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## Emergency Plan of Action Operation Update Indonesia: Earthquakes and Tsunami

 International Federation  
of Red Cross and Red Crescent Societies

<b>Emergency appeal n° MDRID013</b>	<b>Glide n°</b> <a href="#">EQ-2018-000156-IDN</a> ; <a href="#">EQ-2018-000135-IDN</a> ; <a href="#">EQ-2018-000127-IDN</a> ; <a href="#">EQ-2018-000122-IDN</a>
<b>EPoA update n° 6</b> <b>Date of issue: 16 November 2018</b>	<b>Timeframe covered by this update:</b> 28 September to 7 November 2018
<b>Operation start date:</b> 28 September 2018	<b>Operation timeframe:</b> 18 months <b>End date:</b> 30 January 2020
<b>Overall operation budget:</b> CHF 38.5 million (Lombok and Sulawesi); <a href="#">Donor response</a>	<b>Total DREF amount allocated:</b> CHF 1.25 million
<b>N° of people being assisted:</b> 160,000 (80,000 Lombok, 80,000 Sulawesi)	
<b>Red Cross Red Crescent Movement partners actively involved in the operation:</b> Indonesian Red Cross – Palang Merah Indonesia (PMI) works with the International Federation of Red Cross and Red Crescent Societies (IFRC) and the International Committee of the Red Cross (ICRC) as well as American Red Cross, Australian Red Cross, Canadian Red Cross, Danish Red Cross, Finnish Red Cross, Red Cross Society of China, Hong Kong branch of the Red Cross Society of China, Italian Red Cross, Japanese Red Cross Society, Korea National Red Cross, the Netherlands Red Cross, Norwegian Red Cross, New Zealand Red Cross, Spanish Red Cross, Swedish Red Cross, Swiss Red Cross, Qatar Red Crescent, Turkish Red Crescent, Singapore Red Cross and Malaysian Red Crescent Society.	
Japanese Red Cross, German Red Cross, Malaysian Red Crescent, Qatar Red Crescent and Turkish Red Crescent are contributing bilaterally to the response.	
<b>Other partner organizations actively involved in the operation:</b> Government of Indonesia, UNCHA, IOM, OFDA, ASEAN AHA Centre, and also the Governments of Australia, Canada, Italy, the Netherlands, New Zealand, Spain, Sweden, Switzerland, DG ECHO, OPEC's Fund for International Development (OFID), private donors from Germany, Ireland, the Netherlands and the US, Grab Ltd, and Intercontinental Hotel Group have also contributed financially to the response.	

*This operation update is issued to provide information on the current situation and response for the **Sulawesi earthquake and tsunami operation**. Information on this operation can also be found in [Go Platform](#).*

## A. SITUATION ANALYSIS

### Appeal History

-  **29 July 2018:** A 6.4 magnitude earthquake strikes off Lombok, province of West Nusa Tenggara, at 05:47h local time.
-  **31 July:** IFRC allocates CHF 211,569 from the Disaster Relief Emergency Fund (DREF) to enable PMI to meet the humanitarian needs of 1,000 households (4,000 people).
-  **5 August:** A second and stronger earthquake, of 7.0 magnitude and depth of 15km hits Lombok at 19:46h local time.
-  **7 August:** Emergency Appeal for **CHF 8.9 million** is launched to support PMI in providing assistance to 20,000 households for **18 months**. DREF loan is increased to a total of CHF 500,000.
-  **9 and 18 August:** New 5.9 and 6.4 magnitude earthquakes strike Lombok. According to BNPB, the four quakes killed more than 510 people, injured at least 7,100 others, and displaced more than 431,000 people.

- **21 September:** The Emergency Plan of Action (EPoA) for Lombok operation is issued.
- **28 September:** A major earthquake, of 7.4 magnitude, rocks Central Sulawesi at 17:02h, at a depth of 10km, followed by a Tsunami wave which mostly hit coastal areas of Donggala and Palu regencies.
- **29 September:** IFRC allocates CHF 750,000 from DREF, bringing the total DREF advance for this Emergency Appeal to CHF 1.25 million.
- **30 September:** Revised Emergency Appeal, incorporating the Sulawesi earthquake and tsunami, is issued, seeking **CHF 22 million** to enable PMI to deliver assistance to 40,000 households – 20,000 in Lombok and 20,000 in Central Sulawesi for **20 months**.
- **31 October:** The EPoA for Sulawesi operation is issued.
- **8 November:** The emergency appeal is further revised to include mid- to longer-term recovery needs in the affected areas as well investing in increased preparedness and resilience for both affected communities and local actors such as PMI's branches, seeking up to **CHF 38.5 million** to enable PMI to deliver assistance to 40,000 households – 20,000 in Lombok and 20,000 in Central Sulawesi for **30 months**.

## Description of the disaster

On 28 September 2018, a series of strong earthquakes struck Central Sulawesi Province. The strongest of which measured at 7.4 M earthquake and was just 10km deep with its epicentre in Donggala Regency, close to the provincial capital Palu. The earthquake triggered a tsunami whose waves reached up to three metres in some areas, striking Talise beach in Palu and Donggala. The earthquakes, tsunami and resulting liquefaction and landslides have caused significant damage and loss of life in affected areas.

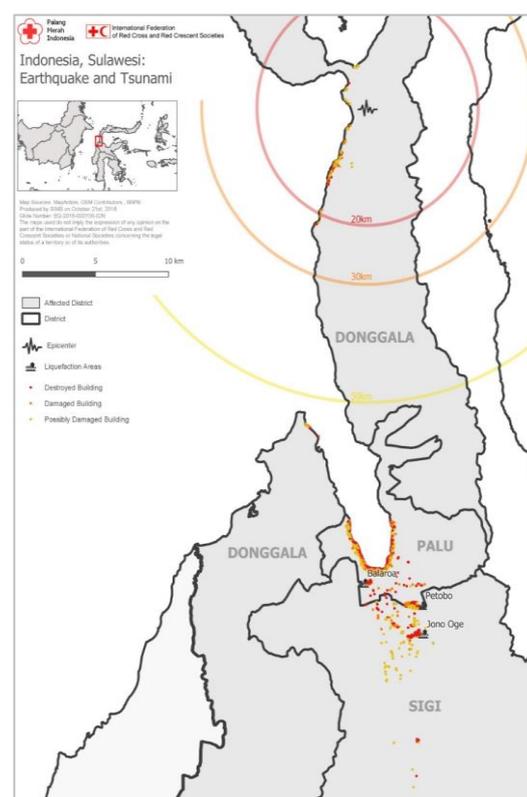
Areas affected by the earthquake, tsunami, landslides and liquefaction suffered extensive damage of buildings and infrastructure. An estimated 15,000 houses and land have been totally devastated. Some 17,000 houses are heavily destroyed but the sites may allow for reconstruction. Around 35,000 families whose houses have been damaged need emergency shelter support for a shorter term. More detailed assessments will have to further confirm these estimates. BNPB puts the total cost of material damages at USD 910 million.<sup>1</sup>

As of 7 November, more than 2,000 died in the disaster and a further 1,300 people are still missing. More than 4,400 have been seriously injured and more than 68,000 houses have been severely damaged or destroyed by the earthquake, tsunami or liquefaction, leaving over 170,000 people still displaced by the disaster and are staying in displacement sites with limited access to life-saving services.

### Details of impact in Central Sulawesi as of 7 November 2018 (Source: BNPB<sup>2</sup>)

Type	Figures
Fatalities	2,097
Injuries	4,438
Displaced	173,552
Missing	1,373
Houses damaged	68,451

The official emergency response period in Central Sulawesi ended on 26 October. The government also declared that from 26 October to 25 December, it will be a transition period. While the Government-led response will now progressively transition into the recovery and reconstruction phase, the focus will also simultaneously continue covering humanitarian needs and addressing complex challenges.



Map of affected areas by the earthquakes, tsunami and liquefactions in Central Sulawesi. (Photo: IFRC)

<sup>1</sup> Humanitarian Country Team situation update #7 (as at 30 October)

<sup>2</sup>BNPB portal: [link](#)

More than six weeks after the disaster, many needs remain. Priorities include logistics and economic recovery, medical assistance, clean water, sanitation and hygiene, recovery of infrastructure and public services, shelter, protection, including women's and children's protection, and education. Humanitarian response has made significant progress in reaching and serving the people in need of assistance. Regional and international agencies continue to support national efforts and leadership. NGOs, the Red Cross and the UN are on the ground augmenting the national response.

## Summary of the current response

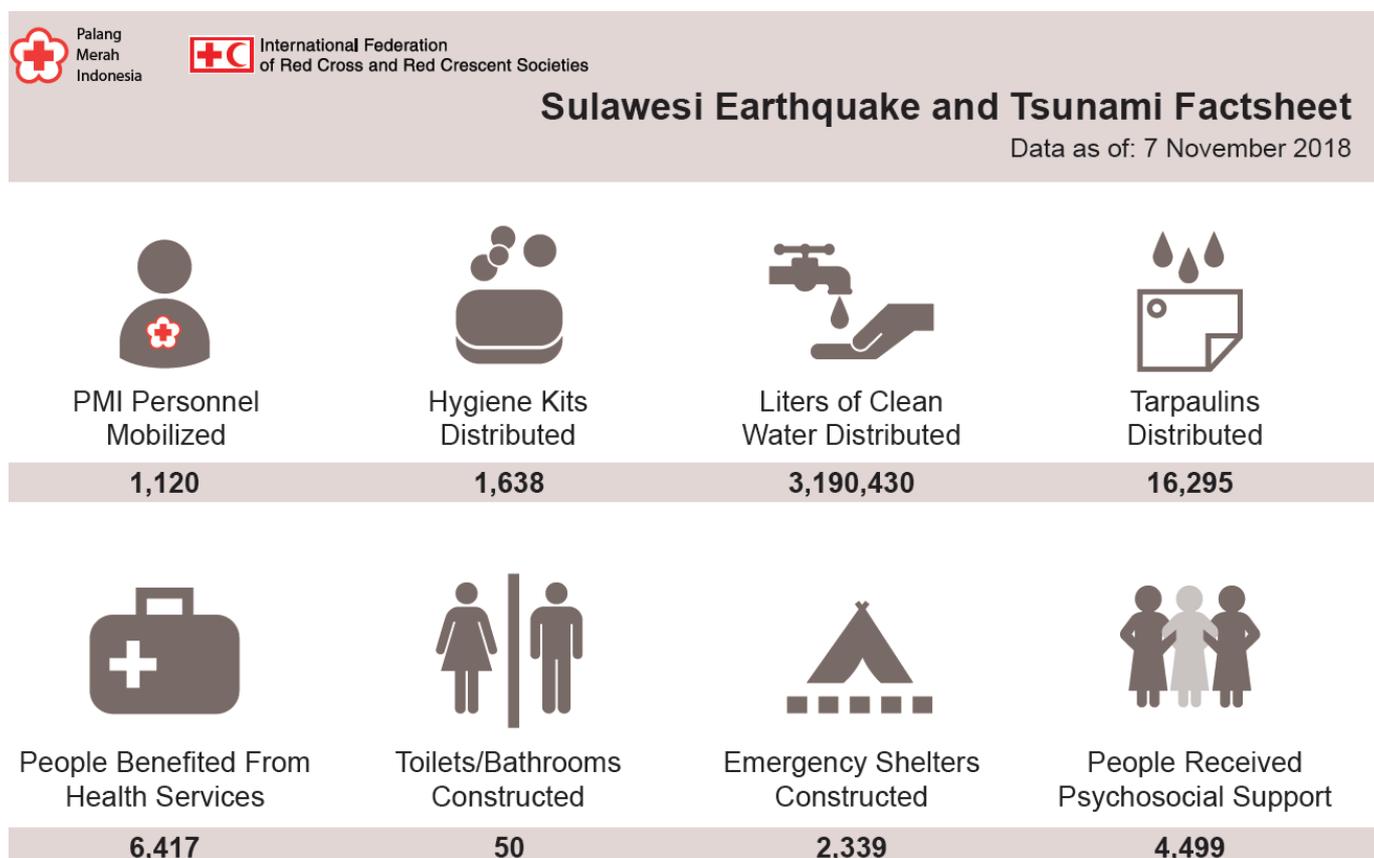
### Overview of Host National Society

As was the case in Lombok, in Central Sulawesi PMI were present and responding on the ground from the onset, deploying over 1,100 volunteers from branches in Central Sulawesi and across Indonesia as of 7 November 2018 to support the operation. These volunteers are running clinics (mobile and fixed) and referrals, setting up emergency shelter sites, distributing water and relief items, among other things. PMI also has a growing fleet in the field, including helicopters for hard-to-reach areas and at least 16 water trucks, with more coming.

