

Appeal 2002-2003



International Federation
of Red Cross and Red Crescent Societies

INDONESIA (Appeal 01.33/2002)

Click on programme title or figures to go to the text or budget

	2002	2003 ¹
	In CHF	In CHF
1. Disaster Preparedness	708,483	610,915
2. Health and Care	583,569	334,938
3. Humanitarian Values	119,701	33,598
4. Organizational Development	330,804	332,416
5. Coordination & Management	316,543	272,315
Total	2,059,101	1,574,182

Introduction

National context

Indonesia is an archipelago of 13,700 islands extending some 5,000 km. It has a population of more than 212 million that is predominately rural; 87% of them are Muslim and they are made up of numerous ethnic groups. The country has experienced democracy only for the past two years. It is plagued by growing poverty and ethnic, religious and political unrest.

After a growth period during the early 1990s, the Asian crisis brought about a severe financial crisis to the country, from which it is still suffering. Although recent changes in government have buoyed the financial markets, the national debt still remains at an untenable level (US\$172 billion). While the IMF has agreed to a further conditional loan, the President and Government have stated that although revitalising the economy is their priority, this will take time. Unemployment is still high (38%), the average basic wage remains low (US\$33.00 per month) and the country's industrial capacity is under utilised.

This environment has impacted severely on humanitarian issues. The world's fourth most populous country has approximately 40 million people living below the poverty line. Poverty related vulnerability continues to increase, the situation of low income families is increasingly evident in cities where many rely on casual labour. Single parent households, particularly those headed by a female, and the elderly, street children and rural landless find it difficult to obtain work, increasing pressure on local and central government welfare resources.

¹ These are preliminary figures for 2003. and are subject to revision in the course of 2002.

Many children no longer attend school. Similarly, access to primary health care is becoming less available for increasing numbers of the population. With a subdued economic environment, people are finding it difficult to cope with daily needs and growing numbers are becoming vulnerable to disease and malnutrition.

Since the onset of the economic crisis, tensions between transmigrant, indigenous and religious groups have erupted into violence in several provinces. This has led to hundreds of deaths and tens of thousands of displaced (IDPs). The provinces of West Kalimantan (58,544 IDPs), Central and North Sulewsi (323,140 IDPs), North and Central Maluku (466,409 IDPs), and West Timor (157,969 IDPs) have all suffered violence during the past year.

In Aceh, clashes between the army and secessionist groups continues to escalate, with over 1,000 people killed in recent months. Over 121,533 IDPs have moved from Aceh to neighbouring provinces. Iran Jaya, (16,500 IDPs) which seeks secession, is another province where violence continues to threaten, although tensions diminished this year now that the government's decentralisation policy is being discussed at provincial level. Between them, East, Central and West Java currently host 187,806 IDPs.

These frequent eruptions of internal strife have produced a dramatic increase in the number of vulnerable people, particularly among the 1.3 million internally displaced (UNHCR August 2001).

Although political uncertainty and unrest have eased with the installation of a new President, Indonesia remains under constant threat from a range of natural disasters. These include geo-tectonic movement (not a week goes by without a moderate earthquake somewhere in the archipelago), volcanic eruptions (128 active volcanoes), tsunamis, floods, landslides and forest fires (leading to the 'haze' phenomenon).

Key Regional Indicators

Country	HDI Rank	Gender HDI Rank	Life Expectancy at Birth		Adult Literacy Rate		Estimated Earned Income (PPP US\$)	
			Female	Male	Female	Male	Female	Male
Singapore	26	26	79.6	75.2	88.0	96.2	13,693	27,739
Brunei	32	30	78.3	73.6	87.3	94.3	10,865	24,163
Malaysia	56	55	74.8	69.9	82.8	91.1	5,153	11,183
Thailand	66	58	72.9	67.0	93.5	97.0	4,634	7,660
Philippines	70	62	71.1	67.0	94.9	95.3	2,684	4,910
VietNam	101	89	70.2	65.5	91.0	95.4	1,552	2,170
Indonesia	102	92	67.7	63.9	81.3	91.5	1,929	3,780
Myanmar	118	107	58.4	53.6	80.1	88.8	746	1,311
Cambodia	121	109	58.6	54.4	57.7	80.1	1,190	1,541
Laos	131	119	54.4	51.9	31.7	63.0	1,169	1,774
East Timor	<i>Data not available</i>							

Data from Human Development Index (HDI), Human Development Report, UNDP 2001.

Country	Population with access to:			HIV/AIDS Prevalence		
	Adequate sanitation %	Improved water sources %	Essential drugs %	Adult Rate (age 15-49) %	Women (age 15-49)	Children (age 0-14)
Singapore	100	100	100	0.19	790	<100
Brunei	99	0.20
Malaysia	98	95	70	0.42	4,800	550
Thailand	96	80	95	2.15	305,000	13,900
Philippines	83	87	66	0.07	11,000	1,300
VietNam	73	56	85	0.24	20,000	2,500
Indonesia	66	76	80	0.05	13,000	680
Myanmar	46	68	60	1.99	180,000	14,000
Cambodia	18	30	30	4.04	71,000	5,400
Laos	46	90	66	0.05	650	<100

National society priorities

The vision of the Indonesian Red Cross Society (Palang Merah Indonesia - PMI) clearly states its ambition to be “*widely recognized as a humanitarian organization providing timely and effective Red Cross services particularly to those most needing such services, with a spirit of Neutrality and Independence*”.

The PMI Strategic Plan adopted the following priorities in 1999:

- Disseminating and developing the application of the basic principles of the Red Cross Red Crescent Movement and International Humanitarian Law throughout Indonesian society.
- Optimisation and consolidation of the organization, development of its potential, and improvement of its human and material resources.
- The conduct of quality and timely Red Cross services covering:
 - -humanitarian assistance in emergency situations,
 - -social and public health services,
 - -blood services.
- Enhancing youth participation in Red Cross activities.

Priority programmes for Federation assistance

The goal of the Federation in Indonesia is to build the capacity of the PMI in the four core areas of humanitarian values, disaster response, disaster preparedness and health and care in the community. Using PMI's Strategic Plan (1999-2004) as a basis, the Federation will provide support to key programmes, enabling the society to provide better quality services to the people of Indonesia.

With the continued high level of unrest stemming from secessionist, ethnic and religious differences, the Federation delegation will support the PMI, in co-ordination with the ICRC, in its response to these events. In particular it will support the society's governance in implementing the PMI vision and mission by strengthening their management capacity at all levels and formulating strategies for chapter and branch development in disaster prone areas.

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1. Disaster preparedness

Background and achievements/lessons to date

Geologically and ecologically, Indonesia is highly vulnerable and disaster prone. It is located at the friction points of three continental tectonic plates, causing earthquakes and tsunamis, and lies in the 'belt of fire', with 128 active volcanos. Landslides, flash-floods and droughts are also frequent occurrences.

The logistics conditions are challenging: railroads are found only on Java and Sumatra and road systems exist only on Java and Bali. However, air and particularly sea transport service large areas of the country and run effectively.

Since 1997, the political, social and economic collapse, coupled with frequent clashes and violence between religious and ethnic groups and the secessionist movements in Aceh and Irian Jaya has created a huge problem of internal displacement (an estimated 1.3 million people in 19 provinces).

Disaster response is one of the core services of the PMI (Republic of Indonesia Presidential Decrees of 1963 and 1990). PMI is mandated to respond in the first two weeks after a disaster, in close coordination with BAKORNAS, SATKORLAK and SATLAK (the national, provincial and local co-ordination bodies for natural disasters). The latest Presidential Decree of January 2001 attributed additional obligations to BAKORNAS-PBP to deal with the internal displacement problem.

PMI has a network of 27 chapters and 316 branches, not all fully active, and a large number of volunteers from schools and universities, as well as doctors and other professionals.

