

Operations update



International Federation
of Red Cross and Red Crescent Societies

West Sumatra: Earthquakes

Emergency Appeal n° MDRID004
GLIDE n° **TS-2009-000211-IDN**
Operations update No. 3
14 October 2009

Period covered by this update: 12 October – 13 October 2009

Appeal target: CHF 19,185,775 (USD 18.64 million or EUR 12.69 million)

Appeal coverage: With contributions received to date, the appeal is 27 per cent covered in cash and kind; and over 50 per cent covered, including pledges in the pipeline.

<click [here](#) for the donors' response list or [here](#) for contact details>

Appeal history:

- A revised preliminary emergency appeal of CHF 19,185,775 (USD 18.64 million or EUR 12.69 million) was issued on 7 October 2009 to support the Indonesia Red Cross (Palang Merah Indonesia/PMI) to assist up to 20,000 families (approximately 100,000 beneficiaries) for six months.
- A preliminary emergency appeal of CHF 6,842,032 (USD 6,607,467 or EUR 4,533,713) was issued on 4 October 2009 to support the Indonesia Red Cross (Palang Merah Indonesia/PMI) to assist up to 5,000 families (approximately 25,000 beneficiaries) for six months.
- CHF 235,000 (USD 227,106 or EUR 155,302) was allocated from the International Federation's Disaster Relief Emergency Fund (DREF) to support this operation.



An Indonesia Red Cross (Palang Merah Indonesia/PMI) volunteer is gathering information from a survivor in a village in Padang Pariaman district while an International Federation staff looks on. Photo: Wayne Ulrich/International Federation.

Summary:

Latest figures from the National Disaster Management Agency (BNPB) of the Government of Indonesia reveal that the death toll is now 1,115. The government estimates that 279,196 houses have been either damaged or completely destroyed. Of those, 135,299 are severely damaged, 65,306 moderately damaged and 78,591 had

minor damages. Other infrastructure is also severely damaged including: 241 schools; 363 health facilities; 168 roads; 241 offices; 1,237 places of worship. Priority needs include food, emergency shelter, education, water and sanitation.

In the coming days, the Indonesia Red Cross (Palang Merah Indonesia/PMI) relief operation will carry out joint detailed assessments and review the various sectoral plans based on the findings of these assessments and secondary data. The revised plans will be part of the revised emergency appeal which is expected to be launched by October 28. The aim of the exercise is to ensure the PMI operation is truly geared to meet the emergency relief of those affected who are still vulnerable and the early recovery needs of those affected in the target areas.

Partners which have made contributions to the appeal to date include the American Red Cross, British Red Cross/British government, Canadian Red Cross/Canadian government, Finnish Red Cross, Hong Kong branch of the Red Cross Society of China, Irish Red Cross, Japanese Red Cross, Macau branch of the Red Cross Society of China, Monaco Red Cross, Netherlands Red Cross/Netherlands government, Spanish Red Cross and Swedish Red Cross/Swedish government as well as the Organization of the Petroleum Exporting Countries (OPEC) Fund for International Development.

The International Federation, on behalf of PMI, would like to thank all partners for their generous response to this appeal.

[<click here to view the revised emergency appeal budget>](#), [<click here to view a map of the affected areas>](#), [<click here to view contact details>](#)

The situation



Over a 48-hour period, the west coast of the island of Sumatra in Indonesia was struck by two major earthquakes. The first quake measuring 7.6 on the Richter scale, struck at 17:15 local time on 30 September, at a depth of 71 km off the coast, close to the district of Padang in west Sumatra province. The second quake, measuring 6.8, struck an inland area 225 km southeast of Padang city on 1 October.

Latest figures from the National Disaster Management Agency (BNPB) of the Government of Indonesia reveal that the death toll is now 1,115. The government estimates that 279,196 houses have been either damaged or completely destroyed. Of those, 135,299 are severely damaged; 65,306 moderately damaged and 78,591 had minor damages.

A boy standing in front of his destroyed house in Padang Pariaman district. Photo: Wayne Ulrich/International Federation.

Other infrastructure is also severely damaged, including: almost 1,400 classrooms; 168 roads; 241 offices; 1,237 places of worship.

Priority needs include food, emergency shelter, education, water and sanitation. BNPB reports an estimated 99,943 tents are still needed to cover the affected population. Preliminary water and sanitation assessments confirm the extensive destruction of water and sanitation infrastructure throughout the three most directly affected areas of Padang City, Pariaman and Agam. Early food and nutrition assessments also reveal approximately 38,000 households in the most affected areas are experiencing temporary shortages of staple foods such as rice.

The Government of Indonesia has officially announced the end of the search and rescue phase and wants to transition to the recovery phase as soon as possible. BNPB has indicated that the rehabilitation and reconstruction phase may commence before 1 November 2009, with the phase expected to last about six months until April 2010, with a two-year projection to rehabilitate all damaged facilities.

