

Mid-Year report

 International Federation
of Red Cross and Red Crescent Societies

Indonesia

Appeal No. MAAID002

29 August 2011

This report covers the period 1 January
to 30 June 2011



A fun walk and bike ride event on 22 May in Jakarta to celebrate World Red Cross and Red Crescent Day was participated by 700 people and has successfully collected 283 blood bags. This event was also to promote the global theme “Find the Volunteer inside You”. (Photo by: Ahmad Husein/IFRC)

In brief

Programme outcome: The purpose of the International Federation of Red Cross and Red Crescent (IFRC) programme is to support the institutional capacity building of Indonesian Red Cross (Palang Merah Indonesia/PMI) and facilitate a coordinated approach from the Red Cross Red Crescent Movement in supporting PMI's programmes and organizational development.

Programme summary: During this period of reporting, there are many significant improvements achieved by PMI. The IFRC country office in Indonesia continues to assist PMI in strengthening its ability to be better prepared in responding more quickly and appropriately in emergency and disaster situations. Ongoing structural improvements, human resource capacity building and contingency measures were focused upon to help improve PMI's capabilities in responding more appropriately to an assortment of disasters and emergencies around the country. PMI continue to work on their strategic plan for the coming four years. Under this new plan, the new board has introduced a number of new initiatives, labelled 'On Top' programmes. The focus for PMI in 2011 is the development of the policy framework on which to base development of nationwide capacity building in emergency response and community-based programme delivery from 2012 onwards.

Financial situation: The total 2011 budget has been revised to CHF 3,488,513 of which coverage is up to 117 per cent. Overall expenditure against the total budget up to end-June 2011 is almost 50 per cent.

[Click here to go directly to the attached financial report.](#)

See also [Indonesia revised country plan 2011](#).

No. of people we have reached: The IFRC Indonesia country office focuses primarily on support to, and capacity building of the PMI national headquarters. This support and capacity building enhances the ability of the PMI headquarters to deliver support, capacity building and coordination to its 33 chapters and more than 400 branches and, in turn, the national society's overall capacity to deliver services to vulnerable people

throughout Indonesia.

Our partners: Some partner national societies remain in Indonesia to support PMI in longer-term community-based programmes, organizational development and more. To date, 13 national societies continue to support PMI.

On behalf of PMI, IFRC would like to thank all partners and donors for their generous and invaluable support of this programme.

Context

The stability of the political and security situation as well as steady economic growth in 2010 continued in the first half of 2011 as did the overall struggle to reduce corruption. There have been no large disasters in this reporting period, though there have been several smaller ones. PMI and other organizations continued their Merapi eruption and Mentawai earthquake and tsunami response programmes, even though for PMI, field implementation was completed by the end of April and a preliminary final report issued on 23 May. However, some time will still be needed to book all expenses and complete the financial reports.

In PMI, a substantial restructuring of the national headquarters was finalized in February, and this included the replacement of the deputy secretary-general position by that of head of office and a consequent reduction in the day-to-day management responsibilities of the secretary-general.

In 2011, the PMI national headquarters' focus is on establishing the structural and policy framework on which to base subsequent development of nationwide capacity to respond to disasters and promote resilience through community-based programmes. PMI continues to implement and develop community-based programmes with the support of 12 partner national societies working in Indonesia. Two other PNS also provide support for PMI but do not have any presence in-country.

Recently emerging themes in this work include the desirability of greater integration and inclusion between sectors and the need for PMI and its partners to make some strategic decisions about future recovery work with particular emphasis on transitional shelter. An additional priority for PMI is the revision of its strategic plan to bring it into line with S2020 and the priorities of the new board and the development of a partnership management strategy to be reflected in a cooperation agreement strategy (CAS).

IFRC completed the administrative closure of the tsunami programme in Aceh in May with the completion of the process of scrapping all remaining M6 trucks, except one that has been donated to the tsunami museum in the city of Banda Aceh.

Progress towards outcomes

Disaster management

Programme purpose

The Indonesian Red Cross (Palang Merah Indonesia/PMI) efficiently delivers emergency response and recovery assistance for communities affected by disaster and assists communities in building resilience and reducing vulnerability to disasters.

The disaster management programme budget is revised to CHF 1,017,146. Based on the recent emergency operations, IFRC has decided to reduce some of programme targets and activities.

Programme component 1: Organizational preparedness and response

Outcome: PMI has an effective mechanism and improved capacity to deliver emergency response.

Achievements

PMI has been involved in various activities during this reporting period. Some activities like the emergency response to the Merapi eruption and Mentawai earthquake and tsunami have continued into 2011. The specific activities funded during this period include the specialized *satgana* (emergency response team)

training and provision of specialized equipment; the support for engagement in provincial and national emergency simulations; a disaster management conference; and the human resource capacity building of the medical action team (MAT). During the recent disaster response effort, PMI was able to show improved ability in quickly mobilizing and responding to the needs of the affected populations. With its newly acquired air and sea assets, PMI has been able to reach distant disaster locations and provide early relief to many of those in need.

Another issue that PMI is focusing on during this reporting period includes the ongoing slash-and-burn activities in Kalimantan and Sumatra. These fires remain one of the top environmental contributors to annual carbon emissions worldwide. PMI seeks to strengthen the ability of its staff and volunteers living in these locations to engage in a dialogue with the communities to reduce the impact of these fires through awareness raising, community mobilization and prevention activities. To engage better in forest fire programming, PMI has held several follow-up training sessions to help build the capacity of their volunteers.

PMI has been able to deliver a number of effective emergency response activities by optimizing its capacity at district level. Since early January, PMI has been involved in 252 emergency responses consisting of relatively small-scale up to medium-size disasters across the country. These disasters were included floods, flash floods, cold lava floods, fire, transportation accident (train and airplane crash), landslide, tsunami, typhoon, tidal wave, and volcano alert (see figure 1 for more details).

In all of these emergency operations, PMI was actively involved in rapid assessment, evacuation of those affected, search and rescue, and provision of first aid services. In some cases, PMI has also contributed

towards relief distribution, field kitchens, and the provision of clean water. All of these emergency response activities were conducted by PMI at district level (branch) with supervision and support from PMI at provincial level. The situation report was prepared by the PMI district and/or province and sent to the disaster management centre at PMI national headquarters for report compilation and further support, as required.