The present programme is formulated on the basis of '*PMI Policy Guidelines 1999-2004*', '*Disaster Preparedness Plan 1997 of PMI*' and '*December 2000 Final Report of Review of DP/CP Programs of PMI*'. And it is implemented under the responsibility of the society's disaster preparedness and response division.

As a result of the activities in recent years:

- 230 trainers have been trained to conduct Satgana team training in branches in 23 chapters.
- SATGANAs teams (multipurpose volunteer corps for response at branch level) have been trained and partly equipped in 51 disaster prone branches.
- 18 mobile emergency units with standard emergency kits provided to as many chapters.
- A core group of 40 devoted volunteers identified and appointed for the formation of the Tim Khusus, a rapid emergency response unit, at the headquarters level.
- Disaster/ conflict management meetings and training with the intention of reaching all 27 chapters' management have been initiated and 15 chapters involved to date.
- A Disaster/conflict management training programme is being planned (PMI/ICRC/Federation).

The programme for 2002-03 largely builds on these accomplishments for improved disaster response capacity, but simultaneously aims at further developing a community based disaster/conflict preparedness programme (CBDP/CP), where some initial steps have been taken in the last two years. Efforts are being made to further upgrade the disaster and conflict management capacity, in particular at PMI headquarters level.

Goal To provide timely assistance to victims of disaster and conflicts by improving the capacity of the PMI to respond to emergencies at national and chapter level; and to enhance community based preparedness at branch level.

Objectives and activities

Objective 1 Further improve the capacity for adequate and timely disaster response.

Activities to achieve objective 1 are:

- Set in place a transparent Federation/ ICRC approved logistics system, and train staff.
- Establish a storage network as a joint programme with PMI/ ICRC/Federation.
- Start a central warehouse in Surabaya connected to ICRC warehouse.
- Establish storage facilities in Jakarta, North Sumatra, Bali and South Sulawesi, utilising existing ERU shelter materials; obtain containers, and procure selected relief items.
- Pre-position the procured relief items, representing supplies for two weeks/100 households per location.
- Replace contingency stocks immediately after each relief operation.
- Assess and upgrade PMI communication means and facilities at chapter level in order to develop further the Society's systematic hazard mapping and early warning and response systems.
- Organize, train and institutionalise Tim Khusus (rapid response unit) for headquarters' rapid disposal.
- Facilitate the application and possible deployment of regionally adapted FACT and ERU mechanisms, in the context of PMI/ Indonesia.

Objective 2 Strengthen disaster/conflict management capacity, in particular at headquarters level.

Activities to achieve objective 2 are:

- Make study visits to, receive study teams from, and share knowledge and experiences with other national societies in the region.
- Participate in and contribute to the South East Asia regional disaster management (DM) co-operation framework.
- Conduct a DM programme strategy exercise, leading to a revised or new programme strategy.
- Implement a disaster/conflict management training programme for selected staff and volunteers from various areas of expertise and from all 27 chapters, in harmonized collaboration with the national society, Federation and ICRC.
- Develop guidelines/manuals for relief operations (SOP) and ensure training of concerned staff on their content.
- Link PMI effectively to the Federation's new global web-based DMIS (disaster management information system).

Objective 3 Improve support for disaster/conflict prone branches' preparedness and response activities.

Activities to achieve objective 3 are:

- Support and facilitate PMI local branch training initiatives in general and, in particular in close collaboration with ICRC.
- Training and formation of SATGANA teams provided with standard equipment in the following eight disaster prone branches: Jambi and Palembang in South Sumatra, Padang in West Sumatra, Samarinda in East Kalimantan, Banjarmasin in South Kalimantan, Manado in North Sulawesi, Kendari in SE Sulawesi and Kupang in NTB West-Timor, and in three disaster and conflict prone branches: Pontianak and Palangkaraya in Central Kalimantan and Palu in Central Sulawesi.
- Ensure that each of the 18 mobile emergency units have a trained and equipped SATGANA team to support them in relief operations.

Objective 4 Develop community based disaster/conflict preparedness projects (CBDP/CP) in two selected chapters and in one branch, each serving as a pilot project and as part of the development of an overall CBDP/CP programme.

Activities to achieve objective 4 are:

- Conduct CBDP/CP orientation for staff, board members and volunteers in East Kalimantan chapter/ Tarakan branch and West-Timor chapter/Atambua branch.
- In collaboration with ID/OD, social and health sectors, support the development of locally initiated community activities focused on the empowerment of the people.
- Make study visits to two relevant national societies in the region to learn from their CBDP programme experience and that of other societies.

- Initiate and support CBDP/CP focused refresher training for 100 selected trainers in the most active, disaster/conflict prone branches, trained in the previous training of trainers programme.
- Conduct a participatory planning process for discussing a strategic PMI approach to CBDP/CP, leading to CBDP and CBCP programme plans.

Expected results

Objective 1:

- A transparent ICRC/Federation logistics system is in place, and staff have been trained accordingly.
- A storage network has been put in place, through a joint PMI/ICRC/Federation effort.
- A central warehouse in Surabaya has been established.
- Storage facilities in Jakarta, North Sumatra, Bali and South Sulawesi have been established.
- Relief items have been procured and adequately pre-positioned.
- After each relief operation, contingency stocks have been replaced through immediate procurement.
- PMIs communication means and facilities have been upgraded and function satisfactorily between the headquarters and chapters.
- The central Tim Khusus Unit has been properly established and become functional.
- PMI is well adapted to and prepared for a possible global/regional FACT or ERU deployment.

Objective 2:

- Study visits to other national societies have been made, study teams received and knowledge and experience have been shared.
- Participation in and contribution to the South East Asia regional disaster management co-operation framework has taken place.
- A DM programme strategy exercise has been carried out and a new DM programme strategy has been adopted.
- A disaster/conflict management training programme for selected staff and volunteers from various fields of expertise and from all 27 chapters has been implemented, in harmonized collaboration between the PMI, Federation and ICRC.
- Guidelines/manuals for relief operations (standard operational procedures) have been developed and concerned staff have been trained.
- PMI has been linked to the Federation's new global web-based DMIS (disaster management information system).

Objective 3:

- Local branches have been supported, in particular with regards to training, formation and provision of standard equipment to 'local' SATGANA teams, in 8 disaster prone and 3 disaster and conflict prone areas/branches.
- In times of disaster and emergencies, the 18 mobile emergency units are adequately supported by the local SATGANA teams.

Objective 4:

- Awareness of and motivation in support of CBDP/CP among staff, volunteers and board members in Tarakan and Atambua branches have been increased.
- Implementation of CBDP/CP projects is going on and lessons have been learnt.
- Knowledge and experience through contacts with other national societies in the region have been gained.
- Some 100 existing trainers in the most active or disaster prone areas have received refresher training in CBDP/CP.
- A participatory discussion and planning process has been carried out, eventually leading to a PMI strategy plan with regard to CBDP/CP.

Indicators

Goal:

- The number of occasions when timely assistance to victims of disaster and conflicts has been provided.

- The number of branches with functioning SATGANA teams and community based DP/CP projects.

Objective 1:

- A demonstrated capacity to provide assistance in each emergency situation to a minimum of 500 households (2000 people) within 48 hours and for two weeks.
- The warehouse and logistics system functions efficiently.
- Improved communication system and network between the headquarters and chapters.
- Number of deployments of Tim Khusus.
- The application of global or regional FACT/ ERU teams in the Indonesian context corresponds to approved procedures and guidelines (SOP).

Objective 2:

- Number of exchange and knowledge sharing contacts between PMI and other national societies and frequency of participation in regional meetings.
- A programme strategy document.
- Number of staff/volunteers from all 27 chapters who have attended DCM workshops and training, supported by Federation and ICRC.
- An approved manual/guidelines for relief operations.
- The level of utilisation of, and contributions to the Federation's global DMIS.

Objective 3:

- Number of disaster/conflict prone branches that have completed training, formation and equipping of SATGANA teams.
- Number of disaster related events with good co-ordination and co-operation between the mobile emergency units and SATGANA teams.

