

Papua New Guinea earthquake

Situation report **20 MARCH 2018**







270 000

NEED IMMEDIATE
ASSISTANCE





4
PROVINCES AFFECTED

HEALTH CONCERNS



33% OF HEALTH FACILITIES IN HELA AND SOUTHERN HIGHLANDS PROVINCES ARE CLOSED



36% OF CHILDREN UNDER THE AGE OF 1 RECEIVED MEASLES VACCINE IN 2016, INDICATING LOW ROUTINE IMMUNIZATION COVERAGE



1 PRE-EXISTING OUTBREAK IN AN AFFECTED PROVINCE (MEASLES IN WESTERN PROVINCE) AND THREE ONGOING OUTBREAKS IN NEIGHBOURING PROVINCES (MALARIA AND PERTUSSIS)

THE JOINT HEALTH RESPONSE



25 HEALTH SECTOR PARTNERS UNDER NDOH-WHO JOINT COORDINATION



3 JOINT HEALTH EMERGENCY OPERATIONS CENTRES: PORT MORESBY, TARI AND MENDI

FUNDING NEEDS



US\$ 11.2 MILLION FOR HEALTH PARTNER RESPONSE

HIGHLIGHTS

- ⇒ A 7.5 magnitude earthquake struck Papua New Guinea (PNG) on 26 February 2018.
- ⇒ Hela and Southern Highlands are the worstaffected provinces. Western and Enga Provinces have also been impacted.
- ⇒ Water, food, shelter, medicine and the provision of health services are the priority needs.
- ⇒ Health concerns include injuries, communicable diseases and psychosocial needs.
- ⇒ The World Health Organization (WHO) co-chaired the first humanitarian health partner meeting within 24 hours of the earthquake, and is now coleading the Health Cluster with the National Department of Health.
- ⇒ WHO is working with partners to prevent and prepare for potential outbreaks of epidemic-prone diseases; strengthening surveillance, enhancing the existing public health programmes and prepositioning supplies.

Situation update



Map showing earthquake epicentre, adapted from UNCT presentation

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 18 200 people are reported to be displaced and living in informal care centres or other evacuation facilities, often without adequate water and sanitation.

Damaged airfields, bridges and roads, coupled with security threats related to intercommunal 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.

The population is at risk of epidemic-prone diseases. A lack of access to clean drinking water and sanitation facilities, 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, 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.



Leadership and coordination

WHO has declared the crisis a Grade 1 emergency, repurposed more than 10 country office staff and deployed four international experts to support 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 twice a week to ensure effective coordination and response planning. 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). Provincial Health EOCs are now being established by WHO and local health authorities to coordinate local response efforts in the most-affected Provinces.

Information management and surveillance

WHO and the NDOH conducted a joint mission to assess the health needs of people living in the two worst-affected provinces: Hela and Southern Highlands. The group visited health facilities to evaluate damage and plan for the rapid resumption of life-saving health services.

A third of all health facilities (i.e. 25 out of 77) were found to be closed. Data on eight facilities remains unavailable due to access constraints. In Hela Province, most facilities lack access to water and electricity. More than 80% of facilities in Hela have received a delivery of medicines and medical supplies following the earthquake. In the Southern Highlands, only 40% have received additional medical supplies.

An international epidemiologist has been deployed to PNG and is working with the NDOH to activate emergency disease surveillance and response capacity in the worst-affected areas.

Operational support and **logistics**

WHO has pre-positioned supplies in preparation for potential outbreaks of epidemic-prone diseases, including seven diarrhoeal disease kits, and rapid diagnostic tests for dengue.

Health **operations** and technical expertise

WHO is supporting the NDOH with technical expertise in immunization, health service delivery, partner coordination, risk communications and surveillance.

The Organization is actively working with the NDOH to scale up immunization coverage in the affected areas.

As telecommunications towers are down and access is constrained, communication with some affected communities is extremely difficult. However, 3000 leaflets on health protection measures (e.g. taking shelter during earthquakes, self-care of wounds, hand-washing, and treating drinking water) have been added to aid packages airdropped to affected communities.

Funding needs

The final health response budget will be dependent on the result of more detailed assessments. However, the tentative cost for the planned health response for the first six months comes to US\$ 11.2 million.

Contact information

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A WHO team assesses the impact on

Photo: WHO/ S. Casey



damage on their way to health facilities in Hela in an Australian Government helicopter. Photo: WHO PNG

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