In early March, with support from IFRC, PMI participated in a regional disaster simulation “ASEAN Regional Forum (ARF) Disaster Relief Exercise (Direx)” hosted and co-hosted by the Indonesian and Japanese governments. The venue of the disaster simulation was in Manado, North Sulawesi province with earthquake and tsunami scenarios.

In this event, PMI practiced their emergency operation response skills, especially in water rescue and evacuation, ambulance services, rapid assessment, helicopter operation, the use of *hägglunds* (amphibious vehicle operation), restoring family links, and dead body management. Besides a number of field (land, water, and air) simulations, PMI was also actively involved in a series of tabletop exercises to test and practice the communication and coordination mechanism among stakeholders during emergencies.

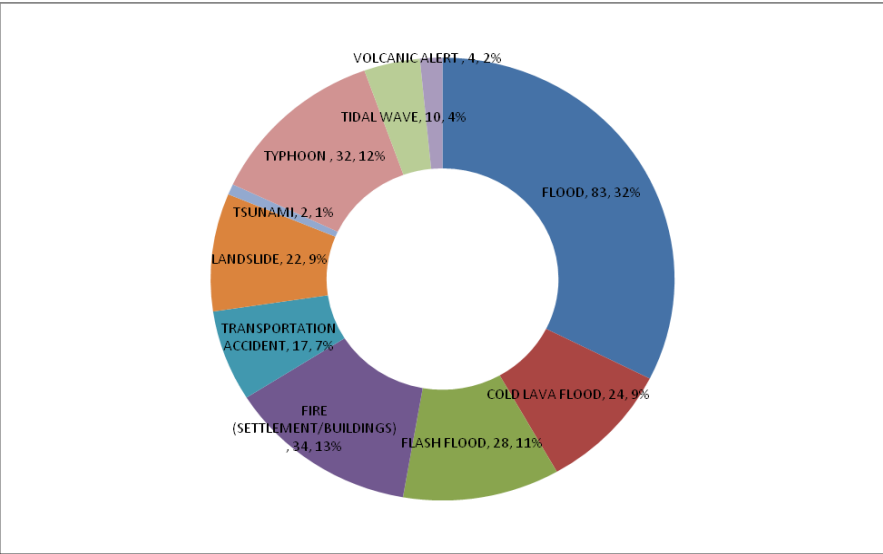


Figure 1: Type and number of emergency operations in which PMI has been involved since January to May 2011



Water rescue simulation during the ASEAN Regional Forum / ARF Disaster Relief Exercise in Manado, North Sulawesi (Photo: Febi Dwirahmadi/IFRC).

Additionally, to support policy implementation of the PMI logistics zoning system in preparation of a reliable and responsive relief and resources network, logistics training for the west region of Indonesia was conducted in March in Padang, West Sumatra province, and the same training for the centre and east regions is being planned for later this year. This west region logistics training covered Aceh, Medan, Pekanbaru, Batam, Pangkal Pinang, Palembang, Bengkulu, Jambi, and Banten province. Each province sent three staff to be trained in logistics and to familiarize them with the PMI logistics zoning system applied in their region.

In relation to the process towards a better disaster management system, according to the national planning workshop, PMI prioritizes the review and finalization of a number of fundamental guidelines and standard operational procedures (SOPs) related to disaster management. Five principle guidelines on disaster response, international assistance mechanisms, logistics, disaster risk reduction and disaster preparedness, and disaster recovery have been finalized and reviewed in workshops conducted in Bedugul, Bali province and Bandung, West Java province in April and May. These workshops allowed PMI to gather representatives from all 33 provinces to provide their inputs and ideas towards the development of PMI guidelines and SOPs.

Aside from these guidelines, PMI also produced the initial draft of SOPs for nine different types of hazard: flood, earthquake, volcano, cold lava flood, landslide, tidal wave, typhoon, wild fire, and tsunami through these workshops. All these guidelines and SOPs will be tested and synchronized together with the development of the PMI national contingency plan.

PMI also held several annual and strategic planning meetings participated by community representatives, along with other disaster management representatives. These meetings aimed at evaluating past activities, providing feedback from the field and using previous lessons to look forward and plan for the coming year.

Currently, PMI is in the process of organizing a series of simulation and field-based exercises to further test and build the competencies of its staff and volunteers in disaster situations. These exercises are to make the training more realistic and allow the participants and trainers to experience the conditions when responding to disasters. This type of training will include other sectors and divisions, which aims at helping PMI to adopt a more integrated approach in its response to emergencies.

Challenges and constraints

In the past, PMI has tended to focus on more generic training and equipment procurement. This has at times led to delays and difficulties in finding the right staff and resources. Discussions with PMI about developing more appropriate and specific training packages have received positive results, and both IFRC and PMI have piloted several specialized training events in forest fires, earthquake search and rescue and flash flood response.

Programme component 2: Community preparedness

Outcome: Communities have a reduced vulnerability to disaster.



Achievements

PMI is actively involved in efforts to increase the capacities of vulnerable communities to cope with disasters and to reduce their vulnerabilities to natural and man-made hazards, including the negative impacts of climate change. The first phase of integrated community-based risk reduction (ICBRR) programme in Jakarta has been completed at four sub-districts in West and East Jakarta: Kedaung Kaliangke, Rawabuaya, Cawang and Bidara Cina sub-districts. These areas are considered as urban slum areas, where approximately 40 thousand people live.

A local community member shows her account book at the “Together be prepared” savings and loan cooperative or *Koperasi Simpan Pinjam (KSP) Siaga Bersama (SIGAB)*. Having a savings account is one of the most effective ways to limit the impact of disasters as people have some funds put away for emergency situations. (Photo by: Febi Dwirahmadi/IFRC).

Based on a recent evaluation, the ICBRR first phase project in Jakarta achieved some significant results as in the improved awareness for disaster risk reduction (DRR) issue, the establishment of community-based action team (CBAT) and their strengthening of capacity. The development of savings and loan cooperative has also indicated very good progress.