PMI continues to deliver assistance to the best of its abilities, and IFRC technical specialists, including Emergency Response Units (ERUs) and Field Assessment and Coordination Team (FACT) members, were deployed in the case of Sulawesi to shore up technical support and coordination in response to added responsibilities delegated to PMI by the National Disaster Management Agency (*Badan Nasional Penanggulangan Bencana – BNPB*) such as the reception and distribution of relief items received through the government-to-government pipeline, in addition to managing those coming through the Red Cross Red Crescent channel as well.

PMI with the support of the IFRC ERU from the Italian Red Cross has completed the setup of a basecamp which can accommodate up to 300 volunteers. The basecamp was completed on 31 October and PMI volunteers and staff started to move in since 1 November. Sleeping tents, water, showers, latrines and electricity are functioning at the basecamp.

The following infographic indicates the sectoral highlights on initial emergency relief phase and services provided by PMI through the support of the IFRC and the partner national societies as of 7 November 2018.



Source: PMI sitrep no.40, 8 November 2018

Information reporting systems are improving, however numbers are still prone to fluctuation.

### Overview of Red Cross Red Crescent Movement in country

IFRC has a Country Cluster Support Team (CCST) for Indonesia and Timor Leste consisting of a head of office and technical capacities in disaster management, health, water, sanitation and hygiene, National Society development

(including protection, gender and inclusion - PGI), communication, community engagement and accountability (CEA) and support services in finance, human resources and administration.

PMI works with the IFRC and ICRC as well as PNS in-country including the American Red Cross, Australian Red Cross and Japanese Red Cross Society. All these partners are coordinating with PMI as the Movement's lead agency for both operations in Lombok and Sulawesi and contributing towards PMI One Plan.

The Japanese Red Cross has been supporting the implementation of the health activities, specifically a clinic in Tompe and also distribution of mosquito nets. The Turkish Red Cross has been playing a role in relief distribution, setting up tents and supplying non-food items (NFIs). The German Red Cross has a representative in Palu, providing additional support with main objective to identify funding opportunities. The American Red Cross has provided staff from its delegation in Jakarta to support admin and shelter/relief assessments.

Information sharing, and coordination meetings are led by PMI and have taken place since the first earthquake. A proactive approach is maintained regarding engagement with the international media so that the Red Cross and Red Crescent Movement's response is well-profiled and resource mobilization efforts are supported.

Movement coordination meetings are conducted with partner National Societies and ICRC to discuss the response to date and how to best support the National Society's continued efforts in a coordinated manner. Bilateral support from sister National Societies including Singapore Red Cross, Turkish Red Crescent, Malaysian Red Crescent, Kuwait Red Crescent, German Red Cross, Hong Kong branch of the Red Cross Society of China, Turkish Red Crescent Society and Qatar Red Crescent were also provided to PMI in-country.

Global and regional tools have been activated and number of human resources have been mobilized since the onset of the disaster. IFRC deployed a field coordinator and several technical specialists to Palu to support PMI's response. Staff from the CCST office in Jakarta, Field Assessment and Coordination Team, and Emergency Response Units in key support services including information technology and telecommunications (IT&T), logistics and basecamp, were quickly alerted and deployed. The team formation and composition will be reviewed according to the operation needs as it evolves.

### **Overview of non-RCRC actors in country**

PMI and the IFRC work closely with BNPB and the Ministry of Social Affairs (MOSA) on the response to the disasters. PMI is also in close coordination with the District Health Office (DHO) to obtain updated information on the immediate medical needs of injured people, especially those who need further medical assistance.

IFRC participates in meetings of the humanitarian country team chaired by the UN Office for the Coordination of Humanitarian Affairs (OCHA) held both during disasters and non-emergency times. At national level, MOSA, PMI and IFRC co-lead the sub-cluster on shelter and settlements, which falls under the wider umbrella of the Displacement and Protection cluster led by the Indonesian government. PMI and IFRC have been in close coordination with the national cluster system and have been supporting MOSA in leading the sub-cluster since the earthquakes in Lombok in August. This has extended to Sulawesi after the earthquake and tsunami on 28 September to share information on rapid assessment results, contribute to the joint needs assessment and government response plan, analyse gaps and potential support of other organization and the mechanism of cluster coordination at all levels. Further support to the shelter cluster coordination including additional technical support and human resources to meet both emergency and longer-term needs (including strengthening national capacity) is still under discussion.

PMI also participate in relevant national and provincial cluster coordination meetings where possible, and IFRC maintains contact and shares information with the AHA Centre, of which PMI have an embedded member in the ASEAN emergency response and assessment team (ASEAN ERAT) as well as the Humanitarian County Team (HCT).

## **Needs analysis, targeting, scenario planning and risk assessment**

### **Needs analysis**

The detailed needs analysis for each sector is detailed in **Section C: Detailed Operational Plan**, of the [EPoA](#) published on 31 October. However, it is important to note that the published EPoA is preliminary plan of action.

The destruction caused by the earthquake and subsequent aftershocks, the tsunami, as well as the impact of the liquefaction, had a major impact in the following sectors which quickly emerged as a priority: shelter and settlements, health, water, sanitation and hygiene, livelihoods and restoration of family links. These findings are based on a combination of rapid assessments when possible, coordination with actors on the ground, secondary data analysis, as well as extrapolation from previous experience.

One of the mitigating factors when assessing needs is that much of the population affected by the earthquake and tsunami, have migrated out of the area. This means needs may vary depending on where the displaced people are located. Further exacerbating the situation in designing a response is that this disaster affected urban, peri urban and rural areas. As such, although the socio-economic diversity is wide, the initial phase of response is focused on saving lives and meeting the most urgent, life-saving needs. Similarly, recovery assessments, planning and implementation will be equally challenging in the face of such a wide diversity of needs and socio-economic backgrounds.

Subsequent emerging risks include potential disease outbreaks, social unrest and potential increase in gender-based violence as frustrations are amplified due to the perceptions that insufficient or slow assistance reaching the affected community. Also, the lack of information the population had access to, mainly due to the destruction or disruption of communication and power lines, resulted in the emergence of rumours stoked by fear and uncertainty in the early days following the initial earthquake.

PMI mobilized a significant number of volunteers from the province and around the country. The increase in number of human resources meant there was a need for suitable accommodations, together with adequate water, sanitation and hygiene conditions, to be provided to all personnel in a safe and comfortable matter, even in already challenging circumstances. In addition, for staff and volunteers, the risk associated to working in an active earthquake zone, such as the presence of debris and damaged buildings, highlights the importance of insurance and sufficient personal protective equipment for all involved in the operation.

The Shelter cluster estimates that up to 15,000 houses were destroyed, up to 25,000 heavily damaged (uninhabitable) and 35,000 medium damaged (unsafe, needs repairs) which alone would mean a displacement of between 200,000 people (two first categories) and 375,000 people (all three categories) – plus people displaced out of fear and temporary/permanent displacement to outside of the affected areas. In addition, as revised master plans for the affected areas are finalized, a so far unknown number of people will be relocated away from areas on/near the fault line and near the liquefaction sites. The ongoing multi-sectoral displacement tracking matrix (DTM) assessment supported by IOM is expected to be published soon and will give some indications. As of 31 October, IOM have produced a few versions of the DTM.

In the meantime, sectoral assessments are ongoing, and some have been completed by corresponding cluster coordination teams, including the IFRC managed Shelter cluster, and in some cases, by IFRC/PMI teams, such as Health (assessments for emergency health and public health) and WASH. Access to clean water continue to be one of the main needs.

Camp Assessments involving information collection on number of tents, types of tents, and occupants in the 10 PMI supported emergency camps have also been completed. Further assessment of camp infrastructure, satisfaction survey (CEA) are ongoing.

Relief and CEA have conducted Post Distribution Monitoring, held random informal discussions with people on needs, satisfaction, and feedback mechanism using both Open Data Kit (ODK) and paper form.

A team consisting of PMI, IFRC and Partner National Society specialists is currently carrying out a recovery assessment for both Sulawesi and Lombok operations and is expected to be concluded by end of November. The recovery assessments will inform formulation of detailed revised Emergency Plan of Actions for both operations.

### **Targeting**

The Sulawesi operation aims to support the needs of most vulnerable population affected by the impact of earthquakes and tsunami in Palu, Sigi and Donggala. PMI with support from the IFRC coordinates with local authorities in identifying targeted population for the response considering cultural sensitivity, gender, most vulnerable groups, and ensuring inclusivity in the beneficiary selection process.

### **Operation Risk Assessment**

According to BMKG, since 1900s, Sulawesi have been hit by tsunamis 19 times, the latest one brings the number up to 20 times. BMKG stated over 700 aftershocks have been experienced since the first quake. The seismic activity is slowly decreasing. However, the threat of further aftershocks remains. A strong enough aftershock or another quake would result in further casualties as well as damage to remaining structures and roads, the latter impacting access to affected communities. Due to the recent strong aftershocks, there are probabilities of landslides in mountainous and hilly areas especially in Sigi and Parigi Moutong. It is necessary that all Red Cross teams in the field are aware of this risk and prepare well in case of rapid evacuation from buildings and in case they get stuck on the road. Safety and security plans will be updated accordingly.

The rainy season in Sulawesi projected to start in November has already started. Growing concerns are such as heavy rains would compound access challenges such as mudslides and could affect the distribution of items, reach of other

services and the transportation of materials required for rebuilding. Slightly warmer temperatures forecasted for the coming months which, coupled with the rainy season, will favour breeding of mosquitos. This would potentially increase the vector-borne transmission, thus a potential risk for malaria or dengue outbreak.

## B. Operational strategy

### Overall objective

The Sulawesi operation aims to support the needs of up to 80,000 people from the affected rural and urban communities Palu, Sigi and Donggala in Central Sulawesi with appropriate immediate, medium-term and recovery assistance in a timely, effective, and efficient manner and increase their resilience to future shocks.

### Proposed strategy

The main strategy and goal of this operation is to support families affected to re-establish their lives and livelihoods and community life through coordinated and integrated efforts with government and other key stakeholders in the affected areas. This operation aims to build back more resilient communities and re-stimulate local markets affected and doing it in a socially and environmentally sustainable way.

The operation consists of closely integrated sectors aiming to provide:

1. **Immediate household basic needs and livelihoods** assistance, including distribution of **relief items** such as hygiene kits.
2. **Health** interventions focusing on **community-based disease prevention and health promotion, psychosocial support, first aid, deployment of emergency health units, and referral services and medical rehabilitation.**
3. **Water, sanitation and hygiene promotion** interventions focusing on improving access to safe water and distribution of clean water as well as meeting emergency and longer-term sanitation needs.
4. **Shelter and settlements** assistance to support access to safer living conditions during the initial stages of the emergency by the provision of tarpaulins, mattresses, shelter toolkits and blankets followed by support to prioritize self-recovery accompanied by technical support and awareness on build back safer techniques.
5. **Livelihoods** support through **cash grants** and specific livelihoods activities in consultation with community members, taking access to employment, land or equipment for generating income into account.
6. **Restoring Family Links**, led by PMI and supported by ICRC and IFRC under **migration.**
7. Cross-cutting consideration and support to ensure **community engagement and accountability** (CEA) as well as **protection, gender and inclusion** (PGI) at all times.
8. **Community-based mitigation** and **disaster risk reduction** activities.
9. Support to rebuild and **strengthen branches and National Society development** in Sulawesi, especially in the repairs to existing branches impacted by the earthquakes as well as additional training to and capacity building of volunteers in the region. This also includes strengthening PMI's coordination capacity to deal with the new task given them by the Government to coordinate support from other governments and international NGOs

Up to 80,000 people from the targeted population, displaced and affected communities, will have access to emergency medical services and psychosocial support services through support from Red Cross Red Crescent partners. The modality of the work will be shared leadership according to the areas of expertise within the Movement partners.

