



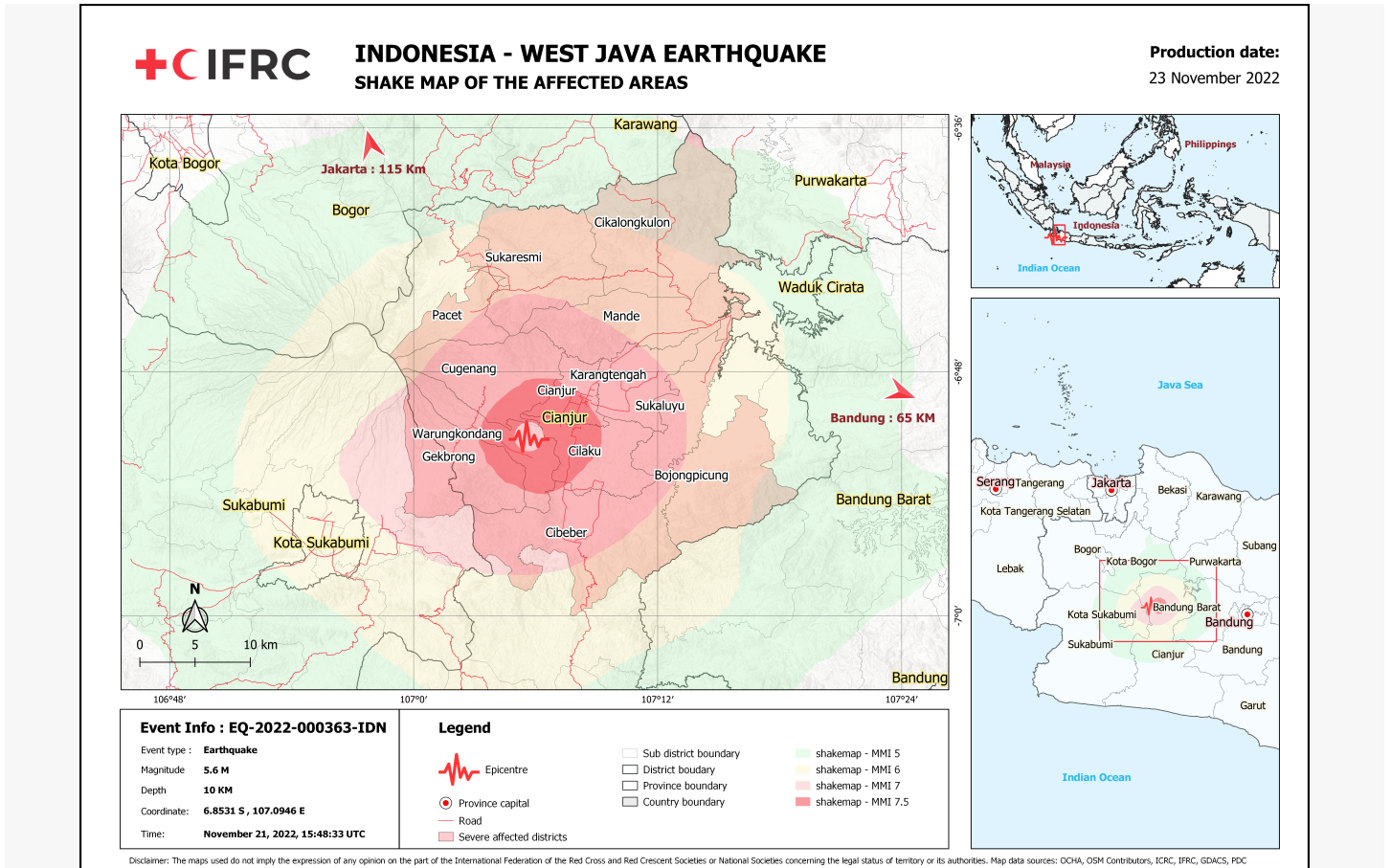
The Indonesian Red Cross (known as 'Palang Merah Indonesia' or PMI) teams are rehabilitating a damaged water pipeline in Cianjur, West Java. (Photo: PMI)

Appeal: MDRID025	Total DREF Allocation: CHF 794,131	Crisis Category: Orange	Hazard: Earthquake
Glide Number: EQ-2022-000363-IDN	People Affected: 2,200,000 people	People Targeted: 25,900 people	
Event Onset: Sudden	Operation Start Date: 2022-11-28	New Operational End Date: 2023-05-31	Total Operating Timeframe: 6 months

Targeted Areas: **Jawa Barat**

Major DREF donor include the Red Cross Societies and governments of Belgium, Britain, Canada, Denmark, German, Ireland, Italy, Japan, Luxembourg, New Zealand, Norway, Republic of Korea, Spain, Sweden and Switzerland, as well as DG ECHO and Blizzard Entertainment, Mondelez International Foundation, and Fortive Corporation and other corporate and private donors. The IFRC, on behalf of the National Society, would like to extend thanks to all for their generous contributions.

Description of the Event



What happened, where and when?

At 13:21:10 Western Indonesia Time (GMT +7) on Monday, 21 November 2022, an earthquake of magnitude 5.6 struck the Cianjur district in the West Java province. The earthquake's epicenter was situated at a depth of 10 km inland, specifically at 6.84 degrees South Latitude and 107.05 degrees East Longitude. The Indonesian Meteorology, Climatology, and Geophysics Agency (BMKG) confirmed that the earthquake did not trigger a tsunami warning. According to BMKG records, 445 aftershocks, varying in magnitude, have occurred since the November 2022 earthquake. The largest aftershock measured Magnitude 4.3, while the smallest registered at Magnitude 1.0.

In response to the earthquake's impact, the government declared a 30-day state of emergency from 21 November 2022 to 20 December 2022. Additionally, a 90-day recovery phase was declared following the end of the emergency phase, spanning from 21 December 2022 to 20 March 2023. The Government of Indonesia, through the Indonesian Disaster Management Authority or Badan Nasional Penanggulangan Bencana (BNPB), launched the Cianjur Emergency Response Plan followed by a recovery plan involving numerous technical ministries and non-governmental organizations..



