

DREF operation update



Indonesia: Sinabung Volcano Eruption

DREF operation n° MDRID005
GLIDE n° [VO-2010-000170-IDN](#)
Update n° 2
27 September 2010

The International Federation of Red Cross and Red Crescent (IFRC) Disaster Relief Emergency Fund (DREF) is a source of un-earmarked money created by the Federation in 1985 to ensure that immediate financial support is available for Red Cross and Red Crescent emergency response. The DREF is a vital part of the International Federation's disaster response system and increases the ability of National Societies to respond to disasters.

Period covered by this update: 10 September to 23 September 2010.

Summary: On 3 September 2010, CHF 143,243 (USD 141,096 or EUR 109,883) was allocated from IFRC's Disaster Relief Emergency Fund (DREF) to support the National Society in delivering immediate assistance to some 5,000 beneficiaries. Unearmarked funds to repay DREF are encouraged.

This operation is expected to be implemented over three months, and will therefore be completed by 30 November 2010; a Final Report will be made available three months after the end of the operation (by 28 February 2011).

The major donors and partners of the DREF include the Candian Red Cross/Canadian government, Danish Red Cross/Danish government, Irish Red Cross/Irish government, Japanese Red Cross, Monaco Red Cross/ Monaco government, Netherlands Red Cross/ Netherlands government, Norwegian Red Cross/ Norwegian government, Swedish Red Cross/ Swedish government, Italian government, AusAID, United Kingdom Department for International Development (DFID), DG ECHO, OPEC Fund for International Development, and corporate and private donors.

The Netherlands Red Cross Society/Netherlands government has contributed EUR 30,000 (CHF 39,760) towards the replenishment of the DREF for the allocation made to this operation.

IFRC, on behalf of the Indonesian Red Cross (*Palang Merah Indonesia/PMI*), would like to thank all donors for their generous contributions.

[<click here to view contact details>](#)



A psychosocial support programme (PSP) volunteer of PMI plays with affected children in a camp during the creative expressive activity in Jambur Guru Pulungan. This activity aims to encourage children to express their feeling as a way to cope with the trauma of Mount Sinabung eruptions. **Photo:** Ari Armawan/PMI

The situation

A volcano that was dormant for more than 400 years shot a powerful burst of volcanic ash into the air on Friday, 28 August 2010, catching scientists off guard and sending residents returning home after an earlier evacuation fleeing yet again. By 30 August, some 25,000 people had been displaced.

Four volcanic eruptions, nine blasts, and one distant tectonic earthquake were recorded in the previous days. As of 23 September, the vulcanology and geological disaster mitigation department has lowered Mount Sinabung to alert status, allowing people to return to their homes. However, people living in the radius of 3.5km (Suka Meriah village, Bekerah village, and Simacem village) are suggested to remain in the camps.

Indonesia sits on a series of fault lines running through Southeast Asia up to Japan known as the Ring of Fire because of the frequency of seismic activity. The most famous eruption occurred in 1883, when Mount Krakatau blew its top, changing weather patterns around the world in one of the worst-ever volcanic explosions.

As of 23 September, according to the National Disaster Management Agency (*Badan Nasional Penanggulangan Bencana/BNPB*), 23,497 displaced people from eight sub-districts have been evacuated and are living in 22 Jambur (Karonese Wedding Hall) and churches adapted into camps. As these people are displaced in a short period and it is uncertain when they will be able to return to their houses, emergency relief and assistance is still urgently needed to improve the health and hygiene status of those displaced families.

Government's response

In response to the Sinabung volcano eruption, the Indonesian government through BNPB allocated IDR 1,500,000,000 for the management of internally displaced people (IDP) camps in Karo district. These funds will be used for food and medical supplies as needed and also to ensure security in all affected areas. In addition to this, BNPB has distributed 1,000 blankets, 1,000 sleeping mats and 500 family tents. The local government has allocated 50 tonnes of rice, 14,000 tins of fish, 1 water truck, 1,000 bottles of ketchup, 240 kg of instant noodles, 500 blankets, 50 family tents, 200 sleeping mats, oxygen bottles/tubes for emergency, and 5,000 packs of vitamin C and B6.

