



World Health Organization

Indonesia

Situation Report # 10

Date of issue: 26 October 2018

Location: Central Sulawesi, Indonesia

Emergency type: **Earthquake and Tsunami**

Date of onset: 28 September 2018



616 684
Affected



222 986 displaced
population



4 612
severely
injured



2105
fatalities



45 health
facilities
affected

KEY HIGHLIGHTS

- The Government of Indonesia has ended emergency response period on 26 October 2018 and currently enter the emergency transition period.
- Forty five healthcare facilities are affected, with nine health facilities severely damaged
- During period 4-23 October 2018, reported from Palu, Donggala and Sigi, most cases are Acute respiratory infection (ARI), diarrhea, skin diseases, hypertension, diabetes and injury.
- Seven dedicated tents providing emergency reproductive health care have been established and are operational, providing ante- and post- natal care, emergency obstetric services, Antiretroviral (ARV) treatment for HIV positive people, and dedicated services for young people.
- During 16-24 October 2018, 3 412 children aged between 9 months to 15 years have been vaccinated against measles and rubella under MR campaign in Donggala (758), Palu (2 371) and Sigi (283).
- WHO facilitates procurement of insecticides, mist-blowers, fogging machines, larvacide, mosquitoes repellents for vector control requested by MoH.
- WHO produced a situation analysis for Central Sulawesi earthquake. The document is available here: <http://www.searo.who.int/mediacentre/emergencies/sulawesi-earthquake/en/>

SITUATION OVERVIEW

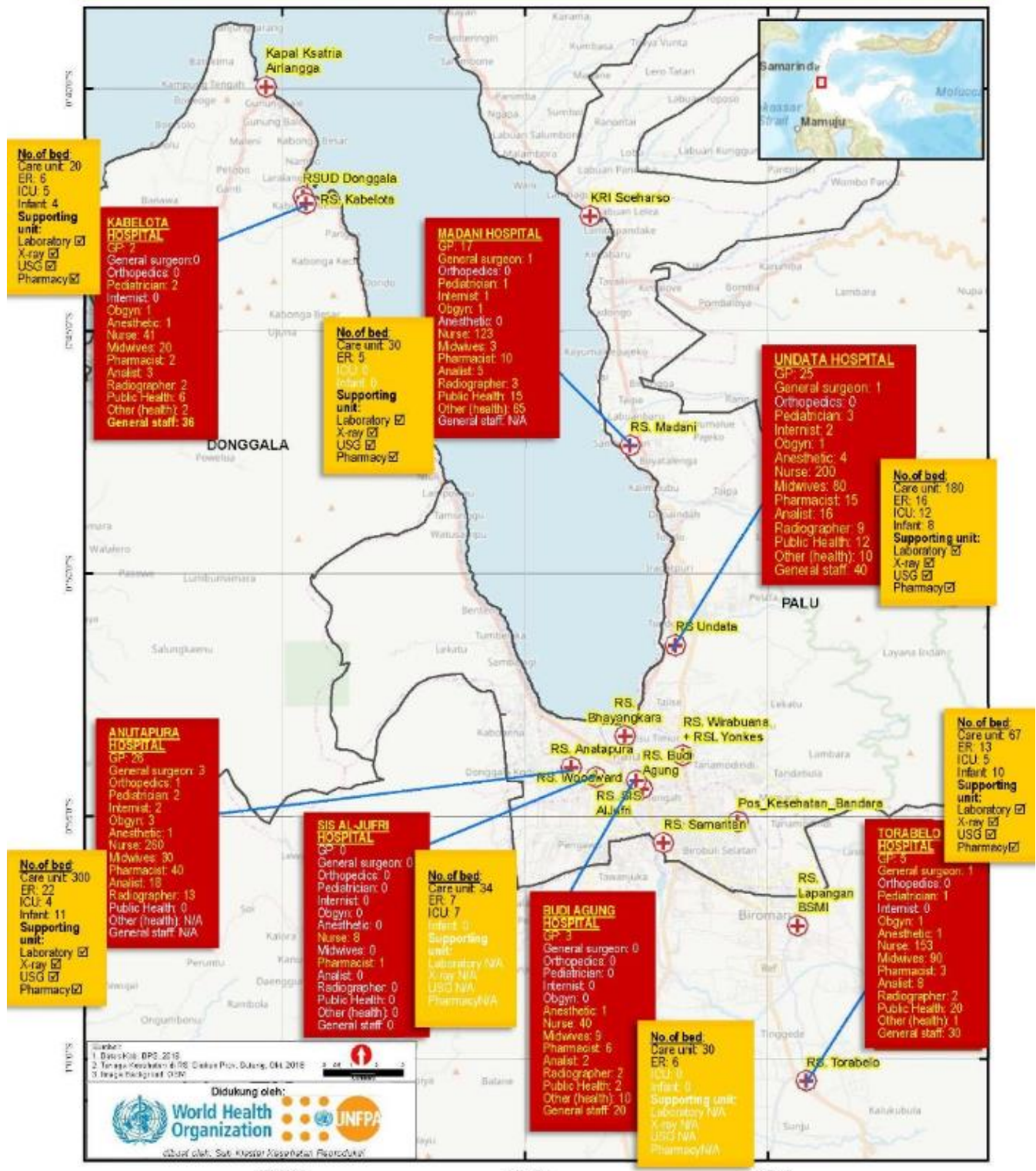
- A 7.7 magnitude earthquake and its aftershocks, tsunami, and subsequent liquefaction and landslides have severely affected Donggala, Palu municipality, Sigi and Parigi Mountong Central Sulawesi. Electricity, communication and accessibility have improved.
- To date, 2 105 deaths, 4612 severely injured and 680 missing persons are recorded. There are currently 222 986 displaced people and 68,451 houses damaged reported.
- Forty five healthcare facilities are affected, with nine health facilities severely damaged.
- Up to date, MoH, PHO in collaboration with health polytechnic, public health laboratory (BTKL Makasar) and water supply company (PDAM) have conducted around 50 water qualities testing from IDP camps and hospitals. The water quality testing is still ongoing.