The potential future leadership for DRR initiatives in the communities has been shown by CBAT as they have an increasing role in mobilization and coordination during emergency such as doing initial assessments, assisting search and rescue teams, and providing food for survivors. Some of these interventions include serial assessments, risk mapping, planning workshops, and training. These interventions have helped to increase the knowledge and skills of community members who are directly involved in project delivery. The evaluation report also indicates the success of this project as shown from the survey perception result that the community took ownership and participation of the activities. This is to say that the most of the survey respondents perceive that the approaches used were appropriate and have benefited those who have been actively involved during the life of project.

In terms of sustainability, the survey result indicates respondents' high confidence in their ability to continue some of the project initiatives with their own resources. The evaluator also found some evidence showing an effective and functioning early warning system; public awareness of the evacuation routes and evacuation centres; ongoing physical adaptation and behaviour changes related to floods (i.e. type and design of houses, household safety equipment, and boats); and a social system and structure that is responsive to flooding at sub-district level (i.e. warehouses, contingency stock, and response teams). This evidence shows community resilience in these areas has improved.

Currently, the integrated community-based risk reduction (ICBRR) project in Jakarta has entered its second phase. Four new sub-districts were identified as the project areas. For the second phase implementation, some CBAT volunteers from the first phase will be community facilitators to replicate the same project cycle into the new areas. PMI and CBAT are still in the process of conducting vulnerability and capacity analysis in these new areas to have a better picture of the root of the problem and underlying factors that may increase the impact of disasters.

District	Sub-districts
West Jakarta	Semanan
	Kedoya Utara
East Jakarta	Cipinang Melayu
	Cililitan

Table 1. Locations of ICBRR 2nd phase programme

Along with capacity building, resource allocation and training, PMI have been incorporating its lessons and approaches into organizational operating procedures, guidelines and policies. Many of the community-based activities now include these approaches to ensure the learning and experience of PMI becomes more sustainable and etched into everyday life. One key focus area of PMI is on sharing knowledge, building community-based programmes and systems to abate disaster and reduce risk.

PMI continues to focus on its emergency response programmes across the country as a priority. This is also important to ensure the response and early recovery programmes reach men and women equally. Gender concerns are included in the initial assessment process focusing on the access to resources provided through relief response. Furthermore, during early recovery, PMI also ensures the head of household, especially women, is involved in needs identification and decision-making. Gender equality strategies for programme implementation have included recruiting women volunteers, requiring that the finance team for each neighbourhood group have at least one woman officer, and involving women in the process of constructing temporary shelters.

Programme component 3: Coordination
Outcome: PMI's involvement and coordination within and outside the Red Cross Red Crescent Movement is increased.

Achievements

The 8th disaster management meeting in February allowed all representatives of disaster management divisions from 33 provinces to understand better the PMI national disaster management strategies, particularly about the coordination and communication system that follows the application of the logistics/warehouse zoning mechanism. In this national meeting, the coordination between PMI provinces within the same zone was strengthened. Strengthening coordination and communication has proven very

crucial, as based on experience; coordination and communication are the key elements of a responsive and effective disaster response operation.

To harmonize and synchronize the different programmes, PMI recently conducted a community-based review workshop in April where all representatives from eight different community-based programmes, including ICBRR, came to share, discuss, strengthen the coordination mechanism and improve synergies between the different community-based programmes.

PMI relevance as a key player in the role of humanitarian assistance in Indonesia has continued to grow with the election of the new high-profile chairman of PMI. This, along with the appointment of many high-profile national board members, provides a strong platform for generating significant relationships between PMI and the corporate sector with consequent improvements in capacity to generate corporate funding for both emergency responses and non-emergency programmes.

PMI has also become a key participant in Indonesian government emergency programmes and exercises by providing a valuable resource of assets and human resources, particularly alongside the national disaster management agency (Badan National Penanggulangan Bencana/BNPB).

PMI continued to be invited to several national and international forums and events to share its lessons and experience with other organizations and government groups such as the Asian Ministerial Conference on Disaster Risk Reduction (DRR) in the Republic of Korea; the Red Cross Red Crescent Conference in China; and in Indonesia, the Climate Change Conference and the Humanitarian Expo in Jakarta.

PMI continues to be actively involved in the national platform for DRR, which comprises government agencies, NGOs, the media, private companies and universities. Under this platform, representatives from PMI are now advisors on DRR issues and are part of the Hyogo Framework for Action (HFA) reporting team. Through its involvement, PMI continues to be challenged and questioned about its activities and agendas.

PMI has received recognition from the Government of Indonesia as an organization that has experiences and considerable resources that should be utilized in ongoing preparedness, response, community-based early warning and community-based disaster preparedness activities. In addition, PMI has a large network for ongoing implementation of these kinds of community-based disaster preparedness initiatives. However, as dealing with the community in different places requires different approaches, PMI still requires more expertise and assistance in further evaluating these programmes to identify strengths and areas for improvement.

Health and care

Programme purpose
The Indonesian Red Cross (Palang Merah Indonesia/PMI) efficiently delivers a public health emergency response for communities affected by disaster, and assists communities in building resilience and reducing vulnerability to disease.

The health and care programme budget is CHF 542,915. with additional funds received from the surplus of the tsunami appeal.

Programme component 1: Emergency health
Outcome 1: PMI has an effective mechanism and improved capacity to deliver response during health emergencies.
Outcome 2: PMI has a contingency plan and action when new/novel and emerging disease (pandemic preparedness) happened.

Achievements

In the first semester of 2011, PMI has been focusing to the improvement and consolidation of its human resource capacity within the headquarters. In the health and social division of PMI national headquarters, this process has taken considerable time to arrange as skilled and qualified staff needed to be identified and positioned within the new structure. By February, the health and social service division structure was finalized and comprised three sub-divisions (health in emergency including water and sanitation, first aid and ambulance service, community health, and social service division). In total, there are 17 staff, including a water and sanitation emergency response team of seven people located at the water and sanitation warehouse facility in Bandung, two hours' driving distance from Jakarta. Under this new structure, water and

sanitation components are now more predominantly included in strategic planning discussions of the National Society.

During the reporting period, IFRC has continued to work with PMI to better enhance its volunteer capacity to better prepare and respond to specific disasters. Specialist emergency volunteer training and provision of specialized equipment has been carried out in order to address some key identified capacity gaps and resource allocation in multi-hazard disasters, as well as specific volcanic, flood and earthquake emergencies. Ongoing capacity building of the medical action teams has also been a key activity during this period.

