

Appeal 2003-2004



International Federation
of Red Cross and Red Crescent Societies

INDONESIA

Appeal no. 01.61/2003

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

	2003 (In CHF)	2004 ² (In CHF)
1. Health and Care	363,341	387,900
2. Disaster Management	755,210	716,100
3. Humanitarian Values	71,413	89,500
4. Organizational Development	574,937	584,800
5. Federation Coordination	3,529	4,500
6. International Representation	4,706	6,000
Total	1,773,136¹	1,788,800

Introduction

Indonesia is an archipelago of 13,700 islands extending across a distance of some 5,000 km and plagued by poverty and ethnic, religious and political unrest. Its population of approximately 230 million people, the fourth largest in the world, is 87% Muslim, predominately rural and made up of numerous ethnic groups.

Three years on from the democratic elections of 1999, Indonesia's economic outlook remains uncertain and the current growth rate of 3% holds no prospect of reducing unemployment, which, at a reported 40 million people, is dramatically high. Meanwhile, average basic wages continue to be depressed and the country's industrial capacity under-utilised and shrinking as international companies are reducing production demands. According to the latest statistics, an estimated 37.1 million people (almost 20% of the population) are still living below the poverty line, with many more on the margin. Poverty related vulnerability is therefore still very high throughout the country. Large numbers of people have no access to education and basic health care; malnutrition is widespread, as is exposure to diseases.

There is still social and political unrest in a number of provinces, caused by conflicts over independence/autonomy, and compounded by the economic crisis which has continued since for the past five years. By the end of 2001 more than 1.3 million people were displaced in 14 different provinces, including more than 53,000 East Timorese in West Timor.

Across Indonesia the threat of natural disaster is ever present and early in 2002, with Federation support the Indonesian Red Cross Society - Palang Merah Indonesia (PMI) - with Federation support, assisted some 150,000 flood victims.. Earthquakes are frequent and there is also a high risk of

¹ USD 1,213,527 or EUR 1,204,412.

² These are preliminary budget figures for 2004, and are subject to revision.

volcanic eruptions, tsunamis, floods, landslides, forest fires, and, in some regions, drought. The prevalent poverty renders large numbers of people even more vulnerable.

Country Strategy

A considerable number of aid agencies are active in Indonesia, collectively addressing the extensive humanitarian challenges facing Indonesia. Drawing on its special strengths and experience, the PMI adds value to the country's humanitarian work in the fields of health, including blood transfusion, and emergency situations. It aims at assisting and empowering the most vulnerable groups, in ways that complement the efforts of the Indonesian Government, the UN and other aid agencies. A core activity is the community based disaster preparedness programme, targeted at improving the coping mechanisms of vulnerable groups.

The Federation's delegation, established in Indonesia in 1998, aims at contributing to these values by strengthening PMI as an organisation and supporting its activities, in close cooperation with other stakeholders at country, regional and international level. The cooperation is developing positively, and PMI is progressing well. One example of encouraging results is the increase in the past year of active chapters, almost doubling from 23% in 2001 to 43% in 2002.

Based on PMI's progress, the Federation has formulated a provisional exit strategy, according to which the delegation should be closed at the end of 2006, when the PMI is expected to have the capacity to cooperate with its partners without support. The intended schedule is as follows:

2003: The current delegation strength of three delegates (head, organisational development and disaster management) will be reduced to two at the end of the year, helping to coordinate the activities of three new bilateral PNS.

2004/05: The Federation delegation remains at two delegates - head and programme coordinator, also covering capacity building.

2006: A single Federation representative works with PMI and its partners with PNS providing all programme support to the Society from 2007.

National Society Priorities

The PMI is the only voluntary organisation in Indonesia with full nationwide coverage and is thus viable for international organisations as an implementing agency. The Society regularly demonstrates its capacity to respond in a timely and effective way during natural disasters, with the flooding in Jakarta early in 2002, the bomb blast in Bali and the earthquake in Irian Jaya - both occurring within days of each other in October 2002 - recent and notable examples.

The Society's leadership is firmly committed to developing the Red Cross as an important auxiliary but independent partner to the government and 2002 saw some significant progress in realising the potential within the PMI. Through a series of regionally based management workshops, staff and volunteers in the chapters and branches gained a common understanding of the PMI's mission, vision and strategic plan, creating a more unified entity. Important future challenges centre on the formulation of resource development strategies, improving financial transparency and practices and achieving an independent and representative governance structure at all levels.

