

Coronavirus disease 2019 (COVID-19)

Papua New Guinea Situation Report 20



10 May 2020

*This Health Situation Report on coronavirus disease 2019 (COVID-19) is issued by the PNG National Department of Health (NDoH) **ONCE a WEEK**. This Report is not comprehensive and covers information that we have as of reporting date.*

HIGHLIGHTS

- ❑ Papua New Guinea has **eight cases of COVID-19**, to date: six cases were mild and have fully recovered; two were moderate cases, admitted to hospital and recovered, one of which was repatriated
- ❑ On 1 May, SOE Controller issued National Emergency Order No 30, 31 and 32 regarding following measures respectively:
 - Any person or organization **should not release COVID-19 test results** without written authorization of the Emergency Controller; and all persons or organizations that conduct any form of COVID-19 test must provide all test results to the Emergency Controller or his delegate within 24 hours of the result being known.
 - All incoming medical supplies procured on behalf of the Government of PNG are exempted from all customs duties and other import duties for the duration of the National Emergency.
 - No COVID-19 testing equipment shall be used, except for Reverse Transcription Polymerase Chain Reaction, Gene Xpert and Rapid Diagnostic Test.

GLOBAL SITUATION IN NUMBERS

The numbers are based on WHO Situation Report as of 9 May 2020.

**Globally: 3 855 788 confirmed cases
265 862 deaths**

**Western Pacific Region:
1 585 23 confirmed cases
6 449 deaths**

Countries/territories/areas affected: 215

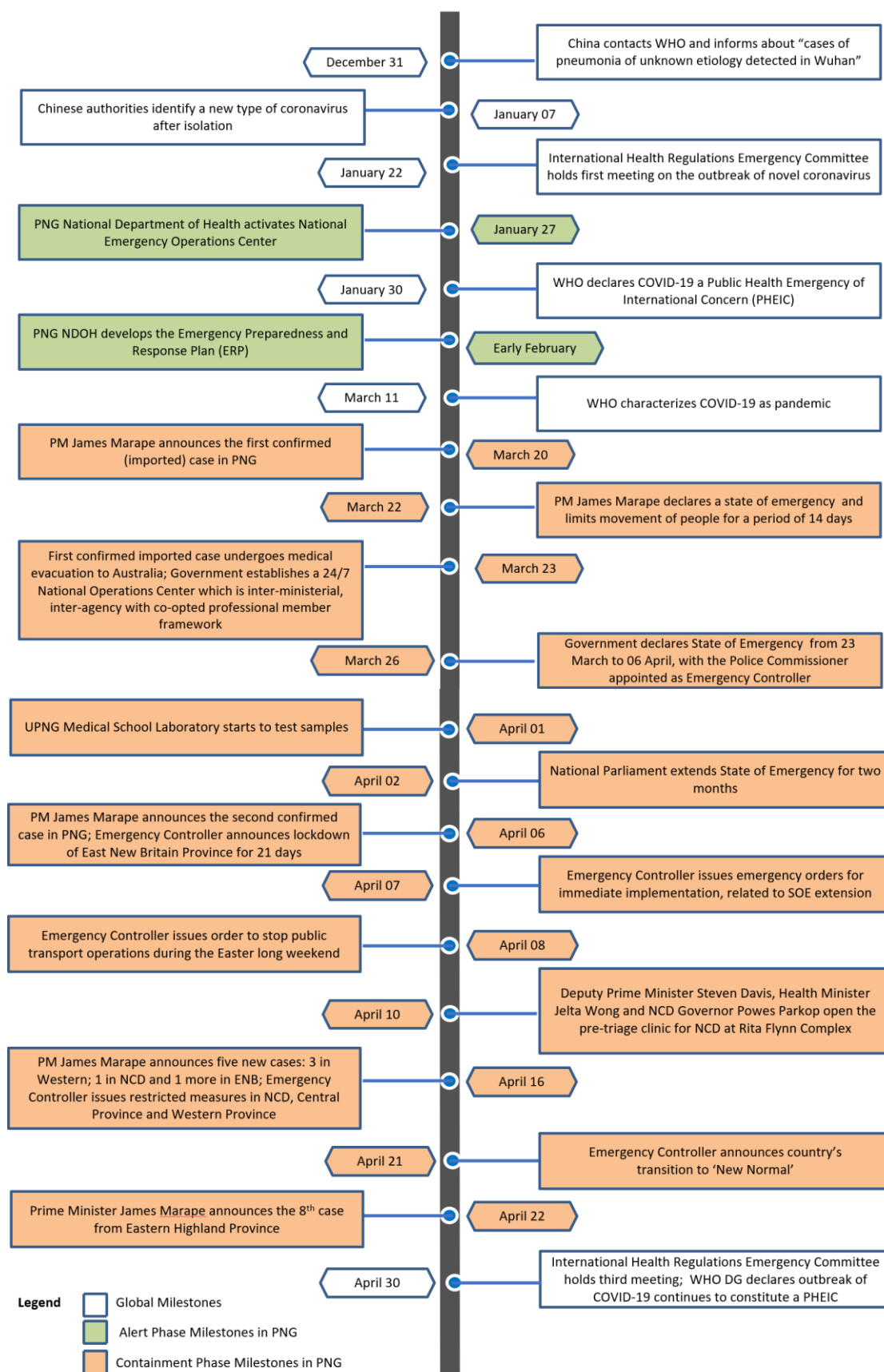
**Papua New Guinea: 8 confirmed cases
(all recovered)**

**East New Britain: 2 confirmed cases
Morobe: 1 confirmed case (repatriated)
NCD: 1 confirmed case
Western Province: 3 confirmed case
Eastern Highlands: 1 confirmed case**

- ❑ On 4 May, SOE Controller issued a directive for Department of Education to ensure that all primary and secondary schools are inspected using the checklist to mitigate the risk of COVID-19 and submit the compiled report to National Operations Centre (NOC) by 11 May.
- ❑ On 4 May, SOE Controller issued a directive for all public transport to adhere to the notified social distancing requirements during the current National Emergency: passengers should be limited to 5 less than the vehicle's licensed capacity for all forms of public transport and limited to 2 passengers for the licensed taxis.
- ❑ On 6 May, SOE Controller issued a notice of exemption on visa by types/classes: Short term visa (tourist, visiting relatives, easy visitor permit, yachtsperson) nearing expiration or have expired are exempted from paying an extension and penalty fees during the SOE; overseas students and holders of temporary visa (working residents and their dependents) are eligible for extension and exempted from penalty fees, if visa expired during the SOE period; non-citizens who are temporary residents and have not met the change of status requirements will be exempted from exiting the country to apply for a new visa.
- ❑ On 7 May, SOE Controller issued a directive stating that supermarkets and wholesalers are prohibited from sale of liquor on Friday, Saturday and Sunday.
- ❑ On 7 May, SOE Controller issued a media statement regarding the delegated powers and responsibilities to the Chief Secretary for the Autonomous Region of Bougainville (ARoB) and the City Manager for the National Capital District (NCD) with effect from 30 April till the end of the State of Emergency period. The powers and responsibilities include implementation of directions issued by the Controller with respect to prevent COVID-19 or its outbreak and its impact, movement of persons, regulation of business and all modes of transportation.

CHRONOLOGY OF EVENTS

Below is a timeline highlighting important global events and milestones in PNG during the various phases of response to COVID-19.