Over the past six months, IFRC has also encouraged more dynamic participation of PMI personnel at both national and regional forums and training. Staff have been involved in Asia Pacific planning meetings, and the facilitation and assistance at several technical conferences, which included dengue, climate change, disaster risk reduction, emergency public health, HIV, and other health-related programmes.

PMI is also a key and active participant in the Asia Europe Foundation (ASEF) multi-sector pandemic preparedness discussions held in early June. Information gathered in these discussions has assisted PMI in the preparation of its national contingency planning arrangements, business continuity plan and country plan in relation to preparedness and response to potential emergency health and pandemic infectious disease concerns.

Since the commencement of the Merapi and Mentawai emergency operation on 8 November 2010, PMI medical action teams provided basic health services, which were not covered by the local health authorities (Puskesmas). The support from PMI towards this programme has continued through the first half of 2011 with the PMI field teams reaching more than 1,600 people with health and care services in 32 delivery points. The team also assisted local health authorities in delivering basic health services to people affected by cold lava floods resulting from monsoon rains.

PMI staff also trained health volunteers to carry out socialization and training of community cadres in high-risk target areas in order to help reduce the potential for infectious disease outbreak or illness from water-borne diseases. PMI also provided psychosocial support services to beneficiaries at 39 points. PMI have also successfully provided access to safe water to disaster-affected families in the Wasior, Merapi and Mentawai emergency operations. In Central Java alone, PMI was able to distribute 51,602,000 litres of safe water. Trained PMI volunteers have also been mobilized to help clean up the debris and rubble from these disasters. For more detailed information of this emergency operation, please refer [here](#).

During this reporting period, IFRC has also been working with PMI to develop long-term work plans that will become an integral part of their four-year planning process.

PMI continues to work on their strategic plan for the coming four years. Under this new plan, the new board has introduced a number of new initiatives, labelled 'On Top' programmes. These include improving non-remunerated voluntary blood donations (NRVBD); the construction of a blood bag factory and later plasma/fractionalization factories; first aid training for public transport drivers and the distribution of spectacles to the poor. In addition, other green initiatives are also in place. A healthy environment programme based on the large-scale distribution of hoes and shovels has also been introduced.

Many of the staff involved in PMI 2010 health programming and capacity building activities were deployed in ongoing emergencies and training programmes during 2011. In these programmes, staff have the opportunity to share lessons and experiences with other chapters around the country. A recent example of this includes the organization and running of a health workshop and a technical training programme. Other training sessions have included 'Clean and Green', an environmental awareness-to-action programme; dengue and climate change; capacity building for the implementation and approaches to assessments; and a training-of-trainers programme to assist senior-level branch staff to train volunteers to better understand emergency health and disaster management steps and challenges.

Constraints or Challenges

One of the challenges faced during the Merapi operation was information flow. Since Merapi was a cross-border operation (involving two provinces), most of the PMI staff and volunteers in both of these locations were constantly in the field and it proved to be a major challenge to set up an effective system to get data and information about the response in an accurate and timely manner. As a result of this, the PMI national headquarters sent some of its staff to the field to support the branch in improving the flow of information.

Programme component 2: Community-based health and first aid

Outcome: Communities have an increased knowledge of potential risks to health outbreak (e.g. malaria, dengue, diarrhoea) and have adopted appropriate behaviour to reduce risks.

Achievements

PMI has been able to work with six sub-districts of Central and East Jakarta: Rawasari, Cempaka Putih Timur, Cempaka Putih Barat, Cakung Timur, Jatinegara and Rawaterate, to identify health risks and vulnerabilities of a total of 94,348 households and 236,947 individuals. Through this programme, community members were trained to understand basic first aid techniques and safe health approaches. A baseline survey was also conducted to provide a reliable benchmark for evaluation purposes at a later stage. This survey is being done in coordination and collaboration with Climate Change Research Centre from the University of Indonesia. Similarly, this team is also involved in developing a training package along with information, education and communication materials to assist volunteers to disseminate best health practices and dengue awareness among vulnerable communities.

Following the recent launch of the planning, monitoring, evaluation and reporting (PMER) portion of the CBHFA¹ toolkit, IFRC is supporting PMI to adapt its approaches to be more integrated and inclusive. The original English version is now translated into the local language, and as a start, will be tested and adapted to PMI's current CBHFA projects, supported by Spanish Red Cross and American Red Cross until end of 2012 in Kalimantan and Central Java. The adaptation process will benefit PMI and other national societies working in the Southeast Asia region and Asia Pacific zone as it will be applied in the upcoming meetings and workshops, and in PMI community-based health programmes.

A new HIV programme will commence soon in three branches of the Bali chapter. This programme will be run for three years, and is supported by the Hong Kong branch of Red Cross Society of China. A needs and capacity assessment have already been conducted and currently the project document is being finalized. A water and sanitation project is soon to be implemented in Papua, supported by Netherlands Red Cross. As recommended at the health national coordination meeting (RAKORNAS) 2010, the PMI CBHFA framework will be used as the entry point for every health-related community empowerment project across the country. Additionally, Netherlands Red Cross is ending their support for PMI CBHFA and water and sanitation project in Indramayu, West Java this year.

IFRC has provided support to fund the PMI national headquarters water and sanitation officer to attend the Asia Pacific water and sanitation planning meetings held in May. This meeting was mainly aimed to share good practice among the national societies as well as update information on new and relevant water and sanitation developments. After the Asia Pacific meetings, a PMI national water and sanitation workshop was held to evaluate and develop a longer-term PMI water and sanitation plan.

Using their domestic funds, PMI launched the road safety programme in Jakarta with a focus for advocating and conducting the First Aid training to bus drivers, and bus crews. The road safety campaign is also being prepared for implementation in the areas outside of Jakarta, such as Surabaya, Bogor, Bandung, Medan, Solo, Semarang, Makasar, Manado, Yogya and Padang where the road accident frequencies are high. The road safety campaign is in collaboration with three government offices: the police, the Ministry of Transportation and the Ministry of Health.



