



ROTARIANS AGAINST MALARIA

LONG LASTING INSECTICIDAL NET DISTRIBUTION REPORT 2025

Manus PROVINCE

Carried Out in Partnership with National Malaria Control Program,
Manus Provincial Health Authority and Church Health Services
With Support from The Global Fund



24th September 2025 to 22nd October 2025

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EXECUTIVE SUMMARY

Malaria remains one of the most significant public health challenges in Papua New Guinea (PNG) and continues to be a leading cause of illness, outpatient attendance, hospital admissions, and preventable deaths, particularly in lowland, coastal, island, swamp, and tropical environments where climatic and ecological conditions support year-round mosquito breeding and sustained malaria transmission. Despite substantial progress achieved through coordinated malaria control interventions over the past two decades, malaria continues to impose a significant burden on vulnerable populations, particularly children under five years of age, pregnant women, and communities living in remote locations with limited access to healthcare services.

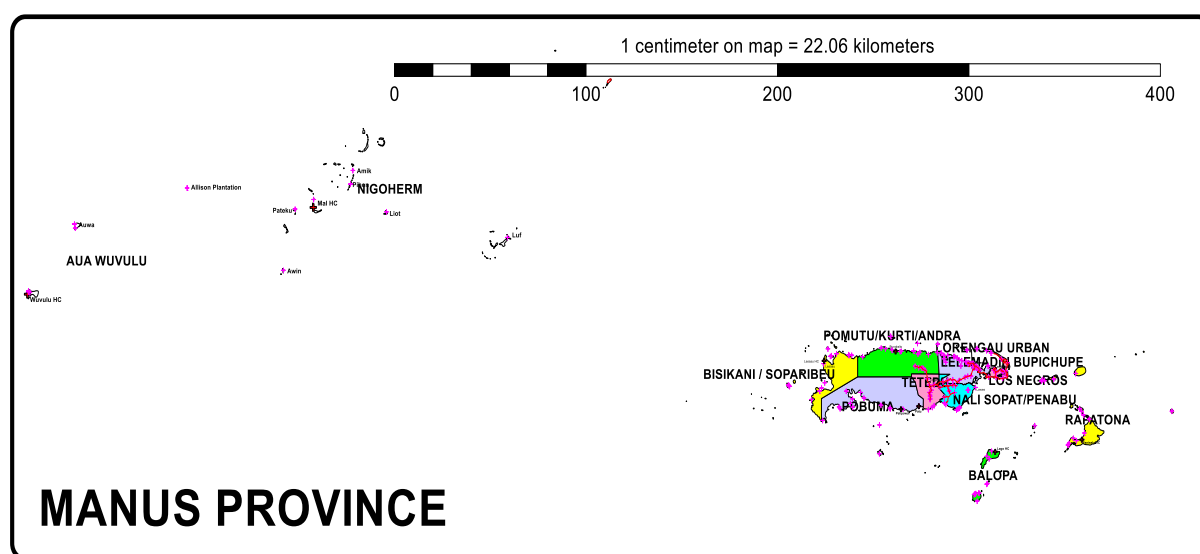


Figure 1 Manus Provincial map

Manus Province remains one of Papua New Guinea's malaria-endemic island provinces due to its tropical maritime climate, consistently high temperatures, abundant rainfall, extensive mangrove forests, coastal wetlands, lagoons, and numerous offshore islands that provide ideal breeding habitats for *Anopheles* mosquitoes, the primary vectors responsible for malaria transmission. Although Papua New Guinea has achieved substantial reductions in malaria prevalence over the past two decades through sustained efforts by the National Malaria Control Programme (NMCP), Rotarians Against Malaria (RAM), the Global Fund and other development partners, malaria transmission continues throughout Manus Province and remains an important public health concern. The province's dispersed island geography, dependence on sea transport, and isolated coastal communities present ongoing challenges for malaria prevention, surveillance, and access to essential health services. Malaria not only affects individual health outcomes but also contributes to school absenteeism, reduced workforce productivity, increased healthcare expenditure, and loss of household income, making malaria prevention one of the most cost-effective public health investments in Manus Province.

Long-Lasting Insecticidal Nets (LLINs) remain one of the most effective, evidence-based, and cost-efficient malaria prevention interventions available. LLINs provide both personal and community-wide protection by preventing mosquito bites during sleeping hours while simultaneously reducing mosquito populations through the insecticidal treatment incorporated into the netting. Numerous studies conducted globally and within Papua New Guinea have

demonstrated that sustained high LLIN ownership and utilisation significantly reduce malaria transmission, malaria-related illness, severe malaria cases, and malaria mortality. Consequently, maintaining universal LLIN coverage remains a cornerstone of the National Malaria Control Programme's strategy to reduce malaria transmission and support Papua New Guinea's long-term malaria elimination goals.

The 2025 Manus Province LLIN Family-Level Survey and Distribution Programme was implemented through a collaborative partnership between the National Department of Health (NDOH), National Malaria Control Programme (NMCP), Manus Provincial Health Authority (MPHA), District Health Services, Rotarians Against Malaria (RAM), Local Level Governments, health facilities, church health services, community leaders, village volunteers, and development partners. The programme was funded by the Global Fund and managed by the National Malaria Control Programme (NMCP) under the National Department of Health (NDOH). This is part of Papua New Guinea's ongoing strategy to maintain universal Long-Lasting Insecticidal Net (LLIN) coverage across malaria-endemic provinces.

The primary objective of the programme was to conduct a comprehensive household-level survey to determine actual household populations and LLIN requirements, followed by the equitable distribution of LLINs to all eligible households throughout Manus Province. The programme was implemented across Manus Province, covering mainland communities, island settlements, coastal villages, fishing communities, peri-urban populations, and numerous remote offshore islands. Given the province's unique geography, implementation required extensive coordination using road transport, coastal vessels, dinghies, and outboard motor boats to reach isolated communities dispersed across the province.

A total of 69,708 people from 14,710 households located in 213 villages were successfully surveyed during the household Survey. Based on the verified survey results, 36,001 Long-Lasting Insecticidal Nets (LLINs) were distributed throughout the province, achieving an overall distribution ratio of 51.6 LLINs per 100 people surveyed, fully consistent with National Malaria Control Programme guidelines for universal household coverage. The household-level survey approach ensured that LLIN allocations reflected actual household composition and sleeping arrangements rather than projected population estimates, thereby improving equity, accountability, and the efficient utilisation of malaria prevention resources.

Implementation was undertaken across one of Papua New Guinea's most geographically dispersed provinces, where communities are separated by open sea, numerous offshore islands, coral reefs, and limited transport infrastructure. Distribution teams travelled long distances by sea to deliver LLINs to remote island communities, often working within narrow weather windows and tidal conditions. Despite these operational challenges, strong collaboration between Manus Provincial Health Authority, District Health Services, church health services, community leaders, village volunteers, local transport providers, and Rotarians Against Malaria ensured that all planned household survey and LLIN distribution activities were successfully completed.

The successful completion of the 2025 Manus Province LLIN Family-Level Survey and Distribution Programme has significantly strengthened malaria prevention efforts throughout the province by ensuring that 69,708 people living in 213 villages now have improved access to effective malaria prevention tools. The programme is expected to contribute substantially to reducing malaria transmission, decreasing malaria-related illness and deaths, protecting

children under five years of age and pregnant women, and strengthening community resilience against malaria across Manus Province.

Beyond the distribution of LLINs, the programme further demonstrated the value of strong partnerships between the National Malaria Control Programme, Manus Provincial Health Authority, District Health Services, church health services, Local Level Governments, village leaders, volunteers, and Rotarians Against Malaria in delivering essential public health services to some of Papua New Guinea's most isolated island communities. The successful implementation of the programme provides a strong foundation for sustaining universal LLIN coverage, strengthening malaria surveillance and community engagement, and advancing Papua New Guinea's long-term vision of malaria elimination.

Rotarians Against Malaria and LLIN Distributions in Papua New Guinea

Rotarians Against Malaria (RAM) was established in 1997 by the Port Moresby Rotary Club in response to the significant burden of malaria throughout Papua New Guinea. Since its establishment, RAM has evolved into one of the National Department of Health's (NDOH) principal implementing partners for malaria prevention and control, supporting the National Malaria Control Programme (NMCP) in the planning, coordination, implementation, monitoring, and evaluation of Long-Lasting Insecticidal Net (LLIN) distribution programmes throughout the country.

Working in partnership with Provincial Health Authorities, District Health Services, communities, and development partners, RAM has successfully implemented multiple rounds of LLIN distributions throughout Papua New Guinea with support from the Global Fund, the Against Malaria Foundation (AMF), the Government of China, the World Health Organization (WHO), UNICEF, and other development partners. Through these partnerships, millions of LLINs have been distributed nationwide, contributing significantly to reductions in malaria prevalence, malaria-related illness and mortality, while strengthening household and community protection against malaria transmission.

For more than two decades, RAM has worked closely with the National Department of Health, National Malaria Control Programme, Provincial Health Authorities, District Health Services, church health services, community leaders, and local communities to strengthen malaria prevention and control efforts throughout Papua New Guinea. Through successive rounds of LLIN distribution, RAM has played a critical role in expanding access to malaria prevention services, strengthening provincial implementation capacity, improving household-level data collection, and ensuring that vulnerable populations are protected against malaria transmission.

RAM has remained at the forefront of implementing these national LLIN distribution programmes. Working closely with Provincial Health Authorities and District Health Services, RAM has successfully delivered LLINs to some of Papua New Guinea's most remote and difficult-to-access communities, including isolated islands, mountainous regions, riverine settlements, border communities, floodplains, and remote inland villages. Through continuous improvements in operational planning, logistics management, volunteer training, digital household surveys, monitoring systems, and community engagement, RAM has strengthened the effectiveness, accountability, and efficiency of LLIN distribution programmes nationwide.

The family-level household survey approach adopted by RAM ensures that LLIN allocations are based on verified household populations rather than projected demographic estimates. This evidence-based methodology improves targeting, minimises wastage, strengthens commodity accountability, and ensures equitable access to LLINs for all eligible households across Papua New Guinea.

The continued success of LLIN distribution programmes demonstrates the importance of strong partnerships between government agencies, Provincial Health Authorities, District Health Services, church health services, development partners, community leaders, volunteers, and implementing organisations such as RAM. Continued investment in periodic LLIN replacement campaigns, community awareness, surveillance systems, household enumeration, and integrated malaria control interventions will remain essential to sustaining the significant gains achieved to date and advancing Papua New Guinea's long-term vision of a malaria-free future.

Coordination and Guidance from the NMCP and Manus PHA

The 2025 Manus Province LLIN Family-Level Survey and Distribution Programme was fully funded by the Global Fund and implemented through a coordinated partnership between the National Department of Health (NDOH), National Malaria Control Programme (NMCP), Manus Provincial Health Authority (MPHA), District Health Services, Rotarians Against Malaria (RAM), Local Level Governments (LLGs), health facilities, church health services, community leaders, and village volunteers. This partnership provided the framework for planning, implementation, supervision, monitoring, and reporting throughout all phases of the programme and ensured that malaria prevention services were delivered effectively across both mainland and remote island communities throughout Manus Province.



Figure 2 Provincial Planning meeting with CEO Manus PHA

At the provincial level, Manus Provincial Health Authority (MPHA) provided overall leadership, coordination, and oversight of programme implementation. Working closely with RAM and District Health Services, MPHA ensured that implementation reflected provincial health priorities, local malaria epidemiology, operational realities, community needs, transport availability, and the unique logistical challenges associated with delivering health services across a geographically dispersed island province.

A key component of programme preparation was the Provincial LLIN Planning and Coordination Meeting convened by MPHA on 25th August 2025 prior to implementation. These planning sessions brought together representatives from MPHA, RAM and key stakeholders to review population estimates, village lists, malaria risk profiles, health facility catchments, LLIN requirements, implementation schedules, transport arrangements, shipping logistics, and operational risks. Particular attention was given to the logistical challenges associated with reaching the province's numerous offshore islands, isolated coastal communities, and villages that depend entirely on sea transport.

Following endorsement of implementation plans, MPHA communicated programme schedules, operational responsibilities, and reporting requirements to District Health Managers and health facility managers throughout Manus Province. District Health Services played a critical role in coordinating implementation activities within their respective health facility catchments and ensuring the active participation of government health facilities, church health services, health workers, and community structures.

District Health Services and church health services supported community mobilisation, volunteer recruitment, local logistics planning, transport coordination, supervision, stock management, and integration of LLIN activities into routine public health programmes. Government health centres, aid posts, community health workers, and district public health officers provided operational support throughout the programme and served as focal points for implementation within their respective catchment areas.



Figure 3 Meeting with Public Health Director, PDCO and other Manus PHA Officials

Health facility staff throughout Manus Province played an important role in supporting volunteer training, household survey activities, community awareness campaigns, beneficiary verification, stock management, and LLIN distribution. Their local knowledge, strong community relationships, and understanding of island transport systems significantly strengthened programme implementation, accountability, and community participation.

Throughout the implementation of the 2025 Manus Province LLIN Family-Level Survey and Distribution Programme, Rotarians Against Malaria (RAM) Provincial Team Leaders provided weekly implementation updates on the progress of LLIN operations across all health centre catchment areas. Progress reports were prepared for each health facility and included the implementation status of key operational activities such as micro-planning, volunteer training, household survey, LLIN distribution, and any outstanding activities. The reports also identified the RAM LLIN officers assigned to each health facility and tracked progress against planned implementation schedules.

