

# EAST SEPIK PROVINCE: DIOCESE OF WEWAK



## FACTS

- Population coverage for health services in Diocese of Wewak 196 435
- 172 Beds in Wewak Diocese CCHS facilities
- 10 BMU Sites in Diocese of Wewak
- 65 patients receiving HIV & Care and Treatment

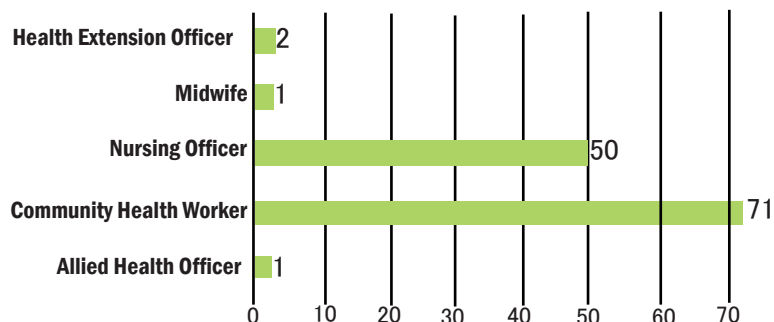
## OVERVIEW

Wewak Diocese established in 1966 is the catholic headquarters in East 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.

## TYPES OF FACILITY

Type	Number of Facilities	Registered	Pending Registration
Health Centre	2	2	
Sub Centre	11	9	2
Community Health Post	1	1	
Aid Post	6	5	1
Urban Clinic	1	1	
VCCT	1	1	

## HEALTH STAFFING



## FACILITY INFRASTRUCTURE



10 out of the 12 facilities in Wewak do not have a mode of transport even though most of the facilities are accessed by road. 5 out of 6 facilities don't have a mode of transport and access to the facility is limited to river and air only.



The only facility in Yangoru is Sassoya. The facility has road access and a mode of transport. Mersey is the only operating facility in the Ambunti-Dreikikir area. The facility does not have a mode of transport nor does it have access to roads.



The only mode of access is by river or air. Two (2) out of the 3 facilities have a mode of transport, with only Torembi being the only facility being accessible by bush track. Ulupe is the only facility in Maprik. The facility is equipped with transport and access to the facility is by road only.



All facilities in Wewak have Digicel coverage except for the two health posts Chambri/Korogu and Kwossengo who are limited in their communications access also being without VHF radios. All facilities don't have telecommunications coverage in their respective areas with only one facility, Biwat, utilising VHF radio as the sole source of communication.



There is network coverage in the area with cell phones being the sole source of communication as the facility does not have a VHF radio. The facility has no network coverage or access to cell phones for communication. There is also no VHF radio available. All facilities have network coverage and cell phones, with Torembi being the only facility equipped with VHF radio.



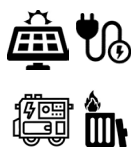
More than half of the facilities don't have operating septic toilets or a running water. Of the 12 facilities, rely solely on rain a catchment system. All facilities are installed with a back tank for water supply. No facility has septic toilets but patients and staff use open pit toilets. All facilities are fitted with wash basins but no running water supply into the build-



ing. All 5 facilities have a rain catchment system. Sassoja has both an operating septic toilet system and an open pit toilet. The facility has no running water supply but use a rain catchment system and no means of water storage. Mersey has no internal septic toilet but an open pit toilet is available to patients and staff. There is no running water supply into the building nor is a tank for water storage. The facility uses a rain catchment system. Kunjingini is the only facility fitted with septic toilets. Kaugia and Torembi having only open pit toilets. There is no running water supply into any of the three facilities, nor do they have means of water storage. All use a rain catchment system. Ulupu has no operating septic toilet but an open pit toilet is available for patients and staff. The facility utilises a rain catchment system only.



Seven (7) out of 12 facilities do not have a cold chain system that is necessary for offering immunization services. All 5 facilities in Angoram has installed cold chain systems. The facility has a cold chain system but it is currently not operating. All three facilities in Wosera-Gawi have cold chain systems for vaccine storage. Torembi being the only facility with a functioning cold chain system. The facility has a functioning cold chain system.



Eight (8) out of the 12 facilities don't have power supply, with most also having no backup generator. Boiken is the only facility that utilises solar panels as the sole source of energy. All facilities don't have incinerators but use open pits to burn the facilities' biohazardous material. None of the facilities have any source of electric power or solar power with only Timbunke and Biwat using generators to power the building. The facility is run using a generator which is the only source of electricity. There is no electric power supply or solar power supply. The facility is completely without any source of power supply. No solar power, generator or external source of power. All facilities do not have power supply into the building. However, 2 of the 3 facilities use generators as the sole source of electric energy with Torembi having no form of electrical supply. Ulupu has no power source or generator with only the use of solar panels supplying the building with power.

## HEALTH DATA



**Outpatient**  
**0.46**

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**  
**19%**

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**  
**14 %**

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**  
**30 %**

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 %**

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**  
**8**

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 Services
- Family Planning
- Disease Control
- Health Promotion & Prevention (Health Island Concepts)
- Clinical Support Services Rural
- Other Services