PMI volunteers conducting a Hygiene Promotion session targeting schools and the community in an evacuation center. (Photo: PMI)

Scope and Scale

The earthquake had impacted a total of 117,068 individuals. Among them, 114,683 people were evacuated to over 190 evacuation centers across the Cianjur district. Tragically, there were 338 reported fatalities, and a further 7,193 individuals sustained injuries.

A month after the earthquake, evacuated communities started to return to their homes and commenced their activities aimed at recovery within their villages. Based on the impact report, it was determined that over 60,000 housing units had suffered damage, with 14,678 of these houses being severely impacted and rendered unsuitable for habitation. Consequently, more than 14,000 households found themselves compelled to continue residing in evacuation centers, uncertain of when they could return home. Apart from the housing repercussions, the earthquake also inflicted harm upon water resources, schools, and offices while also inciting landslides in the region.

At the national level, BNPB led the emergency response activity supported by numerous technical ministries and other authorities. In addition, there were a total of 1,076 non-governmental organizations and private donors providing assistance and support to the affected household. In parallel, the International Federation of Red Cross and Red Crescent Societies (IFRC), through the Indonesian Red Cross (PMI), sought emergency funding from the Disaster Response Emergency Fund, an available source of rapid financial aid tailored for 6-months emergency response action in Shelter, Health, WASH (Water, Sanitation and Hygiene), Multi-purpose Cash Grant, CEA (Community, Engagement and Accountability) and PGI (Protection, Gender and Inclusive) sector.

National Society Actions

Have the National Society conducted any intervention additionally to those part of this DREF Operation?

No

Please provide a brief description of those additional activities

-

IFRC Network Actions Related To The Current Event

Secretariat	To support the National Society (Indonesian Red Cross/PMI) in response to the situation, IFRC allocated support from two different funding mechanisms that is Contingency Fund supported by DFAT and Australian Red Cross and Disaster Response Emergency Fund. In addition to emergency funding support, IFRC also provided technical support in Disaster Management, health, PGI (Protection, Gender, and Inclusion), CEA (Community Engagement and Accountability), Shelter, Procurement, Finance, Planning, Monitoring, Evaluation and Reporting (PMER) and Finance.
Participating National Societies	Several PNS pledged their support bilaterally to PMI. Specifically, the Singapore Red Cross Society provided USD 50,000, while the Hong Kong Red Cross provided logistics and emergency response funds. All support mentioned is contributed directly to PMI Cianjur Emergency Response and Recovery plan.

ICRC Actions Related To The Current Event

In the emergency phase, the International Committee Red Cross (ICRC) provided technical support to PMI in Restoring Family Links services at the evacuation center and emergency command post. In addition, ICRC also provided technical support on dead body management.

Other Actors Actions Related To The Current Event

Government has requested international assistance	No
National authorities	<p>In response to the event, the Indonesia Disaster Management Authority assumes the crucial role of being the Emergency and Recovery Coordinator on behalf of the government of Indonesia. Mandated to guide the nation through the tumultuous aftermath of catastrophes, this authority acts as the central role, coordinating a comprehensive response and recovery effort. By mobilizing technical expertise and employing a comprehensive strategy, the Indonesia Disaster Management Authority ensures seamless integration and coordination of all disaster management components, facilitating a swift and effective response to disaster emergencies that threaten community well-being.</p> <p>Supporting the BNPB or Badan Nasional Penanggulangan Bencana (National Disaster Management Authority), various technical ministries participate in response task forces. Within these task forces, the Ministry of Public Housing and Public Works is responsible for rehabilitating damaged infrastructure, such as roads, bridges, and debris clearing activities during the emergency response phase. In the recovery phase, they continue this work by constructing permanent shelters for relocated households.</p> <p>The Ministry of Social Affairs also provided support by mobilizing logistics and operational funding directed to social authorities at the district level. This support aimed to supplement the emergency funding made available by the President of</p>

Indonesia and maintain community welfare in the area.

The search and rescue authority supported evacuation efforts during a 14-day implementation period. Police and military services also contributed additional human resources by mobilizing personnel and heavy equipment.

At evacuation centers, the police and military forces deployed their personnel to maintain security and safety within the camps. The National Water Company and National Electrical Company provided water and power at these centers. In the recovery phase, aligned with the establishment of permanent shelters, water, sanitation, and power management were provided at these locations.

At the field level, the Cianjur Regional Disaster Management Authority or BPBD Cianjur led and coordinated response and recovery activities across the sub-district, including supervising evacuation centers. Technical authorities such as the health authority, social authority, fire brigade, and Cianjur district apparatus also provided support to the affected community. BPBD not only communicated and coordinated closely with technical authorities but also ensured that all activities were aligned with the Cianjur district government's short to medium-term development plan.

In addition to human resources, technical expertise, and funding, various ministries distributed relief items in the form of food, clothing materials, household items, shelter materials, and other emergency supplies.

UN or other actors

Numerous non-governmental actors participated in the established national cluster. There were various technical national clusters, including Search and Rescue, Protection and Displacement (which also included the Cash and Voucher sub-cluster), Health cluster, Logistics cluster, Education cluster, infrastructure and facilities cluster, recovery cluster, and security cluster.

Additionally, numerous other actors were present at both the national and field levels. International organizations such as the United Nations (UN) and the ASEAN Coordinating Centre for Humanitarian Assistance on Disaster Management (AHA Centre) supported the Government of Indonesia. International Non-Governmental Organizations like the Adventist Development and Relief Agency, World Vision Indonesia, Cooperative for Assistance and Relief Everywhere (CARE), Catholic Relief Service, Oxfam, and many others were involved. Alongside organization-based support, private donors and individuals provided and distributed relief items and food in Cianjur. By the conclusion of the operation, there were 1,078 organizations, including the PMI, actively responding to the emergency in Cianjur.

Are there major coordination mechanism in place?

At the national level, coordination occurred within the established Technical Clusters. There are eight National Clusters regulated under the Disaster Management law. Each cluster was coordinated by one technical ministry or authority and comprised other technical ministries, non-governmental organizations, academia, and other stakeholders.

The cluster approach was adapted to the district level to streamline coordination and communication from the national level to the district level. At the district level, BPBD acted as the lead in response and recovery, followed by district-level technical authorities implementing their roles. As part of the cluster, PMI Cianjur district actively reported and updated their activities through the cluster.