In 1999, PMI adopted a five year strategic plan, incorporated the following four priorities:

- disseminating and developing the application of basic principles of the Red Cross and Red Crescent Movement and International Humanitarian Law throughout Indonesian society;

- optimisation and consolidation of the organisation, development of potential, and improvement of PMI resources (human and material);
- The conduct of quality and timely Red Cross services covering: humanitarian assistance in emergency situations, social and public health services and blood services;
- Enhancing youth participation in Red Cross activities.

In July 2002 the PMI conducted a mid term review of the plan to ensure it was on track to achieve the declared objectives. The outcome of this review is being integrated in the divisional business plans for 2003 and the priorities for this appeal.

Red Cross and Red Crescent Priorities

The Federation's presence in Indonesia is centred on support PMI in its development and activities, in line with the Society's priorities, though without participating directly at the operational level. The Federation has started discussions with PMI, ICRC and PNS on the development of a Cooperation Agreement Strategy (CAS), intended to define the framework of cooperation with PMI and the roles of its partners, tentatively outlined as follows:

Federation: Support for the Society's strategic priorities through consultations, advice and financial support to its programme activities, assisting PMI in the coordination of cooperation with other partners through consultations, advice and practical assistance.

ICRC: Consolidate the functional relationship with the PMI through active support to its capacity building programmes in Law and Fundamental Principles, reestablishment of family links, as well as conflict preparedness and response and joint conflict response operations - all aimed at contributing to the development process initiated by PMI in its strategic plan.

PNS: Confirmed or provisional support from Red Cross Red Crescent Societies for a range of programmes and activities, including: health, HIV/AIDS and water-sanitation (Australia, Netherlands, Singapore); disaster preparedness/management (Australia, Denmark, Japan, Netherlands, Norway, Sweden); organisational development (New Zealand, Norway, Sweden).

Priority Programmes for Secretariat Assistance

Working through the Federation delegations in Jakarta and Bangkok, the Secretariat provides support to PMI, practically and financially through six programmes, without participating directly in project implementation. This strategy has been developed on the basis of the considerable humanitarian needs in Indonesia, the development requirements of PMI and the added value the Secretariat and member Societies can offer. Priority will be given to strengthening the capacity of PMI to deliver integrated and effective programmes to the most needy, while harnessing the resources of the resources of the Red Cross Red Crescent Movement (for example, building on the Netherlands Red Cross bilateral work on the health programme).

The priority programmes will be as follows:

- **Health and Care:** the Federation will work with the Netherlands Red Cross to help PMI develop its capacity and implement a programme for improving the health status of the most vulnerable is improved in targeted areas.
- **Disaster Management:** the Federation will focus on strengthening PMI's disaster management capacity towards self reliance.
- **Humanitarian values:** the Federation will support PMI in its development of a communications strategy, and advocate humanitarian values in close interaction with ICRC.
- **Organisational development:** the Federation will provide in-country and facilitate regional technical assistance in organisational change, resource development, skills training in planning and reporting, financial systems development as well as policy development. Emphasis will also

be given to gender mainstreaming, as well as to the integration of youth and volunteers into the programmes.

- **Federation coordination:** the Federation support to PMI will continue to shift from mainly appeal related support to a more broad-based cooperation, where coordination of assistance from other partners is an important element. Development of a CAS will be the prime tool to this end.
- **International representation :** the Federation will work with ICRC to extend the Movement's presence in international fora, also seeking to enhance PMI's capacity in advocacy and communication.

1. Health and Care W [<Click here to return to the title page>](#)

Background and achievements/lessons to date

Since the Asian financial crisis of the mid/late nineties, hardship continues to impact on an increasingly stretched health sector. Large parts of the population, particularly in rural areas, have limited access to basic health care and educational facilities. Overall, the country's health statistics are stark. According to the 2002 UNDP Human Development Index only 56% of births are attended by skilled health staff; there are just 16 physicians per 100,000 people; the under five mortality rate is 48/1000, and malnutrition in this sector of the population is 26%. Vector borne diseases such as dengue and malaria are still endemic, with the incidence rate of malaria at 48 per 100.000 in 2000, and dengue and dengue haemorrhagic fever occurrence fluctuating yearly - in 1998 two large epidemics covering 201 districts affected over 120,000 people and caused 2,900 deaths.