SITUATION OF HOSPITAL CAPACITY IN PALU CITY, DONGGALA and SIGI DISTRICT, CENTRAL SULAWESI PROVINCE



KEMENTERIAN
KESEHATAN
REPUBLIK
INDONESIA

Bencana Gempabumi 7.4 Mag dan Tsunami, Update: 19 Okt 2018



Source : Ministry of Health RI

PUBLIC HEALTH CONCERNS

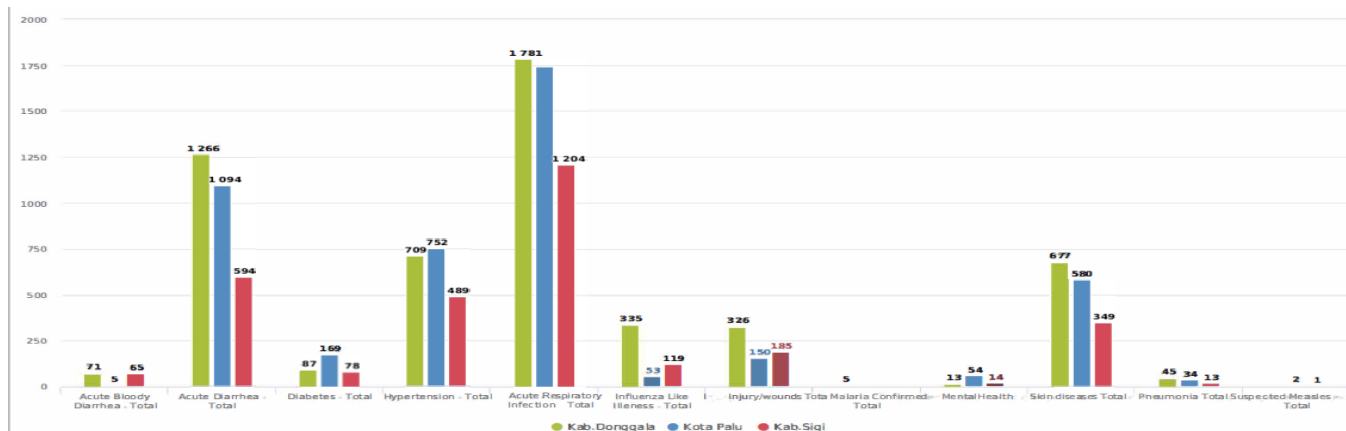
- There is an increased risk of communicable diseases among displaced people living in IDP camps. Increased numbers of diarrhea cases and acute respiratory infection cases have been observed.
- Improper waste management, limited water sanitation and untested water quality for water sources at IDP camps and of contaminate river as water sources for bath, toothbrush and other use increase risks to health. Common risks due to waste hazards include chemical, biological, physical and local environmental risks. These include skin diseases, diarrhea and vector borne diseases (such as diseases caused by flies, rat, and mosquito's vector).
- The incoming rainy seasons will increase the risk of flooding and vector-borne diseases such as dengue.
- Water quality testing results at 27 sites indicated that the water quality is not meeting qualified drinking water standard.