Red Cross and Red Crescent action

Under the overall management of the operation, sectorial technical working groups (TWGs) has been established comprising Indonesia Red Cross (Palang Merah Indonesia/PMI), International Federation and partner national society staff and volunteers. The TWGs provide guidance and recommendations to the operation implementation within their respective sectors. The assessment TWG met on 12 October to discuss a proposed joint assessment, where it was decided that assessments will be undertaken using PMI assessment forms which are similar to the ones from UN OCHA and are familiar to PMI volunteers who are already using them. The joint assessment, to be led by the disaster management officer of the Hong Kong Red Cross, and will gather data on the overall situation as well as more specific data along sectoral lines. The overall assessment will be conducted by four teams of two members, who will coordinate with the SatLak (District Disaster Management and Coordination Unit) to gather secondary data. The assessment, which has now begun in Agam and Pariaman, will provide useful and vital input to help refine the operation's plans for relief and early recovery.

Guided by the joint assessment findings, secondary data and the experience so far from the relief operation, the TWGs will be meeting over the next few days to refine the various sectoral plans, these will then become part of the revised emergency appeal which is expected to be launched by 28 October. The TWGs will look at the overall needs of the scaled up operation, consider the capacity of the PMI chapter and branches to meet these needs, particularly in terms of staff and volunteers, and consider ways to fill the gaps. The groups will also look at ways to synergize and avoid competition and overlap between programmes, and between the PMI/International Federation appeal and partner national society bilateral activities.

A member of the Asia field and assessment coordination team (FACT) has joined the operation management team to provide operation support in relief coordination and management, particularly in the area of relief planning.

All programmes have recognized the importance and need for timely, accurate and reliable data on the progress within each sector to give a more comprehensive picture of the overall progress of the relief operation. There is a fear that a lot of the good work of the PMI West Sumatra chapter and branches are not been adequately captured, and in a timely manner. Data collection and management has been recognized as an area where improvement is required. The TWGs will be looking to set up systems and procedures within each sector or programme to address the issue.

Renovation work on the PMI West Sumatra chapter office building, which currently serves as the relief operations centre, has begun. This will allow for a more conducive working environment for all staff and volunteers involved in the relief operations.

Progress of the proposed operation

Relief distributions (food and basic non-food items)

Objective: Up to 20,000 families (100,000 individuals) have their immediate needs provided for through the distribution of non-food items (NFI), such as hygiene kits, kitchen sets, clothing, bedding, jerry cans and household items, by the Red Cross and Red Crescent relief operation.

Expected results	Activities planned
The immediate needs of 20,000 affected families are met through relief distribution.	<ul style="list-style-type: none"> • Conduct rapid emergency needs and capacity assessments. • Develop beneficiary targeting strategy and registration system to deliver intended assistance. • Mobilize relief supplies from pre-position stocks, supplemented by additional local / regional procurement. • Monitor and evaluate the relief activities and provide daily reporting on distributions to ensure accountability to the donors.

In the last three days, PMI relief distribution teams have worked hard to distribute food and non-food items to another 2,352 affected families, increasing the total number of affected families in the targeted districts who have received relief distributions to 5,513 families.

The planned airlifts of relief supplies to the three targeted remote areas in Padang Pariaman and Agam districts using helicopters were aborted after only one air drop was successfully carried out. This was due to technical problems and bad weather. The relief operation is now exploring various alternative options, including using additional private helicopters, off-road vehicles (which can clear paths as they move along) and other means of transport, to bring the relief supplies to the affected communities as soon as possible.

With the arrival of the Asia FACT member to provide operation support in relief coordination and management, the main focus in the next few days will be the refinement of PMI plans at the chapter and branch levels for distribution of non-food items. Click [here](#) for relief distribution details (Annex 2).

The International Federation has been advocating for an increased food basket to be distributed to remote areas and is lobbying the government, World Food Programme, UN and other food agencies to supply much-needed staple food products including rice, oil and soya beans. The PMI is now in discussions directly with the government to support the provision of these urgent commodities.

Emergency shelter

Objective: Up to 20,000 families are assisted with adequate temporary shelter and up to an additional 2,000 families in West Java.

Expected results	Activities planned
Improved shelter conditions for affected families with severely damaged and destroyed houses	<ul style="list-style-type: none"> • Analysis of needs based upon beneficiary registration database and ongoing assessments. • Mobilize emergency shelter resources from pre-positioned stocks in other parts of the country and identify culturally appropriate solutions. • Additional procurement, transport, and emergency storage. • Distribution. • Monitoring and coordination.

Following the decision to adopt the transitional shelter approach which has been successfully implemented in the Jogjakarta and West Java earthquakes operations, the first finance training was organised on 13 October for staff and volunteers of PMI PD Padang, Padang City and Kota/Kabupaten Pariaman to familiarise them with process shelter approach and its financial management aspects. The first targeted area is expected to be Kota Pariaman, where the community's own power and capacity will be harnessed to build the shelters. Four shelter material design options, based on the use of bamboo, coconut wood or salvaged wood, or a combination of these materials are being considered. For each option, with a design lifespan of six months, a full size demonstration unit of 16 sq. metres and one of 24 sq. metres will be erected on 14 October. Speed and ease of construction will be factors when selecting the final design. A different design may be needed if the program moves into the city of Padang.

