	338

Nutrition

<1yr	<60%	5	60-80%	56	>80%	227
1-4 years	<60%	6	60-80%	157	>80%	218

Immunsations

BCG

Within 24 Hours of birth	3	< 1 week	12	> 1 week	202
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Hep B

Within 24 Hours of birth	2	> 24 hour	38
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Quninvax/Pentvax

1 st dose	134	2 nd dose	34	3 rd dose	13
4 th	285				

Sabin

1 st dose	135	2 nd dose	43	3 rd dose	29	4 th dose	268	

Measles

6-8 Months	59	9-11 months	34	> 1 yr	203
\/itamin A					

6 months	02	12 months	33	> 1 yr	344
6 months	62	12 months	33	~ 1 vr	211

School Health Tally Sheet

School Entry T.Toxoid	362	School Leaving T.Toxoid	123	

T.Toxoid ISA round 1

st 78 2nd 172	Booster 75
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Summary of Maternal and Women's Tally Sheets

Family Planning Tally Sheet

Breast feeding pill	47	Combination pills	25	Depo	123

Antenatal Tally Sheet

Attendances 1 st visit	80	4 th visit	Other	16
Immunisations 1 st dose	57	2 nd dose	Booster	3

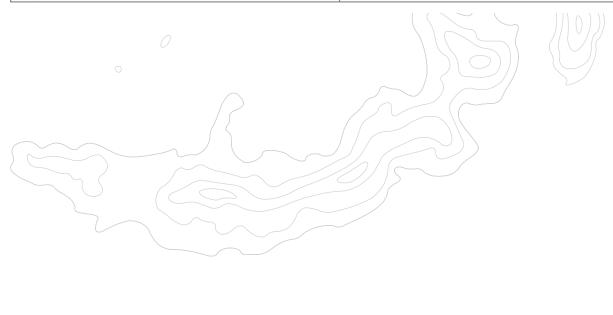
ANNUAL REPORT 2013 - APPENDIX

Summary of Outpatient Tally Sheets

New Cases	Male	Female
Measles (suspected)		
Pertussis	1	
Simple Cough	37	47
Pneumonia: <1yr	2	2
1-4 yrs	5	5
5 yrs +	3	7
Cr Obst Pulmon Dis	5	7
Asthma	15	18
Other Resp	6	5
Diarrhoea: <1yr	1	1
1-4 yrs	15	9
5 yrs +	5	8
Malaria Clinical Diagnosis: 0-4 yrs		
5-14yrs		
15 yrs +		
Pregnant		
Malaria Slide or RDT: 0-4 yrs		
5-14yrs		
15 yrs +		
Pregnant		
Fever of Unknown Cause	3	
Anaemia		3
Malnutrition <1yr	17	18
1-4 yrs	40	70
Sexual Violence: 0-4 yrs	40	1
		1
5-16yrs		
17yrs +	100	25
Other Accidents/Injury	126	35
Genital Ulcers	1	I
Urethral Discharge	2	
Vaginal Discharge		3
Pelvis Infam Disease		5
Genital warts		
Latent Syphilis (blood test)		
Other STI	3	4
Pulmonary TB Suspect	10	10
Leprosy	1	3
Yaws	1	2
Other Skin Disease	82	83
Ear Infection	8	14
Eye Infection	6	5
All Other New Cases	89	261
Total new cases		
Reattendencs <5ys	3	5
Other Reattendencs	7	9

Education Sessions That Western Province Health Workers attended

Topics	Number Attendees
On the job mentoring	16
Traditional Birth Attendants Women's health	30
e.g. conception, safe birth etc	
Malaria in Pregnancy	8
HB Testing Kit	6
Post Partum Haemorrhage	5
Antepartum Haemorrhage	5
Pharmacy Review	5
Wounds	5
Contraception/Family Planning	5
Tuberculosis	3





Break down of statistics

	TOTAL number of	TOTAL number of
Health Promotion Services Delivered	people at sessions	sessions
Back and Knee Exercises	893	15
Danger Signs in Pregnancy	246	15
General Hygiene	1212	26
Haemoglobin Testing	5	2
HIV/STI	262	5
Know When Your Child is Sick	423	10
Malaria Prevention	723	11
Maternal Health (antenatal care)	285	17
Maternal Health (family planning)	514	16
Nutrition	479	11
Oral Hygiene	911	14
Other		
Cold Chains		
Breast Feeding		
Domestic Violence		
Worms		
Clean Births		
Parenting		
Child Development	1004	19
Washing Body	318	6
Washing Hands	1384	30
Weaning Foods For Your Baby	435	10

Preventative Health Resources Distributed	
Baby Billum	80
Baby Bundles	35
Bars of Soap	573
Birth Kits	413
Family Planning Medication (Per Course)	590
HB Testing Kits	9
Immunisations Supplied (Bottle/Vial)	737
Malaria RDT (per testing kit)	1860
Maternal Health Tools	8
Mosquito Nets	2472
Other:	
 Dental Floss 	
 Medication to Health Canters 	
 Malaria Treatment Guidelines 	1318
Toothbrushes	2048
Toothpaste	1110

Dental Procedures

Extractions	1132	Restorations	435	Cleaning	30
Root Canals	0	Check ups and other procedures	43		
Total number of patients	779	Total number of procedures	1640		

Optometry and Ophthalmology Clinic

Prescription	522	Reading	876	Sunglasses	621
Number of patients who received a	1756	Cataract	55	Pterygium and	16
vision assessment		surgeries		other surgeries	



6.2 Endorsement Letters



MINISTRY OF HEALTH & HIV/AIDS OFFICE OF THE MINISTER

PO Box 807

WAIGANI

National Capital District

Papua New Guinea

Tel: +675 301 3605 Fax: +675 301 3604

Hon. Michael B. Malabag, OBE MP

13 February 2013

Mr Ken Mulligan Managing Director YWAM Medical Ships – Australia PO Box 1959 Townsvile QLD 4810 Australia

Dear Ken,

I am writing this to express my wholehearted support for the work that YWAM Medical Ships – Australia (YWAM MSA) has conducted in the Gulf and Western Provinces since 2010. Thank you very much for meeting with me yesterday in the National Parliament of Papua New Guinea (PNG) to discuss the purchase of a new Training and Medical Ship which would expand health services, training and capacity building in the Southern Region of PNG.

YWAM MSA, which aligns itself to Papua New Guinea's National Health Plan (2011-2020), has been operating a Medical Ship in PNG for the last three years and has delivered 106,384 health services and training opportunities in the rural and remote regions of the Gulf and Western Provinces.

I have been very impressed with the diversity of services that YWAM MSA provides including primary health care, dentistry, optometry, ophthalmology, public health promotion, immunisation, and the training and capacity building of our health workers in these provinces.

As the Minister for Health and HIV/AIDS, I am very much aware that YWAM MSA fulfills a great need that we have in our remote villages and compliments the work that the Department of Health is achieving. The close collaboration that YWAM MSA has with the PNG National Department of Health (NDoH), the Gulf and Western Provincial governments, provincial health authorities, local village leaders and rural health workers is a great credit to this organisation.

You have illustrated in your submission to me yesterday that a new Training and Medical Ship would significantly increase YWAM MSA's outputs and it would lead to great benefits for the Western and Gulf Provinces, Central Province, National Capital District, Milne Bay Province, and Oro Province, all of which make up the Southern Region of PNG.

I commend YWAM MSA for the services they have provided over the last three years and I will now work with the Prime Minister and the Secretary of Health in ensuring that this much needed expansion of YWAM MSA's services to the Southern Region of PNG becomes a reality.

Please do not hesitate to contact me if I can assist with any further information regarding your submission.

Kind Regards,

Honourable Michael Malabag MP Minister for Health and HIV/AIDS



PAPUA NEW GUINEA NATIONAL PARLIAMENT

PARLIAMENT HOUSE POST OFFICE WAIGANI

TEL: (675) 327 7411 FAX: (675) 327 7398

OFFICE OF THE SPEAKER

21th February 2013

To Whom It May Concern

I write to offer my full support for YWAM Medical Ships – Australia (YWAM MSA) and their proposal to expand their services with the purchase of a new training and medical ship.

I understand the new training and medical ship will help to support basic service delivery, build capacity and address some of Central Provinces' most critical development needs.

YWAM MSA's is currently operating a medical ship in the remote villages of the Gulf Province, Western Province and National Capital District of Papua New Guinea (PNG) and is actively undertaking much needed community development including health services and training.

YWAM MSA's commitment to see a reduction in poverty, and major sustainable health improvement in PNG while simultaneously seeing Australians empowered through service is to be commended.

The important work being undertaken by YWAM MSA only complements and strengthens the work being done by the Papua New Guinea Governments in this region.

It is an honour to provide this strong endorsement for YWAM MSA.

If there is any further information I can provide you with, please do not hesitate to contact me

Kind Regards,

HON. THEO ZURENUOC, MP Speaker of National Parliament

& Member for Finschhafen



P. O. Box 807 WAIGANI National Capital District, Papua New Guinea Phone: + (675) 301 3601, 301 3634

Fax: +(675) 301 3604

Email: health_secretary@health.gov.pg

Date: 18th February, 2013

Mr. Ken Mulligan
Managing Director
Ywam Medical Ships – Australia
P O Box 1959
TOWNSVILLE QLD 4810
Australia.

Dear Mr Mulligan

I would like to take this opportunity to congratulate Ywam Medical Ships—Australia on the good work and significant contribution that you make to community development in the Gulf and Western Provinces through the use of a training and medical ship to reach very remote rural areas to deliver much needed health services ,to build capacity and deliver other projects.

In our meeting on the 12th February 2013 I was very much impressed with your proposal for a new Training and Medical Ship for Papua New Guinea as this will allow you to build on the great work that you do in theGulf and Western Provinces.It is through such initiatives and support for the people of Papua New Guinea that much needed health services are able to reach our very remote areas.

On behalf of the National Department of Health we look forward to working with you as we both strive to improve the health and wellbeing of all our people in Papua New Guinea.

MR. PASCOE KASE

Secretary



MILNE BAY PROVINCIAL GOVERNMENT



GOVERNOR

11 February, 2013

TO WHOM IT MAY CONCERN

I write to offer my full support for the Youth With A Mission Medical Ships – Australia (YWAM MSA) and their proposal to expand their services with the purchase of a new training and medical ship.

Upon my election as the Regional Member and Governor of Milne Bay in 2012 I expressed my commitment to press for greater improvements to service delivery, especially for the majority of our people in the rural areas. I also stressed on the vision for a smart, fair, wise, healthy and happy future for Milne Bay, a vision also espoused in the Vision 2050 and Medium Term Strategic Development Plan for the country.

After preliminary discussions with the Christian non-profit aid organization, I am strongly convinced that a partnership with YWAM MSA will significantly benefit and continue development in the desired direction of our province and country. We have in fact started discussions on the expansion of the organisation's work in Milne Bay Province.

As a maritime province, I believe the new training and medical ship will go a long way to help, support, strengthen and improve the delivery of basic services in health, education and other most needed areas in Milne Bay Province. The work of YWAM MSA will also empower and help to build up capacity to address some of the province's most critical development concerns, while at the same time seeing Australians empowered through service.