SURVEILLANCE AND POINTS OF ENTRY

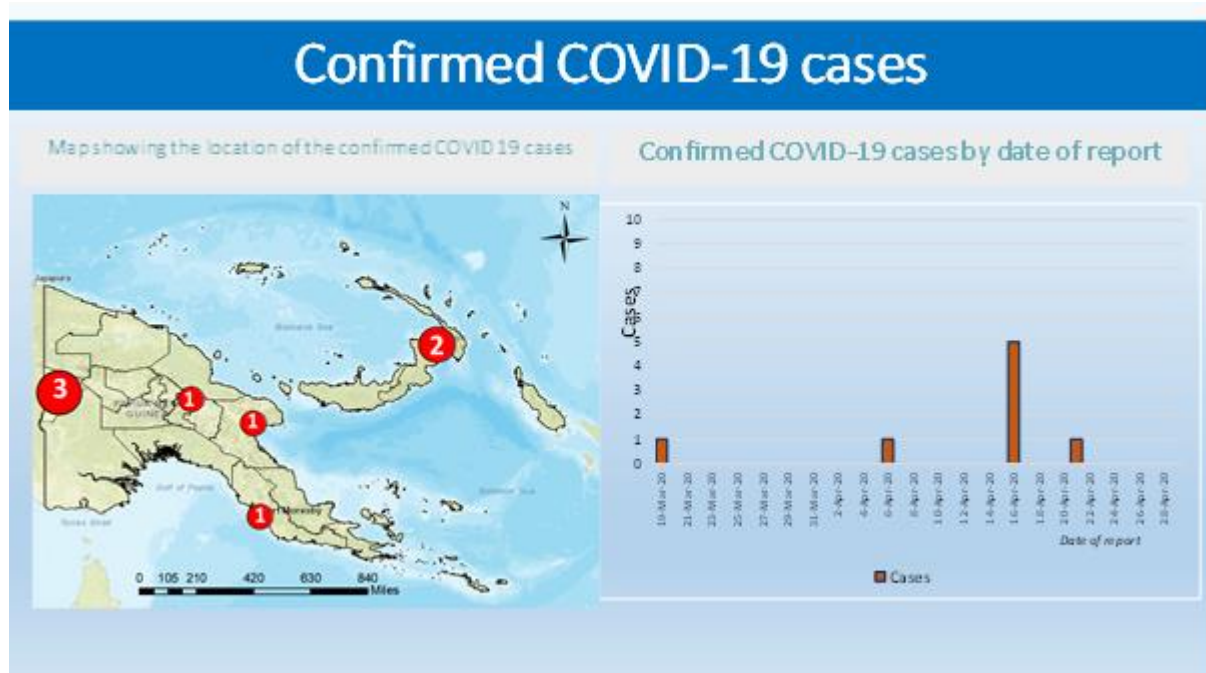
- ❑ Starting 5 May, the following terminologies for surveillance in PNG were changed to align with the transition to **Stage 2: Sporadic cases**, as PNG has one imported case and local cases undergoing investigation for evidence of local transmission:
 - **Persons of Interest (POIs)** is changed to **'travellers under screening and monitoring'** for international and local travellers (foreign and PNGians) that include all passengers, crew of the plane and vessel, who departed from the countries or provinces with ongoing local community transmission of SARS-COV-2 14 days prior to arrival without signs and symptoms. All international and local travelers will be monitored for 14 days.
 - **Persons Under Investigation (PUIs)** is changed to **'suspect COVID-19 case'** for any local or international people who meets the case definition of COVID-19 (please see the WHO COVID-19 case and contact definition below)

*1 A suspected case (A) A patient with acute respiratory illness (fever and at least one sign/symptom of respiratory disease, e.g., cough, shortness of breath), AND a history of travel to or residence in a location reporting community transmission of COVID-19 disease during the 14 days prior to symptom onset; OR (B) A patient with any acute respiratory illness AND having been in contact with a confirmed or probable COVID-19 case (see definition of contact) in the last 14 days prior to symptom onset; OR (C) A patient with severe acute respiratory illness (fever and at least one sign/symptom of respiratory disease, e.g., cough, shortness of breath; AND requiring hospitalization) AND in the absence of an alternative diagnosis that fully explains the clinical presentation. Probable case (A) A suspect case for whom testing for the COVID-19 virus is inconclusive. OR (B) A suspect case for whom testing could not be performed for any reason. Contact A contact is a person who experienced any one of the following exposures during the 2 days before and the 14 days after the onset of symptoms of a probable or confirmed case: 1. Face-to-face contact with a probable or confirmed case within 1 meter and for more than 15 minutes; 2. Direct physical contact with a probable or confirmed case; 3. Direct care for a patient with probable or confirmed COVID-19 disease without using proper personal protective equipment. At this time, brief interactions, such as walking by a person, are considered low risk and do not constitute close contact. *2 Fever may not be present in some patients, such as those who are very young, elderly, immunosuppressed, or taking certain medications. Clinical judgement should be used to guide testing of patients in such situation.
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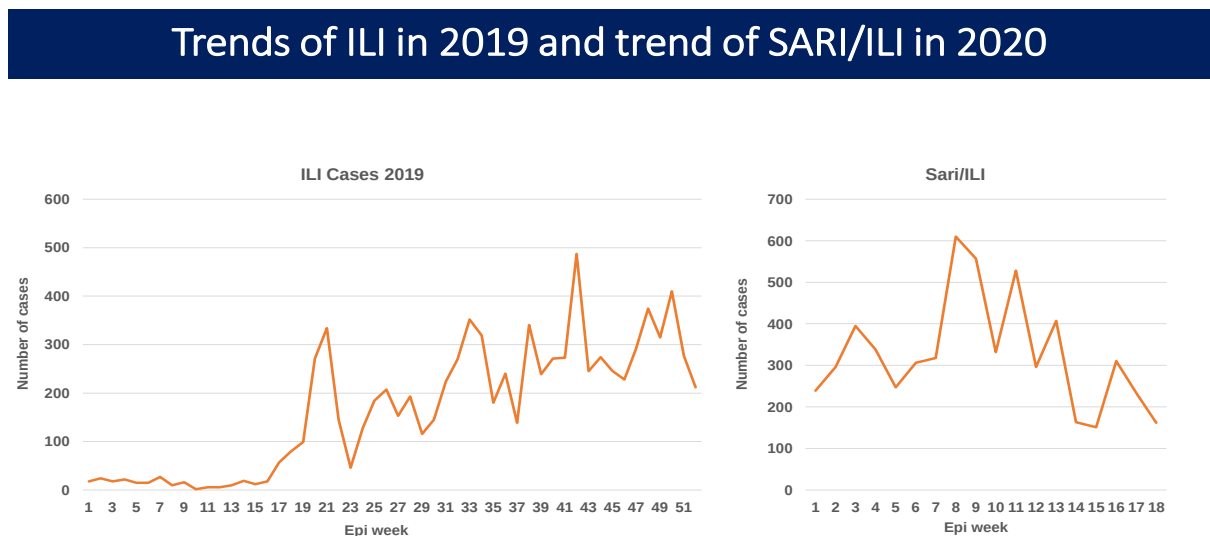
- ❑ As of 8 May, a total of **30,584** inbound passengers were screened at the Jacksons International Airport and seaport in Port Moresby. A total of **7,602** travellers were screened and identified to be monitored regularly by the Surveillance Team.
- ❑ Of the **7,602** travellers under monitoring, 7,457 (98%) have completed the 14-day follow-up period, while 145 are still on active monitoring. Majority of those monitored are in Port Moresby.
- ❑ There have been 2313 samples tested: 8 tested positive for COVID-19, 2305 tested negative.
- ❑ As of 8 May, the updates from the surveillance, points of entry and laboratory clusters are summarized below.