Water and sanitation remains a challenge, with 76% of the population having access to improved water supply and just 66% with adequate sanitation, and the figures in rural areas are thought to be even lower. Water quality is also poor due to ground water contamination from unsatisfactory sanitation disposal. High incidences of diarrhoea, skin and eye infection are associated with the lack of adequate water and sanitation facilities

The health and social welfare ministry and WHO/UNAIDS have estimated that in 2001 there were between 80,000 and 120,000 people infected with HIV/AIDS in Indonesia. While only 3,000 cases are publicly registered, AIDS is now evident throughout the population in 23 provinces. From a global perspective Indonesia is still a low prevalence country (HIV-infection rate is less than five per thousand), but there is considerable potential for spreading because of risk factors including a mobile population, domestic and international migration, urbanization, poverty, proximity to high incidence areas, and an increasing population of intravenous drug users.

While the government has made serious efforts to provide primary health care services, particularly in poorer areas, there is a shortage of trained personnel. The government has declared that future strategies will emphasize inter-sectoral cooperation, community participation, and delegation of authority to provincial and lower levels

Under its five year strategic plan, PMI is focusing on the following comprehensive health priorities, in conjunction with the Indonesian authorities:

- Establishment of social and public health section at regional and branch level.
- First aid centred on the needs and capacities of communities.
- First aid posts and ambulance services.
- Social services to elderly.
- Reorganisation of Bogor PMI hospital and other two associated medical centres into self-sustaining units.
- Blood transfusion services.

HIV/AIDS activities were included in PMI's 1999-2004 strategic plan, but the seriousness of the global epidemic threat required an expansion of the health programme. The national office has

developed a HIV/AIDS strategy, and the strategic planning review in July 2002 confirmed that HIV/AIDS is now a priority project.

Among recent PMI highlights in health and care are:

- Youth and women peer education on HIV/AIDS in three districts with positive impact and feedback from the participants.
- PMI continue to maintain more than 1,000 first aid stations throughout Indonesia, some with an attached ambulance service. The standards and management of these facilities have varied from branch to branch and staff at the national headquarters are continuing to develop the standards through training and management systems.
- The Bogor hospital has become self-sustaining and the two other medical centres are functioning well.
- The blood transfusion activities, endorsed by the Government's mandate, are developing, but represent a financial burden. PMI's objective for next year is to involve one per cent of the low risk population as voluntary and repeat donors.
- As a member of the Asian Red Cross Red Crescent Task force on AIDS, (ART), PMI has developed prevention programme skills and capacity; however, capacity at branch level varies.

This latter point emphasises a common problem, namely, the weak links between branch, chapter and national headquarters in terms of reporting, monitoring and quality assurance. At the branch and chapter level there is also a lack of capacity to assess, implement and maintain programmes. By implementing proven and focused health projects, and through its organisational development programmes PMI hopes to address all these weaknesses.

In 2002, there was a very limited response to the Federation's appeal for this sector, though with funds carried forward from 2001, the Netherlands Red Cross sponsored first aid programme centred on needs and capacities of communities in Tarakan was successfully completed in during the year. This bilateral partner is proposing to formulate a first aid and water-sanitation programme in two branch areas and assist PMI with the development of a national health strategy. HIV/AIDS peer education and blood donor recruitment also comprise the key elements of the planned 2003 activity under this appeal.

Overall Goal

The health status of the most vulnerable is improved in targeted areas.

Programme Objective

PMI's health and care capacity is enhanced through the increased involvement of communities in preventative and information health programmes.

Expected Results

The programme is based on five key projects that will have the following overall results:

1. The targeted communities are empowered to address their own challenges in hygiene, sanitation and first aid.
2. The impact of water related and vector borne diseases, daily emergencies and injuries is mitigated through a community based preventative programme in Atambua.
3. There is increased knowledge and changed attitudes about HIV/AIDS among targeted sections of the community and PMI members.
4. The number of non-remunerated volunteer blood donors is increased to equal or exceed one percent of the low risk population.
5. There is enhanced the provision of first aid training for first aid instructors at national level.

The projects will seek to have the following specific results:

Project One: Strengthening Community Capacity

- Improved hygiene and sanitation practices implemented in 50 targeted villages.
- A minimum of 500 first aid volunteers are trained.
- Branches have improved training capacity and developed assessment and evaluation skills.

