

EMERGENCY AND HUMANITARIAN ACTION

News update
February and March 2007



**World Health
Organization**

Regional Office for South-East Asia

INDONESIA

SUMMARY OF EVENT

- From January to March, Indonesia experienced 3 significant earthquakes, 1 flash flood, 4 landslides, 2 floods, and 2 tornadoes. In total, 228 deaths were reported from these events. 10,671 people were injured, 48 missing, while 160,135 people were displaced. A large number of buildings were damaged including 45,311 houses, 999 schools, 127 health facilities, 335 offices and 408 public facilities. An addition, five major accidents occurred since January: 3 planes, 1 train and 1 ferry accidents. Those accidents caused 182 deaths, 421 injuries and about 100 missing people. For all events, WHO is on alert while monitoring the situation and remains in close communication with the Crisis Centre MOH and the Regional Crisis Centres.



JAKARTA FLOODS

On Friday 2 February 2007, floods inundated several areas of the Indonesian capital Jakarta. According to the city's flood crisis centre, the floods affected 80 districts in Jakarta, causing traffic chaos and paralyzing the city. More than 70,000 houses were inundated with water levels ranging from 10 centimetres to 5 meters. 69 people were killed and an estimated 420,440 people initially left their houses. 46 health facilities were damaged by the floods. The government estimates that losses amount to Rp 4.1 trillion (US\$ 450 Million)

- MOH provided free health services to the flood victims. The services were provided by puskesmas (Community Health Posts), district hospitals and referral hospitals. The District Health Office deployed 586 doctors in 324 Puskesmas and 240 ambulances. It was assessed that there were sufficient supplies of medicines in all Puskesmas). An additional 100 doctors and 150 nurses were deployed to health posts. MOH established at least one health post for each 120 evacuation sites. The MOH Crisis Centre deployed 33 medical teams with ambulances rubber boats, medicines, doctors, nurses to the worst affected areas. It sent 22 tonnes of baby foods, 500 boxes of instant noodles, and 1,000 meal boxes, and mobilized 21 rubber boats.
- For the Jakarta floods, WHO has provided 20 New Emergency Health Kits (NEHK) basic units, 2 diarrhoea kits, 5 four-wheel drive vehicles, tent, boots and 2 engine operated boats and immunoglobulin supplies for prevention of tetanus. WHO facilitated the support of the private sector to provide additional light trucks and staff for

transportation of health related supplies, and has provided technical support to analyze and produce emergency health information in the form of Emergency Situation reports, Fact Sheets and maps, and technical guidelines.

- In support of MOH and PHO, WHO has facilitated and participated in rapid health assessments, coordination meetings, public education programmes, emergency information centre and web sites to share information, establishment of 15 mobile health units composed of driver, doctor, nurses, paramedics and specialists as required, and the establishment of early disease surveillance system and out break control.

WEST SUMATRA EARTHQUAKES

- Indonesia's West Sumatra Province was affected by two earthquakes on 6 March 2007. The first earthquake with a magnitude of 6.3 RS struck 50 km from Padang, the capital city on Sumatra's western coast. Two hours later, a second earthquake occurred approximately 11 km southwest of the city of Batusangkar. The earthquake killed 68 people and injured 9509 others. The disaster also displaced 141,216 people. Reports indicate that a large number of buildings were damaged, i.e. 43,719 houses, 999 schools, 335 offices, 801 religious buildings, and 408 other public facilities. In addition, 91 health facilities were damaged.
- MOH, with the support from WHO, has carried out medical evacuation of victims, established Health Posts in the disaster location, provided free medical services to the affected communities, and dispatched drugs assistance to hospitals. A 24 hours Disaster Command Post has been established in PHO West Sumatera, and a Disaster Response Team was formed to carry out assessments and provide assistance to Solok and Batusangkar.

THAILAND



DROUGHT

- Thailand is facing the problem of drought. According to the Department of Disaster Prevention and Mitigation (DDPM) of the Ministry of Interior (MOI), a total of 52 provinces were affected by the drought (16 in the North, 19 in the North-east, 6 in the Central, 6 in the Eastern and 5 in the Southern part of the country). 2,040,574 families have been affected.

BUSHFIRES AND SMOG

- In March, the Royal Thai Government (RTG) declared its northernmost province of Chiang Rai a disaster zone after brush and forest fires had left smog and smoke hanging in the northern country. The government set up special clinics on location to care for people suffering from smoke inhalation and began a health education campaign in order to prevent the community from getting affected by the forest fires and thick smog.
- To address the problem of bush fires and the smog in the Northern provinces, WHO liaised with the various departments and divisions of the MOPH, and WHO had several meetings with the officials from the Community Sanitation and Health Impact Assessment Division of the Department of Health (DoH) of the Public Health Development Cluster and the Bureau of Health Service System Development of the Department of Health Service Support of the Health Service Support Cluster of the MOPH. Through the Steering Committee on Environmental Hazards in the MOPH, WHO

collaborates with the MOPH in providing technical assistance, sharing best practices and in developing appropriate public health communication.