PNG Surveillance: Points of Entry Update (airport and seaports as of 8 May 2020)





- ❑ NDOH and WHO are working with the provinces/PHAs develop and strengthen the surveillance system to monitor the number of Influenza like illnesses and sub-acute respiratory illness. Shown below is the epidemic curves for 2020 compared to same period in 2019



- ❑ The COVID-19 Hotline **1800200** receives an average of 2,000 calls per day from all provinces of the country.

CLINICAL MANAGEMENT and INFECTION PREVENTION AND CONTROL

- ❑ On 9 April, NDoH with the technical support of WHO trained 52 trainers on surveillance, clinical management and infection prevention and control. The trainers are from National Department of Health, Port Moresby General Hospital, Central Provincial and National Capital District Health Authorities and partner NGOs such as World Vision.
- ❑ On 23 April, NDoH with the technical support of WHO conducted the **first 'Virtual Training on COVID-19 Response'** for **five trainers** in Hela Provincial Health Authority. The virtual training covered surveillance, clinical management and infection prevention and control, and risk communication. The logistic support, including the training venue and internet facilities were provided by Oil Search Foundation office based in Hela. These trainers will train the health workers responsible for respective technical area in the province. Similar virtual trainings will be conducted for the provinces in the coming days.
- ❑ On 24 April, a team from the NDOH and WHO visited Lae in Morobe Province to assess the quarantine facility at 11 Mile and isolation ward, which was being built at Lae Stadium by the Provincial Health Authority. Technical recommendations were provided to initiate improvements required.
- ❑ On 27-29 April, WHO supported the second **'Virtual Training on COVID-19 Response'** for 28 healthcare workers from Autonomous Region of Bougainville (AROB). The participants were doctors, nursing officers, midwives, HEOs, lab staff and volunteers from various health facilities including Buka general hospital, Arawa district hospital and health centers. WHO STOP consultant on the ground and WHO CO staff facilitated sessions on clinical management, IPC, surveillance and risk communication. An epidemiologist from WHO Western Pacific Regional Office facilitated the session on rapid response team.
- ❑ On 2-3 May, a team from NDoH conducted a 2-day training on clinical management, IPC, surveillance and risk communication for 20 healthcare workers in West Sepik. The participants were OICs of health centres, district health managers, and clinicians in the hospital.
- ❑ On 5-6 May, a team from NoDH conducted a 2-day training on clinical management, IPC, surveillance and risk communication for 32 healthcare workers in Kiunga, North Fly District, Western Province. The participants were OICs of health centres, surveillance officers and clinicians
- ❑ On 6-7 May, WHO supported the third 'Virtual Training on COVID-19 Response' for 31 healthcare workers in Madang. WHO STOP consultant on the ground and WHO staff facilitated sessions on clinical management, IPC, rapid response and risk communication. Upon the request from the Provincial Health Authority, clinicians have been trained more in depth on clinical management of COVID-19 patients with focus on triage and early recognition of patients with severe acute respiratory infections, clinical syndromes such as acute respiratory distress syndrome, sepsis, oxygen therapy.
- ❑ All provinces are ramping up the establishment of pre-triaging areas and isolation facilities. *[For details: Refer Updates from the Provinces Section]*
- ❑ Based on the PNG Health Service Profile, there are 741 health facilities with 5,400 hospital beds, more than 50 Intensive Care Unit (ICU) beds and 9147 health workers (medical doctors, Health Extension Officers, nurses and CHWs). Most provinces do not have quarantine facilities nor isolation wards. The number of functional ICU facilities is inadequate.

COMMUNICATION AND COMMUNITY AND ENGAGEMENT

- ☐ The 4th edition of the Communications Plan for COVID-19 (covering both risk communication and community engagement) has been circulated to all provinces, partners and development agencies. The Communication Plan is also available online in this link: [PNG COVID-19 Communications Plan \(4th Edition\)](#). The Communications Plan is a product of collective efforts from all the organizations led by NDOH, with support from WHO, UNICEF and partners under Health, Protection, WASH and Education clusters.
- ☐ A COVID-19 **MESSAGE BANK** with a compilation of key messages for various sectors and audiences is also available. As the country transitions to “new normal”, the message bank also includes other social issues beyond health, such as human rights, protection, prevention of violence against women and children.
- ☐ Updates on the ongoing communication activities, distribution of IEC materials and trainings:

Mass media messaging	IEC materials	Trainings
Radio Radio Maria and Wantok Radio Light continuing broadcasting of key messages on Facts of COVID-19 and reducing Risks. This is scheduled for 30 days – May 3 to June 3. TV Spot New Radio/TV Spot of 2 minutes of scheduled broadcast by NBC. This was produced by WHO featuring Dr. Wangi on Facts of COVID-19 and Risk Reduction Audio of this production has been abstracted and broadcasted on Christian Radio Stations – Radio Maria and Wantok Radio Light. Hour of Hope broadcasted twice a day by the Council of Churches (this week's topic is on mental health and psychosocial support) Q&A on NBC TV for key issues related to SOE and COVID-19 hosted by the PNG Joint Agency Task Force NOC-19 News Prints Daily running print on 5 key messages in the bottom page of the daily newspapers	☐ Received 800 boxes of printed materials, each weighing 16kilograms (500 posters per box) totalling 400,000 pieces, delivered to NDOH, Health Promotion Branch. These are two (2) different IEC posters, (1) COVID-19 Know The Facts (400 boxes) and (2) Reduce Your Risks (400 boxes). ☐ These are being labelled by Districts for distributions and delivering through the PHAs. ☐ Each District will be receiving 2,000 copies each of (1) COVID-19 Know The Facts (8 boxes) and (2) Reduce Your Risks (8 boxes) ☐ All Southern Region provinces have been sent - Western and Oro at ANG cargoes (11am – 9 May). Milne Bay sent on Thursday (10am Flight -7 May) and Central all sent on Wednesday (2pm – 6 May). NCD and Gulf picked up this morning (10am – 9 May). ☐ Momase Region - Morobe, Madang, ESP and Sandaon being packed for tomorrow's flights. ☐ Two (2) boxes of each IEC Materials (1000 pieces) have been requested by the Police Department and delivered Friday, 2pm - 8 May. ☐ 88 boxes (44 of each material) are expected to remain. This will be distributed to Districts in need of more, Government Departments, and needed areas, etc.	☐ Online training on risk communication provided to Madang Province ☐ Other provinces who received online trainings: Hela, AROB

- ☐ Education and health sectors, church partners and NGOs are working together to develop communication materials for the schools – especially in the context of the new normal.

- ❑ Nearly 50 villages in Sogeri and Mt Koiari in the Kokoda Track region have been visited by health patrols from the Central Provincial Health Authority and Kokoda Initiative to provide information sessions on #COVID19 and preventative measures. This includes training on the importance of basic hygiene, proper sanitation and social distancing to avoid the spread of COVID-19. The health patrol was supported by the PNG-Australia Partnership.
- ❑ St John Ambulance continues to provide support in the management and operation of the hotline 1800-200. Talking points and Q&A has been updated, in partnership with WHO, to include frequently asked topics from the public.
- ❑ Starting 4 May, the NCD PHA with the support from NDoH, WHO, UNICEF and World Vision is organizing a 10-day city-wide sensitization and training programme to support public awareness raising of potential risks and the impact on communities through a network of COVID-19 community leader advocates
- ❑ **Mass awareness campaign continue in all provinces.**



East Sepik: Awareness Campaign on COVID-19



Morobe: Patricia, our health worker from Morobe talked to people about preventing COVID-19 after the church service at Sacred Heart Catholic Church in Lae.