Towards the end of the week, a shelter workshop will be organized at the Bung Hatta University in Padang by the International Federation-led shelter cluster to discuss and agree on the minimum standards and guidelines for shelter designs of all cluster members. The Red Cross Red Crescent team will be participating in this workshop.

Emergency health and care

Objective: A projected 10,000 families (50,000 affected people) have benefited from a variety of preventive, curative and/or referral health services, thus reducing community health risks for a quicker rehabilitation and recovery process.

Expected Results	Activities planned
Disaster-related diseases and deaths in hardest hit areas are reduced, enabling community members to participate in recovery activities.	<ul style="list-style-type: none"> • Support PMI in establishing emergency health posts and/or mobile health clinics to serve hard-to-reach areas and meet gaps in health services. • Mobilize PMI first aid and ambulance services to meet the emergency health/medical needs. • Provide psychological support to the traumatized population. • Coordinate/work with national/local health authorities in the delivery of health activities, and provide direct material support as needed.
The resilience of the community is improved through better health awareness, knowledge and behaviour.	<ul style="list-style-type: none"> • Update/mobilize community-based volunteers on health/hygiene promotion and disease prevention according to identified priority needs. • Reproduce and distribute health education/information, education, communication (IEC) materials. • Conduct targeted health promotion/disease prevention campaigns as an integrated component in the delivery of PMI emergency response interventions (such as water, sanitation and hygiene promotion). • Distribute essential health supplies to reinforce health promotion/disease prevention campaigns, eg mosquito nets. • Enforce community-based health and first aid activities as soon as possible to create a sustainable community approach through training of trainers/volunteers, and involvement of community leaders and members.
Psycho-social support is provided to the target	<ul style="list-style-type: none"> • Support PMI to deliver relevant, effective psycho-social support to affected populations, including updating/training of more volunteers.

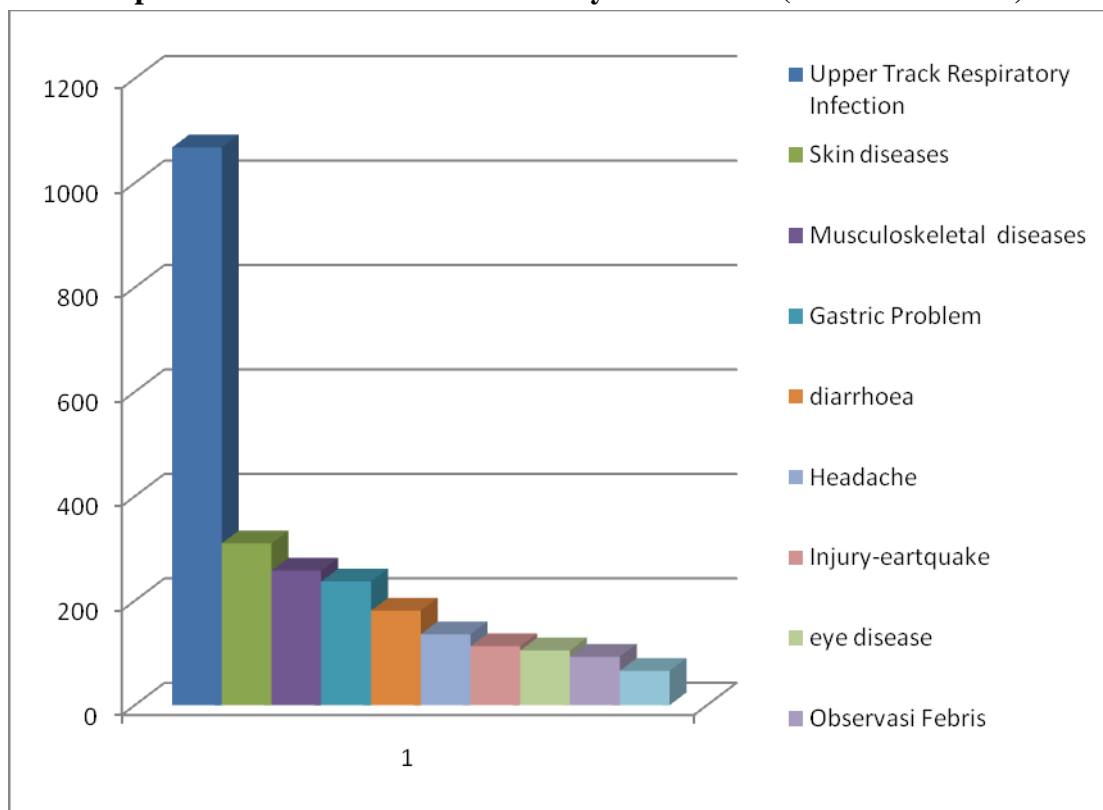
population and PMI staff/volunteers as needed.	<ul style="list-style-type: none"> Provide psycho-social support to staff and volunteers of PMI engaged in emergency response.
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The more detailed plan of action developed in the last two days by programme staff and volunteers of the International Federation, the West Sumatra PMI chapter, PMI national headquarters and the Red Cross Society of China (Hong Kong branch) has been approved. The plan highlights the need for new PMI medical action teams (MATs) to replace the ones which have been operating since the beginning of the relief operation. It also highlights the need for four new MATs to cover other areas in Agam and Pesisir Selatan. Helicopter medical services will be extended to Agam District, following a recommendation from the World Health Organization.

