



World Health Organization

Indonesia



QUARTERLY REPORT

WHO HEALTH EMERGENCIES

October – December 2025



Overview

This quarterly report provides an update on select zoonoses, emerging infectious diseases (EIDs) and emergencies in Indonesia along with WHO Health Emergencies (WHE) team activities.

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Overview

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National influenza positivity rate by week

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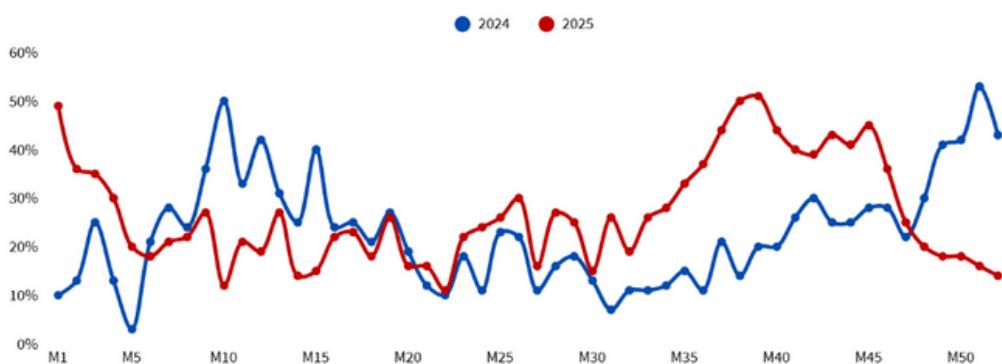
Disaster in Indonesia

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Highlighted Activities

WHE activities during October - December 2025

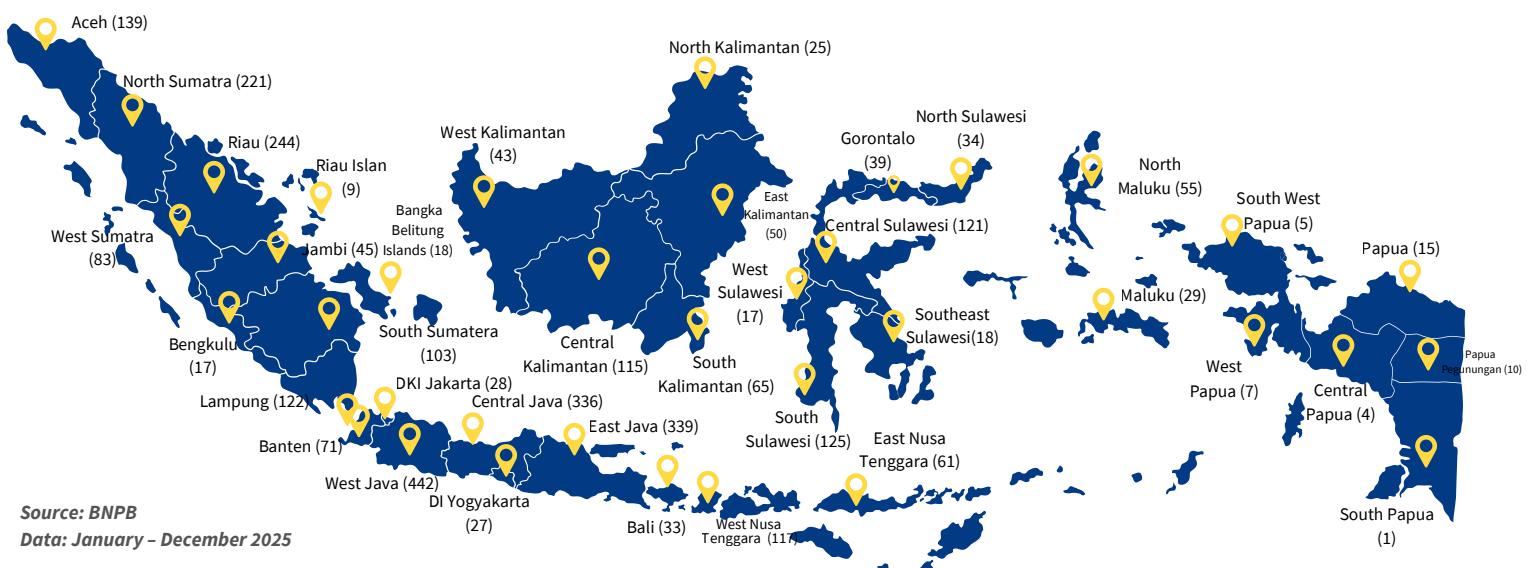
National influenza positivity rate by week



Source: WHO Global Influenza Surveillance and Response System (GISRS).
As of December 2025, by week.