PMI with the support of IFRC is progressing with below activities among others:

- Participating in the cluster meetings and better coordination with other local agencies;
- Continuing with relief distribution to affected population, especially hard to reach and remote areas;
- Carrying out continuous needs assessment and analysis across sectors;
- Integrated programming across sectors;
- Identifying the changing needs from relief to recovery phase and preparing for the recovery assessment.

### Operational support services

#### Basecamp

With PMI mobilizing hundreds of volunteers for the operation, an approach that will continue for several months, PMI requested IFRC for support with an ERU basecamp for volunteers. The Italian Red Cross deployed a basecamp assessment team and based on their assessment report, a combination of materials flown in from Italy, available items through donations to PMI as well as local procurement was approved. The camp is located on Jalan Garuda in Palu City, near the PMI/IFRC warehousing area. The initial capacity will be for up to 300 volunteers, to be decreased as the operation progresses. The basecamp has been set up by selected PMI volunteers, with the support of Italian Red Cross delegates providing training on the material and approach throughout the process. After an initial period with a small presence of Italian RC delegates, PMI will run the camp. The volunteers will be tagged for future basecamp deployments in PMI operations.

### **Logistics and supply chain**

PMI logistics with support from IFRC is aiming at effectively managing the supply chain, (including mobilization, sectoral needs identification methods, procurement, customs clearance, storage, transportation, producing reports and established agreements with governmental authorities for PMI/IFRC procedures. PMI logistics is not only required to follow the Government of Indonesia's regulations and guidance, but is also requested to apply IFRC's logistics standards, processes and procedures. PMI has maintained its enforced logistics team which consist team members both regional and district level as well as from HQ that were deployed immediately after the disaster to support PMI with needs assessment and coordination, now concentrating on to the operational needs and implementation. IFRC has continued its logistics support to PMI by extending FACT logistics deployment and deploying second rotation of ERU logistics team. To ensure timely and efficient local procurement support, the procurement specialist mission was also extended. Two national staff, one senior logistics and one senior fleet officer continue supporting the operation and during reporting time additional logistics officer was hired. For the future structure after logistics ERU engagement, an additional logistics coordinator and procurement delegate are planned to be employed to assure the implementation of localization of aid and the high volume on local procurement and implementation support of programmes. Integration and apprenticeship like trainings of the local hired staff from central Sulawesi will contribute on the longer-term capacity and service level provided by PMI logistics.

The main supply chain route for internationally received relief items has been by air through Balikpapan airport (BPN) in Borneo as it was declared by the government the only entry point for international assistance of relief goods. During the reporting period, five flights of non-food items were deployed to Indonesia from Kuala Lumpur and Dubai, with total weight of 220 metric tons right after receiving the approval from Indonesian government. Dubai shipment was facilitated through strong cooperation with International Humanitarian City (IHC) and the free charter flight funded by IHC and was carrying 100 metric tons.

During the reporting period, PMI continued distributing goods received via various channels – government to government in-kind donations (IKDs) as well as IKDs deployed through mobilization table following government guidance. PMI requested for movement partners international support for relief items through the emergency appeal and IFRC Asia Pacific Operational Logistics, Local Procurement and Supply Chain Management (OLPSCM) department launched a mobilization table to seek for in-kind donations.

Simultaneously, the local procurement activities have been carried out to source locally available relief items required to meet current operational needs. The sourcing to replenish relief items released from PMI prepositioned stocks will be primarily to be done locally by IFRC. However, some items might have to be replenished internationally via the IFRC OLPSCM unit in Kuala Lumpur, mainly to ensure quality and that the specification requirements are met. In support of this operation, two procurement specialists are deployed to Central Sulawesi during the emergency phase, but as the procurement standards and regulations needs to be applied, a long-term delegate will be deployed. The IFRC logistics team is working closely with PMI procurement and logistics to ensure that the local cultural aspects are taking into consideration in all sourcing activities.

PMI logistics hub has been made fully operational during the reporting time in Palu with the support of IFRC and the logistics hub consists of six Mobile Storage Units (MSUs) 1440sqm and office tents for PMI/IFRC operation. Further PMI and IFRC extended its support to WFP/Logistics cluster to establish their common logistics hub in the same compound. Logistics cluster will run their operation independently, however synergies through sharing logistics equipment's and know-how is taking place.

PMI deployed its existing fleet, including 15 water trucks, 15 cargo trucks based on daily rental as well as 10 light fleet to Palu to transport volunteers, staff, clean water and relief items in the affected areas. With the joint assessment team coming to Palu and running further relief operations with volunteers will require most likely increased light fleet capacities based on rental contracts. IFRC has been supporting PMI with local rental of vehicles. As of reporting period, the local tendering for long term rental of vehicles needed for this operation has been launched. Further three vessels were contracted by PMI and IFRC to transport relief items from their regional warehouses across the country and from Balikpapan to Palu. IFRC hired locally a fleet specialist to support with Fleet management as per IFRC standard fleet

procedures. Approximately 120 truck (5 tonnes) were loaded during the first two month of the operation and approximate the same quantity received from the various ports.

On top of sharing logistics hub compound with WFP/Logistics cluster PMI and IFRC logistics is participating regularly in Logistics cluster meetings. PMI and IFRC also maintain close collaboration with AHA centre as well as relevant government offices.

In the emergency phase, logistics is taking the mid- and long-term perspectives of the emergency logistics structure of PMI in consideration by iterating the lessons learned into the logistics development initiatives, focusing strategy development, national task force integration, private companies integration, enhancing procurement capacities, status of National Society in the national disaster response concept in logistics and approvals, advocacy in status of "G2G", management and reporting.

### **Human resources**

The operation will be implemented by the PMI base units in in the affected districts in Central Sulawesi utilizing existing staff, but with support of the chapter and the national headquarters. Where needed and as the situation evolves, the National Society may hire additional project staff, supported by the emergency appeal, including the mobilization of appropriate number of volunteers throughout the operation timeframe.

The IFRC has and will continue to provide technical support and guidance to PMI. From the onset of the disaster, technical colleagues based in the IFRC CCST Jakarta office in different sectors including cash-based interventions, water, sanitation and hygiene (WASH), IT and information management, communications and Community Engagement and Accountability (CEA) were quickly mobilized and deployed. This was further supported by additional technical specialists in logistics, procurement, planning, monitoring, evaluation and reporting (PMER), resource mobilization and field coordination in-country, with the Asia Pacific Regional Office team providing technical advice and support remotely. As needs on the ground quickly increased, an additional surge person was contracted and deployed to focus on shelter cluster coordination, A Field Assessment and Coordination Team (FACT) consisting of team leader, logistics, security, information management (IM) and communications profiles were also deployed, together with emergency response units (ERU) for logistics, basecamp for volunteers and IT and telecommunications.

Looking ahead, the operation is envisioned to have a dedicated operations manager as well as a largely nationally-recruited team in various positions including field coordinator, cash / shelter officer as well as administration, reporting and finance, to work closely with PMI and support coordination. The relevant profiles will be identified in the coming weeks, with some already recruited (fleet, finance).

Financial support for key positions within PMI specific to this operation is also budgeted in this appeal and plan of action. Additional technical support will be made available from both within the CCST, as well as the APRO, as needed.

### **Communications**

Maintaining a flow of timely and accurate public information focusing on humanitarian needs and the Red Cross and Red Crescent response is vital to support resource mobilization and enhance collaboration with partners and stakeholders.

PMI's unique access, expertise, geographic coverage and local knowledge has given a huge advantage in external communications. In the first few weeks of operations, PMI and IFRC received very high media coverage both locally and globally, with large media outlets quoting Red Cross and Red Crescent sources and using Red Cross and Red Crescent audio-visual material. PMI and IFRC Indonesia communications capacity was boosted by deployments from the Asia Pacific Regional Office and surge communications, the second rotation being in place through late December.

With the rainy season coming in, PMI and IFRC communications efforts will continue to focus on highlighting the humanitarian needs on the ground, while remaining flexible to raise awareness about developing situations such as the potential for severe landslides due to expected rains, and their impact on affected communities which are already reeling from the double disaster. All communication aims to secure positive positioning for PMI as the key actor in this response.

Major milestones, such as the three-month and six-month marks will be recognized, with the goal of obtaining positive positioning for PMI. It is important to note that while PMI should and will be the prime focus, recognition of support from the IFRC and other National Societies will be required to support resource mobilization and donor relations.

The operation will continue to communicate on social media, a significant platform for sharing messages with communities, listening to public concerns, dispelling rumours, and connecting with journalists. The focus will begin to shift from the devastation to Red Cross and Red Crescent activities and their impact.

High quality audio-visual and written material will continue to be generated and shared with IFRC partners and members, media, governments, affected communities and other stakeholders. As appropriate, this will include key messages, facts and figures, infographics, press releases, images, video and social media posts. VIP, donor and media visits will continue to be supported.

PMI has a large resource with its team of volunteers. An opportunity exists to strengthen the capacity of staff and several hundred volunteers expected to be part of the extended operation, to generate audio-visual content which can then be used to support external communications. To this end, training will have the principal aim of ensuring that the Red Cross and Red Crescent humanitarian response is professionally communicated, understood and supported by internal and external audiences.

### **Community engagement and accountability (CEA)**

Based on a [rapid assessment of communicating with disaster affected communities](#) conducted by PMI and IFRC, there is an urgent need to provide timely and accurate information about humanitarian assistance to affected populations. This initial assessment suggests that there is a major gap in communicating relief plans and providing room for community to participate in the operation/ relief efforts. This gap has been compounded by the logistics challenges faced by the Indonesian government and aid agencies which further cause significant delay in aid distribution and some communication disruption across the affected areas.

PMI understands the strong need for accountability to affected population and has immediately set up and rolled out feedback and complaint mechanisms by employing several communication channels which are preferred and trusted by the affected people. PMI has developed and maintained regular communication with communities, using social media, mobile phone, radio, volunteers, information hubs, and as a result, communities' feedback and complaints have been regularly received, recorded and responded in a timely manner. Through this mechanism, PMI is ensuring that affected people are treated with dignity in delivering humanitarian assistance in this operation.

Additionally, communities also face various rumors about disaster, health etc., which can potentially hamper the response. PMI and IFRC are working together with external partners, including Internews, Alliance of Independent Journalist (AJI) in Indonesia, and local media, to develop joint strategies to counter rumors circulating in the communities and online media. Rumor-tracking is critical in this operation to ensure that communities receive up-to-date, accurate information and can make informed decisions.

In line with the Minimum Standard Commitments to Gender and Diversity and the Community Engagement and Accountability guidelines, the operation will prioritize enhancing dialogue with and participation by affected women, girls, men and boys. This will lead to increased effectiveness and accountability of humanitarian efforts.

### **Information Technology/Telecommunication**

Initial communications and internet connection in Palu were disrupted due to the disasters. For the operation, IT/IM specialist from the IFRC CCST and IT&T ERU were deployed to support PMI in the procurement and installation/correction of HF and VHF radios, extending the network coverage to key locations where PMI is operating in to ensure continuous communication accessibility on the ground. This is to ensure that teams are reachable and can contact relevant emergency services as well as IFRC and PMI staff for support where needed. Cellular phone reception has now been mainly restored. Satellite phones, radio-communication and mobile internet connections have been activated to provide backup telecommunications for the operation during the response phase. Support is also being given to PMI with Internet and radio communications assistance.