RESPONSE

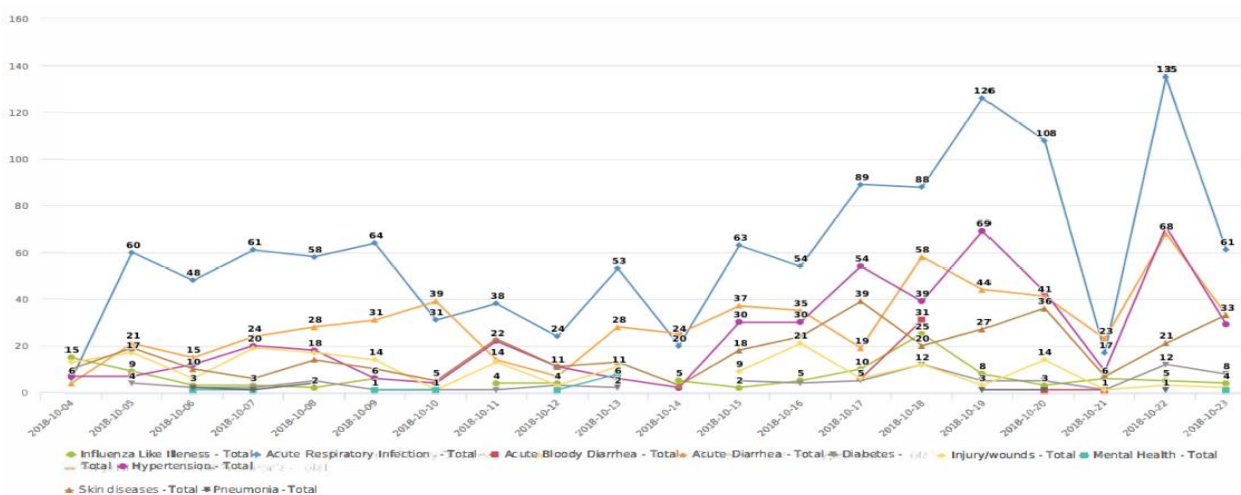
EPIDEMIOLOGICAL SUMMARY

- Early Warning Alert and Response System (EWARS) surveillance reporting has improved compared to the initial days of the emergency response. 15 PHCs from Palu, 11 PHCs in Donggala and 12 PHCs in Sigi reported EWARS. However, the completeness and timeliness of EWARS remain low. Mandatory reported diseases post disaster include acute bloody diarrhea, acute diarrhea, acute respiratory infection, influenza like illness, malaria confirmation, skin diseases, pneumonia, suspected measles, Non communicable diseases include injury, hypertension, diabetes and mental health.

Diseases report from Palu, Sigi dan Donggala for period 4-23 October 2018



Diseases Trend reporting from Palu, Sigi dan Donggala for period 4-23 October 2018



- During period 4-23 October 2018, most cases reported are acute respiratory infection (ARI) and diarrhea, including acute bloody diarrhea (4.5% of all diarrhea cases reported), followed by skin diseases, influenza like illness (ILI). Donggala and Palu reported most ARI and diarrhea cases compared with Sigi. Malaria confirmed cases were reported from Donggala.
- Field investigation for three suspect measles concluded no additional cases found and all patient conditions are improved.
- Field Epidemiology Training Programme (FETP) students are mobilized to support surveillance officers for field investigation of increasing cases of diarrhea.

