



SITUATION UPDATE NO. 14

M 7.4 EARTHQUAKE & TSUNAMI

Sulawesi, Indonesia

<http://adinet.ahacentre.org/reports/view/1319> | Glide: EQ-2018-000156-IDN

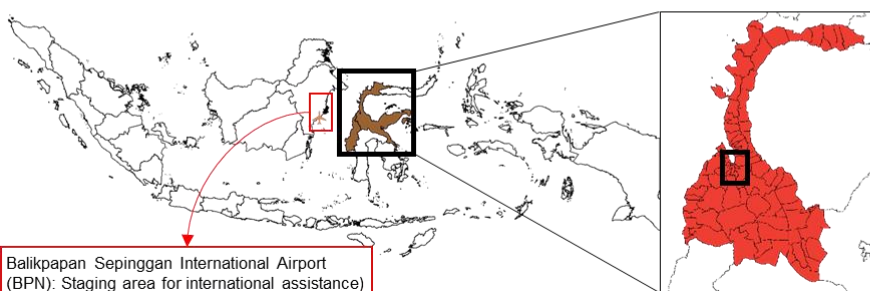
Monday, 22 October 2018, 18:00 hrs (UTC+7)

No. **14**

This Situation Update is provided by the AHA Centre for use by the ASEAN Member States and relevant stakeholders. The information presented is collected from various sources, including but not limited to, ASEAN Member States' government agencies, UN, IFRC, NGOs and news agencies.

M 7.4 EARTHQUAKE & TSUNAMI, CENTRAL SULAWESI, INDONESIA

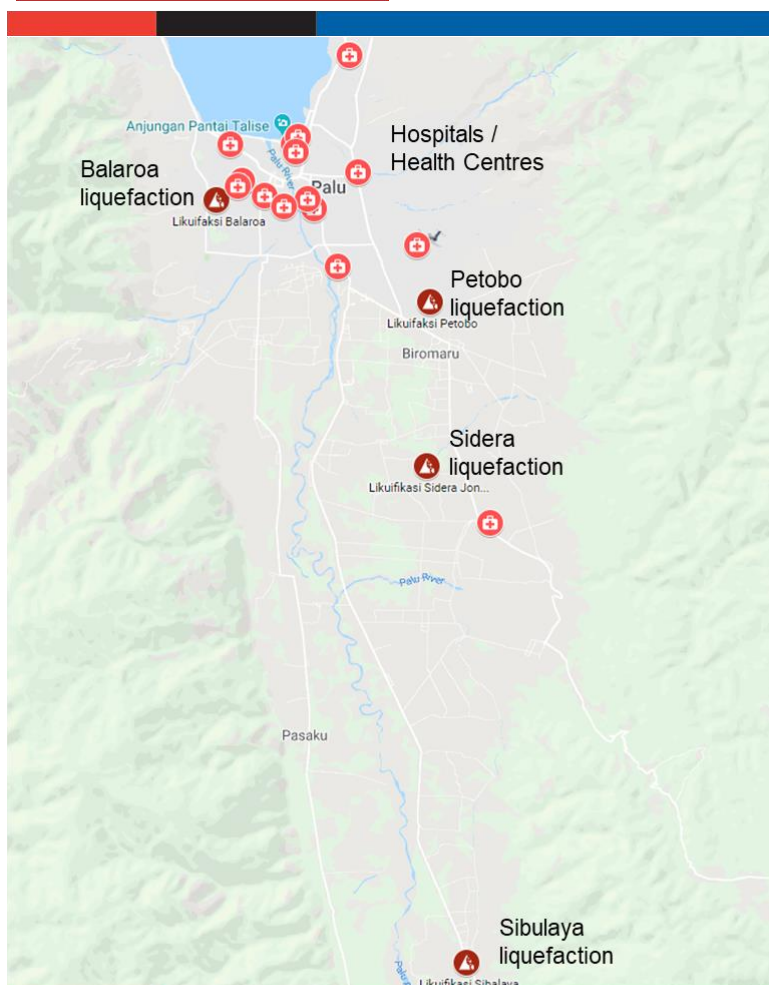
Correct as at 21 October 2018



Balikpapan Sepinggan International Airport (BPN): Staging area for international assistance)

Most-Affected areas:

- Donggala
- Palu city
- Sigi
- Parigi Moutong



	2,077 fatalities
	205,870 displaced
	68,451 Houses damaged
	4,438 major injuries
	680 missing
	45* Health facilities damaged

Disclaimer: All key statistics quoted by AHA Centre are those received from the National Disaster Management Authority (BNPB) of Indonesia.

(*) This is a corrected version. In the previous version, 2,736 refers to # of exposed school buildings within intensity V MMI. We are ssincerely apologize for this mistake



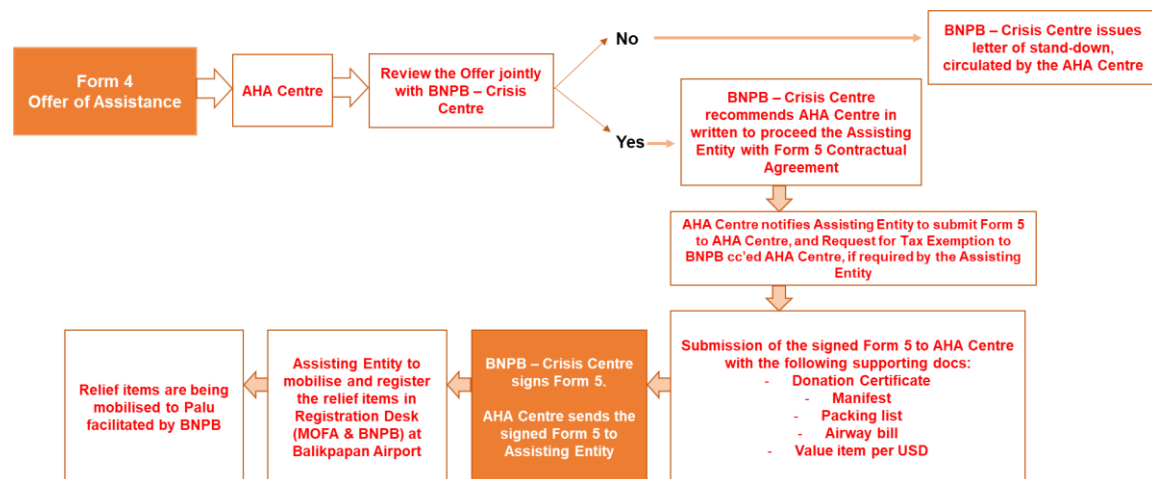
SITUATION UPDATE

1. HIGHLIGHTS

- a. The cascading events on 28 September 2018 are characteristic of a catastrophic disaster scenario where major earthquakes triggered near-field tsunami, major liquefaction, and landslides, which resulted in direct damages, impacts, and constrained humanitarian access (AHA Centre). BNPB figures are available at the following site: <https://sites.google.com/view/gempadonggala/beranda>
- b. The AHA Centre has closed the portal for receiving the offers of assistance. As per guidance from the Government of Indonesia, INGOs are strongly advised to contribute cash donations to PMI's account (Figure 1), or channel it through local CSOs. IGOs may channel their support in the form of cash contributions to BNPB bank account, or through relevant ministries and/or the AHA Centre.
- c. A coordination meeting chaired by BNPB, supported by relevant Ministries and National Taskforce was conducted on 19 October, 0900hrs at BNPB's EOC. It was informed that the following workflow for in-kind international assistance was agreed upon. The minutes of meeting and presentation slides were circulated to attendees.



Flow of In-kind International Assistance from IGOs/G2G/INGOs/Private Sector facilitated by the AHA Centre



- d. BNPB informed that a USD bank account has been opened to receive international donations, as can be found below. BNPB advised partners who have donated to inform Ministry of Foreign Affairs (Mr. Ronny P. Yuliantoro at kantorsahli@kemlu.go.id).

Bank	: Bank Negara Indonesia (BNI)
Bank account	: RPL 175 BNPB PDHLN PALU
Account number	: 75520903-8
SWIFT Code	: BNINIDJA
Branch	: Bank Negara Indonesia (BNI) KCU Harmoni

- e. Between 1 Oct and 15 Oct 2018, Indonesia Red Cross (PMI) had gathered a total of IDR 18 billion (USD 448,666) in donations and proceeds for the emergency.