I commend highly the commitment that YWAM MSA has already displayed in its work in remote villages in Western and Gulf Provinces as well as the National Capital District where it is actively undertaking much needed community development including health services and training. I also commend their work to

see a reduction in poverty, as well as to achieve a major and sustainable health improvement for the people, which can only be further enhanced with the acquisition of the new and more modern medical and training vessel.

The YWAM MSA's work also compliments and supports the efforts of Government both at the National and Provincial level and as such I, as Governor of Milne Bay Province, which will hopefully start to benefit from the organisation's work very soon, hereby give my strong support and endorsement for YWAM MSA and their work, and especially their bid to obtain a new training and medical ship.

If there is any further information I can provide, please do not hesitate to contact me.

Sincerely,

Hon. Titus Philemon

GOVERNOR OF MILNE BAY PROVINCE



NATIONAL CAPITAL DISTRICT COMMISSION

Office of the Governor Hon. Powes Parkop LLB, LLM, MP P.O. Box 7270, **Boroko**. NCD



CITY OF PORT MORESBY

Telephone	: 3240700 City Hall	Date:	19 th February 2013		
	: 3251166 Tengdui Depot : 3254711 Lagatoi Haus				
: 323 3251 Governor's Office Facsimile : 323 3259	Your Reference:				
	Our Reference:				
		Action Officer			

Mr Ken Mulligan Managing Director YWAM Medical Ships P O Box 1959 TOWNSVILLA QLD 4810 Australia

Dear Mr Mulligan

I write to offer my full support for YWAM Medical Ships — Australia (YWAM MSA) and their proposal to expand their services with the purchase of a new training and medical ship.

Since 2007, I have been devoted to the development of the National Capital District Commission (NCDC) and the nation of Papua New Guinea as a whole. Over the past three years YWAM MSA has proven to be as equally determined to see the provision of basic human rights of PNG citizens become a reality as NCDC.

The new training and medical ship will help to support basic service delivery, build capacity and continue to address some of NCDC's most critical development concerns.

YWAM MSA is currently operating a medical ship in the remote villages of the Gulf Province and Western Province of Papua New Guinea, actively undertaking much needed community development including health services and training throughout the nation.

YWAM MSA's commitment to see a reduction in poverty, and major, sustainable health improvement in PNG while simultaneously seeing Australians empowered through service is to be commended.

The important work being undertaken by YWAM MSA only complements and strengthens the work being done by the Papua New Guinea Government in our nations capital.

It is an honor to provide this strong endorsement for YWAM MSA.

If there is any further information I can provide you with, please do not hesitate to contact me.

Sincerely yours

Hon. Powes Parkop LLB LLM MP

NCD Governor



Central Provincial Government



Office of the Governor

Free Mail Bag Services Port Moresby, NCD Telephone: 3202224

20th February 2013

Mr. Ken Mulligan Managing Director YWAM Medical Ships P. O. Box 1959 TOWNSVILLE AUSTRALLIA

Dear Mr. Mulligan,

Thank you for inviting me and my Advisors for a presentation of your YWAM MSA Concept by your Patron Hon. Mike Reynolds AM and his Assistants at Holiday Inn.

I am very humbled by your full-time volunteers that reach out to some of the most difficult terrains in our country providing medical services to especially rural communities.

As the Governor of the province, I have an obligation to provide medical services for my people, to improve infrastructure and health facilities and more importantly increase capacity for health workers. I want my aid posts, clinics and rural health centres opened and equipped with essential medicines. In addition, it would be of greater value, where common illnesses/diseases, reemergence diseases are identified by the districts in my province for planning purposes, and development of appropriate vaccines to counter them.

I am therefore excited about YWAM MSA's development strategies and purpose, that addresses some of my concerns above, and more importantly are closely aligned to my province's development goals and objectives in the health sector which I believe provides a significant opportunity for a partnership of mutual benefit. I am encouraged by the participation of youths in your programs; it would be my desire if my people (especially the youths) are encouraged to participate where opportunities will avail themselves for better sustainable life.

In addition to your Medical Ship that could serve our vast coastline, may I also thank you for your concurrence to serve our inland rural communities for basic health services, workforce development and capacity building.

I commend you (YWAM MSA) for the work you have done in Southern Region provinces, and also thank the National Government of its vision for a healthy nation.

On this notion, it is an honour to provide this strong endorsement for YWAM MSA in my province.

Yours sincerely

Hon. Kila Haoda, MP GOVERNOR





ORO PROVINCIAL GOVERNMENT Office of the Governor

P O Box 132, POPONDETTA, Oro Province, Papua New Guinea.

Telephone: 6297084 Facsimile : N/A

Wednesday 13th February, 2013

TO WHOM IT MAY CONCERN:

I write to offer my full support of YWAM Medical Ships- Australia (YWAM MSA) and their proposal to expand their services with the purchase of a new training and medical ship.

The new training and medical ship will help to support basic service delivery, build capacity and address some of the Oro Province's most critical development concerns.

YWAM MSA is currently operating a medical ship in the remote village of the Gulf Province, Western Province and the National Capital District of Papua New Guinea and I would gladly welcome them into the Oro Province. They are actively undertaking much needed community development including health services and training.

YWAM MSA's commitment to see a reduction in poverty, and major, sustainable health improvements in PNG while simultaneously seeing Australians empowered through service is to be commended.

The important work being undertaken by YWAM MSA only complements and strengths the development priorities of the Government of PNG.

It is an honour to provide this strong endorsement for YWAM MSA.

If there is any further information I can provide you with, please do not hesitate to contact me.

Kind regards,

Honourable Gary Juffa

Governor of Northern (Oro) Province



GULF PROVINCIAL & LOCAL LEVEL GOVERNMENT OFFICE OF GOVERNOR

PARLIAMENT HOUSE ROOM: B1-33

WAIGANI

NATIONAL CAPITAL DISTRICT PH: 327 7219 FAX: 327 7259 YOUR REF: OUR REF: ACTION OFFICER:

DESIGNATION: DATE: 11/02/2013

To Whom It May Concern

It is my pleasure to write to strongly endorse YWAM Medical Ships – Australia (YWAM MSA) and their proposal to expand their service with the purchase of a new training and medical ship.

I have worked alongside YWAM Medical Ships for a number of years and it has been a privilege to partner with them in working toward sustainable development objectives. I hold this partnership to be imperative to our shared goal of a health and prosperous future for the Gulf Province.

The new training and medical ship will help to greatly expand YWAM MSA's current service delivery, capacity building and addressing some of Gulf Province's most critical development concerns.

YWAM MSA's commitment to see a reduction in poverty, and major sustainable health improvement in PNG while simultaneously seeing Australians empowered through service is to be commended.

The important work being undertaken by YWAM MSA only complements and strengthens the work done by Papua New Guinea Government in this region and the new training and medical ship will even further strengthen our nation.

It is an honour to provide this strong endorsement for YWAM MSA.

If there is any further information I can provide you with, please do not hesitate to contact me.

Kind Regards,

Honourable Havila Kavo Gulf Province Governor



OFFICE OF THE GOVERNOR FOR WESTERN PROVINCE

FLY RIVER PROVINCIAL GOVERNENT P.O. BOX 51, DARU, WESTERN PROVINCE

Date: 11th February, 2013

Honourable Ati Wugtungam WOBIRO, MP B.Eco; M.Eco; M. Dev Admin

TO WHOM IT MAY CONCERN.

I am writing this letter to endorse YWAM Medical Ships - Australia (YWAM MSA) and their proposal to expand their services with the purchase of a new Training and Medical Ship.

With my previous involvement in PNG Sustainable Development Program and my extensive management and leadership experience, I understand the complexities of developing effective strategy in development projects. YWAM MSA places a high value on partnership with the Western Provincial Government as they seek to make a significant contribution to key development initiatives in the Western Province. Their Medical Coordinator, Hanna Peart, has been working closely with our local healthcare providers to contribute to the Service Annual Implementation Plan 2013.

The new training and medical ship will help to expand the basic services delivery, capacity building and continue to address some of Western Provinces' most critical development concerns.

Since 2010, YWAM MSA has been operating a medical ship in the remote villages of the Gulf Province, Western Province and the National Capital District of Papua New Guinea (PNG) and is actively undertaking much needed community development including health services and training.

I commend YWAN MSA's commitment to see a reduction in poverty and diseases and see major sustainable health improvement in PNG while simultaneously seeing Australians empowered through service.

The important work being undertaken YWAM MSA only complements and strengthens the work being done by the Papua New Guinea Governments in this region.

If there is any further information I can provide you with, please do not hesitate to contact me.

Kind Regards.

HONOURABLE ATI WOBIRO
Western Province Governor.



OFFICE OF THE GOVERNOR FOR WESTERN PROVINCE

FLY RIVER PROVINCIAL GOVERNENT P.O. BOX 51, DARU, WESTERN PROVINCE

16 September 2012

Honourable Ati Wugtungam WOBIRO, MP B.Eco; M.Eco; M. Dev Admin

YWAM Medical Ships PO Box 1959 TOWNSVILLE QLD 4810

Dear YWAM Medical Ships

SUBJECT:

ENDORSEMENT AND SUPPORT FOR WORK UNDERTAKEN BY YWAM

MEDICAL SHIPS AUSTRALIA IN WESTERN PROVINCE

As the Governor of Western Province of Papua New Guinea, I write to give my strong endorsement and support of the work being undertaken by YWAM Medical Ships Australia (YWAM MSA) in Western Province.

I am pleased to hear of YWAM MSA's community development programs including the delivery of 90,000 health services and training they have undertaken in the Gulf and Western Provinces since 2010. The services that YWAM MSA provides such as primary health care, dentistry, optometry and ophthalmology fulfils a great need we have in our remote villages of the Western Province.

YWAM MSA's commitment to see a reduction in poverty, and major sustainable health improvements in Papua New Guinea over the next several years, while simultaneously seeing Australians empowered through service, is to be commended. I welcome you to Western Province to provide these very essential primary health care services to our people.

Kind regards

HON. ATI W. WOBIRO MP Governor of Western Province

THE RIGHT HON. SIR RABBIE L NAMALIU GCL KCMG CSM P O BOX 144 KOKOPO ENBP

BH: 675-982 9682 FAX: 675-982 9682 EMAIL ADDRESS: rnamaliu@datec.net.pg

08th May, 2012

Mr. Ken Mulligan, CEO YWAM Medical Ships – Australia P O Box 1959 TOWNSVILLE QLD 4810

E-mail: info@ywamships.org

Dear Ken,

Thankyou for your letter of 1 May, 2012 and your kind words in the aftermath of my visit to Townsville in support of YWAM Medical Ships Australia (YWAM MSA). We both enjoyed the visit enormously.

I am pleased that the ship has arrived in PNG and I read a very positive report about it in the local newspapers. It appears from the report that the ship was warmly welcomed in Port Moresby with the support and help of Steamships.

I have given considerable thought to your invitation to me to be Patron of the project in PNG and to our discussions over dinner with Mike Reynolds and Jeff Wall. My main concern was whether I would be in a position to devote enough time to the role given my other commitments. I have decided that notwithstanding my other commitments, this is a worthy cause that deserves to be supported irrespective of how much time it takes because it is making a difference to so many in less fortunate circumstances in the Gulf and Western Provinces. It is for these reasons that I am pleased to accept your invitation to be Patron.