Objective 4:

- CBDP/CP projects are being implemented in two areas.
- A CBDP/CP plan for future development.
- The level of awareness and knowledge about CBDP/CP within PMI has improved, verified inter alia through the strategic plan and the participatory process leading to it, as well as the number of persons having received CBDP/CBCP training and/or orientation.

Critical Assumptions

- Security allows running the programme in conflict prone branches.
- Responsible staff are not constantly diverted by urgent disaster response tasks.
- Commitment of different PMI bodies to work in compliance with the approved strategy.
- Sound division of roles, activities and responsibilities of PMI governance and management.
- PMI headquarters personnel resources are not diverted by other responsibilities.
- Socio-political development in NTB West-Timor after East Timor election makes it possible to work without security concerns.

Monitoring and evaluation

Monitoring of this programme will be carried out through:

- Frequent assessment visits by the PMI national headquarters to branches and chapters.
- Federation and ICRC monitoring of training, workshops and visits to chapters/ branches.

Evaluation of this programme will be carried out through:

- Evaluation visits by teams from the international Red Cross Red Crescent community, including donor representatives.

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2. Health and care

Background and achievements/lessons to date

Despite Indonesia's economic growth in the early 1990s, many rural areas lack adequate access to effective public health facilities. This, compounded with the economic collapse in the late nineties which caused further economic hardship to an already vulnerable community, has worsened the incidence of disease.

Incidence rates of vector borne diseases such as dengue, malaria, filariasis and schistosomiasis show no major improvement. The dengue haemorrhagic fever fatality rate decreased from 2.9% in 1992 to 2.5% in 1995, but the incidence rate increased from 9.45 per 100,000 population in 1992 to 18.41 in 1995. The incidence of malaria fluctuates on different islands of the country.

In the most recent socioeconomic survey (SUSEWNS 1995), Indonesia had an estimated population of over 195 million. The annual population growth rate (1990-1995) was 1.71 and the crude birth rate (CBR) and crude death rate (CDR) 25.3 and 7.5 respectively. The total fertility rate (TFR) was estimated at 2.9 (1990-1995).

Mortality rates have shown a gradual but slow decline, particularly the maternal mortality ratio. Between 1986 and 1995, the infant mortality rate (IMR) declined from 71 to 55 per 1000 live births, the under five year mortality rate from 111 to 81 per 1000 live births, and the maternal mortality ratio (MMR) from 450 to 390 per 100,000 live births.

In terms of water and sanitation, in 1995 accessibility to clean water had increased to 87.3% in urban areas and 57.4% in rural areas. However, bacteriological standards of the water are relatively low. The major cause is contamination associated with the proximity of "clean water" facilities to septic tanks. In urban areas this is as high as 75% and in rural areas 55.9% (BPS 1995). The proportion of the population with adequate excreta disposal facilities was 87.67% in urban areas and 61.4% in rural areas in 1995.

The government of Indonesia has made serious efforts to provide primary health care services, particularly to the poor. It emphasizes the development of human resources, giving priority to improving health and education. Furthermore, it encourages public community involvement in health related activities as well as private and NGO sector participation, through collaboration and other participatory mechanisms. Future strategies emphasize intersectoral co-operation, community participation, and delegation of authority to provincial and lower levels.

The PMI adopted a new strategic development plan for 1999-2004 at its national convention in 1999. It prioritized the following sectors: disaster preparedness; blood; training; volunteer development; information; and health. There is a great demand for community based health services because of the profound impact on the health situation of environmental, economic and social unrest. Given this situation PMI wants to continue strengthening its health programme, and delivering an effective and integrated service to target communities where its work so far has won a positive response.

This appeal seeks funds for three components within the health and care programme:

- Capacity building and technical support.
- First aid/community based first aid.
- HIV/AIDS prevention.

Overall Goal The goal of the PMI health programme is to improve the health status of the most vulnerable.

Capacity building and technical support

Background and achievements/lessons to date

The PMI's strategic plan identifies the health sector as one of its priority areas. However, this plan has not yet been widely translated into concrete health activities. Currently, health activities are managed by two divisions - the Health and Social Services division and the Training of Human Resources division. Activities range from first aid to CBB, integrated water and sanitation programmes and HIV/AIDS. Human resources and capacity at the headquarters level are inadequate to plan, implement and monitor national programmes and to provide the necessary support to chapters and branches. Capacity in individual branches varies tremendously. A problem common to all health activities is the weak reporting and monitoring link between chapter and headquarters. In addition, PMI headquarters lacks an adequate system for monitoring and quality assurance, due to a lack of common standards and agreed approaches.

Goal PMI's health and social services and training divisions have adequate capacity to deliver effectively co-ordinated, sustainable and integrated health programmes according to PMI's strategic plan.

Objectives and activities

Objective 1 PMI has adequate human resource capacity to deliver health programmes according to the strategic plan.

Activities to achieve objective 1 are:

- Conduct a training needs analysis for health personnel at all levels.
- Finalise the strategic planning process and disseminate the results.
- Develop a department training plan for health personnel.
- Identify personal training needs as part of the appraisal process.
- Provide opportunities for identified personnel to attend health management programmes, short courses, conferences and training in related fields, through in-country courses or the regional capacity building programme.
- Conduct two training workshops based on the health training plan.
- Organize on the job training missions or study tours through the regional health unit (RHU) (capacity building programme).

Objective 2 PMI has adequate managerial and reporting systems.

Activities to achieve objective 2 are:

- Analyze the present reporting, monitoring and managerial systems.
- Develop a adequate managerial and monitoring system.
- Print outline of procedures.
- Train staff in procedures.

Objective 3 PMI has adequate capacity to effectively co-ordinate all Red Cross health activities in Indonesia.

Activities to achieve objective 3 are:

- Establish regular meetings for information sharing between all PMI/Federation/participating national societies in the health or health related sector.
- Formalise an agreement for health activities co-ordination covering all Red Cross partners.
- Establish or participate in an information sharing forum of all NGOs, government agencies and donors in the health sector.
- Develop a clear health component within the CAS.
- Utilise the co-ordination mechanism and the Federation for negotiations with other partners about the CAS.
- Review health programmes and first aid /CBFA training programmes of PMI.

Expected results

Objective 1:

- Key national society headquarters health personnel have adequate skills to deliver health programmes.

- An agreed and endorsed strategic health plan.
- A training needs analysis.
- A mid term human resource development plan for health.
- An annual training plan for personnel in health and training divisions.
- A support system for identified national society staff to attend training courses regionally and world wide.
- A health resource library ready for use by PMI.

Objective 2:

- Standard operating management and reporting procedures for health programme.
- Health staff knowledgeable on management and reporting procedures.

Objective 3:

- Effective co-ordination of all participating national societies, Federation and provincial Red Cross bodies in the domain of health activities.
- A report on the health programme review.
- A health section in the CAS.

Indicators

Goal: Donor feedback and evaluation reports.

Objective 1:

- Number of health personnel trained.
- Number of follow-up training events within the national society following attendance in regional or external training/workshops.
- Number of effectively managed health activities.

Objective 2:

- Documentation materials, evaluation reports and review.

Objective 3:

- Co-ordination of all Red Cross partner activities in the field of health.
- A community based health programme standard operating procedures manual, used as a basis and a reference in PMI headquarters, and at branch and chapter level.

Critical Assumptions

- There will be a delegate working with PMI headquarters.
- Trained staff and volunteers remain with the society.
- Branches and chapters are willing to participate in and contribute to health programme activities.
- Sufficient funding is available for the health programme.

Monitoring and evaluation

Monitoring of this programme will be carried out as follows:

- A health delegate will monitor the project through regular field visits and meetings with PMI at headquarters, chapter and branch level.
- Federation will monitor training, workshops and other activities through quarterly reports.

Evaluation of this programme will be carried out through:

- Annual evaluation visits by teams from the international Red Cross Red Crescent community, including donor representatives.

