INDONESIA CASE STUDY
“FASTER RESPONSE CLOSER TO COMMUNITIES”
A case study of longitudinal investments in National Society Development and localization of humanitarian action
Background

In 2016 the World Humanitarian Summit’s Grand Bargain Commitments led to the establishment of a “Localisation Workstream” which set out to “learn from successful localisation practices around the world”. Its main goal was to find new ways of expanding the “localization of humanitarian action” through processes that:

- Strengthen locally-led, accountable and principled humanitarian action
- Reset the power balances between local and international actors that empower local humanitarian actors to lead and deliver relevant, sustainable local services
- Use a more strategic blend of local to international resources to create efficiencies, speed of response, and promote more effective local collaborations for collective impact.

This Case Study was commissioned by the International Federation of Red Cross and Red Crescent Societies (IFRC) as a contribution to the Grand Bargain “Localisation Workstream’s” learning objectives.

It describes the outcomes of longitudinal investments and inspiring practices in National Society Development in the Kenyan Red Cross Society that strengthen:

- The evidence base for the effectiveness of investment in local capacity
- Learning on methods for building the sustainable characteristics of local humanitarian actors to increase the reach and effectiveness of global humanitarian action
- Local humanitarian system’s capacity to prepare for and respond to local, national and regional disasters and crises based on risk communication and community engagement
- Local, inclusive emergency response systems that leave no one behind, and business models that sustain them
- Evidence that investment increases the timeliness and effectiveness of response
- Delivery of humanitarian impact “in a manner that is as local as possible and only as international as necessary”
- Learning on innovative approaches to organisational development, capacity strengthening, and mutual sharing of peer expertise and resources.
1. Executive summary

"PMI is the oldest and most experienced national humanitarian institution in Indonesia. Having overcome many national calamities, we enjoy the trust of the people because we always respond and stay in communities. We are proud of our new Indonesian Red Cross Law, and it strengthens our resolve to build the preparedness for response and resilience in our communities across the country. Although we receive many donations during emergencies we have to continue to find opportunities to build our sustainability based on our positioning as a neutral, impartial and independent institution". PMI National Vice Chairman, Pak Ginandjar Kartasasmita.

Since the challenging lessons during and after the Asian Tsunami of 2004 the Palang Merah Indonesia (PMI, or Indonesian Red Cross) has continued to strengthen what was already a significantly localized presence across the territory.

With its extensive youth and volunteer networks, community presence and engagement through its 34 Provincial and over 400 Branch Chapters, and its disaster preparedness network of Satgana and Community Based Action Teams (CBATs) and their youthfulness, enthusiasm and community proximity, its longitudinal “National Society Development” (NSD) investments have built extraordinary strengths, local humanitarian presence, and services.

"PMI has continued to build itself as a very credible, trustworthy organization, with grass roots talent, exposure to complex environments and opportunities, and auxiliary roles with Government that have led to structured responsibilities. Our next phase is how to modernize and strengthen the management of these huge resources in country that lead to model Branches in every community and locality” PMI Secretary General, Pak Sudirman Said

As a result of these sustained NSD investments PMI has continued to build an unparalleled strength over the past 10 years as evidenced in the figures demonstrating growth below:

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<th>PMI capacity</th>
<th>2014</th>
<th>2021</th>
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<tr>
<td>Staff</td>
<td>834 hospital staff, 2,100 staff</td>
<td>125 in HQ, 915 at Red Cross Hospital, 1,821 in blood transfusion centres</td>
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<td>Volunteers</td>
<td>379,801 Youth Red Cross members in 8,863 school-based units, 83,005 volunteers</td>
<td>750,000 (School-based Youths), KSR volunteer Corps in Branches and universities, TSR (skilled volunteers)</td>
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<td>Blood transfusion centres</td>
<td>210, meeting 80% of national demand</td>
<td>250, providing 94% of national blood needs</td>
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<td>Regional warehouses</td>
<td>Establishment of 6 regional emergency response centres and warehouses using IFRC’s logistics and fleet management software</td>
<td>6 regional emergency response centres and warehouses; Largest ambulance and water truck fleet in the country</td>
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<td>Prepositioned relief items in 34 Provinces</td>
<td>1,620,926 units of 131 logistics items pre-positioned</td>
<td>Relief items for ready response to 100-2000 households in 34 Provinces</td>
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<tr>
<td>Chapters Emergency Command Post (Posko)</td>
<td>30 chapters</td>
<td>34 chapters with 24/7 disaster data gathering</td>
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<td>Training centres</td>
<td>1 national</td>
<td>1 national, 6 Regional</td>
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<td>Communications</td>
<td>In 2014 36,833 website hits, 206,916 Twitter followers, 1,219 media articles</td>
<td>Over 400,000 website visitors annually, 1 million Twitter followers, 120,000 Facebook and 4,957 YouTube channel subscribers</td>
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The growth in capacities above have led to a measurable increase in numbers of vulnerable people reached over the years:

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<th>Core services</th>
<th>People reached 2014</th>
<th>People reached 2020</th>
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<td>Integrated Community-Based Risk Reduction Programme</td>
<td>274,212 including vulnerability assessments, mapping, risk reduction plan, disaster prepared schools</td>
<td>5,814,547 with community-based risk reduction activities</td>
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<td>Health services</td>
<td>181,951 trained in community health preparedness in 3,647 villages</td>
<td>1,700,000 health service beneficiaries</td>
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<td>6,600,000 people with health information</td>
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<td>Psychosocial services</td>
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<td>50,100 people reached</td>
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<td>Emergency response (fluctuating each year due to different disasters)</td>
<td>1,708,565 with non-food relief items</td>
<td>1,100,000 received relief items (blankets, hygiene kits, mosquito nets, tarpaulins, family kits, baby kits)</td>
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<td>6,299,119 with water and sanitation (annually contextualized to disasters)</td>
<td>1,500,000 people received safe water</td>
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Facing an unprecedented number of daily humanitarian risks and hazards and a large number of national emergencies in recent years, PMI has undertaken several stages of refocusing its work, redefining what the institution is, and what it does. Prior to the past 10 years a wide range of local and national PMI stakeholders realized that it was too scattered, too guided by donors’ interests, and lacking a vision about building more resilient and sustainable communities for the future.

This case study captures perspectives from multiple stakeholders who contributed to internal, locally-led National Society Development (NSD)-inspired change and reform initiatives, and well as those who offered external support. Its sustained longitudinal NSD investments assisted PMI to extend the quality and reach, while it continues to explore ways to strengthen the sustainability of, its humanitarian services further. It demonstrates the impact of timely NSD initiatives that lead to a measurable increase in the numbers of vulnerable people reached through prepared and pre-positioned response structures in a variety of humanitarian contexts, from natural disasters to critical bomb blasts and incidents.

The term “localization” in PMI and the Indonesian context therefore has three dimensions:

(i) **Localization of humanitarian action** – by having disaster prepared human and physical assets in all geographically isolated parts of a challenging topography

(ii) **Localization of capacities to coordinate international assistance** – by building of cooperation capacities within PMI to better play its roles in coordination of international humanitarian aid when it is asked by Government to do so in response to national disasters

(iii) **Localization of humanitarian mandates through strengthened auxiliary roles** – by clarifying a national set of auxiliary roles to locate PMI’s contributions within a wider civil defense system.