These weekly updates were shared with the Manus Provincial Health Authority (MPHA) to strengthen programme monitoring, coordination, and operational oversight. The reporting mechanism enabled MPHA and District Health Services to monitor implementation progress in real time, identify operational bottlenecks, and provide timely technical guidance where required. It also facilitated the sharing of important field information, including adverse weather conditions, rough sea conditions, transport availability, shipping delays, accessibility issues, and other logistical challenges that could affect programme implementation. This collaborative monitoring approach enhanced communication between RAM and MPHA, supported informed decision-making, improved resource mobilisation, and contributed to the timely and effective implementation of LLIN distribution activities throughout Manus Province.

Logistics management was jointly coordinated by RAM, MPHA, District Health Services, District Health Managers, and health facility staff. LLIN stocks were transported from provincial storage facilities to health centres, aid posts, and community distribution points throughout the province. Due to Manus Province's unique island geography, transportation arrangements relied primarily on road transport within the main islands, complemented by coastal vessels, dinghies, fibreglass boats, and outboard motor canoes to reach remote island communities. Careful planning of sea transport schedules, fuel supplies, tides, and prevailing weather conditions was essential to ensure the safe and timely movement of LLIN stocks and field personnel.

Although the programme was implemented across one of Papua New Guinea's most geographically dispersed provinces, strong coordination between NMCP, MPHA, RAM, District Health Services, local communities, and transport providers enabled distribution teams to successfully reach mainland and island communities throughout the province. The programme demonstrated the importance of flexible operational planning, effective maritime logistics, and strong partnerships in overcoming the challenges associated with delivering public health services across remote island environments.

The successful implementation of the 2025 Manus Province LLIN Family-Level Survey and Distribution Programme demonstrates the value of strong partnerships between national, provincial, district, health facility, and community stakeholders. Through coordinated planning, shared responsibilities, effective communication, and adaptive logistical arrangements, NMCP, MPHA, RAM, District Health Services, government health workers, church health services, community leaders, village volunteers, and local maritime transport providers ensured that

LLINs reached eligible households throughout Manus Province, strengthening malaria prevention and supporting Papua New Guinea's long-term malaria elimination goals.

Schedule of LLIN Activities – Manus Province

Table 1: Distribution Schedule of Manus Province

District	Population	Survey Start	Survey Finish	Distribution Start	Distribution Finish
Manus	69,708	24.09.2025	21.10.2025	27.09.2025	22.10.2025

As shown in Table 1, the 2025 Manus Province LLIN Family-Level Survey and Distribution Programme was implemented between 24 September and 22 October 2025. Household survey activities commenced on 24 September 2025 and were completed on 21 October 2025, while LLIN distribution activities were undertaken concurrently from 27 September to 22 October 2025. The phased implementation approach enabled the Manus Provincial Health Authority (MPHA), Rotarians Against Malaria (RAM), District Health Services, and health facilities to effectively manage personnel, transport assets, LLIN stocks, and operational logistics across the province's widely dispersed island communities.

The programme successfully surveyed 69,708 people residing in 14,710 households across 213 villages, representing approximately 96.2 percent of the estimated provincial population of 72,429 people. Based on the verified household survey, 36,001 Long-Lasting Insecticidal Nets (LLINs) were distributed throughout the province, achieving an overall distribution ratio of 51.6 LLINs per 100 people surveyed, consistent with National Malaria Control Programme (NMCP) guidelines for universal household coverage.

Implementation covered all 12 Local Level Governments (LLGs) within Manus Province, including Aua Wuvulu Rural, Nigoherm, Bisikani–Soparibeu, Pomutu–Kurti–Andra, Lelemaih Bupichupeu, Lorengau Urban, Los Negros, Nali Sopat–Penabu, Tetedu, Pobuma, Balopa, and Rapatona. Lorengau Urban LLG recorded the largest surveyed population, with 13,512 people from 2,946 households, receiving 7,221 LLINs, while smaller island LLGs such as Aua Wuvulu Rural, Balopa, and Nigoherm required specialised maritime transport to ensure complete household coverage.

The distribution programme was implemented across one of Papua New Guinea's most geographically dispersed island provinces, where communities are separated by open sea, numerous offshore islands, coral reefs, and limited transport infrastructure. To support implementation, LLIN bales, fuel, survey materials, and field teams were transported from provincial storage facilities to health centres and community distribution points using a combination of road transport, coastal vessels, dinghies, fibreglass boats, and outboard motor canoes. Careful coordination of sea transport schedules, tides, weather conditions, and fuel supplies was essential to ensure the timely movement of LLIN stocks and field personnel to remote island communities.

Health facilities served as the primary operational hubs for volunteer training, household survey supervision, community mobilisation, stock management, beneficiary verification, and LLIN distribution activities. Strong collaboration between Manus Provincial Health Authority, District Health Services, church health services, village leaders, and community volunteers enabled

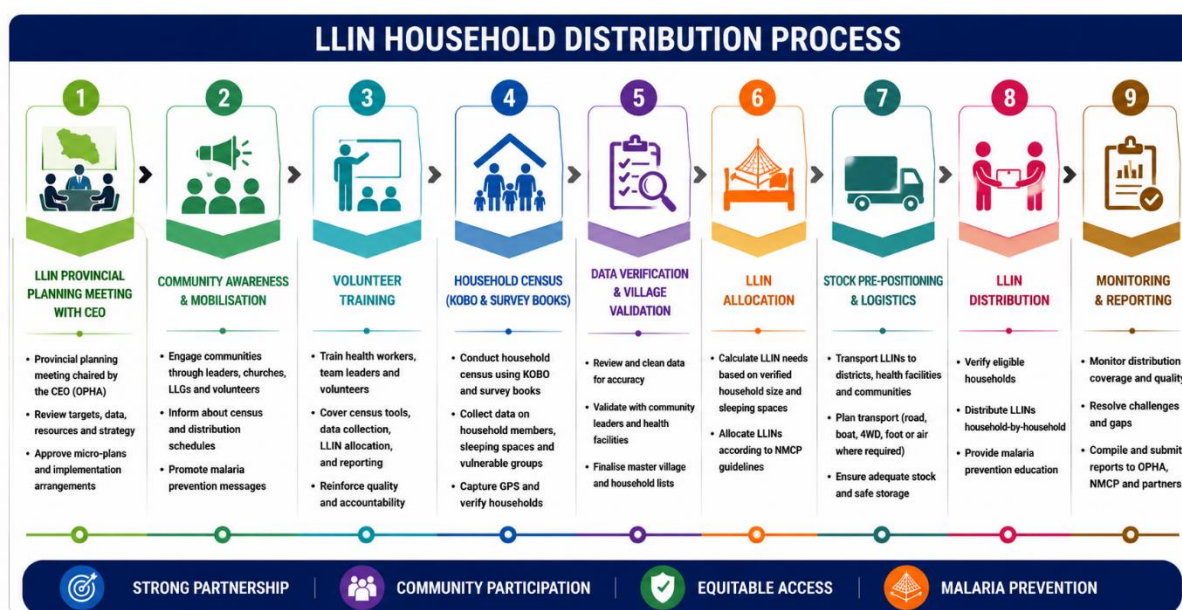
distribution teams to reach both mainland and offshore island communities efficiently while maintaining accountability for LLIN stocks throughout the programme.

Despite the logistical challenges associated with operating across a Province, including rough sea conditions, changing tides, unpredictable weather, and long travel distances between islands, all planned survey and distribution activities were successfully completed within the implementation period. The programme demonstrated the effectiveness of strong provincial coordination, adaptive maritime logistics, community participation, and close collaboration between government health services, church health services, community leaders, volunteers, and Rotarians Against Malaria.

The successful completion of survey and distribution activities throughout Manus Province has strengthened malaria prevention efforts by ensuring that eligible households across 213 villages received LLINs based on verified household populations. The programme provides a strong foundation for maintaining universal LLIN coverage, supporting routine malaria surveillance, and advancing Papua New Guinea's long-term malaria elimination objectives while demonstrating that effective partnerships and well-coordinated logistics can successfully deliver public health interventions to remote island communities.

Methodology – Micro-Planning, Household Survey and LLIN Allocation

Micro-Planning and Programme Preparation



The 2025 Manus Province LLIN Family-Level Survey and Distribution Programme was implemented through a comprehensive micro-planning process jointly undertaken by Rotarians Against Malaria (RAM), District Health Services, health facility staff, church health services, and community leaders. The objective of the planning process was to ensure accurate household enumeration, efficient resource allocation, and equitable distribution of Long-Lasting Insecticidal Nets (LLINs) throughout the province.

A master village list covering all known settlements within Manus Province was developed using the 2000 National Population Survey, previous RAM household survey databases of 2022, Manus Provincial Health Authority records, health facility catchment information, and village-

level validation exercises. Population estimates, village locations, and health facility catchments were reviewed and verified through consultation with District Health Services, health workers, Local Level Government representatives, ward councillors, and community leaders.

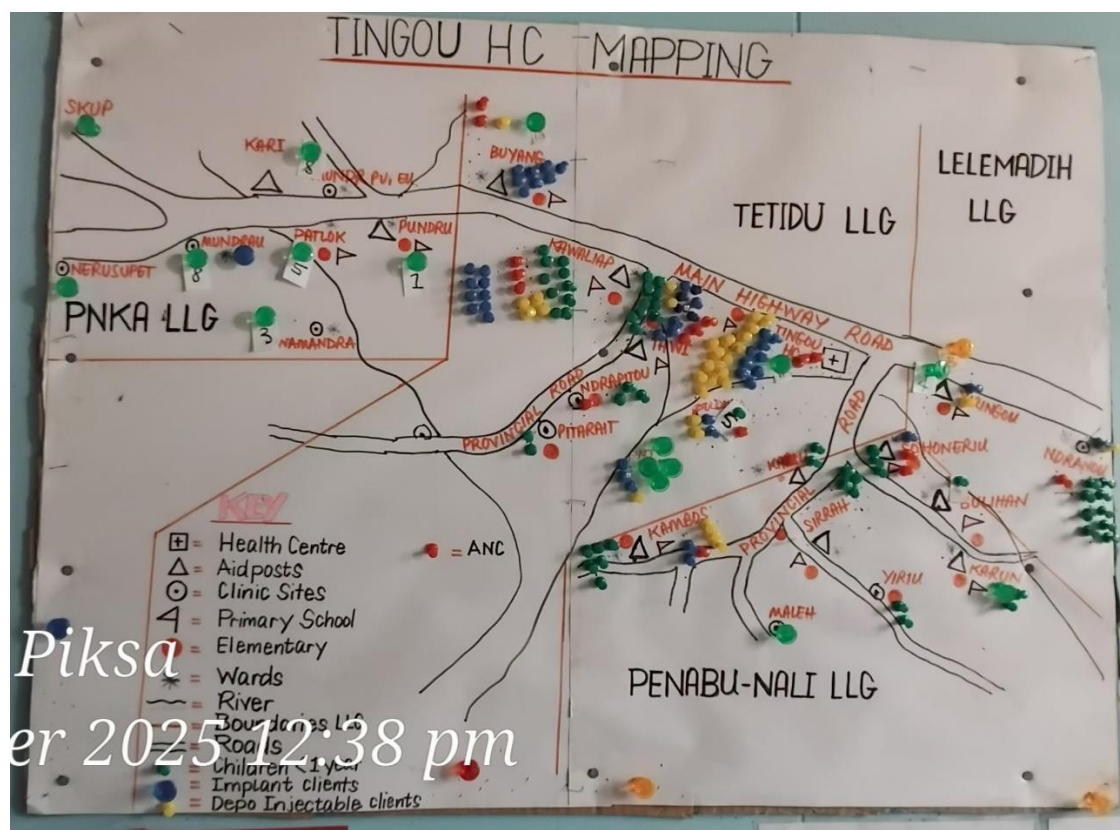


Figure 4 Micro mapping the villages Tingou Health center

Detailed operational planning included village mapping, transport arrangements, volunteer deployment, workload allocation, implementation scheduling, logistics planning, stock management, and identification of distribution sites. Particular attention was given to the logistical challenges associated with reaching Manus Province's widely dispersed island communities, many of which are accessible only by sea transport. Transport planning incorporated shipping schedules, availability of dinghies and outboard motor boats, fuel requirements, weather forecasts, tidal conditions, and travel distances between islands to ensure efficient implementation.

Prior to implementation, extensive community awareness activities were undertaken through District Health Services, health facilities, church networks, ward councillors, village leaders, and community volunteers. Communities were informed of survey schedules, registration procedures, LLIN distribution arrangements, and key malaria prevention messages to maximise participation and community ownership.

Training was provided to District Health Teams, health workers, Community Team Leaders, and village volunteers. Training focused on household registration procedures, household data collection, LLIN allocation guidelines, stock management, reporting requirements, malaria prevention messaging, and quality assurance processes.

Household Survey and Data Collection



Figure 5 Trained village volunteers for HH survey & distributions - Lako Health Center

All households were physically visited to verify residency and household composition. Existing RAM household databases and previous survey records were used as reference material; however, all household information was validated during field implementation to ensure that LLIN allocations reflected actual resident populations.

Household surveys were undertaken by trained village volunteers under the supervision of RAM officers, District Health Services staff, health workers, and community team leaders. Standardised information collected during household registration included household composition, residency status, sleeping arrangements, communication access, and the presence of vulnerable groups, including children under five years of age, pregnant women, elderly persons, and persons living with disabilities.

Village Validation and LLIN Allocation

A province-wide master village list covering 213 villages was validated through consultation with District Health Services, health facilities, Local Level Governments, and community leaders. Survey findings were compared with previous RAM household survey databases and population estimates to identify settlement growth, population movement, and potential enumeration gaps.

