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On 02 April, the UN General Assembly approved a resolution, the Global Solidarity to Fight COVID-19, calling for international cooperation and multilateralism in the fight against COVID-19. The resolution was initiated by Indonesia, Ghana, Liechtenstein, Norway, Singapore, and Switzerland, and co-sponsored by 188 Member States. The resolution delineates the need for international cooperation, information exchange and collaborative research to curb the spread of COVID-19. The resolution also includes the vital role of and appreciation for healthcare workers, medical professions, and researchers¹.

HIGHLIGHTS

- As of 09 April, the Government of Indonesia announced a total of 3,293 cases of COVID-19 with 280 deaths and 252 recoveries from across 33 provinces.
- On 02 April, the UN General Assembly approved a resolution, the Global Solidarity to Fight COVID-19, calling for international cooperation and multilateralism in the fight against COVID-19. The resolution was initiated by Indonesia, Ghana, Liechtenstein, Norway, Singapore, and Switzerland, and co-sponsored by 188 Member States. The resolution delineates the need for international cooperation, information exchange and collaborative research to curb the spread of COVID-19. The resolution also includes the vital role of and appreciation for healthcare workers, medical professions, and researchers¹.

Figure: Geographic distribution of confirmed COVID-19 cases in Indonesia, as of 09 April 2020.


• As of 06 April, the MoH had officially reported 95 fatalities related to COVID-19 in Jakarta since the beginning of March. In the same timeframe, the Jakarta Parks and Forestry Agency has reported 639 burials that followed the protocols for burial of suspected or confirmed COVID-19 cases². The agency, however, does not have data on how many of these were confirmed COVID-19 cases. The head of the COVID-19 Task Force said that many suspected cases were under surveillance or general monitoring and had died before their test results came back.

![Graph showing spike in number of burials in Jakarta in March 2020. Source: Reuters](image)

Figure: Graph showing spike in number of burials in Jakarta in March 2020. Source: Reuters

• As reported by the media, the figure above shows that the number of burials in Jakarta – nearly 4,400 – in March 2020 was 1,300 more than the number of burials in March 2019³. It is abnormally higher than any other month. These additional deaths may need to be further investigated, to confirm or exclude COVID-19 related deaths.

• On 07 April, the MoH approved the Jakarta administration’s proposal to implement large-scale social restrictions in the capital to reduce the transmission of COVID-19. The restrictions are regulated under the 2018 Health Quarantine Law, which stipulates suspending schools and offices, limiting religious activities and restricting gathering in public places. The implementation is to begin on 10 April for an initial duration of two weeks⁴.

• On 07 April, Indonesian Foreign Minister Retno Marsudi informed the Commission I of the House of Representatives that eight countries have provided assistance to Indonesia to curb COVID-19. The eight countries - namely Australia, China, Japan, Singapore, the Republic of Korea (ROK), the United Arab Emirates, the United States of America, and Vietnam - have primarily provided medical devices and supplies including personal protective equipment (PPE) to Indonesia⁵.

WHO has shared the COVID-19 Essential Supplies Forecasting Tool (COVID-ESFT), including its user manual available in Indonesian, with the Ministry of National Development Planning, the National Board for Disaster Management, and the Centre for Health Crisis Management, MoH. The tool is used to forecast the needs for PPE, diagnostic test kits, medical equipment for case management, essential drugs for supportive care, and other supplies and consumables.

On 03 April, WHO shared the draft national COVID-19 response plan, containing technical inputs of WHO and scenarios, with the MoH and the National Board of Disaster Management. Provincial and district level plans will need to be developed. It is important that a clear response plan is approved and implemented timely at national, provincial and district levels.

The Centre for Health Crisis Management organized two virtual meetings: 1) on 04 April, a technical team from WHO presented the COVID-ESFT to the provincial-level health officers and healthcare workers; and 2) on 08 April, WHO, the MoH and the COVID-19 Task Force discussed the harmonized use of the tool amongst ministries.

