

SEVEN MONTHS  
AFTER GOING  
TO WORK FOR  
USAID/INDONESIA,  
LISA KRAMER  
(M.P.H. '03) FOUND  
HERSELF ASSISTING  
IN THE RECOVERY  
FROM THE WORLD'S  
LARGEST NATURAL  
DISASTER.



# TSUNAMI

## *An Alum's Up-Close Experience*

**“The oppressive poverty in which young, old, addicts, fruit peddlers, pregnant women, shopkeepers and beggars exist continues unabated, and requires the same effort that is going into the tsunami relief and rebuilding.”**

—Lisa Kramer, M.P.H. '03

**In May 2004,** Lisa Kramer (M.P.H. '03) boarded a plane

headed for Jakarta to begin her job as a Johns Hopkins University Health and Child Survival Fellow posted to the U.S. Agency for International Development (USAID)/Indonesia. It was the fulfillment of a goal she had held since graduating from the UCLA School of Public Health the previous year. “I wanted to work in a developing country,” Kramer says. “Having lived in Papua New Guinea as Peace Corps volunteers, my husband and I wanted to return to development work and have our 8-year-old daughter and 5-year-old son experience life in a different culture.” Kramer’s main responsibilities were to include HIV/AIDS, tuberculosis and malaria prevention. She couldn’t know that in late December, the world’s most devastating natural disaster would add a new set of demands.

After seven months of intense work in Jakarta, Kramer was ready to spend a week’s vacation with her family in southern Thailand. They flew to Malaysia on the evening of December 25. The next morning, they boarded a plane bound for the Thai city of Phuket, their last stop en route to Khoa Lak, an hour to the north. About 15 minutes before landing, the pilot informed them that the airport had just closed because of an earthquake. After circling, the plane returned to Malaysia. Kramer and her family never made it to Phuket, and it would be a week before they could get a flight back to Jakarta. Kramer returned to an overwhelming situation. “Very little information was available as to what was happening in the Aceh province because the tsunami had wiped out all of the land

lines and most of the mobile phone towers,” she says. “Government officials and staff were killed in large numbers, including more than two-thirds of the Ministry of Health staff. Few non-governmental organizations were active in Aceh after years of separatist conflict.”

USAID began emergency humanitarian assistance on December 26. With \$2.3 million in immediate U.S. government support, the Indonesian Red Cross provided shelter, water, food and medical services. With another \$3.5 million, the International Organization for Migration began transporting and delivering relief supplies such as water, food, plastic sheeting, generators, fuel and medicine to affected areas in Aceh and North Sumatra. Later, two USAID-chartered planes delivered thousands of water containers, jerry cans, and other relief supplies to Medan, including plastic sheeting to shelter more than 5,000 families. USAID and U.S. Embassy personnel on the ground in Banda Aceh and in Medan coordinated closely with the U.S. Military on logistics, especially to prioritize the delivery of relief items. The Indonesian Military assisted in loading all relief planes and accompanied U.S. helicopter sorties and trucks delivering relief supplies.

In the first few weeks, the area’s population experienced a small increase in tetanus and measles. “Some people had been exposed to tetanus through injuries sustained during the tsunami and others suffered puncture wounds while combing through the wreckage searching for survivors or salvageable materials,” Kramer explains. Immunizations had not been well maintained in Aceh, so an immunization campaign began, mainly for measles, and serum for tetanus was shipped to the area.

USAID/Indonesia is now working toward the long-term recovery and reconstruction in Aceh and North Sumatra. Sanitation and clean water remain critical issues. “We all know that in an emergency, the top priorities of water, food and sanitation can’t be emphasized enough,” Kramer says. More than two months after the tsunami, some camps were still without latrines. On the positive side, Kramer notes, the provision of relief and medical assistance to Aceh immediately following the tsunami helped to prevent the disease outbreaks that many feared could have caused thousands of additional deaths.

The USAID has supported tsunami relief in many ways, Kramer reports, ranging from flying in and training midwives and coordinating the delivery of relief supplies to supporting a reference diagnostic laboratory providing mobile clinics. In the first few weeks after the disaster, Kramer worked with USAID/Indonesia health staff to coordinate what resources she could gather from existing programs, such as transferring 10,000 insecticide-treated bed

nets from the malaria program to Aceh and arranging for medical staff from the HIV/AIDS program to go on temporary duty in Aceh.

Kramer is quick to point out that the USAID was supporting large health programs in Indonesia prior to the tsunami, and the needs that prompted those programs have not disappeared. In February, she spent an evening with outreach workers in a slum area along the railroad tracks of central Jakarta. Kramer and colleagues talked with injecting drug users about the dangers of HIV infection from sharing needles, and passed out bleach and referrals for heroin detox facilities. “One young man described to me his five attempts to stay off of heroin,” Kramer recalls. “Unfortunately, the lack of hope for anything better in his makeshift community and the escape that heroin provides always draw him back.”

Thus, in addition to taking on new demands related to the recovery, Kramer has continued to focus on HIV/AIDS, TB, and malaria programming. “The oppressive poverty in which young, old,

**Kramer (second from right), shown here assessing drug management at a Ministry of Health warehouse as part of a TB monitoring mission, began working for USAID/Indonesia in May 2004, a year after completing the school’s M.P.H. program.**



addicts, fruit peddlers, pregnant women, shopkeepers and beggars exist continues unabated, and requires the same effort that is going into the tsunami relief and rebuilding,” she says. “The need in Aceh is tremendous and people from all over the world have risen to the challenge. Yet, this tsunami should serve as more than a call for an early warning system and for rebuilding devastated communities. It should be a call to assist *all* in need.”