**Current Situation**

Tropical Cyclone Pam has been described as the strongest cyclone to hit the Pacific Islands in more than a decade. The severe storm battered Vanuatu with winds of over 250 km/h and 1-metre storm surges. Kiribati, the Solomon Islands and Tuvalu were also impacted.

The total number of fatalities recorded to date is 11. The number of injured is increasing daily as patients, many with infected and untreated wounds, are beginning to access health facilities as transportation routes re-open. However, health service delivery has been severely disrupted, mainly due to the damage to health facilities; the interruption of transportation, communications, water and energy supplies is also having an impact.

More than 4,000 people have been displaced from their homes. While some are gradually returning home, many people remain displaced. The cyclone has affected more than 166,000 people in Vanuatu, representing more than 70% of the country’s total population of the country, and has caused widespread and severe damage throughout the country, particularly in the central and southern regions which experienced the brunt of the storm.

Assessment of the damage to health facilities is ongoing, and has been carried out mainly in the provinces of Shefa and Tafea. Assessments of facilities in Malampa and Penama have been initiated but are yet to be completed. Two of the six hospitals and four of the ten health centers assessed so far are severely damaged. It is expected that more than 30 health facilities will need reconstruction and/or rehabilitation once the assessment is completed. In addition, it is estimated that the cold chain equipment in around 18 health facilities will have been badly affected, requiring the replacement of solar chillers and panels.

Foreign Medical Teams (FMTs) are helping to provide a continuum of care. Already six FMTs have been deployed to the field, and two more will be deployed to priority areas in the coming days.

---

**PEOPLE AFFECTED**

160,000+ People affected

**HEALTH SECTOR**

Many health facilities are damaged, including the country’s main tertiary hospital in Port Vila and the main hospital on the island of Tanna. Assessment of other facilities is ongoing.

**Major health risks**

- Acute diarrhea due to lack of safe drinking water and poor sanitation
- Late treatment of infected wounds and fractures
- Ongoing Measles outbreak
- Communicable disease outbreaks, including dengue and leptospirosis
- Interruption of treatment of chronic conditions such as hypertension, diabetes, mental disorders
- Poor access to perinatal care

**FUNDING REQUIREMENTS**

US $3 million requested for WHO’s initial response to the crisis

$0 received 100% funding gap

US $4.9 million required by Health Cluster

**CONTACT**

**Country Office:**
Adam Craig, Information and Communications Officer
Email: craiga@wpro.who.int
Telephone: +678 775 3234

**Regional Office:**
Ryan Baker, Technical Expert, Risk Communications
Email: bakerr@wpro.who.int
Telephone: +63 2 528 9986

**Headquarters:**
Cintia Diaz-Herrera, Coordinator, Resource Mobilization and External Relations
Email: diazherrerac@who.int
Telephone: +41 22 791 1629
Health Risks

The demand for trauma care was less than expected in the days immediately following the cyclone. A week after the event, however, the number of emergency referrals for injuries and medical emergencies is increasing. A total of 30 emergency evacuations have been received by the Port Vila Hospital over the last two days.

The affected population is also at risk of potential outbreaks of communicable and vector-borne diseases. A measles outbreak, which had caused suspected cases in Sanma, Shefa and Tafea prior to the cyclone, could rapidly spread if not controlled by a mass and immediate immunization campaign.

Meanwhile, the reactivated surveillance system has detected an upswing in cases of acute diarrhea. This situation requires close monitoring, particularly in areas with severe damage to the water supply and sanitation. Leptospirosis, dengue and malaria are examples of diseases with epidemic potential, highlighting the need to have a strong surveillance system in place.

The underlying nutrition situation is also a concern. Almost one in three children are chronically malnourished (30%) indicating long-term nutritional deficiencies and inadequate feeding practices for infants and young children. While the moderate and severe acute malnutrition levels are relatively low (less than 5%), this is likely to increase due to the compromised health, water and food security situation following the cyclone.

Urgent actions are needed to promote and protect breastfeeding and adequate complementary feeding, and to ensure that severely acutely malnourished children are identified and treated. In addition, around 3,000 people continue to be hosted in evacuation centres and are in need of basic health and nutrition services.

The next few days and weeks are critical for treating survivors, and the time to reduce health risks and manage other health consequences is now.