### **Information management (IM)**

PMI has existing IM capacity, which has been collecting and collating information throughout this response. IFRC will look to support and enhance this capacity to enable evidence-based decision making, accurate reporting and more effective use of resources. As part of the response, an IM/IT specialist from the IFRC CCST was deployed to support the operation, he has now handed over to a specialist IM delegate, both have been supported by SIMS remote support.

The first step involves mapping out the current information flows of PMI; once it is understood we will examine ways to streamline the information flows, increase consistency of recording and reporting, and produce a more informative picture of current PMI operations. This will involve a focus on mobile data collection, a capacity that already exists within PMI. Future activities would seek to roll-out more complete information systems to health services, distribution activities and, if required, cash programming. To achieve this, future rotations of IM support to the operation will be sought before transitioning to increased HR capacity within PMI.

### **Planning, monitoring, evaluation, & reporting (PMER)**

The operation managers for PMI and IFRC, with the support of IFRC guides and monitors the emergency relief operations. PMI PMER manager with support from IFRC PMER from Asia Pacific Regional Office is developing information and reporting structures for the operation according to both PMI and IFRC minimum requirements.

Monitoring visits to the affected communities and interviews with beneficiaries, volunteers and others who participated in the response will be conducted to assess progress at regular intervals and to guide any required adjustments. Situational reports and operation updates will be issued regularly. In addition, PMER will monitor and liaise with sectoral teams on issuing donor reports based on donor earmarked funding for the operation. To consolidate federation-wide responses for this operation, a Federation Wide Report will be issued. Real-time evaluation, mid-term review and final evaluation will be carried out to ensure effectiveness, efficiency and accountability.

### **Security**

For personnel under IFRC security responsibility, an area-specific security risk assessment has been conducted and Area Specific Security Regulations and operating procedures are in place. Specific risk mitigation measures and regulations are applicable along with the existing IFRC country security plan; including contingency plans for medical emergencies, relocation and critical incident management. This safety and security framework with contextualized operating procedures was completed on 9 October and will continue to be regularly revised to reflect any changes in the safety and security context. The National Society's security framework will apply to PMI staff and volunteers. Security guidelines, briefings, trainings and operating procedures are developed in close coordination with PMI to both reflect and enhance their processes already in place. Additional technical support through a security delegate was quickly deployed to prepare and put these plans in place. Direct security support for the operation will continue through the IFRC CCST security focal point. Coordination will also be observed with the ICRC through regular information-sharing in accordance with the existing, agreed, arrangements.

### **Administration and Finance**

The IFRC provides the necessary operational support for review, validation of budgets, bank transfers, and technical assistance to National Societies on procedures for justification of expenditures, including the review and validation of invoices. PMI has been supported for many years by the IFRC and is accustomed to these financial procedures. The IFRC finance and administration team in the IFRC Jakarta CCST continue to provide support to the operation as requested by PMI and the IFRC programme manager/budget holder. A full-time finance officer based in Palu has also been recruited to support the operation.

### **Shelter Coordination**

Shelter coordination in Indonesia falls under the National Displacement and Protection Cluster (PP Cluster) as a sub-cluster, led by the Ministry of Social Affairs (MOSA) with a co-lead support commitment from IFRC. Since 2015, when the national cluster system was introduced, IFRC has continued to support MOSA in building its capacity for Shelter Coordination through trainings and joint evaluations. Discussions with MOSA after the Lombok quake indicated at the time it was within their coping capacity, but when the Palu quake occurred the same offers of support were warmly welcomed and IFRC was asked if it could deploy a team of up to 20 people (exact number based on need) to support government led coordination of both disasters. As part of this ongoing commitment the IFRC (in its leadership role for shelter coordination in natural disasters) deployed an initial team with support from the British Red Cross, Canadian Red Cross, Swedish Red Cross and others. The team is currently expanding as rapidly as possible to support MOSA in its lead role, with an initial team in Jakarta leading on coordination with the UN and National level, and a small team based in Palu. As staff with appropriate skills become available, the team plans to expand to the district level in both Lombok, and Central Sulawesi, as needed by local departments of Social Affairs.

The IFRC co-lead coordination team has responded rapidly to what is a challenging coordination situation, with all coordination happening in Bahasa Indonesia, primarily via WhatsApp, and with only limited foreign assistance allowed in the field. IM Systems have now been setup, with 5W reporting, needs analysis and regular mapping capacity with support from REACH. Regular bi-weekly Shelter Sub-cluster meetings are now being held in both Jakarta and Palu, where a Strategic Advisory Group (SAG) has also been formed along with Technical Working Groups (TWiG) on specific technical issues such as the minimum standards for temporary shelter that are now being developed in conjunction with the local Governor's office, Department of Public Works and Department of Social Affairs.

The Shelter sector has been identified by the National Disaster Management Agency BNPB as one of the five key areas in need of urgent assistance. Early challenges to a national disaster management system on overload from the ongoing Lombok response and mixed messages on the need for international assistance created a gap in coordination for the first 5-10 days. This has resulted in the Shelter Coordination Team adopting a very flexible and agile way of working to adapt to the rapidly changing circumstances. Baseline data on levels of displacement, underlying housing damage, previous work of early actors, all remain elusive. While many families are yet to receive basic emergency assistance, others are rapidly moving to early recovery, adding to the challenges of coordination. At the same time plans for mass permanent relocation of families living in risky areas are being developed by the government. Ensuring that globally agreed minimum shelter standards are achieved and that needs are covered in a fair and efficient manner is challenging. Additional support is urgently needed from partners in order to continue supporting the Ministry of Social Affairs in the way and for the duration that they expect and to consolidate the position of the IFRC/PMI as a dependable partner in issues related to shelter coordination.

## C. DETAILED OPERATIONAL PLAN

The activities detailed under each sector are only related to the current response in **Sulawesi**.

 <b>Shelter</b> People targeted: 80,000 (20,000 households) People reached: 64,000 (16,000 households)		
<b>Shelter Outcome 1: Communities in disaster and crisis affected areas restore and strengthen their safety, well-being and longer-term recovery through shelter and settlement solutions</b>		
<b>Indicators:</b>	<b>Target</b>	<b>Actual</b>
# of people targeted/reached with safe, appropriate and adequate shelter and settlements assistance	80,000	Outcome indicator will be reported in final report
<b>Shelter Output 1.1: Short, medium and long-term shelter and settlement assistance is provided to affected households</b>		
<b>Indicators:</b>	<b>Target</b>	<b>Actual</b>
# of households provided with emergency shelter and settlement assistance	20,000	16,000
<b>Shelter Output 1.2: Technical support, guidance and awareness raising in safe shelter design and settlement planning and improved building techniques are provided to affected households</b>		
<b>Indicators:</b>	<b>Target</b>	<b>Actual</b>
# of households provided with technical support and guidance	20,000	Not started yet
<b>Progress towards outcomes</b>		
<p><b>Shelter and settlement assistance (relief distribution)</b>            As per reporting period, it is estimated that over 16,000 households have been reached with relief items. Further consolidation of records is needed to be able to confirm final numbers.</p> <p>Below is the achievement reported by PMI on the distribution of some key relief items:</p> <ul style="list-style-type: none"> <li>• 8,456 blankets.</li> <li>• 16,295 tarpaulins.</li> <li>• 182 shelter toolkits.</li> <li>• 2,339 emergency shelters.</li> <li>• 1,615 family kits.</li> <li>• 1,638 hygiene kits.</li> <li>• 2,844 jerry cans.</li> </ul> <p>More information on relief distribution will be provided in the next update as data consolidation and reconciliation improves.</p>		
		
<p><b>Emergency Shelter sites</b>            PMI identification and set up of 10 community emergency camps is ongoing. Final case-load is still to be determined but could be between 3,000 and 5,000 families. Some camps are not filling up fully, as communities rather have alternative solutions, which was known as a scenario from the beginning. Also, services in the camps (WASH) are only being built up.</p>		

Government plans for Collective Temporary Shelter (barracks) as transitional shelter are advancing fast, with the currently planning figure of 14,400 households. The government has begun construction of several barracks in Central Sulawesi districts. The barracks are meant to house up to 12 families and to only be temporary.

For PMI supported emergency camps, as per reporting period, 1,275 family tents have been installed and occupied by 1,075 households. From the 10 camp sites, eight have been built with integrated services (WASH, Health, psychosocial support), while the other two (Tipo and Tawaeli) are still waiting for land confirmation and correct placement according to government acceptable standards. Further, six out of the 10 IDP camps already have camp management structure, such as camp coordinator, public kitchen manager, logistics/warehouse, electricity, health and security.

As for temporary shelter, PMI is planning to build around 2,000 temporary shelter units, cash programming mechanism, by dividing groups within the community/village. Each group will consist 10 families. PMI has so far built four temporary shelter prototypes (two in Garuda basecamp, 1 in PMI Sulteng province and one in Lende village, Sirenja District, Donggala).

There is a challenge in harmonizing IFRC and PMI data related to distribution pipelines of family tents and tarpaulins. Efforts are being made to reconcile the figures.

Another challenge in temporary shelter design is that a lightweight steel frame is being considered as a substitute for timber frame for temporary shelter material. However, the steel frame is currently difficult to find in the local market and the nearest source/option is only Makassar, South Sulawesi.



Construction of the government temporary shelter has started, Petobo. (Photo: IFRC)



PMI temporary shelter prototype. (Photo: IFRC)



## Livelihoods and basic needs

People targeted: 40,000 (10,000 households)

People reached: -

### Outcome 1: Communities, especially in disaster and crisis affected areas, restore and strengthen their livelihoods

Indicators:	Target	Actual
# of targeted people that have enough food, cash or income to meet their survival threshold	tbc	Outcome indicator will be reported in final report
<b>Output 1.1: Vocational skills training and/or productive assets to improve income sources are provided to target population</b>		
Indicators:	Target	Actual
# target population improve the access to employment or self-employed in sustainable livelihood activities	tbc	Not started yet
<b>Output 1.2: Basic needs assistance for livelihoods security including food is provided to the most affected communities</b>		
Indicators:	Target	Actual
# households reduce their [damaging] coping strategies compared with post disaster level	tbc	Not started yet
<b>Output 1.3: Household livelihoods security is enhanced through food production and income generating activities</b>		

Indicators:	Target	Actual
# of households have enough productive assets to recover or strengthen their livelihoods	tbc	Not started yet
<b>Output 1.4: Households are provided with multipurpose cash grants to address their basic needs</b>		
Indicators:	Target	Actual
# of communities applying key natural resource management practices to protect their livelihoods	tbc	Not started yet
<b>Output 1.5: Households are provided with unrestricted/multipurpose cash grants to address their basic needs</b>		
Indicators:	Target	Actual
# of households reached with cash for basic needs	10,000	Not started yet
<b>Progress towards outcomes</b>		
<p>Activities under this area have not started. This area of focus will be further reviewed following the recovery assessment in the coming days. On another note, based on the weekly Cash Working Group (CWG) meetings conducted on 31 October, the CWG conducted a week-long market assessment starting 3 November. The rates for cash for work (C4W) in Sigi and Donggala were also informed during the meeting, including criteria for the C4W. The outcome of the meeting was also that cash for sectors or multipurpose cash may not happen until December 2018/January 2019.</p>		

 <p><b>Health</b>            People targeted: 80,000 (20,000 households)            People reached: 6,417</p>		
<b>Outcome 1: The immediate risks to the health of affected populations are reduced</b>		
Indicators:	Target	Actual
# of people reached by emergency health services	80,000	Outcome indicator will be reported in final report
<b>Output 1.2: Target population is provided with emergency medical management of injuries and diseases</b>		
Indicators:	Target	Actual
# of people reached by First Aid services	10,000	Data collection in progress
# of people reached by emergency medical services	30,000	6,417
<b>Output 1.3: Community-based disease prevention and health promotion is provided to the target population</b>		
Indicators:	Target	Actual
# of people reached with community-based disease prevention and health promotion programming	80,000	2,360
<b>Output 1.5: Psychosocial support provided to the target population</b>		
Indicators:	Target	Actual
# of people reached by psychosocial support	40,000	4,499
<b>Output 1.9: Target population is reached with Search and Rescue activities</b>		
Indicators:	Target	Actual
# of trained volunteers deployed	-	Over 600 SRA ended mid-October
<b>Progress towards outcomes</b>		
<p> </p>		

<b>3</b>	<b>6,338</b>	<b>752</b>	<b>5,586</b>	<b>4,058</b>
PMI emergency medical teams (2 mobile+1 fixed) continue- Sigi, Donggala region. Palu closed due to decreased needs	people reached with PMI Emergency Clinics (mobile and fixed)	people reached with PMI Emergency Clinic in Tompe	people reached by mobile clinics (Donggala: 1,429; Sigi: 2,100 ; Palu: 2,057)	people reached with Psychosocial support.