HEALTH OPERATIONS AND LOGISTICS

- Most of the health services system in Palu, Donggala and Sigi are operational, moreover, the direction from the central government is to strengthen the primary health care facilities. Emergency Medical Team (EMTs) need to attach with the PHC (primary health care centers) and DHO with PHC coordinate the EMT type-1 mobile to extend the outreach of health services to IDP camps.
- Ten Emergency Medical Teams (EMTs) from Muhammadiyah Medical Centre (MDMCs) are operational at ten locations. Direct Relief is supporting the MDMC for medical outreach throughout the affected area.
- Direct Relief is also supporting Bumi Sehat foundation, which has a maternal and child health-focused medical team currently providing medical outreach in underserved areas.
- Indonesia Plan International (YPII) continues its distribution of shelter kits and hygiene kits to the affected people. By 21 October 2018, a total of 1 200 hygiene kits and shelter kits were distributed in Palu city and Sigi. YPII is in process of shipping a further of 400 shelter kits and 1 500 hygiene kits from Jakarta to Central Sulawesi for further distribution.
- Indonesian Red Cross (PMI) supported by IFRC built a Field Clinic next to Tompei PHC in Donggala, PMI continues to conduct Psychosocial Support Program (PSP) services to victims of earthquakes in several earthquake and tsunami affected areas in Central Sulawesi.
- Academic Health System (AHS) University of Gadjah Mada (UGM) supported by Caritas Germany supported Provincial Health Office in establishing medical team database and to recap their daily report sent through a dedicated-whatsapp group. AHS UGM also supported revitalizing two primary health center in Sigi (Marawola PHC and Tinggede PHC).
- The list of organizations contributing to emergency response in health sectors in Central Sulawesi earthquake is attached.

Mental Health

- Eleven personnel working in mental health are on the ground to provide mental and psychological support.
- MoH, PHO in collaboration with partners conducted recreational activity in Tondo for 23 children (Under 5, 6-12, 13-17) and there were no cases of psychopathology in those children found. However there is a need of child and adolescence psychiatrists for the next deployment.
- Crisis Center University of Indonesia conducted psychological first aid (PFA) training for 30 volunteers.
- Eight mental health and psychosocial support center (MPHSS) will be established. These include MPHSS centers at Petobo Pondok Ceria, Lapangan bola kawatuna, Unismu, Dinsos Prov Sulteng which are already established and the establishment of additional MPHSS centres are underway at Pasar Ranggolalo Sigi, Mpanao Balaroa, Masjid Agung, Donggala desa Tatari.
- Self-reporting questionnaire (SRQ) in Tondo, Mesjid Agung and Balaroa posts found 21 cases of Post Traumatic Stress Disorder (PTSD) and psychotic, 26 cases of psychotic, 47 cases of PTSD cases.
- Psychosocial support sessions for health providers and health office staff were conducted by Pulih foundation. Eight hundred and eight people have been provided with psychosocial support.
- Mental health and psychosocial support (MPHSS) sub cluster continues working with local radio to broadcast the psychological education and inform the MPHSS posts to those in need.

Environmental Health

- WHO supported MoH to develop and disseminate technical guidelines for emergency treatment of drinking water at the point of use, technical guidelines for the disinfection of water tanks and technical guidelines for waste management in emergencies.
- The responsible health and environmental units have been actively working together with volunteers to conduct surveillance and vector control. This includes fogging.
- MoH, PHO, supported by UNICEF conducted trainings on sanitation for NGOs working in the field.
- WHO continues to promote water quality testing for water sources in IDPs and waste management and risk communication on personal hygiene, sanitation, waste management, boiling water and not to contaminate water through open defecation at riversides. The use of portable toilets at IDP camps is also being promoted.
- Up to date, MoH, PHO in collaboration with health polytechnic, public health laboratory (BTKL Makasar) and water supply company (PDAM) have conducted around 50 water quality testing at IDP camps and hospitals. The water quality testing is still ongoing.
- The provincial government has provided 37 garbage trucks to dispose waste from IDPs, hospitals and housing complexes to landfill area. However, waste management is not yet at an optimal level.