During October–November 2025, influenza activity increased more rapidly than in the same period of the previous year, leading to heightened public and media attention, including concerns related to the predominance of influenza A(H3N2) during this period. By November 2025, however, influenza positivity rates showed a declining trend. The viruses circulating remain seasonal influenza strains, and genetic changes are expected as part of the natural evolution of influenza viruses. Current data do not indicate an increase in disease severity or hospital admissions, including those associated with A(H3N2). With technical support from WHO Indonesia, strengthened surveillance and laboratory systems have enabled interpretation of trends and supported evidence-based risk communication.

Disaster in Indonesia 1 Jan–31 Dec 2025



3.233

Disasters in
January – December
2025



250
Affected Health
Facilities



10.092.416
Affected Population
& Displaced

1 623
Death

220
Missing

5.713
Injured



TOP 3 Disaster

1.652

Floods

714

Extreme weather

546

Forest Fire

HIGHLIGHTED ACTIVITIES

STRENGTHENING INTEGRATED INFLUENZA SURVEILLANCE AND PANDEMIC PREPAREDNESS

WHO Indonesia supported influenza surveillance and pandemic preparedness through the following key activities in October to December:

The Indonesian National Influenza Centre (NIC) supports global influenza surveillance through specimen shipment

With support from the WHO Shipping Fund Project (SFP), the Indonesian NIC successfully completed the shipment of influenza specimens to the WHO Collaborating Centre for Reference and Research on Influenza at the Victorian Infectious Diseases Reference Laboratory (WHO CC VIDRL) in Melbourne, Australia. This shipment represents an important contribution to global-influenza surveillance and timely virus characterization ahead of a vaccine-composition meeting. This action was undertaken through coordination between the NIC, WHO, the WHO Global Influenza Programme and WHO CC VIDRL, demonstrating effective WHO-supported collaboration among national and global partners to sustain Indonesia's contribution to the Global Influenza Surveillance and Response System.



Indonesia NIC preparing influenza specimens for shipment to the WHO CC in Melbourne, with support from the WHO Shipping Fund Project (SFP). Credit: NIC

WHO technical support for influenza-like illness (ILI)–severe acute respiratory syndrome (SARI) surveillance strengthening

WHO spoke in national meetings on strengthening ILI surveillance at PoEs and integrated ILI-SARI surveillance, providing global influenza updates, technical guidance and strategic directions to support early detection and rapid response to potential outbreaks in Indonesia. These activities formed part of a broader series of initiatives to strengthen ILI and SARI surveillance through both sentinel systems and digital surveillance tools. These activities were led by the MOH and funded by United Nations Development Programme (UNDP).



WHO Indonesia delivered presentation regarding ILI and SARI surveillance. Credit: PHEOC MOH / Anisa Febriana

STRENGTHENING INTEGRATED INFLUENZA SURVEILLANCE AND PANDEMIC PREPAREDNESS

Hospital pandemic-preparedness and infectious-disease management guidelines

WHO supported the development and refinement of hospital pandemic-preparedness and infectious-disease management guidelines by providing technical inputs in keeping with the Pandemic Preparedness and Resilience for Emerging Threats (PRET) framework. These inputs contributed to finalizing national hospital preparedness for Public Health Emergency of International Concern (PHEIC) and alert guidelines. The process was led by the RSPI Prof. Dr. Sulianti Saroso Hospital. The hospital is the national referral hospital and centre of excellence for infectious diseases.



WHO Indonesia delivered presentation regarding pandemic preparedness and emerging infectious disease. Credit: WHO Indonesia / Resty Arms

EMERGENCY PREPAREDNESS AND CRISIS MANAGEMENT

Development and finalization of health emergency operations centre (HEOC) operations guidelines

WHO supported the development and finalization of HEOC operations guidelines by providing technical input during drafting and review. The support helped clarify HEOC activation procedures, coordination arrangements, roles and responsibilities, and information management. The result was more consistent and coordinated emergency-response operations.