Project Two: Disease Prevention

- Health education conducted and behaviour changed in disease control and basic first aid capability.
- Safe water and adequate sanitation facilities constructed.
- Operation and maintenance system for communal facilities developed.
- A system of community waste management at village/household level developed.

Project Three: HIV/AIDS

- Board members and chapter staff of four targeted chapters (North Sumatra, South Sumatra, West Kalimantan, South Sulawesi) have become advocates of PMI's HIV/AIDS programme in their area, with baseline surveys complete.
- Trained instructors, facilitators in youth peer education and women's peer education are available in all four chapters.

Project Four: Blood Donor Recruitment

- Increase in the number of blood donors.
- Increase in available blood product stocks.
- Increased awareness of blood donor requirement.

Project Five: First Aid Training

- Upgraded training equipment available for nationally hosted first aid instructor courses.

2. Disaster Management W [<Click here to return to the title page>](#)**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 volcanoes. Large parts of the archipelago are susceptible to drought and subsequent crop failure, but the most frequent disasters across Indonesia are landslides and floods during the rainy season. Besides these calamities, the prevalent poverty adds to Indonesia's vulnerability, while, since 1997, the political, social and economic collapse, coupled with frequent clashes and violence between different religious and ethnic groups and the secessionist movements in Aceh, East Nusa Tenggara, West Kalimantan, Maluku & North Maluku, and Papua have created a huge problem of internal displacement affecting 19 different provinces.

Statistically, the average number of people affected by natural and 'man-made' disasters in Indonesia has been on an upward trend for more than 20 years: an annual average of 212,000 from 1981-1990, 709,000 (1991-2000) with the figure for 2000 put at nearly 760,000 per year.

Logistics pose a particular challenge: Of the 13,700 Indonesian islands, only Java, Sumatra, Sulawesi and Bali have well developed road systems; railways only exist in Jawa and Sumatra, whereas direct air and sea transport routes are limited to the main island.

The frequency of disasters suggests that disaster management will remain one of PMI's core services. By Presidential Decrees of 1963 and 1990, PMI is mandated to respond within the first two weeks of a disaster, in close coordination with BAKORNAS, SATKORLAK and SATLAK (respectively, the national, provincial and local coordination bodies for natural disasters). The latest Presidential Decree

of January 2001 attributed additional obligations to BARKONAS-PBP to deal with the internal displacement problem.

PMI's network of 30 chapters and 323 branches, with a large number of volunteers from schools and universities, including doctors other professionals, provide a strong human resource base for disaster management, as is shown in the following table:

PMI response: Flood, Landslide, Fire and IDPs, January to July 2002.

Affected Provinces	Number of affected People	Assisted by PMI	Type of Assistance	Funded by
Jakarta (West, South, East, North & Central)	118,000	22,176	Cooked food distrib., health / hygiene services & school-kits	PMI
West Jawa :	164,706	25,343	Food & non-food items (Family / hygiene & school kits)	PMI
Central Jawa :	30,763	7,320	Family / hygiene kits including medicine	Federation
East Jawa :	12,785	6,925	Family / hygiene kits including medicine	Federation
Bali, Buleleng	875	550	Family / hygiene kits	Federation
North Sumatra	2,700(Approx)	1,000	Food	PMI
South Sulawesi, Wajo	2,200(Approx.)	1,548	Food & Medicine	PMI
Kendari, South-East Sulawesi	3,785	2,410	Food & Medicine	PMI
East Nusa Tenggara	1000	625	Family Kits & plastic sheets	Federation
Madura		64,478	Rice distribution	WFP
Jakarta	1,400	1,400	Medical Referral service & home visits for health monitoring	UNHCR

The present programme - implemented under the responsibility of the Society's Disaster Management Division - 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 Programmes of PMI'.