Diseases surveillance and vector control

- Field Epidemiology Training Programme (FETP) students continue to support surveillance at primary health centers and conduct field investigation, data collection, data analysis and monitoring diseases trend.
- PHO has conducted vector control at high risk areas as priority. However, due to limited equipment and personnel, vector control is not yet optimal.
- UNICEF malaria unit in collaboration with WHO continues supporting MoH and Central Sulawesi PHO on vector borne diseases (especially malaria) and the distribution of Long Lasting Insecticide Treated Nets (LLITN).

Reproductive health

- Seven dedicated tents providing emergency reproductive health care have been established and are operational, providing ante- and post- natal care, emergency obstetric services, ARV treatment for HIV positive people, and dedicated services for young people. One additional reproductive health (RH) tent is going to be established. (Established: 1. Donggala Kodi - Palu City; 2. Mesjid Agung - Palu City 3. Wombo Kalonggo -Donggala District; 4 Beka - Sigi District; 5. Pandere Health Center- Sigi District; 6. Petobo - Palu City; 7. Toaya - Sigi District). An eighth RH tent is going to be established in Batu Suya – Donggal.
- Indonesia AIDS coalition continues assessments, outreach, psychosocial support and ARV for people living with HIV in Palu, Sigi and Donggala.
- RH sub cluster partner Americare is providing equipment for RH tents, which provide emergency services.
- UNFPA deliver ongoing provision of basic SRH services in affected areas through deployment of health personnel including 43 midwives.
- UNFPA provided 480 individual kits to pregnant women, 170 new born baby kits, 240 post delivery kits, 70 maternity kits.

Immunization

- WHO supported MoH and PHO to continue Measles-Rubella (MR) campaign in three affected districts with additional focus on the IDP camps. During 16-24 October 2018, 3 412 children aged between 9 months to 15 years have been vaccinated against measles and rubella under MR campaign in Donggala (758), Palu (2 371) and Sigi (283).



Water quality testing at Dompu Donggala.
Photo credit : Rosarianti



Stress Management as part of psychological education through local radio.
Photo : Crisis Centre University of Indonesia

COORDINATION

- The Government of Indonesia has ended the emergency response period on 26 October 2018 and is currently entering the emergency transition period.
- Routine national health cluster meetings are being conducted at the Center for Health Crisis and are co-lead by WHO. These are providing and bridging information regarding findings and needs from the field and strategies from each technical units as sub-cluster leads.
- Sub-national meeting were led by MoH and PHO of Central Sulawesi in Palu. Participants from different sectors included the Ministry of Social Affair (MoSA), National Disaster Agency, Health (reproductive health, Water sanitation), NGOs, Academician, Professional Organization and UN.

GAPS AND CHALLENGES

- Key needs include medical waste management, water quality testing, vaccine stockpiles for routine immunization, provision of media transport for stool specimen, medical resources to support public health and restoring health programmes, including psychosocial support, water and sanitation as well as vector control.
- Linking HIV positive people with ARV treatment has been a challenge; only 24 people have been linked with treatment in Palu so far.
- Health promotion personnel are limited. Risk communication and Education Information Communication (EIC) materials for IDPs still need to improve addressing personal hygiene, avoid open defecation and contamination of river, waste management, boiling water for drinking water.
- Limited pharmaceutical staff for managing drugs.
- National vaccine-preventable programme (EPI) which was disrupted during the emergency should be restored at the earliest time to prevent transmission of diseases (such as measles, rubella, polio and mumps etc.) in children.
- There is a need to sustain psychological and mental health support so as to adequately address the needs of people with stressful and post event traumatic experiences.

- To ensure maternal health and delivery, there is a need to deploy midwives in affected areas to monitor, provide support and ensure maternal and neonatal (newborn) health are met. This is essential to prevent child and mother mortality as primary healthcare is disrupted.
- As maternal and reproductive health care services are already in place, proper information on the referral health facilities should be disseminated especially in the evacuation sites. Breastfeeding, due to concerns to accessing clean water, and maternal and child related immunizations should be advocated.
- On the management of medical waste, proper disposal of medical waste would require Personal Protective Equipment (PPE), placing waste in properly labelled drums, bins or other container before loading onto trucks for haulage and eventually disposal at sanitary landfill under controlled management.
- Continue to ensure water quality testing and water treatment to meet standard of drinking water and optimal waste management is essential.

