Background

- 270,000 people are in need of assistance across four provinces of Papua New Guinea’s highlands.
- 11,761 households (approximately 58,300 people) remain displaced, of which 1,672 households are staying in eleven care centres while 10,089 households remain with host communities.
- 8,362 children under 5 years have been vaccinated against Measles-Rubella (MR), while 1,861 infants have received Pentavalent vaccinations.
- 5,803 children have been screened for Severe Acute Malnutrition of which 20 were identified and treated.
- An operational planning group was established to facilitate implementation of relief activities in province.

Situation Overview

The latest figures available from the Displacement Tracking Matrix (DTM) implemented as part of the Shelter/CCCM Cluster response, indicate that 11,761 households (approximately 58,300 people) remain displaced, of which 1,672 households are staying in eleven care centres while 10,089 households are staying with host communities. The number of people registered as staying in care centres continues to fluctuate, and the overall number of affected communities may rise as new information becomes available.

According to latest information, most schools in Hela have resumed classes at the start of May.

The Disaster Management Team (DMT) undertook a mid-term operational review of the current DMT Earthquake Response Plan from 17-18 May in Port Moresby. The objective was to take stock of humanitarian partners’ response, identify need for any course correction for their response; and outline an agreed approach to transition from response to recovery. Aside from humanitarian partners, the government and key private sector participated in the review. Key outcomes include a broad confirmation of current sectoral and coordination priorities and an

+ For more information, see “background on the crisis” at the end of the report
agreement of the need to initiate recovery activities, where possible, while response activities continued. A report of the operational review is currently being finalised.

Since 28 March, most humanitarian programmes in and around Tari, the provincial capital of Hela province, have been suspended due to increased tension and inter-communal fighting. Many partners have temporarily relocated humanitarian staff to other locations, including to the Southern Highlands provincial capital, Mendi, in view of the situation. Due to restricted humanitarian access, an operational planning group for land-based relief activities in Hela province was established on 16 May. The group, comprising implementing agencies/organisations, will focus on close coordination between implementing agencies/organisations and developing a joint/integrated programme for target locations within Hela province. The Hela operational planning group is working closely with the PNG Government to identify down-scaled permissible locations based on latest information of the security situation in Hela province. Land-based relief operations in Hela are expected to resume incrementally from early June.

### Funding

On 28 March, the Disaster Management Team (DMT) issued the Highlands Earthquake Response Plan, which seeks US$62 million to provide life-saving assistance and help re-establish basic services for 270,000 people in need of immediate assistance due to the 26 February 2018 earthquake and subsequent aftershocks and landslides. It also aims to help restore livelihoods of affected people and ensure protection services for the most vulnerable.

As of 28 May, humanitarian funding for the Highlands Earthquake response was $17.2 million, according to OCHA’s Financial Tracking Service (FTS), including $9.2 million mobilized from the UN Central Emergency Response Fund (CERF), of which some $3.2 million is for food assistance; $1.3 million for health; $1.3 million for nutrition; $1.25 million for WASH; $1 million for shelter; $605,000 for protection; and $485,000 for coordination of logistics and security.

The International Federation of Red Cross and Red Crescent Societies (IFRC) released a Disaster Response Emergency Fund (DREF) plan that mobilized CHF 209,398 (approximately US$ 220,000) to support 3,000 people affected by the earthquake with life-saving assistance in the areas of shelter, health and WASH. On 15 May, the Government of Hong Kong Special Administrative Region (SAR) granted $3.207 million to the Adventist Development and Relief Agency, China (ADRA China) for providing relief to earthquake victims.

Overall, funding and in-kind contributions for the earthquake response reached over $61.5 million through bilateral and multilateral channels as of 30 April, according to various sources including media reports. Key donors include eight UN Member States – Australia, Canada, China, France, Israel, Japan, New Zealand, the United States and Qatar – as well as the European Union. The majority of contributions to date, however, have come from the private sector (approximately $43 million) directly to support Government response efforts, with large commitments from Bank South Pacific Group, ExxonMobil, Kumul Petroleum Holdings, Oil Search, Ok Tedi Mining Limited (OTML), and Porgera Joint Venture.
Humanitarian Response

Early Recovery

Needs:
- Rehabilitation of damaged infrastructure in earthquake-affected provinces.
- Livelihood support related to food security, shelter, and WASH.

