

Emergency Plan of Action (EPoA)

Indonesia: West Kalimantan Floods

DREF Operation n°	MDRID022	Glide n°:	FL-2021-000173-IDN
Date of issue:	15 November 2021	Expected timeframe:	4 months
		Expected end date:	31 March 2022
Category allocated to the of the disaster or crisis: Yellow			
DREF allocated: CHF 244,375			
Total number of people affected:	202,392	Number of people to be assisted:	16,775
Provinces affected:	West Kalimantan	Provinces/Regions targeted:	Sekadau district Sintang district Sanggau district Ketapang district Melawi district
Host National Society(ies) presence (n° of volunteers, staff, branches): The Indonesian Red Cross (Palang Merah Indonesia or PMI) – has 34 provincial chapters and 474 district branches nationwide, with 24 branches in West Kalimantan. As per 9 November 2021, PMI has deployed 62 volunteers to the field.			
International Red Cross and Red Crescent Movement partners actively involved in the operation: The IFRC Country Cluster Delegation (CCD) in Jakarta is providing technical support to PMI in planning and implementing this DREF operation.			
Other partner organizations actively involved in the operation: Provincial and district government agencies such as provincial-level; Indonesian Disaster Management Authority (<i>Badan Penanggulangan Bencana Daerah (BPBD)</i>), Indonesian Search and Rescue Authority (BASARNAS), Regional Water Company (<i>Perusahaan Daerah Air Minum</i> or PDAM) and Community Health Centre.			
Local organizations such as Rumah Zakat, BAZNAS, World Vision Indonesia, local youth organizations and various community-based organization.			

A. Situation analysis

Description of the disaster

Prolonged and heavy rainfall along with strong winds from October to early November has caused Kapuas River to overflow, flooding several districts namely Sintang, Sanggau, Melawi, Kapuas Hulu, Ketapang and Sekadau in West Kalimantan province. Following an initial flooding event at the end of October, which receded quite quickly, heavy rain continuing in early November, saw a rapid escalation of the situation on 6 November 2021, causing extensive flooding across several districts. As six districts remain submerged in water the situation is overwhelming emergency responders in the area. This event comes at the beginning of a prolonged La Nina that Indonesia's meteorological agency has indicated will significantly increase the risk of widespread flooding over the next few months in different parts of the country.

Flooding in Sintang

Flooding in Sintang district has submerged 12 sub-districts including Serawai, Kayan Hulu, Kayan Hilir, Binaji Hulu, Sintang, Sepauk, Tempuna, Ketungau Hilir, Dedai, Ambalau, Sei Tebelian and Kelam Permai. The flood level ranges from 1-3 meters in the area. Based on the report released by Indonesia's National Agency of Disaster Management

(BNPB, *Badan Nasional Penanggulangan Bencana*), at least 24,522 households or 87,496 people are affected by the floods. In addition, 21,000 houses are inundated, and five bridges are damaged in Sintang district. As of 9 November 2021, PMI Sintang identified four evacuation centers occupied by around 70 households or approximately 280 people.

Flooding in Sekadau

In Sintang, on 24 October 2021, flooding occurred but quickly receded. However, as the heavy rain continued, by 6 November 2021, the situation in the district deteriorated quickly. The floods in Sekadau district have submerged eight villages located in two sub-districts, inundating approximately 3,026 houses. It was reported at least 5,234 households or 18,678 people were affected by the floods, while 836 households or 2,956 people were displaced and one fatality reported. As of Tuesday, 9 November 2021, PMI identified three evacuation centers in the area.

Flooding in Sanggau

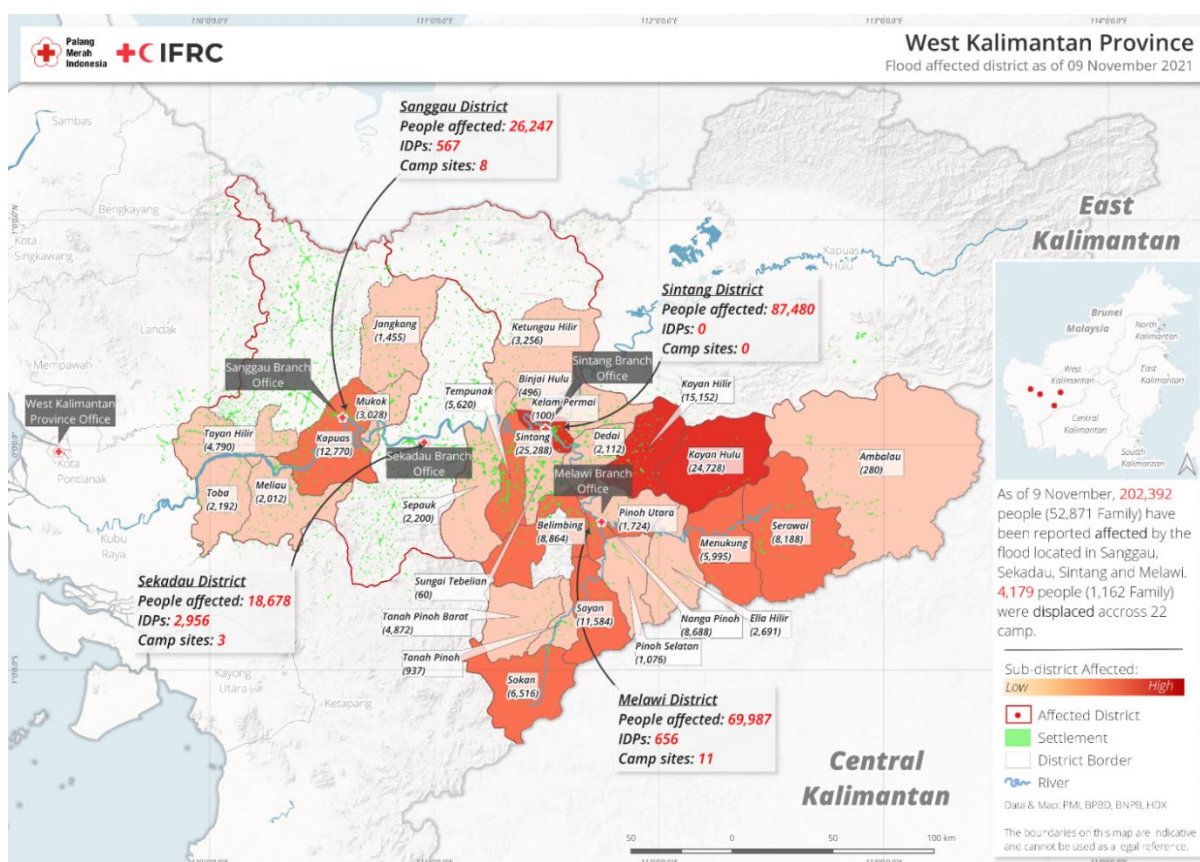
Flooding in Sanggau district has submerged six sub-districts namely Kapuas, Mukok, Jangkang, Melia, Tayan Hilir and Toba, with water level up to a meter. Based on the initial PMI assessment report, there are eight evacuation centers occupied by 162 households or 567 people. In total, the flood inundates 8,317 houses where 26,247 people preferred staying in their houses during the flooding. The floods also disrupted daily activities in the area and affecting around 49,739 households or 150,266 people in Sanggau district.