NON-PHARMACEUTICAL INTERVENTIONS (PUBLIC HEALTH SOCIAL MEASURES): TRANSITION TO “NEW-NORMAL”

- ❑ Non-pharmaceutical interventions (or public health social measures) is one of the key pillars of the PNG COVID-19 pandemic preparedness and response plan.
- ❑ The implementation of the social measures was facilitated with the declaration of the State of Emergency (SOE) that took effect on 22 March, initially for 14 days, and now extended until 2 June.
- ❑ On 21 April 2020, the SOE Controller David Manning announced PNG’s transition into the “new normal” way of life in the context of COVID-19. Several restrictions under the SOE were relaxed, guided by public health principles, together with economic and societal considerations.
- ❑ On 22 April, SOE Controller announced that the Universities and tertiary education resume on 27 April, Monday, and Primary and secondary schools resume on 4 May 2020. All COVID-19 health protocols are to be strictly observed.

- ❑ On 22 April, Minister for Education Hon Joseph Yopyyopy issued a Media Statement regarding the 'Reopening and Recovery of lessons during COVID-19 period' with clear instructions on approaches to recover the missed academic sessions; and adopting the 'New Normal' awareness messages and actions published by WHO, UNICEF and IFRC.
- ❑ On 29 April, SOE Controller David Manning and Secretary for Department of Personnel Management Taies Sansan issued a joint circular regarding the 'Ongoing implementation of the COVID-19 Emergency Orders and New Normal work arrangements' with an instruction for Public service employees to resume normal duties with effect from 4 May, Monday; ensuring proper 'new normal' safe workplace arrangements are consistent with the Health, Safety and Hygienic procedures.
- ❑ A technical team under the National Operations Centre in collaboration with NDOH and economic sectors, with the support from WHO, is currently drafting the policy on the transition to the 'New Normal' for submission to NEC.
- ❑ A full information package on the COVID-19 prevention and control as a "new normal" in the time of pandemic is being prepared by NDOH, with support from WHO.
- ❑ A joint meeting by the NDOH, WHO, UNICEF and PNG-Australia Policing Partnership was held on 30 April 2020 to discuss updates on work related to communication, community engagement and non-pharmaceutical interventions, especially on the transition to the new normal.

LOGISTICS and SUPPLIES

- ❑ Personal protective equipment (PPE) and other supplies have been dispatched to the provinces.
- ❑ WHO and UNICEF providing technical support to the National Operations Centre and in providing coordination for PPE procurement and distribution to frontline workers nationally.
- ❑ Supplementary distributions of gowns to all 22 provinces were delivered.
- ❑ Chinese government donated 1000 disposable clothing and 500 gloves.
- ❑ On 2 May, the logistics team received 6000 UTM's and 10% of the upfront PPE donated by Australian Government.
- ❑ On 2 May, the logistics team received 8 PCR Reagent Enzyme kits (500 reactions each), 8 RNA Extraction kits for IMR and 36 SARS-COV-2 Gene Xper cartridges for CPHL donated by WHO.
- ❑ The following stocks are in transit to PNG, awaiting Air Niugini Charter: 11MT from UNICEF, 11.5 MT from Chinese government and 0.6MT from Solomon Islands High Commission.
- ❑ It is expected to receive 90,000 surgical masks and 7200 protective suits donated by Jack Ma through Pacific Humanitarian Pathway (awaiting AWB/ETA).
- ❑ UNICEF is exploring to supply 15,000 GenXpert cartridges through their supply division, awaiting arrival date due to issues with high demand and prolonged lead time.
- ❑ 55 tents for pre-triage screening has been procured and distributed to the Provinces.

New distributions of PPE (as of 6 May 2020)

	Province	Team	N96 Masks pieces	Surgical Masks pieces	Gloves pieces	Coveralls pieces	Biohazard Bags	Surgical caps pieces	Shoe covers pieces	Goggles	Hand sanitizers 500 ml/ bottle	UTMs
Highest Priority- Provinces with Confirmed Case												
8	NCD	NDOH	0	2000	200	0	0	0	0	0	0	0
9	NCD	UPNG		500			0	0	0	0	20	0
High Priority- Border Provinces												
10	WSP	Surge (3.05.2020)	150		2,000	60	0	0		0		600
Priority for Surveillance												
Total Distribution from 01-30 May 2020			150.00	2,500.00	2,200.00	60.00	-	-	-	-	20.00	600.00

UPDATE FROM THE PROVINCES

NEW GUINEA ISLANDS REGION

Autonomous Region of Bougainville

- ❑ The Bougainville Emergency Controller Francis N. Tokura issued Emergency Order No 3 with the following directives:
 - Commencement of schools: All teachers to resume duties on 27 April and all schools, except tertiary institutions resume classes on 11 May. All COVID-19 health protocols are to be strictly observed.
 - Travel restrictions: all incoming flights are restricted except for medical equipment and other essential materials.
 - Resumption of public service: normal public service resumed on 5 May. All COVID-19 health protocols are to be strictly observed.
 - No street vendors in the urban towns of Arawa, Buka, Buin and other District Centres
 - All 24ft outboard motor operated boats shall carry not more than 10 passengers including skipper; All 23ft boats shall carry not more than 8 passengers including skipper and all 19ft boats shall carry less than 6 passengers including skipper.
 - Continued to ban on consumption, transportation and production of beer.
 - Amended to increase church gatherings from 10 to 50 people, however maintaining 1.5 meters apart seating allocation.
- ❑ On 27-29 April, WHO supported a 'Virtual Training on COVID-19 Response' for 28 healthcare workers from Autonomous Region of Bougainville (AROB). The participants were doctors, nursing officers, midwives, HEOs, lab staff and volunteers from various health facilities including Buka general hospital, Arawa district hospital and health centres. WHO STOP consultant on the ground and WHO CO staff facilitated sessions on clinical management, IPC, surveillance and risk communication. An epidemiologist from WHO Western Pacific Regional Office facilitated the session on rapid response team.
- ❑ **Surveillance** mostly involved screening at Ports of Entry at the Buka Airport and Buka Wharves.
- ❑ A **pre-triage** (Cough Triage) has been set up at Buka Hospital for the outpatients. All patients with cough are directed to the cough Triage for review/screening.
- ❑ The current Pathology labs at Buka Hospital and Arawa District Hospitals do not have bio safety cabinets although both hospitals do run Gene Xperts. Buka Hospital has identified a previously designated laboratory- container (but never used) near the Acute COVID-19 ward that can be used to hold the Gene Xpert machine for COVID-19 testing if Gene Xpert testing is implemented.
- ❑ The renovation of Buka Hospital Acute COVID-19 Ward will begin shortly and changes have been made with NDOH endorsements. This ward will cater for 4 beds, however, if there are more cases, bed settings will have to be adjusted to cater for more cases.
- ❑ The staff roster for the isolation ward at Buka Hospital is prepared in advance.
- ❑ Suhin Health Center is identified as an Isolation Point and it is currently undergoing renovations
- ❑ AROB produced and distributed 35,485 IEC materials to 40 health facilities, covering 356,387 people. The IEC materials included posters on prevention, travellers' messages, messages for health care workers, schools and FAQs in both English and pidgin languages. Also issued 2x national ERPs and 2x SOPs for surveillance to each of the 40 HFs.