The ministry of health has also distributed 36,000 masks and 2,000 rubbish bins. The social department has established public kitchens in four IDP camps, while the provincial district health office of North Sumatra is providing health services. The ministry of transportation has requested all transportation agencies (airways and land transportation) to prioritize delivery of goods and people to support the Sinabung emergency operation. The ministry of public works will try to address the need of latrines and bathing by mobilizing water and sanitation equipment and tools from North Sumatra, and also from Jakarta (in Java), Padang, and Aceh if required.

The local military forces (TNI and POLRI) have mobilized 486 TNI personnel and 378 POLRI personnel to help provide security and protection of the displaced families homes, live stock, crops and belongings which they left at their houses and villages.

Coordination and partnerships

PMI continue to will work and conduct all activities under this programme in collaboration with other agencies that may also be planning on supporting communities in these same locations. PMI is already a key participant and informant in the government-led coordination system and is also a member of the interagency assessment team since the onset of this disaster. PMI is also an active partner in the national disaster response network that coordinates emergency responses between the government ministries, forces, private sector, UN and NGO agencies.

Based on ongoing assessment and coordination with other aid providers, several items and utensils that were planned for purchase and distribution by the IFRC and PMI have been provided by other agencies are no longer the priority. Based on these discussions, PMI has identified also identified an increased need in the area of medical and health support due to a reducing number of ongoing medical services being provided to the displaced. Therefore, PMI has offered to supplement this medical service. The available work plan and budget will reflect this shift in next update and in the financial reports.

Red Cross and Red Crescent action

PMI continues to support the affected communities. To date, there are still 40 volunteers active with slight changes of personnel:

No	PMI Kabupaten/Town	Volunteers	Function
1	PMI North Sumatra province	3	Coordinator, driver
2	PMI Kota Medan	9	Assessment, psychosocial support (PSP)
3	PMI Labuhan Batu	3	Finance, PSP, assessment
4	PMI Kota Binjai	6	Field kitchen, relief distribution, administration
5	PMI Kabupaten Langkat	4	PSP, relief distribution, logistic
6	PMI Kota Sibolga	4	Water and sanitation, logistic, information
7	PMI Kabupaten Nias	1	Water and sanitation
8	PMI Kab Tapanuli Selatan	1	Field kitchen
9	PMI Kota Siantar	1	Field kitchen
10	PMI Tanah Karo	8	Relief distribution, assessment, field kitchen, doctor
	Total	40	

PMI has continued supporting relief activities through its field kitchens and mobile clinics. Its water and sanitation team are conducting more assessments, while PSP continues to focus on the children in the camps. Overall, the operational team is conducting more assessments on all its activities in assisting the affected communities.

Progress towards outcomes

The operation will provide immediate relief and assistance for evacuated families sheltered under evacuation halls. Funds will be prioritized for provision of non-food and food items, and the replenishment of stock already distributed from PMI warehouses for potential disasters such as this.

PMI will support 5,000 most vulnerable affected people mainly from the following sub-districts:

1. Naman Teran
2. Simpang Empat
3. Payung
4. Tiganderket

PMI have been leading the joint agency assessment activities in many of the 22 displaced camps and other shelter locations which presently house more than 20,000 individuals. Although relief is being provided by the government to some of these displaced there are still many individuals that have not yet been provided with even the minimal relief items. PMI has exhausted its contingency stocks in an effort to cover some of these needs. It has identified at least 5,000 beneficiaries that still require urgent relief items which include:

- face masks
- hygiene kits
- Water and sanitation materials (e.g. jerry cans, brooms, buckets, mops, cleaning liquids etc.),
- Blankets
- Rope
- Plastic sheeting
- Sleeping mat
- Baby Kits
- Other identified and necessary relief items not being supplies by other agencies.