“Localisation in the PMI context means leading with credible image, strengthening its internal organizational characteristics to build on its good base of volunteers, contributing to their and their communities’ safety, security, resilience, and managing collective humanitarian impact” PMI Senior Manager
2. Indonesia’s humanitarian context and PMI’s auxiliary roles

(i) Humanitarian context

Located within the world’s largest island-based country of 1,904,569 square kms and 17,504 islands, Indonesia’s population of more than 270 million people also makes it the world’s fourth most populous country.

Most of Indonesia’s area is highly sensitive to natural hazards, risks, and ensuing vulnerabilities, comprised of scattered local communities often living in close proximity to numerous volcanoes and frequent earthquakes. Of the 400 volcanoes, around 130 are active. Over the last decade, more than 85% of its frequent disasters are dominated by hydrometeorological events such as floods, landslides, and tornados. Between 2015-2019 alone its largest disasters have included the Pidi Jaya-Aceh Earthquake (2016), Flood in North and South Cost of Java, Mount Sinabung Eruption, Mount Agung Bali Eruption (2017), Lombok Earthquake (2018), Central Sulawesi Earthquake, Tsunami and Liquifaction (2018), Sunda Strait Tsunami (2018), Halmahera and Ambon Earthquake (2019).

(ii) PMI’s legal base

From 1945 to 2018, PMI has been working and providing humanitarian services based on the Presidential Decree No. 25 of 1950 and Presidential Decree No. 246 of 1963. However, since 9 January 2018, with the enactment of Law No. 1 of 2018 on the Red Cross, PMI finally gained a stronger organisational legal foundation, with clearer tasks according to the Law. The implementation of these public humanitarian services (auxiliary roles) and tasks is elaborated in Government Regulation No. 7 of 2019 on the Implementing Regulations for Law No. 1 of 2018 on the Red Cross.

As a result of its NSD investments over its 75-year history, its structure covers all administrative regions of the country, and consists of 34 Provincial Chapters and 497 District Branches.

“We have tried to apply “localization” in a practical way. As all disasters are a huge distance away, we need to use local capacities, resources and leadership and connect us via webinars, and online monitoring systems in disasters, organizing local peer support between nearest Provinces and Branches where needed”. PMI HQ Senior Manager
To fulfil its auxiliary roles the PMI works closely, but emphasizing its neutrality, impartiality and independence, with Government institutions in the fields of disaster preparedness, disaster response, health, youth development, training development, and blood. Coordination is maintained with the Ministry of Home Affairs; National Agency for Disaster Management (BNPB); National Agency of Meteorological and Geophysical Affairs (BMKG); National Agency of Drug and Food Control (BP-POM); Indonesian National Armed Forces and Police (TNI/Polri); Ministry of Education and Culture; Ministry of Labour; and Ministry of Social Services.

PMI is well placed as a national humanitarian organization, accepted by Government authorities at all levels as the gateway to local communities, as well as local and international organisations. However, its new leadership from 2014 onwards realized that in spite of its roles in coordinating with local and national authorities during and after the tsunami and subsequent disasters, PMI’s auxiliary roles remained somewhat undefined in terms of its clear humanitarian imperatives; independent, neutral and impartial responsibilities within wider coordination mechanisms with Government authorities; and roles in coordination of humanitarian aid in specific circumstances.

In response to this the PMI senior leadership undertook NSD investments, supported by the IFRC ICRC Joint Statutes Commission in their role to assist National Societies in strengthening their legal base in alignment to the Movement’s international norms and quality standards.

As a result of its humanitarian advocacy initiatives the new PMI Law was finally promulgated in 2018, which included “Emblem protection” and a reconfirmation of its historical auxiliary roles. A supplementary Regulation of 2019 oversees its implementation in practice at national, Provincial and district levels. The new Law has continued to strengthen PMI’s Provincial relationship with Provincial Governors, but in retaining its perception and acceptance as a neutral, impartial and independent organization it is striving to diversify its income streams so as not to be over-dependent on government funds.

PMI’s NSD investments in updating its Statutes have also continued over the past 10 years with the support of IFRC and ICRC. Further changes are required to strengthen cohesion between its different levels; more nationally-focused core services in alignment to its auxiliary roles; and clarification of roles and accountabilities supported by SOPs for vertical and horizontal communication. Further Statutes changes to address these issues are planned towards the end of 2021 in conjunction with support from the IFRC ICRC Joint Statutes Commission.
3. PMI’s change process

(i) Balancing “organizational development” with “capacity strengthening” work

“Change takes some time across such a large organization, but over the past 10 years several phases of transformation have brought fresh air in many areas of capacity, human resource capabilities, visions of the future, and more strategic assertiveness in PMI’s donor management” PMI Senior Manager

With PMI needing to utilize its widely appreciated local structures in more conscious ways, a number of phases of change were launched across two leadership groups over the past 10 years which have attempted to create a better managed, coherent and consistent approach to human resource, structure and service development.

Under a wider umbrella of NSD, its investments have been balanced between organisational development work (to achieve organization-wide changes to strengthen its foundational strengths), and “capacity strengthening work” (more closely related to strengthening of capacities to deliver specific programmes at national, Provincial Chapter (Chapter), and local District/Municipality Branch (Branch) levels).

PMI has become known by many partners at the local and international levels to be an “incubator” of innovative humanitarian ideas and approaches, and a connection point with communities.

Although PMI had improved its communications with stakeholders at community level, local authorities and other humanitarian actors after the tsunami recovery experiences, an incoming national leadership from 2013 onwards decided to make NSD investments to reform the several following inter-related dimensions of its work, all of which required significant NSD initiatives and appropriate external support from within and outside the Red Cross Red Crescent Movement (Movement).

### TIMELINE – SUPPORT FOR ORGANIZATIONAL DEVELOPMENT & CAPACITY STRENGTHENING

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Acknowledging the organizational deficiencies in the tsunami recovery years that required change, the new Governing Board of 2009-2014 had set about an NSD process of streamlining PMI’s internal legal regulations and compliance mechanisms. Policies, Statutes, Guidelines, and Standard Operating Procedures (SOPs) were developed over the first 2 years for all sectors and for HQ, Chapter and Branch levels. The majority of these were guided by IFRC Policies and guidelines contextualized into the Indonesian context. It was a phase characterized by “strengthening accountability”.

In 2011 alone PMI introduced a comprehensive Policy agenda by adopting Policies in the areas of “Governing Board”; “Office Management”; “Services”; “HR and Development”; “Finance Management”; “HR Regulations”; “Planning, Reporting, and Evaluation”; “Partnership”; “Image”; “Logistics”; “PMI Sub-District”; “Hospital Statutes”; and “Blood Service Unit Statute”.

(iii) Launching more participatory internal Strategic Planning 2014-2019

In 2011 PMI established a Planning Bureau to achieve more integrated planning and programme management processes, using technical guidelines for annual planning processes for all of PMI’s chapters and branches nationwide. This facilitated strengthened synchronization of planning and budgeting processes for PMI and Movement partners.

