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Emergency Plan of Action Operation Update

Papua New Guinea: Earthquake

 International Federation
of Red Cross and Red Crescent Societies

DREF n° MDRPG008	GLIDE n° EQ-2018-000020-PNG
DREF operation update n° 1; 27 March 2018	Timeframe covered by this update: 28 February 2018 until 20 March 2018
Operation start date: 28 February 2018	Operation timeframe: 3 months and end 27 May 2018
Original overall operation budget: CHF 209,398 (Revised budget: CHF 209, 398)	
N° of people being assisted: 2,000 (Revised N° of people being assisted: 3,000)	
Red Cross Red Crescent Movement partners actively involved in the operation: The National Society is working with the International Federation of Red Cross and Red Crescent Societies (IFRC) and International Committee of the Red Cross (ICRC).	
Other partner organizations actively involved in the operation: Provincial disaster committees (PDCs), National Disaster Centre (NDC), PNG Disaster Management Team, UN agencies, INGO's, Exxon Mobile, Oil Search and Churches associations.	

Summary of major revisions made to emergency plan of action:

This operation update was written to reflect the main findings from the initial rapid assessments and new secondary information that have identified the fear factor and the potable drinking water access as some of the main risks that need to be addressed.

Activities:

- *Distributions of NFI's will continue as indicated but will not go beyond. They will focus on hard to reach areas that are accessible only by small aircraft plus by walk paths only.*
- *Aerial surveys were not possible but aircraft budget lines are still needed for airlifting of volunteers and NFI's as many areas are inaccessible by road and only by small aircraft or helicopters.*
- *Earthquake awareness activities to reduce trauma factor within communities, care centers and schools.*
- *Hygiene promotion activities will be kept but will add an additional dimension with water handling messaging (people are drinking water from new sources they usually don't drink from).*
- *Target population now increased to 3,000 and more will be reached with radio campaign.*

A. SITUATION ANALYSIS

Description of the disaster

A 7.5 magnitude earthquake with a 35km depth, struck at about 4am PNG time on 26 February 2018, followed 30 minutes later by an aftershock of 5.5 magnitude, according to the United States Geological Survey (USGS) and various media sources. The epicentre is in the southern highlands in a mountainous area (Mount Bosavi). Population is mostly rural and with no major urban centres or infrastructures near the epicentre. According to the latest reports from the UNDAC team, and based on the PNG 2011 census, a population of 37,689 persons lives in the areas where the intensity was at its peak 7.5. In total, approximately 270,000 people have experienced an intensity above 6.0 and are potentially in need of humanitarian assistance.

The two most affected provinces are Hela and Southern Highlands. The death toll is still unclear as there are many unconfirmed cases, but it is believed to have reached more than 100 people. Majority of the confirmed deaths were

caused by landslides. Some care centres where people are gathering and sleeping are observed in the affected areas. The latest figure reported in the UNDAC¹ report mentions 18,200 displaced people across 26 centres.

Communication and road accessibility were cut off for many days and some roads are still inaccessible until now. Some affected areas can only be reached by air or walk in normal times and still have yet to be reached or only been assessed or deserved partially by air surveys. The most remoted locations can only be accessed by walking trails and do not have radio or mobile network at any given times. Several of these communities are also engaging in some violent clashes on a regular basis, which can prevent aid to reach due to movement restrictions.

For these reasons access to clear and reliable information is extremely challenging until today and reaching beneficiaries is also logistically challenging and time consuming.

Summary of current response

Overview of Host National Society

The PNGRCS do not have branches in the affected areas. The nearest branch is in Mount Hagen, Western Highlands. The volunteers from these branches have been very active in conducting initial rapid assessments and relief in the earthquake areas. They have also coordinated and facilitated a coordination hub with other local stakeholder in Mount Hagen to support the affected provinces nearby. A PNGRCS disaster management team from the headquarters also provided surge support. The PNGRCS has started to implement the activities of this DREF with the beginning of the assessments, mobilizing volunteers, organizing procurement and establishing a plan of action based on earlier findings from the rapid assessments.