Following verification, LLIN allocations were calculated in accordance with National Malaria Control Programme guidelines using verified household size and sleeping arrangements. Most households received between one and four LLINs depending on family composition and sleeping requirements. Verified survey data were also utilised for logistics planning, stock forecasting, and pre-positioning of LLIN stocks at provincial stores, health centres, and community distribution points.

Verification of Household survey

Following completion of the household survey, Rotarians Against Malaria (RAM) LLIN Project Officers or District Health Team members conducted a post-survey quality assurance exercise

by independently verifying approximately 6% of all surveyed households. This verification process involved revisiting selected households from survey books to confirm the accuracy of household registration, family size, sleeping arrangements, and other survey information recorded during the household census. The exercise served as a critical quality control mechanism to identify and correct any discrepancies, validate survey data, and ensure that LLIN allocations were based on accurate household information. This systematic cross-verification process strengthened data integrity, improved accountability, and enhanced confidence in the overall quality of the household survey and LLIN distribution programme.

Following completion of the household survey, a summary of the surveyed households was publicly displayed within each village to enable community members to verify the accuracy of the household survey data. The village summary sheet included household names, family size, population by age and sex, and other key information recorded during the household survey. The summary was displayed for approximately 24 to 48 hours before the commencement of LLIN distribution, providing sufficient time for community members to review their household details.

Where discrepancies or omissions were identified, households were encouraged to report them to the village survey volunteer, health facility staff, or the RAM Project Officer. Any verified corrections were updated in the official household survey books before finalising LLIN allocations. This community verification process formed an important component of the programme's quality assurance framework, strengthening data accuracy, promoting transparency and accountability, and ensuring that LLIN allocations were based on verified household information prior to distribution.

Survey Coverage

The programme successfully completed household surveys throughout Manus Province, covering 69,708 people, 14,710 households, and 213 villages across all 12 Local Level Governments. The household survey methodology ensured comprehensive coverage of mainland and island communities while providing an accurate household database for equitable LLIN allocation. The use of verified household information significantly improved planning accuracy, commodity accountability, and overall programme efficiency.

The Manus Province LLIN Family-Level Survey methodology combined household-level data collection, physical household verification, strong community participation, and robust quality assurance processes to ensure accurate household enumeration and equitable LLIN allocation. This approach strengthened accountability, improved data quality, reduced duplication, and ensured that LLINs were distributed according to verified household needs throughout the province.

LLIN Household Distribution Process

Social Mobilisation and Community Engagement

Prior to LLIN distribution, an extensive social mobilisation and community awareness campaign was conducted throughout Manus Province. Activities were coordinated by District Health Services, health facilities, Local Level Governments, church organisations, ward councillors, village leaders, and community volunteers.

Communities were informed of household survey schedules, LLIN distribution dates, beneficiary eligibility requirements, designated distribution sites, and key malaria prevention messages. Households were encouraged to retain survey receipts and registration records for verification during distribution. These awareness activities improved community participation, strengthened preparedness, and facilitated efficient implementation throughout the province.

Given Manus Province's dispersed island geography, community leaders, church representatives, health workers, and village volunteers played a particularly important role in mobilising communities located on remote islands and isolated coastal settlements where access depended entirely on maritime transport.

Distribution Organisation and Beneficiary Verification



Figure 6 LLIN distribution at Patu Health Center

Distribution sites were established at health facilities, ward centres, schools, churches, and village-level locations based on population size, accessibility, and local operating conditions. This decentralised approach improved access for remote communities while reducing travel requirements for beneficiaries.

Distribution activities were jointly coordinated by RAM, District Health Services, health facility staff, and community leaders. Community representatives assisted with beneficiary mobilisation, crowd management, beneficiary verification, and oversight of distribution activities.

A structured verification system ensured that LLINs were distributed only to eligible households identified during the household survey process. Beneficiaries were verified using household survey books & survey receipts. Where survey receipts had been misplaced or household representatives were absent, eligibility was confirmed using household registers maintained by RAM and health facilities.

Special provisions were made for elderly persons, persons living with disabilities, pregnant women, and other vulnerable households to ensure equitable access while maintaining programme accountability and transparency.

LLIN Coding and Commodity Accountability

To strengthen commodity accountability and traceability, all LLINs distributed within Manus Province – MANUS 2025 were labelled with a provincial identification code prior to distribution. Coding was undertaken under the supervision of RAM and District Health Services personnel and enabled tracking of LLIN stocks throughout the distribution process.

This system reduced the risk of diversion, duplication, resale, and unauthorised movement of LLINs while supporting post-distribution monitoring and verification activities. A total of 36,001 LLINs were coded and distributed throughout Manus Province.

Distribution to Remote Island Communities

One of the major achievements of the programme was the successful delivery of LLINs to remote island communities throughout Manus Province. Special operational arrangements were implemented to reach isolated offshore islands, coastal settlements, and villages dispersed across the province.

Due to Manus Province's unique maritime geography, distribution teams relied heavily on coastal vessels, dinghies, fibreglass boats, and outboard motor canoes to transport LLIN bales, personnel, and survey materials between islands. Careful coordination of shipping schedules, fuel supplies, tides, and prevailing weather conditions was essential to ensure that remote communities received LLINs according to the planned implementation schedule.

LLIN Distribution in Manus Province – Results and Analysis

The 2025 Manus Province Long-Lasting Insecticidal Net (LLIN) Family-Level Survey and Distribution Programme was implemented throughout Manus Province and was preceded by a comprehensive household survey and population verification exercise designed to establish accurate beneficiary numbers and ensure equitable allocation of LLINs based on verified household composition and sleeping arrangements.



Figure 7 Happy children with their nets - Tingou Health Center

Unlike several previous provincial LLIN campaigns that required follow-up operations in remote locations, the 2025 Manus Province programme successfully completed all planned survey and distribution activities during the reporting period. Through effective planning, strong coordination, and well-managed maritime logistics, LLINs were delivered to eligible households across both mainland and island communities throughout the province.

District-Level Results

Table 2: District Summary

DISTRICT	POPULATION SURVEYED 2025	HOUSEHOLDS SURVEYED	LLINS DISTRIBUTED	LLINS PER 100 PEOPLE
MANUS	69,708	14,710	36,001	51.6
TOTAL	69,708	14,710	36,001	51.6

The programme surveyed 69,708 people from 14,710 households, representing approximately 96.2 percent of the estimated provincial population of 72,429 people. Compared with the 2022 household survey, the surveyed population increased from 68,051 to 69,708, representing an increase of 1,657 people or approximately 2.4 percent over the three-year period. Based on the verified household survey, 36,001 LLINs were distributed, achieving an overall allocation ratio of 51.6 LLINs per 100 people, equivalent to approximately one LLIN for every 1.94 persons, consistent with NMCP universal coverage guidelines.

Local Level Government Analysis

Table 3

LLG	DISTRICT	POPULATION SURVEYED 2025	HOUSE HOLDS SURVEYED 2025	NETS ISSUED 2025	NETS DISTRIBUTED PER 100 PEOPLE
AUA WUVULU RURAL	MANUS	1,306	293	669	51.2
NIGOHERM	MANUS	2,135	345	1,068	50.0
BISIKANI \ SOPARIBEU	MANUS	6,108	1,398	3,120	51.1
POMUTU \ KURTI \ ANDRA	MANUS	8,206	1,677	4,290	52.3
LELEMADIH BUPICHUPEU	MANUS	9,611	2,130	4,907	51.1
LORENGAU URBAN	MANUS	13,512	2,946	7,221	53.4
LOS NEGROS	MANUS	4,968	1,083	2,607	52.5
NALI SOPAT \ PENABU	MANUS	5,387	1,035	2,797	51.9
TETEDU	MANUS	3,439	723	1,733	50.4
POBUMA	MANUS	7,627	1,493	3,689	48.4
BALOPA	MANUS	2,894	599	1,500	51.8
RAPATONA	MANUS	4,515	988	2,400	53.2
TOTALS		69,708	14,710	36,001	51.6

Implementation covered all 12 Local Level Governments (LLGs) within Manus Province. Lorengau Urban LLG recorded the largest surveyed population, with 13,512 people residing in 2,946 households, receiving 7,221 LLINs, and achieving a distribution rate of 53.4 LLINs per 100 people.

Lelemaih Bupichupeu LLG surveyed 9,611 people from 2,130 households and received 4,907 LLINs, while Pomutu–Kurti–Andra LLG surveyed 8,206 people from 1,677 households, receiving 4,290 LLINs.

Among the island Local Level Governments, Pobuma LLG surveyed 7,627 people and received 3,689 LLINs, Bisikani–Soparibeu LLG surveyed 6,108 people and received 3,120 LLINs, Nali Sopat–Penabu LLG surveyed 5,387 people and received 2,797 LLINs, and Los Negros LLG surveyed 4,968 people, receiving 2,607 LLINs.

Smaller island communities including Rapatona, Tetedu, Balopa, Nigoherm, and Aua Wuvulu Rural also achieved complete household coverage despite their geographical isolation and dependence on maritime transport.

Overall, LLIN distribution rates across the twelve Local Level Governments ranged from 48.4 to 53.4 LLINs per 100 people, demonstrating a high degree of consistency in the application of National Malaria Control Programme allocation guidelines throughout Manus Province.

Population Analysis

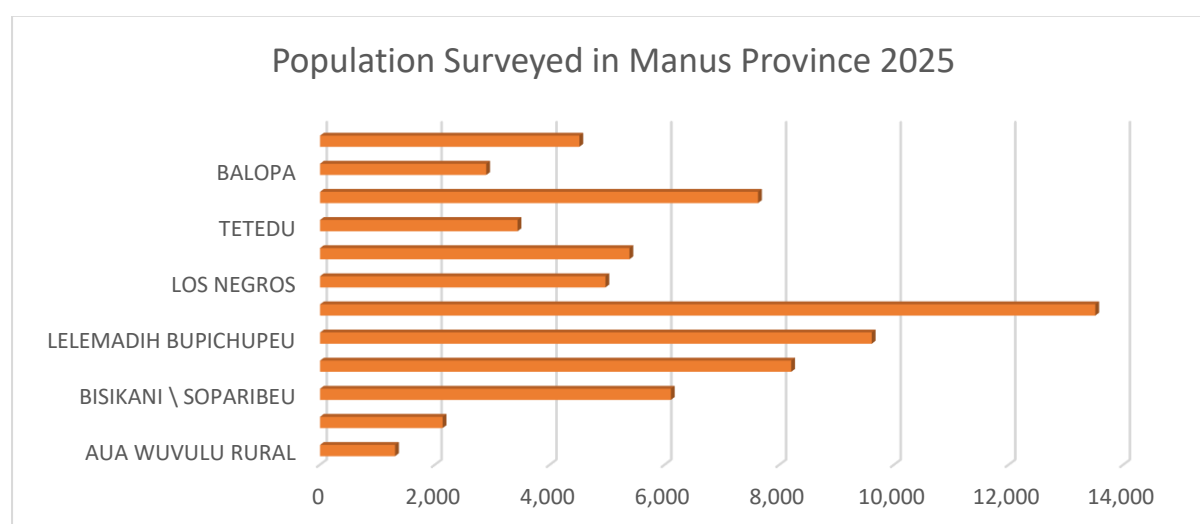
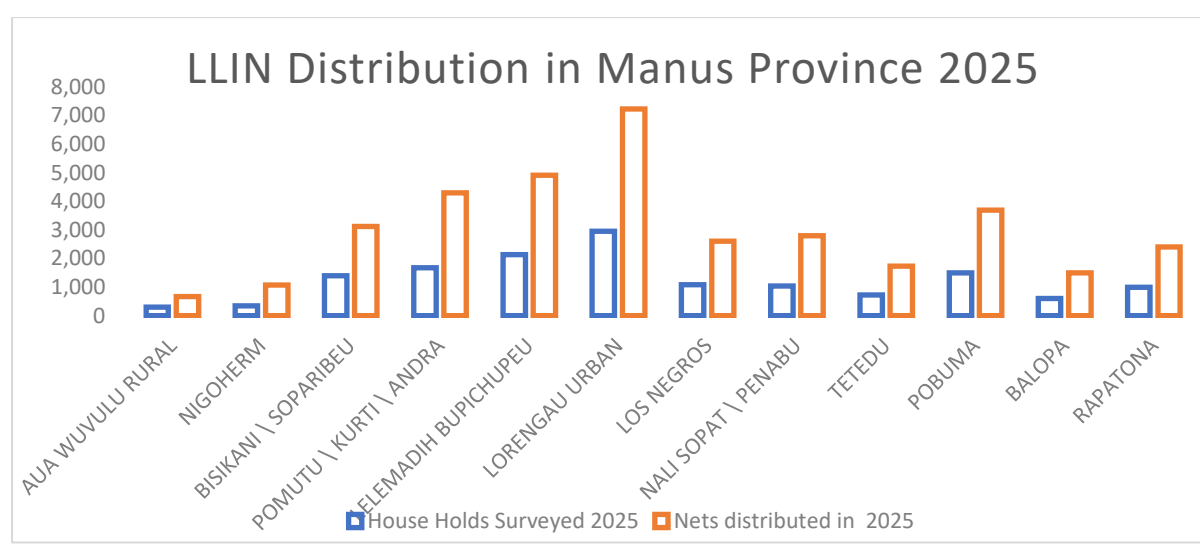


Figure 8 Population of each LLGs in Manus

Household Coverage Analysis



Household allocation was based on verified family size and sleeping arrangements in accordance with National Malaria Control Programme guidelines, ensuring equitable distribution across all Local Level Governments.

The relatively consistent LLIN allocation rates achieved throughout the province demonstrate that household verification, community participation, and quality assurance mechanisms were effectively implemented, enabling equitable access to malaria prevention services across mainland and island communities alike.