Needs (Gaps) Identified



Water, Sanitation And Hygiene

Based on the assessment report, the earthquake caused damage to the water and sanitation system in the Cianjur district. It not only damaged water infrastructure but also triggered secondary effects such as substantial debris, mudslides, and landslides, contaminating vital water sources like rivers and wells. This further exacerbated the water crisis, presenting the community with the dual challenge of repairing damaged infrastructure and addressing contamination to ensure a safe and reliable water supply.

As people sought refuge in evacuation centers, they encountered another pressing issue: the lack of adequate water and sanitation facilities. Many of these premises were ill-equipped to handle the needs of a large number of displaced individuals. Consequently, access to clean water and proper sanitation was limited, heightening the risk of waterborne diseases and compromising hygiene. This not only affected the physical well-being of the evacuees but also added to the overall challenges of recovery in the wake of the earthquake.

The earthquake's impact highlighted the dire conditions in evacuation centers, where evacuated households lacked essential household and hygiene items necessary for cleanliness and health.

Following the emergency phase, efforts focused on addressing the longer-term water and sanitation needs of the affected areas. Rehabilitation of damaged water pipelines began to restore access to clean water, but the process proved to be costly and resource-intensive. Moreover, while the national water company aimed to provide water, sanitation, and hygiene systems within the shelter units at the permanent shelter location, the available water supply often fell short of meeting the community's demands, revealing persistent challenges in restoring essential services after a disaster.



Health

The immediate aftermath of the earthquake was marked by a distressing scene as reports poured in about a substantial number of injuries and fatalities in the affected area. The earthquake caused a trail of destruction, resulting in buildings crumbling and lives being disrupted. Amid the chaos, medical professionals acted swiftly, evacuating all inpatients to the nearest safe points mere minutes after the quake hit. Their rapid response helped prevent further casualties, showcasing the importance of preparedness in the face of such disasters.

The earthquake's impact was not limited to physical injuries and loss of life. The widespread damage to infrastructure and medical facilities in the region meant that local medical resources were damaged and could no longer be used. As a result, medical resources including equipment, medicine, vehicles, and human resources were mobilized from neighboring areas to supplement the relief efforts. Supplies, medications, and medical teams had to be brought in from outside Cianjur to aid the injured and ensure that healthcare services could be maintained despite the challenges posed by damaged logistics.

Shaken by the disaster and concerned for their safety, community members sought refuge at evacuation centers, where they hoped to find a semblance of safety, especially from aftershocks. While dealing with their own physical injuries and the loss of family members, survivors also had to grapple with the traumatic experiences they endured. Providing Mental Health and Psychological Support and counseling became integral parts of the recovery process, as healing the emotional wounds was as crucial as tending to the physical ones.

As time passed and the situation continued to improve, local healthcare services began regaining their capacity and resuming normal operations. The affected communities could access the medical attention they required since the disaster struck. However, the long-term consequences of the earthquake's impact became evident. Some survivors faced ongoing medical challenges that necessitated sustained and consistent care. This highlighted the need for a comprehensive approach to recovery that extended beyond the initial emergency phase, ensuring that those who had suffered long-term injuries would continue to receive the medical support they needed to rebuild their lives.



Shelter Housing And Settlements

During the initial phase of the emergency response, a staggering 190 evacuation centers emerged across the expansive Cianjur district, offering refuge to over 114,000 individuals displaced by the earthquake. These evacuation centers varied from open fields to communal infrastructures such as schools, mosques, government buildings, and even rice fields. Despite their best intentions, these facilities proved to be less than ideal for mass sheltering, lacking the necessary provisions for proper living conditions. Stranded within these poor living environments, evacuated households endured almost a month in emergency shelter accommodations.

As time passed, a series of support and assistance were distributed within the evacuation camps. Household items and assistance gradually eased the burden on the displaced families. However, communities remained worried about their abandoned homes. Evacuated households would travel back to their damaged houses during the day to gather their belongings. Lastly, security and safety in the evacuation center became concerns as evacuated households had to share limited space with other families without privacy.

Transitioning from the emergency phase, the Indonesian government instructed all humanitarian organizations in Cianjur not to provide temporary shelters to the affected households. Temporary shelter was deemed unsustainable and not fitting for the long-term development plan. To address shelter and living gaps, the national government, working with local authorities, initiated a shelter compensation program. Under this arrangement, cash assistance would be granted to affected households, with the amount determined by the extent of damage each household had incurred due to the earthquake. While this move aimed to provide more targeted assistance, it left those with completely destroyed homes in a precarious situation.

To meet the needs of households who had lost their houses due to the earthquake, the Indonesian government planned to construct 200 units of permanent housing for 200 households. The Government aimed to conclude the permanent shelter construction by June 2023. However, as of the reporting period, not all constructed shelters are equipped with electrical power, sanitation, and water management systems yet. Consequently, there are households waiting at the evacuation center until the permanent shelters are ready. However, as the situation at the evacuation center did not improve, more households left to seek shelter with their relatives.



Multi purpose cash grants

Based on rapid assessment results, despite the impact of the earthquake, markets were still functioning in Cianjur. Additionally, markets around the affected area supported the impacted local market by providing additional goods and items. Aside from the market, other business infrastructures, such as banks, post offices, government offices, and others, were also operational. However, access in and out of the affected area remained a challenge for the first two weeks after the earthquake.

Following the earthquake in Cianjur, people began evacuating themselves and remained at evacuation centers for an uncertain period. PMI provided multipurpose cash grant (MPCG) assistance, covering education, health, gender-based violence (GBV) prevention services, MHPSS, shelter, utilities, WASH, transportation, and communications. The MPCG allows the community to prioritize their needs while maintaining their dignity.



Community Engagement And Accountability

During the initial stages of the emergency response, the lack of mechanisms for community feedback and engagement across organizations resulted in assistance primarily relying on internal rapid assessment reports. This situation led to gaps, overlapping support, and inefficiencies, leaving some affected households without the intended support. Moreover, it resulted in inefficiencies and support not reaching the intended targets.

As the overall situation gradually improved, the National Disaster Management Agency (BNPB) recognized the importance of a more organized and community-centric approach. To address these concerns, BNPB issued instructions for humanitarian organizations to operate based on geographical areas, establishing a community feedback mechanism. This instruction aimed to ensure that all community groups received appropriate support and assistance.

