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Final report

Indonesia: Volcanic Eruption – Mt. Kelud

 International Federation
of Red Cross and Red Crescent Societies

DREF Operation / Emergency Appeal – Volcano Eruption, Mt. Kelud	MDRID009; Glide n° VO-2014-000022-IDN
Date of issue: 3 March 2014	Date of disaster: 13 February 2014
Operation manager (responsible for this EPoA): Giorgio Ferrario, Head of Delegation, IFRC Indonesia	Point of contact (name and title): Ir. Budi Atmadi Adiputro, Secretary General, PMI
Operation start date: 14 February 2014	Operation end date: 14 April 2014
Operation budget: CHF 240,127	
Number of people assisted: 16,500 (3,400 families)	
Host National Society(ies) present (n° of volunteers, staff, branches): 400 volunteers, 3 branches, 1 chapter	

[<click here to go directly to final financial report, or here to view the contact details>](#)

Summary

CHF 240,127 was allocated from the IFRC's Disaster Relief Emergency Fund (DREF) on 27 February 2014 to support the Indonesian Red Cross (PMI) in delivering assistance to approximately 3,400 families (16,500 beneficiaries) affected by the Kelud Volcano eruption.

PMI collaborated and coordinated closely with relevant stakeholders especially the Regional Disaster Management Agency (BPBD) throughout the operation in order to respond swiftly to the needs of the affected people in different parts of the province and to avoid duplication of relief provision. Funds received under this DREF enabled PMI to:

- carry out rapid and continuous assessments in the affected regions
- distribute non-food item (NFI) kits including tarpaulins, blankets, jerry cans, shovels, hygiene kits, baby kits
- undertake health and psychosocial support (PSP) services through mobile clinics
- distribute safe water
- repair water piping systems and conduct public environment cleaning.



The volcanic eruption affected all areas in four provinces with 5-50 cm of ash. Photo: PMI.

PMI managed to mobilize the stocks of medical supplies from PMI Hospital in Bogor, West Java Province, to the affected region. Water provision was one of the biggest operations PMI carried out during the response period which amounted to a total number of 32,557 individuals benefitting daily.

The DREF was not fully utilized, particularly related to water and sanitation sector. Safe water distribution was shortened as a more permanent solution for affected people to access safe water is identified in the community. The balance fund of CHF 111,654 will be returned to the DREF pot.

The Situation

On 2 February 2014, The Indonesian Volcanology and Geology Disaster Mitigation Centre (BVMG) set the status of Kelud Volcano from NORMAL to AWARE. Eight days later on 10 February, the status was raised to ALERT and subsequently to DANGER (Level IV) on 13 February 2014 at 9.15 PM. Based on this alert, the government ordered all communities living within a 10 kilometers radius from the crater to be evacuated. The area was declared as “Red Zone” prohibiting any activity or anyone from access except emergency authorities.

Just two hours after the declaration of the DANGER status, the first eruption occurred at 10.55 PM, followed by a series of eruptions. Plumes rose up to 19 km into the atmosphere, as ash and stones were thrown into the air and fell over the Kediri District. The volcanic ash drifted across the provinces of Central and West Java the next day and affected several areas including Kediri, Malang, Blitar, Surabaya, Ponorogo, Pacitan, Solo, Yogya, Boyolali, Magelang, Purworejo, Temanggung, Wonogiri, Bantul, Yogya, Sleman, Kulon Progo, Kebumen and Ampanan. In response, seven international airports were closed especially the major airport hubs of Surabaya, Solo, Yogyakarta, Semarang and Malang.



Ash from the Kelud Volcano travelled more than 250km causing damage to houses and forcing the closure of seven airports. **Source: BNP.**

Seven fatalities were recorded and 70 people were hospitalized due to smoke inhalation on the first day of the eruption. The number of displaced increased to 100,248 as people fled and camped across the province in 172 IDP camps set up to cater for the basic need of these people.

Table 1: Summary of IDP camps and no. of IDPs

District	IDP Camps	No. of IDPs
Kediri	25	66,319
Malang	63	28,970
Blitar	14	3,610
Total	172	100,248

Within the next few days, some IDPs found refuge with family and friends and moved out of the camps. By 18 February, 83,088 IDPs from 40 villages in 10 sub-district still remained in shelters. This includes 35,201 people (42.37%) in Malang District, 39,694 people (47.77%) in Kediri District and 8,193 people (9.86%) in Blitar District. In addition to the volcanic ash, heavy rain fell and produced cold lava flooding in Malang, Kediri and Blitar districts, resulting in roads closure and further damages to buildings and farm lands.

