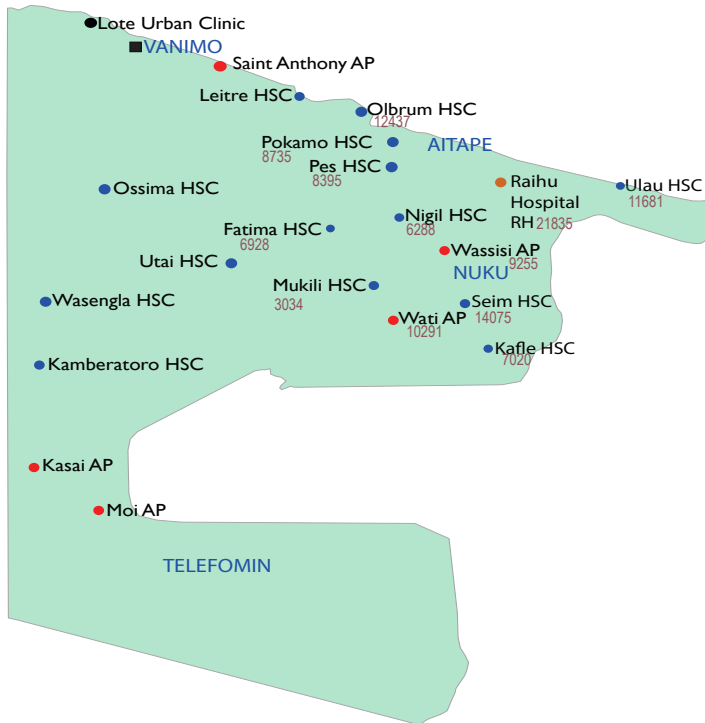


# WEST SEPIK PROVINCE: DIOCESE OF AITAPE

## OVERVIEW

Aitape Diocese established in 1966 is the catholic headquarters in West Sepik Province. All catholic services are governed by the Bishop. Catholic Church Health Services is managed by a Health Manager who carries out all national health policies and plans under the guidance of the diocese health board. This profile shows a map with CCHS facilities situated in the province and the type of facilities with catchment population figures, it shows facilities registered and pending registration, number of staff and designations. The diocese health infrastructure gives an insight to what resources the facilities has and supports health in that district. The second part of the profile shows CCHS health data on outpatient, antenatal, measles, facility births, outreach and pneumonia. The data provides insight into how CCHS is performing with as per its reports in the 2019 National Information System (NHIS). All the information on this profile are based on 2019 NHIS, HIV SURV and CCHS Biodata.



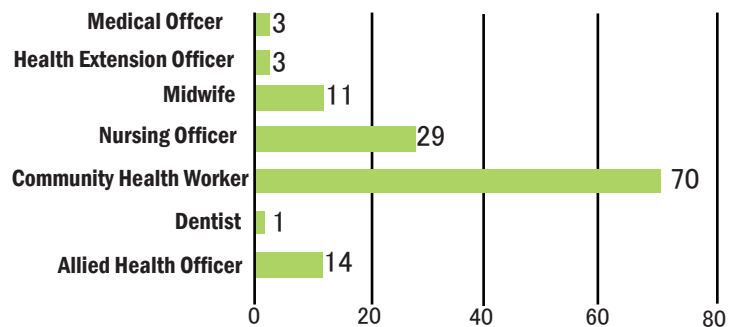
## FACTS

- Population coverage for health services in Aitape Diocese 119 974
- 1 BMU site in for CCHS in Aitape
- 36 patients receiving HIV & Care and Treatment
- 210 beds in facilities
- Raihu Community Health Worker (CHW) School Aitape

## TYPES OF FACILITY

Type	Number of Facilities	Registered	Pending Registration
Health Centre	1	1	
Sub Centre	9	8	1
Aid Post	4	2	2
Rural Hospital	1	1	

## HEALTH STAFFING



## FACILITY INFRASTRUCTURE



None of the facilities in the Nuku district have modes of transport, and there is poor access to four of the facilities by road. Only one facility can be accessed by bush and track only. Aitape-Lumi all facilities in the district are accessible by road only and not bush and track. 4 out of the 7 facilities have modes of transport.



Nuku facilities are without VHF radio communication and 2 out of 7 facilities do not have network coverage. Staff have to use cell phone communication by travelling to sites that have network coverage. Aitape Lumi, 4 out of 7 facilities are in an area where network coverage is available. These facilities use cell phones to communicate. All have no VHF radio.



Nuku 6 out of 7 facilities do not have septic toilets or open pit toilets and 3 out of 7 have running water into the buildings. All facilities utilise a rain catchment system but are without tanks for water storage. Aitape-Lumi only one facility is without septic toilets and use an open pit toilet for staff and patient use, though all have running water into the buildings and a rain catchment system in place.

## FACILITY INFRASTRUCTURE



Nuku all facilities, except for Wati Aid Post has a cold chain system in place for storage of vaccines. Aitape -Lumi 5 out of 7 facilities have working cold chain systems for storage of vaccines.



Nuku, there is no power supply into any of the 7 facilities and only one facility, Ningil Health Centre uses a generator as the sole source of power. 2 out of the 7 facilities uses solar power. No facility has an incinerator to burn waste. Aitape-Lumi 5 out of 7 facilities don't have power supply but instead use solar power as their main source of electricity. Only two facilities have backup generators and four have incinerators for burning of waste material.

## HEALTH DATA



Outpatient

**1.34**

Number of out-patients visits made by individuals during the course of a year. More than 2 visits per person per year is an indication that there is demand on accessibility and utilisation of health care services



Measles & Vaccine

**50 %**

Percentage of children under one year who have received 9-11 months dose of measles vaccine. Measles is the leading cause of childhood mortality from vaccine preventable disease. Provinces should aim to reach 80% and above to prevent future disease outbreaks.



Facility Births

**17 %**

The percentage of births that occur in a hospital and health centre. Access to skilled care during pregnancy and child birth prevents maternal and newborn deaths



Antenatal

**50 %**

The percentage of pregnant women that attended at least one antenatal visit at a hospital, health centre or outreach clinic. This prepares a woman and her families for a safe child birth.



Pneumonia

**0.5 %**

The percentage of children under 5 years who die from pneumonia- good quality care ( early and effective use of antibiotics) would minimise these deaths.



Outreach

**0.43**

Number of outreach clinic per 1000 population under five years . Rural outreach provides an indication for preventative child healthcare and provinces should reach over 50



## HEALTH SERVICES PROVIDED

- Outpatient
- Community Based Programs
- Outreach/Mobile services
- Medical Services
- Well Baby Clinic
- TB Clinics
- HIV Clinics
- Malaria Prevention Programs
- HIV Prevention Programs
- Nutrition Programs
- School Health
- Dental Health
- Inpatient Care
- Pathology
- Supervision Programs
- Child Health/Paediatric Care
- Maternal and Minor Surgical
- Midwifery service
- Family Planning
- Disease Control
- Health Promotion & Prevention
- Clinical Support Services Rural
- Other Services