Figure 9 Communities waiting to receive LLINs in Pelipowai Health Center

Overall Programme Performance

Overall, the programme distributed 36,001 LLINs throughout Manus Province, achieving an overall distribution rate of 51.6 LLINs per 100 people surveyed, equivalent to approximately one LLIN for every 1.94 persons. The programme successfully reached the vast majority of targeted households and demonstrated strong performance in household verification, beneficiary registration, stock management, and equitable LLIN allocation.

The findings demonstrate that the 2025 Manus Province LLIN Family-Level Survey and Distribution Programme was successfully implemented, achieving high household coverage, effective beneficiary verification, and equitable LLIN distribution throughout the province. The combination of household-level population verification, strong community participation, effective maritime logistics, and close collaboration between the Manus Provincial Health Authority, National Malaria Control Programme, Rotarians Against Malaria, District Health Services, health facilities, and village volunteers enabled the programme to successfully deliver malaria prevention services across 213 villages dispersed throughout one of Papua New Guinea's most geographically challenging island provinces. The successful distribution of 36,001 LLINs provides a strong foundation for sustaining universal LLIN coverage, reducing malaria transmission, and protecting vulnerable populations throughout Manus Province.

Budget Performance Analysis

Table 4 - Manus Province LLIN OPS 2025

Expense Types	Budget	Actual	Variance
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<i>Training</i>	4,650	3,020	1,630
<i>Human Resources</i>	39,909	37,552	2,357
<i>Fuel</i>	41,340	45,908	-4,568
<i>Vehicle Hire</i>	34,650	48,250	-13,600
<i>Boat Hire</i>	47,400	39,324	8,076
<i>Aircraft Hire</i>	-	-	-
<i>Stationary</i>	3,000	732	2,268
<i>5% Contingency</i>	8,547	7,296	1,252
Totals			
PGK	K1,79,496	K1,82,082	-K2,586
USD	\$43,169	\$43,791	-\$622

The approved operational budget for the 2025 Manus Province Long-Lasting Insecticidal Net (LLIN) Family-Level Survey and Distribution Programme was PGK 179,496 (USD 43,169). Actual programme expenditure totalled PGK 182,082 (USD 43,791), resulting in an overall budget variance of PGK 2,586, representing an expenditure of approximately 101.4% of the approved budget. The minor budget overrun reflects the challenging operational environment associated with implementing LLIN distributions across one of Papua New Guinea's most geographically dispersed island provinces.

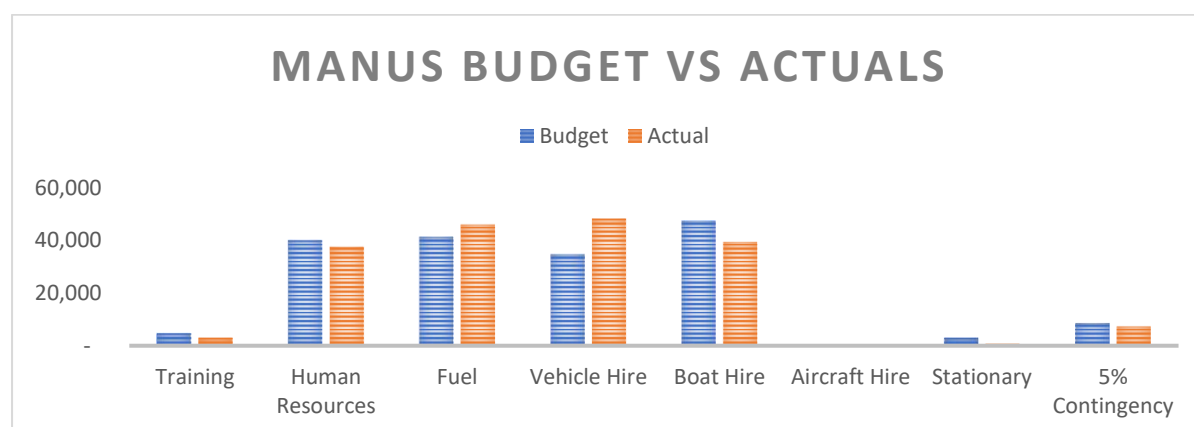


Figure 10 Budget Vs actuals

Overall financial performance demonstrates effective budget management despite several unavoidable operational cost increases arising from adverse weather, maritime logistics, higher fuel prices, increased vehicle hire costs, and additional transport requirements. Savings achieved in several budget categories helped offset these unavoidable increases and minimised the overall budget variance.

Distribution Cost per Long-Lasting Insecticidal Net (LLIN)

The 2025 Manus Province LLIN Family-Level Survey and Distribution Programme distributed a total of 36,001 Long-Lasting Insecticidal Nets (LLINs) at a total operational cost of PGK 182,082 (USD 43,791). Based on the total programme expenditure, the average operational distribution cost was approximately PGK 5.06 (USD 1.22) per LLIN distributed.

Although fuel prices, vehicle hire rates, and maritime logistics costs exceeded original budget assumptions, prudent financial management and savings achieved in training, human resources, boat hire, stationery, and contingency expenditure enabled the programme to maintain an overall distribution cost that remains highly competitive for an island province with significant logistical challenges.

Training

Training expenditure totalled PGK 3,020, compared with the approved budget of PGK 4,650, resulting in a saving of PGK 1,630. The savings were achieved through efficient utilisation of provincial health facilities for training activities, effective coordination with Manus Provincial Health Authority and District Health Services, and the use of existing government staff and community volunteers to support training sessions, thereby reducing venue, catering, and training-related costs.

Human Resources

Actual expenditure on human resources was PGK 37,552, compared with the approved budget of PGK 39,909, generating savings of PGK 2,357. The favourable variance resulted from efficient deployment of RAM staff, effective utilisation of local volunteers and health workers, and careful management of field personnel throughout the implementation period while maintaining full operational coverage.

Fuel

Actual fuel expenditure totalled PGK 45,908, compared with the approved budget of PGK 41,340, resulting in an over-expenditure of PGK 4,568, representing approximately 11.1% above the approved budget.

The increase in fuel expenditure was primarily attributable to moderate increases in fuel prices together with higher fuel consumption during programme implementation. The operational budget was prepared using an estimated Zoom petrol price of PGK 3.80 per litre and diesel price of PGK 4.00 per litre. During implementation, the average purchase price increased to PGK 4.73 per litre for Zoom petrol and PGK 4.55 per litre for diesel, representing increases of approximately 24.5% and 13.8%, respectively. The cost of fuel does not include the cost of procuring the fuel drums costing around K.340 per drum.

Fuel consumption also increased because of the extensive maritime operations required to transport LLINs, personnel, and supplies between dispersed islands. Multiple boat trips, longer travel distances, adverse weather conditions, and delays caused by rough seas further contributed to increased fuel usage throughout the programme.

Vehicle Hire

Vehicle hire recorded the largest budget variance. Actual expenditure totalled PGK 48,250, compared with the approved budget of PGK 34,650, resulting in an over-expenditure of PGK 13,600.

The increase was primarily attributed to higher commercial vehicle hire rates during implementation. The original budget was based on a daily hire rate of PGK 550 per vehicle, whereas the actual average hire rate increased to approximately PGK 650 and above per day. In addition, operational requirements increased from the planned three vehicles to four vehicles

to support simultaneous transport of LLIN bales, fuel, survey materials, and field teams across multiple operational locations. The additional vehicle was required to maintain implementation schedules, improve logistics coordination, and minimise operational delays associated with moving commodities between health facilities, storage locations, wharves, and coastal departure points.

Boat Hire

Boat hire expenditure totalled PGK 39,324, compared with the approved budget of PGK 47,400, generating savings of PGK 8,076.

Although the programme relied extensively on maritime transport, careful planning of boat schedules, effective coordination with local boat owners, and consolidation of transport movements reduced the number of charter days required. Close collaboration with local maritime transport providers enabled several distribution trips to be combined, improving transport efficiency and reducing overall boat hire expenditure.

Stationery

Stationery expenditure totalled PGK 732, substantially below the approved budget of PGK 3,000, resulting in savings of PGK 2,268.

Savings were achieved through careful utilisation of survey materials, efficient inventory management, and the use of existing stationery resources where appropriate. The prudent management of operational supplies ensured that all survey and distribution activities were completed without additional procurement.

Contingency

Expenditure under the contingency budget amounted to PGK 7,296, compared with the approved allocation of PGK 8,547, resulting in savings of PGK 1,252. Effective operational planning, continuous supervision, and timely problem-solving minimised the need to utilise the full contingency allocation.

Overall Budget Performance

Despite operating across one of Papua New Guinea's most geographically dispersed island provinces, the Manus Province LLIN Family-Level Survey and Distribution Programme was implemented with a very high level of financial discipline. The modest overall budget variance of PGK 2,586 (1.4%) demonstrates effective financial planning and prudent expenditure management despite significant increases in fuel prices, vehicle hire rates, and operational logistics.

The principal cost drivers were the nationwide increase in fuel prices, increased commercial vehicle hire rates, the requirement for an additional operational vehicle, and the logistical complexity of transporting LLINs and personnel across numerous offshore islands under challenging weather conditions. These unavoidable increases were substantially offset through savings achieved in training, human resources, boat hire, stationery, and contingency expenditure.

Overall, the financial performance demonstrates that the programme successfully achieved its operational objectives while maintaining expenditure within acceptable limits. The experience gained from Manus Province will further strengthen future budget planning for island provinces,

particularly with respect to fuel pricing, vehicle hire costs, maritime logistics, and contingency requirements associated with implementing LLIN distribution programmes across geographically dispersed island environments.

Communication Infrastructure Analysis

Table 5: Communication Infrastructure Survey Results – Manus Province, 2025

Province	Villages	Households Surveyed	Villages with Digicel Coverage	Villages with Bmobile Coverage	Households with Mobile Phones	Households with Radios	Villages with Radio Networks
Manus Province	213	14,710	182	33	4,713	1,019	131
Total	213	14,710	182	33	4,713	1,019	131

The 2025 Manus Province LLIN Family-Level Survey collected communication infrastructure information from 213 villages and 14,710 households throughout the province to better understand communication access and support future malaria prevention activities. The survey identified 182 villages (85.4%) with Digicel network coverage and 33 villages (15.5%) with Bmobile coverage, confirming that Digicel remains the dominant mobile telecommunications provider throughout Manus Province. However, the findings also demonstrate that many remote island communities continue to experience limited or intermittent mobile network coverage because of their geographical isolation and dispersed island locations.

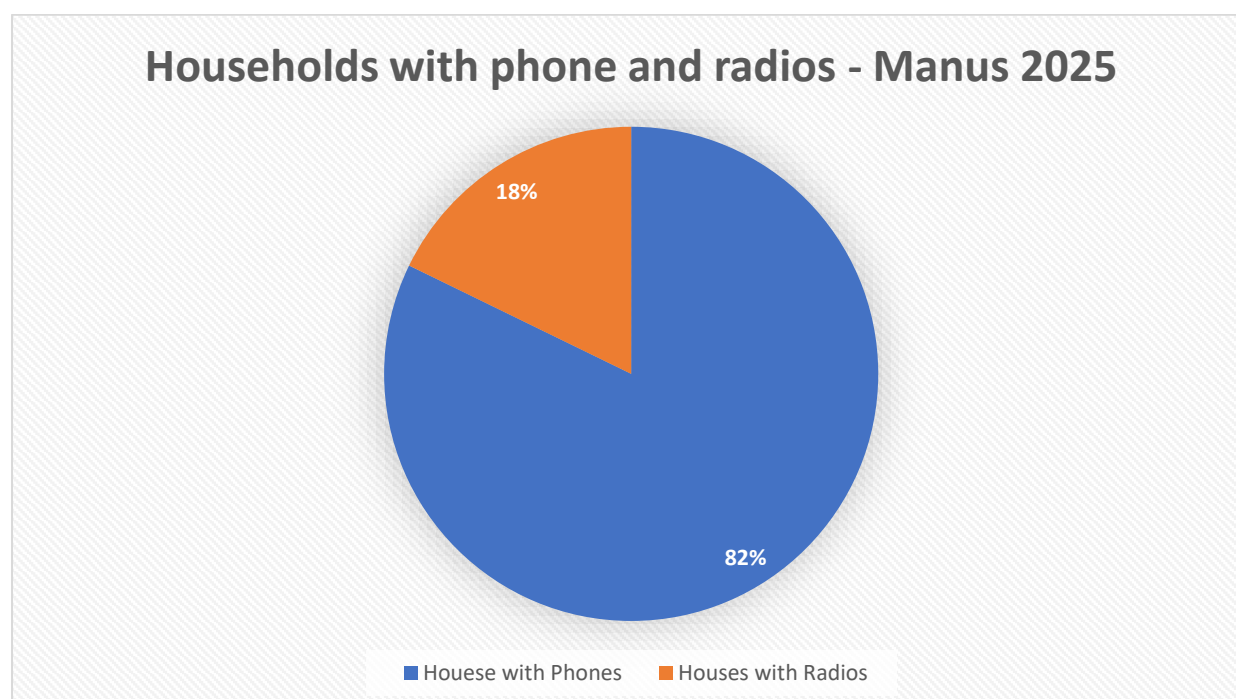


Figure 11 Graph - Hhouseholds with phone and radios

A total of 4,713 households (32.0%) reported owning mobile phones, while 1,019 households (6.9%) owned radios. In addition, 131 villages (61.5%) reported access to radio communication

networks. These findings highlight the continued importance of radio communication, particularly for remote island communities where mobile network coverage remains unreliable or unavailable because of the distance between islands, limited telecommunications infrastructure, and challenging maritime conditions.