Flooding in Melawi

Flooding in Melawi district has submerged 11 sub-districts including Belimbing Hulu, Belimbing, Nanga Pinoh, Pinoh Utara, Ella Hilir, Sayan, Sokan, Menukung, Pinoh Selatan, Tanah Pinoh and Tanah Pinoh Barat, where water level reached a meter to a meter and a half in the area. Based on the PMI assessment report, 11 evacuation centers identified, occupied by 164 households or 656 people. The flood also inundates and affecting 17,450 households or 69,987 people household across the 11 sub-districts as well as several public facilities such as seven units of schools, 10 units of mosques, and two health facilities. The affected people who stayed at their homes could not access public areas and PMI also has limited access to reach them due to the high inundation.

Flooding in Ketapang

Flooding in Ketapang district has submerged 13 villages in three sub-districts namely Nanga Tayap, Muara Pawan and Sandai. Around 991 households or 2,889 people are affected by the flood with water level around 20-50 centimeters. PMI continued conducting the assessment, to determine and identify displaced households in the area. The high inundation has been hampering the assess ment process, so it requires a longer time to collect more data.



Picture 1: Five affected districts in West Kalimantan Province. Source: IFRC - PMI

COVID-19 Situation in Indonesia and the affected areas

Referring to WHO Indonesia COVID-19 situation report on 3 November 2021, weekly COVID-19 case incidence in all regions in Indonesia has remained at a low level of community transmission (CT1) for the past seven to eight weeks since October 2021. All provinces were at a low level of community transmission (CT1) during the week from mid to end of October 2021. Based on the WHO interim guidance, this means that there was a low risk of COVID-19 infection for the general population and a low incidence of locally acquired, widely dispersed cases detected in the past 14 days.

Immediate needs and challenges

The floods are still inundating most of the areas in the affected districts. As of 9 November 2021, PMI identified 22 evacuation centers across the area, occupied by approximately 4,179 people. Various organizations and local humanitarian organizations have been responding to the floods, providing assistance to the evacuation centers including food items and basic needs. However, the majority of the affected community continued staying in their houses and preferred seeking shelter from their relatives, as necessary. With most response agencies focusing on assisting the evacuation centers, most of the people staying in their houses have limited access to humanitarian assistance. Many of the houses are double story buildings, so the affected people/households are staying in the upper level of their houses during the flooding. However, since heavy rain continues in the area, there remains a possibility that the water level will continue to rise. If flood waters continue to rise, those who are currently staying in their houses will have to evacuate their houses and seek shelter at evacuation centers or stay with their relatives.

Summary of the current response

Overview of host National Society response action

Responding to the situation, the affected PMI branches and West Kalimantan province have been collecting local donations in the form of rice, instant noodles, and other food items. All of these items are processed and cooked at their emergency field kitchen and distributed door-to-door to the affected communities. In addition, while conducting food distribution, simultaneously PMI also has been mobilising personnel to conduct assessment, support evacuation process, relief item distribution. PMI Branches and Province also established close coordination with relevant stakeholders present on the field.

PMI Sintang district has been responding to the flood event by deploying their personnel to conduct assessment, supporting the evacuation process, and operating field kitchen in several affected areas. In providing the assistance, PMI maintained their coordination with *Taruna Siaga Bencana (TAGANA)* (Community-based Disaster Preparedness and Social Workers) assigned by the District Office of Social Affairs.

PMI Sekadau district has been responding to the floods, by conducting assessment, running an emergency field kitchen and food item distributions.

PMI Melawi has been deploying their personnel to conduct assessment, set up emergency field post, food distribution, relief item distribution such as blankets, hygiene kits and baby kits, water distribution, support evacuation, conduct psychosocial support (PSS) activities at the evacuation centres. PMI Melawi has managed to distribute food parcels to 440 households or 1,694 people, 90 blankets, 108 family kits, 13 baby kits, 10 tarpaulins, 163 hygiene kits and 120 face masks to 682 affected households or 2,834 people in Melawi district. Through water trucking, PMI Melawi has also been distributing clean water from 2 to 12 November 2021. As of 9 November 2021, in total PMI Melawi had distributed 47,460 litre of clean water to 642 people at the evacuation centres.

PMI Sanggau has been assigning their personnel to conduct assessment, set up emergency post and food item distribution to the affected community. PMI actively supported the community starting from 7 November 2021 and as of 9 November 2021, PMI Sanggau managed to distribute food packages to 139 household or approximately 1,495 people and evacuated 3 households in the area.

PMI Ketapang has been deploying their personnel to conduct assessment and to support the evacuation efforts in the area. Due to the high level of inundation on the field, it requires longer time for PMI Ketapang to access the affected areas to conduct the assessments. While continuing the assessment and data collection, PMI Ketapang also maintains close coordination with relevant stakeholders on the field.



Picture 1: Food distribution by PMI West Kalimantan. (Photo: PMI)

At the province level, **PMI West Kalimantan Province** has been supporting the affected districts by setting up one unit of emergency tent in Sanggau district, mobilizing one operational vehicle to Melawi and dispatching relief items such as family kits, baby kits, hygiene kits, blankets and tarpaulins to Sintang district. On the other hand, **PMI National Headquarters** dispatched 100 family kits, 200 hygiene kits, 100 baby kits, 200 blankets and 100 tarpaulins. The dispatchment took place in September 2021 as prepositioned stock when the initial floods occurred. However, due to the worsening situation of the floods, PMI started distributing the relief items in November 2021. Learning from the previous flood operation, in general prepositioned stock located closer to the prone areas is deemed to be critical, to speed up the response. In addition, viewing further sustainable response management ahead, anticipatory action mechanism responding to flood forecast could be a potential solution. In the context of emergency response during COVID-19 pandemic, prepositioned stocks of facemasks are essential, particularly those affected districts are also prone to forest fire during dry season, which causes high concentration of haze in the air, potentially influencing respiratory health of the communities.

Overview of Red Cross Red Crescent Movement actions in country

IFRC CCD for Indonesia and Timor-Leste consists of a Head of CCD and technical capacities in disaster management, shelter, health, water, sanitation, and hygiene (WASH), national society development (NSD), communication, community engagement and accountability (CEA), support services in finance, human resources, and administration. The participating national societies present in country include American Red Cross, Japanese Red Cross Society, Turkish Red Crescent, and Qatari Red Crescent. The International Committee of the Red Cross (ICRC) is also present in the country to offer its services if required. Turkish Red Crescent has been supporting PMI to provide 1,500 food parcels for the affected families.

