

Plan 2009-2010



Indonesia

Executive summary

The International Federation will continue to work with the Indonesian Red Cross (Palang Merah Indonesia/PMI) on harmonizing the PMI across the country and delivering integrated services to strengthen the resilience of communities to hazards and to reduce vulnerability.

The country office's plan in general supports the PMI's strategic plan. It contributes to the International Federation Global Agenda Goals, which further contributes to the UN Millennium Development Goals.

Integral to the success of the community-based programmes is a strong and cohesive national society. Placed in the centre of the development framework by the International Federation, the priority remains in supporting a stronger legal base for the national society and modernizing the institutional systems.

Supporting all members operating in Indonesia to work within the cooperation agreement strategy (CAS) is an International Federation priority, as is facilitating a networking partnership with all partner national societies in Indonesia. Four years after the tsunami disaster, the recovery programme still continues, supported by many partner national societies, and is documented in the tsunami plan of action.

Key priorities of PMI are:

- Risk reduction – integrated community-based risk reduction; climate change
- Response – disaster response, emergency health
- Institutional strengthening – harmonization of the PMI approach across the country and a stronger legal base.

The total budget for 2009 is CHF 2,478,500 (USD 2,265,539 or EUR 1,578,662) and for 2010 is CHF 3,351,979 (USD 3,063,966 or EUR 2,135,018). [<Click here for the budget summary.>](#)

Country context

Indonesia is the world's largest archipelago, comprising around 17,508 islands. It has a population of approximately 228 million people, the fourth largest in the world. Of this, nearly 60 per cent live on the densely populated island of Java, where rising income disparity has led to some of the nation's more complex social problems.

Forming part of the "Pacific Ring of Fire", Indonesia is prone to earthquakes and volcanic eruptions aside from tsunamis, floods, landslides and severe drought. With the population growth of 1.4 per cent annually¹, an



Led by the Indonesian Red Cross Chairman, 50 representatives from Red Cross and Red Crescent societies from all around the world, together with hundreds of local villagers, dug into the muddy sands along the beach at Tanjung Benoa and carefully planted 1,000 mangrove saplings. The planting was an example of the kind of action that communities can take to reduce the impact of natural hazards. (International Federation)

¹ World Bank Data and Statistics, World Development Indicator 2005

increasing part of the population is pushed into marginalized areas including unsafe areas outside embankments, areas prone to mudslides, and areas with high geological activity. Additionally, such areas offer only rudimentary access to basic life necessities of clean and safe water, sanitation, and health services. The issue of climate change further increases vulnerabilities through more frequent and less predictable extreme weather events. Rapidly growing population, unplanned urbanization, increasing poverty and environmental degradation also contribute to the high level of vulnerability.

Indonesia at a glance:

Population	Approximately 228 million ²
Gross national income per capita	USD 1,280 ³ (East Asia and Pacific – USD 1,627)
Population below national poverty line	17.8 per cent ⁴
Life expectancy at birth	67.9 years ⁵ (East Asia and Pacific – 70 years)
Infant mortality (per 1,000 live births)	30 (East Asia and Pacific – 29)
Access to an improved water source (% of population)	77 per cent (East Asia and Pacific – 79 per cent)

List of disasters and associated losses (2000-07):⁶

Type of disasters	Frequency	Loss ⁷
Earthquake	26	7,048 killed, 144,371 injured
Flood	38	2,281 killed, 1,162 injured
Landslides	25	1,050 killed, 387 injured
Volcanic eruption	8	92,828 affected
Wave surge / tsunami	2	166,510 killed, 35,000 affected (in one incident) 532,898 homeless (in one incident)

Indonesia: health challenges:

Maternal mortality ratio	307 per 100,000 ⁸
Dengue hemorrhagic fever	23,893 cases, 65 deaths (2007)
Avian influenza	104 cases, 83 deaths recorded in West Java, DKI Jakarta, Banten, North Sumatera, East Java, Central Java, Lampung, South Sulawesi, West Sumatera, South Sumatera, Riau, and Bali (data as of 16 August 2007)
Measles	122 times with 1,467 cases, CFR 0.48 per cent (2005) ⁹
Malaria morbidity rate	18.94 per 1,000 people (2005) ¹⁰
HIV/AIDS	9,565 cumulative reported cases ¹¹ , consisting of 4,244 HIV infection cases and 5,321 AIDS cases of which 1,332 died.