A total of 20 volunteers from Mount Hagen, including two trained National Disaster Response Team (NDRT) members will be active in the response of this DREF, and half of them have already been involved as of now.



Red Cross Movement rapid assessment of health facility, Southern Highlands Province, PNG, (Photo: IFRC)

The availability of stocks in country has been a challenge as many stocks were taken out with a few disasters that happened recently and full stocks not fully replenished yet. The NS is currently mobilizing few stocks from the headquarters and other branches.

Overview of Red Cross Red Crescent Movement in country

IFRC has a country office in Papua New Guinea consisting of a head of country office as well as a finance delegate. An operations coordinator from IFRC Asia Pacific regional office has been deployed since March 3rd to provide surge support. A Regional Disaster Response Team member (RDRT) will reach PNG in the upcoming days to take over and provide technical support to the PNGRCS in the implementation of this DREF for a period of 6 weeks. Other IFRC colleagues are providing remote support to the country team.

ICRC has a Papua New Guinea Mission in country based in Port Moresby with a well-established field office in Mount-Hagen, Western Highlands, which covers some of the most affected areas by the earthquake. Initial rapid assessments and response actions by PNGRCS and ICRC teams were conducted shortly after the disaster. The IFRC operations coordinator managed to join one of the teams for 3 days in Nipa-Kutubu district and has been sharing the ICRC compound for security and logistics purposes. Discussions to have the RDRT member staying at the compound for the same reason been discussed and agreed on.

In terms of response, ICRC is using its available resources to respond to urgent earthquake-driven needs in its established areas of operations in the Highlands. They are presently focussed on rehabilitation of health structures, in particular through repairs to water and other essential services. They have also conducted NFI distributions for displaced and host communities and are working on water issues at some care centres. ICRC plans to form a second

¹ <https://www.humanitarianresponse.info/en/operations/papua-new-guinea>.

water and habitation (WatHab) team to boost its capacity to respond to these issues. All of its earthquake activities are done jointly with the PNGRCS.

Australian Red Cross is providing bilateral support to PNGRCS with providing additional 1000 tarpaulins and 500 mosquito nets as sponsoring the costs for the deployment of the RDRT generalist.

Partners are working on longer term planning towards supporting PNGRC with one aligned Movement support plan for greater efficiencies and drawing on the collective strengths of the Movement. IFRC Papua New Guinea country office will provide guidance and support to PNGRC throughout the duration of the operation.

Overview of non-RCRC actors in country

A joint PNG Disaster Management Team regularly has met twice since the beginning of the disaster. The Provincial Disaster Committees (PDC) has been coordinating more frequently. Informal coordination meetings have been organized in Mount Hagen between RC, PDC and INGO's, often at the Red Cross office. Coordination is now being streamlined after arrival of UNDAC team to provide coordination and information management support. Seven informal clusters (WASH, Shelter, Food Security, Health, Protection, Education, Nutrition) have also been activated.

Several INGO's, local NGO's, church groups, UN agencies, government bodies, and the two oil and gas giants present in the affected areas, Exxon Mobile and Oil Search have been involved. Most of them have been doing assessments and are at their early stage of emergency response. The activities are currently being reported in a 3W matrix and information is centralized through the [Humanitarian Platform](#) web page.

PNG RC armed forces and Australian Government armed forces are also providing logistical support for transport and warehousing. The oil and gas companies are also supporting some organizations in this matter, *while Mission Aviation Fellowship (MAF)* has done a series of aerial surveys and some relief activities with its aircrafts.

PNG Government is working on rehabilitating infrastructures and roads and continues to coordinate the response and recovery efforts through the appointed Emergency Controller. The Prime Minister office has also made an announcement it would mobilize 450 million Kinas for the response.

Needs analysis and scenario planning

Needs analysis

The access to remote locations and communication is still a very relevant challenge that all actors are facing including the Red Cross.