BERSAMA UNTUK KEMANUSIAAN

BANTU MASYARAKAT KORBAN BENCANA GEMPA-TSUNAMI SULAWESI TENGAH

#pmisiapbantu
#bantupaludonggala

Perolehan Donasi: Rp 18,075,605,999.54
1 Oktober s/d 15 Oktober 2018 USD 448,666.37

<p>■ Bank Mandiri Nomor Rekening: 070-00-0011601-7 Swift Code: BMRIIDJA AN. Palang Merah Indonesia</p>	<p>■ Bank BRI Nomor Rekening: 0390-01-000030-30-3 Swift Code: BRINIDJA AN. : Palang Merah Indonesia</p>
<p>■ Bank BCA Nomor Rekening: 206.300668.8 Swift Code: CENAIIDJA AN. Kantor Pusat PMI</p>	<p>Informasi lebih lanjut: 021-7992325 Ext. 2 (Divisi Pengembangan Sumber Daya) klik www.donasi.pmi.or.id email: donasi@pmi.or.id</p>

 @palangmerah
  palangmerah_indonesia
  www.facebook/PALANG MERAH INDONESIA

Figure 1 PMI's donation proceeds

- f. BNPB stresses that humanitarian partners must send the following documents, together with a cover letter regarding the mobilization of relief items, to BNPB (ksibnpb@gmail.com and cc to eoc@ahacentre.org) before mobilising any relief items: Donation Certificate, Packing list, Invoice, and Manifest.
- g. For in-kind assistance, the **portal for sending the offers of in-kind assistance are closed as of 22 October 2018 0900hrs. Assisting entities who have been accepted are to take note that their items should reach Balikpapan by 24 October. Operations at Balikpapan staging area are expected to close on 26 October.** Assistance designated for Palu will have to be transported via commercial chartered flights with costs borne by the respective assisting entities after 26 October. Further guidance will be provided by BNPB.
- h. BNPB has requested from assisting entities at the coordination meeting to channel the remaining funds from the emergency response into early recovery efforts. Emphasis was placed on cash donations as this provides greater flexibility in

supporting the early recovery plan which is being developed by the Government of Indonesia.

- i. Humanitarian partners are encouraged to take note on the conditions set by BNPB for INGOs supporting emergency response of Central Sulawesi Earthquake and Tsunami (Figure 2).

Regulations for International NGOs aim to provide assistance in Central Sulawesi

1. Foreign NGOs are not allowed to go directly to the field. All activities must be conducted in partnership with local partners.	5. Foreign NGOs wishing to provide aid can do so through the Indonesian Red Cross (PM) or PMI's - with the guidance of the related ministries/agencies or local partners.
2. Foreign citizens who are working with foreign NGOs are not allowed to conduct any activity on the sites affected by disasters	6. Foreign NGOs who have deployed its foreign personnel are advised to recall their personnel immediately.
3. Foreign NGOs who already procured/prepared relief items in Indonesia need to register their assistance with the relevant ministries/agencies & mandated to work with local partners in distributing the aid.	7. A monitoring of foreign volunteers is required.
4. If the respective NGOs have not registered their assistance with the relevant ministries/agencies, they are asked to register with BNPB for the distribution to the affected population on the field.	8. The delivery of relief items are being coordinated temporarily by BNPB through Balikpapan.



National Disaster Management Authority **BNPB**

Figure 2 Conditions for International NGOs providing assistance in Central Sulawesi

- j. Humanitarian partners may also wish to take note on the information management flow of the Joint Operations and Coordination Centre for International Assistance (Figure 4) as well as logistics support plan for international assistance (Figure 5). For more information and operational contact point, please contact AHA Centre and ASEAN-ERAT on the ground. For ensuring effectiveness of support ASEAN-ERAT has moved the **Joint Operations and Coordination Centre for International Assistance (JOCCIA)** to a new location at **-0.890777, 119.87149**.
- k. We would like to urge that actors rendering assistance on the ground to register their activities at JOCCIA so as to avoid duplication of efforts. This would greatly facilitate the government efforts in responding effectively in this response.



JOINT OPERATION AND COORDINATION CENTRE FOR INTERNATIONAL ASSISTANCE INFORMATION MANAGEMENT WORKFLOW

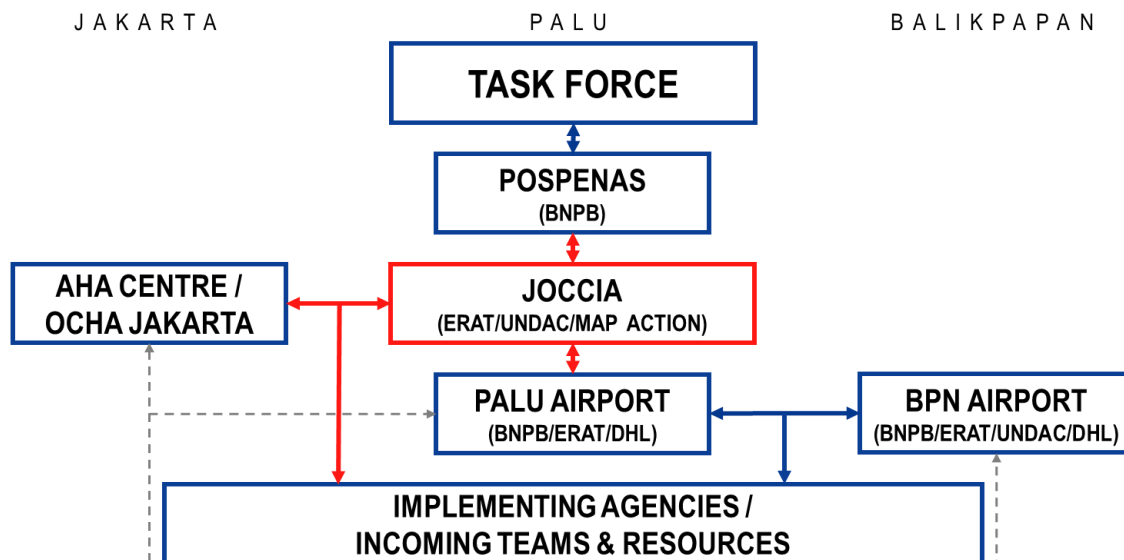


Figure 3 Information management workflow across three locations (JOCCIA, staging area and EOC)



LOGISTICS SUPPORT PLAN FOR INTERNATIONAL AID

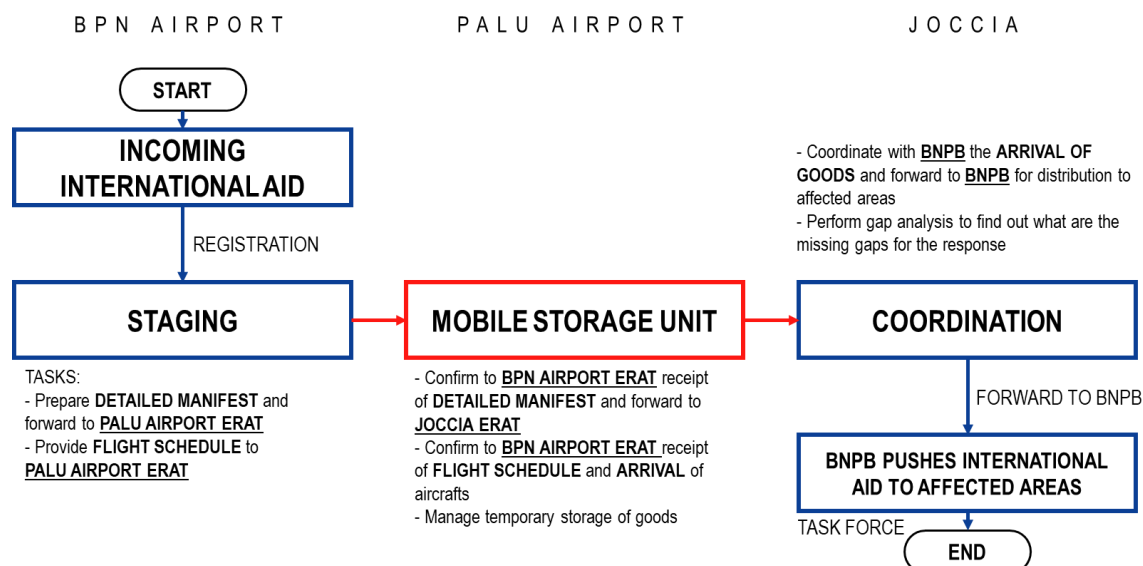


Figure 4 Logistics Support Plan for international aid (JOCCIA, staging area and EOC)