- WHO joined the MOPH's Health Impact Assessment team to the most-affected province in Chiangmai from 26 to 27 March 2007.

TRIAMs

- WHO is coordinating with the DDPM of the MOI in implementing a Tsunami Recovery Impact Assessment and Monitoring System (TRIAMs) in Thailand. Recently, WHO Thailand, in collaboration with the DDPM and the Phuket Provincial Public Health office (PHO) of the MOPH organised the 'National TRIAMs Workshop' held in Phuket on 9 March 2007. The workshop was supported by the Emergency and Humanitarian Action/health Action in Crises Unit of the WHO's Head Quarter (HQ) in Geneva and Southeast Asia Regional Office (SEARO) in New Delhi.
- WHO Thailand collaborated with WHO HQ in Geneva and WHO SEARO, UNDP Regional Centre in Bangkok and the International Federation of Red Cross and Red Crescent Societies (ICRC) in Geneva in organizing the '2nd Regional TRIAMs Workshop' held in Bangkok from 21 to 23 March 2007.

OTHER ACTIVITIES

- The MOPH is planning a project on assessment of the '*Current Situation on Emergency Preparedness of the Health Sectors and Communities in Thailand*' and a pilot project is currently ongoing in Phuket province. WHO is providing necessary technical and financial support to the MOPH and the Phuket Provincial PHO since the inception of the project.
- ADPC in collaboration with WHO organised the Strategic Planning Workshop on Management of the Dead and the Missing in Disasters from 7 to 8 March 2007 in Bangkok.

TIMOR LESTE

CIVIL UNREST

- During January to March 2007, the humanitarian crisis continued. More than 50 deaths occurred and more than 300 people sustained injuries during the unrest in recent months. It is estimated that more than 5,000 houses and many business offices, shops, public buildings, and essential utilities have been looted or burned.
- More than 100,000 people are now staying in camps for the Internally Displaced Population (IDP). Of these, 30,000 persons stay in the capital and 70,000 in the districts. Of the total number of IDPs, 5,000 persons were displaced during January 2007 due to violence and arson in Dili. As of January 2007, there are about 52 IDP camps in Dili and 9 camps in three other districts. The remaining IDPs are hosted by families (+/-70%). The number of people per IDP camp varies from 15 – 13,200 people.
- Following entomological surveys in the IDP camps, appropriate vector control measures to prevent outbreaks of vector-borne diseases have been put in place. In preparation for the rainy season, the Ministry of Health with the support of WHO is coordinating mechanisms for curative and preventive health care, environmental health, disease surveillance including epidemic preparedness and early warning and response for IDPs. As part of the preparations, eight Rapid Response Teams have been established
- Four working groups have been established focusing on water and sanitation, nutrition, epidemic preparedness and response, and health promotion. The working groups report at the weekly health coordination meetings organized by the Ministry of Health, where the health needs and requirements of the IDPs are decided upon.

- WHO has supported the arrangement of supplies, drugs and diagnostic kits for early detection and treatment of malaria cases.

MANUAL FOR EPR

- Following the adoption of benchmarks for emergency preparedness and response at the Regional Meeting on Health Aspects of Emergency Preparedness and Response in Bangkok, November 2005, a *Manual on Community Emergency Preparedness and Response* has been developed in Tetum and English. The manual is to be used at the community level in order to take immediate actions if any disaster occurs.

MALDIVES

LOGISTICS AND SUPPLIES MANAGEMENT



- In the aftermath of the 2004 Asian tsunami that also affected the Maldives, the MoH has requested the WHO to assist in designing and implementing a new supply and procurement system for medical supplies.
- A strategy for a three-level Central Medical Supply system (CMS) has been developed and the process of implementing the necessary components is well underway.
- Training has been given to the CMS unit in the capital, Male. The training gave clear directions and included examples on stock keeping records, receiving and arranging commodities, special storage conditions, tracking commodities and tracking commodities.
- The LSS software has been installed at the CMS in Male, and trainings on warehouse/storerooms management as well as trainings on LSS/SUMA have been provided.
- At atoll level, The LSS software has been successfully installed in the newly renovated Hithadhoo Regional Hospital (HRH). It is used on a day to day basis for recording of new stocks, delivery of supplies to wards and other health facilities.
- A review of stock keeping documents has been conducted of the HRH storeroom from 5 – 8 March 2007. A comprehensive inventory of the available stock of medical supplies was made at the same time. The inventory has been recorded in the LSS software, and the two store keepers have been provided a three-day training on LSS.

INDIA

MASS CASUALTY MANAGEMENT TRAINING

- A training programme on mass casualty management in emergencies was held in Tamil Nadu in January and February 2007. A central component of the training was computer-based simulation exercises that enabled the participants to interact and manage a virtual emergency. The programme was a collaborative activity of the Tamil Nadu Directorate of Public Health, the Poonamalla Institute of Public Health, and WHO India. It was organized with financial and technical support of EHA SEARO. A total of 10 batches of two-day trainings took place reaching a total of 192 participants.