A volunteer gives leaflets to people during a road safety campaign in Jakarta (Photo: Dr. Lilis Wiiava/PMI)

In the next semester, IFRC will assist the PMI to review their first aid manual and arrange a pool of first aid trainers to assist in working with community groups on understanding first aid. This activity will also help to improve PMI standard operating procedures (SOPs), implementation guidelines (Juklak) and technical guidelines (Juknis), and to support community empowerment activities, which include water and sanitation, and safe hygiene practices.

Constraints or challenges

Obtaining reliable data in the target areas of climate change and dengue project were delaying the project implementation. Jakarta is an urban area where people are highly mobile, making it difficult for the government to obtain more reliable data.

¹ CBHFA: Community-based health and first aid

Programme component 3: Voluntary, non-remunerated blood donor recruitment

Outcome: Increased supply of safe blood from voluntary, non-remunerated blood donors

Achievements

As reported at the annual board member meeting (MUKERNAS) in February 2011, the PMI blood transfusion centre/unit is now able to support 70 per cent of total blood needs in 520 districts/cities of Indonesia. PMI now has one blood transfusion centre located in Jakarta and 211 blood transfusion units located across Indonesia. So far, 82.9 per cent of the donors are voluntary non-remunerated blood donors (VNRBD), and PMI are looking to achieve to 100 per cent of VNRBD. PMI is working on developing a better strategy to achieve this target and has included a blood donor recruitment sub-division located in its blood transfusion centre. IFRC continues to support PMI on strategy development and planning in this area.

Externally, PMI has now received a clear mandate from the government to run its blood transfusion service and to mobilize blood donors under a government decree issued last February. This decree now helps PMI to seek a more viable and sustainable source of funds to increase its capacity in this field.

Programme component 4: Partnership and networking

Outcome: PMI efficiently exchanges information and mobilizes resources across all levels and with other stakeholders.

Achievements

PMI has provided training for more than 30 community members to be Red Cross community-based action teams (CBAT) in North Jakarta. The CBAT members, of whom more than 50 per cent are women, promotes awareness among their neighbours in understanding risk and vulnerability to hazards within their own areas. For example, people are now aware that throwing garbage into the river is bad for the environment and how to save their families if flooding takes place. Some members of CBAT are taking leadership in coordination with village office about aspects of emergency preparedness and response.

In addition, there was a participatory video activity, which is an interactive and participatory tool that allows communities to assess risks in their living environment. Communities are taught the basic techniques of using video cameras and, in small groups, prepare story ideas, shoot and direct their own community films. The women and children were also involved in activities related to the risk reduction such as composting and utilization of waste into more useful products in their village.

There are already indicators that the PMI training and capacity building programmes have benefited both PMI and the communities. A good example of PMI's ability to transfer its learning and knowledge into community systems can be seen during the recent eruption of the Merapi volcano. In Wonodoyo village, Boyolali district, Central Java province, community (CBAT) volunteers were able to immediately evacuate 749 families to a safer area just before the hot clouds and ash rain from Mount Merapi engulfed their village on 25 October 2010.

Many of the PMI staff who had already received capacity building training (under *Satgana* and MAT) were able to spontaneously respond and organize village evacuations and relief activities. Contingency stocks were sourced and distributed, and radio communication systems that were already set up were used to transmit urgent and vital information about the evolving situation around the volcano. This system along with the mobilization of the additional PMI staff contributed to minimal casualties or injuries in many villages where PMI was active while several other surrounding villages that were not part of the system suffered loss.

Another example was recently observed when a major flood struck the city of Jakarta, inundating most of the city with particular severity in East Jakarta. PMI volunteers along with community volunteers assisted the local authorities in Cawang to evacuate people and organize camps for those displaced. Again, no casualties and injuries were reported from this disaster event.

For their domestic road safety campaign, PMI has been able to collaborate with the Ministry of Health, Ministry of Transportation and the Police Department, and is now in the process of encouraging its chapters and branches to initiate a similar relationship.

Internally, the technical working group (TWG) for health and water and sanitation began in January of this year. This TWG is focused on sharing information, updating progress and identifying key issues and actions needed to solve some of the technical concerns in health and water and sanitation. The TWG coordination mechanism includes the partner national societies, ICRC and IFRC participants who focus together to resolve

specific issues related to health, and water and sanitation technical areas and also provide advice and guidance to make better informed operational decisions.

Organizational development/capacity building

Programme purpose

The Indonesian Red Cross (Palang Merah Indonesia/PMI) is a respected, efficient partner of community, civil society and the government in Indonesia in responding to the needs of the vulnerable.

The organizational development/capacity building programme budget is revised to CHF 1,868,812. The new budget includes funding for second phase of Danish Red Cross supported the integrated community-based risk reduction (ICBRR) programme and the remainder of the West Java earthquake response programme funded from the annual appeal.

Programme component 1: National society organizational development process

Outcome: Modernization of PMI headquarters core management competencies

Achievements

The process of transition following the appointment of a new national board described in 2010 reports continued into the first half of 2011. The focus for PMI in 2011 is the development of the policy framework on which to base development of nationwide capacity building in emergency response and community-based programme delivery from 2012 onwards. IFRC has provided technical and financial support for the drafting of 11 organizational standard operating procedures (SOPs), with the participation of more than half of PMI's 33 chapters, and this will be followed by the development of technical/implementation guidelines where necessary. This process began with a national workshop in June at which participants identified which technical guidelines need to be produced, and subsequently, established drafting committees. Their work will continue for most of the rest of 2011 and it is anticipated that several other workshops will be held.

IFRC is also working with colleagues from several partner national societies on the production of finance technical guidelines to promote a more effective and more standardized finance interface between PMI and its Movement partners as well as improved financial reporting by PMI's chapters and branches. It is hoped that a required organizational needs analysis in the second half of this year as the foundation for development of a longer-term financial management development plan will take place.

Programme component 2: National society leadership development

Outcome 1: Greater coordination between PMI headquarters and chapter

Outcome 2: Efficient communications and knowledge sharing with stakeholders

Achievements

IFRC provided technical and financial support for a national volunteer and youth management workshop at the end of May to synchronize understanding on several key volunteer management issues, including the form and functions of youth and volunteer forums. IFRC also provided some technical support to the development of a Norwegian Red Cross-supported *youth as agents of behaviour change (YABC)* programme planned for implementation in the provinces of Central and East Java. The key element of IFRC's work in this reporting period has been continued advocacy and support for a more integrated approach to development of PMI organizational development and capacity building plans with PMI leadership and senior management as well as ongoing coordination of partner national society support for PMI programmes.