Strengthening subnational preparedness through district capacity-assessment tools

WHO provided technical support to the Centre for Health Crisis in reviewing and developing capacity-assessment tools on preparedness at the province level. The support consisted of technical discussions and inputs on assessment domains, indicators and scoring approaches, as well as practicality and consistency of the tools for use at the subnational level. The revised tools enable more-systematic assessment of preparedness and response capacities and provide a clearer basis for planning, prioritization and monitoring for local governments.

EMERGENCY PREPAREDNESS AND CRISIS MANAGEMENT



Muhammadiyah EMT has officially become Indonesia's first WHO-classified Emergency Medical Team.
(Credit: WHO Indonesia / Lintang Sibarani)

Enhancing emergency readiness through strategic health supply stockpiling

WHO supported MoH efforts to strengthen strategic reserve of health supplies and emergency logistics to enhance readiness for public health emergencies. The support focused on improving planning and coordination for stockpiling, storage and deployment of essential health supplies, as well as logistics arrangements. Ultimately this will help ensure timely availability and distribution during emergencies, contributing to more effective and coordinated response operations.

Strengthening emergency medical team (EMT) capacity and regional engagement

WHO Indonesia supported a range of EMT activities to strengthen national capacity and regional engagement. This included technical support for the classification of the Muhammadiyah Disaster Management Center (MDMC) EMT as WHO Classified EMT Type 1 Fixed. WHO Indonesia helped ensure alignment of SOPs with WHO EMT minimum standards. It also facilitated pre-classification assessments in coordination with regional and global EMT networks. Ongoing mentorship was provided for type 2 EMT surge health workers (or tenaga cadangan kesehatan/TCK) under MoH and for other EMTs undergoing classification, such as MER-C Indonesia and the Indonesian Red Crescent (BSMI). In addition, a presentation on the WHO Global EMT Initiative, including EMT classification, was delivered by a representative of the WHO Regional Office for the Western Pacific at the Indonesia ADMM-Plus EWG on Military Medicine. These engagements improved understanding of global EMT standards, strengthened operational readiness and facilitated regional knowledge exchange on EMT deployment and coordination.

LABORATORY SYSTEM STRENGTHENING

Building stronger global health security through interconnected laboratory networks

WHO Indonesia participated in and supported a technical meeting with MoH and the ASEAN Centre for Public Health Emergencies and Emerging Diseases (ACPHEED), along with engagements regarding the development of the ASEAN Laboratory Network (ALN). The aim is to strengthen national and regional laboratory networks. Discussions and activities focused on enhancing coordination, information-sharing, pathogen-detection capacity, and biosafety and biosecurity practices to support timely detection, confirmation and response to priority public health threats as per national health-security priorities, regional preparedness frameworks and IHR core capacities.

WHO Indonesia also delivered a technical presentation on the Global Framework for Health Laboratory Networks, which highlighted key principles for building interconnected, quality-assured and resilient laboratory systems. It also emphasized the importance of laboratory collaboration for early detection, data sharing and coordinated response. Overall, these engagements contributed to improved laboratory practices, strengthened coordination among ASEAN member states, and reinforced regional and global health-security preparedness.



Consultative meeting on the development of the ASEAN Laboratory Network. Credit: MoH



Demonstration session on proper packaging and handling of infectious substances in accordance with international transport standards during the training at BBPK Ciloto. Credit: MoH/UNDP.

Induction of the national reference laboratories to the WHO Coronavirus Network (CoViNet)

WHO supported the successful application of the national reference laboratories to CoViNet, strengthening Indonesia's integration into the global coronavirus laboratory network. The induction enhances national capacities for genomic and virological surveillance, promotes timely data-sharing and collaboration, and reinforces alignment with IHR core laboratory-capacities. These outcomes contribute to improved preparedness and response to current and emerging coronavirus threats at national, regional and global levels.