Following these instructions, PMI took proactive steps to enhance community engagement and collect feedback. PMI established hotlines at the field and national levels, enabling affected individuals to communicate their needs and concerns directly. Additionally, PMI engaged with the community through social media platforms to capture real-time feedback.



Protection, Gender And Inclusion

As mentioned in the previous chapter, security and safety at the evacuation center were among the main concerns. Evacuated households had to share limited space with other families and live without any privacy. In these living conditions, women and children were among the vulnerable groups exposed to Sexual and Gender-Based Violence.

Due to their limited ability or access to information and support at the evacuation center, women and children, including the elderly and people with disabilities, were left untouched and received no assistance. After the earthquake, children lost their friends and their daily activities, such as playing and learning at school. Additionally, they might have lost personal belongings such as toys, dolls, or even diaries. This situation also impacted women, the elderly, and people with disabilities, who were left with limited resources after the earthquake, making it harder for them to access professional support.

Operational Strategy

Overall objective of the operation

The main objective of this relief operation was to provide targeted support to 25,900 people (7,000 households) directly impacted by the earthquake to meet their immediate needs in the areas of shelter, health, WASH, and multipurpose cash assistance while ensuring PGI's mainstreaming on all the sectoral intervention.

By the end of the operation, PMI managed to reach a total of 66,199 people (31,263 males and 34,936 females) by providing services and support in Shelter, Health, WASH, immediate needs through Cash and Voucher Assistance and developing community disaster awareness and knowledge through series of promotion session.

Operation strategy rationale

In the initial phase of operations, the primary objective was to enable the PMI to deliver essential emergency services and assistance to the households affected by the disaster in the Cianjur district. This comprehensive response aimed to address the diverse needs of the impacted population and facilitate their recovery. Among the vital services provided were shelter assistance through Cash and Voucher programmes, targeting 1,000 households that had lost their houses. This approach not only offered immediate support but also allowed the affected families to make choices that best suited their individual situations.

In the health sector, PMI's response included search and rescue operations, first-aid services, mobile clinics, ambulance services, psychosocial support, and health promotion within the community. By offering this array of health support, PMI addressed both the physical and psychological well-being of the affected individuals, recognizing the relation of these aspects in times of crisis. By the end of the operation, a total of 16,004 people (6,977 males and 9,027 females) benefited from PMI's health services and support.

Furthermore, PMI took steps to tackle the WASH issues triggered by the disaster. Distribution of hygiene kits, clean water, hygiene promotion activities, and pipeline rehabilitation initiatives collectively aimed to ensure that the communities had access to safe and clean water, a fundamental necessity for their recovery and resilience. PMI managed to reach 11,310 people (4,505 males and 6,905 females) through the WASH intervention.

As the situation in the Cianjur district gradually improved over time, there was a noticeable shift in the affected communities' needs. The initial focus on immediate emergency needs began to shift towards medium and long-term needs. Recognizing this evolving scenario, PMI undertook a review of its response plan. Adjustments were made to ensure that the interventions aligned closely with the updated conditions and the changing needs of the affected population.

For instance, additional targeted communities were identified and included in the multi-purpose cash programme. This revision was prompted by the identification of a data gap in the initial assessment and further coordination with local authorities. By

providing shelter support and immediate needs through Cash and Voucher Assistance, PMI managed to support a total of 13,785 people (7,031 males and 6,754 females). On the other hand, due to the needs of clean water at the evacuation centers and surrounding areas, water trucking activities continued longer than initially planned. Consequently, water trucking operational costs were higher than initially planned.

To ensure a cohesive and effective response, PMI aligned all the services provided with the IFRC standard guidelines for PGI and CEA minimum standards. By incorporating these standards, PMI aimed to optimize the impact of its response and contribute to the overall recovery of the Cianjur district.

Targeting Strategy

Who will be targeted through this operation?

The operation supported the needs of 25,900 people (7,000 households) directly impacted by the earthquake in the district of Cianjur, West Java Province, which was most heavily impacted by the earthquake.

Explain the selection criteria for the targeted population

The general selection criteria were households severely affected by the earthquake in Cianjur district, West Java province, Indonesia. Later on, BNPB assigned PMI to support the community in Ciputri, Nagrak, and Benjot villages.

In addition, to ensure that interventions are aligned with both its own and IFRC minimum standards for protection, gender, and inclusion in emergency programming, the PMI will also apply the following vulnerability criteria. Each assisted household who was assisted from the services of this operation must at least meet one of the following vulnerability criteria.

- Families who have been displaced
- Pregnant or lactating women
- Female-headed households
- Elderly people who live by themselves
- Families caring for a person with a disability

Total Targeted Population

Women	7,770	Rural	0%
Girls (under 18)	5,180	Urban	0%
Men	7,770	People with disabilities (estimated)	8%
Boys (under 18)	5,180		
Total targeted population	25,900		

Risk and Security Considerations

Please indicate about potential operation risk for this operations and mitigation actions

Risk	Mitigation action
Staff and volunteer health: risk of contracting COVID-19 through clinical and community-based activities in the response	<ul style="list-style-type: none"> • Information and training for staff and volunteers • Providing personal protective equipment (PPE) and orientation on the proper use and disposal of PPE for all frontline volunteers and staff in high-risk affected areas. • Training on COVID-safe implementation for PMI staff and volunteers.

	<ul style="list-style-type: none"> • Minimize non-essential travel as written in the PMI and IFRC Business Continuity Plan (BCP).
More weather disturbances will impact the same geographical areas causing increased flooding and landslides	<ul style="list-style-type: none"> • Continuous monitoring of weather systems and contingency planning with PMI branches in the affected areas so that activities can be initiated as quickly as possible to lessen the impact of possible flood conditions. • Expand the operation under a response plan, with the inclusion of additional emergency response activities.
Access restriction	<ul style="list-style-type: none"> • Keep donors and stakeholders informed on the challenges and potential operational delays.
Reputation damage that may be incurred through misinformation or other means	<ul style="list-style-type: none"> • PMI activity planning to involve greater collaboration with communities. • PMI to monitor community perceptions of its operation and address any issues accordingly. • PMI remains vigilant for any activity, including communication, that may breach operational protocols. • Ensure all volunteers and staff understand Red Cross principles, values, and guidelines and operationalize them through their activities.
Increase of COVID-19 cases in the evacuation centres	<ul style="list-style-type: none"> • Adhere to 3M protocols – wearing masks, maintaining safe distancing, and handwashing in place. • Mask distribution in evacuation centers.