East New Britain

- ☐ Surveillance at the airport and seaport are continued.
- ☐ A cough triage bay established in 60% of health facilities.
- ☐ On 1 May, Butuwin isolation and quarantine units were commissioned and officially opened.
- ☐ The training on IPC, clinical management, surveillance and infection prevention and control was conducted by the visiting national team with assistance from WHO: roll out to 80% of health facilities.
- ☐ A total of 21 rural health surveillance officers are trained on COVID-19 response, including surveillance, ILI/SARI and IPC.
- ☐ A total of 32 Health facilities are open and operating.
- ☐ The PHA started awareness on stigma associated with COVID-19 in addition to the general awareness in Villages in close collaboration with village councillors.
- ☐ On 6-7 May, a team of 10 healthcare workers led by Surveillance cluster (J. Kais) went to Pomio district by ship and conducted training and awareness to healthcare workers from 10 health facilities from Pomio district. They also brought PPEs and about 100 UTM's for training purposes and for the use in the district. The team will be there for at least 5 days before returning to Kokopo.
- ☐ Asian business houses assisting with water basin and soap for handwashing in public areas like market, bus stops and outside shops.

Manus

- ☐ On 8 May, the Manus PHA commissioned the isolation unit: 12 rooms with beds, toilet and shower facilities, 1 common room and 2 storage rooms (40ft container relocated from refugee center).
- ☐ A 2-day training on infection control, triage referral pathway, use of PPE, Point-of-Entry surveillance and screening, specimen collection, risk communication and awareness, community engagement and waste management was conducted.
- ☐ To date, still no operational ambulance vehicle to transport confirmed cases and no sea ambulance.
- ☐ Manus PHA has trained RRTs. Routine weekly syndromic surveillance are being conducted for COVID-19, screenings to identify POIs and monitoring of POIs under quarantine.
- ☐ Manus PHA has trained personnel and appropriate materials available to carry out specimen collection, packing and shipment. Designated courier for shipping the specimens is TNT.
- ☐ The Emergency Department pre-screening procedures in place and a triage system, pre-triaging area and patient flowchart established.
- ☐ There are no provisions for psychosocial support for the health worker.

New Ireland

- ☐ New Ireland PHA proposed the construction of a 6-bed COVID-19 Isolation Ward, pending confirmation of the construction site
- ☐ ICU capacity very limited, and no isolation and quarantine facilities yet. A building being marked for Isolation unit with no capacity and requires renovation (not funds allocated yet).
- ☐ Conducted a survey with an objective to assess the effectiveness of awareness to determine the level of understanding the communities have on the mass awareness being rolled out on COVID-19 in the province. The survey found fair understanding of the disease but there is still confusion and fear about the disease. This could be due to different messages from not only health personnel but other sources and agencies/NGOs. There is a need for clear and similar messages and addressing peoples' fears and concerns including stigmatization.
- ☐ A total of 298 healthcare workers were trained triaging and patient referral pathways, clinical management, IPC and surveillance. in the last 1 month using funds from NDOH.
- ☐ ADI assisted with PPE, hand sanitizers, and assisted with awareness

West New Britain

- ☐ The provincial COVID-19 response team developed a triaging pathway.
- ☐ The infrastructure development for isolation unit is in progress.
- ☐ The next priorities are infrastructure development for quarantine facilities and triaging areas at the hospital and health facilities.
- ☐ For communication, the province set up a billboard at Hoskins airport; 15,000 IEC material distributed in the provinces; ~76,441 people reached through community awareness and community participation; and material for banners purchased for printing COVID-19 prevention messages. A total of 99 shops visited, 81 has hand washing basins with soap provided and the remaining were encouraged to have these facilities.
- ☐ The PEOC hotline: 74464931 (Digicel)/ 9835682 (Landline).
- ☐ The health desks are set up and staffed at all ports of entries (airport & stevedoring)
- ☐ The training on PPE and Clinical management of COVID-19 for 240 frontline health care workers were conducted in 4 batches; and 1 for law enforcement (22 police).
- ☐ Concerns were raised regarding the PPEs for police personnel.
- ☐ Total of K800,000 (WNB Provincial Government: K 600,000 and NDoH: K200,000) was allocated for COVID-19 response in WNB.
- ☐ The business houses in the province donated IEC materials, PPEs, construction materials, rations and printed advocacy materials.
- ☐ The upcoming priorities are: school and shops hand washing facility inspection; mortuary to be cleared, fix incinerator, complete set up of the 2 triage facilities, training for Bali, Vitu, Kandrian, Glousesta and Kandrian, and training for all school teachers.
- ☐ There are several challenges in preparing for COVID-19 response: staff who are exposed to POIs are subject to stigmatization by neighbours and fellow staff members; armed hold-up on ambulance by thugs pretending to be patients; buai smuggling; security personnel abused by public for denying entry to hospital; funding and lack of support for Southcoast.

MOMASE REGION

Morobe:

- ☐ The Morobe Provincial Health Authority conducted series of trainings on 'Infection Prevention and Control' for COVID-19 for various stakeholders in the province:
 - On 14 April: IPC training and COVID-19 awareness to major trucking company employees (Mapai transport, Traisa Transport and IPI transport).
 - On 16 April: Ramu sugar staff and management
 - On 19 April: Morobe Provincial Administration staff /employees.
 - On 21 April: identified staff for clinical case management.
 - On 22 April: Morobe CIS staff.
 - On 24 April: Susu mama staff
 - On 27 April: Angau Hospital Clinical staff
 - On 28 April: Lutheran Health Services staff, Morobe Province.
 - On 29 April: Wampar Health Center staff

Madang

- ❑ On 6-7 May, WHO supported a 'Virtual Training on COVID-19 Response' for 31 healthcare workers in Madang. WHO STOP consultant on the ground and WHO staff facilitated sessions on clinical management, IPC, rapid response and risk communication.
- ❑ On 28 April, basic information on COVID-19 awareness was conducted for the participants from log managers, district sectors program managers and volunteers of Middle Ramu District at the IPA building at the Madang provincial administration complex.
- ❑ The Modilon Hospital has initiated to set up the work station for **screening (pre-triage)** using few materials as the initial set up.
- ❑ Modilon Hospital repurposed and refurbished Ward 5 and installed 4 beds to keep the suspected cases sample collection.
- ❑ The isolation ward will be improved to a self-contain unit with toilet, shower, cooking area, laundry and clothes line, hand washing basin, temporary fencing to prevent entering this area.
- ❑ The health care workers need training in surveillance, infection prevention and control and clinical management for COVID-19 Response.