Improving the capacity of infectious substance shipment

WHO supported MoH in conducting a training on the shipment of infectious substances. Funded by the UNDP and attended by 60 participants from 51 port health authorities, the training was conducted in BBPK Ciloto health training centre on 10–14 November 2025. The training aimed to strengthen the capacity and competency in handling, packaging, labelling, storing and shipping of infectious specimens. It put emphasis on the safety, accuracy and compliance with national and international standards, alongside adherence to biosafety and biosecurity principles under IHR.

INTERNATIONAL HEALTH REGULATIONS (IHR)

Strengthening national IHR governance and legal framework alignment

WHO participated in the webinar titled Designating National International Health Regulations (IHR) Authorities and provided updates on the status of national IHR authority designation while discussing potential legal implications for countries across the Asia-Pacific region. In collaboration with the Indonesian Ministry of Health (MoH), WHO supported policy dialogue and alignment of national governance arrangements with IHR.

WHO and MoH also took part in the Asia Pacific Health Security Framework (APHSAF) stakeholder meeting on 25–27 November 2025. The meeting aligned regional priority actions for health security as well as strengthening partnership and collaboration among countries. It discussed the evolving health security landscape, including development surrounding the WHO pandemic agreement, IHR amendment and regional operational readiness. Indonesia shared its experience on emergency workforce mechanism.



Indonesia engaged in the WPRO regional virtual simulation exercise, 3 December 2025. Credit Ministry of Health.

IHR national focal point (NFP) communication exercise to strengthen multisector collaboration

WHO facilitated Indonesia's participation in the Crystal exercise on IHR NFP communication on 3 December 2025, together with 30 countries in the Western Pacific Region. The exercise demonstrated the role of IHR NFPs in early detection, risk assessment and multisectoral coordination in responding to potential public health emergencies international concern (PHEICs). Lessons learned from the exercise informed the NAPHS.

Supporting national action plan for health security (NAPHS) finalization and SPAR 2025 reporting

WHO supported a NAPHS finalization meeting and the collection of inputs for SPAR 2025 reporting, providing technical guidance to ensure alignment between national health security priorities and global IHR monitoring frameworks. As a result, Indonesia strengthened multisectoral alignment, improved reporting quality and completeness, and enabled evidence-based prioritization of actions. These efforts aim to accelerate implementation of health security capacities and enhance national readiness for public health emergencies.



NAPHS and SPAR hybrid meeting, 10-12 November 2025 to finalize NAPHS document and collecting inputs for SPAR 2025. Director Surveillance and Health Quarantine opened the meeting. Credit: WHO Indonesia / Endang Widuri

INTERNATIONAL HEALTH REGULATIONS (IHR)

Enhancing points of entry (PoE) preparedness and cross-border coordination in ASEAN

WHO supported a series of ASEAN consultative engagements on PoEs in September to strengthen capacities for public health emergency detection, assessment and cross-border coordination in alignment with IHR. This included technical presentations and facilitation on the IHR PoE capacity assessment tool, grounded in the Joint External Evaluation and State Party Annual Reporting (SPAR) frameworks. It aimed to guide evidence-based capacity assessment and planning. The support extended to the ASEAN consultation meeting on IHR core capacities and cross-border coordination at PoEs on 28–30 October 2025, where WHO contributed to regional dialogue, knowledge exchange and the promotion of harmonized approaches to PoE preparedness and coordinated response among ASEAN member states.

Strengthening ship sanitation and PoE core capacities compliance

WHO Indonesia facilitated a virtual training on ship sanitation inspection and PoE core capacities and gave technical guidance to strengthen compliance with the IHR on 9–11 December 2025. Delivered by WHO Collaborating Centre (WHO CC) for International Health Regulation at PoEs under Department of Health Quarantine, General Administration of Customs of the People's Republic of China, the training enhanced national and subnational capacities to conduct standardized ship sanitation inspections, improved understanding of IHR core requirements at PoEs, and supported more timely detection, assessment and management of public health risks associated with international conveyances.

Field Epidemiology Training Network (FETN)

In the ASEAN FETN meeting on 28 November 2025, WHO Indonesia discussed potential collaboration to enhance field epidemiology training programme (FETP) in ASEAN, including capacity building, technical and learning exchange, and FETP supervision and mentoring. This involvement is part of the regional roadmap to advance field epidemiology capacities in Southeast Asia in 2025–2029. It also aligns with regional workforce capacity-building and WHO Western Pacific field epidemiology fellowship programme under the Global Health Emergency Corps framework.