Relief distributions (food and basic non-food items)

Outcome: 5,000 of the most affected and displaced people are supported with essential non-food items to meet their immediate needs.

Expected results:

5,000 most affected and displaced people affected by the volcano eruption receive non-food assistance.

Activities planned

- Identify and register most affected and displaced families based on agreed criteria;
- Distribute non-food items from existing stocks to identified beneficiaries;
- Continuously monitor relief activities and provide reporting on relief distributions;
- Conduct an ongoing assessment of the impact of the flood and review support strategies;
- Conduct an impact evaluation;
- Replenishment of stocks based on approved budgets and IFRC procurement require

Progress

Until 22 September, the relief team has distributed non-food items and water to *posko* (command post) Tiga Binanga and Dahlian Natolu. Meanwhile, the procurement for replacement and replenishment of contingency stocks is being finalized.

	Number of IDPs					
	Infants	Children	Households (HH)		IDPs	HH
			Male	Female		
Tiga Binanga	101	89	306	279	685	175
Dahlian Natolu	100	92	444	426	870	270

Items have been distributed as follow.

Date	posko	beneficiaries	items				
			hygiene kit	blanket	Water bottles	mask	tarpaulin
21 Sept	Tiga Binanga	175	175	175	30	160	5
22 Sept	Dahlian Natolu	270	266	266	30	160	5

Challenges

The displaced population numbers continue to fluctuate; current figures are between 16,000 to 22,000 people.

Emergency Food

Outcome: 5,000 of the most affected and displaced people are supported with essential food items to meet their immediate needs.

Expected results:

Emergency food is provided and where necessary cooked to provide 5,000 displaced people with a daily ration of meals while they remain displaced and sheltered in refuge halls.

Activities planned:

- A mobile public kitchen will be operated in locations where families have fled the volcano but have not received any assistance from the authorities or other relief service;
- Food support will be provided in coordination with other food providers to individuals who have been neglected or where insufficient assistance has been provided.

Progress

During the period of reporting, the field kitchen in Si abang-abang *posko* continued to serve the operation by providing meals at lunch and dinner.

date	posko	HH	IDPs	Meal		
				lunch	dinner	total
22 Sept	Si abang-abang	153	600	225	600	885

Emergency health

Outcome: The psychological disturbance and health risk has been reduced through psychological support and mobile clinics.

Expected results:

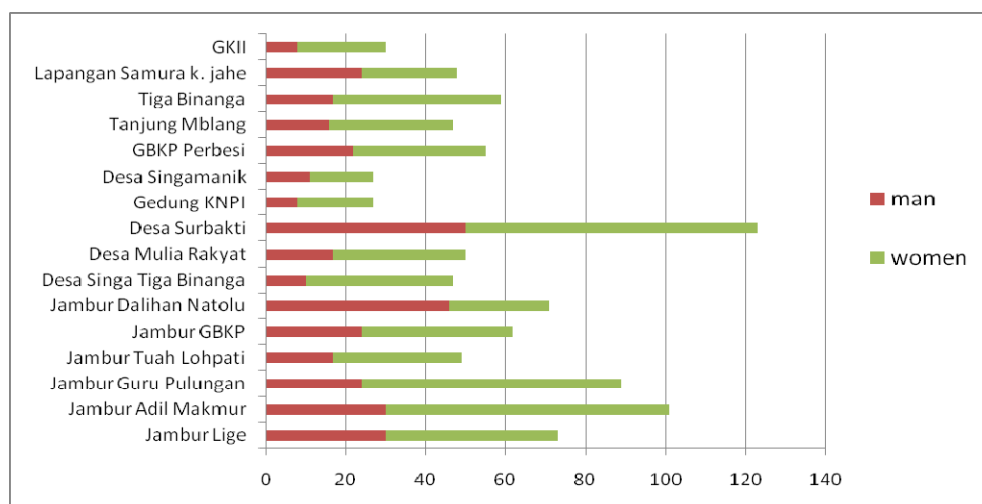
Emergency health services rendered to 5,000 displaced people.