Houses, schools, buildings, farms and public facilities were inundated with ash. Many factories and businesses halted production. The financial loss is estimated at IDR 1.2 trillion (approx. CHF 93 million) with the largest loss on the farming sector (IDR 1.1 billion or approx. CHF 85,000).

Table 2: Summary of damages and losses on houses and public facilities

District	Heavily Damaged	Moderately Damaged	Minor Damaged
Kediri	8.622	5.426	5.088
Malang	1.514	1.066	1.378
Blitar	957	878	1.578
Total	11.093	7.370	8.042

On 20 February, the PVMBG decreased the status from level 4 (the highest level) to level 3, with a 5 km exclusion zone from the crater. The PVMBG urged people not to conduct any activities within the radius of 5 km from the crater and along the river banks, and be vigilant to the possibility of cold lava flows.

The BNPB led the process to identify and assess the needs and coordinate the response with other stakeholders. It was also tasked to prepare the rehabilitation and reconstruction program by considering all the relevant sectors including health, education, infrastructure, agriculture, socio-economic and other sectors by using the provincial budget.

Three clusters were formed as the main body for the emergency response:

- i. The return of IDPs; led by Vice Governor of East Java
- ii. Security and safety of community; led by East Java Chief of Police
- iii. Improvement of houses, infrastructure and facilities; led by East Java Commander of Military Region

In addition to the support provided by the government, the PMI, civil society representatives, humanitarian organizations and private sector enterprises provided support in other sectors such as water and sanitation, health, PSP services, field kitchens, and distribution of relief items.

Achievement Against Outcomes

The operation supported by DREF lasted for two months and was completed in the end of April 2014. It involved more than 400 volunteers in total covering three districts in East Java; Malang, Kediri and Blitar.

The target beneficiaries of the PMI operation was approximately 20% of the total 83,098 displaced population which amounted to 16,500 individuals (around 3,400 households). The targeted beneficiaries were selected based on their vulnerability (poor and poorest population), especially those who live in the radius 5 km of the volcano.

The overall objective of the operation was met by assisting 16,500 people (3,400 families) to recover quickly from the effects of the volcanic eruption. The operation covered the provision of clean water, permanent water piping system, food and non-food/relief distribution, medical health services and PSP for affected communities. Public environment and individual well cleaning was done primarily in Malang and Blitar Districts.

Shelter and Household items

Outcome: Emergency shelter and relief items are distributed to 16,500 beneficiaries in three districts for one month.

Outputs (expected results) and activities planned:

- Conduct rapid emergency needs assessment.
- Identify beneficiaries to ensure effective distribution of assistance.
- Distribute tarpaulins for temporary repairs and sleeping mats.
- Control supply movements from point of dispatch to end user.
- Monitor and evaluate the relief activities and provide reporting on relief distributions.

Impact:

According to the rapid assessment, the volcanic ash inundated most of the districts in four provinces, where the thickest hit East Java with almost 50 cm and covered houses, roads and public facilities. PMI used their pre-positioned stocks to distribute tarpaulins to the affected families. These were used to temporarily cover the broken roofs of their houses until the local government provided a more permanent solution. Shovels were purchased and distributed to support the clean-up of the ashes in the environment. Both the replenishment of tarpaulins and purchasing of shovels were both conducted in accordance with IFRC procurement procedures. It took approximately three weeks to clean up the area and resume community activities.

Table 3: Summary of distribution under Shelter and Household items

No	Item	DREF	Malang	Kediri	Blitar
1	Tarpaulin	3,400	1,360	1,360	680
2	Shovel	3,400	1,360	1,360	680

Food Security (food items)

Outcome: Cooked meals are distributed to 16,500 beneficiaries while the government establishes its own services.

Outputs (expected results) and activities planned:

- Identify beneficiaries to ensure effective distribution of assistance.
- Ensure the provision of cooked meals through mobile kitchen services.
- Monitor and evaluate the activities and provide reporting on distributions.

