
Food and medical aid for flood-affected communities in Aceh Tamiang

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Abstract

The emergency response period following a flash flood holds a strategic role in ensuring the survival of survivors and preventing the decline of public health status. This community service program aims to assist flood victims in Aceh Tamiang Regency by providing immediate logistics in the form of ready-to-eat food and basic medical packages to meet urgent nutritional and health needs. The activity was conducted on December 16 and 22, 2025, using a rapid response approach centered at evacuation points. The method used was participatory distribution with priority given to vulnerable groups. Results show that the program succeeded in distributing nutritional support that met the immediate energy requirements of survivors and effectively improved access to essential medicines. The program also fostered social support among the displaced population through active coordination with local health posts. As a significant contribution, this activity establishes an integrated emergency logistics distribution model that combines nutritional fulfillment and basic medical intervention to minimize post-disaster morbidity risks in isolated areas.

Keywords: Community Service; Emergency Response; Flash Flood; Food And Medical Aid; Aceh Tamiang

INTRODUCTION

Aceh Tamiang Regency is one of the regions in Aceh Province that is geographically located in the downstream part of a watershed, making it highly susceptible to hydrometeorological disasters. In late November 2025, this region was hit by a destructive flash flood triggered by extreme rainfall, resulting in damage to the Trans-Sumatran highway infrastructure, which severed logistics supply chains. This condition trapped survivors in a food crisis and acute shortages of medicines, which, if not addressed immediately, would drastically decline nutritional and health statuses (Muzli & et al., 2021). The primary problem in the field was the disruption of access to basic needs, triggering potential starvation and the spread of infectious diseases due to poor sanitation at evacuation centers.

In crisis management, the human body requires immediate energy intake to prevent the weakening of the immune system in damp post-disaster environments (Pranata & Sary, 2019). However, community-level logistics preparedness is often unorganized, leading to uneven distribution of aid (Hafid & et al., 2022). Beyond nutritional issues, the emergence of infectious disease outbreaks in evacuation points has become a serious threat often overlooked by stakeholders (Sari, 2023). This indicates a gap between the survivors' urgent needs and the speed of available targeted medical and food assistance. Based on these problems, this community service program aims to implement hot meal assistance and essential medical packages for flood victims in Aceh Tamiang Regency to mitigate the adverse impacts of the post-disaster during the critical emergency response period.

RESEARCH METHODS

This community service activity adopted a rapid response, participatory approach with descriptive qualitative analysis (Hidayat, 2020). The primary subjects were residents affected by the flash flood in Aceh Tamiang Regency, focusing on vulnerable groups at evacuation points. The materials used included emergency nutrition logistics and essential medical packages (antiseptics, skin ointments, analgesics, and vitamins). The program was implemented in two stages on December 16 and 22, 2025. The sampling technique used was purposive sampling, prioritizing the elderly, children, and pregnant women. Data were collected through participant observation and brief in-depth interviews with post coordinators. Data analysis was conducted using a qualitative descriptive analysis model to evaluate the suitability of aid with actual field needs, referring to emergency logistics management standards (Hafid & et al., 2022).

RESULTS AND DISCUSSION

The implementation of the community service program in Aceh Tamiang resulted in three primary outcomes that addressed both the immediate survival and the long-term health recovery of the flood survivors. The following sections detail these results:

1. Emergency Logistics Distribution and Nutritional Stabilization

The first phase of the activity, conducted on December 16, 2025, focused on stabilizing the nutritional status of survivors through the distribution of ready-to-eat meals and clean water. During the initial period after the flash flood, local infrastructure and community kitchens were paralyzed, leading to an acute food crisis. Providing hot meals is a critical intervention to prevent physical exhaustion and maintain the metabolic stability of survivors in cold, post-disaster conditions (Pranata & Sary, 2019). The distribution was managed through a participatory system involving local village heads to ensure that aid reached the most isolated evacuation points. The statistical summary of the aid distribution during both phases is presented in Table 1.

Table 1. Recapitulation of Logistics and Medical Aid Distribution

No	Type of Aid	Unit	Phase I (Dec 16)	Phase II (Dec 22)	Total
1	Ready-to-Eat Meals (Rice Packs)	Portion	500	300	800
2	Basic Medical Packages	Pack	150	100	250
3	Hygiene Kits	Pack	50	200	250
4	Vitamins and Immune Supplements	Strip	200	300	500
5	Bottled Mineral Water (200ml)	Case	40	30	70

Source: Primary Data Processed (2025)

2. Post-Disaster Health Intervention and Environmental Sanitation

The second phase, carried out on December 22, 2025, shifted the focus toward preventive health measures as survivors began to return to their homes. As shown in Table 1, there was a significant increase in the distribution of hygiene kits and immune-boosting

vitamins during this period. This transition was necessary because the process of cleaning houses from contaminated flood mud significantly increases the risk of skin infections (dermatitis) and water-borne diseases (Sari, 2023). By providing 200 sets of hygiene kits and 300 strips of vitamins, the program effectively suppressed the incidence of secondary infections among the community. According to Tulalessy & et al. (2015), providing medical assistance and personal protective equipment during the recovery phase not only addresses physical health but also reduces the psychological stress of the victims.

