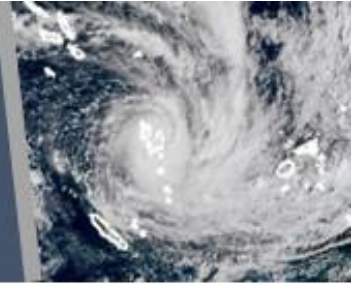


Tropical Cyclone Harold

Vanuatu National Health Situation Report #7 – 11 May 2020



HIGHLIGHTS

- ❖ 3 deaths, 123 injuries and 37 referrals have been reported as a direct impact of TC Harold.
- ❖ There have been reports of increases in communicable diseases in affected areas, including diarrhoeal diseases, vector-borne diseases, influenza-like illness, respiratory infections and skin infections.
- ❖ Other indirect or delayed impacts such as on nutrition and mental health have been reported.
- ❖ 87 Health Facility Assessments have been completed for facilities in the three main affected provinces and in Shefa; these indicate widespread and severe damage particularly in Sanma and Penama.
- ❖ 32 Emergency Medical Teams or specialist health teams have been deployed to the three most affected provinces; over 4,886 patients have been seen. A shift to public health team deployments is planned.
- ❖ Other health sector response activities are underway eg. re-stock of medical supplies, restoration of cold chains, ramp up of syndromic surveillance, community awareness activities, vector control response.

NOTE: Major updates to figures or text relative to the last Situation Report are indicated **blue highlights**.

BACKGROUND

On 06 – 07 April 2020, Severe Tropical Cyclone Harold made landfall in Vanuatu and caused widespread damage. The National Disaster Management Office identified health as a sector of immediate need in Sanma, Malampa and Penama provinces. This Report produced by the National Health Incident Management Team presents a brief overview of the health situation and health sector response to TC Harold as reported by Health Emergency Operations Centers operating at national and provincial levels. The *Tropical Cyclone Harold Health Sector Response Plan* is currently under revision to guide transition from emergency to intermediate and recovery phases. Provincial plans are currently being devised accordingly.

For further information and earlier Situation Reports, please see: <https://moh.gov.vu/index.php/pages/tc-harold>

CURRENT HEALTH SITUATION

Direct impact

The direct impacts of TC Harold on the health of the population in affected areas have been deaths and injuries resulting from building collapse, fallen objects, wind-strewn debris, drownings or pre-existing illness (Table 1).

Table 1. Direct impact of TC Harold, as reported to NHEOC by 11 May 2020 at 5.00pm Port Vila time

Province	Sanma	Penama	Malampa	All
Estimated number of persons in affected areas ^a	53,943	17,026	21,305	176,161^b
Health facilities ^c in severely cyclone-affected areas ^d	31	14	13	58
Confirmed deaths as a direct result of cyclone	1	2	0	3
Persons injured as a direct result of cyclone	64^e	59	0	123
Referrals/medevacs ^f to provincial or regional referral hospital as a direct result of cyclone	14	3	1	18
Referrals/medevacs ^f to VCH as a direct result of cyclone	12	7	0	19

^a from NDMO Rapid Technical Assessment Report (April 2020); ^b includes affected population in Torba (10,102) and Shefa/Shepards Group (23,056) ^c includes hospitals, health centres, dispensaries, clinics and aid posts; ^d based on predicted maximum sustained windspeeds equivalent to Category 3-5 cyclone; ^e includes injuries reported in NPH Emergency department, NPH OPD, SANMA EMTs and SANMA Health Facilities; ^f includes antenatal and paediatric cases. Note: In Sanma, there were 9 additional medevacs (4 to NPH and 5 to VCH) that were due to health issues not directly related to TC Harold.

Indirect or delayed impact

Other health impacts have resulted following TC Harold due to interrupted health and other public services, destruction of gardens, and contamination of water sources. A brief update on the current situation follows:

- *Water-borne diseases:* Increases in water-borne diseases noted with watery diarrhoea commonly seen in health facilities; 30 cases of diarrhoea reported in Pentecost. Some reports of increases in skin conditions and infections due to poor hygiene and irritation.
- *Vector-borne diseases:* 2 confirmed dengue cases (revised down from 3) at Northern Provincial Hospital (NPH) are now recovered; malaria cases reported in Santo are under investigation; 1 confirmed malaria case in Pentecost (likely imported from Santo); new malaria cases in Malekula resulting from previous malaria patients not completing treatment. For all provinces, it is yet to be confirmed if these constitute an increase in malaria transmission because of TC Harold. More complaints received from communities about increased numbers of mosquitoes, with communities requesting bed nets; distributions of bed nets are therefore being prioritised (see Table 4 below).
- *Respiratory infections:* Influenza-like illness commonly reported or seen at health facilities and by Emergency Medical Teams. Increases reported in Sanma with 453 ILI cases reported in Penama.
- *Other communicable infections:* 5 deaths at NPH suspected to be caused by leptospirosis (testing and investigation results pending). Reports of cases of conjunctivitis in the three provinces; 42 cases reported in Penama. 2 confirmed cases of Yaws in Penama (of 63 clinically suspected).
- *Non-communicable diseases:* Burden on outpatient services reported to be high and many are unable to be reviewed by a trained health worker. 36 persons in Penama treated for NCD conditions. Medications for non-communicable diseases difficult to find.
- *Vaccine-preventable diseases:* No increases noted.
- *Mental health:* Many people in affected areas are still preoccupied with finding food, shelter and medication. Identified high risk of new mental health conditions directly related to the cyclone and also due to unemployment resulting from COVID-19 restrictions.
- *Nutrition:* Malnourishment reported mainly in rural areas in Sanma, Malampa and Penama; screening and distribution of multiple micronutrient packets, Vitamin A and food rations (including local produce) is ongoing (see Table 4 below).
- *RMNCAH (Reproductive, maternal, newborn, child and adolescent health):* Services affected in Sanma and Malampa due to major infrastructure damage and restricted access to health facilities; temporary shelters used in Tasmalum and mobile outreach clinics are providing antenatal care, family planning and child health in Santo. 5 cases of pelvic inflammatory disease in Penama.
- *Dental care:* Limited availability with 246 patients seen Penama.
- *Other:* Reports of high incidence of gender-based violence in cyclone-affected areas.

HEALTH FACILITY ASSESSMENTS

Results have been received for a total of 87 health facilities in four provinces (Table 2). Priority was given to conducting assessments in severely affected areas and in hospitals, health centres and dispensaries. However, results are also included for other areas and for some aid posts. Additional assessments are being conducted as resources and time allow. **Note that results below are for facilities surveyed and are not representative of all health facilities in the entire province.** More detailed analyses of these data are planned.

Table 2. Results of 87 Health Facilities Assessments (HFAs) by proportion (and number) of health facilities* surveyed in affected areas, as reported to NHEOC by 11 May 2020 at 5.00pm Port Vila time. Red = ≥50%, Orange = 25-49%

Province	Sanma	Penama	Malampa	Shefa	All
HFAs completed for facilities in affected areas	34	25	19	9	87
Buildings moderately or severely damaged	68% (23)	68% (17)	21% (4)	22% (2)	53% (46)
Medical equipment moderately or severely damaged	41% (14)	44% (11)	11% (2)	11% (1)	32% (28)
Medical supplies moderately or severely damaged	41% (14)	40% (10)	16% (3)	0% (0)	31% (27)
Facility access very difficult or with obstacles	38% (13)	28% (7)	42% (8)	11% (1)	33% (29)
Referral system not functioning	24% (8)	16% (4)	5% (1)	0% (0)	15% (13)

Water supply insufficient or interrupted (not enough)	53% (18)	44% (11)	32% (6)	11% (1)	41% (36)
Water cloudy, pipes broken or contamination sources nearby	59% (20)	48% (12)	11% (2)	22% (2)	41% (36)
No functioning toilets	26% (9)	16% (4)	26% (5)	0% (0)	21% (18)
No power after cyclone	35% (12)	20% (5)	0% (0)	0% (0)	20% (17)
Reports (or rumours) of increase in illness	9% (3)	16% (4)	5% (1)	0% (0)	9% (8)
Have patients that suffer chronic diseases who are not able to receive treatment	26% (9)	24% (6)	16% (3)	11% (1)	22% (19)
Priority HFAs to be completed &	7	0	0	0	0

^a Includes hospitals, health centres, dispensaries, clinics and aid posts unless otherwise stated.

^b Includes only hospitals, health centres and dispensaries (not clinics and aid posts).