Please indicate any security and safety concerns for this operation

The success of this operation relied significantly on the support and engagement of volunteers. These volunteers played a pivotal role in carrying out a wide range of tasks, including conducting assessments, engaging with the affected communities, coordinating with external partners, operating equipment, and providing essential services. While their contributions were invaluable, it's important to recognize that the nature of their involvement exposed them to a series of risks. Operating in the field, they faced potential dangers such as road accidents, incidents, conflicts, and criminal activities. Their commitment to assisting in various activities placed them at the forefront of the response, emphasizing their dedication to helping others amidst challenging and potentially hazardous circumstances.

Their involvement wasn't limited solely to physical challenges but also encompassed their health conditions. Health-related hazards, including exposure to diseases, fatigue, and overall well-being, added to the complexity of their engagement. The demanding nature of disaster response, combined with potentially adverse conditions, underscored the need for proper support and resources to ensure the safety, health, and overall welfare of these volunteers.

Additionally, the uncertain nature inherent in emergency situations further heightened concerns for the security and safety of all personnel in the field. The combination of ongoing aftershocks, the spread of misleading or false rumors, and the potential for miscommunication could create an atmosphere of uncertainty, potentially leading to conflict situations. Addressing these challenges required a well-coordinated approach that considered not only the needs of the affected communities but also the well-being and security of the volunteers who were at the forefront of the response efforts. To mitigate the negative impact and/or risks, all volunteers involved in the operation were equipped with health insurance, necessary personal protective equipment (PPE), and received training, briefings, and debriefings throughout the operation.

Implementation



Environmental Sustainability

Budget: CHF 6,923

Targeted Persons: 25,900

Assisted Persons: 25,000

Indicators

Title	Target	Actual
# of people reached with DRR messages	29,500	25,000

Narrative description of achievements

As soon as the emergency phase ended, PMI and IFRC staff conducted further assessments to determine disaster risk reduction issues in the three targeted villages, namely Nagrak, Ciputri, and Benjot. The assessment identified below main points:

- Communities in the three villages have limited disaster knowledge, recognizing only three main disasters occurring in their village: earthquakes, landslides, and strong winds.
- They are unaware whether their village has an established mitigation plan regarding these identified disasters.
- Specifically concerning earthquakes, there were no preparedness or prevention measures available in the area, such as established evacuation zones/signs or earthquake simulations within the community.
- The community was not aware of standardized building codes necessary to construct safer shelters.

Based on the assessment results and further coordination, PMI decided to continue the Disaster Risk Reduction (DRR) campaign through a series of radio shows, public advertisements, and social media. This decision stemmed from the fact that the targeted community was scattered between evacuation zones, villages, and their relatives' houses, making conducting face-to-face sessions with the community challenging. The DRR campaign through radio shows took place on 19 May 2023, via Cianjur FM. Fajar Aciana (PMI Cianjur - Field Coordinator) disseminated materials covering below topics. The radio show reached over 25,000 listeners, extending beyond Cianjur district to areas such as Sukabumi, West Bandung, and Purwakarta districts.

- Preparing for, mitigating, responding to/evacuating, and reducing earthquake impact.
- The Red Cross's role before, during, and after disasters.
- The volunteers' role before, during, and after disasters.
- The community's vital role as first-responders in a disaster.

Noting the absence of a Community-based Team (CBAT) established in the three targeted villages, PMI Cianjur established a CBAT team consisting of community members. This team will receive sets of training in Red Cross and Red Crescent movement, first-aid, disaster simulation, and be equipped with necessary Personal Protective Equipment (PPE). These teams are part of the exit strategy, remaining within the village and acting as the first emergency responders.

As the CBAT training took place beyond the IFRC-DREF implementation period, the training was held by mobilizing PMI resources. It was facilitated by PMI West Java staff, and all the materials were provided by PMI NHQ to ensure a standardized curriculum was maintained for all newly established CBATs.

Lessons Learnt

- Close coordination with the government is necessary to ensure that the messaging aligns with the government's long-term plan.
- Continuous support and maintenance are essential to uphold CBAT knowledge and ensure their ongoing active engagement.
- CBAT should be integrated into the village's mitigation plan to access funds readily available for village use

Challenges

- Due to the emergency circumstances, the community was not actively engaged with the DRR campaign or messaging. They were more interested in information about relief distribution, shelter compensation, and cash distribution.
- Although shelter construction standards were available for the area, these standards were not consistently applied throughout the region.



Protection, Gender And Inclusion

Budget: CHF 17,040

Targeted Persons: 25,900

Assisted Persons: 66,369

Indicators

Title	Target	Actual
# of sectoral or PGI assessments conducted using the PGI Minimum Standards	4	4
# of people trained on implementing the PGI Minimum Standards	300	120
# of people reached by PGI services.	25,900	66,369

Narrative description of achievements

Throughout the operation, PMI Cianjur ensured that all recipient lists were segregated by sex and age. However, due to the emergency circumstances, this segregated data were not consistently implemented across sectoral reports. To address this issue, PGI orientations or refreshers were conducted for all PMI Cianjur volunteers involved in the operation. A total of 120 PMI Cianjur volunteers (72 males and 48 females) participated in the orientation, facilitated by PMI NHQ staff and IFRC PGI focal point. The materials covered in the orientation included:

- Introduction to Protection, Gender, and Inclusion
- Basics of PGI context (Gender, Protection, and Implementation)
- Gender-based Violence
- PGI Minimum Standards such as dignity, access, participation, and safety.

While providing services at the evacuation center, PMI disseminated hotlines, call centers, and a WhatsApp Group available to the community. This allowed the community to report issues, including Gender-Based Violence (GBV), complaints, and specific support requests to PMI. As an auxiliary to the government, all sensitive feedback received was forwarded to the Cianjur Women Empowerment and Child Protection Authority for further formal investigation and action. However, within the 6-month implementation period, PMI did not receive any GBV reports from the community.

After the emergency phase ended, PMI conducted sectoral assessments to gather updated information and needs beyond the emergency phase. With support from PMI and IFRC technical staff from WASH, Livelihood, Cash/Shelter, and Health sectors, PMI volunteers developed assessment and analysis tools. PMI integrated PGI across all tools, methods, and analysis, ensuring that all community groups were involved, and their voices heard in the report.