With these complex and widespread health and disaster problems, the Indonesian Red Cross (PMI), as auxiliary to the government by presidential decree, has the advantage of its widespread network to offer assistance. With 33 chapter offices at provincial level and 402 branches at municipality level and 797,096¹² volunteers spread across municipality and district levels, their network has considerably easy access to the most vulnerable people.

However, the equitable provision of services across Indonesia has been a long-standing challenge for the organization. It is mostly a reflection of each chapter and branch's capacity. Based on an evaluation of PMI's capacity, only 15 per cent of the chapters were performing well, 30 per cent were categorized as fair, and 46 per cent weak with the remaining nine per cent either new chapters or without sufficient data. Similarly, only 35 per cent of branches are characterized as well-functioning, 14 per cent fair, 42 per cent weak and nine per cent yet to be evaluated.¹³

² UNFPA State of World Population 2007 projected figure

³ World Bank Data and Statistics, World Development Indicator 2006

⁴ World Bank Data and Statistics, Indonesia Social Indicators 1990-2005

⁵ World Bank Data and Statistics, World Development Indicator 2006

⁶ EM-DAT Emergency Disasters Database

⁷ Rough calculation of total numbers, some disasters reports do not specify loss of life and number of injured.

⁸ UNDP Indonesia Progress Report on the Millennium Development Goals, 2000

⁹ Ministry of Health, Republic of Indonesia, Indonesia Health Profile 2005; Jakarta 2007

¹⁰ Ministry of Health, Republic of Indonesia, Indonesia Health Profile 2005; Jakarta 2007

¹¹ Data per 31 December 2005, Ministry of Health, Republic of Indonesia, Indonesia Health Profile 2005; Jakarta 2007

¹² Data based on PMI internal evaluation per end of 2006, comprising Youth Red Cross (PMR), volunteer corps at university and branch level (KSR) and professional volunteers (TSR).

¹³ Data based on PMI internal evaluation per end of 2006. At the time of evaluation, PMI had 33 chapters at provincial level and 389 branches at municipality level.

National Society priorities and current work with partners

The PMI remains focused on consolidating a 'back to basics' approach, following the last four years of tsunami work. This approach centres on risk reduction and response, and by formulating activities within these two thematic areas, PMI also seeks to strengthen an integrated approach to programme design and delivery.

While many of the partner national societies remain focused on tsunami-affected areas until 2010, few partner national societies are able to support the PMI in activities in other locations. However, it is anticipated that during the period 2009-10, the full implementation of a PMI regional approach will ensure better identification of partners and operational alliances for other parts of Indonesia.

Building on a consultative process which started in 2008 with communities, chapters and branches, PMI is expanding the evidence base required to identify its strategic priorities and subsequently conduct a gap analysis in terms of services to vulnerable people and resources. This forms the basis of the new five-year strategy which will be presented at the general assembly at the end of 2009.

The current cooperation agreement strategy (CAS) currently in effect until 2009 will be revised in light of the new strategic priorities outlined in the strategy 2010-14.

At present, partner national societies working together with the PMI include the American, Australian, Belgian, British, Canadian, Danish, French, German, Hong Kong branch of the Red Cross Society of China, Irish, Japanese, Korean, Netherlands, Norwegian, Spanish, Swiss and Turkish national societies. These partners are largely engaged in tsunami-recovery programmes and activities.

Secretariat-supported programmes in 2009-2010

This plan will continue to build on the strengthening of the national headquarters and supporting mobilization of chapter resources to support the PMI in harmonizing its activities across the country. Logical frameworks are available on FedNet¹⁴, or [upon request](#).