Health priorities:

1. Support to Vila Central Hospital, including repairs to the morgue
2. Provision of medical supplies
3. Dissemination of rapid diagnostic tests and hygiene kits
4. Enhancement of disease surveillance and outbreak response
5. Health promotion activities to prevent the spread of measles, diarrhoeal disease

10+ active health partners

WHO is collaborating with the Vanuatu Ministry of Health, ADRA, Australian Government, IFRC, New Zealand Government, OCHA, Oxfam, Save the Children, UNICEF and World Vision.

Please note: The Government of Vanuatu has mandated that all international assistance must be coordinated through official government channels and international parties are not permitted to mobilize until approved to do so.

24 WHO Staff are in the country to support the emergency operations

WHO grading of emergency: G2
Heath Cluster and WHO Interventions

WHO is working with the Vanuatu Ministry of Health to co-chair the Health Cluster, bringing together a number of partners including foreign governments, NGOs and UN agencies in a coordinated response to this Grade 2 Emergency. An Emergency Support Team has also been established in WHO’s Western Pacific Regional Office (WPRO).

WHO has sent health and emergency response experts and supplies to Vanuatu to assist in the response, and is working with the Health Cluster to ensure Vanuatu gets the right resources to meet the population’s health needs. Some immediate health priorities identified by the Ministry of Health, supported by WHO, in the response phase of this emergency are:

1. **Prevention:** Activities focused on disease control, prevention and response to outbreaks of communicable diseases, focusing on the following activities:
   - Early Warning and Response Network (EWARN) establishment (syndromic and event based surveillance for diseases)
   - Vaccination (i.e. measles)
   - Clinical case management
   - Vector control (malaria mosquito net distribution, dengue rapid diagnostic tests)
   - Risk communications (community awareness and engagement, post cyclone messaging targeted at measles vaccination, injury, boiling water (WASH activities), nutrition and vector control)

2. **Treatment:** Supporting the MoH Vanuatu with technical assistance and coordination of international partners to ensure that essential health services to treat survivors of the cyclone are available and sustained throughout the response phase. These essential health services include:
   - Adequate emergency/trauma care
   - Maternal and child health care
   - Adequate medical personnel for the key affected areas
   - Expanded programme on immunization—mass vaccination of targeted populations to prevent disease outbreaks of measles
   - Nutrition—in collaboration with UNICEF, providing in-patient treatment of severe acute malnutrition with medical complications in referral hospital

3. **Health infrastructure and restoration of services:** Supporting the MoH with practical assistance and equipment procurement as well as technical health planning assistance and coordination of international partners and resources to rebuild severely damaged/destroyed health infrastructure in affected areas
   - Health facility assessments
   - Repairing damaged/destroyed health facility structures

4. **Protection:** Supporting the department of health and health partners with the identification and protection of vulnerable populations from gender-based violence and exploitation, as well as financial hardship resulting from the costs of health care
   - Mental health and psychosocial support—addressing the impact on social and emotional health and well-being
5. **Coordination:** Supporting the MoH with the coordination of international partners and with linkages with other response clusters and sectors to ensure an effective response

- **Health cluster coordination**—includes health assessments, partner inventory and FMT coordination
- **Communication of key health issues** (with the public and other agencies) for the purpose of disease prevention

WHO is also working on the broader regional response.

## WHO Funding Requirements

*WHO’s initial funding needs for the first three months (USD)*

<table>
<thead>
<tr>
<th>Category</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supplies (including emergency health kits, trauma kits, mosquito nets, rapid diagnostic tests, and medical tents etc.)</td>
<td>$657,500</td>
</tr>
<tr>
<td>Measles vaccines</td>
<td>$70,000</td>
</tr>
<tr>
<td>Transportation (International and in-country, handling fees) and storage costs</td>
<td>$195,000</td>
</tr>
<tr>
<td>Emergency repair of non-functional health facilities including equipment</td>
<td>$390,000</td>
</tr>
<tr>
<td>Establishment of EWARN</td>
<td>$180,000</td>
</tr>
<tr>
<td>Health care services including mobile medical teams</td>
<td>$320,000</td>
</tr>
<tr>
<td>Provision of technical expertise including logistics</td>
<td>$684,000</td>
</tr>
<tr>
<td>Surge staff deployment</td>
<td>$278,000</td>
</tr>
<tr>
<td>Operational and office set up costs</td>
<td>$190,000</td>
</tr>
<tr>
<td>Incentives for health care workers</td>
<td>$35,500</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$3,000,000</strong></td>
</tr>
</tbody>
</table>