I would only be too happy to be part of the excellent work that you and YWAM MSA are doing and in so doing assisting to strengthen the relationship between PNG and Australia. The work that you are doing is already achieving by providing real outcomes for citizens of both nations.

I look forward to working closely with YWAM MSA and in particular in partnership with you and the Honourable Mike Reynolds AM as Patron to take this great endeavour forward.

Best Regards,

SIR RABBIE L NAMALIU GCL KCMG CSM

Danie Marila.



MINISTRY OF HEALTH & HIV/AIDS OFFICE OF THE MINISTER PO Box 807 WAIGANI National Capital District Papua New Guinea Tel: +675 301 3608 Fax: +675 323 9669

Hon. Jamie Maxtone-Graham, MBE, MP

13 March 2012

Mr. Ken Mulligan Chief Executive Officer YWAM Medical Ships Australia PO Box 1959 TOWNSVILLE, QLD 4810 Australia

Dear Mr. Mulligan,

I am writing to you to give my strong endorsement of YWAM Medical Ships Australia (YWAM MSA), which aligns itself to the Papua New Guinea's National Health Plan (2011-2020).

I am pleased to hear the reports of YWAM MSA operating in the Gulf and Western Province since 2010 and continuing to actively develop communities by addressing the health care and training needs. The services that YWAM MSA provides such as primary health care, dentistry, optometry, and ophthalmology fulfils a great need we have in our remote villages.

YWAM MSA's commitment to see a reduction in poverty, and major, sustainable health improvement in PNG over the next several years while simultaneously seeing Australians empowered through service is to be commended.

The work being done by YWAM MSA only compliments the work that the Department of Health is achieving.

Yours Sincerely

Honourable Jamie Maxtone-Graham, MBE, MP

MINISTER FOR HEALTH & HIV/AIDS

HON. THEO ZURENUOC, MP

Minister for Education Member for Finschhafen National Parliament House

Phone: 3277571 Fax: 3277229



Papua New Guinea

MINISTRY OF EDUCATON Office of the Minister

Level 6, Fincorp House P. O. Box 446 WAIGANI National Capital District Tel: 3013333

Fax: 3231031 Mobile: 76171450

Date: 18 October 2011

Ken Mulligan Chief Executive Officer Youth With A Mission (YWAM) P. O. Box 1959 Towns Village, QLD 4810 Australia

Dear Mr. Mulligan

RE: FORMAL ENDORSEMENT AND SUPPORT OF YWAM PROGRAM IN THE EDUCATION SECTOR IN PNG

I am greatly humbled to have met you and your team this morning, taking time to explain to me about the type of work your Organisation has been doing in Papuan New Guinea for the last two years.

I am made aware by your visit that your Organisation, without much publicity, has already been profoundly touching the lives of many people in the Gulf and Western Provinces of PNG. Your generous services, undoubtedly, have brought joy, hope and purpose to many families in those provinces. I am particularly impressed by your Medical Shipping and land-based health programs in rural areas your team have visited. I further appreciate your programs in relation to upskillig of locals through training and engaging of local schools in villages. These programs are all in line with the Government's Medium Term Development Plan (DTDP) and the Vision 2050.

I also understand that your program in PNG has commenced only recently, however, you have made great progresses. This is an indicative of the enormous potential YWAM has to contribute meaningfully to PNG's social development efforts, particularly in the Health and Education sectors, where such services are needed most.

On this note, let me take this opportunity to, firstly, offer my sincere gratitude to YWAM for its invaluable initiative and commitment to provide these vital services to PNG.

Secondly, as Minister for Education, I formally reaffirm my support and endorsement of your programs in Papua New Guinea.

I would very much like to see your program expanded to cover many of our rural schools which currently receive less or no government attention in terms of providing health services.

In this connection, I suggest that you liaise with my Department Secretary to find a way forward to partnering with our Department in bringing these services to our schools in the rural areas of PNG.

Let me thank you once again, and I look forward to a fruitful partnership with YWAM in years ahead.

Yours Sincerely,

HON. THEO ZURENUOC, MP

Minister for Education Member for Finschhafen.



DEPARTMENT OF HEALTH

CURATIVE HEALTH SERVICES DIVISION

OFFICE OF THE DIRECTOR MEDICAL SERVICES

DARU GENERAL HOSPITAL

FAX TELEPHONE 6459 246 6459166/246 P.O. BOX 6

DARU

WESTERN PROVINCE PAPUA NEW GUINEA

YWAM Medical Ships P. O. Box 1959 Townsville QLD 4810 Australia

2nd July 2011.

Dear YWAM Medical Ships,

RE: YWAM MEDICAL SHIPS PROVISION OF VARIOUS SPECIALIST CLINICAL SERVICES.

In January 2011 a Primary Care Team from YWAM Medical Ships came to Western Province. They worked in Daru Hospital and visited a lot of the villages often working with our Cholera teams.

This was noted accepted to be helpful and future endeavors to come and provide various specialist clinical services to our people will substantially benefit the hospital and the people of this province as a whole.

Western Province is a vast land mass within PNG with a lot of Geographical barriers that limit people receiving basic services health services. Whatever resources available to provide the basic health requirements is usually not adequate.

Kind hearted people like YWAM Medical Ships assistance has helped and with the current visit in providing that extra care and support from specialist clinical personnel. Regular and planned visits of such nature would help us in a lot of ways:

Up skilling and increased level of motivation for our staff and those of the rural health with assistance from various clinical specialists.

Improve ability to provide ongoing clinical care to patients.

And many more mutual benefits

It is for these reasons that we hope you your good team continues to support us in strengthening our health care systems and we give our full endorsement for this worthwhile project.

Thank you for coming to Daru and Western Province.

Kind regards

Dr. Amos Lano

Acting Chief Executive Officer

WESTERN PROVINCIAL ADMINISTRATION



Division of Health
P. O. Box 1
Dain
Ph/Fax:(675)6459336,6459275



27th July 2012

Mr. Ken Mulligan Chief Executive Officer P.O Box 1359 Townsville, QLD 4810 Australia

Dear Mulligan,

I am pleased to finally agreeing with you in aligning health care services through a mutual understanding for a partnership agreement with YWAM for the next three years through a combined effort.

YWAM has proven wonderful health care services to the remote populations of the province in the areas of dentistry, optometry and ophthalmology that are nonexistent in the entire health care delivery.

I am pleased to have agreed to working with YWAM and would like to take this opportunity to officially invite them to be involved in the development of the 2013 Annual Health Implementation Plan in August 2012.

I look forward for a wonderful working relationship with YWAM.

Yours sincerely,

ALICE HONJEPARI

Director Rural Health Services

WESTERN PROVINCIAL ADMINISTRATIO



MIDDLE FLY DISTRICT ADMINISTRATION Division of Health P.O. Box BALIMO. Western Province



Date: 23/02/2012

File:

Ken Mulligan Chief Executive Officer PO Box 1959 Youth With A Mission (YWAM) PO Box 1959 Towns Village, QLD 4810 Australia

Dear Mr. Mulligan,

SUBJECT: FORMAL INVITAION TO YWAM PROGRAM TO BE IMPLEMENTED IN BALIMO

AREA MFD IN WESTERN PROVINCE

This letter serves to your office as letter of invitation to come to Balimo, Middle Fly District in Western Province.

We have a lot of patients in Balimo district with Eye problems, Dental problems and also have many mothers/single mothers with PID (Pelvic Inflammatory Infections). There are also many with Surgical cases such as Hernia (all sorts) which has also become the main surgical problem in Balimo area.

The visit of the Y'WAM in Balimo area will make a big difference. Your Team's visit to Balimo area will be very much appreciated by all at large because doctor service in Balimo area has been absent for about 10-15 years.

Therefore I am formally inviting the Y'WAM to pay a visit to Balimo upon receipt of this letter of invitation.

Thanking you in advance for considering and accepting my letter of invitation.

Thank You. Yours in Health

Mr.M.Ramsay Siwaeya a/District Health Manager & The Coordinator Rural Health MF.

Ph # 72391608 ** VVAME OF BOTHING EIRER WIT MISTING & D

WESTERN PROVINCIAL ADMINISTRATION



Division of Health

South Fly District Health Administration
P.O. BOX132

DARU

Western Province.



Phone no: (675) 6459339

5th July, 2011

YWAM Medical Ship, PO Box 1959, TOWNSVILLE 4810 QLD Australia

Dear YWAM Medical Ship,

Western Province has many stakeholders including government and non-governmental organizations providing health care to our people. As programme manager for the South Fly, I would like to invite and endorse the work that YWAM Medical Ships can do in our region.

In January 2011, a Primary Health Care Team from YWAM Medical Ships came to the Western Province. They travelled to several villages and worked alongside the Cholera Teams we established in response to the Cholera Outbreak plaguing our Province. It was during this time, that I first heard of the YWAMN Medical ship and the work they had done in many villages. I thought it would be wonderful if they could bring the YWAM Medical Ship into the Western Province.

The services they offer such as Dentistry, Optometry, Primary Health Care, and Ophthalmology are not available or in limited availability to the people of Western Province, especially for those in remote parts of the South Fly. Considering their long-term commitment to deliver these services in cooperation with the Provincial Health Administration, I am happy to give my endorsement to this project. We look forward to building this partnership and working together to increase the availability of desperately needed health services across the Southern Fly Region.

Kind Regards,

ALOIS NAKAMOLE (Mr.)

South Fly District Health Manager



WESTERN PROVINCIAL ADMINISTRATION

(SERVING WITH PURPOSE)

OFFICE OF THE PROVINCIAL ADMINISTRATOR

P. O. Box 347, Kiunga, Western Province, Papua New Guinea; Telephone (675) 6491421/6491409 Facsimile (675) 6491410

9th September 2011

Hannah Peart
Medical Coordinator
YWAM Medical Ship - Australia
P.O. Box 1959 **TOWNSVILLE**QLD, 4810
Australia

Dear Sir/Madam,

Thank you for letter dated 25th July 2010 in which you informed us of the wonderful work that the YWAM Medical Ships Australia is doing in the delivery of specialized medical services to rural communities in Papua New Guinea.

I also had the opportunity to view footages of your recent health services visit to the people of Gulf Province and was deeply touched by bringing newness of life to people in the remote communities.

I sincerely apologise for responding quite late to your request to visit Western Province.

Nonetheless, I am pleased to invite you to visit Western Province during your next visit to Papua New Guinea. Like Gulf Province, Western Province has its own development challenges. One of the key challenges is that we have the largest land mass in Papua New Guinea and the province is sparsely populated making accessibility for our people to basic services such as health very challenging.

Although our Provincial Headquarters is currently located in Kiunga in the northern part of the Province, I can make arrangements for me to meet with you in Daru which is on the southern coast.

I look forward to your visit.

Yours sincerely

WILLIAM G. GOINAU
Provincial Administrator

19 Cordelia Avenue, Cranbrook, QLD. 4814. Australia.

23rd May 2009

TO WHOM IT MAY CONCERN.

The Youth With A Mission (YWAM) is a Christian Organization that prepares youth to serve in the wider developed and developing communities to help bring a positive change to their lives. They engage in different wide ranging activities ranging from spiritual to physical ministries. One of these has been the provision of a medical ship with volunteer health workers to the different Pacific Islands countries for the last 10 years. Now they wish to focus the same project to Papua New Guinea (PNG) for the next ten years.