3. Evacuation Posts as Integrated Assistance Coordination Centers

Through the implementation of this program, evacuation posts in Aceh Tamiang have transformed into integrated centers for aid coordination and community health monitoring (Hafid & et al., 2022). The post is no longer limited to being a temporary shelter but has evolved into a hub for managing social and medical resources for the flood-affected population.

The newly established coordination system between volunteers and village officials has designed a variety of productive distribution activities, such as health screening, data collection on vulnerable groups, and the formation of community-based logistics teams (Sumarto & et al., 2019). These activities position the evacuation post as a platform capable of driving the recovery process collectively and based on humanitarian values. With this function, the post has succeeded in creating a collaborative space among administrators, medical personnel, and survivors, thereby establishing an inclusive and equitable assistance ecosystem. In several locations in Aceh Tamiang, such as the emergency tents located on main village roads, these posts have served as the primary centers for culinary support and medical relief, ensuring that no family is left without essential supplies during the crisis period.



Figure 1. Preparation of ready-to-eat meals and medical logistics for flood survivors in Aceh Tamiang



Figure 2. Documentation of aid distribution at the Aceh Tamiang evacuation post

CONCLUSION

The food and medical assistance program for flood victims in Aceh Tamiang Regency has received a positive response, as reflected in the gratitude and resilience shown by the local community. The village officials and volunteers in Aceh Tamiang demonstrated strong motivation and commitment toward the relief activities conducted on December 16 and 22, 2025. Reviving the spirit of mutual cooperation (*gotong royong*) and rapid social response became the main focus of this community service program. The broader aim is to reestablish the evacuation post and local community centers as resilient hubs that can maintain public health and food security during crisis periods, given their potential to serve as effective centers for humanitarian empowerment.

The community service activities began with rapid health assessments and problem identification, followed by the distribution of immediate nutritional logistics, and then medical mentoring and sanitation accompaniment. Subsequent stages included the distribution of hygiene kits and a final monitoring and evaluation of the survivors' physical conditions. Through the provision of ready-to-eat meals, essential medicines, and hygiene education, participants gained valuable support, physical recovery, and a sense of social security amidst the disaster in Aceh Tamiang Regency.

For the sustainability of disaster resilience programs, collaboration and support are essential from multiple stakeholders, including the local government of Aceh Tamiang, health institutions, and universities, to ensure a more integrated and faster response system for future flood events.

REFERENCES

- Hafid, F., Nasrul, Gusman, Lisnawati, Amsal, Masudin, Ramadhan, K., Hamsiah, Zainul, & Candriasih, P. (2022). Bantuan Makanan 72 Jam Pertama Untuk Korban Banjir Bandang Desa Beka, Kabupaten Sigi Provinsi Sulawesi Tengah. *Poltekita: Jurnal Pengabdian Masyarakat*. 3(2): 266-274.

- Hidayat, A. (2020). *Manajemen Logistik dan Penanggulangan Bencana di Indonesia*. Jakarta: Kencana Publisher.
- Muzli, M., Ismail, N., & Yanis, M. (2021). Analisis Risiko Bencana Hidrometeorologi di Wilayah Pesisir Aceh. *Jurnal Meteorologi dan Geofisika*. 22(1): 45-58.
- Pranata, S. & Sary, N. M. (2019). Manajemen Pemberian Makanan Darurat pada Fase Tanggap Darurat Bencana. *Jurnal Kesehatan Masyarakat*. 7(2): 112-120.
- Sari, R. P. (2023). Dampak Psikologis dan Kesehatan Fisik Penyintas Banjir Bandang. *Jurnal Psikologi Terapan*. 5(1): 22-30.
- Sumarto, S., Radiati, A., & Listianasari, Y. (2019). Peningkatan Kapasitas Tenaga Penyelenggara Makanan Darurat Bencana melalui Penyuluhan di Desa Sukarasa, Salawu, Tasikmalaya. *Agrokreatif: Jurnal Ilmiah Pengabdian kepada Masyarakat*. 5(3): 266-274.
- Tulalessy, D., Dundu, A. E., & Munayang, H. (2015). Gambaran Tingkat Depresi Pada Warga Korban Banjir Bandang di Kelurahan Tikala Ares Kota Manado. *e-Clinic*. 3(3): 1-8.