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Emergency Plan of Action (EPoA) Indonesia: Sunda Straits Tsunami

 International Federation
of Red Cross and Red Crescent Societies

DREF n° MDRID014	Glide n° EQ-2018-000122-IDN
Date of issue: 24 December 2018	Expected timeframe: 4 months Expected end date: 30 April 2019
Category allocated to the of the disaster or crisis: Yellow	
DREF allocated: CHF 328,621	
Total number of people affected: 58,117 people (in four districts in two provinces, numbers are expected to increase as rapid assessment is underway) 3,801 people (760 HH) in Lampung Province and 54,316 people (10,863 HH) in Banten Province	Number of people to be assisted: 7,000 (approx. 1,400 households)
Host National Society presence: Indonesian Red Cross Society – Palang Merah Indonesia (PMI) – has 34 provincial chapters and 474 district branches nationwide, with 8 branches in Banten Province and 12 branches in Lampung. PMI has so far mobilized at least 117 personnel of volunteers and staff for the response.	
Red Cross Red Crescent Movement partners actively involved in the operation: PMI works with the IFRC and ICRC as well as American Red Cross, Australian Red Cross and Japanese Red Cross Society in-country. Most are supporting longer-term programmes but some may potentially support PMI's response to the tsunami on bilateral basis.	
Other partner organizations actively involved in the operation: Mainly national agencies are actively involved in the response. They include the National Search and Rescue Agency (BASARNAS), National Disaster Management Agency (BNPB), the Regional Disaster Management Agency (BPBD), Indonesian National Police (POLRI), Indonesian National Armed Forces (TNI) and local government agencies	

A. Situation analysis

Description of the disaster

The National Agency for Disaster Management (BNPB) and the Agency for Meteorology, Climatology, and Geophysics (BMKG) reported that high tides/tsunami hit Carita Beach in Banten Province and the coast around the Sunda Strait, specifically in Pandenglang, South Lampung and Serang districts on 22 December 2018 at 21:27hrs.

According to Government reports, the event was recorded four times in four different locations with tidal waves reaching a height of 30-90 cm. The highest wave hit Serang sub-district at 21.27 hrs local time with the height of 90 cm. BMKG issued high-tide warning before the tsunami struck for the mentioned area. A tsunami early warning was not issued as the cause of the tsunami was not an earthquake, which the current system monitors and responds to:



The impact of tsunami/tidal wave in Way Muli, South Lampung.
(Photo: PMI)

Impact	Figures
Fatalities	373
Injured	1,459
Missing	128
Displaced	5,669
Houses damaged	681
Hotel damaged	69
Food stall damaged	420

The highway connecting Serang and Pandeglang was cut off due to the tsunami and remains difficult to pass in several areas. A total of 681 houses, 69 hotels, 420 boats and dozens of vehicles reported damaged in four sub-districts, namely Padanglang, South Lampung, Tanggamus and Serang.

Pandeglang is the worst affected area with 164 deaths, 624 injured, 446 houses and nine hotels damaged. There were reports about population movement after this disaster as many holiday goers were in the tourist area. Currently, the actual situation is being assessed and verification of numbers is ongoing. Settlements and tourist sites on Tanjung Lesung Beach, Sumur Beach, Teluk Lada Beach, Panimbang Beach, and Carita Beach were severely affected. There were huge number of tourists in the coastal area of Pandeglang, one of the worst affected areas when the tsunami struck. It is understood that a proportion of the fatalities and injured come from these national tourists visiting the area. Some community members remain frightened of another similar event and this has led to some taking temporary shelter away from their coastal homes.

In Lampung, 48 people died, 213 injured and 110 unit of houses heavily damaged and about 1,000 people were reported of being displaced. While in Serang 11 people died, 22 injured and 26 missing. The assessment is still on going, the casualties might increase, based on government official report. The impact is likely to continue to grow considering that not all affected areas have been assessed.

Response by the provincial disaster management agency (BPBD)

BPBD together with the military, police, the national search and rescue agency (Basarnas), local government office, Ministry of Social Welfare Volunteers (Tagana), Indonesian Red Cross (PMI), volunteers and the community are providing emergency response support to the affected people.

Government has not declared emergency status or established a response structure yet, currently the response is being locally coordinated along with the establishment of command post, field kitchen and displacement site. Heavy equipment is being dispatched to clear debris to ease evacuation and response.