HIV/AIDS programme

Background and achievements/lessons to date

The first AIDS case in Indonesia was identified in 1987. Cumulatively, AIDS reported cases from the month of April 1987 to end December 2000 totalled 452 cases, although this figure is doubtless well below the reality. The Indonesian ministry of health and social welfare and WHO/UNAIDS estimated that in 2001 there were around 80,000 - 120,000 people living with HIV.

Indonesia is still a low prevalence country (HIVinfection rate is less than 5%), but there is considerable potential for the spread of the epidemic in the future, because of a number of risk factors, including: a large and highly mobile prostitute population, domestic and international migration, urbanization, tourism, increasing poverty, proximity to high incidence areas, high-risk sexual behaviour among certain groups, and a small but growing population of intravenous drug users (IDU).

In 1996, the government issued a regulation that condom use was compulsory for all clients of female prostitutes throughout Indonesia to help prevent transmission to the general population. This "100% condom policy" was evaluated in 1998 by a study which found that women's continuous condom use was significantly related to their knowledge of STD/AIDS, their positive beliefs about condoms and self-efficacy in using condoms. Other studies have pointed out the high risk and generally low condom use of truck drivers and youths, particularly gay youths.

Although Indonesia started early on preparing a realistic national HIV/AIDS strategy, full implementation has been constrained by many factors, including budget and qualified manpower.

PMI has been supportive of the national initiative, by conducting youth and women peer education in more than three districts, and has received positive feedback from the youth and women working in the programme. In addition, PMI is a member of the Asian Red Cross Red Crescent Task force on AIDS and has developed capacity in prevention programmes. In a recent strategic planning workshop, PMI analysed its present involvement in HIV/AIDS and outlined its future priorities. This appeal is based on its strategic plan.

Goal To reduce the impact of the HIV/AIDS epidemic among women and youth.

Objectives and activities

Objective 1 Decrease HIV/AIDS related discrimination and stigmatization of PLWHA.

Activities to achieve objective 1 are:

- Compile, analyze and disseminate information on HIV/AIDS.
- Liaise with the media and other government and non-government institutions for promotion of HIV/AIDS prevention.
- Initiate a contest among schools, community and other interested institutions on issues related to HIV/AIDS prevention, and discrimination of PLWHA.
- Organize a support activity event on World AIDS Day.
- Develop and disseminate a catalogue of possible campaign activities for HIV/AIDS Day to all branches. Develop relationships with positive people.
- Participate in Red Cross Red Crescent regional and global initiatives on HIV/AIDS.
- Analyze the present reporting and support system for chapter and branches.
- Develop an efficient reporting and support system.
- Train HIV staff in headquarters and chapters in the newly developed systems.

Objective 2 Reduce the incidence of HIV/AIDS among youth and women by providing information.

Activities to achieve objective 2 are:

- Produce press releases, leaflets/brochures, radio/TV messages.
- Develop and distribute visual aids supports, manuals and promotional material.
- Conduct a feasibility study for the nationwide expansion of the youth peer education to new areas and target groups.
- Conduct a training needs analysis on relevant technical skills for HIV/AIDS prevention programme staff.

- Conduct training based on the training needs analysis.
- Develop a midterm human resource development plan for the HIV/AIDS prevention programme.

Objective 3 Ensure sufficient support for HIV/AIDS work within PMI.

Activities to achieve objective 3 are:

- Disseminate information about the projects to all board members and volunteers.
- Disseminate the strategic plan to all branches.
- Hold regular meetings with the divisions concerned within PMI.

Objective 4 Establish a co-ordination mechanism and network with other government and non-government institutions to strengthen support for the HIV/AIDS programme.

Activities to achieve objective 4 are:

- Conduct a consultation workshop with stakeholders to formulate a plan of action and possible areas of collaborative work.
- Hold regular consultation meetings with stakeholders to promote effective project implementation.

Expected results

Objective 1:

- Increased awareness among women and youth of the issue of HIV/AIDS-related discrimination.
- Increased information related to the transmission of HIV/AIDS among youth and women.
- Improved knowledge and skills on HIV/AIDS prevention promotion among PMI headquarters and chapter staff.
- An adequate quality assurance system developed and implemented.
- Community level initiatives of HIV/AIDS prevention promotion.
- Working partnerships with PLWHA individuals or networks.

Objective 2:

- Trainers and facilitators have adequate skills to conduct mass education campaigns in target areas.
- Mass education campaigns.
- Detailed plan for future national peer education programmes on HIV/AIDS prevention.

Objective 3:

- Increased awareness of existing HIV/AIDS programmes at all levels of PMI.
- Increased information on ongoing and planned HIV/AIDS educational activities at all levels of PMI.

Objective 4:

- A memorandum of agreement between and among stakeholders, defining roles, responsibilities and programme expectations.
- Resource sharing in the implementation of HIV/AIDS promotional activities.
- Increased recognition by government and private organizations of the work of PMI.

Indicators

Goal:

- Incidence, prevalence rates and ministry of health national report.
- Discrimination reports.

Objective 1:

- Number of training courses and number/percentage of people trained.
- Performance evaluation of health staff.
- Level of understanding of HIV/AIDS issues and training satisfaction.
- Availability of information material (leaflets, best practices, articles, evaluations, etc) within PMI.

- HIV/AIDS prevention promotional methods and approach supported by PMI at central level.
- Willingness to adjust/change working style and behaviour.
- Number of key staff participating in study trips to other national societies.

Objective 2:

- Training conducted and post training evaluation results.
- Participation in campaigns and other mass education activities.
- Promotional materials produced and distributed.

Objective 3:

- Support and participation provided by PMI at different levels.

Objective 4:

- Feedback from external organizations.
- Reports and other documentation submitted to PMI headquarters and the Federation.

Critical Assumptions

- There will be a delegate working closely with PMI.
- PMI is able to advocate for condom use throughout its different organisational levels.
- Trained staff and volunteers remain with the society.
- Branches and chapters are willing to participate in and contribute to health programme activities.
- Sufficient funding is available for the programme.

Monitoring and evaluation

Monitoring will be carried out through:

- A health delegate, who will monitor the project through regular field visits and meetings with PMI at headquarters, chapter and branch level.
- Frequent assessment visits by the PMI national headquarters to branches and chapters.
- Federation monitoring of training, workshops and other activities through quarterly reports.

Evaluation will be carried out through:

- Annual evaluation visits by the teams from the international Red Cross Red Crescent community, including donor representatives.

Community based first aid (CBFA)

Background and achievements/lessons to date

PMI has a long history of CBFA programmes and activities. It participated in the development of the Asian CBFA manual and has translated, adapted and incorporated material from the manual into its first aid programmes. With the development of specific training modules (for haze, dengue fever), PMI reacted to newly emerging challenges. The training programme was implemented in large parts of the country and, depending on the chapter capacity, with varying degrees of success: community initiatives were rarely generated by the community based training or volunteers, who are largely dependent on the capacity of branches and chapters for support and guidance. In addition, an effective reporting and support system to headquarters is still lacking. As a result, no effective quality assurance system can be carried out and capacity at headquarters level is very limited.

A health delegate was based for one year in Tarakan and finished her mission in May 2001. Since then, the programme has been running without any direct technical support. An extensive review is planned in early 2002 to evaluate the feasibility of the approach taken, its sustainability and its potential for replication and expansion. This review will be conducted by PMI with the support of the regional health unit. Meanwhile, PMI emphasis will be on strengthening the quality assurance system within the first aid programme at headquarters and chapter level.

Goal To reduce the impact of accidents and the incidence of the most important preventable diseases in target communities.

Objectives and activities

Objective 1 Reduced risk behaviour of target community members and increased coping mechanisms to deal with daily emergencies and common diseases through an effective CBFA programme.

Activities to achieve objective 1 are:

- Develop and publish promotional and training materials in support of the CBFA programme.
- Conduct regular monitoring and field visits to identify technical and administrative support needed for trainers and facilitators.
- Conduct CBFA training in East Kalimantan.
- Identify and recruit CBFA volunteers.