EMERGENCY MEDICAL TEAMS

To date, a total of 32 Emergency Medical Teams (EMTs) or specialist health teams have been deployed across the three most affected provinces and have reported back on the number of patients seen (Table 3). EMTs generally include at least one medical doctor, nurse, midwife, public health specialist and logistics/health infrastructure officer. In the intermediate response phase, there will be a shift in focus to deployment of mobile public health teams.

Table 3. Summary of Emergency Medical Teams or specialist teams, as of 11 May 2020 at 5.00pm Port Vila time

Province	Sanma	Penama	Malampa	All
Number of EMTs or specialist health teams deployed	19	8	5	32
Total number of health specialists deployed	32	35	22	89
Total number of patients seen	1,347	2,213	1,326	4,886

OTHER HEALTH OPERATIONS UPDATES

Table 4 provides a brief update on recent activities by thematic area. Further information is included in earlier Situation Reports (<https://moh.gov.vu/index.php/pages/tc-harold>).

Table 4. Updates on situation by thematic area as of 11 May 2020 at 5.00pm Port Vila time

AREA	SITUATION
Environmental health/ community engagement	<ul style="list-style-type: none"> Water, sanitation and hygiene (WASH) officers continue to restore services, supplies and provide handwashing facilities. Dengue vector source reduction and entomological monitoring continued in Santo.
Health promotion / risk communications	<ul style="list-style-type: none"> Saeklon ki helt mesej booklet continues to be used in community outreach activities in Sanma, Malampa and Penama. Water- and food-borne disease awareness team deployed, and dengue awareness activities continued in Sanma. Handwashing and personal hygiene awareness activities continued in Sanma, Penama and Malampa.
Psychosocial support	<ul style="list-style-type: none"> EMTs include Mental Health Officer who provide psychosocial support to patients.
Surveillance	<ul style="list-style-type: none"> Syndromic surveillance system has been enhanced in Sanma, Penama and Malampa. Rapid Response Teams continue to investigate infectious diseases cases, such as for dengue, malaria and leptospirosis in Santo, and malaria in Pentecost.
Communicable diseases	<ul style="list-style-type: none"> Bed net mass distributions conducted in Santo (Zone 1) with nets dispatched to other health zones for distribution. In Penama, bed nets sent to Melsisi are given

	<p>to patients with mass distributions planned (nets received in Pangi and Bwatnapni). Emergency supply awaited in Malampa.</p> <ul style="list-style-type: none"> • Emergency vector control (space spraying) completed in and around dengue case locations in Santo. • De-worming conducted in Sanma and Penama (144 persons).
RMNCAH and nutrition	<ul style="list-style-type: none"> • Services delivered through integrated program with EMT deployments. • Logistics constraints still undermining deliveries of supplies to some areas. • Situation assessment and screening for malnutrition is ongoing through the Nutrition sub-cluster; distribution of multiple micronutrient packets and Vitamin A for children has commenced including in North Ambrym, Pentecost and Santo with distribution of food rations including local produce to target areas.
Immunization	<ul style="list-style-type: none"> • Cold chains damaged in 20 of the 41 facilities assessed (9 in Sanma, 10 in Pentecost, 1 on Ambae); now all restored in Pentecost, good progress in Sanma and additional support needed in Malampa. • Immunization against measles and rubella conducted in Penama in Bay Barrier (196 infants) and in Sanma (23 children).
Non-communicable diseases (NCDs)	<ul style="list-style-type: none"> • Needs assessment results awaited to guide specialist deployments and trainings. • NCD screening and management of patients ongoing in communities in Penama, with health education covering nutrition, prevention and management of NCDs etc.

MORE INFORMATION ABOUT THE HEALTH RESPONSE TO TROPICAL CYCLONE HAROLD

- MOH website: <http://moh.gov.vu/index.php/pages/tc-harold>
- National Health Emergency Operations Center: nheoc@vanuatu.gov.vu
- Vanuatu Health Hotline: 119
- Ministry of Health, Health Promotions Vanuatu Facebook page: <https://www.facebook.com/Health-Promotions-Vanuatu-1674266679566197/>
- Health Incident Management Team Coordinator: Dr Posikai Samuel Tapo - Mobile: 773 7178

Approved by: Dr Posikai Samuel Tapo, Coordinator - Incident Management Team
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Next SitRep Expected*: 18 May 2020

**The intention is to issue Situation Reports 1 – 2 times per week, though the frequency will depend on the evolving situation.*