The initial prediction on the cause could be that of a possible underwater landslide due to the eruption of Mount Anak Krakatau combined with higher than usual tides due to the full moon. The causes of this event are being investigated by BMKG (Agency for Meteorology, Climatology, and Geophysics), BNPB (Indonesian Disaster Management Authority) and PVMBG (Centre of Volcanology and Geological Disaster Mitigation). The Government has issued a warning to avoid activity along the coastal area.

Summary of the current response

Overview of host National Society

PMI has mobilized 22 ambulance units (with medical crew), to provide emergency medical and referral services as well as 15 water tankers. PMI also dispatched the following relief materials from its regional warehouse in Banten: 150 blankets, 20 boxes of mineral water, 150 tarpaulins, 20 sets of equipment to clean the area of Carita and Anyer (shovel, mattock (a hand tool like pickaxe for digging and chopping), etc.), family kits and 40 hygiene kits.

PMI has also mobilized the following assets and personnel:

- Branch teams to conduct assessments and needs analysis.
- 22 units of ambulance (with medical crew), for referral service.
- 14 water trucks (eight units for Lampung province and six units for Banten province).
- Emergency funds being released for operations support in Lampung and Banten.
- Deploying one team of orthopedic specialist doctors.
- Deploying five mobile clinic teams, three teams to Banten and two teams to Lampung.
- Deploying two helicopters for search and rescue operations.



PMI volunteer is evaluating affected people in South Lampung. (Photo: PMI)

The IFRC Country Cluster Support Team (CCST) in Jakarta is providing technical support and working in coordination with PMI on needs assessment and to support communications and media relations needs.

Overview of Red Cross Red Crescent Movement in country

PMI works with the IFRC and ICRC as well as American, Australian, Canadian and Japanese Red Cross societies in-country. All these partners are coordinating with PMI on how and where they can provide support.

Movement coordination

The IFRC Country Cluster Support Team (CCST) in Jakarta is providing technical and coordination support to PMI with two personnel working inside the PMI headquarter team; one to work closely with PMI on needs assessment, developing operational plan and the other to support communications and media relations needs. The CCST is also set to provide financial support to enable the mobilization of personnel and supplies by PMI. This DREF allocation will support PMI in its delivery of immediate relief to affected communities while assessments continue. Initial discussions are also being held with the Australian Embassy in Jakarta to assess the possibility to access emergency response funds from the Department of Foreign Affairs and Trade (DFAT) should the situation and needs escalate in coming weeks.

A Movement coordination meeting was conducted with the PMI chairman who is also the Vice President of Indonesia, partners and ICRC on Sunday, 23 December to discuss the response to date and how to best support the National Society's continued efforts in a coordinated manner. PMI local chapters coordinated closely with local government and other stakeholders regularly on the ground and consolidate assessment report and response strategy and identify the gaps.

Overview of non-RCRC actors in country

PMI and the IFRC are coordinating with BNPB and the Ministry of Social Affairs (MOSA) to obtain more information on the humanitarian impact caused by the earthquake. 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.

Inter-agency coordination

At the country level, 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. Together with MOSA, the national cluster lead, PMI and IFRC co-lead the shelter cluster.

Needs analysis, targeting, scenario planning and risk assessment

Needs analysis

Within hours after the event, PMI deployed teams from neighbouring base units and national headquarters to support the local base units in undertaking an emergency response while at the same time, conducting rapid assessments to obtain a general idea of urgent needs in the most affected communities. In addition to the National Society's own staff and volunteers, personnel of IFRC are participating in the analysis of rapid assessments.

Based on initial information from PMI teams on the ground, analysis of needs on reports from its base units, review of secondary data – including updates from BNPB and BPBD -- and media reports, PMI has determined the immediate needs.

The situation is evolving as more information on the extent of damage and needs emerge – more areas are to be fully accessed for assessment, including some of the islands in the Straits. A detailed plan of action for the PMI response will be developed over the coming days based on rapid assessments and analysis of secondary data. Based on the information to date, the level of damage is relatively low and while the death toll and injured may be relatively high as a large proportion of these were tourists visiting from outside the most physically affected area.

The needs analysis for each sector is elaborated below in **Section C: Detailed Operational Plan**.

Targeting

PMI will ensure that interventions are aligned with its own as well as the IFRC minimum standard commitments to protection, gender and inclusion in emergency programming, for example by targeting women-headed households, pregnant or lactating women, men, women, and children made vulnerable by the disaster, families that have not received any or sufficient assistance from the government or other organizations, those belonging to the socially vulnerable households, and those who lack relevant resources to cope with basic humanitarian needs on their own. These groups will be considered according to level of impact.