However, managing NSD resources and inputs from a wider range of partners proved challenging as many components were attached to programmatic budgets and were earmarked by donors to specific Provinces and Districts, with little available to support national OD processes. The 2004 tsunami response budget of CHF 1.6 billion was the largest that IFRC and PMI had ever managed, but some partnering processes which had supported Branches more directly created tensions between Branches and an HQ perceived to be slower in response to Branch support needs.

A number of local Branches, and some Provincial Chapters, had used the tsunami experiences to develop clearer local action plans of a more multi-sectoral and integrated nature. However, the lack of clear knowledge management processes that brought these experiences together to build a larger national commitment to stronger integrated programming and “localization” of impact was yet to be optimized. One important mitigating factor, however, has been the continuous chain of small to large scale disaster responses which had undermined PMI’s chances to reflect and pull so much learning together into a larger national strategic picture.
From 2014 onwards, while continuing to develop greater local response capacities in preparedness for different natural disasters, PMI’s new leadership realized the need to reconceptualize the sustainability strategies for its structures, services and resource generation priorities at local levels. With pressure from partners and donors to reshape its vision, a more participatory internal local to national strategic planning culture was strengthened to build a vision to support local communities and their own resilience strengthening through local volunteers and Branches.

In parallel with PMI’s Strategic Plan 2014-2019 the new senior leadership introduced and implemented a new “top priority” agenda that focused on a 6-hour nationwide emergency response strategy, improvements in blood donor ship that would meet 80% of the nation’s needs, and strengthening environmental and hygiene care support services to communities, linked to corporates who could support these with funds where needed.

In order to introduce these concepts into the already drafted “Strategy 2014-2019” the new leadership in 2014 intervened before the final draft, resulting in the final Plan being a compromise between strengthening “top down” disaster response structures, and local post-tsunami resilience strengthening programming. As some national leadership and HQ-led planning processes had not always captured the essence of ground realities where local disaster and crisis response is always led from, some of PMI’s Strategic Plans are perceived by internal PMI stakeholders to have missed a wider, strategic, holistic vision of an organization-wide disaster preparedness ethos as opposed to one more balanced towards “response”. As such the Strategic Plan for 2014-2019 was underplayed the opportunity to articulate a resilience-focused vision of “what will be better for communities as a result”.

(iii) Assessing organizational capacities – 2014-2019

PMI has made many NSD investments over the past decade to better assess and address its organizational capacities and gaps. However, after the first 5 years of streamlining and implementation, it became clear that the application of the new regulations needed deep Branch level discussions, understanding, and deduplication of instructions across several sectors. Unless addressed through an OD strategy, the delivery of the “Strategy 2014-2019” was likely to be hampered by the continuing lack of integrated operational planning and delivery across Departments both at HQ, and as a result, at Chapter and Branch levels too.

In 2014-2019 PMI entered a second phase of organizational self-assessment to try and capture, update, and integrate which also contained a clearer Branch development strategy. An earlier Branch capacity mapping dashboard which had been initiated in 2010 had made good use of existing IFRC Branch assessment materials such as the Characteristics of a Well-Functioning/Well-Prepared National Society” and modified them to match with PMI’s own indicators in measuring progress against its Strategic Plans. NSD investments could therefore follow the customized needs of Branches who were subsequently graded as strong, medium and low in capacity. Tailor-made capacity strengthening targets supported by training and inter-Branch peer support systems would address these needs.

However, to address the ongoing challenges of internal inconsistencies and weaker communications across sectors of its work, in 2014 PMI undertook its first IFRC “Organizational Capacity Assessment and Certification Process” (OCAC)1.

1 IFRC’s “Organisational Capacity Assessment and Certification” (OCAC) is a comprehensive assessment that provides an understanding of a NS’s capacity and performance in all its areas of work, but also of the relationships between those different elements to better manage organisational change, efficiency and effectiveness.
“OCAC and later the local equivalent BOCA gave us data to develop national, Provincial and District SOPs in gap areas. It helped the HQ to decide how to approach Branches based on a sensitive understanding of their situation and capacities. The strongest Provinces meeting 100% of the capacities could manage their own growth, so we could focus on others and star again with Board orientations, building PMI knowledge centres in volunteering, disaster response etc to improve their understanding and encourage replication”. PMI HQ Senior Manager

To strengthen the ownership of the Branches over change, in 2015 an updated Branch capacity mapping took place of the 34 Provincial Chapters and 147 District/Municipality Branches. This once again confirmed significant variations in capacities, a lack of national cohesion between HQ and Branches, and the lack of a Branch development strategy.

To try once again to analyse the causes behind these national weaknesses and inconsistencies, PMI undertook a second OCAC in 2016. Although this initially indicated little progress against earlier indicators, except for the drafting of the new Law, it did generate greater commitment to change, and led to several positive outcomes including:

- The updating of PMI’s Branch capacity mapping tool with new dimensions
- The motivation to PMI’s PMER Unit to have stronger capacities in defining goals, outcomes and indicators for the new Strategic Plan
- The use of OCAC results as part of the PMI’s annual planning tools
- The acceptance of IFRC’s “Branch Organisational Capacity Assessment” (BOCA) tool to help with capacity analysis, and therefore as a way of assisting Chapters and Branches to reassess their capacities and gaps in alignment with nationally-consistent standards linked to the OCAC
- The immediate and passionate launch of PMI’s BOCA process – by 2018 30/34 Provincial chapters and 81 local Branches had already completed their BOCAs, and 3 Provinces had even funded their own

In 2017, as a result of the OCAC results and Branch capacity mapping exercises, PMI decided to adopt and customize BOCA tool to its own needs, supported by partners.

“The modification, testing and piloting was really important and helpful. Each BOCA indicator was clarified in the local context. For example, where it said “Branch has to report regularly to Chapter at xx interval”, we checked this against PMI’s policies to align the timelines” PMI Chapter Representative
(v) Strengthening due diligence, transparency and accountability systems

While different Governing Board members had oversight over different inter-related aspects of organizational efficiency and functioning (such as volunteering, finance, resource mobilization), PMI found it challenging to achieve organizational cohesion.

Nevertheless, its “Strategic Plan 2014-2019” continued to include objectives in areas to strengthen its capacities, with technical support and inputs from a variety of partners, in areas such as internal due diligence, transparency and accountability systems. As these were achieved, it gained the respect of Government who asked it to play roles to coordinate international assistance in specific emergencies as a result.

Between 2014-2019 such capacity strengthening initiatives included the drafting and adoption of the following mechanisms and procedures. The specific partners who longitudinal technical and financial support assisted in this work are listed in section 6:

**Finance system development:** Dissemination of finance procedures 2012; Accounting manual 2013; emergency fund management 2015; review of finance SOPs 2016

**Fraud and corruption prevention:** IFRC Fraud and corruption Prevention training 2019; Corruption Prevention webinar 2019

**Planning, Monitoring, Evaluation and Reporting (PMER) development:** IFRC PMER System development 2013-2018; updated Monitoring and Evaluation Guide 2020; Reporting Compliance 2020; Data Literacy guidance 2020

**Human resource development:** Updated HR regulations 2013-14; Payroll software SOPs 2014 & 2020; HR development roadmap 2016-17; HR Transformation Project 2020.

(vi) An updated Transformation Strategy 2020-2024

In 2019 PMI adopted its latest “Strategic Plan 2019-2024” in parallel to the appointment of a new Governing Board and Secretary General in 2020.

