

### SITUATION UPDATE NO. 13 M 7.4 EARTHQUAKE & TSUNAMI

No. 13

Sulawesi, Indonesia

Friday, 19 October 2018, 18:00 hrs (UTC+7)

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 18 October 2018







#### **Most-Affected** areas:

- Donggala
- Palu city
- Sigi
- Parigi Moutong





2,105 fatalities



222,986



68,451 Houses damaged



4,612 major injuries



680 missing



22\* Health facilities damaged







Disclaimer:. All partners who would like to share their information must do so by 1500 hrs (UTC+7) on the slated production date. 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

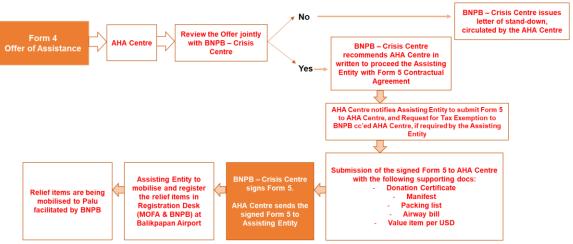


#### 1. HIGHLIGHTS

- 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: <a href="https://sites.google.com/view/gempadonggala/beranda">https://sites.google.com/view/gempadonggala/beranda</a>
- b. The AHA Centre has forwarded all offers of assistance from international humanitarian partners registered through SASOP to BNPB. Nonetheless, 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 will be implemented. 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.



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 (<a href="mailto:ksibnpb@gmail.com">ksibnpb@gmail.com</a> and cc to <a href="mailto:eoc@ahacentre.org">eoc@ahacentre.org</a>) before mobilising any relief items: Donation Certificate, Packing list, Invoice, and Manifest.
- g. For in-kind assistance coming through Balikpapan, assisting entities are urged to fill out Form 4 and submit before 22 October 0900hrs to allow time for processing. Assisting entities 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.
- 2. Foreign citizens who are working with foreign NGOs are not allowed to conduct any activity on the sites affected by disasters
- Foreign NGOs who already procured/prepared relief items in Indonesia need to register their assistance with the relevant ministries/
- 3. assistance with the relevant ministries/ agencies & mandated to work with local partners in distributing the aid.
- If the respective NGOs have not registered their assistance with the relevant

  4. ministries/agencies, they are asked to register with BNPB for the distribution to the affected population on the field.

- 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.
- Foreign NGOs who have deployed its foreign personnel are advised to recall their personnel immediately.
- 7. A monitoring of foreign volunteers is required.
- 8. The delivery of relief items are being coordinated temporarily by BNPB through Balikpapan.

National Disaster Management Authority



Figure 2 Conditions for International NGOs providing assistance in Central Sulawesi

- 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

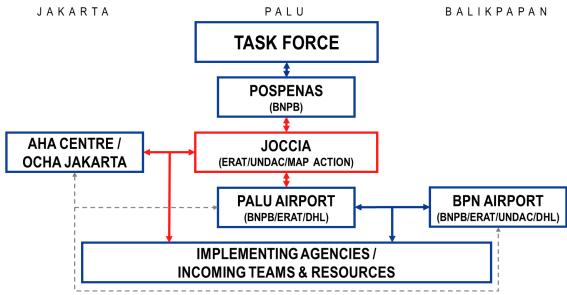


Figure 3 Information management workflow across three locations (JOCCIA, staging area and EOC)



#### LOGISTICS SUPPORT PLAN FOR INTERNATIONAL AID

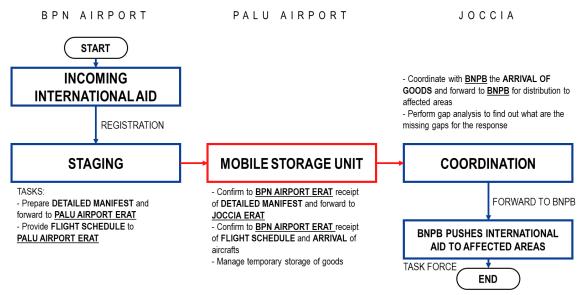


Figure 4 Logistics Support Plan for international aid (JOCCIA, staging area and EOC)