B. Operational strategy

Overall objective

This operation aims to assist an initial 7,000 people (approximately 1,400 households) affected by the event in the districts of Pandeglang, Serang in Banten Province and Tanggamus and South Lampung in Lampung Province as the most affected, mainly with appropriate immediate and medium-term assistance in a timely, effective, and efficient manner, as well as accompany them to recover and increase their resilience to future shocks.

Proposed strategy

The operation consists of closely integrated sectors aiming to provide:

1. **Relief assistance** through the provision of hygiene kits, tarpaulins, blankets, body bags and sleeping mats;
2. **Health** interventions focusing on basic health care by mobilizing mobile clinics, psychosocial support, first aid and referral services as required;
3. **Water, sanitation and hygiene** interventions focusing on distribution of clean water and hygiene promotion;
4. **Support evacuation, search and rescue effort** together with local government and other stakeholders.

Geographically, the operation will focus on the most affected areas of Pandeglang and Serang districts in Banten Province and Tanggamus and South Lampung districts in Lampung Province. PMI will also undertake interventions using resources it has or it will mobilize bilaterally and/or from non-Movement sources. As further information is made available through the ongoing assessments supported by this initial DREF allocation, the operation may be revised, with either a second allocation or the launch of an emergency appeal to meet further identified needs should it be required.



PMI medical teams provide basic health care and first aid services to affected community (Photo: PMI Lampung)

The operation supported by DREF will cover a combination of replenishment of items available under PMI's prepositioned stocks and relief through local procurement for remaining items and its delivery to the most affected. While the overall operation timeframe is estimated to be up to four months, PMI plans to implement all activities within the first three, leaving month four to finalize and reconcile payments and paperwork as well as carry out the lessons learned workshop in the end.

Crosscutting matters

Protection, gender and inclusion (PGI)

PMI will ensure that interventions are aligned with its own as well as the IFRC minimum standard commitments to Protection, Gender and Inclusion during Emergencies, including targeting women-headed households, pregnant or lactating women, and men, women and children made vulnerable by the disaster. The following considerations apply:

- prevention of sexual and gender-based violence, by mapping and distribution of safe referral pathways (in coordination with the Protection Cluster) and training of PMI volunteers on how to handle disclosures and refer individuals to appropriate services when necessary.
- Women and child friendly spaces in any temporary housing arrangement.
- Distribution of child protection information materials (based on lessons learned from PMI response during Mt. Agung Operation).

Community engagement and accountability (CEA)

Community accountability and feedback/response mechanisms will be integrated into programming to ensure that affected populations have direct access to information on the nature and scope of services provided by PMI, along with processes that will enable community participation and feedback.

Operational support services

Human resources

The operation will be implemented by the PMI base units in the districts of Pandeglang and Serang in Banten Province and South Lampung, Tanggamus and Pesawaran in Lampung Province utilizing existing staff, but with support of the provincial chapter and the national headquarters. Where needed and as the situation develops, the National Society may hire additional project staff.

The IFRC will provide technical support and guidance to PMI, including by assigning its operation manager and communication coordinator to work closely with PMI and support cluster coordination should it be activated.

Logistics and supply chain

Logistics activities aim to effectively manage the supply chain, including procurement, fleet, storage and transport to distribution sites in accordance with the operation's requirements and aligned to IFRC's logistics standards, processes and procedures.

To meet the immediate operational needs, PMI has sufficient stocks of relief items prepositioned across various warehouses and which have been released to the affected areas. All in-country transportation of relief items is being carried out utilizing PMI existing fleet although in some cases additional trucks have been rented.

Procurement to replenish relief items required to meet immediate needs will be primarily be done locally by the PMI. The Operational Logistics, Procurement and Supply Chain Management (OLPSCM) Department in Kuala Lumpur will extend technical support to PMI and the IFRC Jakarta CCST as needed.

Communications

Communicating with key audiences is important to maintain and grow public, government and donor support both domestically and internationally. Maintaining a steady flow of timely and accurate public information focusing on the humanitarian needs and the Red Cross Red Crescent response is vital to support effective resource mobilization efforts and enhance collaboration with key partners and stakeholders. Within 24 hours of this disaster, global media coverage included from Al Jazeera, CNN International, BBC News, AFP, EFE, El País, the Guardian, Reuters, Voice of America, Deutsche Welle and more, with strong engagement on social media. PMI and IFRC communications efforts are focused on highlighting the humanitarian needs on the ground and securing positive positioning for the response efforts of PMI.