The IFRC team is monitoring the current situation with the disaster and other public health risks, including to the transmission rates of COVID-19 in the affected area. Further, the health team is monitoring national epidemiological data, health indicators, disaster and disease patterns for analysis and early detection of public health concerns, disease outbreaks or epidemics, in order to facilitate the identification of necessary readiness and response actions to be taken through the Emergency Plan of Action (EPoA).

Overview of other actors' actions in country

At the field level, all PMI branches are working closely with BPBD (*Badan Penanggulangan Bencana Daerah*, Provincial Disaster Management Agency). At the national level, BNPB dispatched 300 blankets, 504 ready meal package, 501 food material, 300 sleeping mats, two family tents, two rubber boats and 5,000 face masks to Sintang district. The Indonesian Search and Rescue Agency (*Badan SAR Nasional* or BASARNAS) is leading and coordinating the search and rescue efforts in the affected area. Regional Water Company (*Perusahaan Daerah Air Minum* or PDAM) leads the water distribution since most of the community water resources have been contaminated by the floods and ensures that the communities have access to clean water at the evacuation centre.

Various local, regional, faith-based organizations are also present at the field. All PMI branches are working closely with other organizations such as World Vision Indonesia (WVI) on providing meal packages at the evacuation centre. In addition, PMI branches also received in-kind donations from individual donors to be distributed at the affected areas.

Needs analysis, targeting, scenario planning and risk assessment

Needs analysis

Initial needs assessments from PMI showed that the primary needs are food supplies or ready meal packages; household items such as blankets, baby kits, blankets; clean water, hygiene kits and medicines. Due to the high inundation at the affected area, the primary access, such as main roads and limited availability of public transports, to enter and to exit the areas are blocked. During the flood occurrences, boats are the only means of transportation available and operational. However, not all families own a boat, so they have very limited mobility. In addition, the flood has also disrupted economic routine such as working in their farms and trading in local markets. For uncertain amount of time, the affected community have been losing their access to the market, which eventually affects their income stability during the ongoing floods

In general, PMI categorized the affected people into two main groups: the affected people displaced in the evacuation centers and, the second, those affected people who decided to stay in their houses. PMI identified that in the evacuation centers, most of the basic needs such as food, water, sanitation, and clothing materials at the evacuation centers are managed and covered by BPBD in each district, other organizations, and in-kind donations from the public. To avoid any duplication and over-lapping intervention, PMI will provide support at the evacuation centers that are not covered by any organization. Further, PMI will also provide basic household items such as blankets, hygiene kit, cleaning kit, face masks, and baby kits to affected households who remained in their houses, who faced difficulties in accessing public facilities and basic needs due to the high inundation around their settlements. To carry out the distributions PMI branches are having to hire boats to facilitate transportation of relief items.

Since primary access into the affected areas is restricted by the floods and the affected communities are scattered across the five districts, the distribution of food parcels and household items have been progressing slowly. Currently, most of the population affected whose houses have been inundated have been facing difficulties to get supplies for food and medical care while people who work in informal sectors might temporarily stop working and lose their income or daily wage earners. In addition, the affected communities cannot go to the market without the support from evacuation team. The initial phase of the response will focus on saving lives and meeting the most urgent needs (including food supplies and relief items) and continual assessments will be conducted to address evolving needs.

On the health sector, PMI has received reports on injuries, infections, a rise in water-borne diseases such as malaria and dengue, typhoid and upper respiratory infection. Several community health centres are temporarily disabled due to the floods. However, the local authority is coping with the situation by mobilizing mobile clinics and ambulance services for referral. PMI will continue their support by deploying mobile clinic teams, first aid and ambulance crew. The PMI personnel deployed is teamed up with the medical personnel assigned by the District Health Offices. They have been delivering health services both in evacuation centres as well as for those staying at isolated homes. In Sintang, due to the severe impact of the floods, one hospital is not operational. Limited medical services are mostly provided by the health posts at subdistrict level, which also highly inundated by the water. PMI deployed their volunteers in Sintang to conduct further need assessment, while providing first aid services. In Melawi, the District Health Office provides supply of medicines, while PMI support with the mobilization of health volunteers. All referrals of health cases are carried out by PMI to the nearest government's health facilities. Coordination with COVID-19 Operation is established to ensure a collaborative effort in the emergency response, considering that the disaster occurred during the pandemic. One of the main concerns is how to facilitate communities who are still at their houses and to transport them for basic health service since ambulance cannot reach the affected area due to the high water-level of the floods. PMI will continue the evacuation efforts to transport the community to safer locations. At the evacuation centres, children and adults cannot continue their daily routine and life such as going to school or work. Psycho-social support services are needed to support the affected population at the evacuation centres and while they are recovering. As PMI have already started delivering PSS sessions at the evacuation centres, this will be continued along with health awareness and health promotion sessions.

The disruption of water supply and contaminated water resources has increased the vulnerability of the affected communities. PDAM is ensuring that affected communities have access to clean water at the evacuation center and also at the affected area. Based on the consultation with PDAM, ss water trucking cannot reach the most affected or remote areas, door-to-door distribution is needed to ensure access to safe drinking water. Considering the access hindered by the high flood, PMI will provide bottled water and distribute them using boats across the affected areas, to ensure the immediate support of drinking water to the affected people, especially those who stay at their isolated homes. While coordination with PDAM has been maintained to ensure well-suited complementarity of the response, PMI has been continuing the detailed assessment to identify better approach to provide clean water. PMI will also support the district Disaster Management Agency (BPBD) in monitoring the existing latrines in evacuation sites, ensuring they are well functioning and have the materials needed to ensure good hygiene for the evacuees. As soon as the flood recedes, regaining access to communities through debris removal and cleaning will be vital to facilitate response or recovery efforts. At a later stage, it is anticipated that affected communities will need support for cleaning debris and mud left from inundation. To support this PMI is planning to distribute cleaning kits to the affected families.

Targeting

The operation aims to support the needs of most vulnerable population affected by the impact of flooding in the districts of Sintang, Sanggau, Melawi, Sekadau and Ketapang, particularly giving priority to those located at the least accessible by the aid distribution, beside considering the aspect of protection, gender and social inclusion. As the assessment is still progressing, target areas at the sub-districts level in each district will be determined once the assessment have been completed.

PMI Branches with support from the PMI Province, PMI NHQ and IFRC continue the coordination 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. For initial response, the operation will be targeting 4,200 households or approximately 16,775 people.

Estimated disaggregated data for population targeted.