Communication across Manus Province is further influenced by its unique geography. Many communities are located on small offshore islands separated by considerable distances of open sea, making reliable communication dependent not only on mobile networks but also on VHF radio systems, health facilities, churches, maritime transport operators, village leaders, and community volunteers. These communication networks remain essential for disseminating public health information, coordinating programme activities, responding to emergencies, and mobilising communities during health campaigns.

The communication infrastructure data collected during the household survey provides valuable evidence for planning future malaria prevention and other public health interventions. Communities with reliable mobile network coverage can increasingly benefit from SMS messaging, mobile communication platforms, and rapid dissemination of health information. However, for many remote island communities, radio communication, churches, schools, health facilities, village leaders, and community volunteers will continue to provide the most effective means of community engagement and health promotion.

Challenges Encountered During Implementation

The 2025 Manus Province LLIN Family-Level Survey and Distribution Programme was implemented across 213 villages, covering 69,708 people from 14,710 households throughout Manus Province. The programme covered both mainland Manus and numerous offshore islands through the coordinated efforts of Rotarians Against Malaria (RAM), Manus Provincial Health Authority (MPHA), District Health Services, health facilities, church health services, village leaders, and community volunteers. Although the programme successfully distributed 36,001 Long-Lasting Insecticidal Nets (LLINs), several operational challenges affected implementation efficiency, logistics, scheduling, and field operations.

Adverse Weather and Sea Conditions

Persistent adverse weather was the most common operational challenge encountered throughout the programme. Heavy rainfall, strong winds, rough seas, and rapidly changing weather conditions affected operations across several health centre catchments, particularly Bundralis Health Centre, Lako Health Centre, Patu Health Centre, Pelipowai Health Centre, and Tingou Health Centre.

At Bundralis Health Centre, continuous heavy rainfall throughout the implementation period delayed household surveys and LLIN distributions, resulting in extensions to the planned operational schedule. Similarly, prolonged rainfall and strong winds affected outer island operations within the Patu Health Centre catchment, while rough sea conditions delayed planned travel to coastal villages within the Pelipowai Health Centre catchment. At Lako Health Centre, rapidly changing weather conditions exposed field teams to prolonged rain, increasing the risk of cold-related illnesses and restricting daily field movements.

Maritime Transport and Logistics

Within the Lako Health Centre catchment, strong winds generated rough seas, creating unsafe conditions for boats carrying LLIN bales and personnel. The limited availability of suitable sea vessels occasionally resulted in overloading, increasing operational risks during periods of adverse weather.

At Pelipowai Health Centre, the scattered distribution of villages required repeated boat movements, resulting in longer boat hire periods and substantially higher fuel consumption than originally anticipated. Similarly, outer island communities served by Patu Health Centre required multiple sea journeys, increasing transport time and logistical complexity throughout the programme.

Fuel and Supply Constraints

Fuel availability presented operational challenges in several remote island communities. Within the Lako Health Centre catchment, there were no local fuel suppliers, making replenishment extremely difficult once field operations commenced. Likewise, officers operating within the Lessau Health Centre catchment reported that the allocated fuel (Zoom) budget was insufficient to complete all planned operational activities because of the additional sea travel required between islands. Minor shortages of operational supplies were also encountered.

Community Participation and Local Events

Community participation remained generally strong; however, several local events influenced implementation schedules.

Within the Bundralis Health Centre catchment, the Local Level Government elections resulted in significant population movement between villages, making household verification and LLIN allocation more difficult as residents travelled frequently between communities. In addition, many households were unavailable during scheduled distribution days because they were attending customary obligations, gardening, fishing, and other daily livelihood activities. As a result, distribution teams were required to extend operations into subsequent days to ensure complete household coverage.

At Lessau Health Centre, an ethnic dispute involving communities from Bipi Island and Six Island prevented residents from attending the initially scheduled distribution activities. Distribution was successfully completed after community tensions subsided and revised schedules were implemented.

Community Acceptance

At Lombrum Health Centre, programme implementation was temporarily affected when the village councillor from Haraman Village initially refused permission for household surveys because of concerns that the community had participated in a previous household survey but had not subsequently received LLINs. Following discussions between RAM officers, community leaders, and local health representatives, the concerns were resolved, allowing household registration and LLIN distribution activities to proceed successfully.

Volunteer Training and Capacity Building

During volunteer training conducted within the Lako Health Centre catchment, some village volunteers initially experienced difficulty understanding household survey procedures and

completing survey books accurately. Additional mentoring and practical demonstrations were therefore provided before field deployment, improving data quality and strengthening the accuracy of household registration throughout the catchment.

Telecommunications and Accessibility

Limited mobile network coverage affected communication within several remote island communities. At Pelipowai Health Centre, poor network coverage delayed communication between RAM officers, field teams, and programme headquarters. Similarly, several remote communities served by Tingou Health Centre experienced intermittent mobile network coverage, making routine communication and coordination between volunteers, health workers, and RAM officers difficult.

Within the Tingou Health Centre catchment, poor road conditions also delayed access to several inland communities. Combined with heavy rainfall, these conditions reduced daily field activities and required additional logistical planning to reach remote villages.

Overall Operational Performance

Despite the challenges associated with adverse weather, rough sea conditions, dispersed island communities, limited maritime transport, fuel shortages, communication constraints, Local Level Government elections, ethnic disputes between Bipi and Six Islands, community concerns in Haraman Village, and difficult access to remote communities served by Bundralis, Lako, Lessau, Lombrum, Lorengau Hospital, Patu, Pelipowai, and Tingou Health Centres, the programme successfully completed all planned household surveys and LLIN distribution activities throughout Manus Province. Strong collaboration between the National Malaria Control Programme, Manus Provincial Health Authority, District Health Services, health facilities, church health services, community leaders, village volunteers, and Rotarians Against Malaria ensured that malaria prevention services reached eligible households across all 213 villages, significantly strengthening malaria prevention efforts throughout the province.

Lessons Learned

The 2025 Manus Province LLIN Family-Level Survey and Distribution Programme demonstrated that successful implementation within an island province requires flexible operational planning, strong maritime logistics, and adaptive management. Early engagement with local boat owners, careful scheduling of sea transport, adequate fuel reserves, and contingency planning for adverse weather are essential to minimise operational delays. The programme also reinforced the importance of strengthening volunteer training, maintaining close collaboration with village leaders and church organisations, and responding quickly to community concerns, such as those experienced at Haraman Village, and local events including the LLG elections and the Bipi–Six Island ethnic dispute. Most importantly, the successful completion of survey and distribution activities across 213 villages, despite these operational challenges, demonstrated the commitment, resilience, and adaptability of RAM staff and all implementing partners and provides a strong operational foundation for future LLIN campaigns throughout Manus Province.

Acknowledgements

The successful implementation of the 2025 Manus Province Long-Lasting Insecticidal Net (LLIN) Family-Level Survey and Distribution Programme was made possible through the dedication, commitment, and collaboration of numerous government agencies, health workers,

community leaders, volunteers, transport providers, church health services, and development partners. Rotarians Against Malaria (RAM) extends its sincere appreciation to everyone who contributed to the successful planning, coordination, implementation, monitoring, and completion of this important malaria prevention programme.

RAM expresses its deepest appreciation to the National Department of Health (NDOH) and the National Malaria Control Programme (NMCP) for their continued leadership, technical guidance, and support in implementing Papua New Guinea's national malaria prevention strategy through the Global Fund-supported LLIN distribution programme.

We sincerely acknowledge the outstanding leadership and cooperation provided by the Manus Provincial Health Authority (MPHA) throughout the programme. In particular, we extend our sincere appreciation to Mr. Francis Possy, Chief Executive Officer, for his leadership and commitment to strengthening malaria prevention across Manus Province. We also acknowledge the invaluable technical guidance and operational support provided by Mr. David Lapun, Director of Public Health; Mr. Brendan Ndrawi, Provincial Disease Control Officer; and Mr. Julius Binamb, Provincial Malaria Supervisor. Their close collaboration with RAM during planning, implementation, supervision, and monitoring was instrumental in the successful delivery of the programme.

RAM further acknowledges the dedication and professionalism of the District Health Services, government health facilities, church health services, health workers, and aid post staff who worked tirelessly alongside RAM officers throughout the implementation period. Their technical expertise, local knowledge, and commitment to community health significantly strengthened programme implementation and ensured that LLINs reached eligible households throughout the province.

We would particularly like to recognise the following health professionals who provided invaluable support during planning and implementation:

Manus District Health Facilities

Name	Position	Health Facility
Sr. Monica Morrison	Sister in Charge	Paniselu Health Centre
Mr. Jerry Maruen	Community Health Worker	Paniselu Health Centre
Ms. Freda Jerry	Community Health Worker	Paniselu Health Centre
Mr. Andrew Pipingan	Community Health Worker	Londru Aid Post
Mr. Elijah Mega	Community Health Worker	Patu Health Centre
Mr. John Sangapi	Community Health Worker	Patu Health Centre
Ms. Motchy Stanly	Community Health Worker	Patu Health Centre
Ms. Derolyne Kaka	Community Health Worker	Pere Aid Post
Ms. Cecilia Sime	Sister in Charge	Bundralis Health Centre

Name	Position	Health Facility
Mr. Edward Sikot	Community Health Worker	Bundralis Health Centre
Mr. Brendan Ndrawi	Community Health Worker	Bundralis Health Centre
Mrs. Hilena Anna	Officer in Charge	Lessau Health Centre
Mrs. Niamek Bonruan	Midwife	Lessau Health Centre
Mr. Elton Pokam	Community Health Worker	Lessau Health Centre
Mr. George Tomiden	Community Health Worker	Lessau Health Centre
Ms. Dulcie Sikahi	Community Health Worker	Lorengau Hospital
Ms. Phyllis Powen	Community Health Worker	Lorengau Hospital
Ms. Henny Lumou	Community Health Worker	Lorengau Hospital
Sr. Lynn	Officer in Charge	Pelipowai Health Centre
Mr. Polin Paliau	Nursing Officer	Pelipowai Health Centre
Mr. Chris Larry	Health Extension Officer	Lako Health Centre
Mr. Turig Goyoru	Community Health Worker	Lako Health Centre
Mrs. Collen Simon	Community Health Worker	Mouk Aid Post
Mr. Hudson Magum	Community Health Worker	Pam Aid Post

RAM also extends its sincere appreciation to its dedicated LLIN implementation team, whose professionalism, commitment, and willingness to work in challenging island environments ensured the successful completion of household surveys and LLIN distributions throughout Manus Province.

Rotarians Against Malaria LLIN Team

NAME	POSITION	HEALTH FACILITY / ASSIGNMENT	DAYS IN THE FIELD
MR. DAVID KOI	Provincial Team Leader	Administration & Logistics	35
MR. DAVID KOI	Provincial Team Leader	Mal and Wuvulu Health Facilities	8
MR. MAX KALAMA	Project Officer	Pelipowai Health Centre	17
MR. RUSSEL TITI	Project Officer	Lako Health Centre	11

MR. BROWN KAUPA	Project Officer	Paniselu Health Centre	11
MR. GILBERT KOLAIN	Project Officer	Tingou Health Centre	13
MR. JOSES NOMUIO	Project Officer	Bundralis Health Centre	14
MR. JOSHUA INE	Project Officer	Lessau Health Centre	25
MS. NAKEI BUBUN	Project Officer	Lombrum Health Centre	23
MS. JOYCE MANDA	Project Officer	Lorengau Hospital	23

RAM gratefully acknowledges the support of local transport and logistics providers whose services were critical in delivering LLINs across Manus Province's dispersed island communities. We sincerely thank Bismark Maritime Limited for transporting three shipping containers from Lae to Manus Wharf. We also acknowledge RL & VJ Knights Limited for transporting the containers from the wharf to the Manus Provincial Health Authority storage facility, where they were securely stored throughout the operation.

Special appreciation is extended to Manus Islands Shipping & Transport Limited for supplying bulk fuel required for field operations and to Hot Spot Shipping for transporting LLINs from Lorengau and supporting distributions to the Mal and Wuvulu Health Facility catchments. Their reliable maritime services were essential in ensuring that LLINs reached some of Manus Province's most remote island communities.

RAM also acknowledges the many local vehicle owners, dinghy operators, boat owners, drivers, and maritime transport providers who generously supported the programme. Their experience navigating challenging sea conditions and transporting LLINs, field teams, and operational supplies made it possible to reach remote communities throughout the province.

We also extend our sincere appreciation to all church-run health facilities, including those operated by the Catholic Church and the Evangelical Church of Manus, together with all government health facilities, for making their staff available to support programme implementation. Their commitment significantly strengthened household surveys, volunteer supervision, community mobilisation, and LLIN distribution activities.

Finally, RAM expresses its deepest gratitude to the hundreds of village volunteers, ward councillors, community leaders, church leaders, and community members throughout Manus Province. Their commitment to household registration, volunteer mobilisation, beneficiary verification, community awareness, and LLIN distribution ensured that malaria prevention services reached eligible households across 213 villages. Their dedication, local knowledge, and unwavering support were fundamental to the success of the 2025 Manus Province LLIN Family-Level Survey and Distribution Programme.

The success of this programme stands as a testament to the strength of collaboration between the National Department of Health, National Malaria Control Programme, Manus Provincial Health Authority, District Health Services, health facilities, church health services, local communities, development partners, and Rotarians Against Malaria in advancing Papua New Guinea's long-term vision of a malaria-free future.