Social media is the main platform being used to share material (Twitter, Facebook and Instagram), with rapid and periodic sharing of AV materials such as video footages, infographics, photo essays. These materials will also be shared via the IFRC communications Newswire along with Talking Points, press releases, photos and raw video for news outlets (B-roll).

PMI will mobilize its communication team from Central Java province to the affected area to support with media relation and production of audio and visual materials. The PMI communications team, with the support of the IFRC Communications and CEA Coordinator, will continue to expand its activities to mark key milestones such as treating injured people and the search and rescue for the affected people. Technical support will also be provided by IFRC communication team in APRO. The principal aim is to ensure that the Red Cross Red Crescent humanitarian response is professionally communicated, understood and supported by internal and external stakeholders.

Information management (IM)

PMI will utilize existing capacity to facilitate the collection, collation, analysis and dissemination of relevant multi-sectoral data and information so as to support evidence-based decision making that can contribute to an effective humanitarian intervention.

Planning, monitoring, evaluation, & reporting (PMER)

PMI PMER manager with support from IFRC PMER will develop 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. DREF lesson learned workshop will be conducted at the end of the operation to ensure effectiveness, efficiency and accountability.

Security

The National Society's security framework will apply to PMI staff and volunteers. For personnel under IFRC security responsibility, the existing IFRC country security plan, including contingency plans for medical emergencies, relocation and critical incident management will apply. If these personnel will be based in or frequently travelling to the affected

area, then area specific risk assessments and addendum to the existing security plans will be required. Currently there is no plans to deploy IFRC staff to the area for extended time. 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 will continue to provide support to the operation as requested by PMI and the IFRC programme manager/budget holder.

AP022	Conduct first aid orientation for PMI staff and volunteers		x	x															
P&B Output Code	Health Output 1.2: Community-based disease prevention and health promotion is provided to the target population	<i>7,000 people reached with community-based disease prevention and health promotion programming</i>																	
	Activities planned	Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	
AP011	Produce IEC material for health promotion		x	x	x														
AP011	Conduct health promotion orientation for PMI staff and volunteers		x	x															
AP011	Provide health promotion to target population		x	x	x														
P&B Output Code	Health Output 1.3: Psychosocial support provided to the target population	<i>7,000 people reached by psychosocial support</i>																	
	Activities planned	Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	
AP023	Conduct psychosocial support orientation for PMI staff and volunteers		x	x															
AP023	Conduct psychosocial support activities in communities		x	x	x														
AP023	Reproduce and distribute IEC materials on psychosocial support and child protection		x	x															
P&B Output Code	Health Output 1.4: Target population is reached with Search and Rescue activities	<i># of volunteers deployed</i>																	
	Activities planned	Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	
AP082	Trained volunteers are deployed to support search and rescue and evacuation activities		x																



Water, sanitation and hygiene

People targeted: 7,000 (1,400 households)

Male: TBD

Female: TBD

Requirements (CHF): 98,540

Needs analysis: There is a disruption of water supply in some of the affected areas based on various reasons, including water distribution lines, individual wells. In the immediate term, affected families also need to access safe and clean water.

Population to be assisted: Up to 1,400 households in all four affected districts in two provinces of Banten and Lampung to be reached with safe water distribution and hygiene promotion activities.

Programme standards/benchmarks: *This operation will seek to meet Sphere standards.*

P&B Output Code	WASH Outcome1: Immediate reduction in risk of waterborne and water related diseases in targeted communities	<i>1,400 households provided with safe water services that meet agreed standards according to specific operational and programmatic context</i>																
	WASH Output 1.1: Daily access to safe water which meets Sphere and WHO standards in terms of quantity and quality is provided to target population	<i>7,000 people provided with safe water (according to WHO standards)</i>																
	Activities planned	Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP026	Mobilize 15 units of 5,000-litre of water truck		x	x														
AP026	Distribute safe water to affected communities		x	x	x													
P&B Output Code	WASH Output 1.2: Hygiene promotion activities which meet Sphere standards in terms of the identification and use of hygiene items provided to target population	<i>7,000 people reached with hygiene promotion activities</i>																
	Activities planned	Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP030	Develop a hygiene communication plan and train volunteers to implement activities from communication plan		x	x														
AP030	Reprint existing IEC materials		x	x														
AP030	Mobilize existing volunteers to participate in basic hygiene promotion activities		x	x	x	x												
AP030	Undertake hygiene promotion activities alongside distribution of hygiene kits			x	x													
P&B Output Code	WASH 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	<i>1,400 households provided with a set of essential hygiene items</i>																
	Activities planned	Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP030	Distribute hygiene kits to at least 1,400 households		x	x	x													
AP030	Replenishment of 1,500 hygiene kits		x	x														



Protection, Gender and Inclusion¹

People targeted: -

Requirements (CHF): -

Needs analysis: Based on lessons learned from the recent Mt Agung operation and the report: “The Responsibility to Prevent and Respond to Sexual and Gender Based Violence in Disasters and Crisis”, disaster affected women, girls, men and boys are at higher risk to SGBV such a domestic violence, child marriage, sexual harassment and trafficking.