Category	Estimated % of target group	% female	% male
Young Children (under 5 years)	1.34%	48.6%	51.4%
Children (5-17yrs)	13.86%	48.6%	51.4%
Adults (18-49 yrs)	74.71%	48.6%	51.4%
Elderly (>50 yrs)	10.09%	48.6%	51.4%

Scenario planning

Scenario	Humanitarian consequences	Potential Responses
The flood keeps spreading to the areas outside of the PMI targeted areas.	The teams in the field are unable to provide and address the humanitarian needs, which potentially affect the condition of the population to cope with the floods	To collect a detailed updated situation, report it to APRO and, if possible, to release an Operation Update in order to expand or scale-up the operation
Rainfall continues for certain period of time worsening the flood level at the affected areas and forcing more people to evacuate their houses	More people will seek shelter at evacuation centres which makes them more vulnerable to COVID-19 transmission at the evacuation centres.	<ul style="list-style-type: none"> - 3M protocols (<i>Menggunakan Masker</i> or mask-wearing, <i>Menjaga jarak</i> or maintaining safe distance and <i>Mencuci tangan</i> or hand-washing) in place - Mask distribution for IDPs in evacuation centres - Shelter/evacuation centre arrangement to meet safe distancing and COVID -19 protocols
Extreme weather continues to strike the area (triggering flash floods or landslides), and potentially increases the secondary impacts such as dengue or poor living environment	Affected community may need more time in order to cope or to bounce back from the disasters	<ul style="list-style-type: none"> - As an auxiliary to government, PMI will support the collection of information and data while monitoring the situation in the affected areas. - The operation can provide ongoing information on the evolving needs of the affected communities to ensure continues and appropriate support to the affected communities.
PMI personnel contracting COVID-19 while responding to the situation	Isolation and prevention policy will be imposed to prevent further transmission. This will result, delay of activities or implementation	<ul style="list-style-type: none"> - Ensure briefing and debriefing take place at the beginning and by the end of each deployment - Ensure that all volunteers are equipped with PPE, insured, and apply COVID-19 safe implementation approaches

Operation Risk Assessment

Risk area	Controls management
Staff and volunteer health: risk of contracting COVID-19 through clinical or community-based activities in the response.	<ul style="list-style-type: none"> • Information and training for staff and volunteers. • PPE and orientation on the proper use and disposal of PPE for all frontline volunteers and staff in high-risk affected areas. • Training on COVID-safe implementation for PMI staff and volunteers. • Minimise non-essential travel as written in the PMI and IFRC BCP.
PMI are currently managing multiple operations which is stretching their capacity to implement	<ul style="list-style-type: none"> • IFRC Disaster Risk Management team are providing support to PMI in implementation and are liaising directly with implementing branches • The operational budget will make provisions for PMI to hire dedicated staff to help manage the operation.
Negative media coverage related to handling of the response operation.	<ul style="list-style-type: none"> • Proactive communication with media and stakeholders. • Community Engagement and Accountability. • Thorough needs analysis, planning, prioritisation, and reporting.
Disruption on the access to deliver support such as road cut off, bridge collapsed, airport damaged as the impact of earthquake	<ul style="list-style-type: none"> • Mapping alternative routes and transportation

B. Operational strategy

Overall Operational objective

This operation will provide support to PMI branches in West Kalimantan to assist 16,775 people by meeting their immediate needs through ongoing distributions of essential household items, the provision of drinking water, the provision of first aid and PSS as well as health and hygiene promotion. Additionally, PMI will target a smaller number of households in each area with more intensive support, based on needs. During the time when inundation is still high, access to the market is limited and temporarily, the existing markets around the affected areas are not operational. Continued assessment will be planned, and cash-based intervention is considered more effective to be implemented in the early-recovery phase when market is operational and accessible.

The proposed operation is based on the short-term needs of the affected population and aligned with the government's response plan. PMI aims to support shelter needs through the distribution of essential household items such as blankets and baby kits to 400 households or approximately 1,600 displaced people in evacuation centres across five affected districts. Besides providing support at the evacuation centre, PMI are also providing essential household items such as hygiene kits, baby kits (consist of baby soap, baby shampoo, baby lotion, diapers, towel, blankets, eucalyptus oil, baby oil and container box) and cleaning kits (consist of broom stick, mop, dustpan, plastic bucket, hand gloves, hand brush, sack, door mat and floor cleaner) to 2,000 households or approximately 8,000 people. The ongoing COVID-19 emergency operation will cover some of the needs of the activities including rapid antigen testing and replenishment of mobilized hygiene kits. Meanwhile, this DREF will provide 1,800 COVID-19 prevention kits to support the operation, with 1,500 kits targeting the affected communities and 300 for the assigned personnel. In addition to that it is estimated that a further 7,175 people will be reached through health and hygiene promotion activities in the wider affected population.

In the emergency phase, PMI will continue to support evacuation efforts to the affected community. PMI will provide basic health service, deploy a mobile clinic to provide first aid and basic medical services at the evacuation centre. This is to ensure health services available to the affected community while supporting the local health capacity to cope with the needs. Community health center is providing the medical supplies whilst PMI providing additional trained and qualified human resources. PSS sessions will be held at the evacuation targeting children and elderly people. Health awareness sessions will be conducted at the evacuation centres whilst ensuring all the displaced community is practicing 3M COVID-19 prevention. PMI also targets affected people around the evacuation camp with PSS activity, health awareness session and promotion activity. To limit face-to-face or gathering activity, PMI planned to use radio and local tv stations to conduct the health awareness and promotion session. Health and hygiene promotion will be implemented in a coordinated and integrated way, by conducting Community Engagement and Accountability (CEA) assessments to identify relevant community questions and concerns determine the most appropriate and trusted channels, sources and preferred formats of communication, which will feed into a consolidated strategy on CEA for the operation and form the basis to providing actionable information in appropriate formats.

To ensure that the communities have access to water, the local government through its water-supply agency (PDAM) will continue their water trucking activities to provide water at the evacuation centre. However, with the ongoing disruption of water supply due to the hindered access around most of the affected areas as well as contaminated water resources at the affected households, water trucking is not workable option to provide clean water to those affected staying at their homes, which are highly inundated by the floods. Alternatively, to complement the service provided by PDAM for the existing immediate needs of drinking water, PMI will provide bottled water to support the affected families, especially for those who stay at their houses located in isolated areas due to the high water-inundation through door-to-door distribution using boats. In addition, PMI will provide household hygiene kits at the evacuation centres and to the affected families who stay in their homes. In addition, to complement the hygiene kit distribution, hygiene promotion will be conducted to the community. Evacuation centres are mostly located in public buildings equipped with latrine facilities, therefore, at this stage the provision of emergency latrines is not deemed to be necessary. Instead, PMI will support the district Disaster Management Agency (BPBD) in monitoring the existing latrines in evacuation sites, ensuring they are well functioning and have the materials needed to ensure good hygiene for the evacuees. Furthermore, as soon as the flood recedes, cleaning kits will be distributed to assist the affected communities in debris removal and cleaning their surroundings.

With support from IFRC, PMI will adjust the response to COVID-19 context and safety guidance. Following MoH's data on pandemic situation in West Kalimantan, it is identified that all affected districts are categorised as low-risk zone. As required by MoH, all personnel who being mobilized to these areas should take health screening with at least rapid antigen and applied strict COVID-19 protocols.