I have helped teach public health and primary health care to some of their students who have gone and worked as volunteers in developing countries as part of their course. The last group worked early this year in the Raihu district of West Sepik, PNG. The experience is mutually beneficial to the volunteer youths and their hosts. They respect local cultures and ensure that their help is complementary and they're to strengthen existing services.

I have participated in the planning and discussion of their proposed medical boat mission to PNG. Hopefully that if all works out that I would be able to accompany them on their first trip to be an interpreter and introduce them to local communities and health workers. I fully support their mission and hope that you would also be able to assist them to help bring some positive change to rural PNG communities for the next 10 years.

Yours sincerely,

Tukutau Taufa, MD.(Flinders), FACTM., MPH.(Harvard), M.Med.(O&G)(UPNG),

D.Obst.(Auck), DMS.(Papuan Med.Coll)



UNITED CHURCH OF PAPUA NEW GUINEA

WESTERN REGIONAL OFFICE, MURRAY ROAD, DARU P.O. BOX 54, DARU, WESTERN PROVINCE, Mobile: (675) 76242040, Tel: 6459082, FACSIMILE (675) 6459153 EMAIL: westernregion@yahoo.com

Office of the Western Region Bishop

30th June 2011

YOUTH WITH A MISSION (YWAM)
AUSTRALIA AND PNG
SHIP TOUR
P.O. BOX 1959 TOWNSVILLE
QLD 4810 AUSTRALIA

Dear Ywam Medical Ships

Re: Our Partnership with YWAM Medical Ships

In January 2011 we had an YWAM Primary Health Care and Youth Team with us in Daru. When talking with them about the YWAM Medical Ship, we believe very strongly to partner with them to see the YWAM Medical Ship come to the Western Province over the next few years.

This team was able to travel to a number of villages in the South Fly that we have churches and health centers' in. There we were able to set up clinics alongside the cholera Team from Daru as well as reach out to the youth and church in that area. The villages where greatly encouraged by the work they did.

We look forward to the years coming at how we can work together and see the people of Western Province have an increased quality of life due to the health care services offered as well that they engage with the church.

I highly endorse the work that YWAM Ships have proposed to do in the Western Province. We will greatly appreciate the support that they may be able to offer as well as the relationship and partnership the YWAM Medical Ship will create between us. I wish the all the best in their future endeavours

To God be glory, honor and praise for His mission through YWAM to the Western Province

Grace Peace and Love of God is with you

Rev Lawes Waia

Bishop



THE UNITED CHURCH IN PAPUA NEW GUINEA

UNITED CHURCH OFFICE P.O. Box 1401 PORT MORESBY, PNG

ASSEMBLY OFFICE TEL: (675) 3211744 D/line: (675) 3200123 FAX: (675) 3214930 EMAIL: slowa@ucpng.org.p

2 August 2012

Mr. Ken Mulligan Chief Executive Officer PO Box 1959 TOWNSVILLE, QLD 4810 Australia

Dear Mr. Mulligan,

As the Moderator of the United Church in Papua New Guinea, I write to strongly support the work being undertaken by the YWAM Medical Ship which is based in Townsville, Australia.

We were thrilled to hear of the 54,732 services and training that were provided by YWAM MSA throughout the Gulf and Western Province during 2010 & 2011. These vital services included primary health care, immunisations, dentistry, optometry, education seminars and delivery of health resources.

I see that YWAM MSA provides a positive impact in the villages that they work in, not just through the health care and training that they provide but also through relationships that they build on the ground.

I wish YWAM MSA all the best in their future endeavors and look forward to seeing what partnerships develop with the United Church in Papua New Guinea.

Your Co-Servant in Jesus Christ,

Rt. Reverend Sir Samson Lowa KBE

Moderator



40 years of ministry 1968 - 2008



The Hon Julie Bishop MP

Federal Member for Curtin
Deputy Leader of the Opposition
Shadow Minister for Foreign Affairs and Trade

Hon Mike Reynolds AM Patron YWAM Medical Ships Australia PO Box 1929 TOWNSVILLE QLD 4810 7 December 2011

JB:GA/fbcomm:ReynoldsM

Dear Mike

Thank you for your letter dated 3 November 2011. I too was delighted to meet with YWAM Medical Ships Australia (YWAM MSA) to discuss the impressive work being undertaken by the organisation.

In fact, I recently wrote an opinion piece for the National Times regarding innovation in effective aid delivery and I discuss the efforts being undertaken by YWAM MSA. I made a similar speech in the Parliament on 23 November 2011.

Please find enclosed a copy of the article and my speech which I trust you will find of interest.

I look forward to working with you and YWAM MSA in the future.

Best wishes

VULIE BISHOP

Encl.

cc: Mr Ewen Jones, Federal Member for Herbert



THE HON PETER DUTTON MP SHADOW MINISTER FOR HEALTH AND AGEING

To Whom It May Concern

As the Shadow Minister for Health and Ageing, I am pleased to endorse the important services provided by YWAM Medical Ships - Australia.

Through the strong advocacy of Mr Ewen Jones MP, Federal Member for Herbert, and others, I have been impressed by the organisation's innovative delivery of vital primary, dental, ophthalmic, antenatal and other health services in remote areas of Papua New Guinea (PNG).

The delivery of these services through the medical ships dramatically improves patients' lives and generates enormous goodwill between Australia and PNG.

This achievement is a credit to the efforts of the organisation, the volunteers and those who provide support, financial or otherwise.

Kind regards

Hon Peter Dutton MP

Federal Member for Dickson

Shadow Minister for Health and Ageing

January 2013



Federal Member for Herbert

EJ:RD

3 November 2010

TO WHOM IT MAY CONCERN

It is with great pleasure that I offer my support to the Youth With a Mission (YWAM) Medical Ship.

I congratulate those members who volunteer their expertise to provide essential medical treatment and support where needed amongst our overseas neighbours.

The young people of YWAM are an inspiration to us all and it is indeed an honour to give my support to their future endeavours.

Yours sincerely

Ewen Jones

Member for Herbert



Senator the Hon Jan McLucas

Parliamentary Secretary for Disabilities and Carers Labor Senator for Queensland

To Whom It May Concern

I am pleased to be given this opportunity to lend my support to Youth with a Mission (Ywam) Medical Ships – Australia.

Ywam MSA is actively developing communities by addressing the health care and training needs in Papua New Guinea (PNG) with its Medical Ship and land-based teams alongside the priorities and vision of the PNG National Health Plan PNG National Department of Education, and AusAID's commitment to the UN's Millennium Development Goals.

Ywam Medical Ships are seeking to expand their medical work in PNG by operating a new Medical Ship. It is envisaged the new ship would be complimentary to the joint efforts Australia and PNG health officials are currently undertaking to address the health needs of people who live in the south fly and western provinces.

The work of Ywam is highly regarded and I am sure their model of success in inspiring young people is greatly appreciated by the people of Papua New Guinea.

I would therefore be grateful for your favourable consideration of this application by Ywam Medical Ships - Australia.

Yours sincerely

Jan McLucas

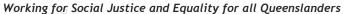
Parliamentary Secretary to the Prime Minister Parliamentary Secretary for Disabilities and Carers Labor Senator for Queensland

17/10/2012



Senator Claire Moore







TO WHOM IT MAY CONCERN:

I write in support of Youth With A Mission (YWAM). I have met with representatives from YWAM both personally and as a member of several Committees. The YWAM representatives spoke about women and children's health in Papua New Guinea.

In their discussions with me, and also in the detailed report they left with me, YWAM provided information on their aims and aspirations as well as their future plans.

YWAM is a worldwide Christian movement operating in more than 150 countries since 1960. YWAM is decentralised in structure; each centre is financially and legally autonomous, allowing locations to adapt and serve the specific needs of the community.

YWAM Medical Ships Australia (YWAM MSA) is a Christian charity that aims to serve, build, care and connect with individuals and communities. YWAM MSA is headquartered at YWAM Townsville, and they are working with the Combined Churches of Townsville to operate a Medical Ship called the Pacific Link. YWAM MSA is focused on overcoming poverty and saving lives through delivering sustainable, capacity building services.

YWAM MSA shares a motivation to provide people with: access to good health care; food, drinking water and shelter; opportunity for education; expression of culture, arts and entertainment; healthy relationships; exposure to Christian faith and values; fair and productive government; and the opportunity to work and develop.

YWAM MSA is implementing programs with its Medical Ship and land-based teams in rural PNG communities in association with key stakeholders and partners. All of YWAM MSA staff, including the Managing Director, are full-time volunteers.

YWAM MSA has made a 20 year commitment with the PNG National Department of Health to provide a range of much needed medical facilities. YWAM MSA is actively developing communities by addressing the health care and training needs in Papua New Guinea (PNG) alongside the priorities and vision of the PNG National Health Plan PNG National Department of Education, and AusAID's commitment to the UN's Millennium Development Goals.

.../2

Office Address: Suite 14B 1st Floor 421 Brunswick Street Fortitude Valley Old 4006 Postal Address: PO Box 907 Fortitude Valley Post Shop Fortitude Valley Old 4006 Tel: (07) 3252 7101 Fax: (07) 3252 8957 Local Call: 1300 301 879

Email: senator.moore@aph.gov.au

www.clairemoore.net

YWAM MSA has the unique ability to overcome isolation and lack infrastructure through the use of a ship, allowing access to many PNG communities which lack basic service delivery. YWAM MSA's clinics include; dentistry, primary health care, immunisations, antenatal checks, malaria testing and treatment, optometry and ophthalmology. In addition, YWAM MSA is able to provide training programs for rural healthcare workers and various health promotion initiatives for the school children and the general community run simultaneously to the clinics.

YWAM MSA has been operating in the Gulf and Western Provinces of PNG since 2010. To date, 106,384 health, training and community development outcomes have been achieved.

YWAM MSA's current vessel, the MV Pacific Link, is past its optimal lifespan, and has reach its limits in the locations it is able to access and the outcomes it is able to achieve.

YWAM MSA seeks financial funding of \$3.5AUD million from the Australian Government per annum for a period of ten years (2013-2021) to help fund the acquisition of a new vessel to address some of PNG's most critical health concerns. YWAM MSA's new vessel will have onboard and mobile training facilities, a laboratory and extensive medical facilities and supplies. The model will allow for trainers to equip village leaders, rural health care workers, and medical professionals on the treatment and prevention of TB, Malaria, HIV/AIDS and other communicable diseases in their communities.

I am happy to support this organisation and to be contacted for further information.

Yours sincerely,

Senator Claire Moore Senator for Queensland

6 December 2012

Office Address: Suite 14B/1st Floor 421 Brúnswick Street Fortitude Valley Qld 4006

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Premier of Queensland

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MESSAGE FROM THE PREMIER OF QUEENSLAND

I am writing to endorse Youth With A Mission's (YWAM) Medical Ships Australia.

Medical Ships Australia (MSA) operates a vessel in the remote villages of Papua New Guinea, undertaking much needed community development, including health services and training.

I commend YWAM MSA's commitment to reduce poverty and achieve major sustainable health improvement in Papua New Guinea through the efforts of young Australian volunteers.

This important work complements operations being undertaken by the Papua New Guinea, Australian and Queensland governments in this region.

Once again, I am delighted to endorse this YWAM MSA enterprise.