WHO, in collaboration with the Indonesian Epidemiology Association, is in discussion with the MoH to harmonize the COVID-19 surveillance system to improve information sharing and management, data analysis, and planning and operations of the COVID-19 response.
As of 05 April, the Indonesian government, with support from WHO, set up a COVID-19 surveillance system in Wisma Atlet in North Jakarta. This is the largest emergency hospital for COVID-19 in the country, with a capacity for 3 000 inpatients as reported by the MoH on 03 April. A system for data sharing and notification has been established as Wisma Atlet receives patients from outside Jakarta.

WHO is supporting the MoH to strengthen COVID-19 surveillance in the following provinces: Lampung, North Kalimantan, North Maluku, Papua, South Sulawesi, West Nusa Tenggara, and West Papua.

Graph: Cumulative number of cases, deaths and recoveries by reporting date
Source: https://www.covid19.go.id/situasi-virus-corona/

CASE MANAGEMENT

On 01 April, a WHO ‘oxygen capacity’ survey tool was disseminated in Indonesian through the MoH and the Indonesian Hospital Association to collect crucial information on the capacity of healthcare facilities to provide key clinical interventions for COVID-19 patients with severe or
critical respiratory distress. Subsequently, on 07 April, WHO disseminated the main messages and recommendations to improve national oxygen supply capacity to the stakeholders.

- The MoH and provincial governments are increasing the number of hospitals to manage the COVID-19 response. The MoH previously appointed 132 hospitals to manage severe and critical cases (secondary-level referral hospitals), while the Provincial Health Authorities appointed 390 hospitals in which mild to moderate cases receive care (first-level referral hospitals). As of 06 April, an additional 102 hospitals have been appointed as first-level referral hospitals, bringing the total number of first-level referral hospitals to 492. It is critical to ensure that all these hospitals have adequate health workers, PPE, medical equipment and supplies to be able to cope with the increasing patient load as forecasted under draft planning scenarios.

- WHO guidance on clinical management of Severe Acute Respiratory Infection (SARI) in COVID-19 patients has been translated to Indonesian and widely shared and published on the website. The MoH, in collaboration with WHO and relevant professional associations, plans to prepare a set of national guidelines on case management.

**INFECTION PREVENTION AND CONTROL (IPC)**

- On 07 April, WHO virtually joined the Water, Sanitation and Hygiene (WASH) Coordination Meeting, facilitated by UNICEF and the National Board of Disaster Management. The agenda covered a discussion on improvement of hand washing practices at community level, waste management in healthcare facilities and key issues regarding disinfection practices.

- On 08 April, WHO joined the Bureau of International Cooperation, MoH, and UNDP to participate in a meeting hosted by the Directorate of Environmental Health, MoH. The meeting discussed a collaborative strategy for medical waste management.

**LABORATORY**

- Early testing to confirm and isolate confirmed cases continue to be a limitation and as of 09 April, only 16 848 suspected cases have been tested using PCR tests⁷.

- To respond to the increasing demand of PCR testing, the MoH released Decree 234/2020 on 07 April. As per the decree, all public and private hospital and clinic laboratories, and microbiology and virology laboratories can become eligible for PCR testing for COVID-19 given they meet the standard requirements.

- To strengthen the capacity of case finding and case management, the MoH has developed an action plan to provide real time point of care polymerase chain reaction (POC RT-PCR) testing for the COVID-19 referral hospitals. GeneXpert® machines for Tuberculosis (TB) testing exist in 305 out of the 492 first-level referral hospitals. From 24 March to 06 April, a detailed mapping of the capacity and bio-safety status of each of these 305 hospitals was completed, including a calculation of needs for Xpert® Xpress SARS-CoV-2 cartridges and preparations of a training plan. The report was presented on 08 April by the Directorate of Communicable Disease Control and Prevention.

⁷ [https://infeksiemerging.kemkes.go.id/]
WHO shared the updated guidance to include specifications on usage and storage conditions for sterile saline as a substitute for viral transport media with the National Institute of Health Research and Development (NIHRD).

A Laboratory Coordination Meeting, facilitated by the MoH, took place on 08 April. Participants, including WHO, other UN agencies and partners, shared their plan to strengthen the capacity of laboratories. As of 06 April, 42 of the 48 appointed laboratories (i.e. 87.5%) have been conducting PCR testing or sample collection for COVID-19.

MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT (MHPSS)

On 03 April, WHO and the MoH, in collaboration with relevant professional organizations, initiated the identification of the existing MHPSS hotlines that are nationally available to respond to anyone who needs assistance. The hotlines are managed by the professional organizations.

COMMUNICATIONS

On 03 April, WHO shared a press release from the Regional Office titled “COVID19: WHO calls for stronger whole of society approach in South-East Asia Region” with the media.

On 07 April, an opinion piece from WHO Regional Director, Poonam Khetrapal Singh, was published for World Health Day in acknowledgement of the role that healthcare workers, in particular nurses and midwives, play in the COVID-19 response. The article, titled ‘Celebrate, strengthen, support nursing, midwifery workforce’ followed one day after publication of an opinion piece by the Secretary-General of the United Nations, António Guterres, calling for a united approach in fighting the virus.

On 08 April, WHO translated into Indonesian the guidance on the use of masks for people in the context of COVID-19. The document was published on the website and widely shared with relevant partners and the Risk Communication and Community Engagement Task Force.

RESEARCH

As of 08 April, approvals from the national research ethics committee and the national regulatory authority have been obtained for the international clinical trial, SOLIDARITY Trial. The trial will examine the effectiveness of: 1) remdesivir; 2) chloroquine or hydroxychloroquine; 3) lopinavir with ritonavir; and 4) lopinavir with ritonavir plus interferon. The National Agency of Drug and Food Control (BPOM) is supporting the timely issuance of drug importation licenses.

WHO is supporting the NIHRD with the recruitment of hospitals and identification of site principle investigators (PIs). As of 08 April, 20 hospitals confirmed participation in the trial and
site PIs have received a preliminary introduction to the trial. WHO is currently planning a virtual training on the randomization system and website reporting.

PARTNER COORDINATION

• On 03 April, WHO joined a coordination meeting of development partners. Partners mainly discussed ways to ensure a coordinated approach to support the governments COVID-19 response, with a particular focus on improving surveillance and testing capacities.

• On 08 April, WHO joined a meeting with the UN Office for Coordination of Humanitarian Affairs and the Resident Coordinator’s Office for discussion on the UN-wide response plan for COVID-19 in Indonesia. WHO will take the lead for the health sector and will also participate in the risk communication and multisectoral response sectors.

• On 09 April, WHO participated in the third UN in Indonesia Townhall Meeting, which virtually connected over 500 participants from UN organizations across the country. The WHO Representative to Indonesia provided an update on the COVID-19 pandemic and responded to many questions of participants.

FUNDING

• Overall funding request for WHO operations and technical assistance is US$ 18 million, based on estimated needs as of April 2020.

For further information please feel free to contact: seinocomm@who.int
Online WHO COVID-19 courses:

- Clinical management of Severe Acute Respiratory Infections
- Health and safety briefing for respiratory diseases - eProtect
- Infection Prevention and Control

Trainings on COVID-19 are available in other languages at OpenWHO, a knowledge-transfer platform offering free online courses.

WHO technical guidance:

- Advice on the use of masks
- Home quarantine
- Investigation of cases and clusters
- Clinical management of Severe Acute Respiratory Infections

Media statements:

- Confirmed COVID-19 cases
- Dos and don’ts of mask use
- Risk factors for vulnerable populations
- Dual language online training

Infographics:

- FIFA campaign
- Mental health
- Community transmission
- Low risk is not no risk
- Coping with stress
- When and how to use a mask
- Getting workplace ready
- Social distancing
- Be Ready Campaign
- World Health Day
- Noncommunicable diseases
- Pregnancy, childbirth and breastfeeding

A selection of myth-busters, including:

- Can an ultraviolet disinfectant lamp kill the new coronavirus?
- Can spraying alcohol or chlorine all over your body kill the new coronavirus?
- Does smoking have an effect on COVID-19?
- Does drinking water alleviate a sore throat and protect against COVID-19?
- Can COVID-19 spread through faeces?
- Is the new coronavirus airborne?
- Can pets at home spread COVID-19?
- Does the new coronavirus affect older people or are younger people also susceptible?