The health and care programme also recognized the importance and need to consolidate and validate all data collected so far to obtain a comprehensive and more precise picture of the actual progress achieved so far. The consolidation and validation process started on 12 October following the establishment of a health information/data management team.

To ensure the health security, staff and volunteers of the programme will be advised to vaccinate themselves against tetanus at the local *puskesmas*.

Top 10 Medical Problems Treated by PMI MATs (12 October 2009)



Source: Indonesia Red Cross (Palang Merah Indonesia/PMI) medical action teams.

Based on further assessment of the situation, the PMI psychosocial support programme (PSP) team has drafted a plan, which is now awaiting inputs and approval from the PMI West Sumatra. Under the proposed plan, the PMI PSP team will focus on four of the five target areas of the operation, and target mainly school children and women. Four team branches will be activated and new volunteers will be recruited to be part of the teams to provide support over a wide and difficult geographical area.

To date, the PMI PSP team has provided psychosocial support to children and women in the Sikapak village (with 500 families) in Padang Pariaman.

A detailed assessment has been carried out in two villages with internally displaced people camps in the Maninjau area of Agam District (Sungai Tapang and Sungai Sadang villages, with a total of 144 households). However, the PSP team has not managed to reach other villages as access is difficult, due to the current rainy season in West Sumatra.

PMI Emergency Health Services (12 October 2009)

No	Health Service points		No. People Treated	
	District	Village		
1	Pariaman	CUBADAK AIR – Pariaman Selatan Sub-District	893	
		Desa Punggung Lading	98	
		Malalak	72	
		Koto Marapak	324	
		PMI Kampung Apar	756	
		R lawe - Patamuan	62	
		Tandike	154	
		Balai Baru	54	
		City Hall	61	
		Desa Kampung Apar	555	
		Salibutan, Lubuk Alung	66	
		Pariaman tengah sub-district	31	
		Sago	120	
		K. Tanjung V Koto	18	
		Desa Sintuk	60	
	Sub-total	3,324		
2	Padang	Sisingamangaraja sie sapih	83	
		Sisingamangaraja and UNP	318	
		Penggambiran	173	
		Balau Baru/Simpang Rambutan	59	
		Parak Rumbia	121	
		UTDC PMI Padang	40	
		Limau Manis – Dekat UNAND	81	
		Mobile – Pasir Jambak/Ulak Karang	15	
		Lubuk Pandan	612	
		Sei Sapih	85	
		Padang Timur	48	
			Sub-total	1,635
		3	Padang Pariaman	Sariak Laweh Korong Koto Bangko; Sungai Gringsing
Sungai Puar	95			
Korong Kolom	72			
Lambah Tigo	65			
Tatamoan	239			
Lubuk Cukam Kec Kayu Tanam	106			
Desa Salibutan	60			
	Sub-total	774		
	TOTAL	5,733		

Water, sanitation, and hygiene promotion

Objective: The risk of waterborne as well as water and sanitation-related diseases is reduced through the provision of safe water, adequate sanitation facilities, and hygiene promotion to 10,000 families (50,000 people) within the affected area for six months.	
Expected results	Activities planned
Access to safe water is provided in the target evacuation centres.	<ul style="list-style-type: none"> • Establish potable water treatment facilities. • Set up water emergency water distribution network, including truck tankering, bladders and tap stands (already on stand-by in other parts of the country).
Appropriate sanitation facilities are provided at target evacuation centres.	<ul style="list-style-type: none"> • Build sanitation facilities in emergency camps and in other locations where required.
The health status of the population is sustainably improved through behaviour change and hygiene promotion activities.	<ul style="list-style-type: none"> • Establish disease vector and safe hygiene monitoring. • Train community-based volunteers on participatory hygiene and sanitation transformation (PHAST)/International Federation water and sanitation software. • Conduct hygiene promotion activities within the affected population, in conjunction with sanitation according to the assessment.

