



Indonesia Tsunami Situation Report

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Country: Indonesia	Prepared by: Health Information Unit (Banda Aceh Field Office)
Indonesia Operations will update information weekly on Thursday	

1. Key issues

Health satellite post personnel have already deployed but they don't get accommodation, transportation and health equipments back up to work.

Donors assume that hospital coordination meeting on March 18th, 2005, implemented by MOH does not fully represent hospital coordination process made by PHO and DHO because there is no clear link yet between the MOH's presentation with province wide health sector master plan.

Government of Indonesia has finished the macro blue print, but the document is still necessary to be detailed by provincial and district government. At the same time with the detail blue print refinery, Government of Indonesia is preparing an Implementing Board to coordinate Aceh reconstruction, including health sector reconstruction.

2. Situation Update

Casualties

As of 24 March 2005 (Bakornas):

	Aceh
Deaths & Buried	126,741
Missing	93,458
IDPs	514.150 (in 20 districts)
Relocation sites	776 barracks in place out of 854 planned (11 districts)

As many bodies were not identified before burial, it is possible that there is some double counting between the "missing" list and the "deaths and buried" list. The IDP counting continues to be difficult due to the mobility of the population. Currently not clear how many people live in camps, in barracks or in host-families.

3. Health status and trend*

Communicable Diseases

Alerts and outbreak investigation:

One suspected measles reported from Babah Krueng Village in Jaya Sub-district in Aceh Jaya District. PHO investigated no other cases in the area. There has been no routine immunization in the village since the Tsunami disaster. Head of Puskesmas in planning measles vaccination campaign for the village.

After the completion of emergency stage, surveillance team will cover 27 diseases as surveillance routine system.

Surveillance meeting for the districts staffs will be held in Lhokseumawe on 29th-31st March 2005.

Primary health care (Mother and child health, nutrition, mental health etc)

Reproductive health

There were decreasing the number of TT1 and TT2 (PM) in the IDPs camps, because IDPs didn't know the place which they could get TT vaccination.

Some camps not have vaccine and no health worker at there: Lamgabo; Teurbeuh - Jantho (Aceh Besar); BBI, BLPP - Saree (Aceh Besar); Camp Seunebok (Aceh Besar); Riting, komplek kecamatan, Cot Trink Lamsujen - Lhoknga. (Reported by Care Int.)

Some IDPs Camp still has no available of infant vaccination for BCG, DPT, Polio, Hepatitis: Lhong Raya - Aceh Besar, TVRI Gue Gajah, Darussalam, Syah Kuala, Neuheun.

Next week: Care finished their assessment and would not contribute on surveillance maternal and neonatal in Banda Aceh and Aceh Besar; focus on health services.

Next week, Midwives Association Indonesia finished their services in Aceh until 26 March 2005; services will hand over to the 12 volunteer in TVRI, Neuhen, Darussalam, Lhong Raya

Measles immunization

Measles immunization coverage in NAD Province on 18th March 2005 : Banda Aceh City 100%, Sabang 100%, Lhokseumawe 43,7%, Langsa 75,2%, Aceh Besar District 100%, Aceh Barat 100%, Aceh Jaya 75,7%, Simeulue 81,7%, Aceh Utara 100%, Pidie 68,3%, Aceh Timur 90,5%, Aceh Tamiang 45,4%, Nagan Raya 27,6%, Bireun 100%, Aceh Selatan 59,5%.

Based on the discussion with the PHO in collaboration with UNICEF and PHO EPI staff prepare and discuss the measles campaign quick monitoring survey method for 19 districts and plan for training of independent surveyor in Aceh Besar. The training will be conducted on the April the 2nd.



Nutrition

The result of nutrition surveillance assessment in 13 sub districts will be available on 13th April 2005.

Mental health

Reports of the Working Groups:

Working Group on psychosocial & public information:

Proposal on Newsletter:

6 months program for monthly publications.

All organizations are invited to contribute for the material to be published in the newsletter
Collaboration in funding the newsletter is also encouraged.