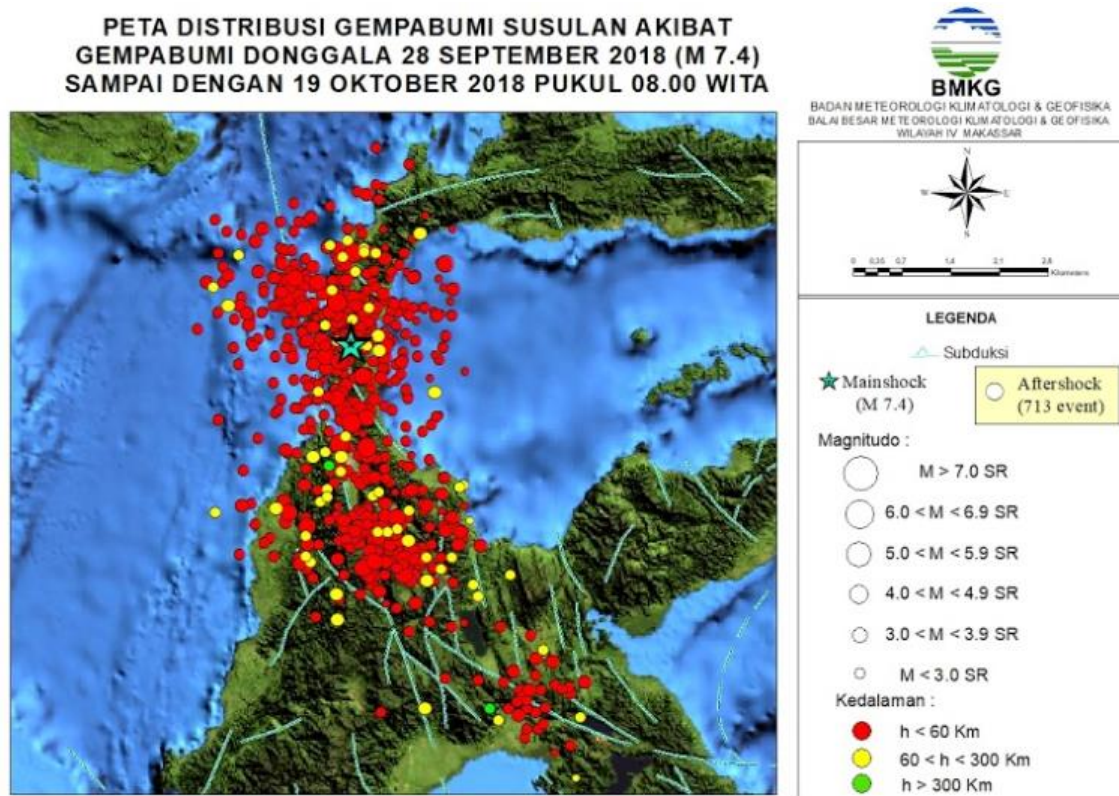


2. SUMMARY OF EVENTS, FORECAST AND ANTICIPATED RISK

- a. The cascading events on 28 September 2018 catastrophic disaster scenario when major earthquakes triggered near-field tsunami, major liquefaction, and landslides, which resulted in direct damages, impacts, and constrained humanitarian access (AHA Centre). Till date (18 Oct 0700hrs UTC+7), there are 720 aftershocks being reported occurring in Central Sulawesi (Figure 5 and 6).



Figure 5 Aftershocks reported between 28 Sep and 18 October in Central Sulawesi



* Source: BMKG

Figure 6 Graphical representation of aftershocks reported between 28 Sep and 14 October in Central Sulawesi

- b. According to ASEAN Specialised Meteorological Centre (ASMC), the sub-seasonal forecast indicates that Central Sulawesi may be experiencing rain and responders may wish to watch out for slightly wetter conditions.

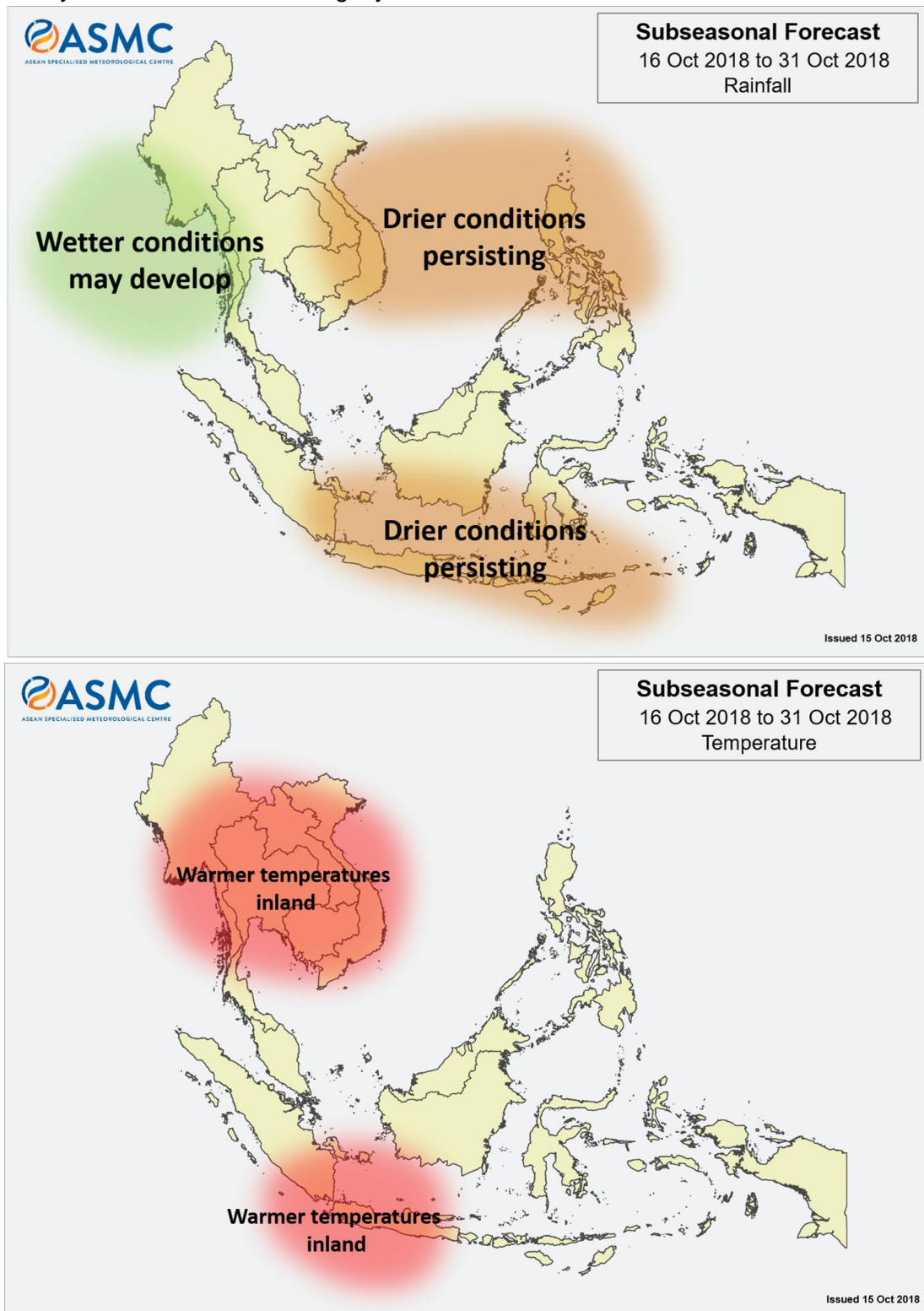


Figure 7 Rainfall and temperature outlook for ASEAN between 16 Oct and 31 Oct
(Source: [ASEAN Specialised Meteorological Centre](https://www.asmc.asia))

- c. Based on generated models for monthly rainfall outlook (Figure 8), below-normal to near-normal rainfall is favoured over southern ASEAN region. There is some chance of above-normal rainfall (darker pixels) in the near equatorial parts of the ASEAN region from 0°N to 10°N. Responders are to take note of flash floods and landslides in the coming months.

