

# Emergency Situation Report

## Earthquake in Nanggroe Aceh Darussalam Province, Indonesia

7 January 2005, Number 13

**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 – 7 January 2005 – Number 13**

### **Reporting date and time**

7 January 2005 (Wednesday) – 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)

### **Follow up activities**

#### **WHO Indonesia**

Information from Aceh field team

- Meeting in Health Sector Coordination had been set up for every Monday, Wednesday and Friday at 10.00 AM. Participated by agencies from Government, UN, NGOs(local and international).
- Participants to the meeting: government health department, NGOs (Save the Children Alliance, ICRC, IFRC, CARE, MDM, Mercy Corps, CRS, ICMC, IMC, IRC, IRD, Merlin, Cap anamur), military health units (Germany, Australia, Singapore), government teams (Chile, Mexico, Denmark, Spain), and UN agencies (UNHCR, UNICEF, UNFPA, IOM). The group decided to have six (6) sub-groups: (1) hospitals/field hospitals; (2) primary health care/surveillance/disease control; (3) mental health; (4) environmental health; (5) nutrition; and (6) reproductive health. On 7 January 2005, the topic of the meeting will focus on the mapping and come out with the 'wish list' – to share needs and who can provide support.
- The field surveillance team has coordinated with the government in setting up an Early Warning System. Reporting forms and fact sheets on case definitions have been already been distributed. There will be weekly tallying of the reports from the health facilities. Active surveillance shall cover 26 camps.
- Very urgent need of TT and ATS. Nine (9) cases of tetanus in adults have been reported.

#### **Jakarta Operations Centre**

- Anti-tetanus immunoglobulin supplies have been procured by WHO. This was facilitated by FHI. AusAID has donated additional supplies. These have been shipped from Australia and expected to arrive in Banda Aceh by the morning of 8 January.
- Three hundred (300) units of HEV IgM rapid tests have been donated by Genelabs Diagnostics from Singapore. The kits are expected to arrive in Jakarta on Monday, 10 January.

- The 3<sup>rd</sup> Coordination Meeting for Health Partners was conducted at the WHO Meeting Room on 7 January. Agenda for the meeting: Presentation from the MOH, Joint Statement on Infant Feeding, Guidelines for Donations of Medicines, Updates on Agency Profiles and Activities in Aceh, and Coordination Information Sheet on Environmental Health. The next meeting will be held during the MOH Meeting with Donors and Health Agencies that is set for next week.
- The Aceh field office has requested for cholera kits and because of unavailability in Indonesia, the request has been sent to SEARO. Coordination was also made with Singapore and some kits will be sent.
- The Government of Singapore has continued supporting the provision of space in the flights to Banda Aceh. A laboratory team from Singapore will also be deployed to Aceh.

## Arrivals

### WHO

- Mr Fuster Christian, logistician

### Contact persons in Indonesia

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

No	Name	Designation	Organization	Contact phone	Fax	E-mail
1	Dr. Doti Indrasanto	Head of Department	Center for Health Emergency preparedness and Response (PPMK), MOH	0811173712	62-21-5271111	Ppmk02@yahoo.com
2	Dr. Els Mangundap		Center for Health Emergency preparedness and Response (PPMK), MOH	0818 787 588	62-21 - 5271111	Ppmk02@yahoo.com
3	Dr. Kyaw Win (Vijay Nath)	Medical Officer	EHA, WHO	0811933 821	62-21-5201164	wink@who.or.id

### 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. IOM
5. Local and international news media