Impact:

PMI provided cooked meals and basic food since the first day the volcano erupted, and it varied in each district. The field kitchen was located in PMI Province HQ and a few other sites mostly in IDP tents and public areas such as schools. The team was supported by PMI volunteers and community members to help cook and deliver the food to communities. Local authorities and religious organizations also supported the community by distributing food supplies. As a result, food was not a critical issue during the emergency period. According to the movement of field kitchen service during the emergency, it showed that the extent of the service varied from one area to another, depending on the scale of the emergency.

Water, Sanitation and Hygiene Promotion

Outcome: The risk of waterborne and water related diseases has been reduced through the provision of safe water and hygiene promotion to 3,400 families in 3 districts for 1 month.

Output (expected results) and activities planned:

- Assess the existing coverage with a view of ensuring availability of an adequate water supply.
- Provide safe drinking water to affected populations through the use of water truck distribution to community distribution tanks.
- Distribute jerry cans and communal water containers.
- Distribute clean up equipment and tools.
- Conduct environmental sanitation especially in the public facilities.
- Conduct well and water source cleaning with PMI and community volunteers.
- Distribute hygiene kits and baby kits.
- Conduct training/information programmes for PMI volunteers and beneficiaries, in particular regional
- Conduct hygiene promotion for 2,000 people/day for one month.

Note: *The water truck distribution operation is supplementing government supported services and expected to run for a month while the local government make repairs and clean out public facilities.*

Impact:

By the end of the operation, PMI distributed a total of 15,863,380 litres of safe water throughout the three districts in East Java. In addition to door-to-door distribution, PMI also delivered safe water to existing permanent water tanks in certain public areas that families could access. The distribution of water from the PMI trucks eventually decreased, mainly due to several main water sources being cleaned and opened.

As the impact of the eruption was different for each district, the operation was adjusted to the needs of the affected populations. Water distribution through water tanks were operated in Kediri district for 72 days, while water distribution in Malang was carried out for only 33 days as a more permanent water provision was made through the installation of new water piping system. Blitar was less affected compared to other areas and thus the water distribution was carried out for 39 days in a few villages since the community managed to recover quickly.

During the early days of the emergency phase, PMI distributed water bottles and jerry cans to families to allow them to store safe drinking water.

Table 4: Summary of distribution under Water, Sanitation and Hygiene Promotion

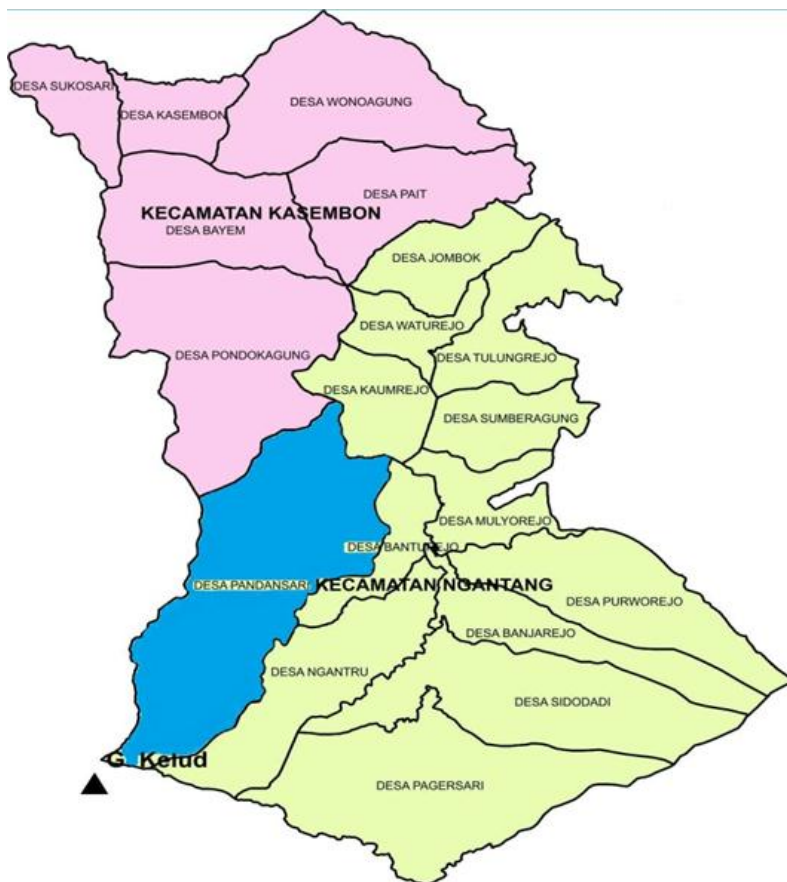
No	Item	DREF	Malang	Kediri	Blitar
1	Water Tank	50	20	20	10
2	Jerry Can	3,400	1,360	1,360	680

