

[Indonesia]

The Natural Disaster Related to Health Problem: Indonesia experience

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Experience of disaster has led to management cycles strategies concepts for handling them. Those strategies are based on: 1) the definition of the disaster itself, that is whether it consists of a sudden impact event or not; 2) the kind of disaster, is it a natural or a man made disaster or both; and 3) the loss of lives or economic impact or both. In “normal condition”, disaster management cycles must start from preparedness and how to socialize the community about the early warning signs, continuing to prevention and mitigation program, reconstruction until rehabilitation. Actually the disaster management cycles must not start from preparedness. It depends on when the impact happened.

In Indonesia there are two kinds of disasters, namely natural disaster and man made disaster. For the natural disasters, Indonesia has land slides, volcanic eruption, earthquake, tsunami, flood, tropical storm and “small tornadoes” (Indonesia term: *puting beliung*) and major epidemic diseases. For the man made disasters, Indonesia has terrorist attacks, railroad accidents, aircraft crashes, sport disasters, fires and shipwrecks.

In the context of health, for example earthquake, the problem in Indonesia when handling the situation is related to people displacement and destruction of health facilities. The problem of displacement is the character of Indonesian people (victims) that prefer to stay close the area of disaster and or stay in houses of relatives near to the unsafe area of disaster. The problem for health facilities is that, frequently facilities are

damaged and there are significant losses of some medical equipment or laboratory materials. These problems make the health service collapse, and at the same time the children and elderly became most vulnerable without adequate health service. Infected wounds and respiratory problems occur in trapped victims. But, different from the tsunami that happened in Aceh Indonesia in 2004, many earthquakes in Indonesia did not kill victims massively unless there are bad housing construction in the area of earthquake.

Another example of natural disaster related to health problem is sudden flood. It may cause much death caused by trauma, and it also leaves some severe injury. Hypothermia and respiratory infection were usual but not epidemics. There are also problems in providing clean water supply leading to deterioration of sanitation causing an increase of enteric and other water related diseases, like common diarrhea.

In term of Indonesia experience when natural disasters happen, the primary problem is the need to rehabilitate the health services and facilities, intensify epidemiological surveillance and vector control, and increase the public awareness on the true danger of the situation. Based on those experiences, it is important to a high standard, and mitigation measures program in hospitals are vital for avoiding loss of patients and staff, ensuring that facilities and health services will function properly after disaster, and made victims always far away from the area of disaster.

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This article is based on a presentation made at the Pre-conference Seminar of the 27th CMAAO General Assembly, Taipei, Taiwan, R.O.C., on November 10, 2011.