Operational Support Services

Human resources

PMI West Kalimantan province will lead the operation and coordinate the need for personnel capacity to support the implementation of activities in various sectors. PMI NHQ will oversee the management of the operation and support the finance management. PMI district branches in West Kalimantan province will use their existing staff and volunteers with a support from PMI province. There will be 200 volunteers and staff supporting the flood operation who will be insured and rotated. Due to the ongoing pandemic, field visit by PMI NHQ staff for monitoring and coordination may be restricted. However, to ensure the quality of service and reporting provided PMI NHQ will assign dedicated staff such as one field coordinator, one financial staff and one reporting based in PMI West Kalimantan Province. Due to movement restriction, IFRC CCD will assist the overall management of the operation remotely, reporting, administration, and financial control of the operation remotely.

Community engagement and accountability

Recognizing that affected people are not passive recipients of aid but rather at the core of the operations, community participation and the provision of vital information is an integral part of the response and a coherent approach to ensure the accountability to affected people must be put in place.

Under their COVID-19 operation, PMI has a well-established community feedback mechanism that supports the safety, confidentiality, and dignity of beneficiaries. This will be adjusted to support this flood operation in West Kalimantan province. This will be done with the support of IFRC's CEA focal point. Community feedback mechanism will be integrated into the operation to ensure that affected populations have access to timely and accurate information on the nature and scope of services provided. PMI, with IFRC support, will conduct a CEA rapid assessment to identify the information needs, concerns, suggestions, and proposed solutions for programme adaptation. Technical oversight will be monitored and supported by PMI NHQ, while the CCD's DRM unit and CEA/PGI focal point will support the development of assessments and strategies for community engagement and accountability using social media and other feedback channels such as PMI hotline or radio.

Logistics and supply chain management

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. The operation includes a mixture of new procurement and procurement to replenish distributed stocks that have been mobilized from PMI's regional warehouse in Banjarmasin, South Kalimantan province and regional warehouse in Serang, West Java. It also takes into account other logistics support needs such as the transportation costs and mobilization of fleet personnel. Considering the availability, quantity and quality of supplies, IFRC will support PMI with the procurement of household items for the operation. To facilitate the distribution, PMI will use small boats which allow them to keep moving around the inundated settlements inaccessible by cars or land-based vehicles.

Communications

IFRC will support the communications team of PMI to communicate with external audiences on the situation and the flood response in West Kalimantan, with the aim of generating visibility and support for the humanitarian needs. Close collaboration will be maintained between the IFRC Asia Pacific Regional Office (APRO) in Kuala Lumpur, IFRC CCD and the National Society to ensure a coherent and coordinated communications approach. As appropriate, written, and visual content will be produced for IFRC social media. Communications content will also be shared with National Societies in the IFRC network aimed at effectively telling stories of PMI response.

Communication will also focus on effective engagement of communities by listening to public concerns and sharing messages to communities addressing their questions, concerns and suggestions, which will be supported by IFRC's CEA focal point. Key messages based on community input, high quality audio-visual material, press releases, etc with regards to the operation will be updated on a need basis by IFRC CCD in close coordination with the PMI and IFRC APRO, across all communications and media as needed. Updates will be provided to public, media, partners, and other stakeholders via social media or other appropriate communication channels. This will be done with close collaboration between the PMI communications team and IFRC CCD.

Security

The National Society's security framework will apply throughout the duration of the operation to their staff and volunteers. The National Society will brief its personnel working in the field on the evolving situation and the relevant evacuation routes and processes to ensure they operate safely. IFRC staff will monitor progress and may deploy to the field to support PMI with monitoring, as necessary. For personnel under IFRC security's responsibility, including surge support and integrated PNS deployed to the area, the existing IFRC country security plan, including security regulations, contingency plans for medical emergencies, relocation and critical incident management will apply. All IFRC must, and Red Cross Red Crescent staff and volunteers are encouraged, to complete the IFRC Stay Safe e-learning courses, e.g., Stay Safe Personal Security, Stay Safe Security Management and Stay Safe Volunteer Security online training. The

IFRC CCD Jakarta security focal point will work closely with IFRC staff and PMI NHQ and provincial branch to provide advice as required. The operation will follow the existing security regulations of the IFRC.

Planning, monitoring, evaluation, & reporting (PMER)

This operation will be guided and monitored by PMI West Kalimantan province with the support from PMI HQ and the IFRC Operations Manager based in CCD Jakarta office. Updates on the event and response will continue to be posted on IFRC [GO Platform](#).

Reporting on the emergency plan of action will be carried out according to IFRC standards. Due to COVID-19 situation, monitoring visits to the affected communities will be done by PMI branches aligned with the social and physical distancing measures for COVID-19. In addition, whenever possible, monitoring can also be done through phone interviews and/or offline or online questionnaire with beneficiaries, volunteers and others participating in the response to assess progress at regular intervals. At the end of the operation, a lesson learned workshop may be carried out by PMI staff, volunteers, and relevant stakeholders either physically or remotely in accordance with existing safety regulations.

Administration and finance

Operational expenses such as volunteer per-diem, accommodation, transportation, communication, and coordination activities are factored in. IFRC CCD will provide the necessary operational support for review, validation of budgets, bank transfers, and technical assistance to the National Society on procedures for justification of expenditures, including the review and validation of invoices. The IFRC finance focal point in CCD Jakarta office will provide oversight on financial matters.

C. Detailed Operational Plan



Shelter

People targeted: 1,400

Male: 720

Female: 680

Requirements (CHF): 15,709

Needs analysis:

In total, it is estimated that floodwaters are inundated and damaged 52,871 houses across the province, resulting in displacement and evacuation. Based on the assessment results, many of the affected communities opted to stay in their houses, while some families evacuated to their relative's house and evacuation centres. PMI identified 11 evacuation centres in 3 districts namely Melawi, Sekadau and Sanggau. Around 4,179 people have been occupying the evacuation centres. Almost all evacuation centres are managed by BPBD and received various in-kind and donations from local humanitarian actors/organizations. Various organizations and individuals have also supported the affected families who preferred staying at their houses. At the moment, while assessments are still ongoing, which take longer as some affected areas are still inaccessible, at early stage of the response PMI will distribute essential household items such as blankets and baby kits. Additionally, people will also need cleaning kits to help remove water, dirt and debris from their homes. Should the situation escalate, and the need is justified, PMI will revisit the EPoA through Operation Updates and address the needs on the field.

Risk analysis:

Given the large area that has been affected by the floods, the needs are likely to be greater than the support available through the collective response effort. This may also lead dissatisfaction in the affected population. PMI will continue coordinate closely with agencies on the ground to develop a clear CEA strategy to engage the affected population and will ensure the selection of beneficiaries for the distribution of household items are well-targeted based on clear criteria, targeting those who are most in need. PMI will continue coordination with the agencies on the ground to develop a clear CEA strategy to engage the affected population and will ensure the selection of beneficiaries for the distribution of household items are well-targeted based on clear criteria, targeting those who are most in need. In addition, distribution will be designed to avoid any mass gathering such as door-to-door distribution to reduce the risk of increasing COVID-19 transmission rates.