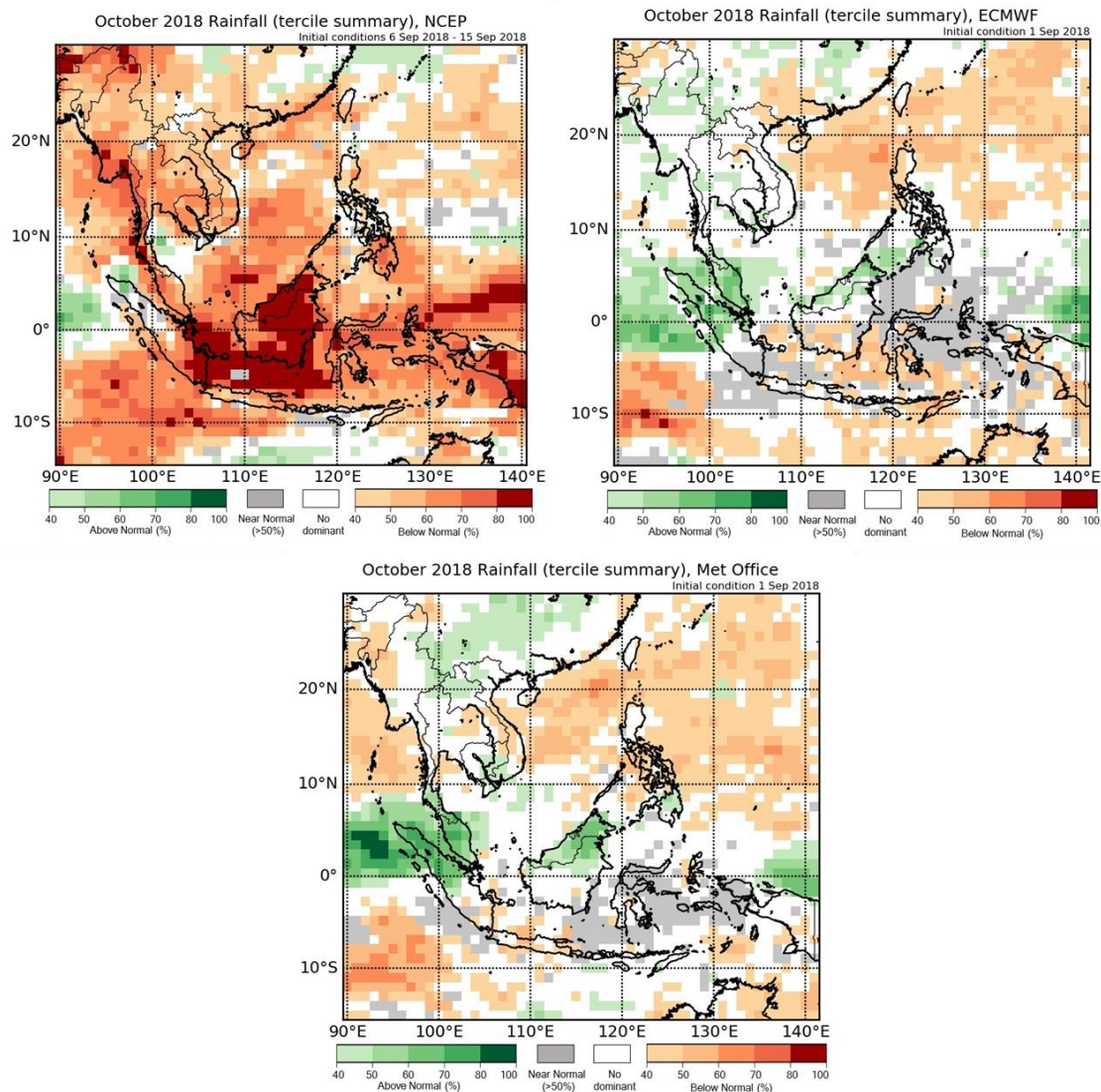


Figure 8 Rainfall tercile summary predictions for October 2018 for a) NCEP model, b) ECMWF model, c) UK Met Office model (Source: [ASEAN Specialised Meteorological Centre](#))

3. ASSESSMENT OF DAMAGE, IMPACT, AND HUMANITARIAN NEEDS

- a. The images from ASEAN-ERAT's rapid assessment is available at the following link, courtesy of MapAction's help. The rapid assessment was a coordinated effort among the local government, humanitarian partners and local NGOs. <http://mapaction.maps.arcgis.com/apps/MapTour/index.html?appid=9570047442184e81aa118a5ddb44ade4&autoplay>

- b. Additional crisis maps with photos are available at the following link:
<https://www.google.com/maps/d/u/0/viewer?mid=1Bbyp1GgBB3SVL4-rS2CljFrzpMq2XfSa&ll=-0.802302226056875%2C119.8254902115234&z=12>
- c. Courtesy of DigitalGlobe and MapAction, we were able to visualise the extent of damage from satellite imagery with before and after high-resolution imagery at the following link:
https://mapaction.maps.arcgis.com/apps/StorytellingSwipe/index.html?appid=6081f761fc274f9c8279942bfadc4698&_ga=2.38091811.1678217635.1539773702-216462165.1539597140
- d. According to [WHO's Situation Update 9](#), most cases reported from health facilities are acute diarrhea, typhoid fever, and pneumonia. Between 4 and 16 October 2018, increased numbers of acute diarrhoea and acute respiratory infection were observed. Other diseases reported are influenza like illness (ILI), injury, pneumonia, diabetes, hypertension, acute bloody diarrhoea, mental health and skin diseases. Donggala district reported highest cases of acute diarrhoea and acute respiratory infection, followed by Palu municipality and Sigi. Sanitation remains a high priority besides shelter and responders are working to address this problem.
- e. Besides the acute conditions, chronic conditions are also of concern. A high number of cases of hypertension and diabetes have been reported during post-disaster. Continuous treatments for hypertension and diabetes cases would have to be restored soon following the disaster.
- f. Measles-Rubella (MR) campaign is ongoing in the three affected districts (Donggala, Sigi and Palu city) with additional focus on the IDP camps. Between 16 and 18 October 2018, 507 children aged 9 months to 15 years have been vaccinated against measles and rubella under MR campaign in Donggala and Palu. Current ongoing Measles Rubella (MR) vaccination campaign had achieved coverage rates of 48.5% and 75.14% in Palu and Donggala respectively prior to disaster, with no significant progress made since the disaster event.
- g. Six reproductive health tents have been established by the reproductive health sub-cluster and are offering life-saving delivery, ante-natal, post-natal and family planning services and information in Palu.
- h. There are still a lot of health challenges to be addressed with the largest needs surrounding: 1) psychosocial support, 2) maternal and child health, 3) logistical challenges, 4) healthcare delivery, and 5) laboratory testing capacity and capabilities.
- i. Based on the initial estimates, the total damage and loss of Central Sulawesi currently stands at IDR 13.8 trillion with 7.6 trillion reported in Palu (55.2%) followed by Sigi (31.0%). The damages and loss stems largely from the tsunami and extensive ground movement leading to landslides in certain areas. We have to take note that the social sector and economic sector had suffered extensive damages and losses as well.



Much consideration has to be given to these sectors as restoring social and economic sectors will promote resilience and allow the affected to rebuild faster and better.