### Emergency medical services

As outlined in the plan of action, PMI with IFRC support planned to deliver emergency medical services through deployment of well-equipped emergency clinic (fixed) and support Ministry of health – Puskesmas (Indonesian: Pusat Kesehatan Masyarakat, English: Community Health Centre) for the continuation of basic health care services in the affected communities.

The fixed PMI emergency clinic (Type 1 EMT) that has been established in Tompe, a village in Sirenja district, Donggala Regency can serve up to 50-60 patients per day, with a combined team of PMI and Tompe Puskesmas health staff. PMI Emergency clinic has also supported Tompe Puskesmas to restart and continue the Basic Emergency Obstetric and New Born Care (BEmONC).

Any cases requiring advanced/comprehensive care will be referred to UNDATA hospital in Palu. Use of air retrieval for critical cases has not progressed due to unavailability of service and negotiations with other providers under discussion.

This clinic continues to provide health services to the local community and as per reporting period, **752** people have sought **medical services through the clinic**. On another note, the onset of rainy season has necessitated major modification to the layout, drainage and the need replenishment of tents. This is currently being done with the support of an ERU member from the Norwegian Red Cross who is supporting the clinic in terms of infrastructure.

Currently, PMI has three emergency medical teams (2 mobile, 1 fixed) that continue to serve affected communities. One mobile clinic previously arranged for Palu has been closed due to decreasing needs in addition to public health services gradually recovering. As at 6 November, PMI reported that **6,338** people have been reached with **health services from its emergency clinics**.

On job trainings (OJT) for PMI medical teams: Japanese Red Cross Society (JRCS) medical advisors continue to provide support to national staff to strengthen clinical standards and to promote disease prevention and health promotion. They have also supported PMI emergency clinic to establish Emergency services system in Emergency Room, waste management, improving sterilization techniques. Capacity building of PMI staff to develop and refine patient data and analysis is also part of the support provided.

### Disease prevention and health promotion programming

Two Community-based Health and First Aid (CBHFA)/Epidemic Control for Volunteers (ECV) facilitators from South Kalimantan and Banten Province arrived on 26 October and provided an orientation/ECV training for 22 Health volunteers from 30-31 October.

On 23 October, PMI and IFRC team visited one of the biggest internally displaced people (IDP) camps in Petobo (Palu City) to meet community leader and discussed about strategy on community engagement for disease prevention and control. PMI WASH and Health volunteers were also mobilized in Petobo (liquefaction area), to conduct health and hygiene promotion. Disinfectant spraying in targeted areas of PMI IDPs – in Petobo, Tipu and Balaroa were also conducted.

A distribution plan has been formulated for 3,200 mosquito nets using the Tompe clinic and local health station (Puskesmas) and resources in the area. On 5 November, PMI and IFRC with the support from the Puskesmas (local health care centre) launched a campaign for infectious disease in the district of Sirenja, Donggala Regency. The



PMI emergency clinic at Tompe. Heavy rains sometimes cause some areas of the clinic to be soaked with water. Better drainage system is required. (Photo: IFRC)



Health and WASH team in a health and hygiene promotion session in "Palu Bangkit" (Photo: IFRC)

emergency medical team and two facilitators provided mosquito nets and educational sessions in the campaign. A total of **350 mosquito nets** have been distributed to targeted people, including pregnant women from Tompe clinic. The educational sessions during this distribution gathered some 84 participants.

PMI fixed clinic and mobile teams continue to provide daily data to WHO Early Warning, Alert and Response System (EWARS). Current trends are aligned with response wide findings, in which three most common presentations are respiratory tract infections, diarrhoea and skin disease. Nine confirmed malaria cases were recorded up until 7 November. Greatest health risk according to WHO is diarrhoea, malaria, measles and respiratory illness due to overcrowding, inadequate safe water and sanitation, onset of rainy season and sub optimum measles vaccination coverage.

As necessary, PMI volunteers continue with daily health promotion (malaria prevention, diarrhoea prevention, menstrual hygiene) and PSS activities (psychological first aid and assessment) to all response areas. As at 7 November, PMI reported that **2,360** people have been reached with **hygiene promotion** activities.

### **Psychosocial support.**

Psychosocial support is an integral part of the IFRC's emergency response. It helps individuals and communities to heal the psychological wounds and rebuild social structures after an emergency or a critical event. It can help change people into active survivors rather than passive victims. Hence, there is the need to provide psychosocial support in affected communities. This is being done through activities such as:

- Conduct and provide psychosocial support activities, e.g. Psychological first aid, psychoeducation and safe spaces in communities (such as IDP camps, temporary shelters, schools and community centers).
- Produce and distribute translated IEC material on psychosocial support and child protection.
- Continuous need assessment and monitoring on the psychosocial situation among the affected people.

As at 7 November, PMI reported that 4,499 people have been reached with **psychosocial support**. Below is the tabulated figure according to location.

Location	# of people reached
Donggala	1,314
Sigi	898
Parigi Moutong	567
Palu	1,720
<b>Total</b>	<b>4,499</b>

### **Volunteers deployed for Search and Rescue (SAR)**

SAR activities ended by mid-October. Within this SAR period, PMI reported that over **600** volunteers were deployed to support the emergency operation, including for **SAR efforts**.

## **Water, sanitation and hygiene**



People targeted: 80,000 (20,000 households)

Male: 37,600

Female: 42,400

People reached: 147,743 (safe water)

### **Outcome 1: Immediate reduction in risk of waterborne and water related diseases in targeted communities**

Indicators:	Target	Actual
# of households provided with safe water services that meet agreed standards according to specific operational and programmatic context	20,000	Outcome indicator will be reported in final report
<b>Output 1.1: Continuous assessment of water, sanitation, and hygiene situation is carried out in targeted communities</b>		
Indicators:	Target	Actual
# of assessment conducted	1	1
<b>Output 1.2: Daily access to safe water which meets Sphere and WHO standards in terms of quantity and quality is provided to target population</b>		
Indicators:	Target	Actual
# of people provided with safe water (according to WHO standards)	80,000	147,743
<b>Output 1.3: Adequate sanitation which meets Sphere standards in terms of quantity and quality is provided to target population</b>		

Indicators:	Target	Actual
# of households provided with sanitation facilities	4,000	1,075
<b>Output 1.4: Hygiene promotion activities which meet Sphere standards in terms of the identification and use of hygiene items provided to target population</b>		
Indicators:	Target	Actual
# of people reached with hygiene promotion activities	80,000	7,360
<b>Output 1.5: Hygiene-related goods (NFIs) which meet Sphere standards and training on how to use those goods is provided to the target population</b>		
Indicators:	Target	Actual
# of households provided with a set of essential hygiene	20,000	Not started yet (IFRC pipeline)

### Progress towards outcomes

Some organizations that conduct water purification and water distribution are gradually phasing out. The French Civil Protection team which established water treatment facilities in Jalan Towua, South Palu had already ended their mission and closed the facility since 1 November. Some of the Ministry of Public Works and Housing (PUPR) water trucks are also gradually withdrawing from the operation. PMI currently operates 16 water trucks (with 4 additional trucks newly arrived in Palu and another 10 trucks are in procurement process) which currently makes PMI as the largest organization operating water trucks for water distribution to target population. It is highly anticipated that higher requests from the community to PMI to supply them with safe water will happen sometime soon.

#### **Continuous assessment of water, sanitation, and hygiene situation**

One delegate from German Red Cross already ended his mission. Currently, a WASH senior officer from IFRC CCST Jakarta office is supporting ongoing WASH operations, allowing for some insight and coordination with PMI on WASH.

Sites assessment were conducted from 15 October to 23 October and provided information for the EPOA that was recently issued specifically for Sulawesi earthquake operation.

PMI and IFRC will soon be carrying out a recovery assessment (joint multi-sectoral) in November, including for WASH sector.

#### **Daily access to safe water**

One PMI water production camp is still operational in Kawatuna, South Palu. The current capacity of water production camp is 285,000 litres per day/ 10,000 people per day.

PMI received water treatment plants donated from German Red Cross and Veolia Foundation to support water production. The water treatment plant donated by Veolia Foundation has been moved to Kawatuna since the raw water quality in Jalan Towua kept fluctuating due to heavy rains upstream.

The previous plan to establish camp in Sirenja is still on hold since the team found a clean water source that can be distributed.

The WASH team is also addressing rumours of contaminated ground and surface water due to illegal gold mining activities around Palu. PMI with IFRC support conducts mercury test on the raw water source and the treated water. The rapid test shows negative contamination of mercury. PMI will continue conducting quantitative test once the quantitative mercury test kit is received.

PMI continues distributing clean water via 16 trucks to affected people in Palu, Donggala and Sigi districts. As of 7 November, some 3,190,430 litres of clean water have been distributed, benefiting an estimated 147,743 people.

#### **Adequate sanitation**

As of 7 November, five unit of latrines have been completed for PMI base camp in Garuda Soccer Field, South Palu. The Italian Red Cross also constructed an additional 12 latrines and 12 showers at the basecamp, and also four latrines and showers in PMI clinic in Tompe. Another five unit of latrines have been completed for Tawaeli IDP camp.



PMI distributes safe water to the affected community (Photo: PMI)

Additional latrines are currently under construction in Layana Indah Camp (5 latrines), Jono Oge (5 latrines) and Lero Camp (5 latrines). Additional 35 PMI volunteers have arrived to support the WASH team. Currently the volunteers are in the process to construct another 5 sets (25 latrines) in Layana Indah IDP camp. An estimated 1,075 households will benefit from these latrines constructions.

#### **Hygiene promotion activities & Hygiene-related goods (NFIs)**

PMI has secured a spot for interactive talk show program once a week during the prime time in local radio in cooperation with Nebula Radio 101 FM. The first edition of Hygiene Promotion through Interactive Radio Talk show has been aired on 31 October 2018, the message delivered was about solid waste management in the IDP camps.



PMI volunteers construct latrines in Jono Oge IDP camp (Photo: PMI)

The promotion also involved the Head of Health Agency of Central Sulawesi Province, PMI Health Staff and Sr. IFRC WASH officer. Several listeners also interacted through phone call and asked questions on the topic discussed. Short public advertisement also will be produced and broadcasted.

As at 7 November, PMI reported that 1,638 family have received hygiene kits through bilateral cooperation with PNS, 2,691 received jerrycans and 2,360 people received hygiene promotion. The estimated number of listeners for the radio talk show is around 5,000 people during prime time.

Initially, it was planned to use local contractors for latrine construction. Following further discussion and recommendation by PMI, volunteers or local community workers will be utilized instead. Around 40 volunteers to support latrine construction works have already arrived in Palu to construct the latrines for the affected people, especially those living in the emergency camps.

In the distribution of water to affected communities, limited number of water truck drivers (volunteers who have B1 (Truck) driving license) is causing some challenges. This has somehow made the water distribution activity not optimal at times. As mitigation, local drivers are to be recruited to cover this gap.