Health/water and sanitation emergency response

In the last three days, the six water treatment plants operated by the PMI/Spanish water and sanitation emergency response unit have supplied 258,000 litres of water to the affected people and government infrastructure, including the M Djamil Hospital, mosques, public utility offices and TVRI, a national TV station. The total amount of water distributed to date is 376,000 litres of water, enough to satisfy the daily needs of 5,000 people. Potable water was also distributed to the PMI West Sumatra chapter office and the chapter's blood transfusion unit. Click [here](#) to see the portable water distribution tables (Annex 3).

Water and sanitation packages with the following contents are being prepared for 10,000 affected families:

- one or combination of: either hygiene kits, jerry cans, baby kits, mosquito nets, cleaning kits;
- extra soap;
- water purification tablets;
- a half-day hygiene promotion session, including instructions on the proper way to use the water purification tablets; and
- t-shirts for children.

Distribution of the kits is expected to commence next week after volunteers have been recruited and given adequate training on hygiene promotion.

Organizational Development

Objective: To strengthen the immediate and long term capacities of PMI staff and volunteer at branch level to complete the operational needs and leave behind sustainable capacities for the future.	
Expected results	Activities planned
The coordinated mobilization of local spontaneous volunteers has built short medium and long term branch capacities.	<ul style="list-style-type: none"> • Conduct rapid volunteer mobilization and orientation in affected areas. • Conduct support activities for volunteers including weekly peer support meetings to address stress and psycho-social issues. • Develop and maintain a volunteer database registering skills and availability. • Implement a volunteer insurance scheme in keeping with the International Federation's global volunteer insurance scheme.
Strengthened financial systems have receipted and spent locally and internally sourced donations efficiently and led to long term enhanced systems at branch level.	<ul style="list-style-type: none"> • Existing branch financial management and reporting systems are scaled up to efficiently report on scaled up resources. • Management information systems are strengthened at branch level to enable effective decision making.
Communications capacity at branch level will have been strengthened to increase PMI's visibility and also to undertake humanitarian diplomacy on behalf of affected communities.	<ul style="list-style-type: none"> • Existing branch level communications infrastructure, roles and capacities will be immediately scaled up by allocating roles and equipment to both staff and volunteers to facilitate immediate information flow. • Key messages from affected communities will be communicated by PMI to enable enhanced support from other responding institutions.
PMI's increased visibility in the operation will have led to strengthened national and branch level fundraising capabilities.	<ul style="list-style-type: none"> • A branch and national level donor base will be developed to capture information from individuals, organizations and businesses contributing to the operation. • A transparent reporting mechanism will be strengthened to inform all donors of what PMI activities they have assisted to build long term donor confidence in PMI.

To support the long-term organizational development and capacity building of the PMI West Sumatra Chapter and the branches, the International Federation, the Canadian Red Cross and other partners will work together to ensure an approach that builds on lessons learnt from both the tsunami and Java earthquake operations is implemented.

As a first step, an assessment to determine the gaps within the branches with respect to their capacity to cope with and contribute during emergency response and recovery in the five most affected areas has been initiated.

The British logistics emergency response unit team will leave at the end of the month after ensuring that PMI and International Federation staff have the capacity to take over their roles.

Coordination and partnerships

The technical working groups (TWGs) are already having the desired effect. The shelter, health, water and sanitation and assessment TWGs have initiated regular meetings, and there are already clear signs that these meetings are helping to improve coordination between staff and volunteers from PMI Jakarta, PMI West Sumatra Chapter, the International Federation and partner national societies who are working in this relief operation. Seeing the merit of these meetings, it has been decided the partner national society coordination meeting will now take place once every two days only, while the TWGs will meet during alternate days.

The relief operations coordinator continues to attend daily coordination meetings in Padang chaired by the BNPB and UN to share and exchange information on the progress of our emergency response and recovery operation with the West Sumatra Satkorlak (provincial disaster management unit), UN agencies and other humanitarian organizations and non-governmental organizations working in Padang.

On 14 October, the PMI and the International Federation met the UN Under Secretary-General for Humanitarian Affairs to assess the effectiveness of the overall humanitarian operation thus far. The PMI was represented by the Chairman of the PMI West Sumatra Chapter, who is also the Vice-Governor, while the International Federation was represented by the country representative in Indonesia and the head of the tsunami unit from the Asia Pacific zone office in Kuala Lumpur.

Inter Agency Coordination:

The International Federation participates in close cooperation with PMI and its partners at inter-agency meetings to coordinate overall relief efforts. The emergency shelter cluster has been activated and is currently being facilitated by a shelter cluster coordinator (from the Netherlands Red Cross) and an information manager (from the American Red Cross). The field coordinator (from the Australian Red Cross) arrived on 13 October whilst the second information manager (from the Canadian Red Cross) will arrive on 15 October. Activities of organizations, donors and government agencies will be coordinated by relevant clusters to ensure efficient accountable partnerships.

A meeting of the emergency shelter cluster will be held at the end of the week at the Bung Hatta University to discuss and agree the parameters for the design of transitional shelter.