Working Group on counseling:

Last Wednesday, meeting attended by NWMT, CWS, Kanaivasu, MSF-B and Child Fund.
Has comes up with minimum standard in conducting training on counseling.

April 4th will be the 100th day commemoration of those who died in the tsunami:

Religious activities (Takziyah and Muazabah)

ICMC are going to distribute small Yasin books (prayer for the deceased). Those who want to use the Yasin books for their activities, please contact ICMC directly.

Sunday, 27 March 2005, there will be children play activities organized by Safe the Children and World Vision at the Grand Mosque.

Malaria group

Training in early warning system for malaria district coordinator conducted by CDC, MOH from 26th - 29th March.

Health systems and Infrastructure

Medical logistic

On 15th March 2005, Provincial Pharmacy ran a complete inventory of medical supplies. Financial and technical support was provided by WHO as well as AusAid and Pharmaciens Sans Frontiers (PSF).

Data will be computerized to be electronically shared on health web site. To be finalized on 28th, March 2005.

4. WHO action, sub-offices in Meulaboh and Calang

WHO Calang

H-DHO requested NGOs to submit their weekly epidemiology data to the DHO as well as PHO. He agreed that the imminent start-up of Calang District Health Office would be an opportune time for NGOs to begin submitting data.

H-DHO requested NGOs active in the health sector to complete a health sector gap analysis/planning survey released by DHO last week. WHO agreed to assist with data compilation and interpretation. Results will be fed back to the health agencies.

Epidemiology and Documentation

Following up previous minutes, WHO reported that the weekly provincial epidemiology report would emerge on Thursday following the previous week's data collection. This would increase timeliness of data reported albeit at some loss of data robustness. No report was available at this meeting.

WHO reviewed the status of donor organizations receiving official permission to support health facility rehabilitation/reconstruction in Aceh Province. In Aceh Jaya, recognized donors include the Government of Japan, International Medical Corps, and Rolls Royce. WHO understands that donor responsibilities include rehabilitation of an entire health center catchment—puskesmas, pustu, doctor house, and medical supply. WHO also understands that interested NGOs may partner with recognized donors to fulfil the stipulated deliverables. Further information will be disseminated as it is received from PHO.

Districts Pharmacy Warehouse

H-DHO informed the meeting that a new building erected behind the WHO compound would not serve as a puskesmas as advertised, but probably serve as medical supply storage or DHO administrative space.

Agency and NGO Agency-Specific Activities

Head of DHO called on agencies present to provide a verbal synopsis of their activities. Agencies made a brief presentation of current activities and future plans. Head of DHO provided feedback on presentations made.

UNFPA confirmed the availability of reproductive health kits in Aceh Jaya district as well as RH training through puskesmas in Lamno and Teunom.

Central malaria unit reported ongoing activities of the surveillance officer in Aceh Jaya. While the preponderance of malaria cases was falciparum, epidemic conditions were not considered present. Malaria control activities were nevertheless continuing in the district.

MdM-Sp expressed concern about stagnant water in front of its hospital compound—particularly as environmental health risk to its inpatients and outpatients. WHO emphasized the critical role of environmental health as well as epidemic preparedness in Aceh Jaya. MdM-Sp expressed interest in establishing an isolation ward on its clinical compound. Agencies present supported

the initiative. H-DHO, WHO, MdM-Sp, and NGOs agreed to meet the following day at the MdM-Sp compound to explore remedies for the environmental health concerns and options for hospital epidemic preparedness.

5. Contact Persons

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

		Contact phone	Tel / Fax	E-mail
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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) WHO/Aceh Weekly health reports, incl Epi/surveillance (WMMR), logistics & supplies; 2) Minutes Health coordination meeting Banda Aceh, Meulaboh, Calan; 3) Aceh regular meetings: IASC, UN, Bappeda; 3) Jakarta regular meetings: PPMK, MOH; 4) Bakornas bulletins; 5) WHO/EHA and HAC informations; 6) UN and INGO Network; 7) Local and international news media.

More information on Health Action in response to Tsunami in Indonesia, please contact: health-info@aceh.who.int

Or check on our website: www.acehhealthinfo.net