Objective 2 PMI headquarters staff and chapter and branch staff have adequate capacity to implement a national CBFA programme.

Activities to achieve objective 2 are:

- Conduct a training needs analysis for headquarters and branch staff.
- Develop a national capacity building strategy and plan for CBFA.
- Assess the East Kalimantan CBFA pilot programme.
- Provide one training workshop for management skills to key staff at headquarters and chapter level.
- Analyze the existing reporting and support system for CBFA and develop adequate procedures.
- Produce a SOP manual and distribute it to the chapters and branches.

Expected results

Objective 1:

- BCC materials developed.
- 2500 posters and 3000 booklets promoting essential elements of CBFA distributed to branch volunteers and public.
- Heightened community members' awareness on first aid and prevention of most common diseases.
- Volunteers capable of providing first aid to community residents.

Objective 2:

- PMI has adequate skills to implement CBFA programme.
- PMI has developed adequate systems for support, reporting and feedback for branches.
- PMI has a feasibility study and eventual expansion plan for the pilot programme in East Kalimantan and other identified expansion areas.

Indicators

Objective 1:

- Quality of training and number of training events.
- Educational and promotional materials produced and distributed to chapters, branches and the public.
- Number of volunteers trained and recruited.

Objective 2:

- SOP manual.
- Assessment report on the CBFA in East Kalimantan.
- Reports submitted to PMI headquarters and Federation.

Critical assumptions

- There will be a delegate working with PMI.
- Trained staff and volunteers remain with the society.

- Branches and chapters are willing to participate in and contribute to programme activities.
- Sufficient funding is available for the programme.

Monitoring and evaluation

Monitoring will be carried out through:

- A health delegate who will monitor the project through regular field visits and meetings with PMI at headquarters, chapter and branch levels.
- Federation monitoring of training, workshops and other activities through quarterly reports.

Evaluation will be carried out through:

- Annual evaluation visits by teams from the international Red Cross Red Crescent community, including donor representatives.

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3. Humanitarian values

Background and achievements/lessons to date

In its final declaration, the Asia-Pacific Regional Conference in Hanoi in 1998 recognized communications as one of the priority areas for the Movement in the region: “We will progressively improve our ability to publicize the activities and enhance the image not only of our own national societies but of the Movement as a whole, thereby building public, corporate and government support to our national and international operations.”

Although all national societies pledged to fulfill this commitment, the development of communications capacity continues to remain a relatively low priority in most national societies and well functioning communications departments have been slow to evolve. In order to address this issue and enable a more focused and effective approach to communications across the region, the Federation has initiated a number of communications initiatives across the region, the most recent being the development of a Regional Communications Strategy for Asia Pacific. This is largely based on the Regional Communications Strategy for East and Southeast Asia 2001-2005, which was developed by information staff of the national societies in the two sub-regions in early 2001, who also formed a Regional Communications Network. Representatives of the Indonesia Red Cross Society (PMI) took part in the creation of the sub-regional strategy and the formation of the network. These initiatives will be the basis for the communications/humanitarian values support provided by the Federation to PMI in 2002/2003.

With the restructuring of the PMI’s national headquarters in early 2001, a new division called Public Relations and Foreign Affairs was created, giving credence to the importance PMI places on this aspect of its activities. The division has limited capacity in terms of staff, workload and writing and editing skills. While these skills can be improved by providing in-house and in-country training, the division also seeks opportunities through training overseas and participation in international conferences/workshops/meetings.

During 2001 the PMI received local media coverage, featured in Federation publications and on-line and took part in the regional communications initiatives described above. ICRC support in the field of dissemination of International Humanitarian Law is expected to continue in 2002, not least towards PMI staff members and volunteers -- 30,000 in all, spread over 13,700 islands, many of which are very difficult to reach.

While a number of communications-related activities have taken place featuring the PMI and Federation in Indonesia (including a public service announcement shown on national television and a dissemination workshop held in co-operation with the ICRC and the Federation), these activities have not been part of a cohesive and deliberate communications strategy. There is an urgent need to develop a strategic communications plan and to disseminate this throughout the organization. The Federation will support the development of such a strategic plan in 2002, to fit within the East and Southeast Asia Regional Communications Strategy. Co-operation with the ICRC will be sought in this regard.

This programme is twofold: it aims firstly to support the strengthening of the PMI’s communications division and secondly to promote and portray the International Federation in Indonesia as a leading humanitarian organization. In this document ‘communications’ refers to conventional information work, public relations, dissemination and fundraising activities.

Goal A high degree of visibility, credibility, co-operation and support for the Red Cross/Red Crescent in Indonesia.

Objectives and activities

Objective 1 A strong and well-developed communications capacity of the Indonesian Red Cross (PMI).

Activities to achieve objective 1 are:

- Support the development of a comprehensive communications strategy for the PMI and a 3-5 years working plan in co-operation with the Asia-Pacific information unit and the ICRC's delegation in Indonesia.
- Through ongoing dialogue, encourage the PMI leadership to recognize the communications department as part of the core services and structure of the national society.
- Provide support to the PMI public relations division by procuring the essential technical hardware (computers, scanners, photographic equipment) required for a well-functioning communications department.
- Support the participation of PMI communications and senior management staff in regional and country-based advocacy and communications training workshops;
- Support the participation of PMI communications staff in the Regional Internship Programme with the Asia-Pacific information unit in Bangkok, whereby information officers from selected national societies each year join the unit for a set number of days of intensive training and work participation.
- Support language and computer training, where appropriate, for selected PMI communications staff.

Objective 2 Expanded strategic links with local and international media to secure sustained and high profile media coverage for the activities of the Federation and PMI, particularly in times of emergencies.

Activities to achieve objective 2 are:

- In co-operation with the Asia-Pacific information unit, further develop, update and expand the network of media contacts in Indonesia and throughout the region;
- Continue to service the information needs of the media in the event of major emergencies in the region, including the rapid deployment of information personnel/spokespeople to the field and providing media interviews, briefings and publicity materials as required.
- Devise media strategies in support of Federation programmes and operations in Indonesia, with particular emphasis on the country's long-term humanitarian emergency.
- Maintain and expand the regular flow of information materials (including press releases, publications, photographs, video footage) to contacts in the local and international media in Indonesia and the Asia-Pacific region.
- Support the implementation of advocacy and communications strategies and activities surrounding global Federation campaigns.
- Support the organization of in-country media workshops and seminars on specific issues and/or operations.

Objective 3 Heightened awareness of Red Cross/Red Crescent activities and humanitarian values in Indonesia among key external stakeholders, including diplomatic missions, the corporate sector, the authorities, NGOs, Ingots and civil society.

Activities to achieve objective 3 are:

- Head of delegation and delegates to identify, initiate contacts and network regularly with key external stakeholders.
- Share information with counterparts in peer organizations, including programme plans, reports, assessments, evaluation studies.
- Increase participation in relevant sectoral forums including co-ordination meetings, seminars and conferences.
- Contribute material to the quarterly publication of Asia-Pacific FOCUS with distribution to an expanded readership base, external (corporate/political/non-governmental) as well as internal, throughout Indonesia and the region.
- Collaborate with the ICRC on joint objectives planning and training initiatives targeted at national society information/dissemination officers.

Objective 4 Integration of communications components into all national programmes.

Activities to achieve objective 4 are:

- Provide support to the PMI Public Relations/Foreign Affairs division to continuously improve its planning skills and output.
- Support joint planning between the Public Relations/Foreign Affairs division and other PMI departments, along with the Federation and ICRC, to ensure that all national and branch programmes and projects have communications components.

Expected results

Objective 1:

- The PMI has a comprehensive communications strategy and working plan.
- PMI staff have participated in the Regional Internship Programme and show improved skills.
- PMI leadership recognizes communications as a core function in the national society.
- PMI staff play an increased role in the regional communications work.
- PMI communications staff have improved writing and publication skills.
- Selected PMI communications staff have undergone language and computer training and show considerable progress in their work.