The initial rapid assessments conducted with Red Cross teams comprised of Papua New Guinea Red Cross Society (PNGRCS), ICRC and one IFRC members observed minor to moderate impacts in the assessed areas in Hela and Southern Highlands, near the epicenter. Interviews with government authorities and affected populations were conducted as well as direct observation from the road. Visually, the damages visible from the different roads and during our visits were quite limited. The most notably visual damages were the road cracks, mudslides and landslides that became more numerous approaching the epicenter but not affecting populated areas. In terms of infrastructure, most households appeared fine and the most affected structures were modern buildings use by government rather than households. Gardens and small market with food were also observed along the way, and many functional gardens could be observed in the backgrounds. Problems with infrastructures was more visible with public or government infrastructures than households.

After discussion with authorities, the teams assessed some locations that were referred by authorities. The local members of the communities also provided us with different figures than government authorities for the same places on few occasions, which lead us to do our own observations. Care centers which are the informal displaced people gathering point were observed during day time but were not showing signs of mass people frequenting them. It is possible that more people were gathering at these during night time or that they were concentrated in other areas not seen during those assessments.

The findings of the rapid assessments did not allow us to confirm many of the secondary data or to justify large scale response until further detailed assessments will be conducted.

The two clear findings identified from these rapid assessments were that many people are consuming water from different sources, sometimes uncertain and they are very vocal about the fear of returning to their home. The fear factor is not only preventing people to return to their home even if they have not been damages, it also has impacts on food security as they also fear to return to their gardens and can have impacts on protection of the people. Many of these communities are in conflicts and small incidents such as robbing food can lead to further violent altercations.

These two main priorities are also agreed from latest observation from other actors. According to the [situation report #3](#)² from UNDAC, the main priorities remain food, water, shelter and health: 18,200 people are displaced in 26 informal care centers and 32 per cent of health facilities remain closed, while 68 per cent of the ones that are reopened have some level of damages. Out of the 34 reported opened facilities, 5 are reported severely damaged and 4 moderately damaged.

Operation Risk Assessment

Earthquake aftershocks are still being felt until now and therefore, can still be a risk for the security of staff and volunteers, as well as the affected populations. Continuous rainfalls are also another natural hazard than can lead to further landslides which can result in reducing access or harming or killing people.

During the rapid assessments, it was clearly observed that the populations were discontent at government for not responding quickly enough, but most notably were angry at oil and gas companies which were believed to be responsible for the earthquake. Some people directly said in local languages, that if evidences were founded that the soil exploitation lead to the earthquake, there would be retaliation. The existing communities have been in tense relations between themselves, the government, the oil and gas companies since some time, therefore the occurrence of this earthquake can potentially trigger further conflicts or violent acts. One INGO member verbally reported during a coordination meeting in Mount Hagen on 16 March 2018 that their team were not allowed to provide humanitarian assistance in Hela province. They were blocked on the road by armed people and requested to go back were they come from stating they refuse to receive humanitarian assistance until the government first give them their “overdue financial compensations”. Such incidents have been frequent before and can easily be repeated in several areas. Several demonstrations of people with bush-knives and other weapons have been observed in the last days in some areas and blocking Tari air stripe at times.

Another risk is linked with the NFI distributions. Within this complex social context, serious work in engaging the communities is critical since there is a lot of sensitivities and jealousy between communities and therefore, the selection criteria need to be discuss clearly and accepted by all, otherwise distributions can be risky as members not receiving the goods might react with violence. Few blanket aerial distributions are still ongoing by some actors and can potentially cause some instability.

Some remote locations will require volunteers to walk for a few days, therefore communication issues and isolation can represent certain risks. Volunteers will be equipped with communications equipment, first aid kits, satellite phone and personal protective equipment's to mitigate risks.

