



People affected

544 000 people affected

270 000 in need of immediate humanitarian assistance

At least **25 000** people displaced

Health concerns

63% of health facilities in Hela Province damaged or destroyed

36% of children under the age of one received measles vaccine in 2016, indicating low routine immunization coverage

4 ongoing outbreaks: malaria, dengue fever, pertussis and measles

Funding needs

US\$ 11.2 million required for all health partner activities

US\$ 1.5 million requested by WHO to support coordination, surveillance and service delivery

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WHO meets with provincial health workers and affected communities in Mendi, Southern Highlands. Credit: WHO Papua New Guinea

At a glance

- A 7.5 magnitude earthquake struck Papua New Guinea (PNG) on 26 February 2018.
- The PNG Government declared a state of emergency on 1 March for Hela, Southern Highlands, Western and Enga provinces.
- Water, food, shelter, medicine and the provision of health services are the priority needs.
- Health concerns include injuries, communicable diseases and psychosocial needs.
- WHO co-chaired the first humanitarian health partner meeting within 24 hours of the earthquake, and is supporting coordination at the national and provincial levels, as well as surveillance and health service delivery.

Current situation

On 26 February 2018, a 7.5 magnitude earthquake struck Papua New Guinea (PNG), triggering landslides, killing and burying people and houses, affecting water sources and destroying crops. The PNG Government declared a state of emergency on 1 March for Hela, Southern Highlands, Western and Enga provinces. Hela and Southern Highlands Provinces are the worst affected. At least 70 aftershocks have been recorded, including one of 6.7 magnitude on 7 March.

Access to clean drinking water, food, shelter, medicine and health services are immediate concerns. At least 25 000 people are reported to be displaced and living in informal camps or other evacuation facilities, often without adequate water and sanitation.

Damaged airfields, bridges and roads, coupled with security threats related to inter-communal violence, are inhibiting the response in some affected areas. As more communities are reached, the estimated needs and casualties are expected to climb.



Health needs

Affected populations are traumatized and injured. Health facilities have been damaged and destroyed, health services interrupted and people are living in unsafe conditions. Some affected communities are yet to be reached by response efforts.

At least 25 000 people have been displaced from their homes and many are living in temporary shelters. Credit: S. Casey/WHO

The population is at risk for epidemic-prone diseases. A lack of access to clean drinking water and overcrowding in informal settlements add to this risk. Vaccination coverage was low prior to the earthquake and the country was already facing several outbreaks, including malaria, dengue fever, pertussis and measles.

Joint assessments conducted by the National Department of Health (NDOH) and the World Health Organization (WHO) in the two most-affected provinces found that a significant number of health facilities were impacted. Not only were structures damaged during the earthquake, but health workers themselves were directly affected.

Insecurity not only inhibits the response, but puts vulnerable individuals at risk of violence-related injury.

The response

WHO supported the NDOH to organize the first humanitarian health partner meeting within 24 hours of the initial earthquake. Health Cluster meetings continue to take place on a regular basis to ensure effective coordination and response planning, and WHO is supporting the NDOH and partners in information management, partner resource mapping, and ensuring that response efforts target the areas most in need.

To guide and coordinate the joint response and recovery efforts, WHO and the NDOH drafted a “Health Emergency Response and Recovery Plan” and operationalized a National Health Emergency Operations Centre (EOC). Plans are now underway to establish Provincial Health EOCs in the most-affected provinces.

From 6-8 March, a joint NDOH and WHO team deployed to affected provinces to assess the health needs of people living in some of the worst-affected areas. The group visited health facilities to evaluate damage and plan for the rapid resumption of life-saving health services.

On 8 March, WHO designated the crisis a Grade 1 emergency. Two international WHO emergency experts have been deployed to PNG to assist with health sector coordination and disease surveillance.

WHO is now working with the NDOH to activate an emergency surveillance system in the worst-affected areas, given the elevated risk of communicable disease outbreaks and disruption of surveillance systems.

Funding needs

The final health response budget will be dependent on the result of more detailed assessment. However, the tentative cost for the planned health response for the first six months comes to US\$ 11.2 million. A total of US \$1.5 million is requested by WHO.

The Organization's initial response to date has been funded via an injection of US\$ 135 000 from the Contingency Fund for Emergencies (CFE). WHO wishes to thank all those donors who have provided funding for the CFE.