The new Strategic Plan, updated before the arrival of the new Secretary General, prioritized dissemination of humanitarian values; blood services; youth and volunteer development; disaster and health crisis preparedness and response; community-based disaster risk reduction and health crisis prevention programmes; and social services. It also aimed to increase PMI’s public outreach and community engagement, as well as to strengthen its well-functioning National Society characteristics further by developing its human resources, systems, procedures, infrastructure, and resource development to be self-sustaining in the future.

PMI’s new Secretary General appointed in 2020 collaborated with the new Governing Board to initiate a further “Transformation Project” by proactively merging and analyzing for the first time the collective results of the OCAC, BOCAs and SAF. To provide objectivity, the Secretary General engaged a set of external consultants to provide a neutral and impartial consolidated analysis with recommendations on what kind of transformations PMI would need to undertake if it were to deliver its “Strategic Plan 2019-2024” efficiently and cost-effectively.

The new senior management team have merged the findings and recommendations of the above analysis into a new PMI “Transformation Project”. This contains 8 thematic areas comprised of 1) Law, Strategy, and Oversight; 2) Financial Management; 3) Logistic and Procurement; 4) Human Resources; 5) Sustainability of Services; 6) Response Readiness; 7) Project Management; and 8) Digitalization.
PMI’s latest “Transformation Project” initiated in 2020 began with a sensitive set of “socialization” processes, carefully and strategically managed by the new Secretary General, including:

- building the commitment of the Governing Board
- briefing and involving senior staff
- consulting extensively with Branches
- appointing a “Transformation Team” (TT) comprised of external experts to manage transformation in 6 areas. The TT functions as a “consultancy team”
- reviewing PMI’s “Strategy 2019-24” and testing the analysis first with the HQ and then Branches about how it linked to implementing OCAC, BOCA and the SWOT analyses
- actively promoting the assessment to the Governing Board and “socializing” it to staff
- sensitizing all Departments to take the assessment and make a 3-year plan of action to implement it first at HQ (with HR processes such as job evaluation, restructuring and recruitments), and then in Branches
- asking the TT to develop and test business processes for each Department as the current lack of clarity affects the way in which programmes are implemented
- overcoming the previous “silos” of Departments and promoting cross-Departmental linkages and more holistic work

The first phase of the latest “Transformation Project” contains a strong emphasis of improvements in technical areas such as finance systems, public communications tools, creating a digital office, harmonizing IT platforms, and increasing resource streams. However, the second phase may have to articulate the way in which these new capacities, capabilities and accountabilities at all levels are linked to the delivery of stronger, more relevant and sustainable local humanitarian action and services.

(vii) Aligning the OFDA-funded “Red Ready” programme goals to PMI’s transformation strategy

With a significant lack of OD funding available, the PMI leadership realized that, as 7 of the 8 transformation goals were NSD-focused, they were well aligned to the aims and support available within the first 3-year phase of the OFDA-funded “Red Ready” programme.

As an NSD investment aimed at linking organizational and institutional strengths to Branch level capacities and community level preparedness, PMI leveraged its NSD Goals as the driver for the Red Ready’s Operational Framework, thus merging organizational and community capacity strengthening into one paradigm.

The alignment has proved fruitful, with the “Red Ready” programme supporting the strengthening of PMI’s HR system, financial management and reporting system, and resource mobilization capacities for greater sustainability. The new Secretary General’s and PMI’s 8 transformation areas have also become IFRC’s priority areas for support from 2020 onwards.

In order to implement the NSD aspects of the Strategic Plan PMI has established an NSD Platform” to “facilitate the process on prioritizing and agreeing of needs for and prepare to lead change within the National Society at all technical and leadership (management and governance) level”. The NSD Platform, yet to be launched later in 2021 due to the priority given to the COVID-19 response, will coordinate work in 8 thematic areas to have impact both on PMI’s organisational development as well as its humanitarian service agenda.
4. **Strengthening “localization of humanitarian capacity and action”**

Located within its national context of frequent disasters and remote communities with little recourse to national emergency response assets, PMI has consistently focused on strengthening “localization of humanitarian action” by using its organizational strengths to build volunteer community-based first response teams, as well as to strengthen the capacities of communities themselves to identify risks, improve preparedness and response, and improve their long-term resilience.

These goals required longitudinal NSD investments in four specific dimensions:

**(i) Strengthening NSD investments in volunteer, youth and gender-sensitive mobilization**

NSD investments in volunteer and youth development continued to lay the strong foundations for a diversified and principled volunteer force to sustain PMI’s community-based work in safety and resilience.

Following a national volunteer gathering in 2012, and a corporate volunteering initiative between 2013-2015, PMI intensified its study into local volunteering conditions and insurance.

Having trained PMI Youth as peer educators in IFRC’s “Youth as Agents of Behaviour Change” (YABC) in 2012, PMI continued to undertake a Youth study in 2014, host the ASEAN Youth Network to exchange ideas on youth-led humanitarian action with other neighbouring National Societies in 2015.

In 2015, with IFRC support PMI finalised a study on youth and socialised the results and recommendations in several meetings including the youth programme meeting and national volunteer meeting. PMI set some top priorities to improve its youth development programme in enhancing youth policy and regulation; capacity building; development of attractive programmes; and partnership. PMI agree that this range of age should be given opportunity to participate in youth network activities regionally and globally which facilitated extensive peer support between national and international youth networks over the years that followed, enhancing humanitarian action and impact. The results were further strengthened at another national youth gathering in 2016, which led to a Youth Training Curriculum in 2018 and YABC programmes in 6 Provinces by 2019.

**(ii) Localization of preparedness for response capacities – the strengthening of Chapters and Branch volunteer response teams**

PMI was amongst the first National Red Cross Red Crescent Societies to discuss decentralization of response, or “localization of humanitarian action” as it might be termed now. With its unique Fundamental Principles, especially of neutrality, impartiality and independence, its organizational characteristics set it aside from others in an increasingly confessional humanitarian space.
Building on its learning in the Asian tsunami of 2004, and with support from multiple partners, PMI’s considerable NSD investments in volunteer mobilization, training, and development have focused on building practical volunteer and community-based response teams. These include a contextualized approach to “locally-led humanitarian action in the form of:

**Satgana – Disaster Response Teams:** Since 1998 PMI’s Satgana specially trained volunteer teams respond to local disasters and provide emergency services to people affected. Managed by volunteers but coordinated by Branches members come from local communities from a range of backgrounds – students, doctors, community leaders. They conduct search and rescue, evacuation, tracing, first aid, health services, water and sanitation, field kitchens and relief distribution.

**Community-Based Action Teams (CBAT, but known as SIBAT – Siaga Bencana Berbasis Masyarakat):** PMI has trained more than 10,609 volunteers in over 802 village SIBAT teams “owned by the community”, who take responsibility for the safety of a village, risk reduction education, and motivating local disaster preparedness for response activities. CBATs are gender balanced volunteer support for the PMI Branch and Satgana teams, helping to mobilise communities to do joint vulnerability and resource mapping; training for evacuations; undertake local fundraising to support local plans of action; and engage in community health promotion, first aid and environmental conservation.