CAMPBELL NEWMAN





THE HON STEPHEN SMITH MP

MINISTER FOR FOREIGN AFFAIRS PARLIAMENT HOUSE CANBERRA ACT 2600

Ms Rebekah Hoover and Mr Ken Mulligan 10 Humphrey Street West End QLD 4101

07 JAN 2810

Dear Ms Hoover and Mr Mulligan

Thank you for your request to meet to discuss Youth With a Mission's Marine Reach program for Papua New Guinea at the Community Cabinet in Townsville on 8 December. I regret that I was unable to attend.

Australia and PNG enjoy very warm and diverse bilateral relations. Strong people-to-people links – built on initiatives such as the proposed YWAM 'Marine Reach' program – provide the foundations of our strong and enduring relationship with PNG. The Australian Government recognises the important role of voluntary organisations in promoting development in countries like PNG.

My understanding is that YWAM may be planning a 'Marine Reach' medical ship tour of PNG's Western Province (as well as Gulf Province) in 2010. As you would be aware, access for PNG citizens to health services in remote parts of Western Province, especially the coastal villages, is very poor. The Australian and PNG Governments have been working closely to address this problem and other cross-border health concerns. In particular, our governments have been jointly developing a package of measures aimed at enhancing health service delivery in Western Province and the border region. When fully implemented, the package is expected to provide better access to medical services for PNG nationals in coastal villages of Western Province.

Any measures by YWAM to provide better access to health services in Western Province would be most welcome, as long as these were supported by the PNG Government. I would encourage YWAM to coordinate with the Australian Government to ensure your activities complement bilateral activities already underway. I suggest that Tracey Tam from AusAID (ph: 02 6206 4520) would be one of the best people to contact, in regards to this issue.

Thank you again for bringing the YWAM Marine Reach program for Papua New Guinea to my attention.

Yours sincerely

Stephen Smith

David Crisafulli MP

MEMBER FOR MUNDINGBURRA

6 July 2012

TO WHOM IT MAY CONCERN

I am writing in support of the Youth with a Mission (YWAM) Townsville.

YWAM Townsville has been an incredible asset in the North Queensland region over the past 20 years. With 100 fulltime volunteers, they aim to serve, build, care and connect with communities, in particular young people.

They have equipped over 2,000 young adults to serve in communities around the globe, with a strong focus in the North Queensland Region, where they have assisted hundreds of thousands of individuals over the years.

Their youth programs build capacity in education systems and community groups and offer mentorship and leadership training at a peer-to-peer level, equipping young people to be future leaders in our region. YWAM Townsville also helps operate a medical ship in Papua New Guinea, which delivers lifesaving community development and health services.

I have no hesitation in supporting this wonderful community organistion.

Yours sincerely,

David Crisafulli MP

Member for Mundingburra

David Gisafelli

Shop 3, 198 Nathan Street, Aitkenvale Qld 4814

P 4725 4166

E mundingburra@parliament.qld.gov.au

F 4725 4194





OFFICE OF THE MAYOR >>

TOWNSVILLE CITY COUNCIL ADMINISTRATION BUILDING 103 WALKER STREET

PO BOX 1268, TOWNSVILLE QUEENSLAND 4810

TELEPHONE >> 07 4727 9200 FACSIMILE >> 07 4727 9053

enquiries@townsville.qld.gov.au www.townsville.qld.gov.au

To Whom It May Concern:

Date >> 19 June 2012

I am writing to give my strong support for YWAM Townsville on behalf of Townsville City Council

YWAM Townsville has been an incredible asset in the North Queensland region over the past 20 years. With 100 fulltime volunteer staff, they aim to serve, build, care and connect with communities, in particular young people. I've observed that YWAM's work at the grassroots level is assisting individuals and families on a one-to-one basis while simultaneously helping to shape the community at large.

Their values-based training has equipped over 2,000 young adults to serve in communities around the globe, with a strong focus in Townsville and the North Queensland Region, where they have assisted hundreds of thousands of individuals over the years. Their youth programs build capacity in our education systems and community groups and offer mentorship and leadership training at a peer-to-peer level, equipping young people as future leaders in our region.

YWAM Townsville also helps operate a medical ship in Papua New Guinea, which not only delivers life saving community development and health services, but also builds capacity by engaging Australians.

All of YWAM's work is driven by visionary leadership and underpinned by a strong operations team who understand the value of cooperative and collaborative partnerships. I am very privileged to have their presence in this community and the greater region and consider them one of our areas wonderful treasures.

I strongly recommend that you lend whatever support or funding you are able, to help YWAM build capacity and further extend their reach in this area. Your value for money will be hard to match.

Yours sincerely

Cr Jenny Hill

Mayor of Townsville

6.3 News Articles

Young medics embark on vital voyage

A BAND of Townsville youths set sail today with a lifesaving mission ahead.

Youth With A Mission volunteers will be armed with more facilities and medical equipment than ever before when they leave on their fourth annual medical trip to Papua New Guinea.

Medical coordinator Hannah Peart said last year they had already noticed a dramatic improvement to oral hygiene, a decrease in cataracts cases and a boost in immunisations.

"We are treating less and less people for glasses now which is fantastic," Ms Peart said.

"At the beginning some of these places didn't have any immunisation and it is nice to see some things come to a closure.

Program co-ordinator Anna Scott said major refurbishments to the ship would increase their reach this year.

"We have more space for dentists, a new vaccine fridge and we have purchased a third smaller boat," she said.

Jane Armitstead



REMOTE FOCUS: YWAM co-ordinator Anna Scott on the deck of the medical ship heading to PNG. Photo: EVAN MORGAN

Medical ship o

THE Youth With A Mission (YWAM) medical ship has arrived in Port Moresby to begin five months of medical and community development outreach in the provinces of Gulf, Western and National Capital District.

It is the medical ship's fourth trip to PNG.

In the past three years, YWAM Medical Ships Australia (YWAM MSA) has achieved 106,384 outputs in PNG including primary health care, dentistry, optical services, health promotion initiatives and capacity building for rural health care workers, dentists and optical work-

This year, it will be developing the scope of their operations in PNG, through the use of the recently refurbished clinic.

An additional smaller boat will enable access to smaller, remote vil-

YWAM MSA will also introduce

new medical programmes this year, including HIV testing, tuberculosis health promotion, water and sanitation initiatives and further training for rural health workers.

InterOil will provide fuel for the medical ship for the next three years of operation in PNG.

YWAM MSA managing director Ken Mulligan said: "We have wonderful relationships here in Papua New Guinea that provide great support in assisting with health, training and development needs. InterOil's partnership with YWAM MSA has added tremendous strength to our operations, we look forward to another outreach season in PNG."

InterOil's corporate communications officer Damaris Minikula said: "YWAM's outreach programmes give locals access to medical assistance that they would only dream about. We are happy to continue our support to YWAM by providing fuel for the outreach programmes.'

Steamships donate K40,000 to YWAM medical ships

STEAMSHIPS Trading Company (STC) has donated K400,000 to Youth with A Mission Medical Ships – Australia (YWAM MSA) for medical and training outreaches in Papua New Guinea.

STC Group logistics general man-ager Robin Bradshaw presented the cheque yesterday to YWAM MSA's managing director Ken Mulligan at the Steamships Coastal Shipping ofThe funding was a key part of YWAM and STC's four-year partnership to deliver health services in rural and remote areas of Western and other provinces.

Bradshaw said Steamships recog-

nised the importance of strong relations with the communities,

"Helping YWAM provide health services to the rural community aids progress towards local and na-tional development goals," he said.

Mulligan said YWAM would not be able to carry out its programmes

without the support from STC.
"It's a wonderful reflection of STC's commitment to PNG," he

POSITIVE IMPACT: Anna Scott, who co-ordinates the dental chair program, with Daryl Holmes and Sue Willis.

Photo: ZAK SIMMONDS

New chair to help take a bite out of dental issues

A CUSTOM-MADE dental chair donated by the *Townsville Bulletin* is making its way to Papua New Guinea, where it will help increase the quality of life for thousands of locals

for thousands of locals.

The 15kg chair isand is designed to be easily packed up and carried through the

mountainous terrain of the developing country. 1300SMILES managing di-rector Daryl Holmes, who sponsors regular trips to Papua New Guinea, said many of the people they helped had been living with

ongoing problems.

"Often you'll pull out a tooth and a piece of stick will come out too," he said.

will come out too," he said.

"You ask them what that is, and they say they tried to knock it out themselves (because it was painful)."

The Bulletin was one of 12 organisations that purchased a \$2995 chair at a fundraiser yesterday.

Townsville Bulletin general manager marketing and sales Sue Willis said it would be well used.

"When you think of the amount of good one of these chairs can do to the whole community, it's fantastic," she said.

she said.
"We have a fund for dowe have a titule to do nations and community support and I'm pretty specific about spending it on ways that make a real difference. It's so portable, which means you can get into remote places and get into remote places and make a difference to the make a community."

Emma Channon

YWAM conducts dental treatment on STC staff

YOUTH With A Mission medical ship continued its support in the much-needed medical services to Port Moresby residents.

On its second annual Port Moresby outreach, YWAM Medical Ship opened its doors last Monday at the Steamships wharf.

With the aim of addressing health care and training needs, 96 volunteers from all over the world took part in this joint oneration.

needs, 90 volunteers from all over the world took part in this joint operation.

Founder and director of 1300 SMILES in Australia Dr Daryl Holmes is leading the dental team. Dr Holmes is proud to be part of the team to help the unfortunate who cannot afford dental clinic treat-

ment.
Employees of Steamships took turns to go on-board for oral health care treatment and education.
They expressed that oral health care was vital but had been neglected.

YWAM will be running optometry clinics in asso-ciation with Brien Holden Vision Institute and PNG Eye Care at the Kila Kila Urban Clinic throughout



An employee of Steamships Trading Company undergoing dental treatment

YWAM back to provide health care

By MIRIAM MALAWA
YOUTH With A Mission
(YWAM) is back in Port Moresby for the second annual outreach of providing optometry clinics and primary health care.

The medical ship's last outreach was in Gulf two weeks ago.

It will carry out a week-long outreach in Port Moresby before leaving for Western on Sunday.

The team headed by founder and managing director for 1,300 Smiles in Sydney, Australia Dr Daryl Holmes provided dental care for the employers of Steamships, its major sponsor, on Mon-

Steamships has been providing support for the vessel in the past two years, including allowing the ship to berth at its wharf between visits to Gulf and Western.

"This is one of the best ways we "Ins is one of the best ways we can say thank you to Steamships for all they've done to provide us a home in PNG," Dr Holmes said.
"I cannot tell you how much it means to see these hard a high repeale come out with a high

ing people come out with a big smile on their faces, especially for some who have been in incredible

some who have been in incredible amounts of pain for a long time." In Port Moresby, YWAM will be running optometry clinics in association with Brien Holden Vi-



Dr Daryl Holmes (left) and assistant Rhonda Jewell providing dental care to Steamship staff Jill Charles. - Nationalpic by EKAR KEAPU

sion Institute Branch, PNG Eye Care at KilaKila Urban Clinic from 9am to 4pm on Monday, Thursday and Friday.

Primary health care clinics will

also be offered in Port Moresby as well as health promotion classes and religious education programmes running across a range of schools in the city.