Population to be assisted:

PMI will assist 350 families or 1,400 people in five districts of Sintang, Sanggau, Sekadau, Melawi and Ketapang with emergency shelter assistance through essential household items such as blankets and baby kits.

Programme standards/benchmarks: The activities will seek to meet Sphere Standards.

P&B Output Code	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	# of people reached with safe and adequate shelter and settlement assistance (target 1,400 people)																
	Shelter Output 1.1: Shelter and settlements and basic household items assistance is provided to the affected families.	# of household receiving essential household items (target 350 households)																
	Activities planned	Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP005	Assessment of shelter needs, capacities and gaps		x	x	x	x	x	x	x	x								
AP005	Identification of caseloads and verification of beneficiaries in different target groups – inclusion factors integrate gender, diversity and disability in the response		x	x	x	x	x	x	x	x								
AP005	Coordination with government and other stakeholders		x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
AP005	Distribution of 500 Blankets		x	x	x	x	x	x	x	x	x	x						
AP005	Distribution of 100 Baby kits		x	x	x	x	x	x	x	x	x	x						
AP005	Monitoring of the use of distributed shelter and household items		x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
AP005	Evaluation of the shelter support provided					x				x				x				x



Health

People targeted: 16,775

Male: 8,622

Female: 8,153

Requirements (CHF): 93,454

Needs analysis:

To ensure continued delivery of health interventions in severely affected areas, there is a need for deployment of emergency health units including mobile clinics with standardized medicine and equipment in support of and coordination with district health authorities. Further, to increase access vulnerable population to health facilities and potential case management for COVID-19 pandemic, volunteers will provide awareness on need of early detection for any transmission of infectious diseases, health & hygiene promotion and motivate people for maintaining health protocols and vaccination as needed while assessing the situation. Volunteers will receive a refresher on epidemic control while mobilizing for health awareness campaign. Some survivors are displaying signs of trauma as the event occurred with no initial indication of flood. There is the need to provide psychosocial support in affected communities.

Risk analysis:

The coincidence of floods and COVID-19 pandemic is a genuine multi-hazard problem. During emergency evacuation, practicing social distancing can be very difficult. Flooding is a serious problem that could complicate the significant and wide-ranging measures populations have taken to fight the coronavirus pandemic. Community is more difficult when everyone is practicing social distancing and people are in self-isolation. Many people affected by the flood are in close proximity during evacuation and in the emergency shelters, which may accelerate the spread of the pandemic and increase the difficulty of pandemic control.

Population to be assisted: PMI is targeting approximately 16,775 people across West Kalimantan with health and hygiene promotion focusing on reducing the risk of the spread of COVID-19, dengue and other communicable diseases. Mobile clinic and ambulance services will be provided at the affected areas throughout the emergency response phase. Along with the health awareness and promotion session, PMI will distribute 1,800 COVID-19 prevention kits, 1,500 to the community and 300 to the assigned PMI personnel, covered by DREF. The operation will also distribute 6,000 surgical masks and 6,000 cloth facemasks to the community that will be supported by the ongoing COVID-19 operation. To support displaced community, PSS session will be conducted to the affected community across the 5 affected districts.

Programme standards/benchmarks: Indicate the *programme standards or benchmarks e.g., Sphere* the activities will seek to meet.

P&B Output Code	Health Outcome 1: The immediate risks to the health of affected populations are reduced	# of people who are directly reached to lessen immediate risk to the health (target 2,000)																
	Health Output 1.1: The health situation and immediate risks are assessed using agreed guidelines	# of people reached with health promotion activities (target 16,775)																
	Activities planned	Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP022	In coordination with health authorities, undertake detailed assessments to identify health needs, number/type/location of damaged health facilities and/or medical service gaps in target communities	x	x	x	x			x										
AP021	Printing of information and visibility items (banners, leaflets, etc.)			x	x	x												
AP011	Health promotion focusing on COVID-19 and the prevention of dengue and other communicable diseases					x	x	x	x	x	x	x	x	x	x			
AP011	Distribute 6,000 pcs of cloth face mask					x	x	x	x	x	x	x	x	x	x			
AP011	Distribute 6,000 pcs of surgical masks					x	x	x	x	x	x	x	x	x	x			
AP011	Distribute 1,500 COVID-19 prevention kit					x	x	x	x	x	x	x	x	x	x			
P&B Output Code	Health Outcome 2: The immediate risks to the health of the affected populations are reduced through improved access to medical treatment	# of people who receive first aid support through mobile clinics (target: 2,000)																
	Health Output 2.3: Target population is reached with Search and Rescue activities	# of people who are assisted to reach safety through evacuation (target 2,000)																
	Activities planned	Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP022	Evacuation, search and rescue activities	x	x	x														
AP022	Mobile clinic deployment (5 team)	x	x	x	x	x	x	x	x	x	x	x	x					
P&B Output Code	Health Outcome 6: The psychosocial impacts of the emergency are lessened	# of people reached through psychosocial support activities (target 2,000)																
	Health Output 6.1: Psychosocial support provided to the target population as well as to RCRC volunteers and staff	# of people reached through psychosocial support activities (target 2,000)																
	Activities planned	Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP023	Assessment of PSS needs and resources available in the community	x	x	x	x													

AP023	Provide PSS to people affected by the crisis/disaster	x	x	x	x	x	x	x	x	x	x	x	x				
AP023	IEC materials for PSS activities	x	x	x													



Water, sanitation and hygiene

People targeted: 16,775

Male: 8,622

Female: 8,153

Requirements (CHF): 59,108

Needs analysis: Flood situation in West Kalimantan affected the population in relation to the disturbance of water, sanitation, and hygiene aspects in the affected community. Due to flooding the water source used by the affected community is polluted or damaged while at the same time sanitation facilities are impacted. Evacuation centres are mostly located at public buildings equipped with latrines, so that the construction of emergency latrines are not considered necessary. However, the needs seen as to be critical is to ensure the safe drinking water, particularly for those who live at their isolated homes as their locations are highly inundated by water and have extremely limited access to public facilities. Meanwhile, water trucking managed by the government is only workable in the evacuation centers. Community personal hygiene and environmental hygiene also became a need in the affected area to prevent communicable disease caused by faecal-oral transmission illness as well by vectors. Thus, WASH intervention is needed to reduce the risk of illness during and post-flood situations.