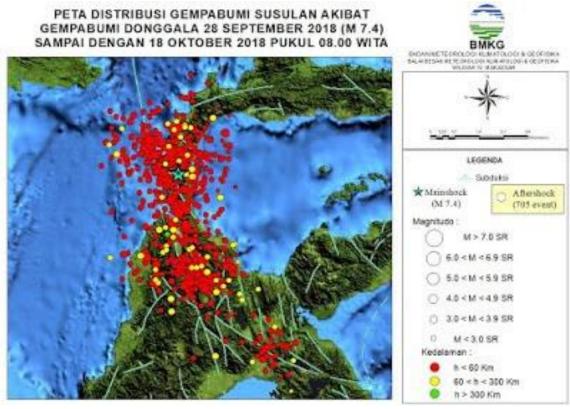


#### 2. SUMMARY OF EVENTS, FORECAST AND ANTICIPATED RISK

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 721 aftershocks being reported occuring in Central Sulawesi (Figure 5 and 6).



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



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



b. The following InSAR map (Figure 7) shows the ground deformation following the M7.4 earthquake. Generally, the ground displacement occurred largely along the fault line on land and risk of landslides or liquefaction is high stretching from Donggala, past Palu City to Sigi Regency. InSAR (Interferometric Synthetic Aperture Radar) is a technique for mapping ground deformation using radar images of the Earth's surface that are collected from orbiting satellites. InSAR is generally employed to track ground deformation, which is especially useful at remote, difficult-to-access locations.

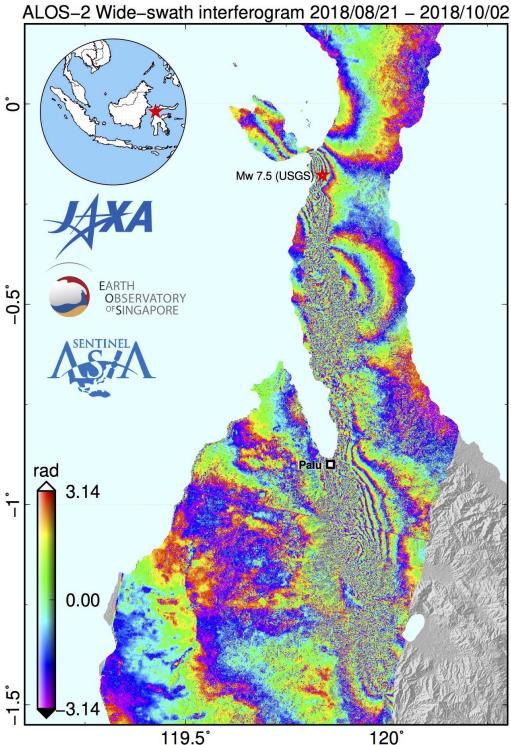


Figure 7 InSAR map showing ground deformation

#### 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. <a href="http://mapaction.maps.arcgis.com/apps/MapTour/index.html?appid=9570047442184">http://mapaction.maps.arcgis.com/apps/MapTour/index.html?appid=9570047442184</a> e81aa118a5ddb44ade4&autoplay
- b. Additional crisis maps with photos are available at the following link: <a href="https://www.google.com/maps/d/u/0/viewer?mid=1Bbyp1GgBB3SVL4-rs2CljFrzpMq2XfSa&ll=-0.802302226056875%2C119.8254902115234&z=12">https://www.google.com/maps/d/u/0/viewer?mid=1Bbyp1GgBB3SVL4-rs2CljFrzpMq2XfSa&ll=-0.802302226056875%2C119.8254902115234&z=12</a>
- 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:
  <a href="https://mapaction.maps.arcgis.com/apps/StorytellingSwipe/index.html?appid=6081f7615c274f9c8279942bfadc46988\_ga=2.38091811.1678217635.1539773702-216462165.1539597140">https://mapaction.maps.arcgis.com/apps/StorytellingSwipe/index.html?appid=6081f761fc274f9c8279942bfadc46988\_ga=2.38091811.1678217635.1539773702-216462165.1539597140
- d. As of 16 October, the following <u>activities are being carried out</u> in the most affected areas: Palu City, Donggala Regency, Sigi Regency and Parigi Moutong. (Figure 8).