Objective 2:

- Indonesia delegation and the PMI have updated and comprehensive lists of major media in Indonesia.
- PMI staff members are able to work with media in the field during emergency operations providing for positive coverage of Red Cross operations.
- Existing media strategies with joint PMI and Federation ownership.
- Media in Indonesia receive relevant information on Red Cross work in the country.
- Federation advocacy position material is disseminated to PMI staff and leadership.

Objective 3:

- Federation staff in Indonesia have a good relationship with key external partners, allowing for a better coordinated effort at providing services;
- Federation staff attend regular inter-agency meetings, seminars and briefings, and network with foreign missions and other potential donors.
- Red Cross work in Indonesia is featured prominently in the Asia-Pacific FOCUS, the Federation website and other Federation publications;
- Federation, PMI and ICRC have regular coordination meetings on planning and training of communications/dissemination staff and volunteers, thus avoiding duplication of efforts and inputs.

Objective 4:

- PMI communications division has increased planning skills.
- PMI communications division staff plans in co-operation with other national society divisions, thus ensuring integration of communications with other programme and relief work.

Indicators

Goal: PMI is well known, its mandate understood and it is working closely with other national societies in the Asia Pacific region

Objective 1:

- Better quality publications produced in-house.
- The scale and number of publications.
- Computers and other hardware is used by the division for better quality publications.
- National society publications for internal use (such as the "Suara PMI" bulletin) are produced quarterly.
- Rotational programme begun for chapter staff's participation in division at national level.
- At least one national divisional staff member attends regional or participating national societies communications/advocacy or dissemination workshop in the year.

Objective 2:

- Wider distribution of Red Cross publicity material achieved.

- Contact lists updated regularly.
- National society staff in disaster operations reports on media relations in the field.
- Documented and approved media strategies.
- High profile coverage of the Federation/PMI as leading humanitarian organization in Indonesia.

Objective 3:

- Growing number of individuals and organizations receive Federation/PMI materials.
- Federation is represented at all major international meetings on humanitarian affairs.
- Number of stories on Red Cross activities in Indonesia in Asia Pacific Focus and other Federation publications.
- Joint Federation/PMI/ICRC plans and activities implemented.

Objective 4:

- National society and branch programmes have communications components.
- Programme managers understand and support communications plans in their programme approach.

Critical assumptions

- Programme is fully funded.
- PMI leadership is committed to undertake the development of a comprehensive communications strategy and working plan.
- PMI is able to retain qualified staff.
- Emergency operations allow time for the development of the Public Relations/Foreign Affairs division and training of staff.

Monitoring and Evaluation

Monitoring will be carried out as follows:

- A progress report will be provided by PMI at the March 2002 Partnership meeting.
- The Indonesia delegation and the ICRC will conduct regular meetings and review progress.
- The Asia-Pacific information unit in Bangkok will provide support and review progress through visits and other contacts.
- Monitoring will also be carried out through regular contacts with chapters and branches during field trips by delegates and attendance at selected chapter “Mukanas” meetings.

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4. Organisational development

Background and achievements/lessons to date

To date, organisational development within PMI has primarily focused on governance and headquarters level management. The national society's recently appointed secretary general and the governing board are strongly committed to prioritising organisational development throughout the provinces and chapters in order to strengthen the society generally.

The PMI strategic work plan (1999-2004) clearly reflects these priorities and serves as a basis for the Federation development programme. This 2002 appeal reflects the recent reorganisation within PMI headquarters and seeks to build on this new structure, strengthening the skills and capabilities of the central management team to provide support to the organization and at the same time supporting the development of selected chapters and branches.

Indonesia is undergoing many political and social changes and the PMI needs to adapt to the new challenges these changes present. The government is devolving more autonomy to the provinces and the army is moving away from its territorial infrastructure, which dominated local administrations in the past. The present PMI governance recognizes these changes and is aiming to broaden the mandate of PMI and to promote change, both in activities and in the composition of the governance boards at chapter and branch levels throughout the country.

The PMI is a diverse organization scattered across a huge archipelago, whose population, approximately 212 million, is the fourth largest in the world. In the past, the PMI operated as a collection of related but semi-autonomous provincial organizations, rather than a unified and centrally led Red Cross society. It is estimated that 35% of the PMI's chapters and 76% of its branches are inactive, mainly because of a very narrow interpretation of the society's mandates as being services in natural disaster or conflict situations and blood transfusion. There has been little scope or motivation to be active in other areas. The increasing occurrence of disasters and conflict has, however, heightened the need for PMI action and there has been an upsurge of chapters (27) and branches (316) seeking guidance and direction from the central organization.

The Strategic Plan for 1999-2004, adopted in 1999, reflects the direction in which both governance and management wish to take the PMI. This programme will capitalise on the direction set, and the initiatives taken so far by the PMI in developing its organisational and resource capacity. It will target those chapters and branches most willing to participate in determining and implementing the change strategy. Internally, board members, staff and volunteers alike will be targeted and educated through orientation and management workshops. Externally, heads of the relevant government ministries and local heads of public administration will be targeted through discussions and information on the possible scope of Red Cross activities.

Building on the programme started in 2001, the Federation will seek to further the objective of a well functioning national society in Indonesia.

Goal To further strengthen the Indonesian Red Cross to become a well-functioning national society that can mobilise support and carry out its humanitarian mission, addressing the needs of the most vulnerable in Indonesia.

Objectives and activities

Objective 1 PMI has developed better application and implementation strategies for core programmes through a supportive working relationship. To achieve this the Federation has promoted and strengthened strategic guidance and consolidated technical advice to the PMI leadership and management for their

organisational development process by emphasising good governance, improving management skills and capacities at headquarters and chapter level.

Activities to achieve objective 1 are:

- Conduct an organisational development strategy workshop and publish a strategy.
- Analyze the results of the first two years' implementation of the PMI five-year strategic plan 1999-2004 with the organisational development division at national headquarters.
- Promote self-reliance and sustainability through effective dissemination, fund-raising and income generation, by conducting a fund-raising seminar capitalising on ideas and strategies from selected well functioning chapters and branches.
- Continue to advise the PMI leadership and management on strategic direction, governance and management issues, in accordance with the Federation strategies, policies and guidelines.
- Conduct a human resource strategy workshop and develop and publish a plan.
- Further develop the management confidence and skills at senior management level of the national society through the identification and organization of appropriate management training courses for each divisional head and selected key staff.
- Review the statutes and discuss their update at the general assembly in October 2002/03.

Objective 2 By December 2002, all levels of PMI are familiar with the PMI five year strategic development plan, and use it as a base for the development, planning and implementation of programme activities.

Activities to achieve objective 2 are:

- Develop a brochure presenting the PMI five year plan and clearly highlighting goals and objectives.
- Develop an orientation package for newly elected national, chapter and branch board members.
- Include discussion and explanation of the plan and the Federation's Strategy 2010 in an orientation package for new chapter and branch boards.
- Organize Red Cross orientation workshops for new board members.
- Produce guidelines for the application of the PMI statutes and governance policy.
- Develop new and appropriate local Red Cross activities derived from the plan, according to the needs of vulnerable people in the different localities and within the framework of Strategy 2010, or adapt existing activities.
- National headquarters organisational division staff attend up to 13 five-yearly chapter assemblies (Munas).
- Promote the national governance and management policy at the five yearly (Munas) chapter assembly meetings.

Objective 3 Three chapters (East Kalimantan, Central Kalimantan and the Mulukus) and five provincial branches (one each from the Kalimantan chapters and two from the Mulukus plus Sampan branch) with experience of Federation supported activities have increased management capacity which can be used as a model for comprehensive chapter and branch development.