PMI also delivering hygiene message through radio broadcast (Photo: PMI)

### **Outcome 2: Sustainable reduction in risk of waterborne and water related diseases in targeted communities in the recovery phase**

Indicators:	Target	Actual
# of people have access to safe water	40,000	Outcome indicator will be reported in final report
<b>Output 2.1: Continuous monitoring and evaluation of water, sanitation, and hygiene situation is carried out in targeted communities</b>		
Indicators:	Target	Actual
# of volunteers trained in WASH	tbc	40
<b>Output 2.2: Community managed water sources giving access to safe water is provided to target population</b>		
Indicators:	Target	Actual
# of water sources rehabilitated (i.e well or pipelines)	-	Not started yet
# of people provided with safe water through rehabilitated water sources	40,000	Not started yet

#### **Progress towards outcomes**

PMI is currently conducting WASH training with IFRC support for 24 local volunteers (three female and 21 male). The training covers water treatment and water distribution, sanitation (latrine) planning, construction as well as hygiene promotion methodology and materials such as determining hygiene message, operation and maintenance of sanitation facility, and household water treatment. The training is being conducted from 5-9 November.

Another group of 16 volunteers (three female and 13 male) have also been trained specifically for sanitation facility construction (4-6 November). Following the training will be the construction of latrine facilities in Layana Indah IDP Camp. A total of 5 sets of latrines (25 cubicles) is planned to be constructed by these trained volunteers in the coming days.



Local PMI volunteer are trained on operating various type of water treatment plants (*Photo: PMI*)



### Protection, Gender and Inclusion

People targeted: 80,000 (20,000 households)

Male: tbc

Female: tbc

People reached: tbc

#### Outcome 1:

**Communities identify the needs of the most vulnerable and particularly disadvantaged and marginalised groups, as a result of inequality, discrimination and other non-respect of their human rights and address their distinct needs**

#### Indicators:

*Does the operation demonstrate evidence of addressing the specific needs to ensure equitable access to disaster response services?*

#### Target

Yes

#### Actual

Outcome indicator will be reported in final report

**Output 1.2: Emergency response operations prevent and respond to sexual- and gender-based violence and all forms of violence against children**

#### Indicators:

*Does the operation demonstrate evidence of compliance with IFRC minimum standard commitments to gender and diversity in emergency programming?*

#### Target

Yes

#### Actual

Yes

#### Progress towards outcomes

Protection, Gender and Inclusion (PGI) refers to a broad area of focus and the PGI sector for this operation is still being further developed. At operational level, there is no PGI coordinator yet in place, but FACT alert for PGI expert has been issued and efforts are underway to bring one on board. Following the recovery assessment planned in coming weeks, PGI programming will be further defined and refined.

Nevertheless, PGI components/considerations have been included in sectors such as dedicated hygiene kits for women, separation of areas for latrines/bathrooms between men and women, determination of locations of latrines to provide access to everyone and inclusion of lightings at the latrines and bathrooms for safety.

#### **Solar lanterns/lamps distribution**

Insufficient lighting in camps or temporary shelters may pose a serious protection concern contributing to an unsafe environment considering their locations, darkness in some sites and particularly the wash facilities. Planned distribution of solar lamps and solar radio-lamps when the items arrived in the coming days, will address these protection concerns to some extent.

#### **Minimum Standard Commitments to Gender and Diversity in Emergencies**

Mainstreaming PGI across the sectors, is an ongoing effort which aims to ensure that services provided to people reached are gender and diversity sensitive, have a protective value and tailored to be inclusive of all. Early recovery planning will ensure PGI will remain an important element to be factored in programming aspects. For example, ensuring latrines are accessible to people with disabilities, specifically people with mobility restrictions.



## Migration and displacement

People targeted: Managed by ICRC

People reached: 1,625

### Outcome 1: Communities support the needs of migrants and their families and those assisting migrants at all stages of migration (origin, transit and destination)

Indicators:	Target	Actual
# of people reached with services for migration assistance and protection	-	Outcome indicator will be reported in final report

### Output 1.3:

Family links are restored for people separated from, or without news of, their loved ones as a result of the disaster

Indicators:	Target	Actual
# of people reached with services for migration assistance and protection	-	1,625

### Progress towards outcomes

Based on BNPB record as at 7 November, the latest estimate is that more than 200,000 people are still displaced following the earthquake, but the real number could be even higher. Some of these have left the affected areas, others have moved or are on the move within the affected areas. Displacements are not only related to damaged and destroyed houses but also to fear of secondary events.

All operational interventions will be undertaken in line with the Red Cross Movement Policy on Internal Displacement (2009), including assessing specific needs linked to displacement and meeting the needs of the most at risk: including both displaced communities and host communities. This is particularly where displacement becomes prolonged or protracted, and where there are barriers or delays to return or other durable solutions.

The operations will also assess any increased migration and displacement from the affected areas as a direct impact of the loss of livelihoods, infrastructure, and disrupted social and family networks. Any interventions related to migration will be undertaken in line with the IFRC Policy on Migration (2009).

ICRC launched a family link site for people looking for family members affected to the Sulawesi earthquakes and tsunami. This include people who would like to register to inform their families that they are safe and alive. The site is available in both English and Bahasa Indonesia. The link to the site:

<https://familylinks.icrc.org/indonesia/id/pages/home.aspx>.

As at 7 November, PMI reported that a total of **1,625 cases** Restoring Family Links (RFL) has been registered (supported by and in coordination with ICRC).



## Disaster Risk Reduction

People targeted: 80,000 (20,000 households)

Male: 37,600

Female: 42,400

People reached: not yet started

### Outcome 1:

Communities in high risk areas are prepared for and able to respond to disaster

Indicators:	Target	Actual
Community preparedness plans in place	Yes	Outcome indicator will be reported in final report

### Output 1.1:

Communities take active steps to strengthen their preparedness for timely and effective response to disasters

Indicators:	Target	Actual
# of contingency plans/early warning systems developed among target population	-	Not started

# people reached with public awareness and education campaigns using harmonized messages to reduce, mitigate and respond to identified risks	-	Not started
<b>Progress towards outcomes</b>		
Activities are yet to be implemented. Information on DRR will be reported in next updates and once relevant activities started. In principal, as part of protecting and restoring community resilience to disasters, community-based disaster reduction activities will be undertaken by having early warning early action agents to identify local risks, vulnerabilities and capacities to strengthen resilience of communities. Further specific activities may/will be outlined once the operation has moved beyond the emergency response and early recovery phase.		

## Strengthen National Society

**Outcome S1.1: National Society capacity building and organizational development objectives are facilitated to ensure that National Societies have the necessary legal, ethical and financial foundations, systems and structures, competences and capacities to plan and perform**

Indicators:	Target	Actual
# of NS branches that are well functioning	3 (Palu, Sigi, Donggala)	Outcome indicator will be reported in final report

**Output S1.1.4: National Society has effective and motivated volunteers who are protected**

Indicators:	Target	Actual
# of volunteers insured	-	Will be updated in the next update
# of volunteers involved in the operation	-	1,120

**Output S1.1.6: National Societies have the necessary corporate infrastructure and systems in place**

Indicators:	Target	Actual
NS has necessary infrastructure and systems in place	Yes	Yes

**Output S1.1.7: NS capacity to support community-based disaster risk reduction, response and preparedness is strengthened**

Indicators:	Target	Actual
# of NS members trained in emergency needs assessment	25	Not started yet

### Progress towards outcomes

#### Volunteers

Volunteers are pivotal for Red Cross in responding to emergencies, helping to reach the hardest and most vulnerable places which is crucial especially during early onset of disaster. According to PMI report, as at 7 November, an estimated 1,120 volunteers have been deployed to support the operation. These volunteers are helping to run clinics (mobile and fixed) and referrals, set up emergency shelter sites, distribute water and relief items, among other things. IFRC Secretary General during his visit to Palu on 6 November took time to meet and greet volunteers involved in the operation.

Recognizing the importance and value of volunteers, their safety and wellbeing are appropriately taken care. Steps are taken such as briefings on volunteers' roles and the risks they face, provide psychosocial support to volunteers and ensure volunteers are properly trained among others.

#### Necessary infrastructure and systems in place

At the basecamp, IFRC and PMI is supported with necessary equipment and facilities to perform as effective as possible. Connectivity is important for the operation in which it allows fast sharing of information. As such, the IT&T ERU team continues supporting the operation to ensure connectivity in relevant sites. Work is being done on a Job Description to hire someone for PMI for IT support to the ongoing operation. Some more work will be done to determine further needs for PMI at the provincial and branch levels.



IFRC Secretary General on his day visit to Palu on 6 November meets with Red Cross staff and volunteers at the PMI basecamp (Photo: IFRC)

## International Disaster Response

### Outcome S2.1: Effective and coordinated international disaster response is ensured

Indicators:	Target	Actual
% of people reached by the IFRC disaster response operations to the people affected by these emergencies	Min 5%	Outcome indicator will be reported in final report
IFRC engages in inter-agency coordination at the country level	Yes (Shelter)	Yes

### Output S2.1.1: Effective response preparedness and NS surge capacity mechanism is maintained

Indicators:	Target	Actual
Mechanism for effective response preparedness identified and implemented	Yes	Yes
# of RDRT deployed	Min 3	More than 3

### Output S2.1.3: NS compliance with Principles and Rules for Humanitarian Assistance is improved through the integration of CEA approaches and activities

Indicators:	Target	Actual
# and type of methods established to share information with communities about what is happening in the operation	-	4 <sup>3</sup>
#/% of complaints and feedback received and responded to by the NS	-	224

### Output S2.1.4: Supply chain and fleet services meet recognized quality and accountability

Supply chain and fleet services demonstrates quality and accountability	Yes	Yes
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### Output S2.1.6: Coordinating role of the IFRC within the international humanitarian system is enhanced

Indicators:	Target	Actual
A coherence shelter strategy is developed in response to the earthquake	Yes	Yes

## Progress towards outcomes

### Response preparedness

IFRC has provided initial operational start up for the host national society and participating national societies and other common services such as operation centre and basecamp. Appropriate technical support in coordination, logistics, basecamp, IT&T, PMER, WASH, Shelter and other sectors and support are deployed as necessary.

To augment the operation, PMI requested for a technical support team (FACT) and three support service ERU's; Logistics, Basecamp and IT/Telecom. Additional support from IFRC APRO have also been deployed for operations management.

As per to date, below are the current human resources details currently in support of the operation.

Human Resources	Total
Head of Emergency Operations (HEOps)	1
IFRC staff recruited for Palu office	5
IFRC CCST and APRO national staff on short mission to Palu	8
IFRC national staff consultant	2
FACT (Logistics, IM, etc)	6
Partner NS HR support, under IFRC coordination (national and international)	3
ERU (IT&T, including incoming base camp set-up team)	19
Global shelter cluster international and national staff	6
<b>Total</b>	<b>50</b>

### Community Engagement and accountability

Community engagement and accountability (CEA) is being streamlined across all sectors to ensure effective communication with communities throughout the operation. The CEA team works closely together with all sectoral teams on a day-to-day basis. Some of the key achievements to date are:

<b>373</b> questions and feedback received <sup>4</sup> from communities	<b>8</b> Interactive radio talkshow broadcasts	<b>12</b> types of information as aid materials were produced and disseminated offline and online	<b>2,000</b> Stickers
<b>224</b> feedback responded			<b>1,050</b> banners of sectoral messages printed and distributed across affected areas.

<sup>3</sup> Radio broadcasts, Social media platforms including Facebook, Twitter and Instagram.

<sup>4</sup> via multiple communication channels.

Life-saving and life-enhancing messages are continuously shared on social media platforms including Facebook, Twitter and Instagram. PMI continues to engage with communities on social media using #TanyaPMI.