HEALTH CLUSTER AND WHO RESPONSE

- WHO personnel are continuously supporting health cluster coordination and response. A field coordinator and MR campaign personnel are on-ground to support coordination for response. These include EMTs coordination, health response mapping, health facility mapping, surveillance, risk assessment, water and sanitation situation, mental health and immunization. WHO HIV personnel and vector control will support restoring programme in affected area.
- WHO is coordinating with environmental unit of MoH, province health office, UNICEF focal point in the field to improve water treatment and testing especially in Donggla and Sigi districts. Also WHO is collaborating with diarrhoea program manager of MoH and province health office to ensure laboratory diagnosis on cause of diarrheal diseases.
- WHO facilitates procurement for vector control requested from MoH. These include 2 278 kg flies insecticides, 50 units Mist-blower, 50 units fogging machines, 5 000 liters of mosquitos' insecticide, 3 000 kg larvacide and 3 000 Liters Larvacide, 2 million sachet of repellents.
- Health partners continue to support the response in the field. These include EMTs, water sanitation, ARV, reproductive health, support for disability, risk communication and immunization including MR campaign.

FUNDING

- UN Central Emergency reserve funds (CERF) has been approved. WHO developed the response plan to implement USD 0.9 million to support the health cluster response.

CONTACTS

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Reference:

- AHA Center Situation Update No 13 <https://ahacentre.org/situation-update/situation-update-no-13-sulawesi-earthquake-19-october-2018/>
- OCHA Situation report No 5, 19 October 2018
- Crisis Centre MoH update as of 15th October 2018
- BNPB update as of 12th October 2018
- MoH Indonesia Website <http://sehatnegeriku.kemkes.go.id/baca/rilis-media/20181016/4328316/kemenkes-lakukan-desinfeksi-3-kabupaten-terdampak-bencana/>

ANNEX : List organization which contributed to emergency response in health sectors in Central Sulawesi earthquake is attached.