Linguist joins youth

SUMMER Institute of Linguistics member Phil Carr has joined the Youth With A Mission (YWAM) medical ship Pacific Link in south-

(YWAM) medical ship Pacific Link in south-western Papua New Guinea.

The partnership proved beneficial to both or-ganisations, as well as to the people living along the Fly, Bamu and Gama rivers in Western.

the Fly, Bamu and Gama rivers in Western.
YWAM had been dispatching a ship from Australia for the past three years to improve quality of life for people in remote areas of Papua New Guinea through medical services and through upgrading of skills of local health workers.

As Carr had worked as a linguist in Papua New Guinea for the past 25 years, he was able to interpret for the local people in some of the villages.

He translated primarily for the optometry team and, occasionally, for doctors and nurses when they evaluated and treated sicknesses ranging from tuberculosis to malaria to malnutrition.

from tuberculosis to malaria to malnutrition.

He helped team members understand local cul-

ture and customs, Travelling on the YWAM ship was beneficial for Carr.

He was able to reach remote areas that had pre-iously been inaccessible to him. He studied the Bible with pastors and sold scripture portions, Bible study books, DVDs and CDs in several lo-

cal languages.

The Kiwai speakers listened attentively as he shared a dramatic reading of a draft of Jonah in their language.

their language.

In his interactions with people living along the Gama River, Carr was able to confirm that their language was a dialect of Bamu, not a separate language. Some villages they visited were very

remote and extremely poor.

It was satisfying to bring medical expertise to people who normally could not access health care

An elderly man could not see even the biggest letters on the eye chart when he was evaluated, but after the optometrist gave him glasses, he

Tue may 28 2013 - Past Counier

Medical ship on PNG outreach

The Youth with a Mission (YWAM) Medical Ship arrived in Port Moresby on Sunday, May 5 to begin five months of medical and community development outreach in the Gulf Province, Western Province and National Capital District.

This year represents the Medical Ship's fourth voyage the YWAM Medical Ship has made to PNG.

Over the past three years, YWAM Medical Ships – Australia (YWAM MSA) has achieved 106,384 outputs in RNG including; primary health care, dentistry, optical services, health promotion initiatives and capacity building for rural health care workers, dentists and optical workers.

This year YWAM MSA will be developing the scope of their operations in Papua New Guinea, through the use of the recently refurbished clinic, as well as an additional smaller boat. This will enable access to smaller, remote villages.

YWAM MSA will also be introducing new medical programs this year, including medical HIV testing, tuberculosis health promotion, water and sanitation initiatives and further training development for rural health

The ship's return to PNG was helped made possible through YWAM MSA's partner, InterOil, who have provided fuel for the Medical Ship for the next three years of operation in PNG.

Managing YWAM MSA Mulligan Director, said, "we Ken wonderful have relationships here in Papua New Guinea that provide great support in assisting with health,

and training needs. InterOil's partnership with YWAM MSA has added tremendous strength to our operations, we look forward to another outreach season in PNG.

InterOil's Communications Damaris Minikula stated, "YWAM's outreach programs Minikula stated. gives locals access to medical assistance that would only be dreamed of. We are happy to continue our support to YWAM by providing fuel for the outreach programs.

Interviews and photographs can be arranged with Anna Scott, YWAM Medical Ships – Australia, 7254 0611, annas@ ywamtownsville.org, or

Damaris Minikula, InterOil Corporation, 3099 300, damaris. minikula@interoil.com

K4m boosts programme

YOUTH With a Mission director Ken Mulligan has welcomed a K4 million assistance by the Government to buy a new ship.

He said it would boost YWAM's medical programme to reach more people and give them help.

Mulligan told National Planning

and Monitoring Minister Charles Abel on Wednesday that his team of medical volunteers was encouraged to serve the needs of the rural people in Western and Gulf.

"This is an exciting time for us and a wonderful privilege to make a difference in the lives of the people," he

"We are encouraged and would want to encourage more young people to work together to make a difference.

"We are thankful for the support from the Government and are ready to serve

"Our team is committed to Papua New Guinea."

CatholicNEWS

Youth on a voyage





TOWNSVILLE city leaders met for breakfast recently to throw their support behind Youth with a Mission's

breakfast recently to throw their support behind Youth with a Mission's medical ships.

The ship headed to Papua New Guinea with medical and dental staff on board last month.

Thanks to its supporters, the medical volunteers went armed with more facilities and medical equipment than ever before.

Townsville Bishop Michael Putney said he supported the invaluable work because he understood how great the need was in PNG.

"When we were in Port Moresby last year, we took the opportunity to introduce Archbishop John Ribat to the YWAM ship and he was very impressed by the work that the crew do for the people of Papua New Guinea," Bishop Putney said.

"When I hear stories of the work the volunteers are doing in dentistry, primary health care and restoring sight to people I am just so grateful for this initiative of YWAM.

"The best support people can give, after praying for the volunteers, is to help fund the work."

Two of the registered nurses who

Services NQ nurses Pip Earl and

Services NQ nurses Pip Earl and Kathleen O'Keeffe.

The nurses will join the crew from July 20, in Port Moresby.

Ms Earl successfully lobbied Mater Health Services to make a generous donation to YWAM.

Former Prime Minister of PNG Sir Rabbie Namaliu praised the medical ship and its volunteers who have set off on a five-month healthcare tour providing services including immunisation, dental care, optometry and antenatal advice.

It is the YWAM ship's fourth visit to PNG and it also marks the 30th amniversary of Townsville and Port Moresby's sister city relationship. A spokesperson for YWAM said the recently refurbished on board clinic and an additional smaller boat meant they could expand their work and enable access to smaller, more remote villages.

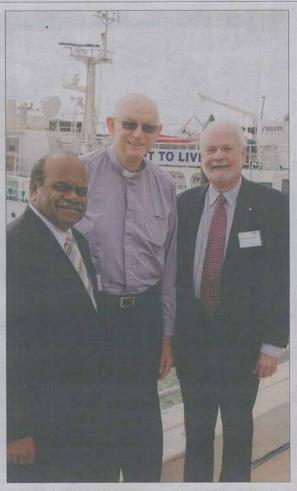
enable access to smaller, more remote villages.
"It is the unwavering support from

"It is the unwavering support from the Townsville community that has helped make the last three years a success in Papua New Guinea," the spokesperson said.

The added support means YWAM can introduce HIV testing, tuberculosis health promotion, water and sanitation initiatives and further training development for PNG's rural health workers.

"The best support people can give, after praying for the volunteers, is to help fund the work."

Two of the registered nurses who will fly to join the medical team on board next month are Mater Health



UNWAVERING SUPPORT: Sir Rabbie Namaliu, Bishop Michael Putney and YWAM medical ships patron Mike Reynolds.



A heart to help people

(YWAM MSA) has returned from an

Medical Ships-Australia his residency just days prior to MSA) has returned from an joining the ship's outreach. His

fellow university graduates and friends, Nerida and Elsic, had been on the outreach earlier in the year, and gave him a call to suggest going.

Now on the other side outreach, Thomas reflects: "With this experience I know first hand the amount of heath care there is, and the amount of people that receive it. There are a lot of provinces that face these problems, the Western Province being one of the worst. Accessibility is a big issue here. It's terrible what they go through, what they have to face," he said. In the five villages the ship

anchored offshore in the two week period, Thomas was involved in several critical situations, including treatment of a six week old baby with severe respiratory problems. "He was in such a bad way, we all knew we had to act quickly to at least give him a fighting chance," Thomas said

A man from a different village was brought to the clinic to be seen after suffering serious burns over much of his body. Thomas and the health care team were able to dress his wounds and show the local health care worker, the care the man would need after the team had gone.

Later, Thomas added; "My ambition in becoming doctor...is heart to help people. For me I thought this was probably the best way I could achieve that. It doesn't matter if I take all the training, I have just saved one life; it would all be worth

YWAMMSA has been conducting outreaches for the past four years, aiming to address the lack of accessibility to health care found in these

It continues with its partners, the PNG national department health, Western provincial government, gulf provincial government, steamships trading, doctors, nurses, dentists, community health workers and volunteers, to bring hope through health services and training that can increase quality of life in these areas.

Doctor Thomas Kiele working in the YWAM MSA Clinic

outreach in the Western Province. Sailing on board was their 28th Papua New Guinean volunteer so far

PNG Doctor, Thomas Kiele, finished



Sister cities mark 30 years

By FIDELIS SUKINA
PORT Moresby and Townsville celebrated 30 years of sister-city relationship with high hopes for better things to
come as the relationship progresses.
The Townsville contingent to Port

Moresby was hosted by Governor Pow-es Parkop and staff at a dinner at the

Grand Papua Hotel last Friday.

They exchanged gifts and vowed to continue the sister-cities relationship.

Parkop said the initial concept for the

sister-city relationship 30 years ago was cultural but it was now leaning more towards business, social and technical support with a recent exchange of technical manpower.

Parkop said more direct flights and shipping services to Townsville were expected soon. He also praised the con-tinued medical assistance by Youth With a Mission, a medical training ship based in Townsville, which recently travelled

the Gulf of Papua providing medical as-sistance to rural communities. Mayor of Townsville councillor Jen-ny Hill said the signing of the agreement ny rill said the signing of the agreement 30 years ago was a unique bond shared in history and culture and a leading symbol that withstood political life from one government to another.

Hill also praised Port Moresby for being the first to respond during the flood disaster in 1998 in Townsville.

New ship a boost to **PNG** mercy missions

by David **Sparkes**



THE Townsville arm of Youth With A Mission will buy a new medical ship, allowing it to reach 1.3 million villagers in Papua New Guinea's most remote provinces.

The PNG Government has agreed to donate \$1.6 million toward the new vessel, which will be much larger and more modern than YWAM's current 37m vessel, Pacific Link.

The organisation has a specific vessel lined up, but chief executive officer Ken Mulligan said he could not provide more details until the deal was finalised.

The \$1.6 million contribution part of the total value and dis-cussions with other donors are advanced.

"It's looking very favourable that we will be getting another ship shortly," Mr Mulligan said.

"I think it's been a lot of work for many, many people to get to this

point and the PNG Government is acknowledging the incredible work that is coming out of Townsville to strengthen the Sister City

YWAM plans to dramatically expand its operations once it gets the new ship.

It will allow the medical team to reach 1.3 million villagers each year, tripling the current number.

It will spend 11 months a year in PNG, compared with the Pacific Link which is only capable of six months

In addition, the new ship will be big enough to function as a "mother-ship", launching smaller vessels and reaching more villages.

Mr Mulligan and former Towns-ville MP Mike Reynolds were flying to PNG last night, where they will meet former PNG prime minister Rabbie Namaliu, as well as the cur-rent Health Minister and the Minister for Planning and Development

The Pacific Link, now 33 years old, was launched as YWAM's medical ship in 2010 and is currently on its way back to Townsville.



The Pacific Link.

Mr Mulligan said the organisation

had outgrown the Pacific Link.
"It's always been in our plan to retire the current ship, even since the inception of taking the vessel into he said.

'It's been a pilot vessel. 'We've used it very successfully doing a lot of surveying work and finding out what will and won't

"We would like to expand our services.

"Currently we are operating in two provinces, but now we are looking at five provinces plus the (National Capital District)."

YWAM's medical operations in PNG have expanded every year since Pacific Link was launched.