Disaster Management

a) The purpose and components of the programme

Programme purpose
Reduce deaths, injuries and impact from disasters

The disaster management programme budget for 2009 is CHF 724,000 and for 2010 is CHF 861,390.

Programme component
<p>Disaster management planning: the International Federation will actively support PMI in estimating and planning for disasters, in mitigating their impact on vulnerable communities, and in responding to and effectively coping with their consequences.</p> <ul style="list-style-type: none"> Continued engagement and coordination in the development of national disaster laws and policies, with a particular focus on the implementation of the International Disaster Response Laws (IDRL) guidelines, and its application in the field and its impact on PMI disaster management policies
<p>Organizational preparedness: the International Federation will maintain, promote and develop capacity in skilled human resources, and financial and material capacity for effective disaster management</p> <ul style="list-style-type: none"> SATGANNA training; refresher courses; SPHERE training, DMIS training, emergency assessment, reporting, volunteer management, and medical action team training
<p>Community preparedness/disaster risk reduction: the International Federation will help encourage and strengthen the self-reliance of individuals and communities to reduce their vulnerability to public health emergencies and disasters</p> <ul style="list-style-type: none"> Improvement of community facilitation skills of PMI volunteers

¹⁴ FedNet is an intranet and available to Movement members only

- Support to integrated community-based risk reduction programmes/dissemination of disaster risk reduction (DRR) framework as appropriate
- Climate change/risk reduction programme support

Disaster response: the International Federation will provide disaster response assistance to meet the needs of those affected by disaster

- Pre-positioning of stocks; logistics systems and warehouse maintenance training

b) Profile of target beneficiaries

A complete profile of vulnerability in communities is still being researched. As part of activities in 2008, an updated hazards, vulnerability and capacity map was initiated. The profile of target groups is still being collated, using techniques such as focus groups and review of secondary data.

c) Potential risks and challenges

Increasing food and oil prices continue to place a significant financial burden on vulnerable groups, potentially creating new vulnerabilities. The socio-economic pressure may see an increase in urban migration, an increase in incidence of disease due to malnutrition as well as other environmental problems due to communities engaging in illegal practices, such as logging, that have significant impact on health and hazard vulnerability. The PMI, with International Federation support, seeks to advocate for these communities on such key issues exacerbating vulnerability, but also look towards strengthening the social cohesion of communities through integrated community-based risk reduction activities.

Health and Care

a) The purpose and components of the programme

Programme purpose
Reduce deaths, illnesses and impact from diseases and public health emergencies

The health and care programme budget for 2009 is CHF 572,500 and for 2010 is CHF 553,690.

Programme component
HIV and AIDS <ul style="list-style-type: none"> ▪ Support on delivery of Global Alliance on HIV – preventing further infection; encouraging treatment-seeking behaviour; and reducing stigma and discrimination ▪ Monitoring of implementation of PMI policies on HIV/AIDS anti-stigma and discrimination in the workplace
Voluntary non-remunerated blood donation <ul style="list-style-type: none"> ▪ Support collaboration with the Association for Blood Donors and PMI to encourage and develop a cadre of non-remunerated blood donors ▪ World Blood Donor Day celebrations
Community-based health and first aid <ul style="list-style-type: none"> ▪ Review of the application of community-based first aid (CBFA) in Action to PMI CBFA training and implementation ▪ Support of health promotion initiatives on new and emerging diseases, e.g. avian influenza, dengue
Emergency health <ul style="list-style-type: none"> ▪ Ongoing support for medical action teams (<i>see disaster management</i>)
Water and sanitation <ul style="list-style-type: none"> ▪ Support of training curricula and delivery as part of the development of the water and sanitation training centre in Bandung ▪ Provision of technical support in strengthening the water and sanitation capacity of PMI
Malaria <ul style="list-style-type: none"> ▪ Continuation of the “Hang Up – Keep Up” bed net campaign

b) Profile of target beneficiaries

As with disaster management, a complete profile of vulnerability in communities is still being researched. As part of activities in 2008, an updated hazards, vulnerability and capacity map was initiated. Using techniques such as focus groups and review of secondary data, the profile of target groups is still being collated.