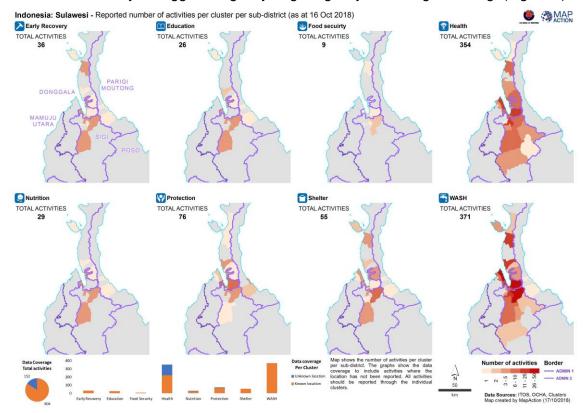


Figure 8 Reported number of activities per cluster per sub-district (as at 16 Oct 2018)



e. UN OCHA in conjunction with AHA Centre and with the support of relevant partners have released the following <u>4W matrix</u> on the actions conducted for the different sub-districts in the most affected areas (Figure 9).

<b>6</b>		Child Protection	Early Recovery	Education	Food Security	GBV	Health	Nutrition	Shelter	WASH	Grand Tot
Donggala	Balaesang	1	1	1			1	1	2	5	11
	Balaesang Tanjung		1	1			1	1			2
	Banaamru	2					24		1	1	81
	Banawa	2					24		5	50	9
	Banawa Tengah						4			5	
	Labuan	1					7			2	10
	Sindue	3	1	2			3	1	2	17	29
	Sindue Tombusabora						4				4
	Sirenja		3		1		8		3	12	27
	Tanantovea	1	1	1			10	1	3	4	21
	unknown sub-district	4					4	1		1	10
Palu	Mantikulore	6	1		1		13		1	28	50
	Palu Barat	8	2	2		1	9	2	4	16	44
	Palu Selatan	5	2			1	7		2	19	36
	Palu Timur				1	1	20		7	34	63
	Palu Utara	6	2	2			3	2	3	20	38
	Tatanga						6			8	14
	Tawaeli	5	3	3			6	3	3	6	29
	Ulujadi	6	3	3	1		10	3	3	11	40
	unknown sub-district	7			2		8	1	2	5	25
Parigi Moutong	Parigi	3	1	1				1	1	1	8
	Parigi Selatan	2	1	1				1	1	1	7
	Parigi Tengah		1	1				1	1	1	5
	unknown sub-district						3	1		1	5
Sigi	Dolo		1		1		19			25	46
	Dolo Barat						5		1	10	16
	Dolo Selatan		5	3			8	3	3	10	32
	Gumbasa						7			4	11
	Kinovaro									3	3
	Kulawi						3			2	5
	Lindu						1				1
	Marawola	3	3	3			15	3	3	17	47
	Nokilalaki						1				1
	Palolo						4			2	6
	Sigi Biromaru	3	5	3	2		9	3	6	42	73
	Tanambulava	1			2		10			8	21
	unknown sub-district	4			2		5	1	1	1	14
Jnknown Dis							124				124
Grand Total		71	36	26	13	3	362	29	58	374	972

Figure 9 Reported number of activities per cluster per sub-district (as at 16 Oct 2018)

Data Processing by SAP, Map Action

f. The <a href="matrix below">matrix below</a> aims to inform the Government of Indonesia and other responders on the actors carrying out the relevant activities on the ground. For responders on the field, we would greatly urge actors to proceed to <a href="Joint Operations">Joint Operations</a> and <a href="Coordination Centre for International Assistance">Coordination Centre for International Assistance</a> (JOCCIA) for more enquiries (Figure 10).

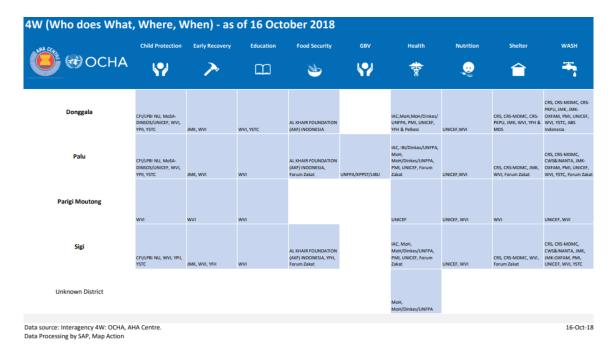


Figure 10 Reported number of activities per cluster per sub-district (as at 16 Oct 2018)

g. Based on the latest data collected by ASEAN-ERAT as at 18 October 2018, a total of 68 flights covering 34,000km transporting 553 tonnes of relief goods into Palu (Figure 11).