The ship sails to isolated villages where medical treatment is virtually inaccessible.

The crew and medical professionals, all unpaid volunteers, usually stay at a village for a two-week "outreach", running clinics in primary healthcare, optometry, den-

tistry and ophthalmology.
Mr Mulligan said YWAM was gradually building Townsville's awareness of the disadvantages people face in PNG.

"We've been so grateful for the all support from Townsville, it has been outstanding," Mr Mulligan said. "This is a wonderful opportunity

for us to make a difference

Mission delivers daily doses of medical aid

Sparkes



WHEN Makasi left her rewhen makes left her re-mote village in Papua New Guinea, paddling for two weeks in a canoe with her husband and three children, she had a glimmer of hope. She had been told that far

away, in Daru village, she might find a cure for the blindness that had prevented her from ever seeing her children's faces

The 27-year-old was born with congenital cataracts and had been virtually blind

and had been withdam young since the age of 17.

The Townsville-based Youth With a Mission medical ship was docked at Daru for two weeks in September for two weeks in September and its team gave hundreds of villagers, like Makasi, medical treatment that Aust-ralian's take for granted.

New Zealand optometrist Julie Jones said when Makasi arrived to see the YWAM team, she could not see a hand waving a metre in front of her.
"She had to be led in by her

husband," Dr Jones said.
"Her eyes were downcast

and her face was expression-less. When we asked her to sit down, she had to put her hand out to feel where the

YWAM's ophthalmic team performed two 30-minute procedures to remove catar-acts from both of Makasi's eyes. The results allowed her to see her children smile for

the first time.
"When Makasi came in the day after her surgery for post-op, she was a completely different person," Dr Jones said. "She didn't need anyone to guide ... she was independent and engaged, and could see almost to the bottom of the eye chart."

To say the YWAM team was busy in Daru would be an understatement – the ship's optometrists completed 71 eye surgeries on 65 patients

in two weeks. That doesn't count other medical procedures completed on the same mission.

Those numbers are the tip of a medical iceberg. Daru was just one of seven two-week missions completed by the ship at different villages this season.

Now the season is coming to an end and the medical ship is in Port Moresby, preparing to returning to its home base in Townsville

home base in Townsville within a fortnight.

The team will return to PNG next March. Since its launch in 2010, the medical ship has visited more than 500 villages.

YWAM relies entirely on donations to operate the medical ship and all its crew are unpaid volunteers.



NEW WORLD: Mother-of-three Makasi, 27, is pictured with her husband Wiesa and their children.



Mother of 3 regains sight

TWENTY-SEVEN year old mother of three, Makasi, was one of 65 patients who received eye surgery at Daru hospital.

The operation was part of the YWAM medical ship's health and training service delivery in Papua New Guinea which is now in its fourth year.

Makasi had congenital cataracts — a clouding of the lons since birth — which caused her eyesight to deteriorate throughout her life and eventually go blind at age 17.

Makasi's husband Wiesa did the gardening, made sago, fished and took care of the children while she remained house-bound — unable to provide for their family

The couple paddled for two weeks by cance with their children aged 5, 3 and 1 from their village in the South Fly to meet the YWAM medical ship in Daru to have her eyes tested.

YWAM MSA's optometrist, Julie Jones, a volunteer from New Zealand, recalls meeting Makasi.

"When Makasi walked into the room she had to be led by her husband. Hereyes were downcast and her face was expressionless. When we asked her to sit down, she had to put her hand out to feel where the chair was."

After tests, the ophthalmic team concluded that Makasi was a surgical candidate.

The two 30 minute procedures to remove the cataracts from both eyes produced immediate results and Makasi w her three children for the first time

produced immediate results and Makasi saw her three children for the first time in her life.

"When Makasi came in the day after her surgery for post-op, she was a completely different person. She didn't need anyone to guide her around the room; she was independent and engaged. She could see almost to the bottom of the eye chart," said Julie.

Makasi is one of thousands of people that have benefitted from YWAM MSA's services and training in the Gulf and Western Provinces.

This year alone, YWAM MSA has achieved milestones in immunisation, family planning, primary health care services, dentistry procedures, optical services and training for rural health workers.

services and training for rural health workers.

The YWAM MSA's outreach season was made possible through its partners — the National Department of Health, Steamships Trading Company, InterOil, Western Provincial Government, Gulf Provincial Government and PNG Ports Corporation.

The YWAM medical ship will be returning to Townsville in two weeks' time

If will come back to Papua New Guinea in March 2014 for its fifth outreach and medical mission.



THE young mother, Makasi, seeing her children for the first time while optometrist Julie Jones looks on encouragingly.



Mum sees children for first time after surgery

MOTHER of three Adua Makasi is seeing her children for the first time - after undergoing an eye surgery.

And she will be forever thankful to the Youth With a Mission (YWAM) outreach health programme, which recently conducted eye surgeries at Daru

Hospital in Western.

Makasi, 27, suffered from congenital cataracts, a clouding of the lens that is present at birth. It caused her eyesight to deteriorate, making her blind 10 years ago at the age of 17.

Since they got married, husband Wie-

sa did the family gardening, made sago, provided for the family and took care of the children.

Makusa remained most of the time at home because she needed help to move around.

When they heard about the free eye checks provided by the YWAM medical ship at Daru, they paddled in a canoe for two weeks from their village in South Fly to reach Daru with their children aged five, three and one.

They desperately wanted to reach the YWAM medical ship so that she could

have her eyes tested.

When the YWAM team first met Makasi, she could not see a hand waving a metre in front of her, let alone read an eve chart.

Optometrist Julie Jones, a volunteer from New Zealand, recalls meeting the

"When Makasi walked in the room she had to be led in by her husband. Her eyes were downcast and her face was expressionless," she said.

"When we asked her to sit down, she had to put her hand out to feel where the chair was."

After undergoing testing, the ophthalmic team concluded that Makasi was a surgical candidate. The two 30-minute procedures to remove cataracts from both eyes produced immediate results.

And Makasi saw her three children



A smiling Makasi with her family after her life-changing operation.

"When Makasi came in the day after her surgery for post-op, she was a com-pletely different person," Jones said.

'She didn't need anyone to guide her around the room. She was independent and could read almost to the bottom of the eye chart."

Makasi was one of 65 patients who received eye surgery at the Daru Hospital in the past two weeks.

The outreach is the fourth year of the YWAM Medical Ship's health and training service delivery programme in

This year alone, the YWAM MSA has

achieved 63,548 outputs including immunisations, family planning, primary health care services, dentistry procedures, optical services and training for rural health workers.

YWAM MSA's outreach season was helped by made possible through the Department of Health, Steamships Trading Company, InterOil, Western Provincial Government, Gulf Provincial Government and PNG Ports Corporation.

The YWAM Medical Ship will be returning to Townsville in two weeks.

It returns to PNG in March, 2014, for its fifth outreach programme.

Call for govt to honour MoAs

FORMER Prime Min-ister Sir Julius Chan has warned the Government to honour its obligations under various memoranda of agreement by paying arrears in major extractive industries.

Sir Julius, now the New Ireland Governor, said no affected parties should be forced to go to court and arbitration to order the State to pay for commitments made

He said the bureaucracy in Waigani had a poor record of honouring Government's commitments relating to agreements with the provinces.

He was responding to a media report yesterday regarding the order by an arbitrator that PNG must fulfill its commitments to the Solwara 1 seabed mining in New Ireland.

Sir Julius said the Government owed New Ireland more than K120 million in outstanding SSG arrears and had failed to implement projects under the Lihir MoA.

The Government has been ordered to pay K295 million to Nautilus Minerals, the developer of the project, by Oct

Sydney-based arbitrator Murray Gleeson issued an award in favour Nautilus Minerals in respect of issues that were the subject of a notice of arbitration initiated by the Government.

Govt pledges K4m

THE Government will provide a K4 million grant to Youth With A Mission's medical ship programme.

Youth With A Mission (YWAM) is a non-profit organisation that brings overseas volunteer health professionals to PNG to provide medical services in remote communities.

The volunteers help train PNG medical officers.

The K4 million will help to buy a replacement medical ship because the current one is old and set for retirement in 2015.

The total cost of the ship was around K20 million.

YWAM and its donors will meet the remainder of costs.

The medical ship would operate around the southern region and be mainly staffed by international and

PNG doctors who were volunteers.

The K4 million cheque will be passed on to YWAM patron, Sir Rabbie Namaliu this week.

The Government decided to assist them continue with their volunteer work as partners in development. They bring much-needed medical services to remote communities such as those in Western.

Minister National Planning

Charles Abel said the initiative was part of a strategy to improve implementation and procurement through innovative ways of delivering ser-

"We are proud to support their continuing operation.

"We are using K4 million from the social development programme of the churches from past allocation,' Abel said

Post-Courier

Healthy smile for isolated villagers

 $K^{ ext{UDOS}}$ to the Townsville-based Youth with a Mission (YWAM) medical team for bringing a smile to the faces of ordinary Papua New Guineans in some of the country's most isolated villages.

From the Gulf to the Western Provinces and in collaboration with provincial health authorities and community leaders, the team rolled out critical health services, training and community services over a four-year period. It was a her-culean effort and Papua New Guineans cannot thank you enough for the services you have

Sadly MV Pacific Link, the vessel which the team and their PNG colleagues used to carry out some of those life-saving medical intervention programs, will retire in 2015. But the good news is the seed has been planted and a foundation will now be laid following the decision by the O'Neill Government to provide funding for the commissioning of a new vessel.

National Planning and Monitoring Minister Charlie Abel was on hand to announce the Government's support.

"We have been so pleased with the way the mission has been able to use their current medical ship to overcome isolation in the Gulf and Western Provinces. We see that this is a very good strategy for developing health systems in our nation. We want to maximize this opportu-nity for partnership by helping to provide the resources to expand these services for our peo-

The new ship, upon its arrival in PNG, would provide services to 1.3 million Papua New Guineans who reside in the country's Southern region. The governors for the Western, Gulf, Central, Milne Bay and Oro provinces have invited the YWAM to extend services to their respective provinces. Governors Ati Wobiro (Western Province), Havila Kavo (Gulf), Kila Haoda (Central), Titus Philemon (Milne Bay) and Gary Juffa (Oro) should be commended for jumping at this rare opportunity to bring medical services to their people via the programs offered

by the mission.

The ability of the new vessel to accommodate more people also opens the door to the engagement of more Papua New Guinean medical professionals, enabling them to interact and learn from their Australian counterparts as they attend to and provide basic health care to Papua New Guineans. Last month the Department of Health Secretary Pascoe Kase revealed plans by the Government to re-employ retrenched and retired health workers in a bid to address staff shortages in many of PNG's public hospitals. The YWAM program and the new vessel it plans to commission enables Mr Kase to kill two birds with one stone – provide rural Papua New Guineans with basic health care services whilst training young Papua New Guinean medical professionals.

Coincidentally, Mr Abel's Milne Bay Province was one of PNG's last Maritime Provinces to operate a "medical ship" in the 1980s and early 1990s. The Milne Bay provincial government-owned MV Heduru provided vital health patrols to coastal communities on the Milne Bay mainland as well as the islands of the De'Entrecaustaut and the Amphlett group before it was decommissioned. The return of the new YWAM vessel to the waters of Milne Bay would bring back memories of the floating hospital which saved lives back then.