Madang: Healthcare workers attending virtual training on IPC, Clinical management, rapid response and risk communication supported by WHO (Photo credit: EMTV)

West Sepik

- ❑ On 2-3 May, a team from NDoH conducted a 2-day training on IPC, surveillance and risk communication for 20 healthcare workers in West Sepik. The participants were OICs of health centres, district health managers, and clinicians in the hospital
- ❑ A one-day training was conducted for 40 officers from rural health facilities and SPH laboratory, who will be responsible for sample collection and packaging.
- ❑ The province initiated active social mobilization reaching out to communities within the Vanimo Urban LLG.
- ❑ A training to shop owners was also conducted to emphasize on social distancing and handwashing. Shops that met the requirements for social distancing and handwashing facilities were identified and cleared for opening to customers.
- ❑ A total of 10 health workers are deployed at 4 POEs (along Indonesian border) in Vanimo Green District: 2 at Nyaukono, 2 at Schotchio, 4 at Kwek and 2 at Kembratoro.
- ❑ The Province used helicopter to deploy teams at POEs and deliver medical supplies and camping logistics at the POEs in Vanimo Green District.
- ❑ The teams at the POEs accessible by road were provided with vehicles and fuel.
- ❑ Vanimo Green district is also facilitated to explore possible isolation unit preparation for the estimated 80 prisoners who have been held in jails in Jayapura that will be released to PNG. Negotiations with the Ward member and Village Leaders commenced 14/4/20 to allow the use of Schotchio abandoned Jumbo Tract Limited (JTL) Logging Company camp facilities; and was agreed.

- ❑ In BWO LLG, all ground POE ground preparation is in order, except for Wutung which need deployment of the team. Quarantine facilities and staff camping is yet to be sorted, following which health team will be deployed.
- ❑ The POEs have been established and health teams been deployed in Walsa LLG, Green River LLG, Amanab LLG and Yafar 3.
- ❑ Security personnel are deployed at the POEs along with the health workers at Schotchio, RPC Bewani, Schotchio, Kwek, Kembratoro and Riverine.
- ❑ There are several challenges faced by Vanimo Green district regarding the deployment of security teams at the some of the POEs: no security personals at Nyaukono, the contract with the hire car for RPC Bewani has now, and Yafar 3 POE does not have security deployment arrangements.
- ❑ There are also some challenges with road accessibility and communication with the POEs. The SOE Command instructed AFL and Border Int/DD Investment to clear up the road access to those points.
- ❑ Sandaun Provincial Hospital has sorted out its **pre-triage** site for ILI screening. However, equipping it is bit slow to due unavailability of some of basic supplies in Vanimo.
- ❑ Baro CHP and Dapu UC have put up make shift ILI triage facility using make shift materials.
- ❑ To the extent possible, any cases identified will be isolated and managed at the local setting that each district has been entrusted the responsibility to identify and set up. The serious confirmed cases of COVID -19 needing life support will be referred to the hospital for management in isolation ward setup.
- ❑ Sites have been identified for isolation units in the 2 major health facilities within the Aitape Lumi District: Raihu District Hospital and Lumi Health Centre.
- ❑ The provincial social mobilization team have been active in working with the security personals to disseminate information to the communities accessible by road. The main objective if the advocacy campaign is to prepare the people if there is a confirmed positive case within the community to avoid fear and stigmatization.
- ❑ The team also conducted an advocacy for the CIS warders and inmates, police mobile squads and shops to orient them on COVID-19 and importance of social distancing.
- ❑ IEC materials worth of K2000.00 have been printed and awaiting collection upon payment.
- ❑ On-going risk communication Aitape Lumi District by conducting trainings and continued public awareness with emphasis on public health messaging at all levels: Personal hygiene (soap & water, Cough into flex elbow, do not touch your face); Social distancing (1.5 – 2 m in meetings, in public areas - bus stops, buses, shops, banks, ATMs, offices); when sick, stay at home and wear a mask when out in public.
- ❑ From the province, logistics has been supported through Health Functional Grants and Hospital Operations funds.
- ❑ PPEs received from NDOH are distributed.
- ❑ In Vanimo Green district, each team at the POEs are given a week's rations (basics); camping gears (pots, bush knives, lightings, batteries, Basic PPEs such as facemasks & gloves), hand sanitizers, and toiletries. Resupply of rations will be based on PROs assessment reports and reissued after a week. Personal emoluments process will begin as soon as all team's personnel are deployed to sites and feedback received from PROs.
- ❑ Moving forward, Vanimo Green district will be rearranging the COVID-19 Response Coordination; ensure essential Services are progressing; ensure ILI Triaging is established at all health facilities in the district to monitor patients coming into the clinic for possible POIs; establish communication with Local Community Leaders, Headmasters, Board of Management for the establishment of POE Screening sites, Quarantine Bay/Shelter and Treatment Centres for very sick COVID-19 case if detected; and work with the main Provincial Counter Covid-19 Coordination Committee in deploying Security personnel to the POEs. For Aitape Lumi district, the next priorities are training

and recruitment of unemployed HEOS, nurses & other health care workers; assess, procure and provide basic urgently needed medical equipment and other supplies including medical supplies; procure a fully kited ambulance for covid-19 patients transportation including the rapid response team; continuous risk communication advocacies; fund isolation units for Raihu & Lumi; develop a contingency budget for HCW risk as assurance /security for HCW to manage cases; and ensure funds to manage COVID-19 cases.

HIGHLANDS REGION

Hela

- ❑ On 23 April, NDoH with the technical support of WHO conducted a 'Virtual Training on COVID-19 Response' for **five trainers** in Hela Provincial Health Authority. The virtual training covered surveillance, clinical management and infection prevention and control, and risk communication. The logistic support, including the training venue and internet facilities were provided by Oil Search Foundation office based in Hela. These trainers will train the health workers responsible for respective technical area in the province. Similar virtual trainings will be conducted for the provinces in the coming days.

Jiwaka

- ❑ All 28 reporting health facilities were ordered to set up cough triage, screen all cough cases separately, and report SARI urgently to PEOC on a daily basis.
- ❑ The facility set up for persons under investigation in Kindeng is now ready and in use.
- ❑ Other activities include: transport allocation for SARI patients with 1 full-time dedicated ambulance; preparation of isolation unit equipped with beds, oxygen and water supply; set up and operation of check point surveillance at the eastern and western parts of the Highlands Highway; IPC and PPE distribution to surveillance focal points and frontline health workers; and, IEC distribution (17 492 issued posters and brochures and 3 billboards) and advocacy (estimated reach of 20 000 population).



Jiwaka: Cough triage tent at Nazarene General Hospital, Kudjip



Jiwaka: New handwashing station at Kindeng health centre



Jiwaka: Isolation Unit at Kindeng health centre

Simbu

- ☐ As of 26 April, a total of 325 healthcare workers were trained on IPC, risk communication, case management, surveillance and rapid response.
- ☐ All 36 health facilities will be reporting for ILI, SARI, COVID-19 and others respiratory related illness through established ODK link and supervisors by District disease control officers on daily basis.

Western Highlands

- ☐ The total budget required for WHPHA to achieve the goals including the ability to expand its capacity for COVID-19 response is estimated at K 3, 618,000.00, out of which K 420,000 is allocated
- ☐ Training of health care workers to manage COVID-19 is a priority for the province.
- ☐ The WHPHA Health promotion and Disease Prevention teams are leading the advocacy programme and have produced pamphlets and posters to ensure the message is continued when they have left the site.
- ☐ To maintain minimum disruption to the essential health services, clinical plans for O&G, Eye, Paediatric, Emergency Department/Adults are completed and the plans for Medicine and surgery are in draft form pending sign off.
- ☐ The isolation ward is being established in the chapel considering proximity to laundry and the incinerator. In addition to the current support from ICRC, additional resources are required to refurbish and furnish the isolation ward. It is also planned to build accommodation on the Hospital compound for staff working directly with COVID-19 patients to prevent infection.
- ☐ It is planned to procure 2 portable ventilators with monitors for the ICU.
- ☐ The construction of a quarantine shed is ongoing.
- ☐ For additional quarantine facilities: Tinsley Hospital and Tambul are proposed.