Response:
- Scoping of information available from past or ongoing assessments in ongoing to define additional needs for early recovery. This includes review of health, shelter, and education sector assessments to identify recovery assistance plans and gaps.
- Efforts are underway to coordinate early recovery plans of humanitarian actors with that of Government and private sector companies operating in the earthquake-impacted locations.

Gaps & Constraints
- A government-led recovery and reconstruction-focused coordinating mechanism has yet to be established. Government recovery and restoration plans are yet to be made available.
- Information gaps on livelihoods impacts and needs.
- Recovery interventions will need to integrate conflict-sensitive recovery planning in communities displaced by a combination of earthquake impacts and conflict.

Education

Needs:
- According to the National Department of Education (NDoE), 15,726 students in 105 assessed schools have had their access to education affected by the earthquake, with five of the affected schools destroyed and 100 partially damaged.
- The DMT response plan targets 10,000 children whose access to schooling has been affected by the earthquake.
- Priority response activities include:
  - Setting up safe temporary learning spaces (STLS), and ensuring water and sanitation facilities in them;
  - Providing psycho-social support to school children and teachers;
  - Raising awareness on earthquake preparedness, sanitation and hygiene;
  - Providing teaching and learning materials, as well as recreational kits.

Response:
- Partners (including faith-based organizations in Southern Highlands Province are supporting the Provincial Department of Education with training of teachers and volunteers on the establishment of Safe Temporary Learning Spaces (STLS) and use of related learning materials.
- To date, 32 schools-in-a-box and 14 tents were (inclusive nine tents provided by child protection partners) distributed.
- 223 teachers (112 female and 111 male) from 12 new schools in Southern Highlands have been trained on the use of teaching kits supplied.

Gaps & Constraints:
- Planning and coordination with the NDoE and the Provincial Departments of Education in Hela and Southern Highlands needs to be strengthened, and their response plans shared with supporting partners.
- Restricted humanitarian access in Hela continues to limit the movement of partners and staff to deliver services in affected schools.
- Training and implementation of STLS and CFS continues to be dependent on pipeline of required supplies.
**Food Security & Livelihoods**

**Needs:**
- An estimated 153,000 people will require food assistance due to loss of staple food crops following damage to gardens, while damaged roads have reduced access to markets.
- The latest mobile Vulnerability Assessment Mapping (mVAM) report (April 2018) indicates that up to 64,000 people were experiencing conditions of extreme food insecurity before the earthquake event, with reports of children eating one meal a day (mainly “kaukau” or sweet potato).
- Priority response activities include:
  - Supplying relief food;
  - Providing farming supplies, seeds and planting materials;
  - Training for farmers and households

**Response:**
- From 10-14 May, 809 households in Huiya, Walagu and Dodomona in Southern Highlands province received 2.21 MT of food relief
- As of 28 May, partners distributed 343 MT of food to 79,671 people across communities in Western, Southern Highlands, and Hela provinces. Some of the distributed food rations are expected to last up to five weeks.
- As of 21 May, partners have reached 1,260 households with a total of 110kg of seeds for agricultural recovery.

**Gaps & Constraints:**
- Some partners report that most of the affected people at the care centres and communal hubs are there because of fear and not for food.
- Generally, earthquake-displaced people report that they want to move back to their villages but need early maturing crop seeds and planting materials and tools to restart their gardens.
- Tracking and targeting of food assistance distributions needs to be strengthened, and the protection needs of girls, women, boys and men need to be considered in planning and implementing food distributions. To prevent conflict between community members, there needs to be strengthened community engagement with community leaders, so they can support the coordination of distributions.

**Health and Nutrition**

**Needs:**
- Access to healthcare for 544,000 earthquake-affected people needs strengthening due to damage to health facilities.
- Over 31,000 children aged 6-59 months require screening for Severe Acute Malnutrition (SAM).
- Priority response activities include:
  - Strengthening health sector coordination at national and provincial levels;
  - Restoring primary health services by repairing damaged health facilities, replenishing medical supplies, and conducting integrated community health outreach;
  - Restoring maternal and new-born health services;
  - Restoring the cold chain and integrated outreach for immunizations to prevent the spread of vaccine preventable illness;
  - Activating an emergency surveillance and response system;
  - Addressing post-disaster mental health and providing post-trauma counselling and psychosocial support.
  - Community-level malnutrition screening for early case identification and referral;
  - Procuring and distributing therapeutic foods and associated equipment for targeted management of severe acute malnutrition (SAM) cases;
  - Training service providers and volunteers on SAM and infant and young child feeding.