Activities planned:

- Rendering psychosocial support;
- Conducting children activities/games;
- Provision of psychosocial counselling services;
- Conduct support groups for women, elderly and other people that may have been traumatized by this event;
- Mobile public clinic operating for families who have fled the volcano.

Progress

Since its operation beginning 1 September, the PMI mobile clinic (data of 8 September 2010) reached 16 IDP locations, especially limited-access and hard-to-reach locations of Karo district (see table). A team of three doctors, nurses and ambulance crews has treated 958 individuals (354 men and 604 women).



Findings and recommendations

The main treatments received by patients are for acute respiratory infections, diarrhoea and psychosomatic conditions. Possible over-crowding in IDP camps is a concern as respiratory infections and diarrhoea are easily spread without proper treatment and better hygiene.

Proper hand-washing with soap, garbage collection, availability of latrine in IDP camps and consistency of using face mask are strongly recommended for actions¹. While local government is now allocating over-crowded IDP camps, PMI can force the hygiene promotion campaign.

Based on secondary data recorded, malaria and dengue (mosquito-borne diseases) in Karo district were not so meaningful.²

To date (per 22 September), there are mobile clinic on two camps (Si abang-abang and Ora et labora). This activity has been supported by five medical personnel (including one doctor). In Si abang-abang camp, there were 22 IDPs received medical treatment. Most of them are suffered from headache, coughing, itching, fever, and watery eyes. In addition, in Ora et Labora camp, the numbers of patients served were as many as 17 people most complaints are fever, headaches and itching.

¹ Based on several visits to IDP camps in Kabanjahe and Langkat

² Resume *Profil Kesehatan Karo* year 2008 (www.depkes.go.id)



A PMI doctor was examining the under-five children lung. With air-polluted of volcano eruption and over-crowded population in the camps, children under-five are the easier target of acute respiratory infection.

Photo: Ari Armawan/ PMI

The PSP team is supporting children in Singgamanik Camp at Tiga Binanga sub-district, with more than 30 children participating in the games created by the PSP team. These games are developed to provide information about disaster risks and hazards.

In the meantime, PSP team has conducting activities such as aerobic and expressive creative in these two camps as well. In Ora et labora camp, there were 35 people joined the aerobic activity. This activity aimed to create a comfort feeling for the IDPs to stay in the camp. Meanwhile, there are 132 children participated in creative expressive such as playing puzzle, hula hop, football, snake and ladder, and singing together in Si abang-abang village, Kuta Buluh district. It is expected that they children can express their feeling through those activities.

Water, sanitation, and hygiene promotion

Outcome: To health risks of 5,000 people most affected and displaced by the Sinabung volcano are reduced through improvement in the sanitation environment.

Expected results:

Hygiene environment and facilities improved for the displaced persons.

Activities planned:

- Building materials to construct temporary latrines and bathing facilities;
- Cleaning and upkeep of drainage;
- Improvement of rain protection measures;
- Provision of garbage collection facilities.

Progress

After the assessment of water and sanitation in all the camps, the team has found that the problems are in sanitation conditions, water stocks and garbage management. To date, the team has only managed to conduct minimal activities while waiting for the arrival of logistics support from the local chapter. A joint procurement team from PMI and IFRC has been identifying suppliers in the field (Kabanjahe and Berastagi) to provide water tanks, trash cans and other water and sanitation material. The local purchases are expected to help generate trade in the affected areas, and should be distributed over the next two weeks.

In the meantime, the water and sanitation team has assisted other teams to assess IDP numbers.