Annexure 1

MANUS PROVINCE LLINs DISTRIBUTION IN PICTURES 2025

Microplanning

Microplanning at:
Hazel Ilave – Patu HC



Nakei Bubun – Lorengau Hos



Training & Survey

Survey Volunteer Training at:



Hazel Ilave – Patu HC



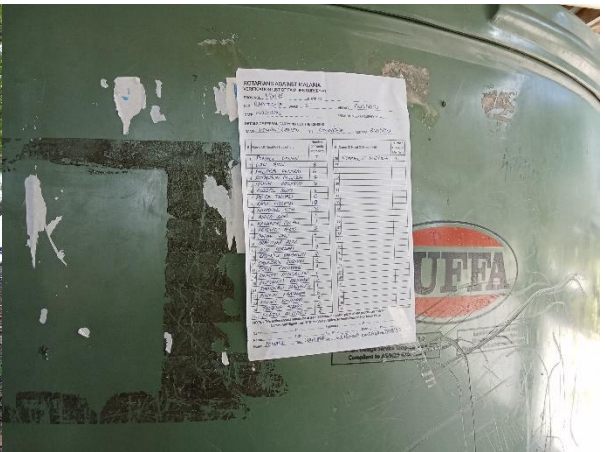
Joses Nomuio – Bundralis HC



Maxwell Kalama – Pelipowai HC



Russell Titi – Lako HC



Verification

Survey Verification:

Brown Kaupa – Paniselu HC

Hazel Ilave – Patu HC



Distribution

Distribution of LLINS:

Brown Kaupa – Paniselu HC



Hazel Ilave – Patu HC



Joses Nomuio – Bundralis HC



Joshua Ine – Lessau HC



Joyce Manda – Lombrum HC



Maxwell Kalama – Pelipowai HC



Russell Titi – Lako HC



Transportation & Storage

**Transportation & Storage of LLINS:
Brown Kaupa – Paniselu HC**



Joses Nomuio – Bundralis HC



Joshua Ine – Lessau HC



Joyce Manda – Lombrum HC



Happy Faces

Happy Recipients of LLINS:



Joshua Ine – Lessau HC



Joyce Manda – Lombrum HC

Russell Titi – Lako HC



MANUS PROVINCE

[illegible]

2	LAU ISLAND		245	361				396	70	196	196		2	0	0	0	0		
		Lau Island	88	104	Mal HC	Yes	19.10.25	131	26	63	63	20.10.25	1	0	0	0	0		Sea
		Mal Local Govt Station	157	257	Mal HC	Yes	19.10.25	265	44	133	133	20.10.25	1	0	0	0	0		Sea
3	PIHON		509	493				431	66	218	218		1	0	0	0	0		
		Pihon	509	493	Mal HC	Yes	19.10.25	431	66	218	218	20.10.25	1	0	0	0	0		Sea
4	LIOT		114	198				132	37	71	71		1	0	0	0	0		
		Liot	114	198	Mal HC	Yes	18.10.25	132	37	71	71	19.10.25	1	0	0	0	0		Sea
5	LUF		264	523				562	75	280	280		3	0	0	0	0		
		Amik School		150	Mal HC	Yes	19.10.25	191	30	94	94	20.10.25	1						Sea
		Luf	264	215	Mal HC	Yes	18.10.25	252	28	126	126	18.10.25	1	0	0	0	0		Sea
		Akip/School	0	158	Mal HC	Yes	18.10.25	119	17	60	60	18.10.25	1						Sea
6	AMIK		302	219				180	28	86	86		1	0	0	0	0		
		Amik	302	219	Mal HC	Yes	19.10.25	180	28	86	86	20.10.25	1	0	0	0	0		Sea
				0									0						
BISIKANI \ SOPARIBEU			6,824	6,372				6,108	1,398	2,943	3,120		17	16	0	763	64	17	
1	SALIEN		753	707				680	160	337	337		2	2	0	105	13		
		Salien	713	626	Lessau HC	Yes	03.10.25	624	147	307	307	10.10.25	1	1	0	93	11	NBC	Sea
		Sali-In Gov't. Station	40	81	Lessau HC	Yes	05.10.25	56	13	30	30	10.10.25	1	1	0	12	2	NBC	Sea
2	NIHON		603	518				528	113	280	280		1	0	0	49	3		
		Nihon	603	518	Lessau HC	Yes	06.10.25	528	113	280	280	10.10.25	1	0	0	49	3	NBC	Sea
3	KALI		416	330				325	63	162	162		1	1	0	34	5		
		Kali	416	330	Lessau HC	Yes	05.10.25	325	63	162	162	10.10.25	1	1	0	34	5	NBC	Sea
4	MASO		533	468				521	119	255	255		1	1	0	50	5		
		Maso	533	468	Lessau HC	Yes	06.10.25	521	119	255	255	09.10.25	1	1	0	50	5	NBC	Sea
5	MATAHAI		304	276				261	68	123	133		1	1	0	26	1		
		Matahai	304	276	Lessau HC	Yes	05.10.25	261	68	123	133	09.10.25	1	1	0	26	1	NBC	Sea
6	SALAPAI		825	730				608	148	288	288		1	1	0	99	6		
		Salapai	825	730	Lessau HC	Yes	06.10.25	608	148	288	288	09.10.25	1	1	0	99	6	NBC	Sea

7	LESSAU		481	548				683	177	329	369		3	3	0	100	4		
		Lessau	416	477	Lessau HC	Yes	02.10.25	333	96	173	187	11.10.25	1	1	0	60	4	NBC	Sea
		Lessau Evang. Mission	65	71	Lessau HC	Yes	02.10.25	231	50	112	119	12.10.25	1	1	0	28	0	NBC	Sea
		Andrikon		NEW	Lessau HC	Yes	04.10.25	119	31	44	63	11.10.25	1	1	0	12	0	NBC	Sea
8	HARENGAN		382	385				360	98	187	196		1	1	0	56	5		
		Harengan	382	385	Lessau HC	Yes	02.10.25	360	98	187	196	11.10.25	1	1	0	56	5	NBC	Sea
9	JOWAN 1		663	514				412	91	195	218		1	1	0	57	10		
		Jowan 1	663	514	Lessau HC	Yes	03.10.25	412	91	195	218	11.10.25	1	1	0	57	10	NBC	Sea
10	JOWAN 2		125	152				198	50	61	101		1	1	0	17	2		
		Jowan 2	125	152	Lessau HC	Yes	03.10.25	198	50	61	101	11.10.25	1	1	0	17	2	NBC	Sea
11	NYADA		494	466				444	90	178	233		1	1	0	26	0		
		Nyada	494	466	Lessau HC	Yes	03.10.25	444	90	178	233	11.10.25	1	1	0	26	0	NBC	Sea
12	LEVEI		713	831				689	130	343	343		1	1	0	80	5		
		Levei	713	831	Lessau HC	Yes	02.10.25	689	130	343	343	08.10.25	1	1	0	80	5	NBC	Sea
13	SORI 2		237	204				191	49	102	100		1	1	0	28	5		
		Sori 2	237	204	Lessau HC	Yes	02.10.25	191	49	102	100	08.10.25	1	1	0	28	5	NBC	Sea
14	SORI 1		297	242				208	42	103	105		1	1	0	36	0		
		Sori 1	297	242	Lessau HC	Yes	02.10.25	208	42	103	105	08.10.25	1	1	0	36	0	NBC	Sea
				0									0						
POMUTU \ KURTI \ ANDR			8,557	9,644				8,206	1,677	4,291	4,290		20	20	0	742	64	5	
1	PONAM		760	650				588	127	328	328		1	1	0	86	0		
		Ponam	760	650	Bundralis HC	Yes	25.09.25	588	127	328	328	01.10.25	1	1	0	86	0		Sea
2	TULU 1		596	665				610	113	337	337		1	1	0	63	0		
		Tulu 1	596	665	Bundralis HC	Yes	25.09.25	610	113	337	337	02.10.25	1	1	0	63	0		Sea
3	TULU 2		290	225				251	64	142	142		1	1	0	44	0		

		Tulu 2	290	225	Bundralis HC	Yes	25.09.25	251	64	142	142	02.10.25	1	1	0	44	0		Sea
4	LAPAHAU		265	212				244	45	127	127		1	1	0	30	0		
		Lapahau	265	212	Bundralis HC	Yes	24.09.25	244	45	127	127	28.09.25	1	1	0	30	0		Sea
5	BUNDRALIS C \ MIS		105	107				94	24	51	51		1	1	0	11	0		
		Bundralis Cath. Mission	105	107	Bundralis HC	Yes	25.09.25	94	24	51	51	29.09.25	1	1	0	11	0		Sea
6	LEHEWA		202	194				207	41	110	110		1	1	0	19	0		
		Lehewa	202	194	Bundralis HC	Yes	26.09.25	207	41	110	110	29.09.25	1	1	0	19	0		Sea
7	SAHA		249	299				249	48	137	137		1	1	0	12	0		
		Saha	249	299	Bundralis HC	Yes	25.09.25	249	48	137	137	29.09.25	1	1	0	12	0		Sea
8	NDREHET		925	1,112				1067	183	535	535		1	1	0	35	0		
		Ndrehet	925	1,112	Bundralis HC	Yes	25.09.25	1067	183	535	535	02.10.25	1	1	0	35	0		Sea
9	LIAP		725	924				967	182	494	496		1	1	0	96	0		
		Liap	725	924	Bundralis HC	Yes	25.09.25	967	182	494	496	03.10.25	1	1	0	96	0		Sea
10	DEREMBAT		785	723				702	187	380	377		1	1	0	42	0		
		Derembat	785	723	Bundralis HC	Yes	26.09.25	702	187	380	377	03.10.25	1	1	0	42	0		Sea
11	ANDRA ISLAND		805	1,566				577	121	305	305		1	1	0	71	0		
		Andra Island	805	1,566	Bundralis HC	Yes	25.09.25	577	121	305	305	01.10.25	1	1	0	71	0		Sea
12	SOU		1,182	1,210				1176	256	630	630		4	4	0	108	1		
		Lomoei	459	423	Bundralis HC	Yes	25.09.25	421	91	229	229	03.10.25	1	1	0	44	1		Sea
		Sou	721	299	Bundralis HC	Yes	26.09.25	286	77	157	157	01.10.25	1	1	0	35	0		Sea
		Ndrumunun		286	Bundralis HC	Yes	26.09.25	235	44	125	125	02.10.25	1	1	0	0	0		Sea
		A'dromalmal Govt Stn	2	202	Bundralis HC	Yes	25.09.25	234	44	119	119	03.10.25	1	1	0	29	0		Sea
13	MUNDRAU		441	478				530	97	254	254		1	1	0	34	1		
		Mundrau	441	478	Tingou HC3	Yes	29.09.25	530	97	254	254	05.10.25	1	1	0	34	1	BC Manu	Car/Foot

14	BADLOK	374	509				287	54	143	143		1	1	0	35	19		
	Badlok	374	509	Tingou HC3	Yes	29.09.25	287	54	143	143	05.10.25	1	1	0	35	19	BC Manu	Car/Foot
15	MUNDRIPUREU	194	214				178	34	89	89		1	1	0	24	8		
	Mundripureu	194	214	Tingou HC3	Yes	30.09.25	178	34	89	89	05.10.25	1	1	0	24	8	BC Manu	Car/Foot
16	PUNDRU	367	272				252	50	117	117		1	1	0	14	19		
	Pundru	367	272	Tingou HC3	Yes	30.09.25	252	50	117	117	05.10.25	1	1	0	14	19	BC Manu	Car/Foot
17	WAMANDRA	294	284				227	51	112	112		1	1	0	18	16		
	Wamandra	294	284	Tingou HC3	Yes	29.09.25	227	51	112	112	05.10.25	1	1	0	18	16	BC Manu	Car/Foot
			0									0						
LELEMADIH BUPICHUP		10,540	10,263				9,611	2,130	4,907	4,907		31	31	0	1,097	466	31	
1	MALABANG	139	83				86	22	40	40		1	1	0	9	0		
	Malabang	139	83	Lorengau Hos		27.09.25	86	22	40	40	02.10.25	1	1		9	0	NBC	Sea
2	HORAN	394	329				396	80	185	185		1	1	0	36	2		
	Horan	394	329	Lorengau Hos		28.09.25	396	80	185	185	02.10.25	1	1		36	2	NBC	Sea
3	POWAT	392	458				399	94	207	207		1	1	0	5	0		
	Powat	392	458	Lorengau Hos		28.09.25	399	94	207	207	02.10.25	1	1		5	0	NBC	Sea
4	MARAMAN	294	271				171	34	90	90		1	1	0	1	13		
	Haraman	294	271	Lorengau Hos		28.09.25	171	34	90	90	03.10.25	1	1		1	13	NBC	Sea
5	LAPAHAN	354	351				363	83	180	180		1	1	0	46	5		
	Lapahan	354	351	Lorengau Hos		28.09.25	363	83	180	180	02.10.25	1	1		46	5	NBC	Sea
6	NDRAKOT	129	311				260	50	126	126		1	1	0	29	4		
	Ndrakot	129	311	Lorengau Hos		29.09.25	260	50	126	126	02.10.25	1	1		29	4	NBC	Sea
7	LOWA	484	492				258	48	125	125		1	1	0	28	6		
	Lowa	484	492	Lorengau Hos		29.09.25	258	48	125	125	02.10.25	1	1		28	6	NBC	Sea
8	AHUS	973	770				708	158	313	313		1	1	0	71	4		
	Ahus	973	770	Lorengau Hos		29.09.25	708	158	313	313	02.10.25	1	1		71	4	NBC	Sea