**Response:**
- A joint integrated service for children and mothers was launched in Mendi on 7 May which covered immunization for all children under 5 years, TT immunization for women of childbearing age and SAM screening for children.
To date, 8,362 children under 5 years have been vaccinated against Measles-Rubella (MR) while 1,861 infants have received Pentavalent vaccinations.

A total of 12 Solar Direct Drives (SSDs) have arrived in the Southern Highlands, with seven installed in health facilities in Nipa-Kutubu and Mendi, with plans for another five to be installed.

A total of 20 delivery beds and 20 pivotal lights have been procured by partners to be distributed in Hela and Southern Highlands.

Partners working with the Southern Highlands Provincial Health Authority deployed an outreach team on 21 May to be stationed in Nipa-Kutubu for two weeks to provide sexual and reproductive health services and distribution of dignity and reproductive health kits.

As of 21 May, 5,803 children (6-59 months) have been screened for Severe Acute Malnutrition (SAM) of which 20 were identified and treated for SAM, 855 children (6-59 months) have been provided with vitamin A supplements while 2,799 received deworming tablets.

116 community health workers (CHW) have received orientation on screening and management of SAM. An additional 20 CHWs out of the planned 120 expected have been trained on counselling pregnant and lactating women for the planned infant and young child feeding community practical sessions.

Gaps & Constraints:
- Delivery of relief supplies and medicines to affected areas and care centres, as well as health workers reaching emergency shelters to provide health services, remains logistically challenging, including due to the security situation.
- Displaced local health workers require support to rebuild homes and families.
- Frequent aftershocks and tremors are resulting in continued fear and trauma among survivors.
- To date, children in Hela province have not been able to access nutritional services due to the security situation.

Logistics

Needs:
- Repair and rehabilitation of earthquake-damaged transportation infrastructure, including airfields, bridges and access roads.
- Sustainable last-mile transport arrangements to hard-to-reach and remote locations.
- Strengthened coordination to facilitate access to humanitarian logistics capacities provided by the Government, bilateral donors (including foreign military assets) and private sector companies.
- Priority common logistics services to be provided include:
  - Logistics assessments and planning to improve access to the affected population;
  - Technical assistance to establish a humanitarian supply chain;
  - Logistics coordination and information management support.

Response:
- As of 21 May, a total of 424.30 MT of relief cargo was handled for the humanitarian community.
- Technical logistics assistance was provided to the Government of PNG, to procure, plan and dispatch five containers worth of food and WASH materials to Western Province through a commercial barge operation. The supplies moved comprised of food assistance for 7,200 families (36,000 people) and 52 water tanks (9,000 litres) for 52 communities. The last-mile distribution of these supplies will be undertaken by PNG Defence Force and local disaster committees.
- Assistance is being provided to the Government of PNG to identify a suitable warehouse in Mt Hagen for the humanitarian community to utilize.
- The Logistics Working Group continues to support requests through the established RFA mechanism and endorsed by respective clusters. Information on planned and dispatched humanitarian cargo can be found at: https://tinyurl.com/ybf624a7.

Gaps & Constraints:
- Access constraints continue to slow the delivery of aid to remote earthquake-affected areas, many of which can only be reached via helicopter.
- The road connecting Mendi to Moro remains unpassable to heavy vehicles with access by light vehicles only. Delivery of cargo to Moro remains only possible delivered via air/barge.
• Some transport providers do not wish to tender/bid for services to Tari and Mendi due to the perceived security situation.