This week's interactive talk show (PMI Nolelei – community advocacy) on Radio Nebula 101 FM discussed about community livelihood programme focusing on fishery. PMI and IFRC invited experts including Chief of Fisheries and Marine Affairs Central Sulawesi Office, Programme Officer of FAO, and Coordinator of KIARA (a local NGO advocating the fishery issues) to inform options for recovery after the emergency phase. In the dialogues, the government representative committed to providing boats and trauma healing programme for the fishermen and families. FAO committed to helping some 20,000 fishermen with fishing equipment kits and supporting pregnant women and mothers with children under five years old. In this talk show, PMI received five calls from the community members.

PMI/ IFRC, OCHA and Pulse Lab are currently developing the first edition of "Community Feedback Bulletin" – a pivotal advocacy tool for this response to facilitate the voices of communities to the relevant stakeholders. This bulletin will provide a real-time analysis and visualisation of feedback trends, needs and priorities of the affected populations. Pulse Lab and OCHA will host an online portal, and IFRC/PMI will issue the printed version. The first edition is planned to be issued in the upcoming week.

PMI and IFRC continue to lead and coordinate the Community Engagement Working Group in this response. The working group sees growing interest among aid agencies on the ground as more organisations start to participate in the weekly meetings. In the last WG meeting, local NGO (consisting of village facilitators and teachers), an extension of the Indonesian Government's community development programme, which advocates community needs joined the WG. Since 2015, the Indonesian Government has launched the village fund allocating one billion rupiahs per village to support community development initiatives. This programme is seen potential to support community advocacy work through the government.

The Provincial Health Office reported that there has been an increase of diarrhea case in the affected areas. PMI will focus working on key messaging and two-way dialogues to help the government's actions on this.

Recommendation from community feedback:

- Due to heavy rain and moonson season, it is anticipated that the camps would be flooded. PMI Shelter and WASH sectors need to propose potential solutions such as asking community participation in creating water flow at the camp.

### **Logistics, supply chain and fleet services**

Logistics activities have effectively managed the supply chain, including mobilization, procurement, customs clearance, fleet, storage and transport to distribution sites in accordance with the operation's requirements and aligned to IFRC's logistics standards, processes and procedures. Logistics also continues to play a major role in supporting the relief operation, PMI's logistics capacity, and the fleet, procurement, warehousing needs of IFRC/PMI operation.

To keep up with the increasing logistics and supply chain needs of the operation, the operation has Identified personnel needs - long term delegates for Palu (and Lombok); Logistics coordinator, procurement delegate and general logistics coordinator/procurement Delegate. PMI in parallel are hiring local logistics officers and procurement officers so that within 10 months, international delegates will be able to provide apprenticeship to PMI staff and hand over the responsibilities. This is pertinent to the development and enhancement of PMI capacities.

The mid-term objectives are to implement the revised emergency plan of action related to recovery programmes respecting the initiatives of localization of aid and the grand bargain while taking into account the required standards and quality. Long objectives are related to logistics development and implementation of the logistics strategy related to disaster response and support of daily operations of PMI.

### **Outcome S2.2: The complementarity and strengths of the Movement are enhanced**

Indicator:	Target	Actual
<i>Complementarity and strengths of the Movement are enhanced</i>	Yes	Outcome indicator will be reported in final report

### **Output S2.2.1: In the context of large-scale emergencies the IFRC, ICRC and NS enhance their operational reach and effectiveness through new means of coordination.**

Indicator:	Target	Actual
<i># of RCRC coordination meetings</i>	As necessary	Ongoing

### **Output S2.2.5: Shared services in areas such as IT, logistics and information management are provided**

Indicator:	Target	Actual
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<i>IM system is implemented</i>	Yes	Yes
<b>Progress towards outcomes</b>		
<p><b>Coordination meetings</b></p> <p>PMI, with the support from its partners, is using a Federation-wide Operating Framework (FWOF). The Framework outlines the platform to enable a consolidated effort from the IFRC and PNS to support the operation through PMI's One Plan. A movement coordination meeting was held on 2 November at the newly set up PMI operation basecamp in Jalan Garuda, Palu. PMI, IFRC and PNS representatives were present and among others discussed on operation progress and planning for both Lombok and Sulawesi, joint recovery assessment and IFRC's Secretary General visit to Palu on 6 November.</p> <p><b>Information Management</b></p> <p>IM and SIMS support has been activated to support translation of PMI-collected data into infographics and materials for internal, external use. Six weeks into the operation, IM continues to support all aspect of the operation. PMI's current IM system and data flow has been mapped (with available information): points of collection, collection process, reporting lines, methods of collation, method of dissemination.</p> <p>The mapping has identified six recommendations of minor adjustments that could quickly increase the quality of data collected and greatly reduce the volunteer hours needed for its collation. Advocacy for the changes is ongoing. IFRC has also been given permission to conduct IM capacity assessment for relevant PMI branches. It is hoped that this exercise can help identify branch-specific resourcing plans to improve data collection. This assessment may be extended to cover the different sectors. PMI are onboard with moving to a complete mobile data collection system. The necessary skills already exist within PMI, but to enable this would require longer term support in the establishment of the right structures. There is also a need to better integrate the existing IM capacity within the sectors. This would be especially pertinent should any cash transfer programming occurs.</p> <p>Overall, the objective for the implementation of IM system is to enable data from the field to be used for analysis and in support of decision making. Given the pre-existing information capacity within the NS, and the ability to report on daily numbers, the IM system has good potential and could prove invaluable to future large-scale responses.</p>		

<b>Outcome S3.1: The IFRC secretariat, together with National Societies uses their unique position to influence decisions at local, national and international levels that affect the most vulnerable.</b>		
<b>Target</b>	<b>Actual</b>	<b>Actual</b>
<i>The IFRC secretariat, together with National Societies uses their unique position to influence decisions at local, national and international levels</i>	Yes	Outcome indicator will be reported in final report
<b>Output S3.1.1: IFRC and NS are visible, trusted and effective advocates on humanitarian issues</b>		
<b>Indicator:</b>	<b>Target</b>	<b>Actual</b>
<i># of media log kept and shared on a monthly basis</i>	-	Continuous activity
<b>Output S3.1.2: IFRC produces high-quality research and evaluation that informs advocacy, resource mobilization and programming.</b>		
<b>Indicator:</b>	<b>Target</b>	<b>Actual</b>
<i># of detailed assessment report is produced</i>	1	Not started yet (recovery assessment)
<i># of final external evaluation of the operation is conducted</i>	1	Not started yet
<b>Progress towards outcomes</b>		
<p><b>Media relations</b></p> <p>As per reporting period, below are the key highlights:</p> <ul style="list-style-type: none"> <li>Disseminated press release for one-month mark since the earthquake disaster in Sulawesi; received coverage in AFP: <a href="https://www.yahoo.com/news/month-indonesias-quake-tsunami-hit-city-faces-health-022007613.html">https://www.yahoo.com/news/month-indonesias-quake-tsunami-hit-city-faces-health-022007613.html</a> (this article was also picked up by several other media outlets); and in Al Jazeera <a href="https://www.aljazeera.com/news/2018/10/sulawesi-slow-path-recovery-month-disaster-181029004715753.html">https://www.aljazeera.com/news/2018/10/sulawesi-slow-path-recovery-month-disaster-181029004715753.html</a></li> <li>Also, separate article in Al Jazeera featuring doctor at PMI field clinic: <a href="https://www.aljazeera.com/news/2018/10/broken-healthcare-palu-disaster-181026045632715.html">https://www.aljazeera.com/news/2018/10/broken-healthcare-palu-disaster-181026045632715.html</a></li> <li>Disseminated communications on IFRC Secretary General's visit to Sulawesi and Lombok in early November where he met displaced families, saw distributions of aid, psychosocial support for children and WASH interventions. The Secretary General also took an aerial tour of the liquefaction sites and toured the health clinic in Tompe. Appropriate photos and content were shared regularly throughout the visit on social media, primarily Twitter.</li> </ul>		

- A photographer from the Disasters Emergency Committee (DEC) in the UK visited the Petobo IDP camp to profile a family which has received Red Cross support. The material will be used for an upcoming campaign to thank donors.

The communications delegate supporting the operation continues to carry out appropriate engagement on social media channels, profiling the response, achievements, needs and other relevant social media for visibility purposes. Agreed updates, statistics and audio-visual materials are shared with Red Cross and Red Crescent partners on a weekly basis purpose.

### **Assessments and evaluations**

According to the plan of action, a multisectoral detailed assessments will be conducted in order to ensure relevancy of the strategy and guide revision as required. PMI and IFRC will soon be carrying out a recovery assessment (joint multi-sectoral) by end of November. The purpose and objective of the recovery assessment is to deliver the overall PMI recovery plans, a detailed recovery assessment is proposed, led by PMI and supported by IFRC and PNS is a priority. The assessment will also be used to support the revision of the EPOA for both Lombok and Palu operations.

A baseline survey is outlined in the plan of action, to collect baseline data. But, since there're already early assessments conducted by multiple agencies, relevant information will be consolidated as baseline data using available secondary data. In the meantime, sectoral assessments are ongoing, and some have been completed by corresponding cluster coordination teams, including the IFRC managed shelter cluster, and in some cases, by IFRC/PMI teams, such as health. Assessments for emergency health and public health has been concluded as well as WASH assessments for the 10 PMI emergency shelter sites. Access to clean water continue to be one of the main needs. Emergency camps assessment which include collecting information on number of tents, types of tents, and occupants has been completed for all 10 PMI supported emergency camps. Further assessment of camp infrastructure, satisfaction survey (CEA) are ongoing.

A Real Time Evaluation (RTE) is in the pipeline (tentative to start early December), in which the purpose (proposed) is to assess the ongoing IFRC response to Indonesia Earthquakes and Tsunami response (MDRID013) and its context from late July 2018 with a particular focus on how the localization model has applied and impacted the operational, cooperation and coordination mechanisms within and outside of the Movement. The outcome of the RTE will inform the continued response as well as IFRC readiness in adapting emergency operations, coordination efforts with the NS and readiness requirements, including with public authorities, to adapt to locally-led operating conditions.

A mid-term review as well as review on inter-agencies logistics coordination and/or case study are also part of the plan of action which will be conducted in later stages of the operation. A final evaluation will be conducted by the end of the operation period which will highlight key findings, conclusions and recommendations based on agreed Term of Reference (ToR).

### **Outcome S3.2: The programmatic reach of the National Societies and the IFRC is expanded.**

Indicator:	Target	Actual
<i>Work in planning and reporting to ensure effective accountability internally and externally</i>	Yes	Outcome indicator will be reported in final report

### **Output S3.2.1: Resource generation and related accountability models are developed and improved**

Indicator:	Target	Actual
<i>Meeting and reporting deadlines are respected</i>	Yes	Yes

### **Output S3.2.3 National Societies are supported in resource and partnership development (from both domestic markets and foreign sources).**

Indicator:	Target	Actual
<i># of meetings with diplomatic representations</i>	4	As necessary

### **Progress towards outcomes**

Partners who have contributed to the IFRC Emergency Appeal can be found in the donor [response list](#). IFRC's Resource Mobilisation team has been actively coordinating with donors (via partners call and meeting) and drafting proposals to fill the funding gap in some of the sectors within the emergency appeal. As mentioned earlier, the Emergency Appeal Plan of Action will be revised following a joint recovery assessment, and it will portray a better picture of the funding needs.

Situation reports, and operation updates have been issued accordingly in coordination with Asia Pacific Regional Office. In addition, PMER will monitor and liaise with sectoral teams on issuing donor reports based on donor earmarked funding for the operation. To consolidate federation-wide responses for this operation, a Federation Wide Report will be issued.