In addition to internal capacity building, the PGI component was incorporated into external communication materials through two separate podcast sessions broadcasted on YouTube. The first session discussed the PGI concept in Red Cross and Red Crescent Societies with PMI NHQ staff as spokesperson. The second session focused on gender awareness and equality, presented by IFRC staff. All materials are available on PMI Cianjur's YouTube channel.

Throughout the implementation period, PMI ensured that all volunteers conveyed PGI-related messaging to beneficiaries, emphasizing the importance of inclusion for all community groups in the planning and preparation process. By the end of the operation, PMI reached 66,369 people (31,263 males and 34,936 females) through Shelter, WASH, Health, and MPCG implementation over the 6-month period.

Lessons Learnt

- Continuous PGI session is needed to maintain the level of PGI knowledge and understanding.
- PGI dedicated staff is needed to facilitate and maintain continuous PGI implementation beyond emergency operation and if possible, across all services provided in the future.

Challenges

- As mentioned earlier, PMI Cianjur was still facing challenges in collecting SADD data, especially during the emergency response period. Continuous coaching and orientation were provided to volunteers to ensure the maintenance of reporting quality.
- While PGI materials and approaches were introduced to the volunteers during the emergency operation, there was a common understanding among the volunteers that PGI implementation was only necessary during service provision in an Emergency Operation context. The awareness of PGI within the PMI Cianjur organization needs constant development, which can be achieved by appointing dedicated PGI staff. With dedicated staff, PGI can be mainstreamed not only in services but also within the organization.



Community Engagement And Accountability

Budget: CHF 6,390

Targeted Persons: 25,900

Assisted Persons: 25,000

Indicators

Title	Target	Actual
# of complaints or feedback about the RCRC operation which receive	75	293
# of staff, volunteers and leadership trained on Community Engagement and Accountability (disaggregated by staff / volunteers / sex).	75	5

Narrative description of achievements

Throughout the operation, the Community Engagement and Accountability (CEA) component was implemented in various ways. Internally, with support from the PMI National Headquarters, PMI Cianjur established a feedback mechanism during the early emergency response phase. Over time, CEA was integrated into the sectors, and hotlines and helpdesks were opened during aid distribution. These remained operational until the operation ended in May. Over the six-month implementation period, PMI received 293 pieces of feedback related to its services from the community.

- <https://edwinreinhart.github.io/dref-cianjur/cianjur-feedback-received-from.png> (Source of feedback received from the community)
- <https://edwinreinhart.github.io/dref-cianjur/cianjur-feedback-gender.png> (Feedback gathered based on gender)
- <https://edwinreinhart.github.io/dref-cianjur/cianjur-type-of-feedback.png> (Type of Feedback received)

As mentioned in the shelter section, CEA played a crucial role in reducing friction between the community, humanitarian actors, and the government. PMI recorded five rumors, including one regarding shelter cash support. Typically, the community provides feedback when encountering PMI volunteers during activities or posts it on PMI Cianjur and PMI NHQ social media accounts. All feedback received or posted to the PMI NHQ account is recorded in the PMI NHQ CEA dashboard. Meanwhile, in Cianjur, CEA staff records and reports it to the field coordinator for further action.

PMI Cianjur also conducts rumor tracking to ensure accountability and proper feedback management provided to the community. One false rumor tracked by PMI Cianjur involved an IDR 100,000 or CHF 5 deduction from shelter cash assistance received by the

intended beneficiary. PMI Cianjur reported the rumor internally and escalated it to the PMI NHQ CEA team. After investigation, it was confirmed that the rumor was false and spread by non-PMI beneficiaries to create friction between the community and PMI as a humanitarian organization. The report and rumor are now considered closed.

Besides the hotline and helpdesk services, PMI Cianjur engaged in mass communication activities via radio shows, podcasts, and news articles. The radio show, aired by Cianjur FM, covered various topics, such as:

- Cash and Voucher Assistance in Cianjur
- The negative effect of Asbestos
- Post-disaster Disease Prevention
- Red Cross and Red Crescent role in the Humanitarian world
- Disaster Risk Reduction
- Indonesian Red Cross Role in Cianjur Earthquake

Approximately 25,000 listeners tuned in, reaching areas as far as Sukabumi, West Bandung, and Purwakarta districts. PMI received 53 feedback via WhatsApp and 12 phone calls regarding the radio show sessions. Using popular social platforms like YouTube, PMI Cianjur conducted six podcast sessions discussing their activities over the last six months. Several topics discussed in the session were as follows:

- PGI in Red Cross and Red Crescent society
- Cash and Voucher assistance
- Gender equality
- Inclusive shelter
- Post-disaster Disease prevention
- Indonesian Red Cross role in Cianjur Earthquake response

Initially, PMI NHQ mobilized two experienced CEA staff to conduct rapid assessments and establish PMI Cianjur's CEA services. After this setup, CEA was integrated across services including WASH, Health, and shelter provided to the community. As part of the exit strategy for PMI Cianjur, one CEA orientation session was provided to three available and two newly recruited volunteer PMI Cianjur.

Trained CEA volunteers continued the implementation in Cianjur Ops from the emergency phase until the operation's end. Although the training was provided to only five volunteers, the technical material extended from these trained volunteers to the field community and within the technical staff during weekly briefings. Meanwhile, PMI NHQ monitored the implementation and offered technical advice to the CEA team in the field.

Lessons Learnt

- Throughout the implementation period, PMI received good and active engagement from the community. This will be followed up by PMI Cianjur by continuing the activity in their next activity.

Challenges

- At the beginning of implementation, PMI Cianjur had limited experience conducting mass-communication activity involving radio, social media and journalist. Volunteer had to rely on technical support provided by PMI NHQ. Support was provided remotely due to workload at the NHQ level.
- There was limited radio and news platform options available within the Cianjur area, while major radio station and news platform are based in big cities e.g. Bandung located 64 kilometers away from Cianjur.