Activities to achieve objective 3 are:

- Facilitate, in conjunction with the regional planning and funding unit, skills development training for key national headquarters staff.
- Oversee and provide necessary support for periodic assessment and evaluations of the Federation supported programmes and operations through field visits and the receipt of regular reports.
- Facilitate and co-operate in the coordination of a PMI led discussion with key movement partners on strategic development and priority programmes for 2002-4. (Venue: Partnership meeting 2002).
- Support PMI in the development of efficient management, communications and data systems between national headquarters and selected chapters.
- Through the PMI organisational division, introduce standard operating procedures within the pilot chapters and branches for staff briefing, procurement, communications, planning and reporting.

Expected results

Objective 1:

- The make up of the national, chapter and branch boards becomes more representative of the community they serve.
- Productive initiatives for national, chapter and branch fund-raising and income generation are piloted in targeted chapters and branches by the end of 2002 to improve self-reliance and sustainability.
- Financial transparency is developed through external audits and annual reports, at both national and chapter level.
- An organisational development strategy is developed and adopted.
- The PMI will have better motivated and focused staff able to carry forward the development of PMI at all levels of the society.
- A management training needs analysis has been completed and training conducted according to individual and organisational needs at national headquarters .
- A human resources strategy has been developed and implemented.

Objective 2:

- An orientation package is produced and orientation workshops are conducted in those chapters holding a “Munas” (five yearly chapter assembly) during 2002/2003 and beyond.
- Guidelines on statutes and the strategic plan are produced and utilised by chapters and branches in their governance and management meetings.
- An increased activity level at branch level demonstrated by increased volunteer numbers and heighten community awareness of red cross.
- Key individuals from 27 chapters and 54 branches have participated in the organisational management workshop (Level 1).
- The PMI 5 year strategic plan has been promoted at an international forum.

Objective 3:

- Improved communications between national headquarters management, chapters and branches.
- Greater continuity and more efficient programme implementation throughout selected chapters and branches.
- Standard procedures within chapters and branches are consistent with Federation standards.
- Management support systems and structures at national headquarters have the capacity to support similar branch and chapter development, without Federation assistance.

Indicators

Goal: The definition of the separate roles of governance and management is recognized by the national society and demonstrated by changes in the makeup of boards at all levels and in the ongoing review of statutes and strategies.

Objective 1:

- Regular meetings held with organisational division and follow-up action taken.
- The availability of delegation plans and reports.
- The availability of updated individual programme/project proposals.
- Availability of report on five-year plan.
- Organisational development strategy adopted and implemented.
- Feedback on co-operation from national society.

Objective 2:

- The availability of programme reports from PMI.
- Human resource strategy published and included in annual business plan.
- Each divisional head attends at least one certificated management skills course.
- 2000 brochures published and distributed to 27 Chapters and 316 Branches.
- Registration lists of orientation courses made and certificates given to attendees.
- Make up of chapter and branch boards changes to include better gender mix and community representation and fewer government officials as members.

Objective 3:

- Attendance and presentation to Partnership meeting in 2002.
- Number of skills development courses held.
- Number of workshops held.
- Installation of updated computer system in national headquarters.
- Publication of standard procedures.

Critical Assumptions

- Chapters and branches accept that the national headquarters leads the change process and welcome its increased involvement, guidance, support, coordination and co-operation.
- The political situation continues to improve and there is no escalation of troubles in Indonesia that will cause the PMI to refocus its resources.

Monitoring and Evaluation

Monitoring and evaluation of this programme will be carried out through:

The participation of the organisational development delegate in the processes outlined. This will be reflected in regular reports of the delegation and the production of strategies. Board compositions, new fund-raising initiatives and better communication to and from the national headquarters will also be monitored.

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5. Co-ordination and management

Background and achievements/lessons to date

Over the past few years, Indonesia and the PMI have undergone pronounced and traumatic changes. The PMI requires external support both to facilitate these self determined changes and to ensure that it continues to develop into a more effective, responsive and well functioning national society. There will be challenges and obstacles in the path of progress, and although some results will be evident in the short term, there needs to be a long term commitment to ensure sustainable development and significant results.

The Federation delegation in Indonesia was established in January 1998, just prior to the downfall of President Suharto. Historically, support from the Federation to PMI has mainly concentrated on management issues, assistance with major disaster response events, assessment missions and presenting the PMI as a capable and credible partner to funding agencies. In 1999 the PMI announced its five year strategic development plan. Since then, increased support has been given to the process, the dissemination and the implementation of the priorities outlined in this document.

An important aspect of Federation support has been to assist the PMI in determining its fields of activity within the core areas of Strategy 2010. It has also helped the society in designing and implementing a pilot project in community based first aid and water and sanitation (CBFA and watsan) in East Kalimantan and in overseeing the implementation of a disaster preparedness project which established Satganas (emergency response teams) and provided mobile response units (MRUs) in eighteen chapters. In addition, a survey of all chapters and branches was conducted, the results of which have used to formulate the programmes outlined in this appeal.

Goal To facilitate and strengthen the effectiveness and efficiency of the Federation delegation through team work with the national society, the ICRC and the South East Asia regional delegation, to deliver the organisation's humanitarian mission.

Objectives and activities

Objective 1 Federation supported programmes and operations in Indonesia are well coordinated and soundly managed; the core programmes receive high quality technical support.

Activities to achieve objective 1 are:

- Ensure that the head of delegation position and other delegate positions are filled for 2002-2003 with appropriately skilled staff who are familiar with Federation strategies and new directions.
- Ensure locally recruited staff positions are filled with appropriately skilled personnel.
- Ensure adequate office and transport facilities for the Indonesia delegation.

Objective 2 Heightened public awareness and profile for the Federation and Red Cross Red Crescent Movement in Indonesia, particularly in advocacy for disaster preparedness and HIV/AIDS.

Activities to achieve objective 2 are:

- Participate in and represent the Federation's Indonesia delegation at official government, international community and other meetings, functions and events in Indonesia, the South East Asia region and Geneva.
- Represent the Federation in Red Cross/Red Crescent Movement special events.
- Co-ordinate donor visits and media interest in Federation supported programmes in Indonesia, in close co-operation with the South East Asia regional delegation.
- Promote and actively market Federation supported programmes and operations, in close co-operation with the regional planning and funding unit in Bangkok, to attract potential donors and partners in the South East Asia region and elsewhere.

- Ensure high visibility, publicity and recognition of Federation supported programmes and operations in Indonesia, as part of the South East Asia regional team.
- Ensure good co-operation and collaboration with the host national society, participating national societies and the South East Asia regional delegation in Bangkok.
- Promote knowledge sharing, exchange of experiences and co-operation within the Federation, in the Secretariat and in the South East Asia region in particular.
- Participate in and contribute to the work of the South East Asia regional team through the South East Asia regional management meetings.

Objective 3 A comprehensive, well negotiated and manageable country assistance strategy is in place.

Activities to achieve objective 3 are:

- Initiate discussions with the PMI and the ICRC, as to the implementation of the all inclusive CAS for Indonesia.
- Through the programme and funding directorate in South East Asia regional office, promote the formulation and implementation of a CAS with other Movement partners.
- Manage the process of development of a CAS in close consultation with PMI and identified partners.
- Co-ordinate and contribute to further development of a reporting, monitoring and evaluation mechanism in Indonesia for implementation of all inclusive CAS 2002-2004 within the Movement.
- Keep the focal person for the CAS/RAS process in the South East Asia and the CAS team at the Secretariat fully informed and involved in the CAS process in Indonesia.

Objective 4 Sound delegation systems for finances, administration and human resource management are in place.

Activities to achieve objective 4 are:

- Supervise, monitor and evaluate, and line manage the OD delegate and DP delegate, local finance and administration staff and any additional delegates assigned to the delegation.
- Ensure team and capacity building and personal growth within an innovative and productive working environment.
- Ensure proper financial management according to Federation standards.
- Ensure administrative support to delegates, their team and Federation supported programmes and operations.
- Ensure updated security measures and see that they are applied by the Federation in Indonesia.
- Ensure and facilitate regional co-operation between technical teams and liaise with the regional head of delegation for their secondment for regional purposes as needed.
- Keep the South East Asia regional delegation fully informed about overall developments in Indonesia and work closely with the regional head of delegation to optimise Federation support in Indonesia.
- Liaise with corporate services at the Secretariat in Geneva, as needed (e.g. for legal advice, HR issues).