1	119 Dinkes Prov. Sulteng	52	Emergency Medical Team RSCM	103	Klinik KRP	153	PPNI Prov. Gorontalo	202	RS. Haji Makassar	247	tim AMDA Indonesia
2	119 Tojo Una-Una	53	ESDM	104	KNPI Sulsel	154	PPNI Sulbar	203	RS. Hasan Sadikin Bandung	248	Tim Bencana Provinsi Papua
3	ACT	54	ESDM SKIK MIGAS	105	KPC	155	PPNI Wilayah Sulsel		RS. Hikma Masamba	249	TIM KES POLDA SULTRA
4	AGD Jakarta pusat	55	Fakultas Kedokteran UII	106	Kun Humanity System	156	Pramuka Peduli	204	RS. Islam Faisal		Tim Kesehatan Mata Makassar
5	Askrindo & FK UMI	56	Fasyanka & BPF K Makassar	107	Layanan Kesehatan Rumah Zakat	157	PRC-FH UH	205	RS. Kanujoso	250	Djatiwibowo Balikpapan
6	Badan Litbangkes Jakarta	57	FETP INDONESIA	108	Laznas BSM	158	Project Hope	206	RS. Pei Cikini	251	Tim Kesehatan Poltekkes Makassar
7	badan rescue nasdem (BRND)	58	FETP UI	109	LKMI HMI Cab. Makassar	160	Prov. Sulbar	208	RSA Nusa Waluya II	252	Tim Kesehatan Rumah Zakat
8	Bekomas LKMI PB HMI basernas	59	FETP UNAIR	110	LKMI PR-HMI	161	Provinsi Jawa Barat (tim relawan)	209	RSBT. PT. Timah RSCM	210	Tim MDS Perkantoran
9	Baznas Parigi Moutong	60	FETP UNHAS	111	MAPAN BUMI	162	PSC 119 Gowa	211	RSP Universitas Mataram	254	Tim medis PT. Olam Indonesia
10	BK	61	FETP UNUD	112	Masyarakat Peduli Indonesia	163	Ners Unhas	212	RSU Moh. Noer Paud	255	Tim Pokja Bencana AHS UGM & Caritas Germany
11	BNPB	63	FK UMI	113	MDMC (Muhammadiyah Disaster Management Center)	164	PT Adaro Group	213	RSU. Karsa Husada Batu	256	Tim Spesialis Laznas BSM
12	BP Tangguh	64	FK UNPAD (AMP dan IKA UNPAD)		MDMC- FKIK Univ. Muhammadiyah Yogya	166	PT Bayan Resource & KPP	214	RSUD Labuang Baji	257	Tim surveilans Makassar
13	BPBD + RES BABEL	65	FK UNS-RSUD Moewardi-SAR UNS	114	FK-KMK UGM	115	PT Bio Farna	217	RSUD Manokwari	258	Tim TGC BTKLPP KLS I
14	BPBD Bangka Belitung	66	FKUI	116	FPTI Prov Sulteng Golden Future	117	PT Donggi Senoro	218	RSUD Propong	259	UI Peduli
15	BSMI Jakarta Raya	67	Federation HIPGABI Bencana Indonesia Prov. Sumatera Utara	118	HIPGABI Sulawesi Selatan	119	PT Freoport Indonesia	219	RSUP DR. Kariadi Semarang	260	UI Peduli Donggala (tim medis)
16	BSMI Sulawesi Selatan	68	Hope Worldwide Indonesia	120	Humanity Indusion	121	PT Indonesia Morowali Industriak Park	220	RSUP. Prof. DR. Kandau Manado	261	UNAIR (RS Terapung Satria Erlangga)
17	BTKLPP Kelas I Manado	69	HSE Indonesia	122	IBI Pusat	123	PT MSM	221	rumah sakit pgi cikini	262	UNFPA
18	Bulan Sabit Merah Indonesia (BSMI)	71	Humanity Indusion	123	IBI Sulsel	124	PT Vale	222	Rumah Sehat Baznas	263	UNICEF
19	City Harvest Curch	72	IBI Yogyakarta	125	IBI Sulsel	126	PTPN III (BUMN)	223	Rumah Zakat	264	Universitas Andalas Padang
20	Clester Kesehatan NU Peduli	73	IBI Kota Mataram	126	IBI Sulsel	127	Pusat Krisis Fakultas Psikologi UI	224	Santa Maria Gereja Katolik	265	Universitas Haluoleo (tim medis)
21	CBS	74	IBI Sulsel	127	IBI Sulsel	128	Reach Out World Wide	225	Sat Birimb Polda Banten	266	Univrsitas Veteran Jakarta
22	DBTI Solidaritas Dinas Pemkot Gorontalo	75	IBI Sulsel	128	IBI Sulsel	129	Relawan Bangkep relawan elektromedis indonesia	227	Sat Gas Bencana PP IDAI	267	UPN Veteran Jawa Timur
23	Dinkes Bandar Lampung	76	IBI Sulsel	129	IBI Sulsel	130	Relawan Gemma 16	228	SATGAS AMBON FER PALU	268	Wahda Islamic