Figure 11 International Assistance Logistics (as at 18 Oct 2018)

- c. The logistics report from Balikpapan staging area correct as at 19 Oct is as shown in Figure 12.
- d. The latest logistics access and constraint map is <u>available here</u>. The roads to Sigi is and Poso from Palu City are accessible but prone to landslide risks (Figure 12). Responders to take note of the various logistical constraints and access.

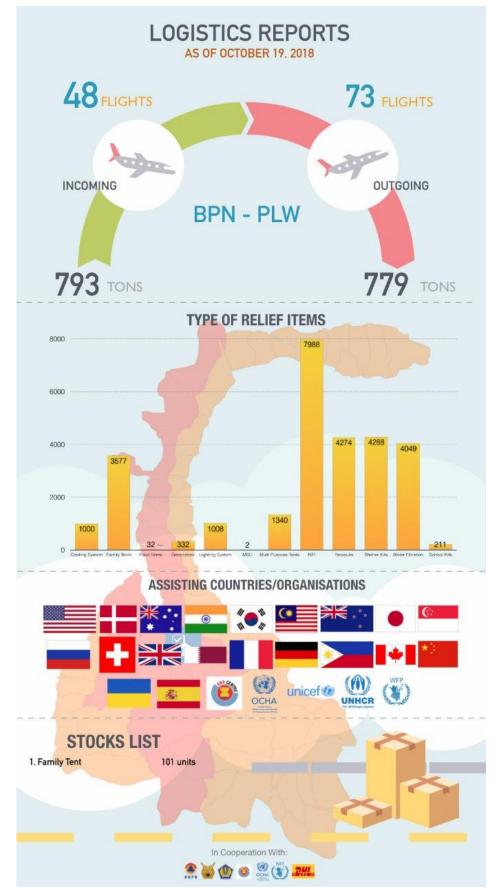


Figure 12 Balikpapan International Humanitarian Logistics Report

e. The situational overview map is as shown below created by <u>MapAction</u> with data collected from the field. Responders are to note that the building damage has not been assessed outside areas covered by the extent of imagery.

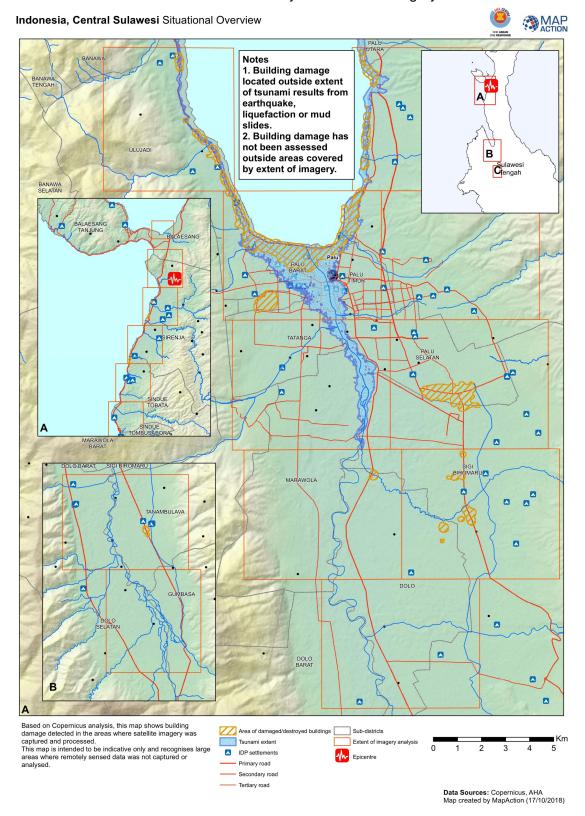


Figure 13 Central Sulawesi Situational Overview

f. The <u>operational points of interest</u> as at 17 October 2018 is as displayed below in Figure 14.



Figure 14 Operational points of interest

g. UNOSAT/REACH (Figures 15 and 16) analysed before and after event satellite imagery to identify signs of settlement of displaced persons (e.g. tarpaulins and makeshift shelters in open areas). The data has yet to be validated in the field.