Capacity of the PMI

PMI has a strong and well-established capacity in emergency preparedness and response, considering the widespread and frequent occurrence of natural disasters throughout the world's largest archipelago. Additionally, as a direct result of the build-up in volunteers and human resource capacities following the December 2004 tsunami in Aceh province of Northern Sumatra, PMI has built up a robust inter-dependence amongst its branches. PMI branches actively engaged in the operations include Central Java, Jambi, Lampung, Riau, Bengkulu, Aceh NAD, Jakarta and North Sumatra.

In addition, given the longer-term programming of the Canadian Red Cross, Danish Red Cross, French Red Cross, German Red Cross and other partner national societies in disaster risk reduction, the capacity of the national society has been augmented by the existence of community-based action teams – core components of disaster risk reduction programming of PMI.

Capacity of International Federation

Following the 26 December 2004 tsunami that struck Aceh province and the 28 March 2005 earthquake under Nias Island, the International Federation capacity in support of PMI has expanded substantially, in terms of personnel and resources in the country. At present, the International Federation country team consists of 25 delegates and 201 national staff who support the PMI in their emergency and longer-term programming.

In support of the initial emergency response, the International Federation country office has deployed locally-based relief, logistics, disaster management, health, telecommunications and information and reporting staff to support PMI for this operation. In addition, the Asia Pacific zone office in Kuala Lumpur has reinforced the country office capacity with deploying communications and reporting representatives. The preliminary appeal budget identifies human resources are required for the next six months. As part of the FACT mobilization, a recovery specialist is in Indonesia supporting the team in the revision of the plan of action to ensure that this component is suitably strong.

Communications – Advocacy and Public Information

The focus of the communication team in Padang continues to be media relations, providing a steady flow of materials on the International Federation websites, such as web stories, as well as sharing photographic materials with partner national societies. The media team have taken photographs of the unloading of Red Cross Red Crescent tarpaulins and tents from the Japanese Red Cross and the Netherlands Red Cross at the Padang airport, and shared the photos within the International Federation and PMI. The team has also received photos of the US Navy helicopter delivering aid to one of the targeted villages.

Logistics

Two IL-76 flights of all-weather tents and tarpaulins from the RLU warehouse in Kuala Lumpur (donation from Australian, British and Japanese Red Cross) along with three Antonov 12 flights with the Netherlands Red Cross in-kind donations of all-weather tents and jerry cans have arrived in Padang, where the logistics emergency response unit together with PMI volunteers received goods and moved them to the warehouse for further distribution.

Jerry cans and tarpaulins remain not fully covered on the mobilization table. Discussions are in process to determine ways to cover the remaining needs for these two items. The general idea was that needs from the initial mobilization table will be covered by air charters. Sea freight option is under investigation and may be a feasible option for the remaining relief items to be mobilized.

The recruitment of a logistics delegate is in its final stage.

A base camp will be set up for volunteers to prepare for the arrival of the cargo from Kuala Lumpur.

Five rental trucks will arrive from Medan to support this operation in the coming days. These trucks are on a one-month contract and can carry up to eight tonnes of weight and will be mainly used for distributions. Ten Ford Rangers will be dispatched from the Banda Aceh operational centre. The vehicles will arrive in Padang in a week's time.

How we work

All International Federation 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 is committed to the [Humanitarian Charter and Minimum Standards in Disaster Response \(Sphere\)](#) in delivering assistance to the most vulnerable.

The International Federation's activities are aligned with its Global Agenda, which sets out four broad goals to meet the Federation's mission to "improve the lives of vulnerable people by mobilizing the power of humanity".

Global Agenda Goals:

- Reduce the numbers of deaths, injuries and impact from disasters.
- Reduce the number of deaths, illnesses and impact from diseases and public health emergencies.
- Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability.
- Reduce intolerance, discrimination and social exclusion and promote respect for diversity and human dignity.

Contact information

For further information specifically related to this operation please contact:

- Indonesian Red Cross:
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**[<emergency appeal budget and map below:
click here to return to the title page>](#)**