24	Dinkes Banggai Kepulauan	77	IBI Sulsel	130	IBI Sulsel	131	Relawan Indonesia Mandiri (RIM)	229	Sedekah harian	270	wahda peduli
25	Dinkes Banggai Laut	78	IBI Sulsel	131	IBI Sulsel	132	Relawan Nuruil Hayat Surabaya	230	Sedekah Rombongan	271	WHO Indonesia
26	Dinkes Boalemo/RSTN	80	IBI Sulsel	132	IBI Sulsel	133	Relawan Posko Induk Kesehatan	231	SKK Migas/KKS Solidaritas Indonesia		Yayasan Amal Kebangsaan Indonesia Makassar
27	Dinkes Bolsel	81	IBI Sulsel	133	IBI Sulsel	134	Relawan Posko Induk Kesehatan	232	SLANK Friends JKT	272	yayasan anugerah pressindo
28	Dinkes Buol	82	IBI Sulsel	134	IBI Sulsel	135	Relawan Posko Induk Kesehatan	233	SS-PSC 119 Dinkes Boyolali	273	Yayasan Karya Alpha Omega
29	Dinkes Kab. Sangihe	83	IBI Sulsel	135	IBI Sulsel	136	Relawan Posko Induk Kesehatan	234	Sultan Agung	274	Yayasan Let's Share
30	Dinkes Kab. Probolinggo	84	IBI Sulsel	136	IBI Sulsel	137	Relawan Posko Induk Kesehatan	235	TABE (tanggap bencana) HKBP	275	Yayasan Sheep Indonesia
31	Dinkes Kab. Trenggalek	85	IBI Sulsel	137	IBI Sulsel	138	Relawan Posko Induk Kesehatan	236	Tagana Rajawali Provinsi Maluku	276	YEU
32	Dinkes Kabupaten buol	86	IBI Sulsel	138	IBI Sulsel	139	Relawan Posko Induk Kesehatan	237	Tagana Toraja Utara Sulawesi Selatan		
33	Dinkes Kabupaten Sidoarjo	87	IBI Sulsel	139	IBI Sulsel	140	Relawan Posko Induk Kesehatan	238	TBM Artena		
34	Dinkes Kotamobagu	88	IBI Sulsel	140	IBI Sulsel	141	Relawan Posko Induk Kesehatan	239	TBM atlas Medical Pioneer UNPAD		
35	dinkes parigi moutong	89	IBI Sulsel	141	IBI Sulsel	142	Relawan Posko Induk Kesehatan	240	TBM Axis FK Untad		
36	Dinkes Sinjai	89	IBI Sulsel	142	IBI Sulsel	143	Relawan Posko Induk Kesehatan	241	TBM Bumi Gora		
37	Dinkes Sulbar	90	IBI Sulsel	143	IBI Sulsel	144	Relawan Posko Induk Kesehatan	242	TBM Calcaeus FK Unhas		
38	Dinkes Sulut (Tim Gabungan)	91	IBI Sulsel	144	IBI Sulsel	145	Relawan Posko Induk Kesehatan	243	TBM FK UNISMUH team cahaya hati		
39	Dinkes Tojo Una Una	92	IBI Sulsel	145	IBI Sulsel	146	Relawan Posko Induk Kesehatan	244	RS. 8k		
40	Dinkes Toli-toli	93	IBI Sulsel	146	IBI Sulsel	147	Relawan Posko Induk Kesehatan	245	RS. Alisabo Gorontalo		
41	Dinkes/PPNI/IDI	94	IBI Sulsel	147	IBI Sulsel	148	Relawan Posko Induk Kesehatan	246	RS. BAZNAS+PB IDI (Padang)		
42	Pohuwato Gorontalo	95	IBI Sulsel	148	IBI Sulsel	149	Relawan Posko Induk Kesehatan	247	RS. Dr. Tadjuddin Chalid Makassar		
43	DIPA Satker Dinkes Prov Gorontalo	96	IBI Sulsel	149	IBI Sulsel	150	Relawan Posko Induk Kesehatan	248	RS. Dunoce		
44	doctorshare	97	IBI Sulsel	150	IBI Sulsel	151	Relawan Posko Induk Kesehatan	249			
45	Dokpol Sultra Kendari	98	IBI Sulsel	151	IBI Sulsel	152	Relawan Posko Induk Kesehatan	250			
46	Dompot Dhuafa	99	IBI Sulsel	152	IBI Sulsel	153	Relawan Posko Induk Kesehatan	251			
47	DPW PPNi Sulbar	100	IBI Sulsel	153	IBI Sulsel	154	Relawan Posko Induk Kesehatan	252			
48	DT peduli	101	IBI Sulsel	154	IBI Sulsel	155	Relawan Posko Induk Kesehatan	253			
49	Emergency & Disaster Management UNHAS	102	IBI Sulsel	155	IBI Sulsel	156	Relawan Posko Induk Kesehatan	254			
50			IBI Sulsel	156	IBI Sulsel	157	Relawan Posko Induk Kesehatan	255			
51			IBI Sulsel	157	IBI Sulsel	158	Relawan Posko Induk Kesehatan	256			