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incidence of disease due to malnutrition as well as other environmental problems due to communities engaging in illegal practices, such as logging, that have significant impact on health and hazard vulnerability. The PMI with International Federation support seeks to advocate for these communities on key issues affecting vulnerability, but also by strengthening the social cohesion of communities through integrated community-based risk reduction activities which include 'health sector' activities such as community-based first aid and hygiene promotion.

Organizational Development/Capacity Building

a) The purpose and components of the programme

Programme purpose
Increase local community, civil society and Palang Merah Indonesia (PMI) capacity to address the most urgent situations of vulnerability.

The organizational development/capacity building programme budget for 2009 is CHF 979,000 and for 2010 is CHF 1,698,396.

Programme component
Improving national society leadership capacities to develop and implement strategies to ensure good performance and accountability <ul style="list-style-type: none"> ▪ Stakeholder analysis and management ▪ Participation in national and international meetings
Ensuring a well-functioning organization with sustainable systems, procedures and staff with desired level of managerial and technical competencies <ul style="list-style-type: none"> ▪ Development and refinement of finance system ▪ Human resources and performance management implementation
Ensuring financial sustainability <ul style="list-style-type: none"> ▪ Identification of core business components and sustainability options ▪ Development and implementation of a resource development strategy
Developing a nationwide coverage of grassroots units and services <ul style="list-style-type: none"> ▪ Collection of baseline data for PMI capacity, hazards and vulnerability ▪ Participatory planning process ▪ Transfer of skills and knowledge to communities through programme delivery in target areas
Increasing capacity for programme development and management as well as volunteer management <ul style="list-style-type: none"> ▪ Volunteer recruitment ▪ Volunteer management system implementation

b) Profile of target beneficiaries

PMI is the direct beneficiary of the organizational development/capacity building programme. This includes staff and volunteers at the national society's headquarters, its 33 chapters and more than 400 branches nationwide. The focus will, however, continue to remain on the headquarters and chapters, as in the 2008-09 plan. Updated data collected in 2008 on chapter capacity will further identify the priorities for organizational development interventions.

c) Potential risks and challenges

The regular occurrences of disaster in Indonesia continue to place pressure on the national society to retain the capacity in which it has already invested, while addressing regular emergencies. These may at times divert PMI's finite resources from sustainable institutional capacity building. The continued presence of the "Indonesian Red Crescent" forms a challenge for PMI in representing itself to the community and well as investing in its legal base.

Principles and Values

a) The purpose and components of the programme

Programme purpose
Promote respect for diversity and human dignity, and reduce intolerance, discrimination and social exclusion

The principles and values programme budget for 2009 is CHF 203,000 and for 2010 is CHF 238,503.

Programme component
Promotion of humanitarian principles and values <ul style="list-style-type: none"> ▪ Dissemination of principles and values ▪ Stakeholder communication ▪ Establishment of information centre
Operationalization of Fundamental Principles and humanitarian values <ul style="list-style-type: none"> ▪ HIV/AIDS anti-stigma and discrimination campaigns/promotions
Anti-discrimination and violence prevention/reduction programmes <ul style="list-style-type: none"> ▪ Communication activities in community-based risk reduction.

b) Profile of target beneficiaries

As a cross-cutting 'programme,' the target beneficiaries in the community are the same as for the service programmes, health and disaster management. In addition, PMI also is a target group of these activities.

c) Potential risks and challenges

The growing voices of Islamic fundamentalists in mainstream forums highlights a need greater than ever for PMI to strongly position itself as the neutral humanitarian organization in Indonesia, and as an advocate of humanitarian principles and values.

Role of the secretariat

Within the International Federation country office, a sectoral approach to programming has been replaced by a geographically defined development strategy. Delegates with management and organizational development capacities work with PMI counterparts to manage needs in a geographical area. This geographical focus allows PMI divisions to work in a coordinated, integrated way with the chapters in specific geographic areas wherein building on participatory planning processes at each chapter to identify programme priority areas and to ensure national and provincial operational alliances are maximized. In this way, qualitative and quantitative baseline data is also expected to be captured.

