
The sixth training of ITC-DRR held on 20 to 26th October 2014 in, Bali, Indonesia with objectives: to share and learn on general management aspect of emergency and disasters, update knowledge, skills and practice in coordination, familiarize with recent advances and other dimensions of emergency response.

Total of 31 national and international participants attended from their respective Ministry of Health, academic institutions, hospitals and national disaster management offices. The training was facilitated by experienced facilitators from Ministry of Health, Indonesia, WHO Indonesia, Gadjah Mada University and Hasanuddin University.

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The training was conducted based on adult learning principles with participatory approach. Training started with dedicated session of team building. Sessions have group works, simulation exercises, cases studies or interactive questions & answer session reflecting real disaster/emergency situation in order to make sure that whatever they have learnt in didactic sessions are reflected in practice. Sessions have covered topics on disaster risk reduction by MoH expert; field control command system; integrated emergency medical service management; health cluster coordination by national experts; IDP management by expert from Ministry of Social Affairs, health staff preparedness in disaster by expert from Sanglah Hospital, Bali; management of clean water and sanitation in disaster, management of surveillance and communicable disease in disaster and disaster risk communication by WHO international experts, management of mental health problem by expert from Udayana University, Bali, reproductive health in disaster by UNFPA expert, and pandemic preparedness by expert from BNPB.

Each of the training session was evaluated using various tools like forms, mood meter and interaction with participants by facilitators in a daily basis. Overall based on participants' evaluation, the training has delivered its desired objectives and achieved its goals and highlighted receiving more benefits from post didactic exercise sessions.

Commemoration of 10 years - Aceh Tsunami

Commemoration of 10 years of Aceh Tsunami was organized on 25 – 28 December 2014 in Blang Padang, Aceh. In the event of commemorating 10 years of Tsunami, Aceh Government has given high appreciation to international communities, like UN agencies, embassies and NGOs/INGOs and volunteers who have assisted tsunami response, rehabilitation and reconstruction.

A decade ago on 26th December 2004, Aceh a one of the north-western province of Indonesia was devastated by a disaster of gigantic proportions that shook the world, known as the Aceh Tsunami. It was occurred unexpectedly on Sunday morning of 26th December 2004 and regarded as one of the most devastating natural disasters in history. The tragedy started when a huge 9.2 RS earthquake with epicenter near the island of Simeuleu, close to the shore of Aceh.

WHO together with other UN agencies, iNGOs and donor countries worked collaboratively with MoH and other relevant government agencies to rebuild Aceh. Technical assistance in health such as medical service rehabilitation, psychosocial support, drugs and medical equipments and restarting overall Aceh health system back to normal. After years of rehabilitation and restoration of work, the province and the people of Aceh have managed to overcome this catastrophe and continue with building their cities and their life.
National Health Cluster Strategy

National Disaster Management Agency (BNPB) initiated adaptation of international cluster system into national context and one of them is health cluster. This meeting was to re-introduce the cluster system, how it is adapted into national context and map health cluster members in several sub-clusters. This meeting was conducted in Jakarta on 2nd October 2014.

The strategies of the Health Cluster agreed were:
- Ensure a set of agreed standard tools to use for initial rapid assessment;
- Ensure access to basic health services including reproductive health to the affected population;
- Ensure appropriate coordination with national and local authorities and in between humanitarian partners;
- Strengthen capacities of the public health system to monitor, prevent and respond to outbreaks of communicable diseases.

The important meeting were attended by humanitarian actors working in health sectors from government institutions such as ministries, BNPB, hospitals, army and universities, NGOs/INGOs, UN agencies, private sectors and experts from professional community.

Next agenda will be small meeting of sub-cluster coordinator in 13th of January 2015.

Landslide in Banjarnegara District – Central Java

- On Friday, 12th December 2014, 18.00 hrs landslide occurred at Jemblung area, Sampang Village, Karangkobar sub-District, Banjarnegara District in Central Java Province. This landslide was caused by a heavy rain in the area, which is landslide prone due to land conversion.
- This landslide affected one village in Karangkobar sub-districts in Banjarnegara (approx population affected 2,201 – 687 households in Sampang Village).
- Response provided to the affected district were:
  1. National Disaster Management Agency together with Local Disaster Management Office of Central Java (BPBD Jawa Tengah) has established coordination post for logistic and heavy equipments.
  2. Central Java Regional Crisis Center is supporting Banjarnegara District health Office to monitor health situation.
  3. Banjarnegara DHO carrying out followings:
     i. Conducted coordination meeting of health sector;
     ii. Supported victim evacuation;
     iii. Opened health post, and provided medical services in the Jembung sub-village including the referral system to Banjarnegara Public Hospital
  4. Ministry of Health (under coordination of Center for Health Crisis)
     i. Established coordination mechanism across programs and technical units within MoH
     ii. Deployed rapid health assessment team, nutrition team and mental and psychosocial team (from Magelang Mental Hospital), and sanitary water quality assessment (BTKL Jogja)
     iii. Provide fortified biscuits 1 ton and breastfeeding supplements of 200 kgs
  5. EHA – WHO Indonesia
     Monitoried situation and response activities in close coordination with Center from Health Crisis.
October – December 2014

In collaboration with Crisis Center, Ministry of Health Republic of Indonesia

CONTACT DETAILS

EHA INO Contact
Program Assistant : Ms. Kania Safitri Seputro
seputroK@who.int
National Consultant : Mr. Gde Yulian Yogadhita
yogadhitaG@who.int
Medical Officer : Dr. Nirmal Kandel
kandelN@who.int

Flood in Bandung District – West Java

- On Friday, 19 December 2014, 21.00 hrs, three sub-District (Bojongsoang, Dayeuhkolot and Bale Endeh) in Bandung District were inundated due to heavy rain, with water level 60 cm to 300 cm.
- Population affected 8,670,501 population or around 4 million households in Bandung Raya area
- Casualties: No reported deaths or missing, 183 outpatients in two health posts NDMA reported 14,276 IDPs or 4,409 households.
- Puskesmas Dayeuhkolot unable to provide health service due to inundation with water level up to 1.5m
- Response provided to the affected district were:
  1. National Board of Disaster Management (BNPB) together with Local Disaster Management Office of West Java have established coordination post for logistics.
  2. Jakarta Regional Crisis Center supporting West Java PHO to monitor health situation.
  3. Bandung DHO
     o Established two health posts to provide medical services in Bojongsoang village office and Al-Hidayah Mosque in Bojongsari Village)
     o Distributing 10 boxes of Fortified Biscuits, 3 boxes of Pregnant Women Supplement, 3 boxes School Children Supplement and one box of flood drugs package.
  4. WHO Indonesia is monitoring the events in coordination with Crisis Center, MoH and also monitoring the potential threat of disease outbreaks in flooded areas.

Ten years after Tsunami, closer mental health care for Acehnese

Television images of people fleeing to save their lives when the Asian tsunami hit Aceh, Indonesia are imprinted in global memory. Since that Sunday morning, 26 December 2004 the global community has witnessed deep psychological scars of people whose families and friends were among nearly 200,000 lives lost due to this natural disaster.

More than 100 Indonesian and international agencies came to Aceh to provide mental health and psychosocial support. But providing long term mental health care remained a challenge. To address the long term needs of affected people, Indonesia’s Ministry of Health (MOH) and WHO worked together to build a comprehensive mental health service aiming to integrate mental health into provincial primary health care (PHC) system. This meant empowering Puskesmas (community health centre) and health care workers to provide mental health services...

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