Highlights from the range of PMI disaster management activities in recent years, include:

- 59 SATGANA teams (multi purpose volunteer corps for response at branch level) have been formed.
- 230 trainers trained from 23 chapters, to run SATGANA team training at branch level.
- 10 SATGANA teams (300 volunteers) trained in disaster management and the remaining (49 teams with 1,470 volunteers) have received basic volunteer's training.
- A plan of action has been developed to provide standard equipment for 50 SATGANA teams, covering most disaster prone branches.
- 20 SATGANA teams fully equipped by 2002.
- Two portable water systems provided to the two chapters most frequently facing floods, to ensure safe drinking water for flood victims.
- 18 mobile emergency units with standard emergency kits provided to as many chapters.
- A core group of 20 dedicated volunteers identified and appointed for the formation of the 'Team KHUSUS', a rapid emergency response unit, at the national headquarters level.
- A disaster management working committee meeting (attended by representatives of disaster prone chapters, head of the departments of PMI, Federation DP and OD delegates and representatives from ICRC and PNS) has been held with the following main outcomes:

- revised version of disaster management guidelines and operations manual;
- updated version of SATGANA team training curriculum;
- selected candidate for Team KHUSUS and advance training curriculum developed;
- the required components for disaster/conflict preparedness projects and training curricula for team SATGANA and KHUSUS identified;
- contingency plan format developed;
- revised standard operational procedures designed for effective response to natural disasters and conflict;
- guidelines developed for the mobile emergency unit (MEUV), standard equipment, buffer stock, and the contingency fund;
- Needs and capacity analysis for the regional warehouse conducted;
- PMI membership of the regional disaster management committee.

Among the difficulties encountered and lessons learned:

- poor communication and information sharing between key departments at national headquarters level, as well as between chapters and branches;
- lack of focal person (on reporting aspect) at branch level;
- lack of knowledge on disaster assessment at chapter and branch level
- delays in relief distribution, due to logistical constraints (ie two weeks delayed in South Sulawesi and one week in North Sumatra due to remote distance, lack of emergency storage and pre-position stock);
- poor documentation in relief distribution;
- overlapping and duplication in relief programmes, due to some poor coordination with partner stakeholders.

The programme for 2003/2004 builds largely on accomplishments and lessons learned. It addresses the problems identified, and aims at developing a community based disaster/conflict preparedness programme with close harmonisation with other stakeholders at national, regional and international level. All support is aimed at upgrading the PMI disaster management capacity towards self-reliance.

Overall Goal

PMI is able to meet its obligations under Indonesian law and assure timely and effective assistance to victims of disasters and conflicts.

Programme Objective

PMI develops disaster preparedness levels consistent with the capacity to provide timely and effective assistance to victims of disasters and conflicts, and also enhance community based preparedness.

Expected Results

The programme is based on four key projects that will have the following overall results:

1. Through 2003/2004, PMI's disaster preparedness/management capacity is expanded to manage the national disaster management programme, with limited Federation technical support.
2. The material resources required for building capacity of the PMI to provide a standard response is enhanced by 2004.
3. PMI's capacity for timely and effective disaster response is strengthened by 2004.
4. PMI has developed a well functioning early warning/disaster information system and is playing an active role within a local, regional and global disaster management network by 2004.

The projects will seek to have the following specific results:

Project One: Strengthening PMI Disaster Preparedness/Management Capacity

- All required disaster management policy/guidelines and plans have been formulated, printed, shared and applied at all levels of PMI's staff/members and volunteers, by the end of 2004.

- At national level and across the 10 most disaster prone chapters, PMI has launched disaster preparedness and response plans by the end of 2004.
- Ten targeted chapters and branches have conducted Vulnerability & Capacity Assessment exercises with at-least one vulnerable community, to plan and initiate CBDP activities by the end of 2004.
- Each of the 15 most disaster prone chapters have two disaster management trainers/resource persons by the end of 2003.
- Each of the 12 most disaster prone branches have at least 20 'SATGANA' team members available to carry out disaster management activity at field level, by the end of 2004.
- PMI national headquarters has a 20 member Team KHUSUS, with various fields of experience for rapid emergency response by the end of 2003.
- A participatory follow-up and monitoring mechanism established, as well as periodic reporting system.

Project Two: Standard Response

- Each of 50 most disaster prone branches have a well-equipped SATGANA team with standard response equipment by the end of 2003.
- The six most flood prone chapters have received a portable water equipment set and ready to distribute safe water to flood victims by 2004.
- Each of the 15 most disaster prone chapters have access to a contingency fund by 2004.
- A participatory follow-up and monitoring mechanism established, as well as periodic reporting system.

