

Emergency Situation Report

Earthquake in Nanggroe Aceh Darussalam Province, Indonesia

16 January 2005, Number 22

This report is prepared in cooperation with:
Center for Health Emergency Preparedness and Response, Ministry of Health
Emergency and Humanitarian Action, WHO, Indonesia.

Reference: Earthquake – Nanggroe Aceh Province – 16 January 2005 – Number 22

Reporting date and time

16 January 2005 (Sunday) – 16.00 Hrs local time

Type of Emergency

Earthquake followed by tsunami.

Date of emergency incidence

26 December 2004 (Sunday), 07:58 hrs and 08:48 hrs local time. (Indonesia, Western Zone: + 7 GMT),
00:58:50 Coordinated Universal Time (UTC)

Casualties

- Death toll is reaching 95,000 and the missing are 77,000 (data from Ministry of Health dated 14 January 2005)
- Admission in the hospital as in-patients is 1,651, and out patients are 6,151 (*include the number of patients admitted in Hospital in Jakarta - List is available from MOH.*)
- IDPs estimated reaching to 610,417 people. (*List of number and location is available with the MOH.*)

Follow up activities and information

Ministry of Health

- There are 565 persons of Indonesia medical team from and 376 persons of international medical team had been deployed to NAD province since 27 December 2004 – 15 January 2005
- Directorate of Community Education deployed 10 nutritionists to be based in North Aceh and Lhokseumawe district
- For malaria control, 4 doctors had been deployed each to Aceh Jaya, Banda Aceh, Lhokseumawe nad Meulaboh
- To revitalize the mental hospital and mental health care in health post and IDP's temporary shelter
- Surveillance team will set 4 sentinel location to monitor the possibility of the outbreak
- The plan for IDP's relocation:
 - Banda Aceh : 7 barracks for 10,500
 - West Aceh (Aceh Barat) : location of Kuala Bubun, Sama Tiga, MeuRebou, Lapang for 5000 IDPs
 - Aceh Jaya : Location: Calang
 - Aceh Timur : location Simpang Ulim fro 300 IDPs
 - North Aceh (Aceh Utara) : Location: Reuleut fro 2000 IPDs
 - Bireuen : Peudada, Samalang for 3000 IDPs
 - Pidie : Location: Kembang Tanjung, Keuniree fro 2500 IDPs

WHO Indonesia

- 1) Tom Grein's team continues to build a surveillance and reporting system from scratch, basically relying on our many health partners here who are in the field to report the appearance of diseases in camps and other settings where displaced people are living. The number of displaced people is around 600,000 to 700,000. No clear understanding of how many are in camps, and how many are living with host families. The feeling is still that we have not seen an outbreak, although with increased reporting we are getting a clearer picture of disease activity, with expected appearances of diarrhea, malaria and of course tetanus
- 2) Eigil Sorensen and team going to Calang on West Coast for rapid assessment of situation there. Will deliver some vaccines and traveling with MoH team which will start measles vaccination program. Also sampling for the type of diarrhea reported active in the area. Also taking rapid diagnostic test for malaria.
- 3) A six-person CDC team finished the assessment of damage in Banda Aceh. They will deliver a full report in a few days time. They found that most MoH buildings can not be reoccupied, and most likely have to be rebuilt. They also surveyed four hospitals and found varying levels of damage. Main hospital is being reclaimed from damage by an international team. The mental hospital is also reclaimable, though both have to be "mucked out" some of the hospitals can be cleaned up. The military hospital is functioning. A private Hospital, Fakina, with 70 beds is functioning and was considered the best equipped, although of limited capacity.
- 4) The Information team is working on preparing very basic public health PSAs for local radio and TV.
- 5) A WHO team going to Langsa town where there are diarrhea cases, between Meulaboh and Aceh.

Contact persons in Indonesia

The following persons can be contacted if more information is needed.

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Source of Information from Indonesia

Information is gathered from the following sources and is not subjected for quotation, as it might not reflect the actual true facts at the field level but can be used as references.

1. PPMK, MOH
2. EHA, WHO
3. UN and INGO Network
4. Local and international news media