Protection

Needs:
• Cluster partners will target 270,000 people with protection assistance and services, particularly marginalized and vulnerable groups including women (especially single, pregnant and lactating women), adolescent girls, female-headed households, persons living with disabilities, older persons, and children (especially those who are unaccompanied and/or separated).
• Within the earthquake-affected population of 544,000 people, there are an estimated 35,782 women of reproductive age of which 4,938 may be pregnant. Based on national averages, 895 pregnant women may be at risk of miscarriage or unsafe abortions in the next nine months, while 716 women and girls are at risk of sexual violence.
• There is large scale of psychological trauma occurring in Hela and Southern Highlands provinces with no access to mental health services or support services for those in need.
• Priority response activities include:
  o Providing emergency psychosocial support, first aid and referral services for the most marginalized and vulnerable people;
  o Providing dignity kits containing essential protection and hygiene supplies to women and girls;
  o Strengthening services and promoting inclusion of persons with disabilities in response activities;
  o Providing gender-based violence (GBV), child protection and sorcery-related violence prevention and response services, including strengthened referral pathways and service providers, community mobilization and messaging;
  o Establishing safe centres for women and children;
  o Preventing sexual exploitation and abuse of affected people through the coordination and reporting mechanism and sensitizing armed forces and humanitarian workers;
  o Promoting accountability to affected people by establishing a common service to receive and monitor feedback, complaints and rumours on the humanitarian response.

Response:
• A community mapping platform was established with over 700 feedback and complaints on the humanitarian response from the communities now online at png.communityresponsemap.org
• To date, 117 volunteers were recruited as community mobilizers to enable community access through outreach to affected communities with emergency support services in Hela and Southern Highlands provinces. These mobilizers were provided training in gender-based violence in emergencies in Mendi.
• Identification of 10 sites for establishment of Learning, Empowerment and Protection Centres in Hela and Southern Highland Provinces is ongoing.
• 81 psycho-social facilitators have been trained and 1,493 people reached with psycho-social support. A 5-person mobile team has been trained and deployed to undertake community based psycho-social activities through joyful recreation and sporting activities.
• 3,285 parents and caretakers reached with end violence against children messages
• A total of 5,000 dignity kits, of which 1,400 kits are in country, are awaiting distribution.

Gaps & Constraints:
• Lack of capacity and resources of health workers to deliver sexual reproductive health services, especially in the Lake Kutubu area and Bosavi.
• There is a great barrier for women and girls living in remote areas to access healthcare services due to the lack of mobile clinic and outreach services.
• Referral pathways and support services for victims of gender-based violence and sexual exploitation and abuse remain limited and current capacity is overburdened by the influx of referrals, training needs, publications, communication and other emergency relief services.
Shelter / Camp Coordination and Camp Management

Needs:
- An estimated 60,000 people (10,000 households) in Southern Highlands and Hela provinces require shelter assistance, a large proportion of whom have been displaced.
- According to the most recent update, 11,761 households (58,292 people) remain displaced, of which 1,672 households are staying in eleven care centres while 10,089 households are staying with host communities.
- Priority response activities include:
  - Providing shelter, shelter tools and non-food items;
  - Improving sites in identified care centres;
  - Creating safe, dignified and protected temporary living conditions for the displaced population through care centre management;
  - Regularly monitor population mobility through the Displacement Tracking Matrix;
  - Sharing safe shelter messages related to landslides, site selection and shelter technical design.

Response:
- To date, 41 communities (21 in SHP province, 18 in Hela province and 2 in Western province) were assessed in the first round of completed displacement tracking.
- Partners will establish a pipeline of 800 community reconstruction kits and 2,000 displaced family kits to cover need for 6,000 households (approximately 30,000 people).
- To date, 4,055 people (811 households) have been reached with shelter kits assistance in Southern Highlands, Hela and Western provinces with 28,217 people (5,643 households) reached with shelter related NFI support across the three provinces.
- Shelter training has been delivered to 145 people.

Gaps & Constraints:
- Displaced people living with host communities are not receiving sufficient assistance.
- For partners planning longer-term shelter recovery interventions, the issue of land use and resettlement will require further attention.
- Households away from airstrips and care centres are less likely to receive assistance due to limited visibility and accessibility.

Water, Sanitation and Hygiene

Needs:
- Approximately 312,000 people require WASH assistance to prevent and reduce the incidence of waterborne disease outbreaks due to contamination, damage or destruction of surface and rainwater collection systems.
- Priority response activities include:
  - Providing safe drinking water through restoration of rainwater collection systems, water trucking, installation of water treatment and distribution of storage tanks;
  - Distributing jerrycans for water storage;
  - Providing emergency latrines that are gender-segregated and disability-friendly, including regular desludging and maintenance;
  - Distributing hygiene kits and disseminating basic life-saving hygiene promotion messages.