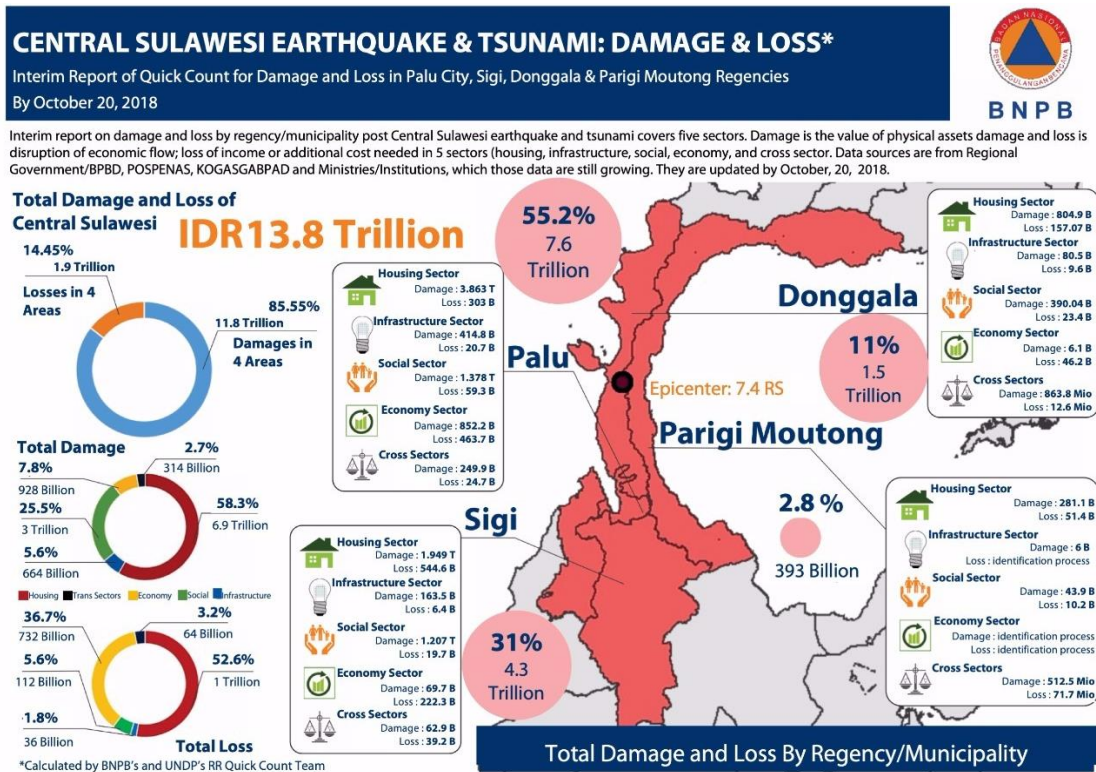


Figure 9 Total damage and loss by regency or municipality

- j. BNPB has released the following infographic which showcases the effort and response to the emergency.

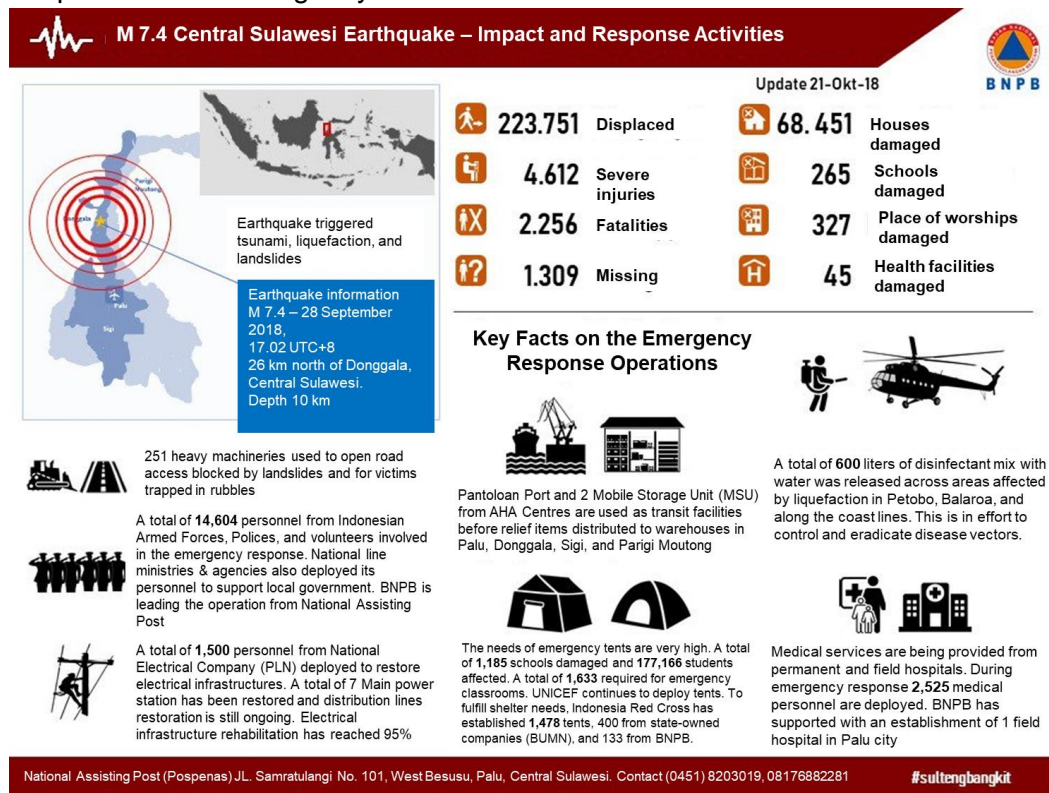


Figure 10 Impact and Response activities for Central Sulawesi Earthquake



k. The latest damaged buildings and casualties as at 19 Oct 2018 are as shown below:

Indonesia: Sulawesi - Percentage of damage buildings per Desa (as at 19 Oct 2018)