WHO in collaboration with Department of Health Quarantine, General Administration of Customs of the People's Republic of China (GACC). Credit: WHO Indonesia / Endang Widuri



WHO as resource person and facilitator in the ASEAN consultative meeting on IHR core capacity and cross border coordination at Point of Entry, 28-30 October 2025. credit: Ministry of Health

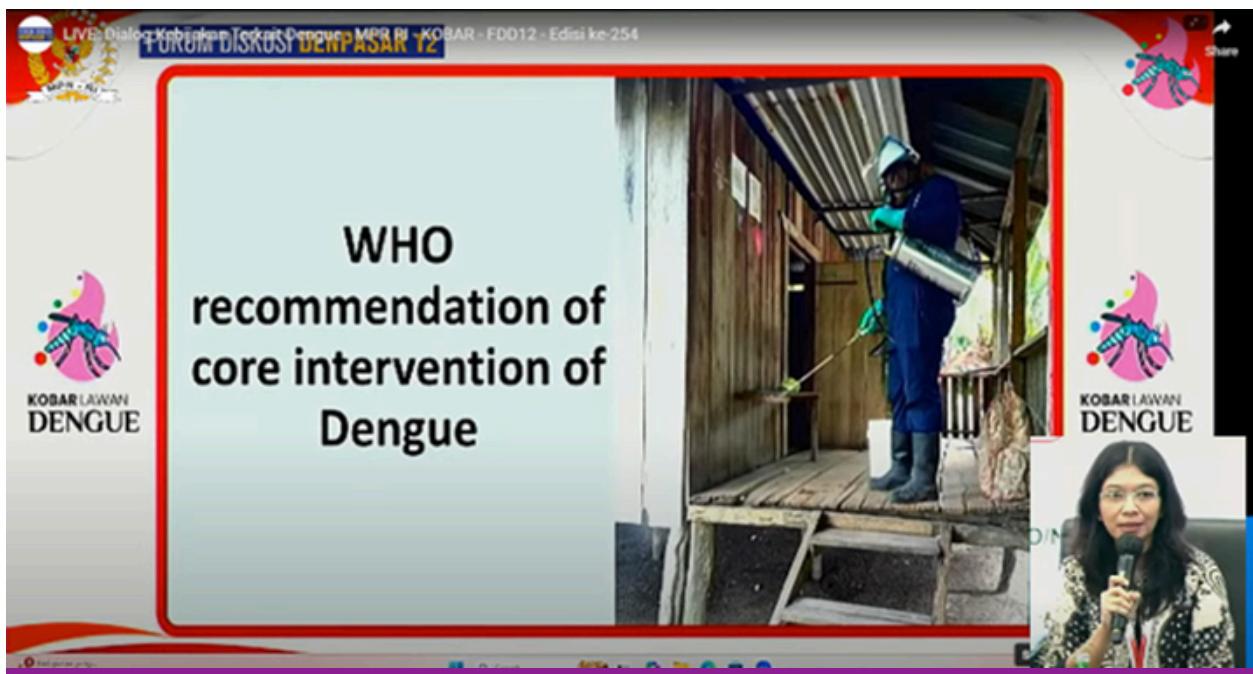


WHO presentation on support for strengthening field epidemiology training programme in the region during FETN meeting Credit: WHO Indonesia / Endang Widuri

ZOONOSES AND ONE HEALTH

Integrated One Health approaches and policy dialogue for dengue and climate-sensitive arbovirus control

WHO supported the development of the national dengue strategic plan and the climate–health Indonesia concept notes by advancing integrated One Health approaches to vector surveillance and control. The work strengthened multisectoral coordination and enhanced the use of disease, vector and climate information for evidence-based planning. It also aligned dengue and arbovirosis prevention and control strategies across human, animal and environmental health sectors. In parallel, WHO facilitated policy dialogue on dengue through Koalisi Bersama (Kobar) or the Coalition against Dengue platform, promoting multisectoral collaboration and public–private partnerships to support coordinated implementation and resource mobilization. Importantly, it pushed sustainable action to reduce dengue transmission and strengthen national preparedness against and response to climate-driven vector-borne disease risks.



Thank you



**For more
information**

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