Objective 5 Effective consolidated planning, budgeting, funding and reporting systems in line with agreed programmes and donors are being implemented.

Activities to achieve objective 5 are:

- Facilitate the Federation annual appeal process in collaboration with the national society and in line with the CAS 2002-2003 (2003-2004).
- Produce Federation programme proposals in line with the Federation's national society development strategy and Strategy 2010 in consultation with the PMI.
- Submit the Federation Indonesian Appeal 2003-2004 to the Regional delegation in a timely manner.

Expected results

Objective 1:

- Well co-ordinated guidance and advice on strategic direction, technical skills and programme management provided to PMI. This support will ultimately strengthen the national society capacity in each of the core areas so that full time technical support will not be required from the Federation.

Objective 2:

- The Federation and Red Cross Red Crescent Movement has a highly visible profile and a good image in Indonesia and in the South East Asia region (contributing to bolstering civil society in Indonesia and attracting potential donors and partners for the Federation and PMI).

Objective 3:

- The CAS 2002-2004 (2003-2005) has been developed, agreed on and disseminated to all stakeholders as a guiding tool for effective co-ordination of Movement support to the national society by the end of May 2002.
- All stakeholders have signed an MoU to endorse the CAS and support for national society development.
- The CAS 2002-2004 has been implemented, monitored and evaluated in a process involving all stakeholders of the Movement.
- Lessons learned during the CAS process have been shared effectively with all stakeholders in Indonesia, the South East Asia region and the CAS team at the Secretariat.

Objective 4:

- A well-functioning delegation office led by the head of delegation, supported by a management team formed by technical delegates and senior local staff, and fully staffed with skilled locally recruited employees.
- A secure working environment for delegates, volunteers and staff that is conducive to implementing their programmes effectively has been established within the delegation.
- Continued, effective collaboration and co-operation with the South East Asia regional delegation and other delegations in the region through the action research project.

Objective 5:

- The national society is familiar with the Federation appeal process in accordance with the CAS 2002-2004, conducts its annual planning meeting in time and submits its individual programme/project proposals to the delegation during the Federation appeal process, using the Federation standardised project format.
- The delegates and national staff are familiar with the Federation appeal process and are able to produce Federation programme proposals for required programme categories based on the PMI individual programme/project plans.
- The delegation develops programme proposals for no more than six programme categories.
- The delegation submits an annual development appeal for Indonesia to the regional planning and finance unit by the given deadline.

Indicators

Goal: Quarterly programmes updates and production of annual report for Federation.

Objective 1:

- Signed contracts in file; improved performance of the national society and better quality national society plans and reports.

Objective 2:

- Enhanced disaster response capacity and advocacy for preparedness; a national society disaster preparedness plan of action for response and the launch of the World Disasters Report 2002 and 2003.
- Enhanced HIV/AIDS prevention measures included in programming and advocated for.
- The number of invitations to meetings, functions, events.
- The number of speeches delivered and broadcast. The number of Red Cross appearances in the media, and at publicity and public functions; donor interests for partnerships, awareness of Red Cross mandate and activities among public, organizations and individuals.
- The number of donor/partner visits to Red Cross entities or their contacts in-country, continued and new funding.

- The number of contacts with the host national society, participating national societies, South East Asia Regional delegation.

Objective 3:

- The number of meetings and contacts with Movement partners; an evaluation report of the CAS 2002-2004 implementation.
- The production of a CAS (2002-2004) document for PMI and the Federation
- The number of contacts with the regional focal person for the South East Asia CAS/RAS process.
- The number of contacts with the global CAS team and CAS Quickplace.

Objective 4:

- Full and timely briefings/debriefings.
- Regular co-ordination and consultative meetings.
- Interim, annual and end of mission evaluations.
- Budget approved and monitored.
- Regular financial reports.
- The availability of updated security rules and regulations, known to and understood by all stakeholders.

Objective 5:

- Availability of Federation Appeal (2002-2003) on web site and individual programme proposals for five programme categories for donors/partners as required.

Critical Assumptions

- The level of violence, and /or the impact of a major natural disaster, does not partially or entirely disrupt the development programmes or modify the main focus of the delegation.
- The Indonesian government continues to stabilise, creating an environment for progress and the easing of economic hardship.
- Key partners in the Movement continue their support for the PMI's vision and mission.
- The governance and management of PMI sustains its current commitment to implement meaningful and nationwide programmes.

Monitoring and Evaluation

The programme will be monitored and evaluated through:

The new performance management system being implemented by the Secretariat, which contains mechanisms within it for monitoring and evaluation. The traditional programme updates and internal delegation monthly reports will also serve to monitor and evaluate.

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PROGRAMME BUDGETS - 2002								
Delegation : INDONESIA								
PROGRAMME	Disaster Resp.	Disaster Prep.	Health & Care	Human. Values	IDRD	Reg. Co-operation	Co-ord. & Mgmt	TOTAL
Shelter & Construction	0	39'136	0	0	0	0	0	39'136
Clothing & Textiles	0	12'409	0	0	0	0	0	12'409
Food & Seeds	0	13'364	0	0	0	0	0	13'364
Water	0	1'909	78'320	0	0	0	0	80'229
Medical & 1st Aid	0	4'773	1'046	0	0	0	0	5'819
Teaching Materials	0	0	0	0	0	0	0	0
Ustensils & Tools	0	9'545	0	0	0	0	0	9'545
Other Relief Supplies	0	16'704	23'429	0	0	0	0	40'133
Subtotal Supplies	0	97'840	102'795	0	0	0	0	200'635
Land & Buildings	0	0	0	0	0	0	0	0
Vehicles	0	49'636	1'674	0	0	0	28'636	79'946
Computer & Telecom	0	0	0	9'500	1'432	0	5'000	15'932
Medical Equipment	0	0	0	0	0	0	0	0
Other Capital Equipment	0	13'364	12'600	8'900	0	0	0	34'863
Subtotal Capital	0	63'000	14'273	18'400	1'432	0	33'636	130'741
Programme Management	0	47'773	39'349	8'071	22'306	0	21'344	138'845
Technical Services	0	14'301	11'779	2'416	6'677	0	6'389	41'563
Professional Services	0	15'859	13'063	2'680	7'405	0	7'086	46'093
Subtotal Programme Support	0	77'933	64'192	13'167	36'388	0	34'820	226'500
Warehousing/Inspection	0	27'491	0	0	0	0	0	27'491
Transport & Vehicles	0	45'627	3'665	0	0	0	8'830	58'122
Subtotal Transport & Storage	0	73'117	3'665	0	0	0	8'830	85'612
Delegates & Expatriates	0	90'073	122'355	8'680	87'891	0	100'114	409'113
National Societies and Local Staff	0	46'720	19'931	17'697	6'720	0	40'091	131'158
Subtotal Personnel	0	136'793	142'285	26'377	94'611	0	140'205	540'271
Travel & Related Expenses	0	30'163	13'463	8'220	24'591	0	21'882	98'320
Information	0	2'864	11'857	5'536	573	0	0	20'829
Consultants	0	14'225	0	837	2'864	0	2'000	19'925
General Expenses	0	36'043	11'531	22'164	9'984	0	69'443	149'166
Training Workshops & Seminars	0	176'505	219'509	25'000	160'361	0	1'909	583'284
Security	0	0	0	0	0	0	3'818	3'818
Subtotal Training, Information & General	0	259'800	256'359	61'758	198'373	0	99'053	875'342
TOTAL BUDGET	0	708'483	583'569	119'701	330'804	0	316'543	2'059'101