APPEAL BUDGET SUMMARY

Annex 1

Indonesia : West Sumatra Earthquakes

MDRID004

	ORIGINAL	REVISED	VARIANCE
<u>RELIEF NEEDS</u>			
Shelter	3,920,000	12,610,000	8,690,000
Clothing & Textiles	105,000	280,000	175,000
Water & Sanitation	121,750	222,000	100,250
Medical & First Aid	158,000	360,000	202,000
Utensils & Tools	374,550	1,498,200	1,123,650
Other Supplies & Services	120,000	280,000	160,000
Total Relief Needs	4,799,300	15,250,200	10,450,900
<u>CAPITAL EQUIPMENT</u>			
Computers & Telecom Equipment	150,000	150,000	-
Office/Household Furniture & Equip.	40,000	40,000	-
Other Machinery & Equipment	50,000	50,000	-
<u>TRANSPORT, STORAGE & VEHICLES</u>			
Storage - Warehouse	80,000	392,500	312,500
Distribution & Monitoring	80,000	320,000	240,000
Transport & Vehicles Costs	600,000	700,000	100,000
<u>PERSONNEL</u>			
International Staff	288,000	336,000	48,000
National Staff	80,000	220,000	140,000
National Society Staff	60,000	120,000	60,000
<u>GENERAL EXPENSES</u>			
Travel	50,000	100,000	50,000
Information & Public Relations	20,000	60,000	40,000
Office running costs	50,000	120,000	70,000
Communication Costs	30,000	60,000	30,000
Professional Fees	20,000	20,000	-
<u>PROGRAMME SUPPORT</u>			
Programme Support - PSR (6.5% of total)	444,732	1,247,075	802,343
Total Operational Needs	2,042,732	3,935,575	1,892,843
Total Appeal Budget (Cash & Kind)	6,842,032	19,185,775	12,343,743
Less Available Resources			
Net Request	6,842,032	19,185,775	

Annex 2: Relief Distribution (13Oct. 2009)

No	Relief Distribution Point		Relief Item																		Number family			
	District	Village	Family kit	baby kit	water bucket	Hygiene kit	Mosquito Net	Tarpaulin	biscuit	Blanket	Mineral water	Mat	Sarong	Instant Noodle	Supplement Drink	Sardine	Egg	Milk	Rice	Food Parcel		family Tent		
1	Pariaman	PMI Branch																				50	50	
		CUBADA K AIR	205					300		500	41	500												500
								206																205
								204				34	204	204										204
		Cipakak	298					298				298												298
		Sirombong Barat																						64
		Sirombong Timur																						69
		Kasia Putih Barat																						111
		Kasia Putih Timur																						100
		Cubadak Air Utara		150				150			150			150										150
		RSUD Pariaman																				250		250
RSUD Pariaman																				1500		500		

Annex 2: Relief Distribution (13Oct. 2009)

No	Relief Distribution Point		Relief Item																		Number family			
	District	Village	Family kit	baby kit	water bucket	Hygiene kit	Mosquito Net	Tarpaulin	biscuit	Blanket	Mineral water	Mat	Sarong	Instant Noodle	Supplement Drink	Sardine	Egg	Milk	Rice	Food Parcel		family Tent		
3	Padang Pariaman	Kurau Pagang				30																		
																								0
		Sikapak																			300			300
Sub Total			2,745	150	299	356	376	1,984	301	1,972	437	1,002	489	201	106	692	768	14	564	2,934	50		5,513	
			Set	set	Ps	Set	Set	Sheet	box	Pcs	Box	Pcs	Pcs	Box	Box	Can	Pcs	Box	Kg	Box	Set		Family	

Annex 3: Potable Water Distribution (13 October 09)