Project Three: Disaster Response

- Emergency storage network completed through the establishment of the last two regional storage facility by the end of 2003.
- Non food emergency supplies for 300 families provided for two regional warehouses in 2003 and supplied/replenished for all four regional warehouses in 2004.
- Guidelines/manuals for standard logistics operation have been developed/updated, disseminated and required staff/volunteers have been trained by the end of 2003.
- A periodic inventory/ stock-taking, reporting mechanism in place.

Project Four: Disaster Management Information

- By 2004, each of the 15 most disaster prone chapters has established linkages with local, regional and global disaster management information networks and associated information sharing systems.
- Knowledge sharing in disaster management is enhanced within PMI, extending linkages between sister societies and other organisations in South East Asia.
- Enhanced preparedness and the ability to use early warning system is developed among targeted vulnerable communities.
- The PMI has become an active and leading member of the regional disaster management committee.

3. Humanitarian Values W [<Click here to return to the title page>](#)

Background and achievements/lessons to date

Humanitarian Values was first introduced as a separate programme in the Federation appeal for Indonesia in 2002. Despite funding constraints, the following achievements occurred during the year:

- Communication workshop organised for chapters/branches.
- Red Cross magazine publicised.
- Red Cross calendar issued.
- PMI participated in international training/conferences/meetings.

With the restructuring of the PMI's national headquarters early 2001, a new public relations and foreign affairs division was established, confirming the importance the Society places on information and publicity. There is however still a need to develop a national communication strategy and work plan. The new division has employed a small but capable staff, which is actively developing a variety of public relations skills. While some of these can be improved by in-house and in-country training, the PMI is also seeking opportunities of international training and participation in international conferences/ workshops/ meetings. The humanitarian values programme described below, also aims at complementing ICRC's regional and in-country communication and dissemination programmes.

Overall Goal

There is heightened awareness and support for the Red Cross as a key humanitarian organisation in Indonesia.

Programme Objective

PMI has achieved a higher degree of visibility and credibility as an advocate for humanitarian values.

Expected Results:

The programme is based on two key projects that will have the following overall results:

1. Training for PMI staff in communication and public relations is expanded.
2. PMI's public relations capacity is improved, technically and strategically.

The projects will seek to have the following specific results:

Project One: Training

- 30 Public relations officers at chapter level are well qualified by 2004.
- Communications skills have been improved in chapters, through the appointment of public relations officers.
- PMI staff have improved communications skills.
- PMI has enhanced its role in the regional communication network.
- Heads of PMI programme divisions, key chapters and branches have had basic communications training.

Project Two: Enhanced PMI Public Relations Capacity

- PMI has developed a communications strategy and work plan.
- Availability of communications equipment is improved.
- PMI's public relations and information services have improved.
- The number of 'hits' on the PMI website homepage has increased, internally and externally.
- Increased support to national /regional/global advocacy initiatives.
- There is increased PMI participation in regional and global advocacy and publicity campaigns, including World Red Cross and Red Crescent Day (8 May), launch of World Disaster Report and World Aids Day.

4. Organisational DevelopmentW [*<Click here to return to the title page>*](#)

Background and achievements/lessons to date

Indonesia is undergoing many political and social changes and the PMI recognises it must adapt to the new challenges these changes present. In particular, there is a need for stronger PMI branches to ensure constructive interaction with strengthened local governments. The present PMI governance is aware of these changes and aims to keep the Society relevant to its community base.

In the past the PMI has operated as a collection of related, but semi-autonomous provincial organisations, rather than a unified and centrally led Red Cross Society. An encouraging development

has been a significant increase in chapters and branches considered active. Meanwhile, there has been a rise in the number of chapters from 27 to 30 and branches from 316 to 323.

PMI's senior management and the national board continue to give priority to organisational development. The PMI strategic work plan (1999-2004) clearly reflects these priorities, which also serve as a base for the Federation's development programme. This plan was subject to a mid term review in 2002 to ensure that targets were being met and to reaffirm the priorities for the next two years. The 2003 programme builds on developments initiated in 2002, particularly strengthening the skills and capabilities of the national headquarters team and supporting the development of selected chapters and branches in disaster prone areas. Emphasis has also been placed on ensuring a uniform approach by all chapters and branches on issues such as composition of boards at chapter and branch level, PMI's mission and vision, communicating the strategic plan and focused service delivery.

The organisational development programme will capitalize on the direction set and 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 specific development skills workshops, while externally heads of the relevant national government ministries and local heads of public administration will be targeted through discussions and information on the possible scope of Red Cross activities.