**Medical Action Teams:** Since 2005 PMI provides training for doctors, nurses, and specialists from hospitals who are interested to work in disaster response. Each Provincial MAT has 3 doctors/specialists, 5 nurses, one logistician and one administrator. Trained in emergency health and setting up a field hospital, for domestic disasters, they have also been deployed internationally (for example to assist those affected by Cyclone Nargis in Myanmar in 2008).

**Emergency Water and Sanitation Teams:** Since 2006 PMI invested in volunteer water and sanitation teams and capacity. These use water treatment units and also assist with vector control to prevent water-borne diseases, and construction of temporary sanitation facilities.

In its auxiliary roles during emergency response, PMI has focused its local volunteer and Branch capacities to provide services in evacuation, relief distribution, Restoring Family Links (RFL), emergency shelter, first aid, mobile health services, clean water distribution, emergency sanitation, and psychosocial support. In COVID-19 response the SIBATs mobilized risk reduction messages, supported self-isolating families, and coordinated with local agencies and health centres to provide services.

“Localisation is how to maximise the local leadership, funding, and resources to deal with disasters and risk reduction activities, and minimize the need for national intervention” PMI Branch Head
Capacity building for the PMI personnel has been achieved not only through technical trainings but also through peer support and mentoring systems - assigning staff/volunteers as field coordinators to their sister Chapters/Branches, and organizing simulations on disaster management, health crisis management, logistics, water and sanitation, and emergency health at community levels.

To deliver the blood service contributions to national and local disaster preparedness strategies, PMI use SIMDONDAR (MIS for Blood Donation) as an integrated information system between blood donation units nation-wide which has been acknowledged by the data and information centre of Health Ministry and national agency of drug and food control (BP-POM). The system supports the recording, reporting and tracking of blood services. The Central blood donor unit of PMI and its 110 units across Indonesia has used this information system.

**(iii) Strengthening community-based disaster preparedness, risk reduction, and resilience building**

Due to longitudinal NSD investments in local capacity strengthening supported by IFRC and multiple partners, by 2017 100% of PMI chapters and 30% of PMI branches had allocated contingency funds with respect to their local capacity. A steady annual increase in Chapter and Branch annual contingency plan completion was observed as a result of NSD investments in stronger planning skills. Between 2013 – 2014 alone the number increased from 61 to 72 PMI Chapters and Branches impacted by disasters having developed emergency contingency and operational plans, and PMI had also developed cash and voucher assistance capacity by providing cash programmes in emergency operations through a cash guideline.

Together with the Movement as well as private sector partners such as Zurich Insurance and PT. Astra Internasional Tbk, PMI significantly strengthened its deliver disaster risk reduction work in communities. By 2018, PMI had community resilience approaches in 28 Chapters, with 104 branches having developed their Integrated Community-Based Risk Reduction approaches independently with funding from local government, Corporate Social Responsibility donations, or PMI’s own funding sources.

The support of a number of partners have helped PMI explore alternative models of community-based empowerment and development. Its local anticipatory work in “Forecast-based community action”, its community WASH and health-surveillance work, and its CP3 programmes have changed community behaviours and led to greater overall well-being and resilience.

NSD investments in community health volunteer training were supplemented by initiatives such as the new curriculum for Emergency Basic Health Service and new SOPs for PMI Ambulances in 2014. These were supplemented by wider PHAST, WASH and “Healthy Schools” training.

However, a number of evaluations of WASH and other programmes made recommendations to increase PMI’s attention on Community engagement and Accountability (CEA) approaches across all its programmes and services. While a variety of improved approaches to the inclusion of gender, diversity and people with special needs perspectives have been strengthened in some areas, this is not yet a widespread practice across all Branches and services.
NSD investments in strengthening its gender and diversity perspectives followed. PMI committed itself to mainstreaming gender throughout its operations. In accordance with the IFRC Gender Policy, PMI developed a five-year gender mainstreaming strategy paper called Strategi dan Pendekatan Sensitivitas Gender in 2008 to guide the implementation of gender mainstreaming into all disaster management activities. Gender awareness training was provided for some of its key personnel and integrated gender into all of its programme policies, materials, modules, and tools. In 2009 and 2010, PMI reviewed the accomplishments and gaps of its gender strategy. The review noted that while there had been positive achievements in terms of mainstreaming gender into policies, guidelines and tools, the extent and quality of implementation varied across the 33 chapters.

PMI further upgraded its approaches to Gender and Diversity following an IFRC Training for Trainers in 2015 and further IFRC training in 2016 which built on its lessons learned following the Asian tsunami with partners such as the American Red Cross.

**“Some programmes do empower communities – for example strengthening women as preparedness champions, but community-based approaches need stronger local structures” PMI HQ manager**

(iv) Preparedness for violence and conflict-sensitive situations

However, in a changing internal domestic landscape of increased confessionalism, social tension and violence, PMI’s ability to remain neutral, impartial and independent remains a crucial part of its credibility.

**“Our Chapter is located in a long-term conflict-sensitive setting and being located on an island we face many problematic situations. With very little chance to raise local resources for our work, we have found it extremely difficult to support the 11 local Branches in our area. We cannot reach them except through flights (which are very expensive), or by boat (which can take 1-2 days of travel to reach). Although we continue to socialize with all communities our neutral, impartial and independent characteristics, we need support from neutral and impartial sources to conduct basic services. The “Safer Access Framework” exercise helped us to know what we need to strengthen, but neither ICRC nor other partners provide us with the means to deliver our local services” PMI Head of a Chapter**

With ICRC support following the SAF assessment in 2015, PMI increased dissemination of the Fundamental Principles in selected areas, complemented by intensive 2-day orientation courses for local Chapter and Branch key stakeholders. Although these were customized to each Branch’s local context, lessons learned from 2-3 years of dissemination approaches have led to the need to define new standards, interactive methodologies, Information, Education and Communications (IEC) materials customizable to the requirements of each local context and region.

However, very few funds are available to Branches to scale up their community work and meet the needs of affected populations unless crisis breaks out. The socio-economic conditions in conflict-sensitive areas are not conducive for traditional resource mobilization, and PMI and its partners need to agree alternative long-term resourcing options for such Chapters and Branches.
Case Study

PMI’s joint lessons learned workshop convened after the response to the Jakarta bombing incidents emphasized that, in spite of its auxiliary roles, greater clarity should be built into its future operational response mechanisms in relation to the various State authorities. New priorities identified included:

- the need to invest in strong centralized communications mechanisms in response to such incidents
- enhancing communications with the authorities on the deployment of PMI’s response teams
- increasing the dialogue with Police authorities to regularly clarify and review procedures
- restrict postings on social media to only those through official PMI social media channels.

PMI’s new Law of 2018 has further improved its neutral, impartial and independent positioning with relevant authorities, while at the same time strengthening communications and coordination. With more clearly defined roles in search and rescue, evacuation and transportation of dead bodies, PMI also trains the Police and Army in dead body management and disaster victim identification. Some Provinces organized joint simulations with the Police and Army and hold pre-conflict meetings with these and other agencies to disseminate its statutory roles and obligations, and agree pre-disaster SOPs where required.