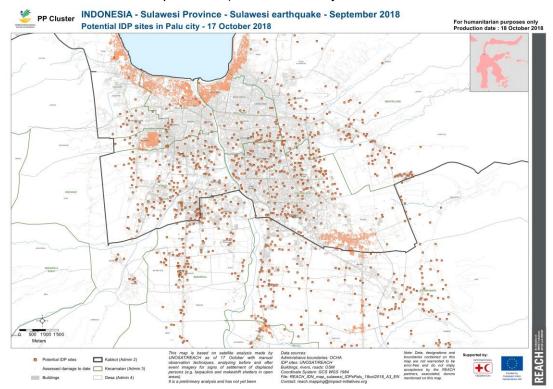


Figure 15 Potential IDP sites in Palu City (as at 17 Oct) – Source: ReliefWeb

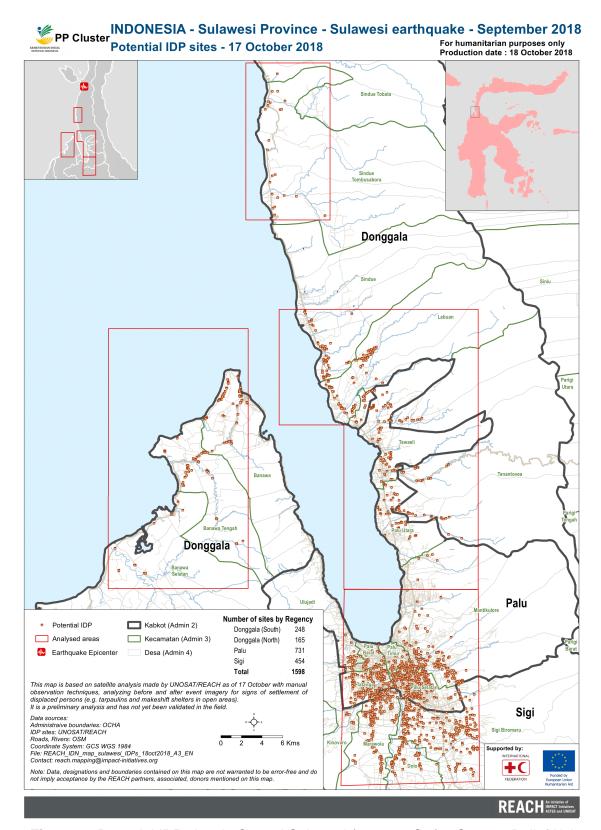


Figure 16 Potential IDP sites in Central Sulawesi (as at 17 Oct) - Source: ReliefWeb

h. The latest figures on the damages to the education sector are shown in Figure 17 to 19. Tents which are large enough to accommodate class sizes of up to 40 are in need to ensure resumption of education for the affected population.

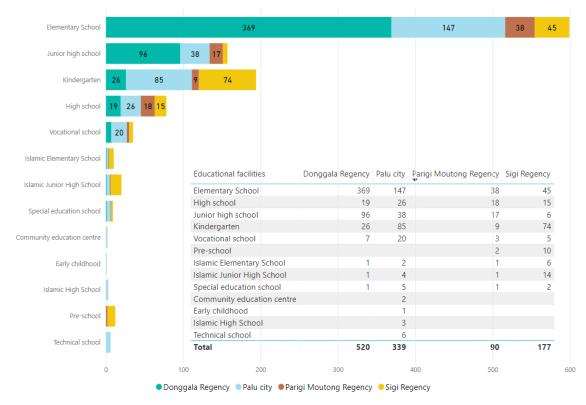


Figure 17 Number of educational facilities affected (as at 18 Oct)

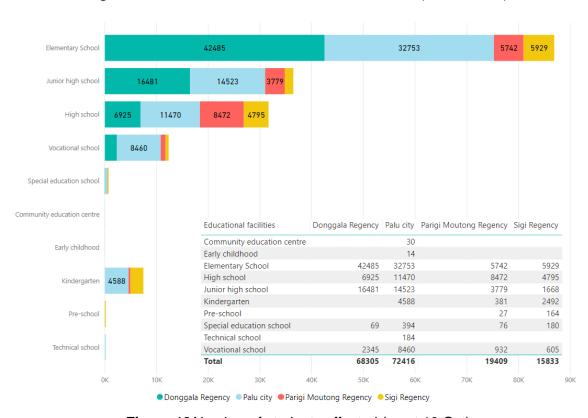


Figure 18 Number of students affected (as at 18 Oct)