This team has already constructed two latrines and two water tanks at a local church (*Gereja Batak Karo Protestan-GBKP*) in Klasis camp and two water tanks in Guru Pulungan camp. At the same time, they are distributing dust bins and socializing with the community garbage management and cleaning. These distributions are linked to health and hygiene promotion activities, teaching people how to wash hands properly, how to manage garbage and how to stock water for sanitation to prevent diseases.

Water and sanitation intervention integrates these socializations to become more effective through reaching a large number of beneficiaries in a community-based environment. These communities also benefit from useful interaction as many feel the psychological effects of not being able to leave their homes and not being able to work.

How we work

All IFRC assistance seeks to adhere to the [Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations \(NGOs\) in Disaster Relief](#) and the [Humanitarian Charter and Minimum Standards in Disaster Response \(Sphere\)](#) in delivering assistance to the most vulnerable.

The IFRC's vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

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

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

Contact information

For further information specifically related to this operation please contact:

Indonesian Red Cross (PMI):

- Mrs. Aswi R. Nugroho, head of communications division; email: reksaningtyas@yahoo.com; phone: +62 21 799 2325 ext. 221; fax: +62 21 799 5188

Federation country office in Indonesia:

- Wayne Ulrich Disaster management coordinator; email: wayne.ulrich@ifrc.org; mobile: +62 811 826614, phone: +62 21 7279 3440; fax: +62 21 7279 3446

Federation Southeast Asia regional office, Bangkok; phone: +662 661 8201; fax: +662 661 9322:

- Andy McElroy, regional programme coordinator; email: andy.mcelroy@ifrc.org

Federation Asia Pacific zone office, Kuala Lumpur; fax: +603 2161 0670:

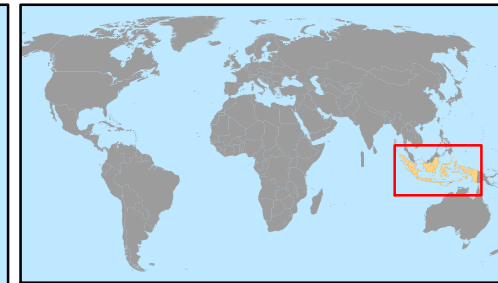
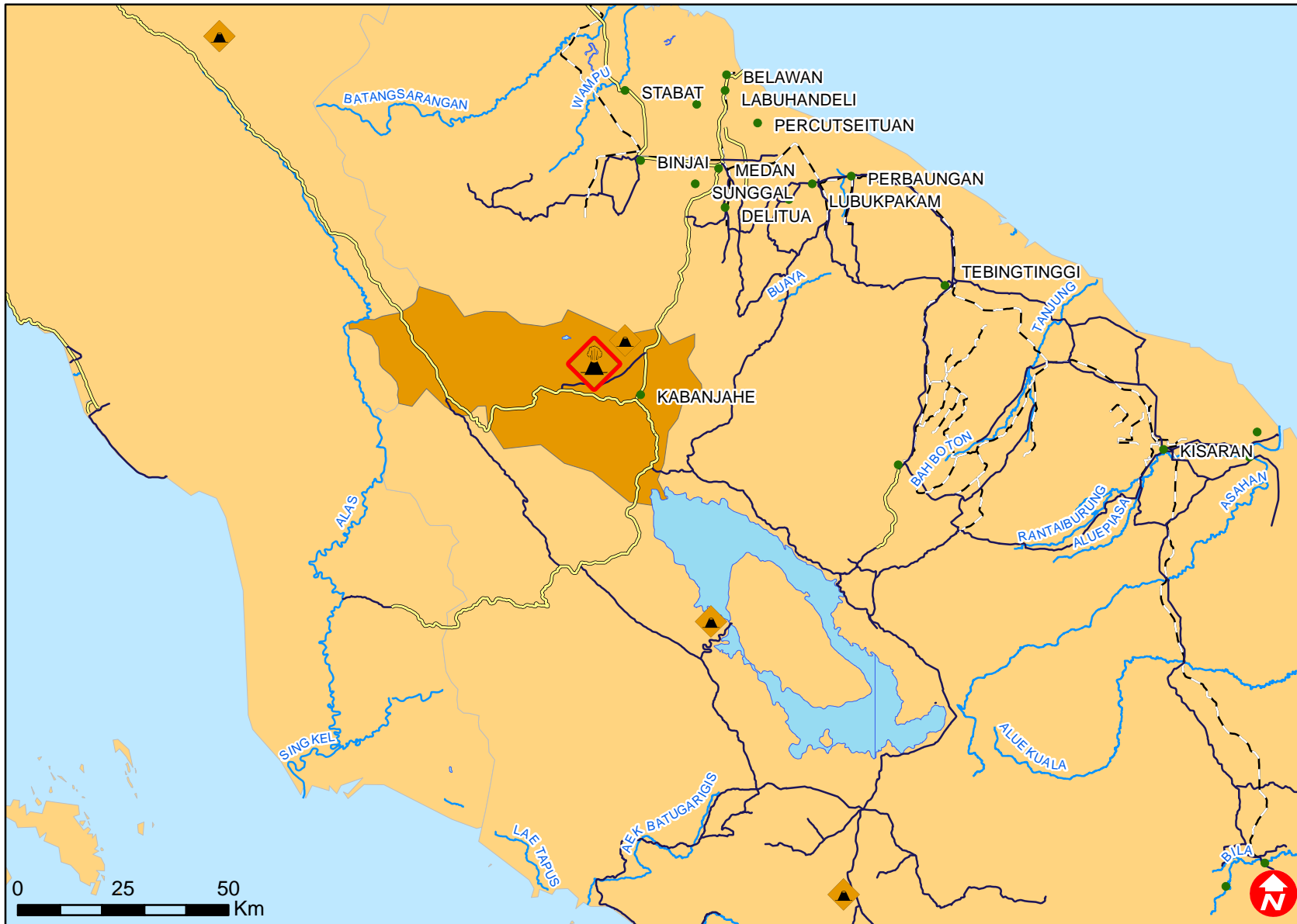
- Jagan Chapagain (head of operations); email: jagan.chapagain@ifrc.org; phone: + 603 9207 5700
- Heikki Väättämoinen (operations coordinator); email: heikki.vaatamoinen@ifrc.org; phone: +603 9207 5729; mobile: +60 12 2307895;
- Alan Bradbury (head of resource mobilization and PMER); email: alan.bradbury@ifrc.org; phone: +603 9207 5775




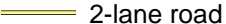



Please send pledges of funding to zonerm.asiapacific@ifrc.org

[<click here to return to the title page>](#)



Indonesia: Sinabung Volcano Eruption



-  Mount Sinabung
-  Other volcanoes
-  Cities
-  2-lane road
-  Main road
-  Railroad
-  Karo district

International Federation of Red Cross and Red Crescent Societies

MDRID005 - INDONESIA SINABUNG VOLCANO ERUPTION

DREF BUDGET SUMMARY

Budget Group	DREF Grant Budget	TOTAL BUDGET CHF
Food	22,000	22,000
Water & Sanitation	19,000	19,000
Medical & First Aid	13,000	13,000
Teaching Materials	9,500	9,500
Ustensils & Tools	30,000	30,000
Other Supplies & Services & Cash Disbursements	11,000	11,000
Total Supplies	104,500	104,500
Storage	1,650	1,650
Transport & Vehicle Costs	4,000	4,000
Total Transport & Storage	5,650	5,650
National Staff	2,500	2,500
National Society Staff	8,350	8,350
Other Staff benefits	2,500	2,500
Total Personnel	13,350	13,350
Travel	4,500	4,500
Communications	1,500	1,500
Other General Expenses	5,000	5,000
Total General Expenditure	11,000	11,000
Program Support	8,743	8,743
Total Programme Support	8,743	8,743
Total Services	0	0
TOTAL BUDGET	143,243	143,243