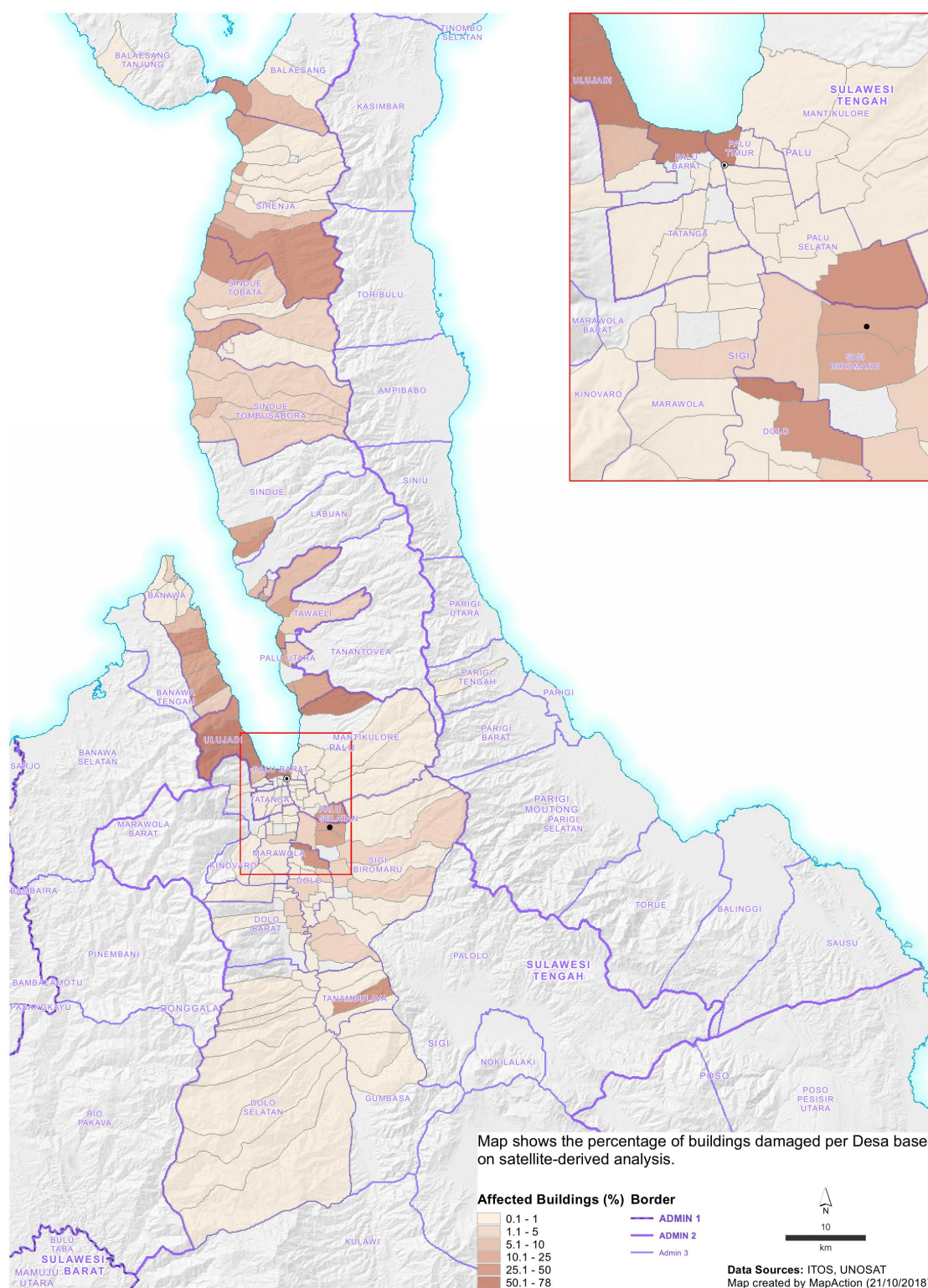


Figure 11 Percentage of damaged buildings by desa (as at 19 Oct 18)



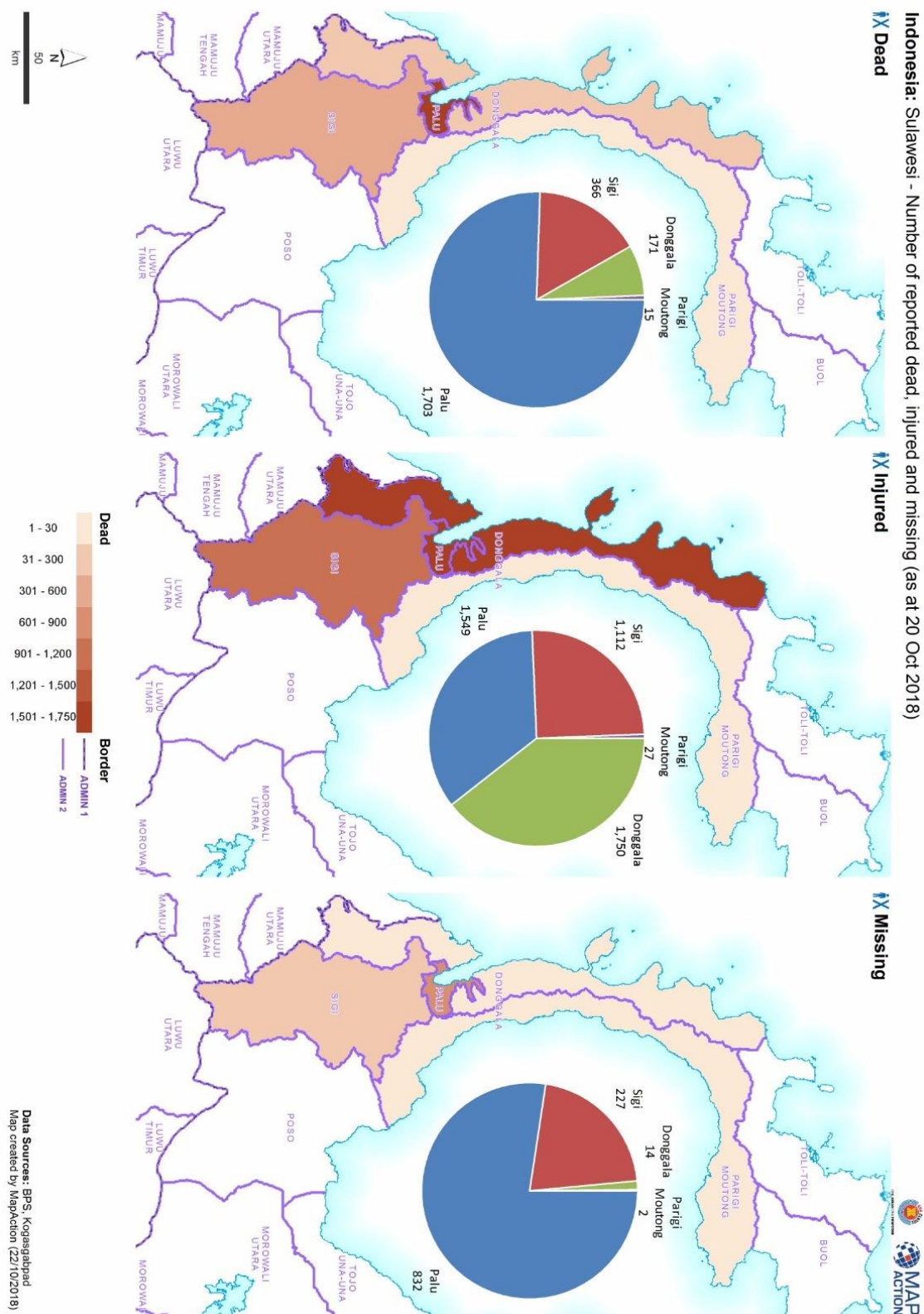


Figure 12 No of reported dead, injured and missing by regency/city (as at 20 Oct 18)

- I. The current priorities are directed to fulfil the basic needs of the majority of the IDPs. Based on the joint-assessment conducted by the ASEAN-ERAT and UNOCHA, the results indicate that specific needs of the vulnerable groups have not been fully addressed in the remote IDP sites. A discrepancy of specific services between IDP in

urban setting and rural setting is notable. Among the identified needs in the rural IDP sites, include but not limited to:

- Walking aid and medicine for senior citizens
 - Child friendly space and child protection
 - Protection for people and children with disability, including access to latrines (promote an inclusive and disabled-friendly huntara)
 - Infant feeding in emergencies (MP-ASI and PMBA)
 - Lactation counsellors
 - Sanitary pad and diapers
 - Psychosocial support for teachers, healthcare workers, responders and religious leaders (the physical infrastructure are available to conduct education and religious services, but the human resources still require support)
 - Psychosocial support for the agricultural communities who lost their primary livelihood due to liquefaction or earthquakes. Suggested activities to consider are: community gardening, farming, cooking demonstration, etc. The proposed-type of intervention might prevent child-abuse or domestic violence which might occurred due to the imposed stress on the affected individuals.
 - Psychosocial support for the fishermen communities who lost their houses and livelihoods to the tsunami
 - Underwear for both men and women
 - WASH education (through behavioural change and communication strategies)
 - Information dissemination on the nearby available public services, as well as the procedure required in accessing assistance.
- m. Before establishment of temporary settlements, understanding of the community dynamics and proper conflict-sensitivity measures or mitigating mechanisms are required. For example, in one IDP site, construction of the temporary settlements has started and almost finished. While at the same time, less than 2 km from the assigned temporary settlement, neighbouring IDPs still lack access to basic needs and are living in tents. This worse-off condition for the neighbouring sites may lead to inter-communal conflict. Activities as such should be carried out in tandem so as to ensure that basic access to needs are normalised across the sites.
- n. In general, market activities have resumed in Sigi, Palu City, and Donggala. For example, in Sibulaya, the weekly traditional market has been active and had opened thrice after the twin disasters. One suggestion to consider is to promote and support micro-small enterprise sector, such as: the street-food vendors, nutritious-food supplier (vegetable and fruit vendors), etc.
- o. There needs to be a change of perspective from an infrastructure-approach to a people centric approach. In some areas, the public facilities (clinics, PUSKESMAS, schools) might still be available. However, the personnel are missing or left the affected area due to traumas. This is in relation to the point that WHO had reported that psychosocial support for workers in basic services (especially healthcare) is urgently required so as to allow the workers to return to normalcy, restoring their ability to function and provide services to the community.



- p. A community engagement working group was being set up by consortium of NGOs who are providing support in Palu. The working group aims to 1) promote an inclusive approach in capturing the diverse voices of the IDP, as well as 2) enabling the implementation of effective feedback mechanisms at IDP sites. The working group plans to convene every Friday at 1400 hrs. at Pospenas Meeting Room located in the Governor's Office.