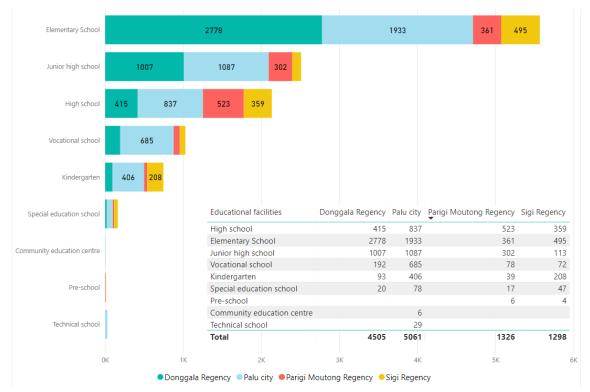


Figure 19 Number of teachers affected (as at 18 Oct)

- i. Based on the total 1.4 million potentially affected population in Palu, Donggala, Parigi Moutong and Sigi, WHO estimated that there are 351,754 women of reproductive age, 45,306 women currently pregnant, and 14,070 women who will give birth in the next three months. Further WHO estimated 2,111 women will likely require emergency obstetric care at a functioning health center for delivery in the next three months because of obstetric complications at the time of delivery (WHO External Situation Report #8).
- j. WHO also reported that medical waste management is a concern as health facility waste is dumped in the public waste site where mixed medical and non-medical wastes are found. Sites are usually found outside of the hospitals/health centres (WHO External Situation Report #8). Common risks due to waste hazards include chemical, biological, physical and local environment risks. Examples of biological risks include:
  - Dermal (skin) contact/ingestion of fecal matter/body fluids e.g. blood
  - Direct exposure to healthcare waste the hazardous nature of healthcare waste is due to one or more of the following characteristics:
    - o presence of infectious agents;
    - a genotoxic or cytotoxic chemical composition;
    - presence of toxic or hazardous chemicals or biologically aggressive pharmaceuticals;
    - presence of radioactivity;
    - presence of used sharp.
  - Disease vectors from animals that congregate on or near waste:
    - Rat excreta hanta virus, leptospirosis, plague, scrub typhus;



- Mosquitoes malaria, dengue fever, chikungunya;
- Flies bacterial infections;
- Nuisance from insects, birds and rodents which are attracted to and feed on waste.

Additional information could be found at the following sources: United Nations Office for Coordination of Humanitarian Affairs

https://www.msb.se/RibData/Filer/pdf/26599.pdf

#### World Health Organisation

http://apps.who.int/iris/bitstream/handle/10665/85349/9789241548564\_eng.pdf;jsessionid=EB12D9E382B90B58161F086DCAB31389?sequence=1

- k. WHO reported psychological assessments amongst the IDPs are in progress. Documented are instances of mild depression, anxiety and disorientation in 26 IDP camps in Donggala; 19 IDP camps in Sigi Districts and 21 IDP camps in Palu Districts (WHO External Situation Report #8). Eleven government institutions and NGOs are working to provide mental health and psychosocial support.
- Estimated potable water requirements for temporary settlements at full capacity are as shown in Figure 20. Further verification is required for the IDP sites as the current data and coordinates were provided by ASEAN-ERAT.

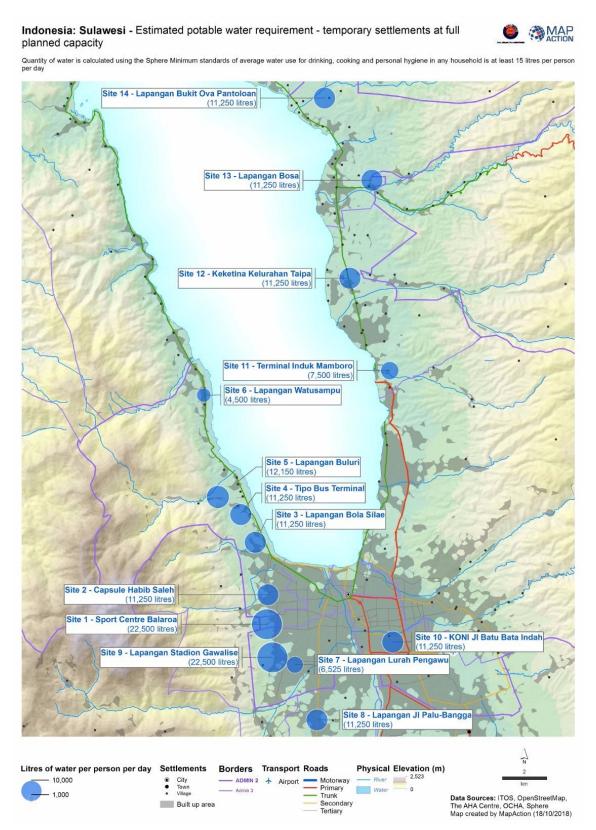


Figure 20 Estimated potable water requirement (temporary settlements at full capacity)

