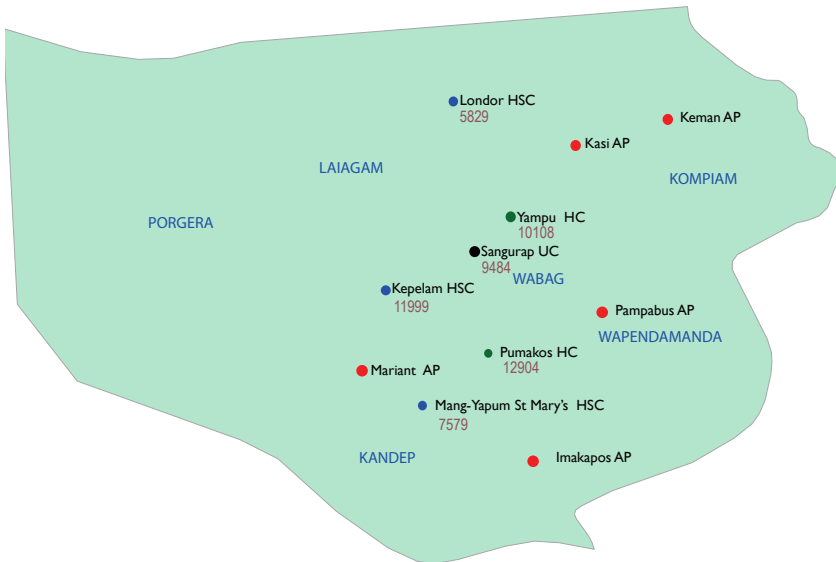


# ENGA PROVINCE: DIOCESE OF WABAG

## OVERVIEW

Wabag Diocese established in 1982 is the catholic headquarters in Enga 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.



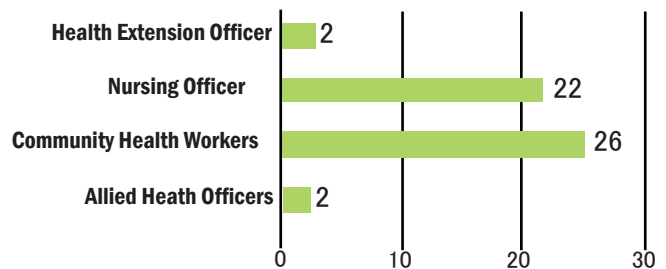
## FACTS

- ✓ Population coverage for health services in Wabag Diocese 57 902
- ✓ 4 BMU Sites in Wabag Diocese CCHS facilities
- ✓ 533 patients receiving HIV & Care and Treatment
- ✓ 161 beds in Wabag Diocese CCHS facilities

## TYPES OF FACILITY

Type	Number of Facilities	Registered	Pending Registration
Health Centre	2	2	
Sub Centre	3	3	
Aid Post	1		1
Urban Clinic	1	1	

## HEALTH STAFFING



## FACILITY INFRASTRUCTURE



The Mang-Yapum Health Clinic is the only facility in the district of Kandep. It does not have a mode of transport but is accessible via road, bush-track. Kompiam-Ambum 2 out of 5 facilities don't have a mode of transport and all except one facility is accessible via road. All facilities however can be accessed by bush and track. Wapenamanda, 2 out of 3 facilities don't have a mode of transport. All the facilities can be accessed by road, bush and track. Laiagam-Pogera, Kepelam Health Centre is the only facility in the Laiagam-Pogera district. It does not have a mode of transport but access is via road, bush-track. Sangurap Urban Clinic is the only facility in the district of Wabag. The facility has a mode of transport and is accessible via road, bush-track.



Kandep has network coverage in the area and communication is by cell phone only as there is VHF radio. Kompiam-Ambum all facilities have network coverage and communication is limited as VHF radio is not available. The only mode of communication is via cell phone. Wapenamanda all facilities have network coverage and communication is only by cell phone. There is no VHF radio available. Laiagam-Pogera there is network coverage in the area and cell phone is the only method of communication as there is no VHF radio available. Wabag there is network coverage in the area and communication is by cell phone only due to no availability of VHF radio.



Kandep, there is septic toilet and open pit toilet at the site. The facility has installed wash basins but no running water instead a rain catchment system is in place. The facility is also without a water tank. Kompiam-Ambum, 4 out of 5 facilities have septic toilets except for Keman Aid post that does not have an open pit toilet as well as wash basins. All facilities don't have running water supplying the buildings but rather use a rain catchment system. Wapenamanda, 1 out of 3 facilities has septic toilet and all facilities have open pit toilets. There is no water supply into any of the buildings, however a rain catchment system

## FACILITY INFRASTRUCTURE



is in place. Only one facility has water tanks for backup water. Laiagam-Pogera, There is a septic toilet and an open pit toilet at the facility together with a wash basin, however there is no water supply but rather the staff use a rain catchment system for water. There is also no water tank available. Wabag, there is a septic toilet and an open pit toilet at the facility together with a wash basin, however there is no water supply but rather the staff use a rain catchment system for water. There is also no water tank available.

Kandep facility has working cold chain equipment for vaccine storage. Kompiam-Ambum, 1 out of 5 facilities don't have cold chain equipment for vaccine storage. Wapenamanda 2 out of 3 facilities don't have cold chain systems. Laiagam-Pogera the facility has cold chain equipment for storing vaccines. Wabag the facility has cold chain equipment for storing vaccines.

Kandep there is no power supply into the facility, however a generator and solar equipment is in place to provide power. There is an incinerator available for the burning of waste material. Kompiam-Ambum, none of the facilities has power supply. All but Keman Aid Post use solar power and generator. All facilities have incinerators for the burning of waste material. Wapenamanda, 2 out of 3 facilities don't have power supply, 1 out of 3 facilities don't have a generator for backup power but all facilities utilise solar power and have incinerators. Laiagam-Pogera there is no power supply, however the facility does have a generator and also solar power equipment together with an incinerator for burning waste material. Wabag there is no power supply, however the facility does have a generator and also solar power equipment together with an incinerator for burning waste material.

## HEALTH DATA



Outpatient

0.89

Number of outpatients 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

33.5%

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

22 %

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

2 %

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

0.81

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
- Inpatient Care
- Supervision Programs
- Child Health
- Material and Minor Surgical
- Midwifery Service
- Family Planning
- Disease Control
- Health Promotion & Prevention
- Clinical Support Services Rural
- Other Services