Response:
- Clean water has been provided to 74 villages, and 57 villages have been provided with WASH NFIs, including 10,866 water containers, as well as water purification supplies and soap.
- 3,557 additional hygiene kits have been distributed in the Mt Bosavi area.
- Existing water supply systems in one aid post, one secondary school, and one district hospital have been rehabilitated, and partners have installed rainwater harvesting systems in four care centres in Southern Highlands Province including 53 new tanks installed in 16 schools and four villages.
- 86 latrines have been constructed in 15 schools and three villages in Nipa-Kutubu, Mendi-Munihu, and Imbonggu districts of Southern Highlands province.
Gaps & Constraints:
- There is a lack of verified information on water quality at remaining water sources.
- Provincial Health Authorities require technical assistance on WASH provision and additional response capacity on the ground.

General Coordination

The Government is leading the response operation and has welcomed the support of humanitarian partners. The National Disaster Committee (NDComm) and relevant sub-committees have been mobilized to develop the national response strategy. The National Disaster Centre (NDC) coordinates assessments and relief operations. On 1 March, the Government appointed an Emergency Controller to lead the National Emergency Disaster Restoration Team in overseeing relief and recovery efforts. On 27 March, the Parliament adopted the two bills on the declaration of a State of Emergency in the earthquake-affected provinces and establishing the WESH Restoration Authority.

The Government has established two Forward Operating Bases (FOBs), one in Mt. Hagen led by the Western Highlands Provincial Disaster Coordinator, and one in Moro led by the Southern Highlands Provincial Administrator. The Government also established Emergency Operations Centres (EOCs) in the capitals of Hela and Southern Highlands provinces, Tari and Mendi respectively. Provincial Administrators have assumed leadership in coordinating provincial responses.

The National Department of Health (NDOH) is leading the integrated health and nutrition response for the earthquake affected areas with support from the humanitarian Health Cluster. Health Emergency Operation Centres have been established in the NDC and in Mendi and Tari.

The inter-agency PNG Disaster Management Team (DMT) is coordinating relief efforts among humanitarian partners and with private sector companies, in support of the Government-led response. Six informal clusters (Education, Food Security, Health and Nutrition, Protection, Shelter, and WASH) and three working groups (Communication with Communities, Early Recovery and Logistics), as well as the Inter-Cluster Coordination Group support the work of the Disaster Management Team.

An inter-agency field coordination team is based in Mendi, the Southern Highlands provincial capital, to support information exchange, response planning and other coordination initiatives among partners and with provincial authorities and security forces. A field coordination and operational planning group was established on 16 May to facilitate implementation of relief activities in Hela province.

Logistics coordination specialists have been deployed in Port Moresby and Mt. Hagen to provide supply chain coordination support to the Government and the PNG-DF.

The Government has tasked the PNG Defence Forces (PNGDF) to enhance security in affected areas, and to assist local partners in the distribution of relief items.

Humanitarian partners are encouraged to register on www.humanitarian.id and actively use the dedicated earthquake response window on www.humanitarianresponse.info/en/operations/papua-new-guinea.

Background on the crisis
On 26 February 2018, at 03:44 local time, a magnitude 7.5 earthquake hit the Highlands region of Papua New Guinea (PNG), with the epicentre located 30 km south of Tari town, Hela Province. The tremor was the largest earthquake recorded in the region since a similar event in 1922. A series of strong aftershocks, including a 6.7 M tremor on 8 March in the same area, caused widespread panic amongst the communities. According to preliminary estimates and based on latest earthquake intensity mapping, around 544,000 people in five provinces were affected and more than 270,000 people are in immediate need of assistance. Of those in need of assistance, more than 125,000 are children, 55,000 aged less than five years.

For further information, please contact:
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For more information, please visit http://pngndc.gov.pg/ or https://www.humanitarianresponse.info/en/operations/papua-new-guinea. To be added or deleted from this Sit Rep mailing list, please e-mail: dmt.pg@one.un.org.