<b>Outcome S4.1: The IFRC enhances its effectiveness, credibility and accountability</b>		
<b>Indicator:</b>	<b>Target</b>	<b>Actual</b>
<i>% of operations in accordance to established guidelines</i>	100%	Outcome indicator will be reported in final report
<b>Output S4.1.2: IFRC staff shows good level of engagement and performance</b>		
<b>Indicator:</b>	<b>Target</b>	<b>Actual</b>
<i>% compliance with IFRC HR procedures</i>	100%	100%
<b>Output S4.1.3: Financial resources are safeguarded; quality financial and administrative support is provided contributing to efficient operations and ensuring effective use of assets; timely quality financial reporting to stakeholders.</b>		
<b>Indicator:</b>	<b>Target</b>	<b>Actual</b>
<i>% compliance with IFRC financial procedures</i>	100%	100%
<b>Output S4.1.4: Staff security is prioritised in all IFRC activities</b>		
<b>Indicator:</b>	<b>Target</b>	<b>Actual</b>
<i># of updated security guidelines produced before second month</i>	1	1 Updates will be made as necessary
<b>Progress towards outcomes</b>		
<p>PMI and IFRC work together to safeguard an efficient operation. Operational expenses such as volunteer per diems, accommodation, transportation, communication and coordination activities are factored in. Procurement is done following IFRC standard procedures. Finance and administration support to the operation is provided to the operation and staff.</p> <p>Security plans are in place, medical evacuation plans have been finalized in cooperation with Staff health in Geneva. Since the departure of the Security Surge/Delegate the support for security has come from short rotations from the Jakarta office and also from the Asia Pacific Regional Office. An amendment to the security plan to require redundant communications (Sat Phones) during travel to particular districts (Sirenja, Balaesang Tanjung, and Kuwali) has been completed. The initial security environment after the disaster was listed as orange. As the city begins to show clear signs of order and recovery happening this will need to be adjusted to allow for normal operations to continue while ensuring the safety and security of staff is maintained.</p>		

## Budget

Note: the EPoA budget still remain the same as per published EPoA. Changes to the budget and some activities are expected following a joint recovery assessment scheduled by end of November. Detailed expenditure is outlined in the attached interim financial report.

## Reference documents

Click for:

- [Previous Appeals and Updates](#)
- [Emergency Plan of Action \(EPOA\)](#)

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**How we work**

All IFRC assistance seeks to adhere to the **Code of Conduct** for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief and the **Humanitarian Charter and Minimum Standards in Humanitarian Response (Sphere)** in delivering assistance to the most vulnerable. The IFRC's vision is to inspire, **encourage, facilitate and promote at all times all forms of humanitarian activities** by National Societies, with a view to **preventing and alleviating human suffering**, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

The IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:



**Save lives.**  
protect livelihoods,  
and strengthen recovery  
from disaster and crises.



Enable **healthy**  
and **safe** living.



Promote **social inclusion**  
and a culture of  
**non-violence** and **peace**.

## Disaster Response Financial Report

## MDRID013 - Indonesia - Earthquakes and Tsunami

Timeframe: 31 Jul 18 to 28 Feb 21

Appeal Launch Date: 08 Aug 18

## Interim Report

## Selected Parameters

Reporting Timeframe	2018/7-2018/10	Programme	MDRID013
Budget Timeframe	2018/7-2021/2	Budget	APPROVED
Split by funding source	Y	Project	*
Subsector:	*		

All figures are in Swiss Francs (CHF)

## I. Funding

	Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability	TOTAL	Deferred Income
<b>A. Budget</b>		<b>18,611,438</b>				<b>18,611,438</b>	
<b>B. Opening Balance</b>							
<b>Income</b>							
<b>Cash contributions</b>							
American Red Cross		982,691				982,691	
Australian Red Cross		346				346	
Belgian Red Cross (Francophone)		523,881				523,881	
British Red Cross		2,493				2,493	
China Red Cross, Hong Kong branch		50,118				50,118	
China Red Cross, Macau Branch		25,000				25,000	
Danish Red Cross		30,000				30,000	
European Commission - DG ECHO		735,188				735,188	
Finland - Private Donors		57				57	
Finnish Red Cross		84,505				84,505	
German Red Cross		22,852				22,852	
Germany - Private Donors		171				171	
Grab-GP Network Asia PTE LTD		12,584				12,584	
Intercontinental Hotels Groups(IHG)		24,354				24,354	
Ireland - Private Donors		114				114	
Irish Government		285,751				285,751	
Italian Government Bilateral Emergency Fund		455,125				455,125	
Italian Red Cross		34,163				34,163	
Japanese Red Cross Society		200,411				200,411	
Liechtenstein Government		100,000				100,000	
Netherlands - Private Donors		114				114	
New Zealand Government		1,457,250				1,457,250	
Norwegian Red Cross		204,229				204,229	
Norwegian Red Cross (from Norwegian Government*)		807,348				807,348	
OPEC Fund For International Development-OFID		787,463				787,463	
Red Cross of Viet Nam		9,966				9,966	
Spain - Private Donors		80				80	
Spanish Government		343,446				343,446	
Spanish Red Cross		232,898				232,898	
Swedish Red Cross		57,280				57,280	
Swedish Red Cross (from Swedish Government*)		1,088,324				1,088,324	
Swiss Government		800,000				800,000	
Swiss Red Cross		630,000				630,000	
Switzerland - Private Donors		200				200	
The Canadian Red Cross Society		203,239				203,239	
The Netherlands Red Cross		1,139,518				1,139,518	
The Netherlands Red Cross (from Netherlands Government*)		1,707,396				1,707,396	
The Republic of Korea National Red Cross		300,000				300,000	
United States Government - USAID		35,004				35,004	
United States - Private Donors		4,981				4,981	
<b>C1. Cash contributions</b>		<b>13,378,540</b>				<b>13,378,540</b>	
<b>Inkind Goods &amp; Transport</b>							
Australian Red Cross		5,317				5,317	
British Red Cross		38,352				38,352	
German Red Cross		907,472				907,472	
Japanese Red Cross Society		349,604				349,604	
Norwegian Red Cross		36,797				36,797	
United States Government - USAID		538,519				538,519	
<b>C2. Inkind Goods &amp; Transport</b>		<b>1,876,061</b>				<b>1,876,061</b>	

## Disaster Response Financial Report

### MDRID013 - Indonesia - Earthquakes and Tsunami

Timeframe: 31 Jul 18 to 28 Feb 21

Appeal Launch Date: 08 Aug 18

#### Interim Report

#### Selected Parameters

Reporting Timeframe	2018/7-2018/10	Programme	MDRID013
Budget Timeframe	2018/7-2021/2	Budget	APPROVED
Split by funding source	Y	Project	*
Subsector:	*		

All figures are in Swiss Francs (CHF)

<u>Inkind Personnel</u>			
Australian Red Cross	735	735	
<b>C3. Inkind Personnel</b>	<b>735</b>	<b>735</b>	
<b>C. Total Income = SUM(C1..C4)</b>	<b>15,255,337</b>	<b>15,255,337</b>	<b>354,098</b>
<b>D. Total Funding = B +C</b>	<b>15,255,337</b>	<b>15,255,337</b>	<b>354,098</b>

\* Funding source data based on information provided by the donor

## II. Movement of Funds

	Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability	TOTAL	Deferred Income
<b>B. Opening Balance</b>							
<b>C. Income</b>		15,255,337				15,255,337	354,098
<b>E. Expenditure</b>		-3,800,310				-3,800,310	
<b>F. Closing Balance = (B + C + E)</b>		11,455,026				11,455,026	354,098

## Disaster Response Financial Report

## MDRID013 - Indonesia - Earthquakes and Tsunami

Timeframe: 31 Jul 18 to 28 Feb 21

Appeal Launch Date: 08 Aug 18

## Interim Report

## Selected Parameters

Reporting Timeframe	2018/7-2018/10	Programme	MDRID013
Budget Timeframe	2018/7-2021/2	Budget	APPROVED
Split by funding source	Y	Project	*
Subsector:	*		

All figures are in Swiss Francs (CHF)

## III. Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability		
	A					B	A - B	
<b>BUDGET (C)</b>			<b>18,611,438</b>			<b>18,611,438</b>		
<b>Relief items, Construction, Supplies</b>								
Shelter - Relief	1,252,000		1,372,681			1,372,681	-120,681	
Shelter - Transitional	270,000						270,000	
Construction - Facilities	1,220,000						1,220,000	
Clothing & Textiles	230,000		48,500			48,500	181,500	
Water, Sanitation & Hygiene	1,623,141		57,272			57,272	1,565,869	
Medical & First Aid	508,000						508,000	
Teaching Materials	166,500						166,500	
Other Supplies & Services	2,031,624						2,031,624	
Cash Disbursement	3,570,000						3,570,000	
<b>Total Relief items, Construction, Sup</b>	<b>10,871,265</b>		<b>1,478,453</b>			<b>1,478,453</b>	<b>9,392,813</b>	
<b>Land, vehicles &amp; equipment</b>								
Vehicles	225,000						225,000	
Computers & Telecom	147,200						147,200	
<b>Total Land, vehicles &amp; equipment</b>	<b>372,200</b>						<b>372,200</b>	
<b>Logistics, Transport &amp; Storage</b>								
Storage	15,000		48,400			48,400	-33,400	
Distribution & Monitoring	1,226,000		555,908			555,908	670,092	
Transport & Vehicles Costs	1,085,480		14,955			14,955	1,070,525	
Logistics Services	142,000		111,897			111,897	30,103	
<b>Total Logistics, Transport &amp; Storage</b>	<b>2,468,480</b>		<b>731,160</b>			<b>731,160</b>	<b>1,737,320</b>	
<b>Personnel</b>								
International Staff	436,950		40,909			40,909	396,041	
National Staff	86,000		6,223			6,223	79,777	
National Society Staff	264,600						264,600	
Volunteers	863,240		860			860	862,381	
<b>Total Personnel</b>	<b>1,650,790</b>		<b>47,992</b>			<b>47,992</b>	<b>1,602,798</b>	
<b>Consultants &amp; Professional Fees</b>								
Consultants	438,300		3,296			3,296	435,004	
Professional Fees	151,494						151,494	
<b>Total Consultants &amp; Professional Fees</b>	<b>589,794</b>		<b>3,296</b>			<b>3,296</b>	<b>586,498</b>	
<b>Workshops &amp; Training</b>								
Workshops & Training	372,800						372,800	
<b>Total Workshops &amp; Training</b>	<b>372,800</b>						<b>372,800</b>	
<b>General Expenditure</b>								
Travel	799,700		42,670			42,670	757,030	
Information & Public Relations	126,000		815			815	125,185	
Office Costs	1,200		5,997			5,997	-4,797	
Communications	43,000		1,596			1,596	41,404	
Financial Charges	13,499		2,560			2,560	10,940	
Other General Expenses	27,285		183			183	27,102	
Shared Office and Services Costs	139,515		5,141			5,141	134,374	
<b>Total General Expenditure</b>	<b>1,150,199</b>		<b>58,962</b>			<b>58,962</b>	<b>1,091,237</b>	
<b>Operational Provisions</b>								
Operational Provisions			1,282,478			1,282,478	-1,282,478	
<b>Total Operational Provisions</b>			<b>1,282,478</b>			<b>1,282,478</b>	<b>-1,282,478</b>	
<b>Indirect Costs</b>								

**Disaster Response Financial Report**

MDRID013 - Indonesia - Earthquakes and Tsunami

Timeframe: 31 Jul 18 to 28 Feb 21

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Interim Report

**Selected Parameters**

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Split by funding source	Y	Project	*
Subsector:	*		

All figures are in Swiss Francs (CHF)

**III. Expenditure**

Account Groups	Budget	Expenditure					TOTAL	Variance
		Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability		
	A					B	A - B	
<b>BUDGET (C)</b>			<b>18,611,438</b>			<b>18,611,438</b>		
Programme & Services Support Recove	1,135,909		197,970			197,970	937,939	
<b>Total Indirect Costs</b>	1,135,909		197,970			197,970	937,939	
<b>TOTAL EXPENDITURE (D)</b>	<b>18,611,438</b>		<b>3,800,310</b>			<b>3,800,310</b>	<b>14,811,128</b>	
<b>VARIANCE (C - D)</b>			<b>14,811,128</b>			<b>14,811,128</b>		