SOUTHERN REGION

Central

- ☐ On 1 May, Hon Sir Dr Puka Temu, Abau MP and a team from Central Province PHA and Rita Flynn visited Kupiano Hospital.
- ☐ On 1 May, Hon W. Samb, Goilala MP and a team from Central Province PHA including WHO consultant visited Woitape. The team delivered the IEC materials.
- ☐ On 4 May, Hon P. Isoaimo, Kairuku/Hiri MP and a team from Central Province PHA and Rita Flynn visited Bereina health centre.
- ☐ Nearly 50 villages in Sogeri and Mt Koiari in the Kokoda Track region have been visited by health patrols from the Central Provincial Health Authority and Kokoda Initiative to provide information sessions on #COVID19 and preventative measures. This includes training on the importance of basic hygiene, proper sanitation and social distancing to avoid the spread of COVID-19. The health patrol was supported by the PNG-Australia Partnership.
- ☐ CPHA Logistics Team delivered supplies: PPEs, Soaps, Information papers (WHO guidelines & Triage settings) to Hula, Kwikila, Boregaina, Upulima and Kupiano, Bereina, Veifa, Agevairu Porebada and Sogeri.
- ☐ A total of 12 Infra-red thermometers, 6 tents, 6 tables and 12 Chairs were bought for the CPHA COVID-19 Response team.
- ☐ The CPHA COVID-19 Response Team convened a series of meetings with Rita Flynn COVID-19 Emergency team on the response plan.
- ☐ Additional supplies were bought 6 cartons of gloves, 20 cartons of bar soaps for distribution.
- ☐ Quarantine and isolation facilities are identified in Kwikila and Bereina, awaiting the delivery of the tents donated by partners.
- ☐ Trainings for the RRTs were conducted by the trainer.

Gulf

- ☐ Repurposed the old TB ward to be used for isolation.
- ☐ The province has identified 3 quarantine sites: Kanabea, Kerema and Kikori, however, work has not started due inadequate funding. One will be set up when the donated tents are received.
- ☐ The training for the RRT is a priority for the province.

Milne Bay

- ☐ The construction and refurbishment of the COVID-19 Isolation 'round house' facility is in progress and will be ready by next week.
- ☐ The team is working on the strengthening of information management for ILI/SARI and surveillance at the health facilities. SOP/IPC to be done with Alotau DHS health centres on Tuesday. NPS and Testing to be implemented for SARI/ILI. Management of counselling and acceptance and stigmatising of SARI and ILI from Districts.
- ☐ A total of 200 UTM's received from NEOC; out of which 40 UTM's distributed to the districts by MV Curringa team as follows: 10 Bwagoia, 10 Losuia, 5 Guasopa, 5 Bolubolu, 5 Esa'ala and 5 for patrol.
- ☐ Preparedness for isolation facilities in the health centres are in progress but bit slow due to some unrealistic expectations.
- ☐ Limited supplies of PPEs sent out to health centres. Mask to be supplemented by cloth locally made for everyday use.
- ☐ As of 6 May, 564 travellers were screened and monitored, majority being from the airport. A total of 191 completed 14-days monitoring. Seven suspect COVID-19 cases were tested; one was tested negative and six are pending result.
- ☐ The health facilities surveillance system adjusted to capture ILIs, pna, and URTIs, as well as deaths.
- ☐ The MBPHA allocated 5 HF radios for COVID-19 response, 5 for hospital and installed one at Guasopa HC.
- ☐ Schools commenced with shift teaching sessions and maintaining 'social distancing' in desk arrangement. Masks (cloth masks, hand washing/sanitizers) with check points; toilets ratio, tippy taps being encouraged where insufficient water taps.
- ☐ MV Curringa loaded with 20 gasses for HC CCE and 10 drums of zoom to distribute to Bwagoia, Guasopa, Losuia, Bolubolu and Esa'ala.
- ☐ Issues with routine immunization vaccine disbursement from NDoH to Alotau and PNGA to Misima DVS.
- ☐ **Alotau District:** Alotau Member contributed K100,000 for MBPHA COVID-19 response, and MBPHA allocated 30 % for Training, 30% for IPC and 40% Risk Communication. Awareness done in most places. Basic hygiene supplies purchased by Alotau DHS being distributed to all 15 HCs viz laundry soap, bleach, protex soap, hand washing liquids, rubbish bins, hand towels, disposable gabbage bags, hand washing bowls, water bailer, water containers, mop heads, mop buckets, mop handles and bolts of material to sew cloth masks. Planned rapid response training and update on response for health centres next week. Increased number of ILIs noted at AUC and Alotau. Definitions improved and reporting to be improved.

- ❑ **Kiriwina Goodenough District:** Regular reports from Losuia for Kiriwina health facilities: Losuia, Omarakana and occasionally from Sinaketa; however, none from Kitava and Goodenough health facilities. Issues with Land Order with Police response current. Increased number of ILI reports noted from NEOC. Definitions improved and reminders with Surveillance team sees some improvement. Routine supplies for HC hygiene and sanitation distributed to all HCs.



Milne Bay: Isolation Unit

Milne Bay

COVID- 19

HEALTH SYSTEMS COMPLIANCE & DISTRICT PREPAREDNESS



Hand Washing Facilities at the entrance of the various facilities visited



Milne Bay Isolation Units at the various HFs visited



National Capital District

- ❑ The facility at Rita Flynn Complex in NCD has 76 beds available and is being expanded to accommodate 100 beds. It can be further extended to up to 1,000 beds in the worst-case scenario.

Oro

- ❑ Isolation facilities are under construction and almost completed. Now the priority is to furnish the isolation ward with all the necessary equipment and drugs.
- ❑ Quarantine area has been identified but no progress due to inadequate funding. Meanwhile, one will be set up when the donated tents are received.
- ❑ The training for the RRT is a priority for the province.

Western

- ❑ On 5-6 May, a team from NoDH conducted a 2-day training on clinical management, IPC, surveillance and risk communication for 32 healthcare workers in Kiunga, North Fly District, Western Province. The participants were OICs of health centres, surveillance officers and clinicians.
- ❑ Following the confirmation of the 3 cases, a team from the national level was deployed to the province to assist contact tracing and other preventative measures.
- ❑ Kiunga hospital is in containment phase; conducting preparedness and triaging on everybody entering hospital.
- ❑ North Fly District has identified the isolation and quarantine areas in Kiunga, and renovation work is ongoing.
- ❑ South Fly district administration provided funding for the ongoing major renovation of the buildings for triaging and isolation wards.
- ❑ Normal Surveillance is being carried out along the border villages between North and South Fly districts.
- ❑ Daru Hospital started screening and triaging patients.