National Society Strengthening

Budget: CHF 37,808

Targeted Persons: 300

Assisted Persons: 170

Indicators

Title	Target	Actual
# of established Movement Coordination Mechanism in-country	6	3
# of volunteers provided with equipment for protection, safety and support (e.g. PSS).	300	170

Narrative description of achievements

At the beginning of the response, PMI National Headquarters (NHQ), coordinated the operation while providing liaising service to all international organizations. PMI Cianjur district led the implementation and monitored the operation on a daily basis. In the emergency period, coordination took place at Cianjur as PMI NHQ staff were deployed to support PMI Cianjur directly.

However, as the situation improved and PMI NHQ staff returned to their base, coordination took place once every month. The operation was started with the visit and announcement from the PMI Chairman in November 2022, followed by scheduled coordination meetings every month, and concluded in May through a lesson learn workshop in Jakarta.

All volunteers equipped with necessary PPE including boots, helmet and gloves for the WASH team, Facemask, gloves, hazmat and medical equipment for mobile clinic team. To ensure visibility, each of volunteers and staffs equipped with operational vest and to ensure wellbeing, MHPSS sessions were also conducted and facilitated by PMI NHQ staff to Cianjur volunteers.

Lessons Learnt

- Emergency response operation management training was vital to provide essential knowledge and skills in managing emergency operations.
- Close monitoring and supervision were required to maintain quality finance and procurement reporting.

Challenges

- Due to the nature of emergency response, coordination across multi-level was challenging. PMI Cianjur was overwhelmed as they acted as a disaster responder and were responsible for delivering quality service. While they also had to develop an emergency response plan and strategy.



Secretariat Services

Budget: CHF 10,650

Targeted Persons: 25,900

Assisted Persons: 66,369

Indicators

Title	Target	Actual
% of financial reporting respecting IFRC procedures	100	100

Narrative description of achievements

IFRC Country Cluster Delegation (CCD) Jakarta provided technical support to PMI at NHQ to the district level. Technical staff in Disaster Risk Management, Health, WASH, CEA, PGI, Procurement, Cash, PMER, and Finance were deployed to Cianjur district to support planning, assessment, analyzing and reporting process. Field visits were conducted once every month while cash expertise was deployed longer dan more intensively to ensure smooth cash implementation on the field level. Besides technical

orientation, financial and procurement orientation was provided to enhance knowledge and ensure all implementations were supported with required supporting documents and aligned with the regulations.

Lessons Learnt

- Close monitoring was vital in order to run smooth implementation at the field level.
- Experienced and trained staff from neighboring area could be deployed and provided supervision on daily basis to the Cianjur district

Challenges

- To some extent, there were different standards used by PMI and IFRC. This caused implementation delays and reporting issues.
- Multi-layered reporting mechanism caused delays in the decision-making process and also when troubleshooting issues.



Shelter Housing And Settlements

Budget: CHF 267,351

Targeted Persons: 3,700

Assisted Persons: 4,321

Indicators

Title	Target	Actual
# of households provided with CVA assistance for shelter repairs or construction	1,000	1,000

Narrative description of achievements

As part of the overall PMI Earthquake response, this IFRC-DREF operation contributed by providing cash support to beneficiaries so they could build temporary shelters. Based on damage and impact secondary data provided by BNPB and local authority, there were more than 2,712 households who lost their houses due to the earthquake. However, by applying the sets of targeted communities criteria, PMI managed to identify 1,000 households who were eligible to receive the Shelter cash assistance.

Continuing the activity from January 2023 onwards, PMI Cianjur focused on providing shelter support to the affected community through Cash and Voucher Assistance. As BNPB assigned PMI to focus their activity in Nagrak, Benjot and Ciputri villages, PMI assessed communities that fall under the shelter assistance criteria, which were:

- Household lost their houses due to the earthquake.
- Household who are not listed in Government shelter compensation funds.
- Household who are not listed in other organization shelter intervention/program.
- Household who are listed under vulnerable criteria.

The final list of beneficiaries was published on 7 May 2023 and followed by a socialization session for the beneficiaries. PMI provided the necessary information regarding the provided support, including safe shelter messaging, such as the danger of using asbestos, and provided an emergency shelter prototype as a community reference. The distribution took place from 22 May until 26 May 2023. In total, 1000 households or 4,321 people (2,204 males and 2,117 females). Each of the households received IDR 3,500,000 or CHF 205, excluding the money order fee.

Pos Indonesia or Indonesian Postal Service supported PMI to distribute the funds through a money order mechanism. As PMI and Pos Indonesia have signed a 2-year MoU for Cash and Voucher distribution in Indonesia, the vendor selection process can be justified by the established MoU. To maintain transparency and accountability, the IFRC procurement and legal unit were involved by reviewing and accepting the MoU aligned with the IFRC procurement regulation.

As part of the activity, post-distribution monitoring was conducted in June. Even though PDM was conducted beyond the implementation timeframe, PMI committed to ensuring all services provided were accountable and received by the intended beneficiaries. (For details on Shelter Cash Grant Utilization, go to <https://edwinreinhardt.github.io/dref-cianjur/cianjur-shelter-fund-utilization.png>). PMI conducted PDM with 342 household samples out of 1,000 households receiving cash assistance. Please find below the findings from the PDM report:

- 205 respondents (59 per cent) utilized cash for shelter, such as purchasing construction materials, tools, and equipment.
- 188 respondents (54 per cent) utilized the cash for not only shelter purposes but also food items such as rice, cooking oil, eggs and etc.
- 107 (31 per cent) respondents utilized the cash for educational costs in addition to shelter purpose in addition to shelter purpose
- While the rest utilized the cash for health care, clothing materials, pregnancy and baby health care, supplements and etc.

During the emergency period, PMI also conducted a rapid assessment to identify the evacuation center established within the Cianjur district. Based on the assessment report, PMI focused on providing essential household items to households seeking refuge in evacuation centers. By identifying the immediate needs of those affected, PMI concentrated on addressing their immediate shelter requirements. This DREF operation did not list any in-kind distribution-related activity under the Shelter section, while other sources of funding covered in-kind distribution. Within the evacuation centres, PMI managed to distribute:

- 1,894 tarpaulins to support 2,273 households or 9,094 people (4,638 males and 4,456 females).
- 3,349 blankets to 2,857 households or 11,426 people (5,827 males and 5,599 females).
- 1,152 mattresses to 1137 households or 4546 people (2,318 males and 2,228 females).
- 340 beds and 165 emergency tents

In addition to distributing essential household items at the evacuation centres, PMI also identifies the needs beyond evacuation centres especially the community who remained near their damaged houses and damaged schools. PMI Cianjur, with support from PMI Grobogan district level, constructed 180 units of emergency shelter for 180 households or 724 people (Male 369, Female 355) in 15 villages across three subdistricts, namely Sukamulya, Nagrak and Babakankaret. As the earthquake also damaged numerous schools, PMI Cianjur constructed 46-unit emergency classrooms in two different locations, namely Kujang Wilaya Vocational School and Citamiang Elementary School. With the support from PMI, school activity may continue while reconstruction is ongoing. From November until 25 December 2022, Cianjur volunteers actively supported the implementation with the support of neighboring PMI volunteers from Jakarta, Central Java, and Banten Provinces.