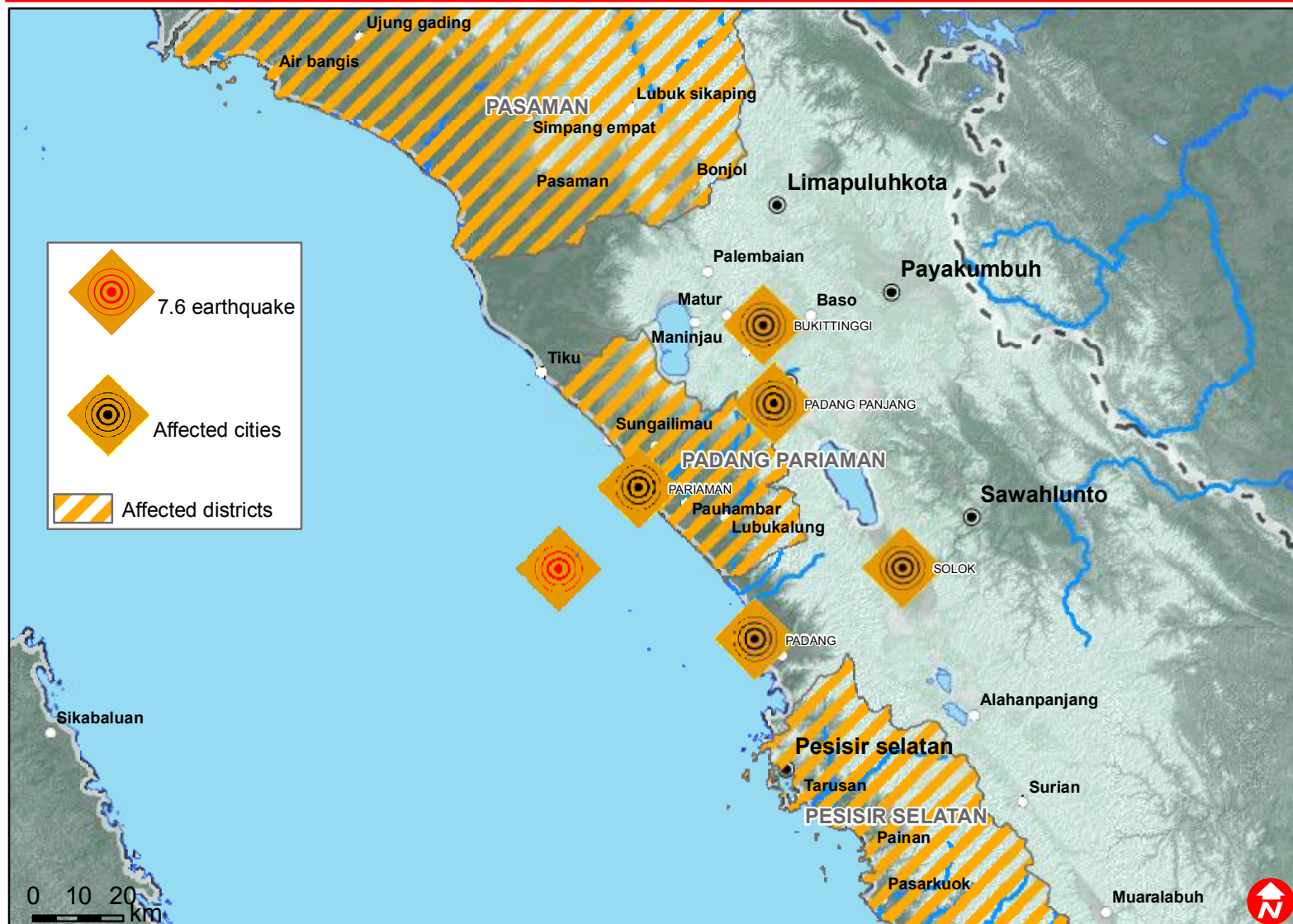
No	Distribution Point	October 2009					Total
		9	10	11	12	13	
1	Alai/Ampang		5,000	10,000			15,000
2	Al Ikhlas					5,000	5,000
3	Ampang Dalam					5,000	5,000
4	Andalas		5,000				5,000
5	AsranteK		5,000		10,000		15,000
6	Asrama TNI AD					5,000	5,000
7	Banda Kali			5,000			5,000
8	Belakang Pondok		5,000				5,000
9	Belakang Tangsi	5,000	5,000				10,000
10	Berok Bakik			5,000			5,000
11	Berok Nipah	5,000		5,000		5,000	15,000
12	Jati				4,000		4,000
13	Jln. Bandung			5,000			5,000
14	Jln. Jogja			5,000			5,000
15	Jln. Rajawali					5,000	5,000
16	Jundul Rawang			5,000			5,000
17	Kantor Gubernur					5,000	5,000
18	Kantor PU		5,000				5,000
19	Kurao Padang		5,000				5,000
20	Kurao Pagang				5,000		5,000
21	Lolong Belanti		5,000	5,000	5,000		15,000
22	Lurah Puruih			5,000		5,000	10,000
23	M. Djamil Hospital	8,000					8,000
24	Masjid Ikhlas			5,000			5,000
25	Masjid Al Ikwan					5,000	5,000
26	Matematika			5,000			5,000

Annex 3: Potable Water Distribution (13 October 09)

No	Distribution Point	October 2009					Total
		9	10	11	12	13	
27	Padang pasir		5,000	5,000		5,000	15,000
28	Pagam Dalam			5,000	5,000		10,000
29	Parak Kopi			5,000	5,000	5,000	15,000
30	Pasar Tarandam				5,000		5,000
31	PDAM		5,000				5,000
32	Perintis kemerdekaan		4,000				4,000
33	Puruih		5,000	5,000			10,000
34	Puruih Baru					5,000	5,000
35	Purus	5,000					5,000
36	RS. Ganting					8,000	8,000
37	Samudra			5,000			5,000
38	Sawah an		8,000				8,000
39	Sawah an 1			5,000			5,000
40	Sawah an 2					5,000	5,000
41	Sawah an PJKA			8,000			8,000
42	Surau Gadang		5,000				5,000
43	TVRI/Jati Adabiah				8,000	8,000	16,000
44	Ujung Gurun	5,000	10,000	5,000			20,000
Total		28,000	82,000	103,000	47,000	76,000	336,000



Indonesia: Earthquake



The Indonesia Red Cross (Palang Merah Indonesia/PMI) and the International Federation have been working round the clock to help with the relief efforts in Padang and to assess the full extent of the damage and destruction caused by the earthquakes. The National Disaster Management Agency (BNPB) of the Government of Indonesia confirmed the death toll has risen to 603 people, with 2,451 people injured. The BNPB listed 343 people as missing while 736 households have been internally displaced. The damage and destruction is spread over eight cities: Padang City, Pariaman City, Bukittinggi City, Padang Pariaman District, Pesisir Selatan District, Solok City, Padang Panjang City and Pasaman Barat District. In total, 777,893 people may have been affected. The Ministry of Health (MoH) further estimates that another 3,000 people might still be trapped under collapsed buildings, with time running out for survivors.