The number of water tanks and jerry cans distributed were less than initially planned, as PMI discovered that 14 km of the community piping line for water distribution was broken in Malang District due to the impact of volcano debris and pressure of the ashes. The piping lies 30 – 40 cm below the topsoil and the damage was identified a few weeks after the eruption. Therefore, PMI supported the water provision to communities by replacing the destroyed water piping systems, particularly in Desa Pandansari, Ngantang Sub-District, Malang. Water is piped down the mountain and provides adequate supplies to cater for many of the local villagers, approximately 1,430 beneficiaries.

PMI supplied the pipeline and other materials needed while the community agreed to provide the labor. The installation of the pipeline covered the area from the water source upstream to the community residences while the connection to households was handled by the local government and community. The result of this piping system restoration has helped the community to recover faster.

Water is the one of the most important aspects for the community since it not only fulfils the needs of the people but also influences the livelihoods of the community. The main livelihood of the people in the area is stockbreeding especially dairy cattle of which the daily needs of water for each is about 37 – 45 litres.

To assist in the clean-up operation, PMI deployed volunteers equipped with cleaning kits and machinery to clean wells, roads, drains and other areas covered with ashes and debris from the eruption. PMI also cooperated with local authorities and other stakeholders in conducting environment cleaning activities in selected public areas. These included religious temples, the downtown main road, provincial administration areas and the municipal plaza.



Desa Pandansari (the blue highlight) is the area where the new water piping system was built. Source: edited from PMI Kab. Malang Map

PMI initially planned to conduct hygiene promotion during the emergency. However, after further coordination with BPBD and respective ministries, it was concluded that the Ministry of Health would cover the hygiene promotion program. Nevertheless, PMI contributed on the distribution of the hygiene kits to support the program.

Health and Care

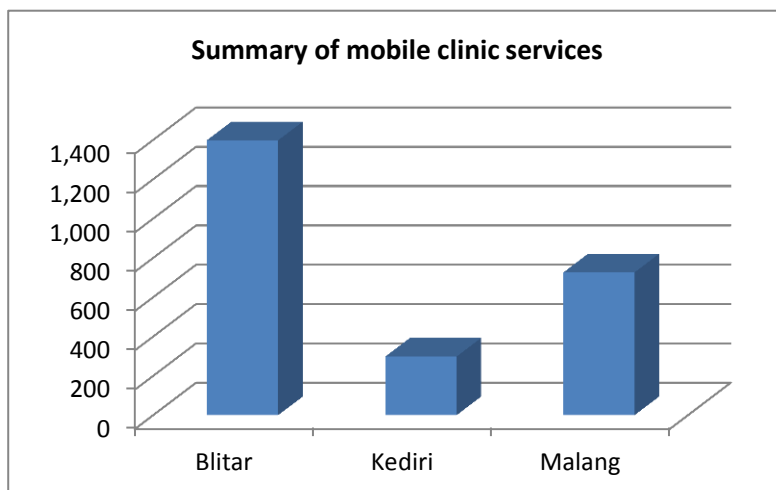
Outcome: The immediate health risks of 3,400 families are reduced through access to basic health care services.

Outputs (expected results) and activities planned:

- Conduct rapid emergency health assessment.
- Provide essential health services to the displaced population through deployment of mobile units to hard to-reach areas.
- Provide affected people with personal protective equipment.
- Provide psychosocial support services and activities, particularly to displaced children.
- Conduct training/information programs for Red Cross volunteers and beneficiaries, in particular health promotion for 2,000 people/day.

Impact:

PMI delivered emergency health services through the operation of mobile health clinics in all three districts. Using PMI ambulances, each clinic was run by a doctor, two nurses and two volunteers with first aid and ambulance service skills, and equipped with basic medicines and supplies. The mobile clinics, which visited different sub-districts on a daily basis, attended to health needs of the affected population who mainly presented respiratory infections and common colds, injuries and skin problems. The mobile clinics also delivered psychosocial support services through two volunteers who conducted PSP activities to children that may have been traumatized by the volcanic eruption and not being able to attend school. A total of 2,422 people were reached by the mobile clinics services, and 416 children served by PSP services during the emergency response for all districts.