4. ACTIONS TAKEN AND RESOURCES MOBILISED

Response by Government of Indonesia & State-Owned Companies

- a. Based on the Central Sulawesi Governor's Office No. 466/463 / BPBD / 2018 Dated October 12, 2018, Central Sulawesi Disaster Emergency Response Status was extended by 14 days from Oct. 13 to Oct. 26, 2018. ([Source](#))
- b. The Government of Indonesia is currently being supported by IOM, UNFPA and other relevant stakeholders and volunteers in carrying out the needs assessment for the affected areas. The results will be available soon which will be announced by Government of Indonesia.
- c. Ministry of Health had delivered 5.50 tons medicines, 2.81 tons complementary food for pregnant women, 3 tons of complementary food for children, 6,725 surgical masks, 583 polybags, 1500 body bags, 10 sprayers, 150 kg of liquid disinfectants, 5,000 disinfectants, 23 insecticides, 50 jerry cans, 216 gloves, 18 tents, 1 orthopedic set, 4 Doppler equipment, 50 boots, 50 pregnant women kits, 240 kit delivery sets, 27 midwife kits, 5 delivery sets, 5 minor surgery kits.
- d. Ministry of Health is in collaboration with health partner, which has completed a rapid health assessment that focuses on the health facilities functionality. 32 out of 50 primary health centers are operational. Antiretroviral (ARV) mobile team has conducted outreach for ARV distribution. MoH is planning to distribute health education materials consisting of 5000 leaflets, 50 banners, 15 health informational movies, and other risk communication materials for community awareness.
- e. Ministry of Health will take into account the potential IDP locations and coordinate with agencies in charge of camp management. This will go along with the plan to build temporary housing while ensuring access to basic health services, monitoring of IDP location and mapping of it is crucial to ensure widespread access to health facilities.
- f. As of 13 October 2018, MoH and Health Polytechnic collected 27 samples for water quality testing from internally displaced persons (IDP) locations. Water quality testing covered chemical and microbiology parameters.
- g. A [web portal on BNPB's page](#) has been prepared for sharing maps, providing updates and information to public and media.
- h. Indonesian Space and Aeronautical Agency (LAPAN) provided high resolution pre earthquake and tsunami images, accessible here: http://pusfatja.lapan.go.id/simba/qr/earthquake/Layout_Gempa_Palu_Donggala/
- i. Geospatial Information Agency (BIG) provided relevant layers for mapping and operations planning purposes at the following address: <https://cloud.big.go.id/index.php/s/sxb9TEStoDYT276>

Response by the AHA Centre, ASEAN-ERAT and Operational Support Groups (OSGs)



- a. ASEAN-ERAT has supported BNPB and Ministry of Foreign Affairs to setup the Joint Operations and Coordination Center for International Assistance (JOCCIA) co-locate with BNPB's National Assisting Post (Pospenas) at Rumah Jabatan Gubernur. The JOCCIA has been moved to new location at -0.890777, 119.87149. UNDAC team, MapAction, and Telecom Sans Frontier supporting ERAT at the JOCCIA.
- b. To further strengthen coordination among organisations, the AHA Centre Emergency Operations Centre is currently housing the joint-efforts for assessment and information management, including representatives from OCHA, MapAction, IFRC.
- c. ASEAN ERAT is currently supporting BNPB and TNI with the logistics tracking of items in Palu City that are being stored and distributed from the Mobile Storage Units (MSUs) erected in the vicinity of the airport to store relief items.
- d. For the latest maps, please visit [MapAction's webpage](#) relating to this response.
- e. [Télécoms Sans Frontières](#) deployed two teams equipped with emergency satellite equipment, from the headquarters and base Asia. After a brief transit in the city of Makassar, they are currently on their way to Palu to offer technical expertise to rescue teams and affected populations. TSF was solicited by the Association of Southeast Asian Nations (ASEAN) to reinforce the support of their [emergency response](#) and evaluation teams (ERAT) to the Indonesian National Agency for Disaster Management (BNPB) and local authorities.

Response by the United Nations and Humanitarian Country Team (HCT)

- a. The latest Humanitarian Country Team situation update (as at 19 Oct) is available here: <https://reliefweb.int/report/indonesia/central-sulawesi-earthquake-tsunami-humanitarian-country-team-situation-report-4-19>
- b. Latest situation update from WHO for 19 October is available on the following site: <http://www.searo.who.int/indonesia/areas/emergencies/earthquake/en/>
- c. World Food Programme (WFP) is supporting the logistics management at Balikpapan and Palu, together with AHA Centre and BNPB. A warehouse has been identified at the seaport and WFP is working with the seaport authority and operators to secure the facility as common storage.
- d. [UNICEF](#) launched a combined emergency and recovery appeal to meet the urgent humanitarian needs of children in the aftermath of the Sulawesi and Lombok disasters over a period of 6 months. The funds will help provide water, sanitation and hygiene (WASH), health, nutrition, education and child protection services for an estimated 475,000 children. UNICEF and partners will be providing water and sanitation services for displaced populations, complemented by hygiene promotion; UNICEF will also help with the resumption of health and nutrition services and will be setting up temporary learning spaces.
- e. [UNFPA](#) estimates that 352,000 women of reproductive age have been impacted by the earthquake and tsunami, including 45,300 women who are pregnant. More than 14,000 of these women will give birth in the next three months, with about 2,100 expected to experience childbirth complications that require emergency care. With hospitals and health centres damaged and public transport severely compromised, efforts to meet their sexual and reproductive health needs are under strain. UNFPA is on the ground, reinforcing the government-led humanitarian response to ensure lifesaving services reach women and girls.
- f. [World Food Programme](#) (WFP) is supporting the Government of Indonesia's relief response with logistics assistance. This includes 40 trucks and 10 mobile storage facilities for relief items. WFP continues to assess the food security situation of



people in the affected areas. The air bridge from Balikpapan to Palu will remain operational until 23 October.

- g. WFP is implementing the Relief Item Tracking Application (RITA), with a standardized request system, to facilitate the provision of common trucking and storage services to requesting partners. Organisations who wish to request for transport or temporary storage from WFP would need to fill out the [Service Request Form](#) as accurately as possible to ensure successful tracking and documentation of the services provided.
- h. Latest Situation Report from Logistic Cluster is [available here](#).

Response by Humanitarian Partners and others

- a. ICRC released a link <https://familylinks.icrc.org/indonesia> dedicated for people to track their lost family members.
- b. Open Street Map data for Palu City and Donggala Regency are available at Humanitarian Data Exchange and updated on daily basis at 2300 hrs UTC+7. The datasets include buildings, road, point of interest, waterways. OSM tasking managers are available here,
 - OSM Tasking Managers for Donggala Regency available here: <http://tasks.openstreetmap.id/project/45>
 - OSM Tasking Managers for Palu city available here: <http://tasks.openstreetmap.id/project/78>
- c. Yayasan Plan International Indonesia (YPII) is continuing the mobile recreational activities for 241 children (107 boys and 134 girls) across 8 IDP camps::Sigi (2), Palu (5), Donggala (1).
- d. YPII is continuing its distribution of shelter kits and hygiene kits to the affected people. As of 22 October 2018, distribution of shelter kits and hygiene kits to the affected people continues and has reached 855 affected families / 2,862 persons (1,484 male and 1,410 female) in 8 locations (7 in Palu city and 1 in Sigi district). YPII plans to distribute a further 347 shelter kits and 367 hygiene kits in Kulawi sub-district, Sigi. However access is a challenge due to landslide and floods in this areas. YPII will also be displaying a joint poster develop by Ministry of Social Affairs, UNICEF and Red Cross on “separated children” in the distribution locations as part of their work in the Child Protection Sub-Cluster.
- e. YPII with YSTC, WVI and UNICEF will be jointly facilitating Training of Trainers for 50 teachers (10 representative from province, 10 from Sigi, 10 from Donggala, 10 from Palu and 10 from NGOs). The training consist of Education in Emergencies and Child Protection in Emergency from 23 – 25 October 2018 in Palu.
- f. YPII has 3 (three) representatives undertaking Menstrual Hygiene Management (MHM) assessment in 3 IDP camps in Palu from 22 – 23 October 2018 with adolescent girls and women as part of YPII commitment to the Core Humanitarian Standard and to inform continued design of program.
- g. [Direct Relief](#) is supporting the Muhammadiyah Disaster Management Center (MDMC), which is conducting search and rescue, as well as medical outreach throughout the affected area. Direct Relief is also supporting Yayasan Bumi Sehat, which has a maternal and child health-focused medical team currently providing medical outreach in underserved areas. Direct Relief will continue to support partner organizations in Indonesia like Bumi Sehat that are providing care for patients.