9	YIRINGOU	666	530				595	133	312	312		2	2	0	111	11		
		Ndranou	401	285	Lorengau Hos	27.09.25	346	84	181	181	07.10.25	1	1		45	11	NBC	Car
		Yiringau	265	245	Lorengau Hos	28.09.25	249	49	131	131	07.10.25	1	1		66	0	NBC	Car
10	POWAT 1	730	682				645	136	331	331		1	1	0	11	92		
		Powat 1	730	682	Lorengau Hos	28.09.25	645	136	331	331	07.10.25	1	1		11	92	NBC	Car
11	LUNDRET	544	573				488	113	249	249		1	1	0	29	1		
		Phipun Ndranir		84	Lorengau Hos													Non Existant
		Lundret	544	489	Lorengau Hos	27.09.25	488	113	249	249	07.10.25	1	1		29	1	NBC	Car
12	ROSSUN	598	606				472	118	237	237		2	2	0	65	19		
		Rossun	409	475	Lorengau Hos	27.09.25	308	79	159	159	07.10.25	1	1		36	18	NBC	Car
		Warembu	189	131	Lorengau Hos	28.09.25	164	39	78	78	07.10.25	1	1		29	1	NBC	Car
13	DUNGUMASIH	1,402	1,691				1595	375	889	889		7	7	0	275	100		
		N'drelap	275	210	Lorengau Hos	02.10.25	163	50	95	95	08.10.25	1	1		32	6	NBC	Sea
		Kolwin		NEW	Lorengau Hos	28.09.25	277	50	142	142	08.10.25	1	1		49	21	NBC	
		Pondelis	568	640	Lorengau Hos	28.09.25	231	50	128	128	08.10.25	1	1		48	46	NBC	Car
		Topi		NEW	Lorengau Hos	28.09.25	204	50	112	112	08.10.25	1	1		9	10	NBC	
		Dungoumasi hi	332	444	Lorengau Hos	29.09.25	436	119	251	251	07.10.25	1	1		100	13	NBC	Car
		Lugos Evang. Mission	159	178	Lorengau Hos	27.09.25	158	31	78	78	07.10.25	1	1		12	2	NBC	Car
		Ecom High School	68	220	Lorengau Hos	27.09.25	126	25	83	83	07.10.25	1	1		25	2	NBC	Car
14	SAPON 1	901	831				872	223	461	461		4	4	0	85	27		
		Buliso	321	376	Lorengau Hos	29.09.25	353	93	182	182	02.10.25	1	1		28	1	NBC	Sea
		Sapon 1	267	246	Lorengau Hos	28.09.25	203	50	106	106	07.10.25	1	1		21	17	NBC	Car

		Sapon 2	169	37	Lorengau Hos		27.09.25	180	42	101	101	07.10.25	1	1		12	7	NBC	Car
		Bulihat	145	172	Lorengau Hos		28.09.25	136	38	72	72	07.10.25	1	1		24	2	NBC	Car
15	WARAMBEI		491	371				375	92	209	209		1	1	0	38	0		
		Warambei	491	371	Lorengau Hos		29.09.25	375	92	209	209	07.10.25	1	1		38	0	NBC	Sea Foot
16	PITYLUH		942	761				722	142	366	366		1	1	0	74	45		
		Pityluh	942	761	Lorengau Hos		28.09.25	722	142	366	366	03.10.25	1	1		74	45	NBC	Sea
17	NDILOU		1,108	1,154				1206	229	587	587		4	4	0	184	137		
		Hawei	292	241	Lorengau Hos		30.09.25	286	50	138	138	02.10.25	1	1		43	43	NBC	Sea
		Koronat	144	173	Lorengau Hos		27.09.25	161	39	73	73	02.10.25	1	1		36	34	NBC	Sea
		N'drilou	489	482	Lorengau Hos		29.09.25	478	90	255	255	02.10.25	1	1		75	52	NBC	Sea
		Wenai Point	184	258	Lorengau Hos		28.09.25	281	50	121	121	02.10.25	1	1		30	8	NBC	Sea
				0									0						
LORENGAU URBAN			9,806	12,718				13,512	2,946	7,221	7,221		21	20	20	0	0	20	
NEW CLASSIFICATION OF MANUS																			
	LORENGAU URBAN		9,806	0									0						
1	Ward 1		1,701	3,091				2843	633	1471	1471		3	3	3	0	0		
		Perepoint Settlement	721	1,598	Lorengau Hos2		27.09.25	1448	337	728	728	08.10.25	1	1	1			NBC	Road
		Redhill Settlement	452	200	Lorengau Hos2		30.09.25	548	96	277	277	08.10.25	1	1	1			NBC	Road
		Section 35/101	528	1,293	Lorengau Hos2		27.09.25	847	200	466	466	08.10.25	1	1	1			NBC	Road
2	Ward 2		751	1,244				1852	429	1026	1026		2	2	2	0	0		
		Nuwok/Sandr iku Settlement	357	737	Lorengau Hos2		28.09.25	526	150	294	294	09.10.25	1	1	1			NBC	Road
		Gov't Area	394	508	Lorengau Hos2		28.09.25	1326	279	732	732	09.10.25	1	1	1			NBC	Road
3	Ward 3		1,613	2,537				2442	523	1321	1321		3	3	3	0	0		

		Tamat/Wasara Settlement	699	621	Lorengau Hos2		27.09.25	750	200	381	381	09.10.25	1	1	1			NBC	Road
		Tamat DPI Station	688	577	Lorengau Hos2		27.09.25	540	91	282	282	09.10.25	1	1	1			NBC	Road
		Tamat Squatters	225	1,340	Lorengau Hos2		27.09.25	1152	232	658	658	09.10.25	1	1	1			NBC	Road
4	Ward 4		1,800	1,077				1094	210	536	536		3	3	3	0	0		
		Schwansee Drive	609	365	Lorengau Hos2		27.09.25	442	91	215	215	09.10.25	1	1	1			NBC	Road
		Kawas Street	486	354	Lorengau Hos2		27.09.25	287	60	147	147	09.10.25	1	1	1			NBC	Road
		Mauswara Settlement	704	358	Lorengau Hos2		27.09.25	365	59	174	174	09.10.25	1	1	1			NBC	Road
5	Ward 5		644	1,378				1709	371	840	840		2	2	2	0	0		
		Harbourside	145	695	Lorengau Hos2		27.09.25	1123	240	542	542	10.10.25	1	1	1			NBC	Road
		Garden Tingou Settlement	499	683	Lorengau Hos2		27.09.25	586	131	298	298	10.10.25	1	1	1			NBC	Road
6	Ward 6		1,496	1,441				1512	365	826	826		3	3	3	0	0		
		Kuruti Drive	721	460	Lorengau Hos2		27.09.25	400	100	222	222	10.10.25	1	1	1			NBC	Road
		Pomat Street	409	551	Lorengau Hos2		27.09.25	650	150	345	345	10.10.25	1	1	1			NBC	Road
		Section 36/46	366	430	Lorengau Hos2		27.09.25	462	115	259	259	10.10.25	1	1	1			NBC	Road
7	Ward 7		1,801	1,949				2060	415	1201	1201		5	4	4	0	0		
		Salapan Street	434	603	Lorengau Hos2		27.09.25	575	118	349	349	10.10.25	1	1	1			NBC	Road
		Manus High School	347	193	Lorengau Hos2		27.09.25	153	31	80	80	10.10.25	1	1	1			NBC	Road
		Section 26	369	342	Lorengau Hos2		27.09.25	462	100	259	259	10.10.25	1	1	1			NBC	Road
		Kohonaleng Drive	272	0	Lorengau Hos2								1						Included Under Sec 26

		Wamudu Settlement	379	811	Lorengau Hos2		27.09.25	870	166	513	513	10.10.25	1	1	1			NBC	Road
				0									0						
LOS NEGROS			5,355	4,879				4,968	1,083	2,607	2,607		16	13	13	294	6	2	
1		LONIU	723	552				617	161	359	359		1	1	1	0	0		
		Loniu	723	552	Lorengau Hos3		28.09.25	617	161	359	359	06.10.25	1	1	1				Road
2		LOLAK	200	221				240	50	118	118		1	1	1	38	0		
		Lolak	200	221	Lorengau Hos3		29.09.25	240	50	118	118	06.10.25	1	1	1	38	0		Road
3		LOMBRUM	190	0				0	0	0	0		1	1	1	0	0		
		Lombrum	190	0	Lorengau Hos3								1	1	1				Road
4		PAPITALAI	344	413				838	212	447	447		3	3	3	0	0		
		Pipitalai	234	262	Lorengau Hos3		29.09.25	261	58	148	148	05.10.25	1	1	1				Road
		North Point		NEW	Lorengau Hos3		28.09.25	439	124	221	221	05.10.25	1	1	1				
		Pipitalai Cath Mission	110	151	Lorengau Hos3		28.09.25	138	30	78	78	05.10.25	1	1	1				Road
5		NARINGEL	416	468				569	121	309	309		1	1	1	96	2		
		Naringel	416	468	Lorengau Hos3		27.09.25	569	121	309	309	06.10.25	1	1	1	96	2		Road
6		RIURIU	297	386				383	74	205	205		2	2	2	29	1		
		Riwiriu	229	284	Lorengau Hos3		28.09.25	383	74	205	205	06.10.25	1	1	1	29	1		Road
		Momote CAA	68	102	Lorengau Hos3						0	06.10.25	1	1	1				Road
7		SALAMEI RESETTL	591	856				898	204	439	439		1	1	1	0	0		
		Salamei Resettlement	591	856	Lorengau Hos3		28.09.25	898	204	439	439	06.10.25	1	1	1				Road
8		MOKARENG	361	420				413	85	209	209		1	1	1	0	0		
		Mokareng	361	420	Lorengau Hos3		29.09.25	413	85	209	209	06.10.25	1	1	1				Road
9		LOMBRUM N BASE	2,234	1,561				1010	176	521	521		5	2	2	131	3		

		Lombrum	252	146	Lombrum HC							1						Road
		Lombrum	444	92	Lombrum HC							1						Road
		Upper/Lower Paradise	698	570	Lombrum HC	Yes	28.09.25	742	125	404	404	03.10.25	1	1	1	86	RADIO MAN	Road
		Paradise Native Village	528	259	Lombrum HC							1						Road
		Native Village	312	495	Lombrum HC	Yes	27.09.25	268	51	117	117	03.10.25	1	1	1	45	3 DIO MAN	Road
												0						
NALI SOPAT \ PENABU			5,895	6,168				5,387	1,035	2,798	2,797		19	16	0	489	151	9
1		NDRAPITOU	412	414				374	63	176	176		1	1	0	51	31	
		Ndrapitou	412	414	Tingou HC	Yes	30.09.25	374	63	176	176	03.10.25	1	1	0	51	31	BC Manu Road
2		SOHENERIU	229	523				431	82	206	206		2	2	0	65	51	
		Soheneriu	214	254	Tingou HC	Yes	28.09.25	272	50	132	132	03.10.25	1	1	0	48	48	BC Manu Road
		Polomou Quarry	15	268	Tingou HC	Yes	28.09.25	159	32	74	74	02.10.25	1	1	0	17	3	BC Manu Road
3		KAPOU	230	270				254	51	126	125		1	1	0	38	8	
		Kapou	230	270	Tingou HC	Yes	27.09.25	254	51	126	125	03.10.25	1	1	0	38	8	BC Manu Road
4		BULIHAN	452	288				249	50	123	123		1	1	0	40	24	
		Bulihan	452	288	Tingou HC	Yes	27.09.25	249	50	123	123	03.10.25	1	1	0	40	24	BC Manu Road
5		KARUN	377	192				253	61	125	125		1	1	0	43	3	
		Karun	377	192	Tingou HC	Yes	01.10.25	253	61	125	125	07.10.25	1	1	0	43	3	BC Manu Road
6		SIRRAH	391	386				372	78	180	180		1	1	0	46	15	
		Sirrah	391	386	Tingou HC	Yes	27.09.25	372	78	180	180	03.10.25	1	1	0	46	15	BC Manu Road
7		LAWES	549	660				502	100	257	257		1	0	0	0	0	
		Lawes	549	660	Lorengau Hos4			502	100	257	257		1					Sea
8		NOHANG	225	274				206	41	109	109		1	1	0	24	0	
		Nohang	225	274	Patu HC	Yes	29.09.25	206	41	109	109	09.10.25	1	1		24	0	Sea

9	KATIN	349	456				476	94	246	246		2	1	0	3	1		
	Yiriu	109	142	Tingou HC	Yes	28.09.25	115	22	53	53	03.10.25	1	1	0	3	1	BC Manu	Road
	Wara Talai	240	314	Lorengau Hos4			361	72	193	193		1						Sea
10	LOWAIYA	402	402				408	79	220	220		1	1	0	7	5		
	Lowaiya	402	402	Patu HC	Yes	28.09.25	408	79	220	220	09.10.25	1	1		7	5		Sea
11	LAPAP LAHAN	284	384				330	63	179	179		2	1	0	10	1		
	Lahan	132	156	Patu HC	Yes	28.09.25	126	26	64	64	09.10.25	1	1		10	1		Sea
	Lapap	152	228	Patu HC	Yes	28.09.25	204	37	115	115	09.10.25	1						Sea
12	MALEH	237	279				243	55	131	131		2	2	0	19	1		
	Maleh	237	251	Patu HC	Yes	28.09.25	221	46	117	117	09.10.25	1	1		13	0		Sea
	Maleh 2		28	Tingou HC	Yes	30.09.25	22	9	14	14	03.10.25	1	1	0	6	1	BC Manu	Road
13	MBUNAI	476	425				377	86	192	192		1	1	0	25	1		
	Mbunai	476	425	Patu HC	Yes	28.09.25	377	86	192	192	08.10.25	1	1		25	1		Sea
14	PERE 1	821	826				597	50	322	322		1	1	0	76	10		
	Pere	821	826	Patu HC	Yes	28.09.25	597	50	322	322	09.10.25	1	1		76	10		Sea
15	PATUSI	459	390				315	82	206	206		1	1	0	42	0		
	Patusi	459	390	Patu HC	Yes	28.09.25	315	82	206	206	09.10.25	1	1		42	0		Sea
												0						
TETEDU		3,724	3,660				3,439	723	1,733	1,733		14	13	0	436	107	6	
1	BUYANG	581	532				519	110	256	256		1	1	0	51	18		
	Buyang	581	532	Tingou HC2	Yes	29.09.25	519	110	256	256	04.10.25	1	1	0	51	18	BC Manu	Road
2	KWALIAP	534	573				464	100	228	228		1	1	0	32	25		
	Kwaliap	534	573	Tingou HC2	Yes	27.09.25	464	100	228	228	02.10.25	1	1	0	32	25	BC Manu	Road
3	TINGOU	668	532				586	138	284	284		2	2	0	66	48		
	Tingou 1	377	284	Tingou HC2	Yes	27.09.25	248	50	111	111	02.10.25	1	1	0	39	21	BC Manu	Road
	Tingou 2	290	248	Tingou HC2	Yes	27.09.25	338	88	173	173	02.10.25	1	1	0	27	27	BC Manu	Road
4	LONDRU	708	585				596	99	296	296		3	2	0	61	0		
	Locha	22	63	Patu HC2	Yes	27.09.25	33	6	18	18	01.10.25	1	1		5	0		Sea
	Loi	297	237	Patu HC2	Yes	27.09.25	250	48	130	130	05.10.25	1			25	0		Sea