- Participants were Public Health Officials, Paramedics, Tertiary Level Care Institutions, NGOs, Social Welfare departments, Fire and rescue services and Nursing tutors. The participants were introduced to core components of mass casualty management such as Incident command and control, triage, field emergency medical response, evacuation and emergency planning.

BANGLADESH

FIRE

- On 26 February 2007, a devastating fire swept through the 11-storey Bangladesh Steel and Engineering Corporation (BSEC) building in Dhaka, the Capital of Bangladesh. The building was located at Karwan Bazar near Sonar Goan hotel. Four people died and more than 100 were injured from smoke suffocation.
- Personnel from the EHA programme of WHO Bangladesh office provided technical assistance to the rescue personnel. Medical teams of the Red Crescent Society provided first aid to people who escaped the fire and referred serious cases to hospital. Critically injured persons were admitted to Dhaka Medical College Hospital, Dhaka Orthopaedics Hospital as well as other clinics and hospitals.
- The WHO Country Office monitored the situation and supported the team in collaboration with the Line Director, Emergency Preparedness and Response, Director General Health Services (DGHS) for smooth management of victims. EHA has supplied the DGHS with stockpiles of essential drugs, IV saline as 'buffer stock', and other medical supplies like Personal Protective Equipment, and respiratory ventilators have been supplied to the respective Government Hospitals.

DPR KOREA

MEASLES OUTBREAK



- On Friday, 16 February 2007, the government informed WHO and UNICEF of measles outbreaks, which had been spreading throughout the country since November 2006 and requested for support to control the outbreak.
- The outbreak started in November 2006 in a small county at the northern border with China and spread all over the country.
- There were reports of 3,000 measles cases from all provinces, including deaths of 2 infants and 2 adults. The age group ranged from infants to 45 years old.
- The national measles laboratory confirmed the diagnosis of measles, initially recognized as rubella, with laboratory tests provided by WHO.

- In response to the current measles outbreak, the MoPH, UNICEF and WHO agreed on the following:
 - (1) The government will conduct national measles immunization campaign in two phases:
 - Phase I (tentatively from 15 March) targeting 6 millions children aged 6 months to 15 years;
 - Phase II (tentatively from 15 April) targeting 10.2 millions population aged 16 to 45 years.
 - (2) Planning and preparation of this campaign, including operating cost like in-country transportation and staff cost will be taken care of by the government;
 - (3) UNICEF and WHO will support measles vaccines, including syringes, needles, safety boxes and vitamin A for the measles immunization campaigns;
 - (4) WHO will provide technical assistance on outbreak investigation, laboratory diagnosis and treatment.
- From 13-17 March 2007, a team from IVD SEARO (Immunization and vaccine development) provided technical assistance on issues related to surveillance, routine immunization and case management.
- Total Funds required: USD 5.5 million. The majority of the funds are provided by UN Central Emergency Response Fund (CERF), other UN funds and RoK government. WHO Health Action in Crisis provided 1 million USD from the Republic of Korea and 150,000 USD from Italy and 1.3 million USD from the UN foundation.

SEARO

PROGRAMME MEETING

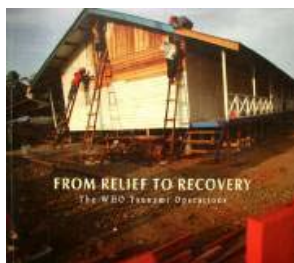
- A meeting of all EHA focal points took place in New Delhi, India on 29 – 30 March 2007. Apart from sharing updates from all countries in the area of emergency preparedness and response, the meeting discussed a five year strategy for EHA SEARO. The framework of benchmarks for emergency preparedness and response that all member countries of the region developed and agreed to in November 2005 was further elaborated with a set of corresponding standards and indicators.

ICT KITS

- To improve operational capacity in the Regional Office and Countries, a personal ICT kit has been designed with SEARO Informatics Systems Management (ISM). The kit, encased in a laptop backpack, contains office equipment and tools to support field work including emergency communication. The kit consists of a laptop, a portable printer, a web camera and digital camera, a mobile handset with Blackberry facilities and a satellite telephone. At any point should an EHA staff be requested to go to the field, this kit will provide EHA staff with all the necessary equipment to be self sufficient to carry out their work and connect with the rest of the operations team.

PUBLICATION

- A book detailing the Tsunami response in 6 SEAR countries has been published and is available on the EHA SEARO website.



For more information on EHA activities,
please visit our website:
<http://www.searo.who.int/eha>

Every two months, the Emergency and Humanitarian Action programme of the South East Asia Regional Office Of the World Health Organization produces news update of events and activities of countries of the region. The note is not exhaustive and does not reflect any official position of the WHO Secretariat.