Risk analysis: Water-borne diseases such as diarrhoea, as well as vector-borne and hygiene related diseases is the main risk during the flood situation. COVID-19 risk also became higher due to limited access to hygiene facilities and high density in temporary evacuation site which made the affected population difficult to maintain the health protocols

Population to be assisted:

PMI will support the affected community in Sintang, Sekadau, Melawi, Sanggau and Ketapang to complement the provision of water through water trucking activity by PDAM and bottled water through door-to-door distribution. To maintain the level of hygiene of affected household, PMI will distribute 2,000 hygiene kits and cleaning kits.¹ at the evacuation center and door-to-door distribution. Consideration of the integration of gender and social inclusion is taken in the composition of hygiene kit items. Lastly, to limit mass-gathering and face-to-face activity due to the COVID-19 prevention policy, hygiene promotion will be conducted through radio or television broadcast. The total beneficiaries reached through WASH activity is expected around 16,775 people.

Programme standards/benchmarks: The activities will seek to meet Sphere Standard, as well as following the IFRC hygiene promotion in emergencies guideline and the IFRC menstrual hygiene management guideline and tools.

NOTE: *Unless a sufficient explanation can be provided, the number of sanitation beneficiaries must meet number of water beneficiaries.*

¹ Consists of broomstick, floor mop, dustpan, floor wiper, bucket, rubber gloves, plastic sack, door mat, brush, and mopping liquid.

P&B Output Code	WASH Outcome 1: Immediate reduction in risk of waterborne and water related diseases in targeted communities	<i># of people provided with WASH services that meet agreed standards according to specific operational and programmatic context (Target: 16,775 people)</i>																
	WASH Output 1.1: Continuous assessment of water, sanitation, and hygiene situation is carried out in targeted communities	<i># of assessments/monitoring visits undertaken and shared (Target; 5)</i>																
	Activities planned	Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP026	Conduct initial assessment of the water, sanitation and hygiene situation in targeted communities		x	x														
AP026	Continuously monitor the water, sanitation and hygiene situation in targeted communities				x	x	x	x	x	x	x	x	x	x	x	x	x	
AP026	Coordinate with other WASH actors on target group needs and appropriate response.		x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
P&B Output Code	WASH 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	<i># of people provided with safe water (Target: 8,000).</i>																
	Activities planned	Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP026	Provide safe water to 8,000 people in targeted communities through water trucking and door-to-door distribution of bottled water		x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
AP026	Monitor use of water through household surveys					x				x				x				x
P&B Output Code	WASH Output 1.3: Adequate sanitation which meets Sphere standards in terms of quantity and quality is provided to target population	<i># environmental sanitation event conducted together with the affected communities.</i>																
	Activities planned	Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP029	Post-flood debris and mud cleaning activities in 5 sub-districts										x	x	x	x	x	x	x	x
P&B Output Code	WASH Output 1.4: Hygiene promotion activities which meet Sphere standards in terms of the identification and use of hygiene items provided to target population	<i># of people reached by hygiene promotion activities (Target: 16,775)</i>																
	Activities planned	Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP030	Conduct needs assessment: define hygiene issues and assess capacity to address the problem.		x	x														
AP030	Select target groups, key messages, and methods of communicating with beneficiaries (mass media and interpersonal communication).				x	x												
AP030	Develop a hygiene communication plan. Train volunteers to implement activities from communication plan.				x	x	x	x										
AP030	Design/Print IEC materials				x	x	x	x										
AP030	Assess progress and evaluate results.				x	x	x	x	x	x	x	x	x	x	x	x	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># of households provided with hygiene kits (Target: 2,000)</i>																
	Activities planned	Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP030	Determine the needs for hygiene NFIs, including soap, water storage, and menstrual hygiene for each community based on health risks and user preference in targeted communities in coordination with the WASH group or cluster.		x	x														

AP030	Distribute 500 cleaning kits to the affected community			x	x	x	x	x	x	x	x						
AP030	Distribute 2,000 hygiene kits, sufficient for 1 month(s) to 8,000 people.				x	x	x	x	x	x	x	x	x	x			
AP030	Train population of targeted communities in use of distributed hygiene kits.				x	x	x	x	x	x	x	x	x	x			
AP030	Determine whether additional distributions are required and whether changes should be made.								x	x							
AP030	Monitor use of hygiene kits and water treatment products and user's satisfaction through household surveys and household water quality tests.				x	x	x	x	x	x	x	x	x	x			



Protection, Gender and Inclusion

People targeted: 16,775

Male: 8,622

Female: 8153

Requirements (CHF): 10,650

Needs analysis: Based on lessons learned from the recent operations, and global standards, men and women experience disaster differently, with women usually staying in camps longer, and taking on the burden of household clean up. A large proportion of the households being targeted by PMI are displaced which will place these families and particularly women and children, at greater risk of sexual and gender-based violence as multiple households live in close proximity and come under pressure from reduced financial resources. The households located in the evacuation centre are at high risk in this respect. IFRC CCD will support PMI to undertake an assessment of protection, gender and inclusion needs in the camps with consideration of issues such as accessibility of all services by people with disabilities, adequate lighting, privacy, separate bathing areas and latrines for men and women and safe spaces for children to play. In addition, the PGI team will also support the different technical teams to mainstream PGI in their respective responses by taking into consideration Dignity, Access, Participation and Safety (DAPS) in their respective response plans. Based on the outcomes of this assessment, the operation will be adjusted to address needs and where appropriate other agencies will be engaged to help address needs.

Risk analysis: The greatest risks are increased exposure to SGBV and other protection issues due to displacement and disaster impacts.

Population to be assisted: The PGI assessment will focus upon the affected households in Sintang, Sanggau, Sekadau, Melawi and Ketapang affected districts.

Program standards/benchmarks: The operation will follow IFRC's Minimum Standards on PGI in Emergencies throughout the different components of this operation.

P&B Output Code	Protection, Gender & Inclusion Outcome 1: Communities become more peaceful, safe and inclusive through meeting the needs and rights of the most vulnerable.	<i>The operation demonstrates evidence of addressing the specific needs to ensure equitable access to disaster response services. (Target: Yes)</i>
	Protection, Gender & Inclusion Output 1.1: Programmes and operations ensure safe and equitable provision of basic services, considering different needs based on gender and other diversity factors.	<i>The operation demonstrates evidence of compliance with IFRC minimum standard commitment to gender and diversity in emergency programming. (Target: Yes)</i>

	Activities planned	Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP031	Conduct an assessment of specific needs of the affected population based on criteria selected from the minimum standards for PGI in emergencies.		x	x	x	x	x	x	x	x								
AP031	Support sectoral teams to include measures to address vulnerabilities specific to gender and diversity factors (including people with disabilities) in their planning		x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
AP031	Coordinate with all response teams to ensure that all staff and volunteers involved in the response have been sensitized on Code of Conduct.		x	x	x	x												
AP031	Monitor feedback mechanisms for possible breach of the Code of Conduct by staff and volunteers and provide appropriate response based on PMI and/or IFRC PSEA protocols		x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x