In addition, support in programme areas is also provided from the International Federation's Southeast Asia regional office in Bangkok and the Asia Pacific zone office in Kuala Lumpur.

a) Technical programme support

To support PMI in meeting the needs for the development of the different geographic regions, a support unit provides technical advice on programme design and policies. In addition to this responsibility, this unit will have a specialized function in disaster response and recovery. The unit seeks to work at a strategic level and assist PMI in coordination with the regional programme coordinators in the management of many of the international and global initiatives on disaster management. These include implementation of the Hyogo Framework for Action, the IDRL Guidelines as well as other international and national health priorities.

b) Partnership development and coordination

Building on cooperation and collaboration models developed and implemented between the International Federation office and partner national societies, the country office will also see to strengthening formal collaborations with other institutions to further strengthen PMI's position in its core operating areas in Indonesia.

c) Representation and Advocacy

Through the development of a communications strategy with the PMI, tools such as position papers on important humanitarian issues will be developed. Also, linked to the community-based programmes, local level advocacy strategies will be designed based on community needs.

d) Monitoring and Evaluation

Monitoring and evaluation are areas that clearly need strengthening within the International Federation country office and PMI. The country office will continue to support the PMI headquarters in integrating monitoring and evaluation as a key function of PMI headquarters.

In addition, the International Federation country office will support that through the provision of technical advice for the development of tools and guidelines, the preparation of monitoring plans and, as appropriate, take the lead in monitoring or review teams from PMI to ensure the transfer of skills and knowledge.

Promoting gender equity and diversity

The PMI has a policy on mainstreaming gender into disaster management. The application and monitoring of this policy in disaster management programmes and others will be a focus of secretariat support to PMI during this operating period.

Quality, accountability and learning

As part of the strategic planning process, PMI has begun a process of reflective learning on the tsunami and Java earthquake response programmes in order to build lessons learned and good practices into the next five-year strategic plan. The International Federation will continue to work with PMI to identify the best mechanisms to formalize knowledge sharing within the organization, especially including community and volunteer feedback into organizational learning.

[<Click here for a map of Indonesia>](#)