(v) Strengthening local Branch peer to peer support and mentoring

PMI’s Branch structures have traditionally been recognized as strong, delivering services with and through local and international resources, with some gaps across regions. Using IFRC’s “Branch Organisational Capacity Assessment” (BOCA) process resulted in new strengths such as maintaining statutory obligations, holding regular local Board meetings, and maintaining infrastructure, it did not automatically strengthen the “soft” strengths such as improving volunteer resources. PMI’s answer to this was to start Branch mentorship and peer coaching support across Provinces, where experts would be sent to other areas matched to the local thematic requests for support.

Even in emergencies, PMI started to mobilize Branch to Branch support, reducing the need for external assistance and providing resources to fill gaps and strengthen coordination roles. Its digitalization of humanitarian early warning systems that connect the HQ to the remotest locations across the territory led to it being one of the first National Societies to using open source technology to gather local information from communities.

IFRC’s BOCA is a self-assessment tool developed for NS branches to identify and assess their strengths, limitations and challenges in relation to a wide range of organizational capacities. It can be used as the first step in a branch development process.
However, the next draft of an NSD Strategy has a strong opportunity to build from PMI’s earlier “OD and Capacity Building Strategy” which had focused on efforts to strengthen Branches as the front line. This had previously defined a customized assistance package to its Branches based on 3 levels – 1: basic capacities needed in each Branch; 2 additional capacities needed to be more self-reliant; 3 strong capacities, including the ability to support other Branches.

OCAC and BOCA enabled PMI to track what each Branch needed to do to move to the next level. However, the implementation of support for this Strategy was put on hold with the arrival of COVID-19 in Indonesia since January 2020 onwards.

5. **Digital transformation – faster response and closer to communities**

PMI’s digital transformation started from its learning following the Asian tsunami. To strengthen its humanitarian operations, data gathering, and operational decision making, its NSD investments included a digital Management Information System (MIS) using GIS technology in 2015-6, enhancing its Radio Communications Curriculum and SOPs in 2015.

Its long-term VHF/HF radio network system, linked in its auxiliary roles to the national Government of Indonesia early warning system, enables it to collect and disseminate potential disaster warnings, and convey daily information on security and response activities. In times of disaster PMI receives warnings from the National Meteorology and Geophysics Agency (BMG) and Disaster Coordination Task Force at District level. This information is then sent to the respective PMI Satgana and SIBAT teams to assist communities with evacuation and response preparedness.

Its digitalization capacities include online applications and use of multiple technologies to:

- Develop and monitor GIS-based hazard risk maps to feed into its early warning systems
- Integrate PMI’s logistics system with the GIS platform to map all PMI’s resources and assets
- Conduct Mobile Rapid Assessments by a local network of trained disaster response volunteers across the territory using GIS and “hotmap” consolidation of data which can also be gathered offline by volunteers in remote areas and uploaded when online
- Communicate disaster preparedness and early warnings to communities
- Recruit blood donors and manage Blood bank apps
- Promote community-based health and well-being awareness campaigns
- Develop a community feedback dashboard on COVID-19 PMI supported technically by IFRC and HumanitarianData (HumData) HDX. The dashboard visualizes the feedback categorized by month, location, age and sex, topic, sector, etc. It also provides an automatic monthly narrative report. The system and template of the Dashboard is expected to be utilized to other Ops/ responses as well.

PMI had also invested in NSD initiatives to upgrade its website, communicate more extensively to the population through social media. It has consistently updated its Social Media Guide since 2011, and its Communications Management Guidelines and Training Curriculum since 2011, as well as introducing a Media Partnership Strategy since 2013.
6. Coordinating partnerships

(i) Movement coordination and partnerships

Prior to 2009 PMI had employed the IFRC’s “Cooperation Agreement Strategy” (CAS) framework within which to map all Movement partner contributions and manage synergy across all capacity strengthening and organizational development support. When it ended in 2009, in spite of interest to refresh and redraft it, the initiative was lost. In the absence of a CAS mechanism, the IFRC office has continued to be a useful platform for effective coordination among PMI and its partners, and an entry point for PMI and partners to facilitate their relationship.

Although the overall management of Movement Cooperation and Coordination is perceived to be positive, PMI has not consistently developed and managed a comprehensive summary overview plan which maps the contributions of multiple donors and partners to its work. PMI’s previous “International Relations Unit” has been transitioned into a “Cooperation Unit”, and leads the existing “Movement Coordination Agreement” (MCA) in country with bi-monthly meetings.

One of PMI’s challenges has been the lack of a consistent harmonized approach across its capacity strengthening initiatives. This changed in 2020 with the participation of PMI OD Department staff in an IFRC Asia Pacific-wide NSD meeting in which the inter-connectedness of a holistic approach to NSD (e.g. how volunteering management, financial sustainability, and service development are all connected) gave a new perspective. A more harmonized “NSD platform” was initiated with PMI in the lead, IFRC, support, and PNS participating.

PMI has attracted significant NSD funds from major disaster response operations especially. The recent Sulawesi Earthquake response alone attracted US $ 39 million. But the “scattered” nature of these funds within wider programme budgets have militated against the ability of PMI to consolidate them to support its organization-wide change goals.

PMI has enjoyed long-term partnerships with a wide range Movement partners including IFRC (emergency response, preparedness, DRR, epidemic and pandemic preparedness, WASH, cash and voucher assistance, forecast-based financing/action, communication and CEA, PGI, NSD); ICRC (emergency health, management of the dead, safer access framework, cataract operation, RFL); American Red Cross (CB-DRR, cash and voucher assistance, earthquake and tsunami readiness, data readiness, institutional readiness, NSD); Australian Red Cross (DRR, Health, RFL, NSD); Japanese Red Cross (community-based DRR); Canadian Red Cross (NSD, Gender and Diversity) and other Partner National Societies supporting PMI for delivering its emergency operations. While the following tables are not a comprehensive report, they serve to demonstrate multi-partner support that was timely with organization-wide impact.

In general NSD funds allocated by Movement partners to specific organization-wide capacity assessments in defined Organisational Development parts of the wider “NSD” budgets were far outweighed by funds allocated to shorter term “capacity strengthening” budgets within programme and service agreements.
Coordination of inputs for OD work under the wider NSD umbrella proved challenging, as “capacity strengthening” work was spread across multiple budgets and directed by donor-driven interests to specific Chapters and Branches which undermines PMI’s ability to support its organization-wide transformational agenda.

In order to assert itself in a clearer coordination role, PMI with the support of IFRC is establishing a “National Society Development Platform” towards the end of 2021 with the aim of strengthening internal collaboration on NSD investments between PMI Departments; aligning available partner support to the NSD plans of its “Strategic Plan 2019-2024”; create a solutions-focused form for resolving the optimum way to support NSD across all levels of PMI in a coherent manner; monitoring and reporting progress on NSD goals to the Governing Board; and providing updates for Movement Coordination Meeting that require action by different stakeholders.