¹ This area of focus is a merge of what previously was Social Inclusion and Culture of Non-violence and peace. It is under development, so for now it represents the physical merge of three existing relevant outputs.

Population to be assisted: Households supported by this operation through the outlined interventions above.

Programme standards/benchmarks: *This operation will seek to meet acceptable CEA standards.*

P&B Output Code	Inclusion and Protection 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	<i>Does the operation demonstrate evidence of addressing the specific needs to ensure equitable access to disaster response services?</i>																
	Inclusion and Protection Output 1.2: Emergency response operations prevent and respond to sexual- and gender-based violence and all forms of violence against children.	<i>Does the operation demonstrate evidence of compliance with IFRC minimum standard commitments to gender and diversity in emergency programming?</i>																
	Activities planned	Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP034	Follow up and provide technical support to ensure compliance with IFRC minimum standard commitments to gender and diversity in emergency programming		x	x	x	x												

Strategies for Implementation

Requirements (CHF): 40,250

P&B Output Code	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.	<i># of NS branches that are well functioning</i>																
	Output S1.1.4: National Societies have effective and motivated volunteers who are protected	<i>All of volunteers are insured</i>																
	Activities planned	Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP040	Ensure that volunteers are insured		x	x														
AP040	Provide complete briefings on volunteers' roles and the risks they face		x	x														
AP040	Provide psychosocial support to volunteers		x	x	x	x												
AP040	Ensure volunteers are aware of their rights and responsibilities		x	x	x	x												
AP040	Ensure volunteers' safety and wellbeing		x	x	x	x												
AP040	Ensure volunteers are properly trained		x	x	x	x												
AP040	Ensure volunteers' engagement in decision-making processes of respective projects they implement		x	x	x	x												
P&B Output Code	Output S2.1.3: NS compliance with Principles and Rules for Humanitarian Assistance is improved	<i>NS is compliant with Principles and Rules for Humanitarian Assistance</i>																
	Activities planned	Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16

Budget

DREF OPERATION

24/12/2018

MDRID014 : Indonesia : Sunda Straits Tsunami

Budget Group	DREF Grant Budget CHF
Shelter - Relief	34,965
Clothing & Textiles	21,803
Water, Sanitation & Hygiene	61,512
Medical & First Aid	56,434
Other Supplies & Services	5,245
Total RELIEF ITEMS, CONSTRUCTION AND SUPPLIES	179,958
Storage, Warehousing	3,000
Distribution & Monitoring	3,000
Transport & Vehicle Costs	24,979
Total LOGISTICS, TRANSPORT AND STORAGE	30,979
International Staff	5,850
National Society Staff	13,252
Volunteers	48,057
Total PERSONNEL	67,160
Workshops & Training	2,168
Total WORKSHOP & TRAINING	2,168
Travel	14,000
Information & Public Relations	6,299
Office Costs	4,000
Communications	4,000
Total GENERAL EXPENDITURES	28,299
Programme and Supplementary Services Recovery	20,057
Total INDIRECT COSTS	20,057
TOTAL BUDGET	328,621

Reference documents



Click for:

- [Information Bulletin No. 1](#)
- [Information Bulletin No. 2](#)

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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:



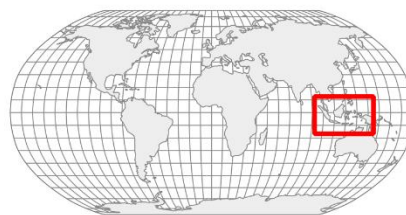
Save lives,
protect livelihoods,
and strengthen recovery
from disaster and crises.



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



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



Indonesia, Sunda Straits Tsunami: Disaster Relief Emergency Fund

23 December 2018 • TS-2018-000423-IDN

- ⊗ National Capital
- Affected Areas



The maps used do not imply the expression of any opinion on the part of the International Federation of the Red Cross and Red Crescent Societies or National Societies concerning the legal status of a territory or of its authorities. Map data sources: OCHA, OSM Contributors, ICRC, IFRC.