Strategies for Implementation

Requirements (CHF): 65,455

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	# of volunteers safely mobilized under the operation Target: 200																
	Output S1.1.4: National Societies have effective and motivated volunteers who are protected	# of volunteers insured under the operation Target: 200																
	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	x	x	x	x	x	x	x	x	x	x	x	x	x	x
AP040	Provide complete briefings on volunteers' roles and the risks they face		x	x	x	x												
AP040	Provide briefings or orientation on COVID-19 safer access in emergency operation		x	x	x	x												
AP040	Ensure volunteers' safety and wellbeing (provide essential PPE to minimize COVID-19 transmission risk) – distribution of 300 COVID-19 prevention kit		x	x	x	x												
AP040	COVID-19 prevention is supported for volunteers through health screening and COVID-19 testing (if needed)		x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
P&B Output Code	Outcome S2.1: Effective and coordinated international disaster response is ensured	Lessons learned are undertaken on the start-up of the operation and considered in revision process Target: Yes Lessons learned are documented after the operation Target: Yes																
	Output S2.1.1: Effective and respected surge capacity mechanism is maintained.	# surge capacity deployed/assisted the response from PMI NHQ/IFRC Target: 1																
	Activities planned	Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16

AP046	IFRC/PMI monitoring and evaluation	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
AP046	Lesson learned are documented (including workshop)															x	x	x	x
P&B Output Code	Outcome S2.2: The complementarity and strengths of the Movement are enhanced	<i>Complementarity and strengths of the Movement enhanced" (Target: Yes)</i>																	
P&B Output Code	Output S2.2.5: Shared services in areas such as IT, logistics and information management are provided	<i>Operation is 100% compliant with IFRC procurement procedures</i>																	
	Activities planned	Week / Month	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	
AP052	Logistics and procurement support are provided for procurement restocking and replenishment	x	x	x	x	x	x	x	x	x	x	x							
P&B Output Code	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	<i>Operation is 100% compliant with IFRC financial procedures</i>																	
	Activities planned	Week / Month	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	
AP064	Finance oversight from IFRC provided, including field monitoring	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
AP065	Administration support by IFRC	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x

Funding Requirements

International Federation of Red Cross and Red Crescent
Societies

*all amounts in
Swiss Francs
(CHF)*

DREF OPERATION

MDRID022 - INDONESIA - WEST KALIMANTAN FLOODS

13/11/2021

Budget by Resource

Budget Group	Budget
Clothing & Textiles	1,750
Water, Sanitation & Hygiene	19,500
Medical & First Aid	46,000
Teaching Materials	20,000
Other Supplies & Services	12,500
Relief items, Construction, Supplies	99,750
Distribution & Monitoring	19,300
Transport & Vehicles Costs	18,750
Logistics, Transport & Storage	38,050
National Society Staff	26,200
Volunteers	40,500
Personnel	66,700
Workshops & Training	7,000
Workshops & Training	7,000
Travel	450
Office Costs	16,500
Communications	210
Financial Charges	800
General Expenditure	17,960
DIRECT COSTS	229,460
INDIRECT COSTS	14,915
TOTAL BUDGET	244,375

Reference documents



Click here 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.

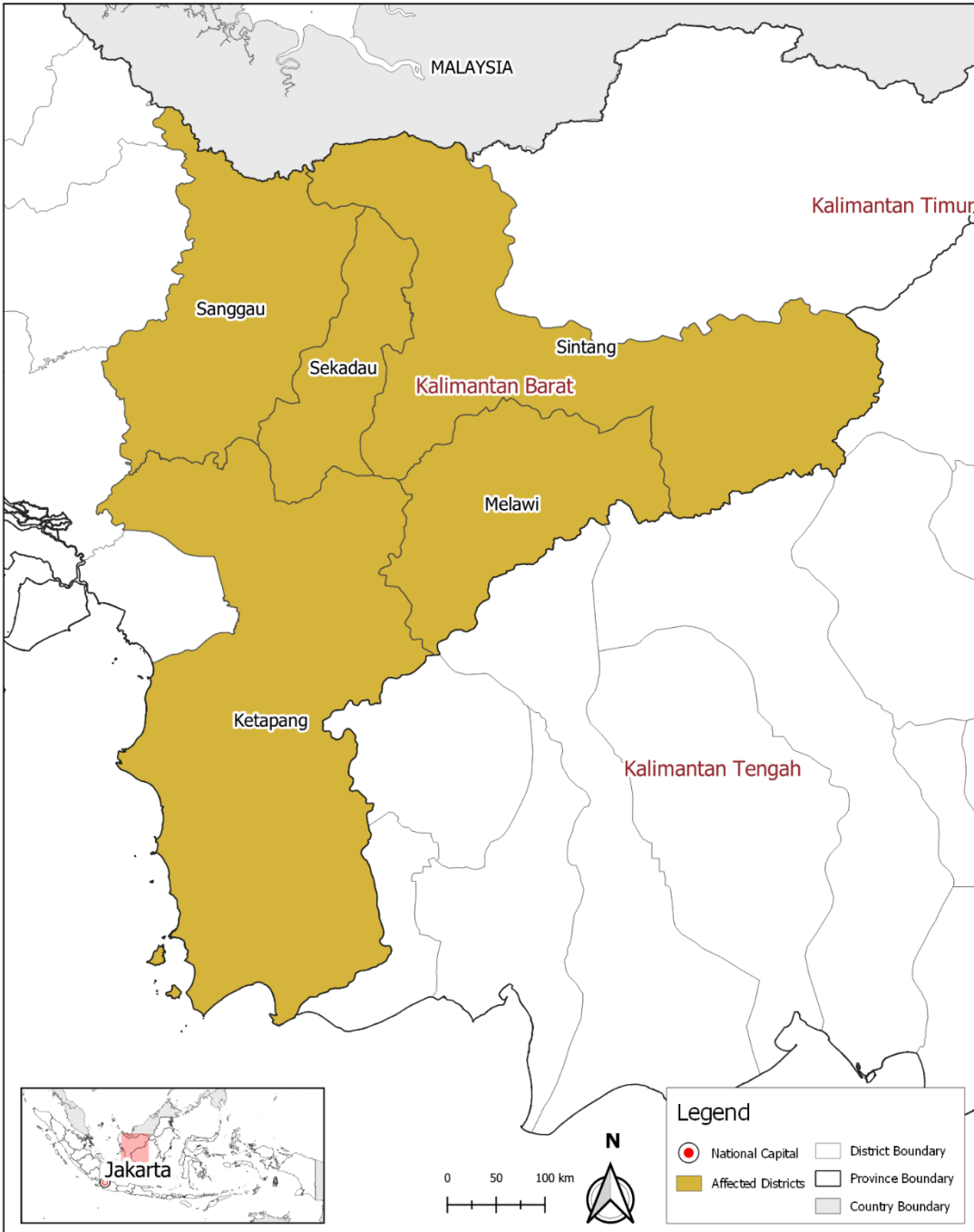


Promote social inclusion
and a culture of
non-violence and peace.



Indonesia: West Kalimantan Flood Response Emergency Plan of Action (EPOA)

12 November 2021



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 territory or its authorities. Map data sources: OCHA, OSM Contributors, ICRC, IFRC.