(ii) Management of “Localization of aid coordination” responsibilities

As a strong partner of the National Disaster Management Agency, PMI grew in stature when, in response to two national earthquakes, the Government declared that PMI should coordinate, lead and manage all international assistance from the International Red Cross and Red Crescent Movement. Its NSD investments in the past to build distributed leadership, community positioned volunteer action teams, decentralized assets such as warehouses, and pre-contracting mechanism with suppliers contributed to its positioning. The localization of response entailed relationship building with other domestic partners and a peer support mechanism so that Branches could mentor each other to deliver faster and more effective response.
(iii) External partnerships

As a result of its longitudinal NSD investments PMI continues to be a partner of choice for multiple humanitarian institutions and donors. By 2015 alone its profile included:

- Joining the FRC partnership with the Zurich Insurance Group for Community Flood Resilience for five years, till mid-2018.
- An agreed with the Australian Department for Foreign Affairs and Trade, renewed early 2015, supports IFRC with access to local Disaster Response Contingency Fund for PMI's response in case of disasters.
- A global partnership with the IFRC, the European Commission (Directorate-General for International Cooperation and Development) supports activities related to the initiative called Rights of Migrants in Action, where PMI played the role of convener of other actors working on migration issues.
- A multilateral programme channelled via the Republic of Korea National Red Cross, with the Samsung group supporting activities in water, sanitation and hygiene promotion (WASH).
- Government of New Zealand supported PMI through the New Zealand Red Cross/IFRC.

PMI and IFRC continue to be active participants in the Humanitarian Country Team meetings and inter-agency plans. Coordination on specific issues such as the El Nino drought or the haze/forest fires with UN agencies, including OCHA, WFP, FAO, UNDP, OIM, UNHCR has remained excellent throughout, although partnerships continue to be on a disaster-specific and timebound programme basis, as opposed to longitudinal support for PMI to continue to strengthen its overall organisational development priorities.

7. Knowledge sharing roles

"Localisation should not just be changing international to local staff. Working in the same global scene is important – we need interaction with the global community – it’s part of our mutual capacity strengthening over time". PMI Secretary General, Pak Sudirman Said

At a national level PMI has continued to contribute to sector-wide capacity strengthening through many ongoing initiatives and peer support mechanisms. In 2015, for example, it developed 7 accredited national training curriculums for both internal and external local and national partners in the areas of Red Cross Orientation; Disaster Management TDB Assessment; Disaster Risk Reduction; Stress Management; Relief Distribution; and CPR/AED. These were accredited by the Ministry of Health, Ministry of Manpower and Transmigration, BNPB).

At a regional level PMI contributes to a wide range of sector-wide strengthening initiatives as well, including its annual partnership with the ASEAN Coordinating Centre for Humanitarian Assistance on disaster management (AHA Centre) during the ACE (AHA Centre Executive) programme to provide on-the-job training and capacity building for professionals from National Disaster Management Organisations of ASEAN Member States who are pursuing a career in disaster management.
Internationally PMI shares its expertise and knowledge in a variety of fora. From 2015-2019, for example, it participated in 291 international events in which 76 events attended by the board. PMI hosted SEA Leaders’ Meeting in 2016. PMI sent relief and mobilized its volunteers overseas to support emergency operations in Rohingya (4 times), Cox Bazar, Floods in Malaysia, Lao, and Myanmar as well as cyclone in the Bahamas/USA, and mobilized a team for ASEAN-ERAT in several ASEAN countries.

From 2015 onwards the ‘Partnership for Resilience’ (PRR) supported by the Government of the Netherlands and coordinated with Netherlands Red Cross, the Red Cross Climate Centre, CARE Netherlands, Cordaid and Wetlands International continued to contribute to global learning on DRR and legislation.

From 2015 onwards, the Secretary General of PMI has contributed to the work towards the Red Cross Red Crescent Council of Delegates as member of the ‘Strengthening Movement Coordination and Cooperation’ Reference Group Meeting, a group of National Societies that has been debating the way forward for Movement Coordination and Cooperation.

8. Sustainability strategies

(i) Localization of partnerships and resource mobilization

PMI has 127 MOUs with local and national organisations in the fields of CSR donations, health services, blood donor campaigns, disaster management, and goods and services both with the private sector and Government. The majority of donors (for example 739 between 2010-2014) continue to earmark their donations for people affected by natural disasters. Since 2016 PMI had finalized and accelerated its commercial First Aid income targets from a much larger number of companies.

In 2015 10 Provinces has MOUs with local companies, 7 with national companies, and 4 with international companies. PMI’s latest “Transformation Project” (2020-2014) is refreshing a mapping of such partnerships prior to developing a strategy for a cohesive organization-wide approach to maximizing the benefit from them.

To build on its independent fundraising resources, in early 2020 PMI appointed a Fundraising/resource mobilization Consultant to develop an initial draft for PMI fundraising strategy, which was subsequently halted by the emergency fundraising activities during the COVID-19 Operation while benefiting from practical exposure to emergency fundraising to further strengthen its SOPs in this sector.

There remain significant PMI constraints in relation to the small number of 5 staff in the Fundraising Team who “live on disaster funds, and don’t have time to prioritise non-disaster fundraising strategies”. This leaves them no time to support fundraising training for the Branches and chapters where little professional capacity exists in this field. Nevertheless, under the “Transformation Project” 2020-2024 five new areas of non-disaster dependent national resource mobilisation support have been identified which will be activated in late 2021 as follows:

- Consideration of PMI reinstating “membership” income as part of revitalising a membership strategy that is currently inactive
- Commercial First Aid training which entails PMI applying for new licences under Indonesia’s “risk-based licencing reform” to be able to scale up a stable corporate income from this source
- Outsourcing training courses based on PMI’s skills and competencies to external institutions on a commercial income basis
- Developing digital apps for fundraising (as Indonesia has a young population and a very high take up of social media platforms)
- Exploiting the national legislation which requires all corporate entities to allocate a percentage of annual income to CSR activities – which would require considerable investments in matching proposals to the priorities of corporations and foundations
- Scaling up individual giving – by customising IFRC’s Go and other online giving apps in the local context.
Since September 2019, PMI's Donor Database has been updated, showing a total of 802 donors since 2018 including individuals, corporates, institutions, communities, and external partners who will be aligned to a new Partnership Management mechanism linked to more effective pledge management, risk management, and donor communication/reporting procedures. But the demands of donors place significant constraints – for example one international Chamber of commerce required a 20-page due diligence submission.

(i) Business Unit development

PMI's effort in the business unit development includes rental income from office buildings, mobilising its education and training centre, constructing a blood bag factory and plasma fractionation factory, and conducting first aid trainings for the corporate sector.

In 2015, there were some Provinces and Branches who had begun to invest in a total of 21 business units at the time. However, these required external technical assistance as they were in the fields of clinics (radiology/X-ray); drinking water refill; animal husbandry; and outsourced services.

The current Board of PMI is undertaking business feasibility studies to establish more effective and efficient business unit and income stream options as part of its “Transformation Project” 2020-2014.

9. Principles of effective partnerships

“We welcome plan-driven support aligned to our Strategic Plan and we welcome national and international partnerships as they bring benchmarks in management practices, documentation etc to build global practice alignment. But we continue to experience a lack of funding support for our organizational transformation work which is why we appreciate long-term partnering institutions such as IFRC, ICRC and other PNS who accompany us through change” PMI Secretary General, Pak Sudirman Said

Although much has been documented in earlier sections about the strategic imbalance and quantum between long-term OD support and short-term capacity strengthening funds, it is important to confirm that PMI’s most effective humanitarian impact has been founded on multi-institutional partnerships that allows it to use the outcomes of its NSD investments in strengthened volunteering, youth and Branch systems to enhance collective humanitarian impact in collaboration with partners within and outside the Movement.