The Federation wishes to capitalize on the initiatives taken so far by the PMI in developing its organisational and resource capacity and to continue to realise the potential that has been demonstrated in achieving the objective of a well functioning national society in Indonesia. One of the most difficult aspect of revitalising the PMI is the concept of 'independence versus being auxiliary to the government', particularly at chapter and branch level. At a national level especially, there is a need for the board to devolve more authority to the senior management levels in order to create a more flexible and responsive organisation.

Overall Goal

The PMI has become a well functioning national society, able to mobilise support and carry out its humanitarian mission, addressing the needs of the most vulnerable in Indonesia.

Programme Objective

Through strategic guidance and technical assistance, PMI has improved its governance and management skills and capacities at national headquarters, chapter and branch level.

Expected Results

The programme is based on four key projects that will have the following overall results:

1. Strategic guidance and technical advice is provided to the PMI leadership and management in their organisational development process.
2. The capacity of chapters and branches in resource development, administrative procedures and management information is increased.
3. PMI's capacity to deliver training for volunteers and enhance leadership skills for key volunteers is strengthened.
4. Human resources capacity in under-resourced chapters is improved, together with management skills at national headquarters level.

The projects will seek to have the following specific results:

Project One: Guidance for Governance and Management

- Statute review process initiated for completion by 2004 General Assembly.
- All levels of PMI governance and management adhere to standard application of statutes and procedures.

- Formulation of the PMI Strategic Plan 2005-10 is commenced.

Project Two: Strengthening Chapters and Branches

- Database accessible to all levels of the organisation.
- Branches and chapters are better equipped to raise funds at their local level and generate enhanced capacity to recruit and maintain human resources.
- Administrative and governance guidelines are available for sub-branches.

Project Three: Volunteer Training and Leadership Skills

- Standard operational training procedures are adopted to ensure consistent application at all levels.
- A strong cadre of key volunteers is available nationally.

Project Four: Human Resources Capacity

- An additional number of chapters have become well functioning.
- There is improved programme implementation and service delivery.
- Additional numbers of chapters adhere to national policy and direction.
- National office staff confidence and productivity increases.
- Gender awareness understood and adopted by key departments.

5. Federation Coordination [<Click here to return to the title page>](#)

Background and achievements/lessons to date

The Federation delegation in Indonesia was established in January 1998 and until recently, its support to PMI has concentrated on management issues, assistance in case of major disasters, assessment missions and presenting the Society as a capable and credible partner to funding agencies.

In 2002 PMI and two partners, the Danish and Australian Red Cross Societies prepared a bilateral community based disaster project, with an element of capacity building. Simultaneously the Netherlands Red Cross and PMI conducted a health review with a view to outlining a future bilateral programme. The Netherlands Red Cross also carried out an assessment of projects in West Kalimantan and West Jawa. The Federation coordinated and facilitated these activities in cooperation with ICRC.

As indicated earlier in this appeal, the Federation has started the process of developing a CAS, in cooperation with PMI, ICRC and supporting PNS. The strategy will outline the parameters required for a structured coordination and cooperation between PMI and its partners, and will be complemented by a memorandum of understanding, (MoU), defining the role of each partner. The CAS process seeks to define the Federation as a ready and reliable advice, guidance and, when required, practical assistance to PMI's partners to ensure coherence with the Society's long-term strategy. The coordination will include partnership meetings, visits from donor organisations, regional recruitment and regional partnership meetings.

Overall Goal

The resources made available to PMI by its partners in support of the Society's strategy and activities are fully optimised.

Programme Objective

All cooperation between PMI and its partners is well coordinated.

Expected Results

The programme is based on two key projects that will have the following overall results:

1. PMI's interaction with Red Cross Red Crescent partners in the SE Asia region are developed and strengthened.
2. A CAS and MoU are developed, accepted by PMI's partners, and applied by PMI and all partners, with the Federation in the coordinating role.

The projects will seek to have the following specific results:

Project One: Regional Linkages

- Expanded communication and sharing of experience between PMI and its regional partners coupled with an increase in joint strategic thinking and mutual support.

Project Two: CAS Development

- CAS and MoU are developed as guiding tools and applied on all of PMI's cooperation projects.
- PMI's cooperation with partners has become coherent and integrated.