		Londru	389	285	Patu HC2	Yes	29.09.25	313	45	148	148	04.10.25	1	1		31	0		Sea
5	PITARAIT		694	851				757	150	404	404		4	4	0	103	0		
		Matawera	336	196	Patu HC2	Yes	28.09.25	226	43	126	126	04.10.25	1	1		40	0		Sea
		Ndrapitou	234	257	Patu HC2	Yes	28.09.25	182	42	87	87	04.10.25	1	1		12	0		Sea
		Pitarait	125	263	Patu HC2	Yes	27.09.25	288	52	155	155	04.10.25	1	1		38	0		Sea
		Kisi	0	136	Patu HC2	Yes	28.09.25	61	13	36	36	01.10.25	1	1		13	0		Sea
6	TAWI		539	586				517	126	265	265		3	3	0	123	16		
		Pau	119	154	Patu HC2	Yes	28.09.25	183	36	88	88	06.10.25	1	1		50	0		Road
		Tawi	190	269	Tingou HC2	Yes	29.09.25	182	50	98	98	02.10.25	1	1	0	47	8	BC Manu	Road
		Undra u'u	230	163	Tingou HC2	Yes	29.09.25	152	40	79	79	02.10.25	1	1	0	26	8	BC Manu	Road
													0						
POBUMA			7,781	7,008				7,627	1,493	3,758	3,689		21	20	0	105	1	17	
1	MBUKE \ WHAL		863	727				743	160	473	475		2	2	0	0	0		
		M'buke	678	532	Pelipowai HC	Yes	28.09.25	566	110	373	373	06.10.25	1	1	0	0		NBC	Sea
		Whal	185	195	Pelipowai HC	Yes	28.09.25	177	50	100	102	06.10.25	1	1	0	0		NBC	Sea
2	BUNDRAHEI \ SAPONDREL		1,474	1,184				1499	234	712	526		5	4	0	0	0		
		Bunrahei	1,007	584	Pelipowai HC	Yes	26.09.25	975	119	458	271	05.10.25	1	1	0	0		NBC	Sea
		Sapondrel	265	232	Pelipowai HC	Yes	26.09.25	344	50	159	159	05.10.25	1	1	0	0		NBC	Sea
		N'draukei Base Camp	22	85	Pelipowai HC								1						Included Under Sapondrel
		Ndrumundrum	147	246	Pelipowai HC	Yes	26.09.25	128	50	64	64	06.10.25	1	1	0	0		NBC	Sea
		Bundrahei High School	33	36	Pelipowai HC	Yes	26.09.25	52	15	31	32	06.10.25	1	1	0	0		NBC	Sea
3	LIKUM		983	826				921	170	460	460		2	2	0	0	0		
		Likum	895	702	Pelipowai HC	Yes	25.09.25	811	135	395	395	07.10.25	1	1	0	0		NBC	Sea
		Wamarai	88	123	Pelipowai HC	Yes	25.09.25	110	35	65	65	07.10.25	1	1	0	0		NBC	Sea

4	BABUN	841	668				670	135	324	324		1	1	0	0	0		
	Kabuli	841	668	Pelipowai HC	Yes	25.09.25	670	135	324	324	05.10.25	1	1	0	0		NBC	Sea
5	BUTJOU	1,159	1,311				1274	312	573	586		2	2	0	0	0		
	Butjou	1,030	1,098	Pelipowai HC	Yes	24.09.25	1074	220	483	494	07.10.25	1	1	0	0		NBC	Sea
	Metepong	129	213	Pelipowai HC	Yes	24.09.25	200	92	90	92	04.10.25	1	1	0	0		NBC	Sea
6	TIMOENAI	886	827				1093	190	545	574		4	4	0	0	0		
	Kupoanou	149	133	Pelipowai HC	Yes	25.09.25	125	25	60	61	04.10.25	1	1	0	0		NBC	Sea
	Timoenai	738	522	Pelipowai HC	Yes	25.09.25	737	120	363	391	04.10.25	1	1	0	0		NBC	Sea
	Johnson Island	0	99	Pelipowai HC	Yes	27.09.25	100	20	54	54	30.09.25	1	1	0	0		NBC	Sea
	Tawai Island	0	73	Pelipowai HC	Yes	29.09.25	131	25	68	68	30.09.25	1	1	0	0		NBC	Sea
7	POHOWAI \ DEYAH	706	770				722	144	304	377		2	2	0	0	0		
	Pelipowai	618	452	Pelipowai HC	Yes	24.09.25	372	94	206	208	07.10.25	1	1	0	0		NBC	Sea
	Pelipowai Gov't Station	88	212	Pelipowai HC	Yes	24.09.25	350	50	98	169	07.10.25	1	1	0	0		NBC	Sea
	Tohol Logging Camp		105	Pelipowai HC														Closed
8	JEKAL	324	267				283	52	144	144		1	1	0	40	1		
	Cekal	324	267	Patu HC3	Yes	29.09.25	283	52	144	144	07.10.25	1	1		40	1		Sea/Foot
9	PELI PATU	544	428				422	96	223	223		2	2	0	65	0		
	Peli Patu	424	358	Patu HC3	Yes	29.09.25	211	54	112	112	07.10.25	1	1		31			Sea
	Patu Cath Mission	120	70	Patu HC3	Yes	27.09.25	211	42	111	111	08.10.25	1	1		34			Sea
												0						
BALOPA		4,374	3,312				2,894	599	1,498	1,500		16	15	0	375	130	15	
1	MOUK	386	319				234	50	120	120		1	1	0	38	6		
	Mouk	386	319	Lago HC	Yes	24.09.25	234	50	120	120	30.09.25	1	1	0	38	6	, Radio	Sea
2	LIPAN	656	297				457	94	232	232		1	1	0	34	5		
	Lipan	656	297	Lago HC	No	24.09.25	457	94	232	232	30.09.25	1	1	0	34	5	, Radio	Sea

3	SONE		611	403				313	63	154	154		2	2	0	24	6		
		Manuai	234	169	Lago HC	Yes	24.09.25	121	25	63	63	30.09.25	1	1	0	13	2	, Radio	Sea
		Sone	377	234	Lago HC	Yes	24.09.25	192	38	91	91	30.09.25	1	1	0	11	4	, Radio	Sea
4	PARIOI		791	754				565	118	290	290		4	4	0	41	18		
		Parioi	337	180	Lago HC	Yes	24.09.25	140	29	72	72	30.09.25	1	1	0	18	11	, Radio	Sea
		Perelik	214	158	Lago HC	Yes	24.09.25	122	32	68	68	30.09.25	1	1	0	8	1	, Radio	Sea
		Pumbanin	240	321	Lago HC	No	24.09.25	227	38	110	110	30.09.25	1	1	0	9	6	, Radio	Sea
		Camp		95	Lago HC	No	24.09.25	76	19	40	40	30.09.25	1	1	0	6	0	, Radio	Sea
5	BUIAT		361	181				162	43	99	99		2	2	0	28	0		
		Buiat	169	112	Lago HC	No	24.09.25	102	25	59	59	30.09.25	1	1	0	23	0	, Radio	Sea
		Ngamboai	192	69	Lago HC	No	24.09.25	60	18	40	40	30.09.25	1	1	0	5	0	, Radio	Sea
6	BAON		302	252				195	41	104	104		1	1	0	35	4		
		Baon	302	252	Lago HC	No	24.09.25	195	41	104	104	30.09.25	1	1	0	35	4	, Radio	Sea
7	SOLANG		377	327		Yes		302	64	163	163		1	1	0	54	9		
		Solang	377	327	Lago HC	Yes	24.09.25	302	64	163	163	30.09.25	1	1	0	54	9	, Radio	Sea
8	REI		676	561				457	78	227	227		1	1	0	78	75		
		Rei	676	561	Lago HC	Yes	24.09.25	457	78	227	227	30.09.25	1	1	0	78	75	, Radio	Sea
9	LAKO		214	218				209	48	109	111		3	2	0	43	7		
		Lago	165	218	Lago HC	Yes	24.09.25	167	37	86	88	30.09.25	1	1	0	32	5	, Radio	Sea
		Pisik SDA Mission	18	0	Lago HC	Yes	24.09.25	42	11	23	23	30.09.25	1	1	0	11	2	, Radio	Sea
		Lago Health Centre	30	0	Lago HC								1						Included Under Piksa SDA Mission
RAPATONA			5,611	4,811				4,515	988	2,400	2,400		21	18	0	412	30	9	412
1	MOKARAH		477	334				266	57	148	148		2	2	0	35	6		
		Mokarah	212	220	Paniselu HC	Yes	25.09.25	163	37	89	89	03.10.25	1	1	0	19	2	NBC	Sea
		Mulireu	265	114	Paniselu HC	Yes	25.09.25	103	20	59	59	03.10.25	1	1	0	16	4	NBC	Sea
2	HAHAI		676	535				530	112	283	283		3	3	0	64	2		

		Hahai	419	153	Paniselu HC	Yes	25.09.25	160	35	87	87	03.10.25	1	1	0	23	0	NBC	Sea
		Hahai 2		198	Paniselu HC	Yes	25.09.25	195	39	103	103	03.10.25	1	1	0	23	0	NBC	Sea
		Tandual	257	184	Paniselu HC	Yes	25.09.25	175	38	93	93	03.10.25	1	1	0	18	2	NBC	Sea
3	TONG		295	181				169	36	91	91		1	1	0	21	0		
		Tong	295	181	Paniselu HC	Yes	29.09.25	169	36	91	91	30.09.25	1	1	0	21	0	NBC	Sea
4	NAUNA		601	614				594	198	309	309		1	0	0	0	0		
		Nauna	601	614	Paniselu HC	Yes	29.09.25	594	198	309	309	30.09.25	1	0	0	0	0		Sea
5	POLOBULI		905	817				738	150	398	398		4	4	0	75	2		
		Liuliu	339	360	Paniselu HC	Yes	24.09.25	327	66	175	175	27.09.25	1	1	0	16	0		Sea
		Loamat	104	109	Paniselu HC	Yes	24.09.25	94	19	51	51	27.09.25	1	1	0	17	0	NBC	Sea
		Popeu	234	214	Paniselu HC	Yes	24.09.25	197	38	103	103	27.09.25	1	1	0	17	1	NBC	Sea
		Bundrou	229	135	Paniselu HC	Yes	24.09.25	120	27	69	69	27.09.25	1	1	0	25	1	NBC	Sea
6	KULUO		921	743				776	152	398	398		3	2	0	83	13		
		Kuluo	387	325	Paniselu HC	Yes	26.09.25	336	64	174	174	02.10.25	1	1	0	37	2		Sea
		Paniselu	499	386	Paniselu HC	Yes	26.09.25	440	88	224	224	02.10.25	1	1	0	46	11		Sea
		Kup LLG Station	35	32	Paniselu HC								1						Included Under Paniselu
7	PENCHAL		686	652				597	121	315	315		4	4	0	64	3		
		Penchal	614	0	Paniselu HC	Yes	26.09.25	208	39	109	109	02.10.25	1	1	0	35	0		Sea
		Pusu	72	109	Paniselu HC	yes	26.09.25	93	18	50	50	02.10.25	1	1	0	13	0		Sea
		Lengot	0	202	Paniselu HC														Non Existant
		Tabulul	0	113	Paniselu HC	Yes	26.09.25	159	38	82	82	02.10.25	1	1	0	8	2		Sea

		Chalevi	0	62	Paniselu HC													Non Existant
		Pusu	0	0	Paniselu HC													Non Existant
		Pulendran	0	167	Paniselu HC	Yes	26.09.25	137	26	74	74	02.10.25	1	1	0	8	1	Sea
8	LENKAU		501	537				470	86	254	254		1	1	0	36	2	
		Lenkau	501	537	Paniselu HC	Yes	24.09.25	470	86	254	254	28.09.10	1	1	0	36	2	Sea
9	MOUKLEN		548	396				375	76	204	204		2	1	0	34	2	
		Mouklen	494	350	Paniselu HC	Yes	24.09.25	375	76	204	204	28.09.25	1	1	0	34	2	Sea
		Tilienu	53	46	Paniselu HC							1						Included Under Mouklan