- h. Direct Relief has been working to pre-position and supply medicines and medical assistance to countries within the ASEAN network after signing an agreement in 2016 with the AHA Centre.
- i. [Indonesian Red Cross \(PMI\) built a Field Clinic](#) to provide basic health services for refugees in locations affected by the earthquake and tsunami disaster in Central Sulawesi. One of the locations is in the severely affected area and is an epicenter of the earthquake, namely in the village of Tompe, Sirenja District, West Coast of Donggala Regency. In this location, it was reported that a number of health facilities were damaged and no longer functioning, one of them was the service of the Tompe Community Health Center which was affected and suffered severe damage.
- j. PMI continues to scale up distributions, including shelter distributions (tarpaulins) and a blanket distribution of solar lanterns and hygiene kits in communities in west Donggala.
- k. PMI currently operates 10 water trucks which serve the area of Palu city (3 water trucks), Donggala District (4 water trucks), and Sigi (3 Water trucks). Until 10 October 2018 there is 407,465 liters of safe water has been distributed benefited 38,044 beneficiaries in Palu, Sigi and Donggala.
- l. PMI continues to conduct [Psychosocial Support Program \(PSP\)](#) services to victims of earthquakes in several earthquake and tsunami affected areas in Central Sulawesi. This step is considered necessary to restore the condition of the psychological trauma of the people after the earthquake which followed the tsunami that occurred in the region Central Sulawesi on September 28, 2018 yesterday.
- m. PMI is coordinating [distribution of relief items emergency services](#). Below is the list of items distributed by PMI as at 10 October 2018:

5. UPDATE ON HUMANITARIAN ACCESS

- a. CIQP facilities and process for international assistance can only be done at Balikpapan International Airport. Other point of entry at Halim Perdanakusuma Airport (Jakarta) and Makassar Airport are only designated for domestic / in-country relief items. Update in logistic cluster on 9 October indicated that international ocean shipments can be cleared in Jakarta and Surabaya. Please refer to Logistic Cluster on schedule of for next shipments.
- b. Due to the nature of the emergency, import duties (taxes) will not be charged for good that are intended as relief items and/or donations channelled during emergency response period or in the transition period to recovery, i.e. in accordance to [Finance Ministerial Decree No. 69/PMK.04/2012](#). Countries and organisations are required to apply for tax exemptions by submitting documents to BNPB.
- c. Logistic Cluster is providing a summary on the CIQP process for the mobilisation of humanitarian relief items, which is available [here](#).
- d. The Balikpapan airbridge has been extended for an additional two (2) weeks till 26 October. Approximately 100 metric tons of relief goods are planned for 12 October. Organisations wanting to send their aid through Balikpapan need to obtain a [flight clearance](#) from the Ministry of Foreign Affairs (MoFA) in addition to the usual documentation.



Recommended actions on public health

- a. Given the increasing number of displaced or affected people that may be referred to shelters or evacuation/ relocation sites, provision of clean drinking water, food/ nutrition and water and sanitation facilities in evacuation/ relocation sites should be sustained. Where possible, breastfeeding should be highly encouraged. Sound management and removal of organic waste (toilets, chemical treatment of sludge and solid waste disposal), can greatly reduce the exposure of the population to diseases such as diarrhoea, hepatitis A, cholera, typhoid, intestinal helminths, leptospirosis, malaria and trachoma. Guidance on the development of techniques for proper sanitation and human waste disposal in emergencies can be found [here](#).
- b. To promote stockpiling and replenishment of medical/ hospital supplies, essential medicines including making relevant vaccines accessible (e.g. cholera, anti-tetanus, typhoid, measles) and ensuring that the vaccine cold chain is intact.
- c. National vaccine-preventable programme (EPI) which was disrupted during the emergency should be restored at the earliest time to prevent transmission of diseases (such as measles, rubella, polio and mumps etc.) in children.
- d. There is a need to sustain psychological and mental health support so as to adequately address the needs of people with stressful and post event traumatic experiences.
- e. To ensure maternal health and delivery, there is a need to deploy midwives in affected areas to monitor, provide support and ensure maternal and neonatal (newborn) health are met. This is essential to prevent child and mother mortality as primary healthcare is disrupted.
- f. Reinforcement and mobilisation of additional health workers in hospitals and public health centres may not only be beneficial to improving the overall health situation in the most affected areas but it shall also help promote the mental health of the providers of care.
- g. As maternal and reproductive health care services are already in place, proper information on the referral health facilities should be disseminated especially in the evacuation sites. Breastfeeding, due to concerns in accessing clean water, and maternal and child related immunizations should be advocated.
- h. On the management of medical waste, proper disposal of medical waste would require Personal Protective Equipment (PPE), placing wastes in properly labeled drums, bins or other container before loading onto trucks for haulage and eventually disposal at sanitary landfill under controlled management. If no controlled disposal is available, store until sanitary landfill available. Additional information can be obtained from: United Nations Office for Coordination of Humanitarian Affairs <https://www.msb.se/RibData/Filer/pdf/26599.pdf>
- i. Promote mental health intervention pyramid, a referral system, from basic services provided at the community level to specialized/ psychiatric services in hospitals to help provincial and district health offices harmonize response strategies with needs of communities and appropriate mental health expertise. Other references: Psychological first aide: Guide for field workers: http://apps.who.int/iris/bitstream/handle/10665/44615/9789241548205_eng.pdf?sequence=1



Recommended actions on humanitarian logistics

- a. ASEAN-ERAT had developed a simple logistics tracking database to support tracking needs, responses and gaps. We would like to encourage partners to report their activities. This is an ongoing initiative which is worked out by the ASEAN-ERAT team and other relevant stakeholders. **Humanitarian partners, particularly national based NGOs, are encouraged to share the data on the relief items provided for updating the supply-demand balance of the humanitarian items.**

6. PLAN OF ACTIONS

AHA Centre's plans

- a. AHA Centre will be supporting BNPB on the humanitarian operations in Central Sulawesi till 25 October.
- b. AHA Centre will also be developing early recovery plan in consultation with BNPB and stands ready to support the early recovery efforts.
- c. AHA Centre's next Situation Update will be **slated for Thursday 25 October 2018**. In the meantime, do refer to [BNPB's website for the official figures](#).

Prepared by:

AHA Centre - Emergency Operations Centre (EOC) in cooperation with National Disaster Management Authority (BNPB; Data & Information Centre, National Assisting Post)

ABOUT THE AHA CENTRE

The AHA Centre - ASEAN Coordinating Centre for Humanitarian Assistance on disaster management - is an inter-governmental organisation established by 10 ASEAN Member States – Brunei Darussalam, Cambodia, Indonesia, Lao PDR, Malaysia, Myanmar, Philippines, Singapore, Thailand and Viet Nam - to facilitate the cooperation and coordination among ASEAN Member States and with the United Nations and international organisations for disaster management and emergency response in the region.

The ASEAN Coordinating Centre for Humanitarian Assistance on disaster management (AHA Centre), Graha BNPB 13th Floor, JL Raya Pramuka Kav 38, East Jakarta, 13210, Indonesia
Phone: +62-21-210-12278 | www.ahacentre.org | email: info@ahacentre.org
Facebook: [fb.com/ahacentre](https://www.facebook.com/ahacentre) | Twitter and Instagram: @ahacentre

Contact:

- 1) Qingyuan Pang, Asst. Director, Disaster Monitoring & Analysis, qing.pang@ahacentre.org
- 2) Mizan B. F. Bisri, Disaster Monitoring & Analysis Officer, mizan.bisri@ahacentre.org
- 3) Yos Malole, Emergency Operations Centre Team Leader, yos.malole@ahacentre.org