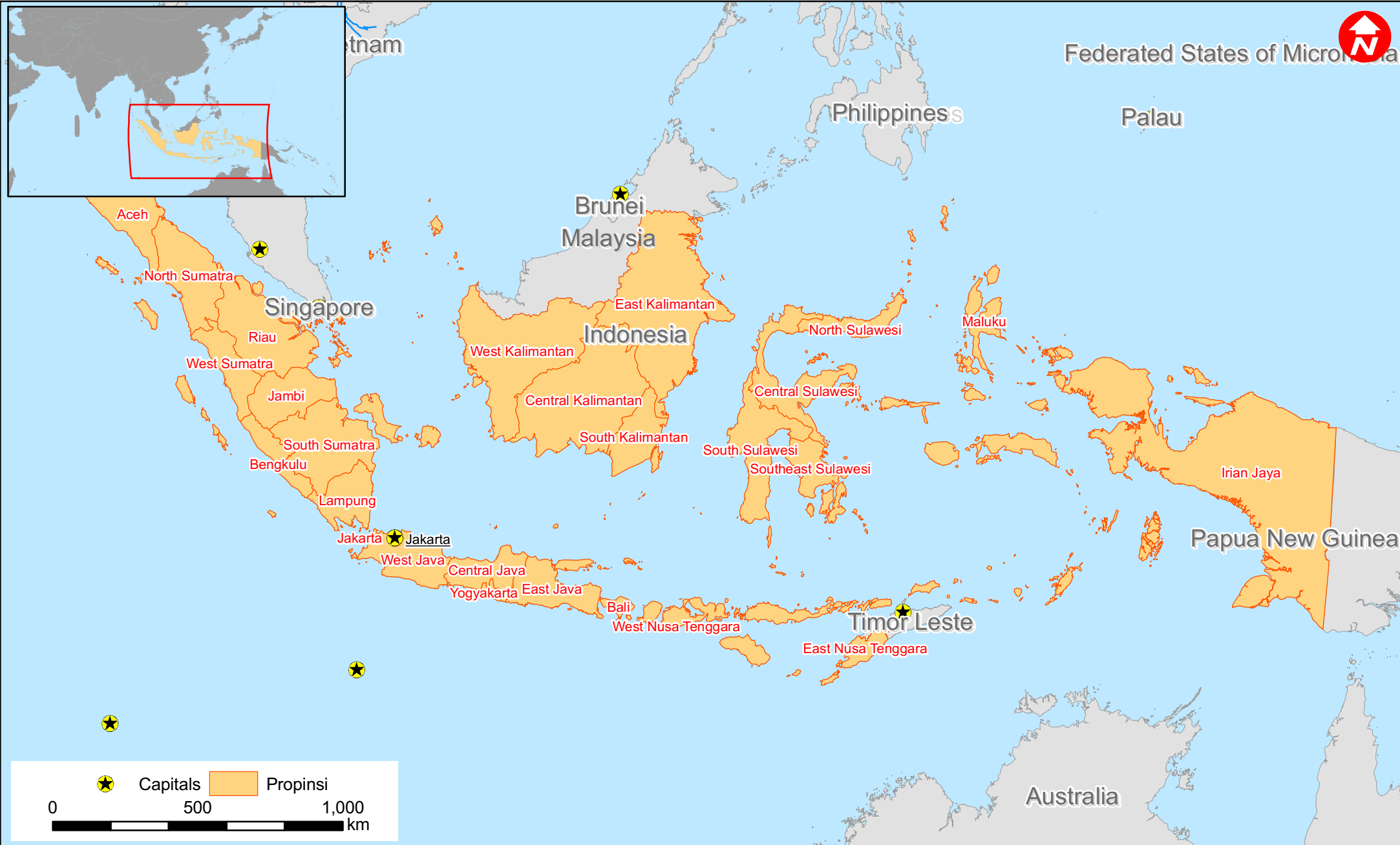
How we work	
<p>The International Federation's activities are aligned with its Global Agenda, which sets out four broad goals to meet the Federation's mission to "improve the lives of vulnerable people by mobilizing the power of humanity".</p>	<p>Global Agenda Goals:</p> <ul style="list-style-type: none">• Reduce the numbers of deaths, injuries and impact from disasters.• Reduce the number of deaths, illnesses and impact from diseases and public health emergencies.• Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability.• Reduce intolerance, discrimination and social exclusion and promote respect for diversity and human dignity.
Contact information	
<ul style="list-style-type: none">• For further information specifically related to this plan, please contact:• Indonesian Red Cross (PMI): Mrs. Aswi R. Nugroho, head of communications division; mobile: +62.811.918.034; telephone: +62.21.799.2325 ext. 221; email: reksaningtyas@yahoo.com• Federation country office, Indonesia: Bob McKerrow, head of country office; email: bob.mckerrow@ifrc.org; mobile: +62.811.824.859, phone: +62.21.7919.1841 (ext. 107); fax: +62.21.7918.0905• Federation Asia-Pacific zone office, Kuala Lumpur; phone +603 92075700; fax: +603 2161 0670<ul style="list-style-type: none">○ Jagan Chapagain, deputy head of zone; email: jagan.chapagain@ifrc.org;○ Penny Elghady, resource mobilization and PMER coordinator; email: penny.elghady@ifrc.orgPlease send pledges of funding to zonerm.asiapacific@ifrc.org• Federation secretariat in Geneva: Marcel Fortier (regional officer for Indonesia/Thailand), email: marcel.fortier@ifrc.org, phone: +41 22 730 4268	

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Indonesia



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Map data sources: ESRI, DEVINFO, GRUMP, Federation