B. OPERATIONAL STRATEGY

Proposed strategy

This DREF operation implementation period will remain three months, to be completed by 27 May 2018. The proposed operational strategy aims at reaching out to the people affected and providing basic needs. The total number of people targeted directly is now revised to 3,000 people (HH size = 5) as per the new estimates. Radio campaign will reach a broader audience.

As the volunteers of Mount Hagen are experienced in working in remote areas and are well experience in engaging with communities, especially from their regular hygiene promotion program, it was decided that they could work on 2 main needs identified in our rapid assessments and also identified in UNDAC report: addressing the fear factor and addressing water issues. Therefore, the following activities have been added or revised for the remaining of the operation:

New or revised activities:

- Earthquake awareness activities with communities, care centers and schools to dissipate the fear factor trauma.
- Radio campaign messaging for the earthquake awareness activities.
- Hygiene promotion and water conservation and handling awareness for the same groups.
- Refresher sessions (same volunteers will conduct both earthquake awareness and hygiene promotion activities).

The following activities will remain unchanged:

- Volunteers will continue continuous assessments while doing relief activities.
- Provide first aid assistance on case by case basis.

² <https://www.humanitarianresponse.info/en/operations/papua-new-guinea>

- Distribution of existing essential relief items³ from PNGRC existing stocks and subsequent replenishment through international procurement, with the exception of the sleeping mats which are now considered not necessary for the Highlanders people.
- A 'lessons learned workshop' for participating staff and volunteers at the end of the DREF operation.

Relief items to distribute per household (HH)

Emergency shelter and household items		
	Unit per HH	Total
Kitchen sets	1	400
Blankets	2	800
Mosquito nets	2	800
Tarpaulins	2	800
6 mm nylon ropes, 30 m rolls	1	400
Emergency WASH⁴		
Hygiene kits	1	400
Jerry cans 10 L	2	900

Team composition:

Although there will be several additional volunteers providing support services, the activities will be delivered by 2 teams:

Team1 (remote areas)

This team will conduct assessments, registration and proceed to the distributions of NFI in addition of providing earthquake awareness activities, hygiene promotion and water handling activities. The group will consist of 10 male volunteers who will be transported by airplane in both Dodomona and Huya airstrips. From those locations they will have to walk several days to reach the following areas:

Dodomona Area	No. of people	Huya Area	No. of people
Dodomona Airstrip	367	Huya Airstrip	192
Aifa	63	Aiya	187
Baledei	81	Fufulaiya	168
Busuba	161	Bobole	417
Daroma (Galoma)	172	Fau	135
Dauba	170	Damalia	100
Gasamia	65	Namo/Namisado	60
Gebese	80	Total	1,259
Gulubia	49		
Manena	45		
Omabi	181		
Walema	114		
Total	1,548		

These communities were identified from aerial surveys and census and believed to be severely affected. The NFI's will be airlifted to the locations and distributed by the volunteers.

Team 2 (Southern Highlands)

This team of 10 volunteers will focus on earthquake awareness activities, hygiene promotion and water handling activities. They will focus on communities, care centres and schools situated in the Southern Highlands. The exact locations will be finalized in the upcoming days as it these activities will need to be coordinated tightly with ICRC and other stakeholders. They will be planned for 12 days separate in 2 or 3 field trips ideally.

³ PNGRC will also distribute baby bundles (kit with items for babies) to all families with children below one year of age. Those will not be replenished and will be absorbed by PNGRC outside the scope of this DREF

⁴ These are standard IFRC hygiene kits procured from regional logistics (KL) stocks. They also include some menstrual hygiene items for women.

C. DETAILED OPERATIONAL PLAN



Shelter

People reached:

Male: Not started

Female: Not started

Outcome 1: Communities in disaster and crisis affected areas restore and strengthen their safety, well-being and longer-term recovery through shelter and settlement solutions

Output 1.1: Short, medium and long-term shelter and settlement assistance is provided to affected households

Indicators:	Target	Actual
# households provided with emergency shelter and settlement assistance	400	Not started

Progress towards outcomes

Registration and distribution of NFI's will happen around Dodomona and Huya airstrips areas and are expected to start around 25 March 2018 for a period of 2 weeks due to remoteness of areas.