Western: Training on IPC, Clinical management and surveillance

Summary of the updates from the Provinces on COVID-19 Response Priority Areas:

Province	Isolation facilities	Quarantine facilities	Available HRH	Surveillance	Training on IPC, Clinical Management & RRT	Funding with sources
AROB	Suhin HC & Buka Hospital (6 beds)	Pre-triage but no confirmed quarantine facility (want tents if NDOH/partners can provide)	Doctors: 10 HEOs: 3 Nurses: 94 CHWs: 71	Travelers currently under monitoring: 0	Provincial conducted trainings while waiting for NDOH/WHO	NDoH: K200,000 DFAT: K840,000
East New Britain	Butuwin UC (8 beds)	Butuwin UC (8 beds) (isolation and quarantine are side by side at Butuwin-former HIV/AIDs buildings)	Doctors: 19 HEOs: 23 Nurses: 254 CHWs: 257	Travelers currently under monitoring: 0	Completed 2 batches of training	NDoH: K200,000 DFAT: K840,000
Manus	40 foot container from Asylum seekers leftover taken to hospital ground-6 bed capacity) – A.Kwaramb and team to give clearance for use)	40 foot container taken to hospital ground-6 bed capacity) – A.Kwaramb and team to give clearance for use)	Doctors: 17 HEOs: 13 Nurses: 89 CHWs: 74	Travelers currently under monitoring: 0	Provincial conducted trainings while waiting for NDOH/WHO	NDoH: K200,000

Coronavirus disease 2019 (COVID-19)
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Province	Isolation facilities	Quarantine facilities	Available HRH	Surveillance	Training on IPC, Clinical Management & RRT	Funding with sources
New Ireland	6-bed isolation ward proposed for construction, pending confirmation of the site	Pre-triage in Kavieng hospital. No quarantine facility-also requesting for NDOH/partners to support with tent	Doctors: 17 HEOs: 28 Nurses: 160 CHWs: 124	Travelers currently under monitoring: 0	Provincial conducted trainings while waiting for NDOH/WHO	NDoH: K200,000
West New Britain	Identified old TB ward for isolation, 6 bed capacity. Needs renovation and A. Kwaramb and team to approve	Pre-triage set up at provincial Mutuvel stadium with quarantine possibility. Have 3x similar set-ups for tri-age (town urban clinic, Kimbe hospital and Mutuvel stadium)	Doctors: 14 HEOs: 23 Nurses: 170 CHWs: 245	Travelers currently under monitoring: 0	Provincial conducted trainings while waiting for NDOH/WHO teams	NDoH: K200,000 WNBPG: K600,000
East Sepik	Old TB clinic refurbished	Yet to be identified	Doctors: 17 HEOs: 21 Nurses: 158 CHWs: 243	Travelers currently under monitoring: 0	In house training completed x 2	NDoH: K200,000
Madang	Yagaun hospital (18 beds)	Yet to be identified	Doctors: 21 HEOs: 28 Nurses: 223 CHWs: 390	Travelers currently under monitoring: 0	No training conducted as yet	NDoH: K200,000
Morobe	Sir Ignatius Kilage stadium	11 mile – self contained rooms	Doctors: 48 HEOs: 11 Nurses: 444 CHWs:143	Travelers currently under monitoring: 0	Completed	NDoH: K200,000
West Sepik	Raihu Hospital and Lumi HC	Dapu HC Baro CHP	Doctors: 10 HEOs: 19 Nurses: 119 CHWs: 332	Travelers currently under monitoring: 0	40 officers trained on sample collection & packaging	NDoH: K200,000
Eastern Highlands	Renovated and Completed but require beds etc	PHA has built one	Doctors: 28 HEOs: 15 Nurses: 222 CHWs: 371	Travelers currently under monitoring: 8	Training on use of PPE and specimen collection	NDoH: K200,000
Enga	Pausa in Wapenamanda	None available	Doctors: 21 HEOs: 18 Nurses: 163 CHWs: 226	Travelers currently under monitoring: 0		NDoH: K200,000
Hela	None available, proposed at a new site	None available, proposed at a new site, staff nursing quarter identified	Doctors: 7 HEOs: 8 Nurses: 51 CHWs: 39	Travelers currently under monitoring: 0	Conducted virtual Training (TOT) on Surveillance, IPC, Clinical management	NDoH: K200,000

Coronavirus disease 2019 (COVID-19)
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Province	Isolation facilities	Quarantine facilities	Available HRH	Surveillance	Training on IPC, Clinical Management & RRT	Funding with sources
					and Risk communication for 5 focal persons on 23 April	
Jiwaka	Kindeng, Minj HC, Kol HC, Tabibuga HC	None	Doctors: 1 HEOs: 8 Nurses: 146 CHWs: 102	Travelers currently under monitoring: 0		NDoH: K200,000
Simbu	None available	None available	Doctors: 31 HEOs: 9 Nurses: 139 CHWs: 142	Travelers currently under monitoring: 0		NDoH: K200,000
Southern Highlands	Munihi HC	Old Mendi airport hangar	Doctors: 18 HEOs: 10 Nurses: 152 CHWs: 195	Travelers currently under monitoring: 0	X2 RRT, ToT training for districts	NDoH: K200,000
Western Highlands	Chapel in the hospital	Identifying warehouse already, needs funding	Doctors: 22 HEOs: 13 Nurses: 217 CHWs: 293	Travelers currently under monitoring: 13	RRT being finalized	NDoH: K200,000
Central	Bereina HC and Kwikila Hospital		Doctors: 1 HEOs: 13 Nurses: 35 CHWs: 198	Travelers currently under monitoring: 0	3 Trainers trained, Other officers identified for training	NDoH: K200,000
Gulf	Old TB ward	Not yet needs funding, areas identified are Kanabea, Kerema and Kikori, awaiting tents to set up	Doctors: 6 HEOs: 8 Nurses: 48 CHWs: 88	Travelers currently under monitoring: 0	Still needs training	NDoH: K200,000
Milne Bay	Alotau Hospital	Identified, yet to progress	Doctors: 20 HEOs: 29 Nurses: 264 CHWs: 493	Travelers currently under monitoring: 1	RRT established	NDoH: K200,000
NCD	Rita Flynn Court (76 beds)	Rita Flynn	Doctors: 115 HEOs: 2 Nurses: 667 CHWs: 285	Travelers currently under monitoring: 67	49 Trainers trained	NDoH: K200,000
Oro	Ward under construction almost completed,	Identified using tents received	Doctors: 10 HEOs: 9 Nurses: 80 CHWs: 107	Travelers currently under monitoring: 0	Needs training	NDoH: K200,000
Western	TB Isolation ward at Daru Hospital	Location to be used pending	Doctors: 9 HEOs: 2 Nurses: 19 CHWs: 40	Travelers currently under monitoring: 0	Training in North Fly done in Kiunga Middle Fly and South Fly training pending	NDoH: K200,000

New Materials on COVID-19

COVID-19 and tobacco use



CORONAVIRUS IS ANOTHER GOOD REASON TO QUIT TOBACCO USE

THE EFFECT OF
THE CORONAVIRUS
CAN BE WORSE
FOR PEOPLE WHO
USE TOBACCO



Tobacco use leads to disease and disability and harms nearly every organ of the body, including the lungs.

The coronavirus attacks the lungs – if your lungs are already damaged by tobacco use, the effects of the virus could be worse.

Tobacco affects your immune system, meaning you're less able to fight off infections.

#COVID19 #Coronavirus

Viruses don't **discriminate** and neither should we.

#SolidarityNotStigma fights the spread of #COVID19.



Anyone can contract **#coronavirus** regardless of race, gender, age or other personal qualities.

#SolidarityNotStigma fights the spread of #COVID19.



Evidence shows that **stigma** due to **#coronavirus** leads to:

- Reduction in people seeking medical care or testing
- Reduction in people adhering to interventions (including self-isolation)
This can lead to **cases not being reported**, and more **people being exposed** which makes responding to the outbreak **more difficult**.

#SolidarityNotStigma



These advisories are available online. For any new information and updates, check out the links below:

NDOH Facebook page: https://www.facebook.com/PNGND_OH/

WHO Papua New Guinea Facebook page: <https://www.facebook.com/WHOPapuaNewGuinea/>

WHO Website: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/>

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