The following strong example contains within it all the partnership principles of equity, collective visioning with communities, and sector-wide collaboration that PMI appreciates, evidenced in its Flood Resilience Programme:

The “Community Flood Resilience Project “has been a longitudinal partnership since 2014 in with the Zurich Insurance as part of the global knowledge sharing initiative between four countries: Mexico, Peru, Indonesia and Nepal. The Indonesia project covers three river basins and seven districts within four provinces.

The activities of the flood resilience project in the second half of 2015 onwards focused on completing recruitment and training of volunteers, completing community level assessments and surveys, and developing effective flood risk mitigation projects at the community level. 10 community-based volunteer teams were formed and 300 volunteers trained in 10 communities. In addition, 2 SATGANA teams were formed and trained. Mitigation plans (developed jointly with communities based on findings of various community level assessments) have been prepared in communities including waste management, construction of evacuation places, protecting river banks, tree plantation, developing green belts, and raising community awareness in health, water and sanitation, disaster risk and environmental protection.
The development of a flood early warning early action system (FEWEA) started in partnership with the Bandung Institute of Technology (ITB) and Jasa Tirta. The FEWEA system was installed and is expected to benefit people residing in 17 regions along the Bengawan solo river basin. The work included discussions with Institut Pertanian Bogor (IPB, the Bogor Agriculture University) and Sebelas Maret University, Solo, regarding possible cooperation for riverbank strengthening and ecological restoration activities as well as some community capacity building interventions.

10. COVID-19 response – the power of localization

After years of sustained NSD investments PMI’s organisational strengths at all levels resulted in national roles in supporting the COVID-19 mitigation operations. As early as 2014, PMI built on the success of the epidemic control for volunteers (ECV) toolkit roll-out project in four provinces in Indonesia and made its ECV toolkit available for the Ministry of Health (MoH) to be considered as one of the potential standard tools for the national community-based approach for health crises and epidemics. Thanks to this contribution and building on successful past cooperation, PMI had been invited to join the next MoH national pandemic contingency plan update, giving PMI an opportunity to update and align its plan to MoH’s.

As a powerful example of its localisation work over the past 10 years, PMI was asked to play auxiliary roles to contribute to the national COVID-19 pandemic response. As a result of its longitudinal NSD investments in volunteer mobilisation, SOPs for preparedness for pandemic and disasters, community-based emergency response teams, and Branch network across the country, PMI was once again requested to be part of Indonesia’s National Task Force for COVID-19 response.

A total of 5,754 PMI personnel have been mobilized across all 34 Provinces, with 403 Branches responding in 514 districts/cities in close coordination with the respective local stakeholders and other relevant government and non-government organizations. The overall operational objective of PMI’s COVID-19 response is to contribute to reducing morbidity, mortality, and social impacts of the COVID-19 outbreak by preventing and slowing transmission and helping to ensure communities affected by the outbreak maintain access to basic health and social services and can support themselves with dignity.

The response by PMI has impacted over 45 million lives and as of 6 September 2021, key activities and achievements are as follows:

- 1,767 COVID-19 patients, 1,418 COVID-19 outpatients, 2,544 suspects, 204 probable cases, and 370 deaths have been administered at PMI Hospital Bogor
- PMI Hospital Bogor has performed RT-PCR testing for 3,700 samples and upgraded some of its isolation rooms and strengthen protection for its workers
- Health services have reached 1,810,280 people, while home-based care and mental health and psychosocial support services have reached 38,046 people
- 982,420 health and cleaning kits have been provided for communities along with health and hygiene promotion activities which have reached 7,604,035 people, and sanitizing activities have reached an estimated 37,791,484 people, with 676 handwashing stations installed
11. Conclusions

PMI’s transformation process is the result of years of sustained NSD investments, piloting innovative approaches to building local organisational capacities, and strengthening its neutral, impartial and independent public image. The key outcomes of its longitudinal NSD investments include:

- Transportation of 1,454 suspect/confirmed COVID-19 cases and provided dead body management services for 1,350 deceased patients
- 6 million pieces of various PPEs and equipment including non-medical masks, N95 masks, hazmat, boots, and other items have been distributed to PMI branches as well as to communities
- 91,334 patients have received convalescent plasmas from 42 PMI Blood Donor Units across Indonesia for COVID-19 therapy treatment at the hospital
- More than 7,000 people have been vaccinated at the vaccination centre at PMI NHQ
- As many as 1,284 pieces of community feedback have been received through various PMI’s channels including established hotlines, radio shows, and social media
- In RCCE, a total 13 podcasts with various COVID-19 topics have been broadcasted with approximately 228,000 listeners reached, along with 20 radio talk shows that have been broadcasted reaching approximately 3,125,000 people. In addition, more than 70,000 pieces of IEC printed materials such as posters and banners have been distributed
- Key messages encouraging people to stay at home and self-isolate with care have been broadcast by SMS to approximately 300,000 people in Java and Bali Provinces
- A total of 14 protocols and 9 SOPs have been developed to ensure productivity while safeguarding its personnel and imposed throughout the HQ and Branches.

- its facilitation of inter-institutional coordination roles combined with its local presence across the territory
- investments in, and the development of, gendered and diverse skilled and organised community based volunteers
- a zest for innovation
- the development of surge capacities and systems that mean that most local disasters are managed with local resources
- decentralisation of management and of emergency response.
**THE FUNDAMENTAL PRINCIPLES OF THE INTERNATIONAL RED CROSS AND RED CRESCENT MOVEMENT**

**Humanity**
The International Red Cross and Red Crescent Movement, born of a desire to bring assistance without discrimination to the wounded on the battlefield, endeavours, in its international and national capacity, to prevent and alleviate human suffering wherever it may be found. Its purpose is to protect life and health and to ensure respect for the human being. It promotes mutual understanding, friendship, cooperation and lasting peace amongst all peoples.

**Impartiality**
It makes no discrimination as to nationality, race, religious beliefs, class or political opinions. It endeavours to relieve the suffering of individuals, being guided solely by their needs, and to give priority to the most urgent cases of distress.

**Neutrality**
In order to enjoy the confidence of all, the Movement may not take sides in hostilities or engage at any time in controversies of a political, racial, religious or ideological nature.

**Independence**
The Movement is independent. The National Societies, while auxiliaries in the humanitarian services of their governments and subject to the laws of their respective countries, must always maintain their autonomy so that they may be able at all times to act in accordance with the principles of the Movement.

**Voluntary service**
It is a voluntary relief movement not prompted in any manner by desire for gain.

**Unity**
There can be only one Red Cross or Red Crescent Society in any one country. It must be open to all. It must carry on its humanitarian work throughout its territory.

**Universality**
The International Red Cross and Red Crescent Movement, in which all societies have equal status and share equal responsibilities and duties in helping each other, is worldwide.
The International Federation of Red Cross and Red Crescent Societies (IFRC) is the world’s largest humanitarian network, with 192 National Red Cross and Red Crescent Societies and around 14 million volunteers. Our volunteers are present in communities before, during and after a crisis or disaster. We work in the most hard to reach and complex settings in the world, saving lives and promoting human dignity. We support communities to become stronger and more resilient places where people can live safe and healthy lives, and have opportunities to thrive.