Health

People reached: 19

Outcome 1: The immediate risks to the health of affected populations are reduced

Output 1.1: The health situation and immediate risks are assessed using agreed guidelines

Indicators:	Target	Actual
# of volunteers deployed to provide assessments	20	10

Output 1.2: Target population is provided with rapid medical management of injuries and diseases

Indicators:	Target	Actual
# of people reached by First Aid services	Case by case	19

Output 1.3: Community-based disease prevention and health promotion is provided to the target population

Indicators:	Target	Actual
# of households receiving treated mosquito nets	400	Not started

Output 1.4: Psychosocial support provided to the target population

Indicators:	Target	Actual
# people receiving trauma awareness messaging	3000	Not started
# media campaigns disseminated through the population	1	Not started

Progress towards outcomes

Multi-sectorial assessments have been ongoing with 12 volunteers. First Aid has been provided during the assessments, but the information has yet to be consolidated and communicated between the branch and the field.

One report confirmed is that a team of volunteers providing first Aid to 6 children and 13 adults on 15 March 2018 after they came across a road accident.



Water, sanitation and hygiene

People reached: Not started

Male:

Female:

Outcome 1: Immediate reduction in risk of waterborne and water related diseases in targeted communities

Indicators:	Target	Actual
# of people reached by NS with services to address relevant WASH risk factors	3000	Not started

Output 1.1: Continuous assessment of water, sanitation, and hygiene situation is carried out in targeted communities

Indicators:	Target	Actual
# of volunteers deployed to provide assessments	20	12

Output 1.2: Hygiene-related goods (NFIs) which meet Sphere standards and training on how to use those goods is provided to the target population

Indicators:	Target	Actual
# households provided with essential hygiene items	400	Not started

Output 1.3: Hygiene promotion and handling activities are provided to the entire affected population.

Indicators:	Target	Actual
# of people reached by hygiene promotion and handling activities	3000	Not started

Progress towards outcomes

Multi-sectorial assessments have been ongoing, with 12 volunteers. Hygiene promotion and handling will start on 25 March 2018 along with distribution of WASH NFI's.

International Disaster Response

Outcome 1: Effective and coordinated international disaster response is ensured

Output 1.1: Effective response preparedness and NS surge capacity mechanism is maintained

Indicators:	Target	Actual
# of surge capacity roster members deployed	2	1

Output 1.2 : Supply chain and fleet services meet recognized quality and accountability standard

Indicators:	Target	Actual
% of international procurement respecting the IFRC procurement procedures	100%	25%

Output 1.3: Coordinating role of the IFRC within the international humanitarian system is enhanced

Indicators:	Target	Actual
# of coordination meetings with other stakeholders	N/A	12

Output 1.4: In the context of large scale emergencies the IFRC, ICRC and NS enhance their operational reach and effectiveness through new means of coordination.

Indicators:	Target	Actual
# of coordination meetings with other RC Movement partners	N/A	5 (regular)

Progress towards outcomes

IFRC Asia Pacific Regional Office operations coordinator has been deployed since 3 March 2018 to provide surge support for assessments, revision of budget and EPOA, coordination, logistics support and start-up of the operation. A generalist RDRT has been identified and will be arriving in the upcoming days with main tasks to provide technical support for monitoring the implementation of this operation, facilitating information sharing and ensure systems to collect proper data are working and provide technical guidance to the volunteers.

Operations coordinator has submitted final requisitions to Operational Logistics, Procurement & Supply Chain Management Department in Asia Pacific regional office, Kuala Lumpur in order to replenish the NFI's for the NS.

Regular coordination meetings have been attended at HQ and branch levels with other stakeholders and within Movement. Coordination meetings and exchanged on regular basis between Movement partners.