The second and final phase of the Danish Red Cross-supported ICBRR programme in Central Java and Yogyakarta provinces (October 2010 – March 2011), which was financed from IFRC's annual appeal, ended in March. The final evaluation, led by an external consultant with team members from Danish Red Cross and PMI, was undertaken in March. The main findings and recommendations are paraphrased below:

<p>Findings</p> <ul style="list-style-type: none"> • The programme highlights the importance of PMI in delivering risk reduction activities to communities since its grassroots networks of volunteers and experience in disaster response have positioned PMI as a leader in disaster management and a valuable member of the national platform for disaster risk reduction • While it is not possible to assess overall impact in terms of reduced vulnerability, the programme achieved its two intermediate objectives by increasing the capacity of communities to respond to and mitigate the effects of hazards and PMI's capacity to provide timely assistance to communities affected by hazards. At the same time, improved community self-confidence and sense of togetherness, both criteria for resilience, have improved and the concrete example of safe evacuation of one village affected by the 2010 eruption of Mount Merapi, organized by village volunteers trained by the programme, is an indicator of the achievement of the overall objective • Prudent use of technical input in finalizing mitigation measures and partnerships with local government ensured cost-effective delivery of a successful programme • Communities felt that the programme had the flexibility to meet their identified hazard reduction mitigation needs. At the same time, social cohesion in target communities has significantly improved and this is a key programme achievement • PMI shows a clear commitment to ICBRR programmes but still faces challenges in achieving integrated community-based programming • The programme has improved PMI's profile in target communities and has increased capacity and desire to continue some elements of the programme • 'Sub-contracting' of the programme by IFRC to Danish Red Cross was successful because of Danish Red Cross experience in this area and its frank and open relationship with PMI. 	<p>Recommendations</p> <ul style="list-style-type: none"> • PMI should continue and develop its community-based programming • The shared components of ICBRR and CBHFA should be merged to solve problems at community level • Initial programme design should involve a multi-sector team with a non-sector specific team leader • PMI should invest in a programme coordinator position which is positioned to oversee the divisions to identify programme opportunities and facilitate integrated programme design and follow up multi-level accountabilities for programme delivery • Language and processes in training manuals should be simplified • One or two case studies should be developed to fine-tune design and showcase PMI ICBRR activities • Greater elaboration on the role of government relations in ICBRR programmes and improved stakeholder management skills in PMI • PMI should consider expanding its training capacities in ICBRR to other organizations belonging to the national platform <p>Conclusion</p> <p>PMI has invested heavily over the last 10 years in community-based risk reduction activities, evolving from community-based disaster preparedness (CBDP) to the current ICBRR programme. An important contributor to the Government of Indonesia's report on the Hyogo Framework for Action and an active participant in the National Platform for Disaster Risk Reduction, PMI is a respected organization in this field.</p> <p>The partnership between Danish Red Cross and PMI in delivering the ICBRR programme in Yogyakarta and Central Java has been successful, yielding a high sense of satisfaction and decreased vulnerability among community members.</p> <p>Additionally, PMI offices in both provinces and districts have reported improved capacities and an enthusiasm to adopt this programme or a version of it to take to new villages.</p> <p>ICBRR remains a flagship programme for PMI and notwithstanding minor evolutionary changes to programme design and implementation should remain a core part of PMI activities into the future.</p>
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Constraints or Challenges

Ongoing restructuring and significant staff movements continued to constrain longer-term organizational development and capacity building planning and work. However, there are now reasons for more optimism in this regard given the new head of office position and the formation of a planning bureau both of which can provide more of the organizational overview needed for organizational development and capacity building planning.

Principles and values

Programme purpose

Indonesian Red Cross (Palang Merah Indonesia/PMI) is recognized as a reliable, trustworthy and impartial source of humanitarian assistance to vulnerable people.

The principles and values programme budget is CHF 59,640.

Programme component 1: Promotion of humanitarian principles and values

Outcome: Increased internal and external understanding on the Red Cross Red Crescent Fundamental Principles and humanitarian values, as well as PMI's role.

Achievements

IFRC continued to work together with PMI and ICRC to disseminate the Fundamental Principles and humanitarian values to Red Cross volunteers and staff in Indonesia. In March 2011, PMI Nusa Tenggara Barat (NTB) chapter supported by Hong Kong branch of Red Cross Society of China conducted training-of-trainers for 23 staff and volunteers in NTB province. The training-of-trainers was also attended by a newly recruited staff from a partner national society. Based on the 'pre' and 'post' test, participants have 36.6 per cent increase of their knowledge on Red Cross Red Crescent values and principles. Participants also practiced their knowledge by disseminating some topics of Fundamental Principles and international humanitarian law to different audiences including local Red Cross volunteer corps and government services.

In this reporting period, IFRC also participated in the PMI dissemination strategy development workshop supported by ICRC in Jakarta in April. The workshop was attended by representatives from 15 selected chapters that vulnerable to conflict and disasters. IFRC had the opportunity to deliver a presentation on the global update of the Fundamental Principles and humanitarian values programme and some good practices in various national societies. As the result of the workshop, a draft of PMI dissemination strategy 2011-2014 is now available.

With support from IFRC and ICRC, PMI celebrated World Red Cross Red Crescent Day by organizing a fun walk and bike ride event on 22 May. Due to the permit issue related to the ASEAN Summit in Jakarta, the event was changed from the original schedule of 8 May. Based on the global theme "Find the Volunteer inside You", more than 700 participants involved in the parade and garnered the attention of thousands of people and several national media.

PMI also conducted a first aid demonstration and clinic in collaboration with the Jakarta "Bike to Work" community. The National Society was also supported by the Cola-Cola Company in organizing a blood donation day for the general public in Jakarta, which successfully collected 283 blood bags.

PMI is now finalizing the production of radio public service announcements (PSA) on the theme of volunteers, that can be used during several International Year of Volunteers events in 2011.

