KEY HIGHLIGHTS

- WHO deployed Emergency National Officer to support health cluster coordination and Rapid Health Assessment in Palu. Two WHO Measles-Rubella (MR) immunization campaign focal points are supporting MR campaign in 8 districts in Central Sulawesi, including Palu and Donggala. WHO Expanded Programme for Immunization (EPI) staffs will be deployed to the field to assess EPI status and restore MR campaign targeting IDP camps as priority.
- WHO Surveillance Officer, Data Assistance, Mental Health Officer, TB Officer will be deployed to the field to support response operation.
- To provide medical care, 1175 personnel are on the ground. Fifteen hospitals and 50 primary healthcare centers are started operational. Healthcare workers volunteers and national EMTs have served as surge capacity. Indonesian army has facilitated medical services at four remote sub districts in Sigi districts.
- MoH and Biopharma conducted Td vaccination at Palu. 1000 vial Td vaccines, 250 vial influenza vaccine, 500 ampules Anti Tetanus Serum (ATS 1500 IU) have been delivered to Palu.
- The most common diseases presenting to health posts are diarrhea, fever, influenza-like illnesses (ILI) and trauma injuries. The risk of increased transmission of vector borne diseases such as dengue, chikungunya and malaria is anticipated as above-average rainfall is expected in affected areas in the coming weeks.

SITUATION OVERVIEW

- A 7.7 magnitude earthquake and its aftershocks, tsunami, and subsequent liquefaction and landslides have severely affected Donggala, Palu municipality, Sigi and Parigi Moutong Central Sulawesi. Access to Palu continues to be difficult with four districts (Kulawi, South Kulawi, Paloko and Pipikoro) are still isolated.
- To date, 1948 persons have died, 2549 people severely injured, 8,130 mild injured, 835 people are missing.
- Electricity and communication signal has improved in Palu, while electricity, water supply and fuel in Sigi and Donggala are still limited. Masomba and Pasar Induk market in Palu are open. Logistic distribution management and displacement management are challenging.
- There are currently 74444 displaced people in 147 sites. Public kitchen are operational in IDPs.
- One hospital (Anutapura hospital in Palu) and six primary healthcare centers (Talise, Bulili, Mamboro, Lere, Nosara, Singgani) are affected. Kabelota hospital in Donggala is operational, however, electricity and water supply is still limited and hospital waste management is not functioning optimally due to limited electricity.
PUBLIC HEALTH CONCERNS

- Injuries and their complications continue to be a major concern.
- Anticipated increased health risk include water borne diseases (such as cholera, dysentery, typhoid) and vector borne diseases (malaria, dengue, and chikungunya) and Vaccine preventable diseases (such as, measles and diphtheria). Waste management and provision of water and sanitation as well as vector control is essential.

RESPONSE

EPIDEMIOLOGICAL SUMMARY

- Summary of ASEAN-ERAT’s rapid assessment indicated 68% of health facilities do not work. Current health problems ranging from the most to the least are injuries, diarrhea, Acute Respiratory Infection (ARI), other health ailments, skin diseases, difficult safe deliveries. 37% assessed IDPs have no access to clean water. Summary of ASEAN-ERAT’s rapid assessment can be found in https://ahacentre.org/situation-update/situation-update-no-8-sulawesi-earthquake-07-october-2018/
HEALTH OPERATIONS AND LOGISTICS