#### 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 preliminary results are available here
- c. In order to restore all essential health services, PHO has requested all health staff to be back on duty. More health staff had reported for duty as of 15 Oct 2018. Donggala District Health Office has reported that almost 100% staff are back on duty.
- d. 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.
- e. 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.
- 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 <u>web portal on BNPB's page</u> 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:

  <a href="http://pusfatja.lapan.go.id/simba/qr/earthquake/Layout\_Gempa\_Palu\_Donggala/">http://pusfatja.lapan.go.id/simba/qr/earthquake/Layout\_Gempa\_Palu\_Donggala/</a>
- 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 Units

- 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. <u>Télécoms Sans Frontières</u> 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 <a href="mailto:emergency response">emergency response</a> and evaluation teams (ERAT) to the Indonesian National Agency for Disaster Management (BNPB) and local authorities.

#### **Response by ASEAN Dialogue & Development Partners**

a. The Delegation of EU visited ASEAN Mobile Storage Unit and the Joint Coordination Centre for International Assistance (JOCCIA) in Palu, Indonesia. During the visit, colleagues from BNPB, ASEAN-ERAT, MapAction, and UNOCHA briefed the Excellencies on the progress of the emergency response.



Figure 20 Delegation of RU visit to Palu City

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

- a. The United Nations Secretary General visited Palu city and other affected areas on 12 October 2018.
- b. WHO will implement US\$0.9 million to support the health cluster. The activities will focus on restoring EWARS in 22 primary health centers; strengthen health cluster coordination, mobilization of FETP students from universities to support surveillance during outbreak, vector control, and collaborate with professional associations in supporting mental health. WHO is also supporting Ministry of Health on EMT management and coordination.
- 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. <u>UNICEF</u> 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. <u>UNFPA</u> 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 <u>Service Request</u> <u>Form</u> 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 <a href="https://familylinks.icrc.org/indonesia">https://familylinks.icrc.org/indonesia</a> 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 18 October, 258 shelter kits and 258 hygiene kits was distributed including hygiene promotion messaging (in Panau village and Pantoloan village, Tawaeli subdistrict, Palu). Between 11 and 18 October, YPII had reached 855 families / 2,862 persons (1,484 male and 1,410 female) with 855 shelter kits and 833 hygiene kits. By 21 October 2018, a total of 1,200 hygiene kits and shelter kits will be distributed



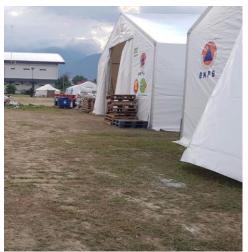
- targeting Palu city and Sigi Regency. YPII is in process of shipping a further of 400 shelter kits and 1,500 hygiene kits from Jakarta to Central Sulawesi and to be distributed after 25 October 2018.
- e. YPII will also be displaying a joint poster develop by Ministry of Social Affairs, UNICEF and Red Cross on "separated children" in the distribution locations as part of their work in the Child Protection Sub-Cluster.
- f. <u>Direct Relief</u> 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.
- g. 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.
- h. 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.
- 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.
- j. 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.
- k. PMI continues to conduct <u>Psychosocial Support Program (PSP)</u> 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.
- I. PMI is coordinating <u>distribution of relief items emergency services</u>. 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 <u>Finance Ministerial Decree No. 69/PMK.04/2012</u>. 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 <a href="here">here</a>.
- 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 <u>flight clearance</u> from the Ministry of Foreign Affairs (MoFA) in addition to the usual documentation.
- e. The ASEAN mobile storage units are currently being managed by BNPB with support from ASEAN-ERAT.





**Figure 13** ASEAN's Mobile Storage Units (MSUs) managed by ASEAN-ERAT members in support of BNPB's operations

f. Electricity, telecommunication, and access to fuel have been almost fully restored in Palu city. Markets and shops are reportedly open However, it is still a limited supply for Sigi and Donggala.

#### 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 <a href="https://www.msb.se/RibData/Filer/pdf/26599.pdf">https://www.msb.se/RibData/Filer/pdf/26599.pdf</a>
- 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/bitstroam/bandlo/10665/44615/9789241548205, and pdf2sequences.

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 Monday 22 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.

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