Programme component 2: Anti-discrimination and violence prevention/reduction programmes

Outcome: Vulnerable people are empowered with enhanced abilities to combat discrimination, intolerance and violence.

Achievements

With support of Norwegian Red Cross, PMI is initiating the "youth as agents of behaviour change" (YABC) programme in four pilot branches in Indonesia. On 10-12 May, PMI organized a workshop in Semarang, Central Java to develop a plan of action for the YABC programme. Representatives of Semarang and Solo branches in Central Java and from Malang and Nganjuk branches in East Java participated in the workshop.

IFRC supported the head of PMI's dissemination sub-division to attend and participate in the workshop. IFRC also delivered a presentation on the Fundamental Principles and anti-discrimination and anti-violence communications. IFRC also shared with participants some examples and updates on anti-violence and anti-

discrimination activities undertaken by national societies around the world. All branches expressed their interest to involve IFRC and ICRC to participate in several activities at district and provincial level.

Constraints or Challenges

Changes continue in the organizational structure of PMI. The communications division is now becoming more a public relations bureau with a new head of bureau from a non-communications background. The dissemination sub-division has moved out from communications, and currently operates under the organizational development division.

While IFRC keeps working to assist the new head of bureau to be familiar with communications-related work, especially on the work mechanism between PMI and IFRC, PMI recently decided to make another change after three months. There was an exchange between the head of public relations bureau and resource mobilization division. The new head of public relations bureau is now the head of resource mobilization, while the previous head of resource mobilization division will now handle the public relations bureau. In the short- to middle-term, these changes will affect IFRC's approach to PMI and the implementation of all designed activities. IFRC has held a coordination meeting with both heads of division/bureau along with staff to ensure transition is smooth.

IFRC has terminated the support to PMI's media monitoring programme. PMI is currently in the process to continue the programme including seeking alternative support from partner national societies. IFRC has sent letter to the secretary-general explaining the Federation's commitment to keep assisting PMI in this area by providing expertise in media monitoring data result analysis.

Working in partnership

Partly as a result of the December 2004 tsunami and several subsequent large disasters, PMI hosts an abnormally large number of partner national societies: currently 13. This makes coordination inherently challenging for all concerned but especially so for PMI (and IFRC). While this reporting period has seen a wide range of feedback from various partner national societies concerning the coordination role of IFRC, real shortcomings in coordination cannot be overcome solely by IFRC since coordination needs to be managed within the framework of a coherent national society strategic plan and a partnership management strategy, neither of which is yet in place. Initial plans for addressing these more fundamental issues and developing a new cooperation agreement strategy (CAS) to replace the one that expired at the end of 2009 are being developed for implementation in the second half of this year.

During the reporting period, developments took place as follow:

- Programme development of community-based risk reduction programmes supported by American Red Cross (Aceh province), Belgian Red Cross (South Kalimantan), Canadian Red Cross (West Sumatra, Jambi and Lampung), Danish Red Cross (East Java), Norwegian Red Cross (East Java and North Maluku), and Spanish Red Cross (Central Kalimantan) has either begun or continued from 2010 into 2011.
- American Red Cross and Spanish Red Cross began work on developing an integrated risk reduction and community-based health and first aid (CBHFA) programme in Wonogiri district in Central Java.
- Hong Kong branch of Red Cross Society of China and PMI are also developing an HIV programme to be implemented in Bali.
- Australian Red Cross and French Red Cross recently secured a grant of AUD 4.4 million from the Australia-Indonesia facility for disaster reduction for a two-and-a-half-year programme on strengthened disaster coordination and response preparedness in three provinces in eastern Indonesia.
- Netherlands Red Cross is planning a small water and sanitation project in Papua.
- Norwegian Red Cross is working with PMI on the development of a Youth as Agents of Behavioural Change programme in the provinces of Central and East Java.
- Monaco Red Cross has agreed to fund a six-month water, sanitation and hygiene project in the Mentawai Islands.

Meanwhile, implementation of other programmes supported by partner national societies begun in 2010 or earlier continued in this reporting period: Australian Red Cross supported ambulance and blood projects in Aceh and an organizational development programme in NTT with support from PMI's Bali chapter; Danish Red Cross supported ICBRR programmes in West and Southeast Sulawesi, and in North Sulawesi with the addition of an intern delegate from Japanese Red Cross Society; and, Hong Kong branch of Red Cross Society of China supported ICBRR in NTB.

The most recent phase of Spanish Red Cross support for development of PMI water and sanitation emergency response units was completed in May and an evaluation of this programme from its inception in 2005 was undertaken immediately. The findings are generally positive but suggest that while capacity for provision of safe water is excellent, there is less capacity for sanitation, software or hardware. However, while further Spanish Red Cross support in this area is possible, its nature is yet to be agreed.

PMI continued its active participation in the Indonesian National Platform for Risk Reduction highlighted by its participation in an international simulation conducted in Manado in March.

Contributing to longer-term impact

Following the mid-term review of the West Sumatra earthquake response programme described in the 2010 report, a similar review of the West Java earthquake response programme was completed at the end of 2010. The findings and recommendations were shared with PMI and Movement partners at a workshop in January and given the many similarities in the findings of the two mid-term reviews, an additional 'Partners in Recovery' workshop was organized in February. This workshop aimed at sharing findings and recommendations and to start a process of looking at how PMI and its Movement partners want to work in the areas of early recovery and transitional shelter in the future and the consequences for how such programmes would be designed and managed. This has already resulted in a series of interesting discussions and the drafting of PMI policies for recovery and for international cooperation in emergency response programmes.

A further evaluation of the recently closed Merapi eruption and Mentawai earthquake and tsunami programme is being planned but this time, with greater focus on PMI's internal management of these programmes and lessons that could be learnt. It is hoped that this will also be an opportunity for PMI to take a more significant role in the planning and implementation of the evaluation to develop internal evaluation capacity.

A number of recent programme evaluations have identified significant gender imbalance among PMI volunteers in emergency response programmes. While more than 50 per cent of PMI youth members (PMR) are women, only 10 per cent of approximately 310 volunteers who attended water and sanitation volunteer training courses in the last few years were women.