Influence others as leading strategic partner

Outcome 1: The IFRC secretariat, together with National Societies uses their unique position to influence decisions at local, national and international levels that affect the most vulnerable.

Output 1.1: IFRC and NS are visible, trusted and effective advocates on humanitarian issues

Indicators:	Target	Actual
# of communications materials produced (social media, media articles, interviews, etc.)	N/A	N/A

Output 1.2: IFRC produces high-quality research and evaluation that informs advocacy, resource mobilization and programming.

Indicators:	Target	Actual
# Lessons learned workshops	1	Not started

Progress towards outcomes

The PNG earthquake was well represented in the media as RC was one of the most active and visible actor to respond to the disaster.

Media highlights:

- Over 2,000 media and social media mentions of the Red Cross in connection with the Papua New Guinea earthquake from 25 February to 7 March 2018.
- Major drivers of coverage focus on death toll, Red Cross initial assessments on number of affected people, lack of accurate information, major aftershocks, concerns over access to safe drinking water as well as on the warning by the Red Cross that the situation could deteriorate because of the season of heavy rains.
- Udaya Regmi, the IFRC head of country office in Papua New Guinea and Uvenama Rova, the Secretary General of Papua New Guinea Red Cross have been heavily quoted in major online media outlets such as [CNN International](#), [the Guardian](#) and [Reuters](#).
- Good pick up of both press releases by international media outlets such as EFE, the Guardian and Reuters.
- Impressive international media coverage from CNN International, Reuters, AFP, New York Times, BBC News, the Guardian, EFE, AP and more.
- Good engagement on social media from both @Federation and @IFRCAsiaPacific – 2.5 per cent to 4 per cent engagement rate on Twitter (compared to monthly average of 1.5 per cent).
- A [Tweet](#) by AFP mentioning the Red Cross has been retweeted 61 times.

Main hashtags in use (in decreasing order of relevance, based on no. of tweets): #earthquake, #RedCross, #png, #papuanewguinea

The lessons learned workshop will be held at the end of the operation.

Logistics and supply chain

Logistic activities have aimed to effectively manage the supply chain, including, procurement, customs clearance, fleet, storage and transport to distribution sites in accordance with the operation's requirements and aligned to IFRC's logistics standards, processes and procedures.

PNGRCS had prepositioned stocks available and NFI's required to meet emergency response needs were released from in-country stocks and distributed to the affected population. Further, Australian RC supported PNGRCS bilaterally with NFI's (tarpaulins and mosquito nets as per IFRC specification) which NS used for relief phase response. Due to limited local market and to ensure the quality of the relief items for any future disasters, IFRC standard items released for this operation support will be replenished internationally by the IFRC Asia Pacific Operational Logistics, Procurement & Supply Chain Management (OLPSCM). Relief items distributed to meet immediate needs with specific local specification to ensure local and cultural aspects are met will be replenished by the PNGRCS with the support of IFRC CO and AP OLPSCM.

Rented vehicles have been used to transport staff and volunteers as well as relief materials to affected areas. To the extent possible, in the areas where ICRC has presence they have also been providing fleet support to NS with their vehicles and use of base when possible.

Whereas PNGRCS is having the lead role in logistics activities to support this operation, IFRC CO will stay in close coordination with the NS and support as needed. IFRC AP OLPSCM will also extend technical support to NS and IFRC CO as needed.



Click here for:

- [DREF operation](#)

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How we work

All IFRC assistance seeks to adhere to the **Code of Conduct** for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief and the **Humanitarian Charter and Minimum Standards in Humanitarian Response (Sphere)** in delivering assistance to the most vulnerable. The IFRC's vision is to **inspire, encourage, facilitate and promote at all times all forms of humanitarian activities** by National Societies, with a view to **preventing and alleviating human suffering**, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

The IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:



Save lives,
protect livelihoods,
and strengthen recovery
from disaster and crises.



Enable **healthy**
and **safe** living.



Promote **social inclusion**
and a culture of
non-violence and **peace**.