- To provide medical care, the Government has deployed 1175 personnel consist of 278 medical doctors, 121 specialists, 15 Anesthetist, 21 midwives, 527 nurses, 15 Pharmacist, 169 Para medics, 29 non paramedics. Psychosocial support is being provided.
- Fifteen hospitals (12 at Palu, 2 at Donggala and 1 in Sigi) and 50 primary healthcare centers (13 in Palu, 19 in Donggala and 18 in Sigi) are operational by national EMTs and healthcare worker volunteers. Medical team has conducted 283 orthopedic surgeries.
- The Ministry of Health mobilized medicines to healthcare facilities and ensures buffer stock at district health office. MoH has delivered 50 packages of individual kits, 90 family hygiene kits, 2.35 ton medicines, 3 ton complementary food for children, 2.81 complementary food for pregnant women, 6725 surgical masks, 583 polybag, 18 tents, 216 gloves, 150 kg disinfectant, and 5000 disinfectant tablet, 10 sprayer, 1728 repellant, 23 insecticide, 50 boots, 1500 body bags, 50 Jerry cans, 10 sprayers, 50 pregnant women kits, 240 delivery kits, 27 midwife kits, and 5 delivery sets.
- Makasar Public Health Laboratory has been identified to conduct water quality testing at Undata hospital, Madani hospital, Bhayangkara hospital, and Anantapura hospital.
- MoH has conducted disinfection of Bhayangkara hospital, Undata hospital, and Anutapura hospital.
- MoH and Biofarma conducted Td vaccination at Palu. 1000 vial Td vaccines, 250 vial influenza vaccine, and 500 ampules Anti Tetanus Serum (ATS 1500 IU) delivered to Palu. 1622 people received Tetanus vaccination.
- Emergency Medical team (EMT) registration is conducted at Balikpapan Airport, Makassar Airport and Palu Airport. The final registration is conducted in the Central Sulawesi Provincial Health Office.
- Indonesia Red Cross (PMI), has provided relief items. These include 100,000 surgical masks, 1,250 body bags, 1,934 hygiene kits, 12 tents, 22 ambulances, 1,268 Jerry cans, 4,000 gloves, 2,042 baby kits, 3,150 mosquito nets, 22 truck tanks, 1,810 tarpaulin, 3 helicopters.
- While Rapid Health assessment is still ongoing, temporary rapid health assessment in Palu municipality, and Donggala indicated:
  - Primary healthcare centers at Donggala and Sigi are still not able to report on EWARS, while only three out of 13 primary healthcare centers at Palu municipalities are able to report EWARS.
  - Emergency public kitchen are open in shelters. The team observed lack of sanitation, water supply, toilet, latrine and waste management in the shelter. Some IDPs drink water without boiling.
  - Food distribution management applying hygiene principles should be applied. Environmental health sub cluster is planning to conduct disinfection at IDP camps and monitoring water quality.
  - Environmental health Officers and nutritionists to supervise distribution of nutrition for malnutrition children are needed. Disinfection and 10 spray scan for Donggala and mist blower are needed for Sigi.
  - Disinfection in four hospitals has been conducted. Disinfection at 11 IDP sites. Disinfection at other IDPs camps are needed.
COORDINATION

- Health cluster has been established with three sub health clusters (Nutrition, Environmental health, reproductive health).
- ASEAN_ERAT has supported BNPB and Ministry of Foreign Affairs to set up the Joint Operation and Coordination Centre for International Assistance (JOCCIA) co-located with BNPBs’ National Assisting Post (Pospenas).
- AHA center is housing a joint effort for assessment and information management. Humanitarian partners, including OCHA, Map Action, IFRC, and others are located at the AHA Centre EOC.
- A web portal on BNPB’s page [https://bnpb.go.id/gempasulteng.html](https://bnpb.go.id/gempasulteng.html) has been prepared for sharing maps, providing updates and information to public media.

GAPS AND CHALLENGES

- MoH indicated medical resources need for incoming one week include medical doctor, specialists (obstetry and gynecologist, pediatricians, anesthesist, and surgeon), psychiatric, nurse, midwives, radiographer, environmental health Officers and nutritionist.

HEALTH CLUSTER AND WHO RESPONSE

- WHO National Staff for Emergency supports health cluster coordination Rapid Health Assessment in Palu.
- Surveillance Officer and Data Assistant support to restore Early Warning Alert and Response System (EWARS) in the field.
- Two WHO Measles-Rubella (MR) vaccination campaign focal points are supporting MR campaign in 8 districts in Central Sulawesi, including Palu and Donggala. WHO Expanded Programme on Immunization (EPI) staffs will be deployed to the field to assess EPI status and restore MR campaign targeting IDP camps as priority.
- Mental Health Officer works with MoH, Indonesia Psychology Association and Indonesia Mental Health Nurse Association to support mental health in the affected areas.
- WHO environmental health unit is coordinating with MoH to support water quality testing
- WHO TB National Officer will be deployed shortly to ensure continuation of TB treatment.
- WHO is assessing need for Cholera test kit, Dengue test kit, malaria test kit, typhoid test kit, and Anti Diphtheria Serum (ADS), Rabies vaccine (VAR), Anti Rabies Serum (SAR) and ready to support procurement of those kits for Palu.
- WHO develops health partners support matrix to identify health partner response.

FUNDING

- WHO has developed and submitted a final proposal for US$ 3 million proposal for the Health Cluster Operational Response Plan, incorporating inputs from health partners, for allocation of CERF funds (US$ 15 million). WHO will implement US$1, 25 M focusing on restoring EWARS in 22 primary healthcare centers; strengthen health cluster coordination, mobilization of FETP students from universities to support surveillance during outbreak, vector control, and supporting mental health.

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Reference:

- OCHA information update  https://vosocc.unocha.org/VODiscussions.aspx#t5682
- BNPB  update as of 8th October 2018
- Crisis Centre MoH update as of 8th October 2018