YWAM gets K4 million from Govt to retire Pacific Link

By FRANKLIN KOLMA

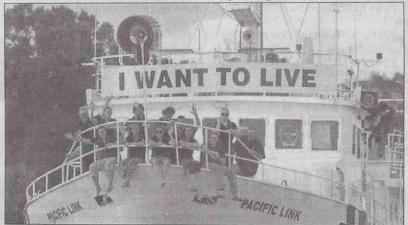
THE PNG Government through the Department of National Planning and Monitoring is giving Youth With A Mission Medical Ships Australia (YWAM MSA) a K4 million grant to further their work in the country.

The cheque presentation will take place this morning on YWAM's medical vessel docked at Port Moresby's dry dock facility and will be presented by Minister for National Planning and Monitor-ing Charles Abel to YWAM MSA's PNG patron Sir Rabbie Namaliu and YWAM MSA's Australian Patron Mike Reynolds.

YWAM is a none-profit organisation that has been operating in the country since 2009 providing medical aid and training for people living in remote areas of PNG. The medical supplies, services and staff are usually delivered by YWAM MSA's sole serving ship in the country, the MV Pacific Link which was long in service before its PNG calling.

The grant will enable YWAM to buy a new servicing, training and medical ship for future outreaches both in PNG and abroad as the currently used MV Pacific Link's long service is planned to come to an end when the ship is retired in 2015.

The cost of the new ship as provided by YWAM's media team will be around K20 million and will see a new ship traversing PNG's Southern Region in particular.



YWAM's eye surgery team that saw to the removal of more than 10 cataracts cases and helped 65 people to regain sight.

YWAM concludes 2013 program

By FRANKLIN KOLMA

YWAM Medical Ships Australia (YWAM MSA) ended their yearlong outreach in Papua New Guinea by performing 71 eye surgeries at Daru hospital over the past two weeks, helping to restore sight for 65 people.

The outreach marked YWAM Medical Ship's fourth year of delivering health and training service to

rural parts of Papua New Guinea. This year YWAM Medical Ships had over five outreaches in the Western Province. The ship sailed along the Bamu and Fly Rivers giving health care and medical training to areas that have been suffering from lack of infrastructural development

and basic services.

The 2013 YWAM MSA output statistics provided by the ship's media team showed a total of 63,548 outputs including immunisations, family planning, primary health care services, dentistry procedures, optical services and training for rural health workers.

This year's outreach season was made possible by the Department of Health, Steamships Trading Company, InterOil, Western Provincial Government, Gulf Provincial Government and PNG Ports Corporation. The YWAM Medical Ship will be returning to Townsville, Australia, in two weeks time before returning to PNG in March next year for its fifth outreach season.



A MEDICAL ship operating from Townsville has won two international awards for its work in some of Papua New Guinea's most remote provinces.

The Youth With a Mission Townsville branch has received awards at ceremonies in Dublin and New York in the past month. The recognition comes as YWAM unwinds after another successful six-month season in PNG.

Townsville medical co-ordinator Jennifer Perry travelled to Dublin where she received the Excellence in Ophthalmology Award on behalf of YWAM.

That award is an initiative sponsored by Novartis Pharma and Alcon, and led by medical specialists in the field of eye care. It came with \$71,000, which will go toward upgrading equipment, consumables and the development of a training package for local ophthalmologists.

Ms Perry acknowledged Brisbane-based ophthalmic nurse, Lynette Grubwinkler and Townsville ophthalmologist Dr Bill Talbot for their assistance in restoring sight in PNG.

The other award was won jointly by 1300SMILES and YWAM in New York The Edward B Shils Award for "Passion, Dedication and Leadership in Bringing Much Needed Health Care to the Underserved in Papua New Guinea."

David Sparkes



STERLING EFFORT: YWAM managing director Ken Mulligan, clinic leader Dexter Bird, medical coordinator Jennifer Perry and 1300Smiles managing director Daryl Holmes with the awards.

Photo: ZAK SIMMONDS

ission

HEN YWAM volunteers step off their medical ship, the Pacific Link,

they walk into another world. YWAM Townsville managing director Ken Mulligan says it can be hard for people to fathom the extent of poverty in Papua New Guinea. He recalls the time he was on the ship

ferrying extra food supplies to a village that had lost its crops to a flood. When volunteers arrived, armed with

When volunteers arrived, armed with bags of rice and flour, they were surprised no one in the village had utensils they could use to cook the food. "When you go in, it's very remote and it's very poor," he says.

"Some areas are just horrendous..." it's quite confronting and there's quite a desperation and a cry from those who

a desperation and a cry from those who feel very isolated and forgotten." Since 2010, the *Pacific Link* has sailed to PNG for six months a year, delivering

vital medical care to those living in villages inaccessible by road or planes. The Christian charity is now in a state of flux, as they prepare to auction off their long-held West End residential

sites and move into new premises in the old TAFE building in Townsville's CBD.

CBD. Mulligan said the organisation was also fundraising to buy a new medical ship, the Ipipiri, a 45m catamaran. The PNG government has pledged \$1.6 million towards the purchase, with YWAM looking to raise the remaining \$7.5 million.

The new ship will allow YWAM to spend 11 months a year in PNG, servicing 100,000 people, five times the number of patients they can reach now. To donate, visit ywantownsville.org.

The auction of YWAM's residential properties will be held on December

properties will be held on December 7 from 11am at YWAM's headquarters at 125 Ingham Rd.

The auction will coincide with a community day.

Keyes & Co Property will handle residential sales with Colliers

International marketing the commercial properties separately.
Visit ywamtownsville.org for

updates on the community day, more information or to make a donation.



06



PIP EARL

Registered nurse, 56, Heatley

ast year was my first outreach with YWAM.

I had heard about them and it sounded like they were doing some really ng work and I want to always set a good example for my children to

exciting work and I want to always set a good example for my children to think of others and try and help.

We went to Western Province, we went up the Bamu River and the Fly River and were away for 17 days. I did immunisations and had to learn a lot about that because that wasn't my area. It was really hard work, we didn't have furniture, we had to sit on the floor and get through 70 to 100 children each day, but it was very rewarding. We actually had one clinic which was an abandoned church, but not a church as you know it.

It was up on stifts and had bamboo slats that weren't

church as you know it.
It was up on stills and had bamboo slats that weren't secured - twice, people fell through the floors - and we would try to set up our clinic there.
I have travelled in Asia before, but I've never seen anything as neglected and poverty-stricken as what I saw in the Western Province. It was shattering really to think they is so close to home and they just have no help, no support. It was an eye-opener.



SWICKLEY TOVA

ship engineer, 26, West End.

was born in Port Moresby, PNG.
During my childhood, I was involved in the typical teenage lifestyle, but then I became a national player for my country in the soccer team.

After some time I decided to go to church.

All those things I'd done in my past, I just dropped them

those things I a done in my past, I just dropped them and gave if up.

I started working on a mission ship as a trainee engineer in Singapore and came back to PNG in 2011.

YWAM called me up and asked me to go on the ship for an outreach.

I saw people from different countries, especially from

Australia, coming to provide medical aid to the rural parts of PNG.

It really warmed my heart and it made me want

to play my own part. I'm a member of the crew and one of the engineers on the Medical Ship. There was one outreach where a community had a solar system for the refrigeration of their vaccination that had been sitting there for two years and they d

that had been sitting there for two years and they never used it.
I'd never installed a solar system so it was a great experience for me to help these people get their refrigeration working for the first time.
My family is really happy with what I'm doing.

16.11.13 townsvilleeye.com.au

MEDICAL CLINICS WITH NO RUNNING WATER, NO ELECTRICITY AND, IN SOME CASES, NO WALLS, ARE NO BARRIER FOR THESE SELFLESS VOLUNTEERS. **KATE HIGGINS** TALKS TO VOLUNTEERS AND STAFF FROM YOUTH WITH A MISSION TOWNSVILLE ABOUT THE CHARITY'S GROWTH AND THEIR WORK IN PAPUA NEW GUINEA.





NAOMI COLWELL midwife and nurse, 29, West End.

ve been volunteering with YWAM Townsville and YWAM Medical Ships since 2011. The done seven outreaches so far in Port Moresby and the Western Province, up the Bamu River, up the Fly River, and then to Daru Island. I'm one of the clinic leaders for the primary healthcare team, so I do a lot of overseeing of the clinic but also fill in the gaps when needed, but my western is materials.

We assisted and trianktury tree baby was alive and murm was alive, but it was not an easy birth.

The baby was almost dead, and the mother had some complications as well and bled quite a lot.

A lay of times we don't not be.

A lot of times, we don't see the impact of what we do, like with immunisations, but

when you can save a baby's life and a mum's life, you see a result right away



JAN BRYDE pastor, 57 Douglas. COLIN BRYDE

administration, 53, Douglas.

administration, 35, Douglas.

Jans We heard about YWAM in 2001 when our son came to attend the Discipleship Training School. We lived in Tully at the time and we used to come here quite regularly. Then when I was posted as a pastor on Thursday Island, the Medical Ship stopped there and we did a tour. We decided this year was time to do our first outreach.

Colins We went to the island of Daru, the capital of the Western Province. We chose that because a lot of our parishioners from the TI Uniting Church came from Daru and that area.

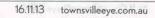
We were on the optometry team, so we did the visual

We were on the optometry team, so we did the visual assessments.

assessments.

Jans A. lot of the people had never had their eyes tested before. In the nine days we saw over 1000 people. The poverty was beyond what you could imagine. The appreciation of these people who have nothing and their gratefulness was amazing. Some of theme would be there before 9am and would be waiting to see the optometrist till 4pm and wouldn't whinge. They just sat and waited. They were amazing lessons to learn.





6.4 Newspapers In Education











6.6 Acronyms and Abbreviations

ABCD Asset-based community development
AIDS Acquired Immunodeficiency Syndrome

CH Child health

CHW Community health worker

CPR Cardiac pulmonary resuscitation

DEN Dental

DMPA Depot-Medroxyprogesterone Acetate

EA Engaging Australians

HIV Human Immunodeficiency Virus

HSH Henry Schein Halas

JCU James Cook University

KRA Key Result Area
Lymphatic Filariasis

LLHS Living Light Health Services
LLIN Long-lasting insecticidal net

MA Malaria

MDA Mass Drug Administration
MDG Millennium Development Goal

MDR Multi drug resistance
MH Maternal health

MMR Maternal mortality ratio

MOU Memorandum of Understanding

MSA Medical Ships – Australia
NCD National Capital District
NDOH National Department of Health

NIE Newspapers in Education

OPH Ophthalmology
OPT Optometry

OTFRDP Ok Tedi Fly River Development Program

PGK Papua New Guinea Kina
PHC Primary Health Care

PICS Provider Initiated Counselling and Testing

PNG Papua New Guinea
RAM Rotarians Against Malaria

RANZCO The Royal Australian and New Zealand College of Opthalmologists

RDT Rapid Diagnostic Test

SIA Supplementary Immmunisation Activity

STI Sexually Transmitted Illness

TB Tuberculosis

TBA Traditional Birth Attendant
UNICEF United Nations Children's Fund

UV Ultraviolet

VCT Voluntary Counselling and Testing

VHF Very High Frequency
WHO World Health Organization
YWAM Youth With a Mission