6. International Representation *<Click here to return to the title page>*

Background and achievements/lessons to date

Although the Federation delegation in Indonesia has consistently advocated Red Cross Red Crescent principles and values in various international and national fora, there is an urgent need to step up these activities both in the international community and among the public and Indonesian authorities. Over the coming years, the Federation will enhance its participation and advocacy in international fora, in close interaction with ICRC - a collaboration that enables the two organisations and PMI to present a unified image of the Movement in Indonesia. Together with PMI and ICRC, the Federation will also target heads of national government ministries and local heads of public administration. Discussions and information about Red Cross activities are aimed at increasing the Government's understanding and acceptance of humanitarian values.

In 2002 the Federation and the Indonesian Government signed a status agreement, which is expected to facilitate the Federation's interaction with the Government.

Overall Goal

Knowledge and understanding of Red Cross Red Crescent principles and values, nationally and within the international community is increased.

Programme Objective

PMI and the Federation have leading roles in national and international fora respectively.

Expected Results

The programme is based on one project that will have the following overall result:

1. PMI and the Federation are positioned to influence the humanitarian agenda in Indonesia and mobilise resources.

The project will seek to have the following specific results:

- The PMI with its Red Cross Red Crescent partners have strengthened their cooperation with public authorities and the international community and generated a higher profile and improved image in Indonesia.
- The Federation and PMI have attracted increased interest from potential donors and partners.
- Strengthened PMI capacity in advocacy and communication.

<Budget below - Click here to return to the title page>

BUDGET SUMMARY**PROGRAMME BUDGETS**

Appeal no.(s) selected: 01.ID/03

Delegation code(s) selected: ID

PROGRAMME:	Organisational Development	Health & Care	Disaster Management	Humanitarian Values	Federation Coordination	International Representation	Field Management	
PROJECT:	PID005	PID401	PID160	PID301	PID601	PID201	PID001	Total
	CHF	CHF	CHF	CHF	CHF	CHF	CHF	CHF
Shelter & construction	0	0	15,000	0	0	0	0	15,000
Clothing & textiles	0	0	18,500	0	0	0	0	18,500
Food	0	0	0	0	0	0	0	0
Seeds & plants	0	0	0	0	0	0	0	0
Water & Sanitation	0	0	0	0	0	0	0	0
Medical & first aid	0	0	0	0	0	0	0	0
Teaching materials	0	66,451	0	0	0	0	0	66,451
Utensils & tools	0	0	0	0	0	0	0	0
Other relief supplies	0	0	21,900	0	0	0	0	21,900
SUPPLIES	0	66,451	55,400	0	0	0	0	121,851
Land & Buildings	0	0	0	0	0	0	0	0
Vehicles	0	0	0	0	0	0	0	0
Computers & telecom	8,650	640	7,280	0	0	0	0	16,570
Medical equipment	0	0	0	0	0	0	0	0
Other capital exp.	0	0	214,500	6,190	0	0	0	220,690
CAPITAL EXPENSES	8,650	640	221,780	6,190	0	0	0	237,260
Warehouse & Distribution	0	0	9,900	0	0	0	0	9,900
Transport & Vehicules	5,572	2,786	12,972	0	500	500	0	22,331
TRANSPORT & STORAGE	5,572	2,786	22,872	0	500	500	0	32,231
Programme Support	37,370	23,617	49,088	4,641	229	305	0	115,253
PROGRAMME SUPPORT	37,370	23,617	49,088	4,641	229	305	0	115,253
Personnel-delegates	201,600	28,800	247,186	0	0	0	0	477,586
Personnel-national staff	64,180	18,738	37,560	0	0	0	0	120,478
Consultants	2,863	0	0	0	0	0	0	2,863
PERSONNEL	268,643	47,538	284,746	0	0	0	0	600,927
W/shops & Training	190,082	176,589	87,300	50,116	0	0	0	504,087
WORKSHOPS & TRAINING	190,082	176,589	87,300	50,116	0	0	0	504,087
Travel & related expenses	30,940	1,970	11,140	0	500	500	0	45,052
Information	10,318	9,013	0	10,465	700	700	0	31,196
Other General costs	23,358	34,735	22,881	0	1,600	2,700	0	85,275
GENERAL EXPENSES	64,617	45,718	34,022	10,465	2,800	3,900	0	161,523
TOTAL BUDGET:	574,936	363,341	755,209	71,412	3,529	4,705	0	1,773,136