Health promotion was initially included in the emergency action plan, however it was decided during the coordination meeting with BPBD and the Ministry of Health that the activity should be under the responsibility of the MoH, combined with the hygiene promotion activity.

Table 5: Summary of distribution under Health and Care

No	Item	DREF	Malang	Kediri	Blitar
1	Hygiene Kit	3,400	1,360	1,360	680
2	Baby Kit	1,000	400	400	200
3	Mask	250,000	100,000	100,000	50,000

Recommendations

Cash Transfer Programming (CTP) for food and non-food relief items should be considered with regards to the local economy and security situation as well as the scale of disaster impact. With proper implementation, CTP would enable beneficiaries to select the assistance based on their needs, more effectively utilizing resources, stimulating the local economy and saving time and effort on distribution and warehousing.

Contact information

For further information specifically related to this operation please contact:

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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 \(NGOs\) in Disaster Relief](#) and the [Humanitarian Charter and Minimum Standards in Disaster 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.

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The IFRC's work is guided by [Strategy 2020](#) which puts forward three strategic aims:

1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.
2. Enable healthy and safe living.
3. Promote social inclusion and a culture of non-violence and peace.

Disaster Response Financial Report

MDRID009 - Indonesia - Mt Kelud Volcanic Eruption

Timeframe: 28 Feb 14 to 28 Apr 14

Appeal Launch Date: 28 Feb 14

Final Report

Selected Parameters

Reporting Timeframe	2014/2-2014/6	Programme	MDRID009
Budget Timeframe	2014/2-2014/6	Budget	APPROVED
Split by funding source	Y	Project	*
Subsector:	*		

All figures are in Swiss Francs (CHF)

I. Funding

	Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability	TOTAL	Deferred Income
A. Budget		240,127				240,127	
B. Opening Balance							
Income							
<u>Other Income</u>							
<i>DREF Allocations</i>		240,127				240,127	
C4. Other Income		240,127				240,127	
C. Total Income = SUM(C1..C4)		240,127				240,127	
D. Total Funding = B + C		240,127				240,127	

* Funding source data based on information provided by the donor

II. Movement of Funds

	Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability	TOTAL	Deferred Income
B. Opening Balance							
C. Income		240,127				240,127	
E. Expenditure		-128,473				-128,473	
F. Closing Balance = (B + C + E)		111,654				111,654	

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Budget Timeframe	2014/2-2014/6	Budget	APPROVED
Split by funding source	Y	Project	*
Subsector:	*		

All figures are in Swiss Francs (CHF)

III. Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability		
	A					B	A - B	
BUDGET (C)			240,127			240,127		
Relief items, Construction, Supplies								
Shelter - Relief	27,462		26,349			26,349	1,112	
Food	13,462		5,384			5,384	8,078	
Water, Sanitation & Hygiene	78,769		34,783			34,783	43,986	
Medical & First Aid	2,308		1,888			1,888	419	
Utensils & Tools	26,154		15,522			15,522	10,632	
Total Relief items, Construction, Sup	148,154		83,926			83,926	64,228	
Logistics, Transport & Storage								
Distribution & Monitoring			1,008			1,008	-1,008	
Transport & Vehicles Costs	16,942		6,215			6,215	10,728	
Total Logistics, Transport & Storage	16,942		7,223			7,223	9,720	
Personnel								
International Staff			299			299	-299	
National Staff			545			545	-545	
National Society Staff	28,846		4,986			4,986	23,860	
Volunteers	29,221		21,213			21,213	8,008	
Total Personnel	58,067		27,043			27,043	31,024	
General Expenditure								
Travel			1,408			1,408	-1,408	
Information & Public Relations			231			231	-231	
Office Costs	2,308		800			800	1,508	
Financial Charges			1			1	-1	
Total General Expenditure	2,308		2,440			2,440	-132	
Indirect Costs								
Programme & Services Support Recov	14,656		7,841			7,841	6,815	
Total Indirect Costs	14,656		7,841			7,841	6,815	
TOTAL EXPENDITURE (D)	240,127		128,473			128,473	111,654	
VARIANCE (C - D)			111,654			111,654		