The mid-term review of the West Java earthquake response programme found the gender balance of the volunteers implementing the transitional shelter programme 'strikingly uneven' with the small number of women volunteers generally assigned to administrative or 'traditionally women's tasks'. The PMI disaster management division has noted these findings and their work this year on drafting organizational policies and technical guidelines, includes a revision of their existing *gender in emergency response* programmes policy.

Looking ahead

Key issues emerging and needing to be prioritized in the second half of the year include the need for a revised PMI strategic plan which reflects PMI's real priorities and strategic aims as a framework for more integrated operational planning led and coordinated by the newly established planning bureau. This should then inform development of a PMI partnership management strategy designed to optimize the use of the considerable Movement partner presence and resources for the achievement of PMI's organizational development and capacity building objectives as well as those for service delivery. The need for these steps is increasingly recognized by PMI management but no one is under the illusion that these will be easy or quick processes.

How we work

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

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.

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.

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[<financial report below; click here to return to title page>](#)

International Federation of Red Cross and Red Crescent Societies

MAAID002 - Indonesia

Mid-year Report 2011

Selected Parameters	
Reporting Timeframe	2011/1-2011/6
Budget Timeframe	2011/1-2011/12
Appeal	MAAID002
Budget	APPEAL

All figures are in Swiss Francs (CHF)

I. Consolidated Response to Appeal

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL
A. Budget	1,017,146	542,915	1,868,812	59,640	0	3,488,513
B. Opening Balance	922,146	566,964	1,804,148	59,640	0	3,352,898
Income						
Cash contributions						
<i>Australian Government</i>	117,427					117,427
<i>China Red Cross, Hong Kong branch</i>		98,238	10,302			108,539
<i>Japanese Red Cross</i>	103,066		108,630			211,696
<i>Netherlands Red Cross (from Rockefeller Foundation)</i>		-5,559				-5,559
<i>Taiwan Red Cross Organisation</i>	200,000	93,824				293,824
C1. Cash contributions	420,494	186,503	118,932			725,928
C. Total Income = SUM(C1..C4)	420,494	186,503	118,932			725,928
D. Total Funding = B + C	1,342,639	753,466	1,923,080	59,640	0	4,078,826
Appeal Coverage	132%	139%	103%	100%	#DIV/0	117%

II. Balance of Funds

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL
B. Opening Balance	922,146	566,964	1,804,148	59,640	0	3,352,898
C. Income	420,494	186,503	118,932			725,928
E. Expenditure	-486,923	-82,816	-1,154,186	-1,126		-1,725,051
F. Closing Balance = (B + C + E)	855,716	670,651	768,894	58,514	0	2,353,775

International Federation of Red Cross and Red Crescent Societies

MAAID002 - Indonesia

Mid-year Report 2011

Selected Parameters	
Reporting Timeframe	2011/1-2011/6
Budget Timeframe	2011/1-2011/12
Appeal	MAAID002
Budget	APPEAL

All figures are in Swiss Francs (CHF)

III. Budget Analysis / Breakdown of Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination		
A		B					A - B	
BUDGET (C)		1,017,146	542,915	1,868,812	59,640	0	3,488,513	
Relief items, Construction, Supplies								
Shelter - Transitional	25,001							25,001
Construction - Facilities	60,000							60,000
Medical & First Aid	1,083	283	172				456	628
Teaching Materials	250							250
Utensils & Tools	4,000							4,000
Other Supplies & Services	35,000	33					33	34,967
Total Relief items, Construction, Supplies	125,335	316	172				488	124,847
Land, vehicles & equipment								
Computers & Telecom	28,500	21,251					21,251	7,249
Office & Household Equipment	600							600
Total Land, vehicles & equipment	29,100	21,251					21,251	7,849
Logistics, Transport & Storage								
Storage	20,010			10			10	20,000
Distribution & Monitoring	46,138	1,187		2,127			3,314	42,824
Transport & Vehicle Costs	25,364	7,192		4,136			11,327	14,037
Total Logistics, Transport & Storage	91,512	8,379		6,273			14,651	76,861
Personnel								
International Staff	450,437	79,297	6,529	93,627			179,454	270,983
National Staff	232,843	58,394	47,455	-2,700			103,149	129,694
National Society Staff	10,600		1,767	7,717			9,483	1,117
Volunteers				7,086			7,086	-7,086
Total Personnel	693,879	137,691	55,751	105,730			299,172	394,707
Consultants & Professional Fees								
Consultants	192,499							192,499
Total Consultants & Professional Fees	192,499							192,499
Workshops & Training								
Workshops & Training	853,082	75,279	1,692	32,000	335		109,306	743,775
Total Workshops & Training	853,082	75,279	1,692	32,000	335		109,306	743,775
General Expenditure								
Travel	79,747	20,118	1,877	3,047	722		25,764	53,983
Information & Public Relation	226,355	1,770	2,335	883			4,988	221,368
Office Costs	9,292	1,363	2,849	41			4,253	5,039
Communications	26,629	2,875	843	2,121			5,840	20,790
Financial Charges	3,222	8,490	648	3,422			12,560	-9,338
Total General Expenditure	345,246	34,616	8,552	9,514	722		53,406	291,841
Depreciation								
Depreciation	0							0
Total Depreciation	0							0
Contributions & Transfers								
Cash Transfers National Societies	944,554	45,553		899,001			944,554	0
Total Contributions & Transfers	944,554	45,553		899,001			944,554	0
Operational Provisions								
Operational Provisions		132,681	10,881	31,224			174,786	-174,786
Total Operational Provisions		132,681	10,881	31,224			174,786	-174,786
Indirect Costs								
Programme & Service Support	213,307	29,625	5,008	70,443	69		105,145	108,162
Total Indirect Costs	213,307	29,625	5,008	70,443	69		105,145	108,162
Pledge Specific Costs								
Earmarking Fee		1,032	59				1,091	-1,091

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III. Budget Analysis / Breakdown of Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination		
A							B	A - B
BUDGET (C)		1,017,146	542,915	1,868,812	59,640	0	3,488,513	
Reporting Fees		500	700				1,200	-1,200
Total Pledge Specific Costs		1,532	759				2,291	-2,291
TOTAL EXPENDITURE (D)	3,488,513	486,923	82,816	1,154,186	1,126		1,725,051	1,763,462
VARIANCE (C - D)		530,223	460,099	714,626	58,514	0	1,763,462	