Lessons Learnt

- Based on operation evaluation, PMI Cianjur agreed to standardize household items to be distributed per household. In the future, each of the targeted households will receive tarpaulins, blankets, and mattresses as essential shelter support packages per household.
- Even before the disaster happened, PMI Cianjur had established good relations with the local authority. Each response plan was communicated and reported to relevant stakeholders to ensure no overlapping or conflicting support was provided to the community. From the good relations, PMI received a lot of support in the form of endorsement, communication with the community, and engagement throughout the operation.

Challenges

- In the emergency period, household items were distributed one by one and not as packages. Therefore, it was hard to keep track of whether the same household received the same items or multiple items from the volunteers.
- Various humanitarian organization including PMI, had started to plan for temporary shelter construction for affected households. However, as the government instructed all humanitarian organization not to provide or construct temporary shelters, creating tension between humanitarian actors and their respective beneficiaries regarding the temporary shelter plan. To prevent any unnecessary tension among beneficiaries, volunteers actively engaged and communicated with the beneficiaries, explaining the intervention objectives, managing beneficiaries expectations and understanding the needs of beneficiaries. Through local shelter cluster coordination meetings with the Cianjur government, PMI conveyed community concerns and input to the government, especially on the temporary shelter plan. At the national level, PMI and IFRC, as part of the shelter cluster coordinator, played their role in advocating for the Government of Indonesia.
- There were also rumors stating that the government would not encash the shelter compensation to those who received shelter or cash support from non-governmental organization. However, the rumors were not true, as the government stated that all humanitarian support provided to the community in Cianjur was intended to support the community in recovering from the

disaster. In order to prevent and reduce conflict, the government instructed all humanitarian organizations to register and actively engage through established cluster group in Cianjur.

- Because of the false rumours (mentioned earlier), community were reluctant to communicate nor to be listed as PMI beneficiaries list as they were afraid that they will lose the government support. This was causing prolong delay of Shelter cash implementation in the operation.



Multi-purpose Cash

Budget: CHF 137,918

Targeted Persons: 3,700

Assisted Persons: 9,464

Indicators

Title	Target	Actual
# of households who successfully received cash for basic needs.	1,000	2,756

Narrative description of achievements

Initially, the support was aimed to provide immediate support to 1,000 households with lightly to moderately damaged houses. As they commonly sought shelter in an emergency tent near their houses, the support provided could offer additional coping capabilities for them. As the earthquake's impact was quite substantial, impact assessment took longer than expected.

Follow-up assessment took place in March 2023 by assessing secondary data provided by BNPB and local authorities. From the secondary data, there were 8,968 household that falls under PMI multi-purpose cash assistance (MPCA) target criteria living in Benjot, Ciputri, and Nagrak village. These villages were selected based on BNPB instruction to PMI. However, by applying PMI MPCA target criteria, PMI managed to select in a total of 2,756 households or 9,464 people (4,827 males and 4,637 females).

PMI managed to reach more people from the initial plan as there was additional funding gained due to the exchange rate. As PMI gained IDR 961 million or approximately CHF 56,529, they proposed to distribute the funds by reaching more beneficiaries through MPCA. Aligning with the initial plan, each of the targeted beneficiaries would receive IDR 1.5 million or CHF 88. With the additional funding, PMI could reach an additional 1,756 households in three villages.

In parallel with the shelter cash assistance distribution, the final target list was published in May 2023. A dissemination session was provided to the targeted communities a week before the distribution date. In the session, PMI volunteers disseminate the objective of the intervention, target selection criteria, amount of support that will be received by the beneficiaries, supporting documents needed to encash the money order, and the distribution location, date, and flow.

The distribution took place from 22 until 26 May 2023. As there were no overlapping assisted people between shelter cash and multi-purpose cash grants, the distribution was carried out in parallel. Following the distribution, post-distribution monitoring (PDM) was conducted in June 2023. Even though the PDM was conducted beyond the implementation period, there were no costs occurred beyond the implementation period. (for details on MPCA utilization, go to <https://edwinreinhardt.github.io/dref-cianjur/cianjur-mpcg-fund-utilization.png>)

PDM was conducted on 418 samples out of 2,756 households who received cash assistance. Below are the findings from the post-distribution monitoring report:

- Shelter was the most common sector identified. A total of 253 respondents (60 per cent) utilized cash for shelter purposes such as shelter materials, tools, equipment, and home appliances.
- Food items were the second common needs fulfilled by the support. In total, 232 respondents (55 per cent) utilized cash for food items such as rice, cooking oil, eggs, and other kitchen appliances.
- The education sector came third as 132 respondents (31 per cent) utilized the cash to cover educational costs such as books, uniforms, fees, and other school utensil.

- The rest of the respondents utilize the cash to cover for other purposes such as health care, health/pregnancy/baby/children health supplements, paying debts, and transportation.

For details on the outcome of the support, go to <https://edwinreinhardt.github.io/dref-cianjur/cianjur-mpcg-desired-output.png>.

From the combination of the Shelter and MPCA sample above, there was 22 per cent of the sample felt more secure as affected households could rehabilitate and repair their damaged houses. On the other hand, receiving support improves their sleep quality and improves food quality consumption as they are able to purchase house appliances and nutritious food. As their basic needs were met, it reduced their stress level and consequently improved their health conditions.

Lessons Learnt

- To support inexperienced branches in implementing cash activity and provide technical support on a daily basis, there should be cash-dedicated staff monitor and coordinating at the field level. Some materials taught in the orientation were hard to grasp without directly practicing them.
- Through socialization sessions and separate communication sessions with the volunteers, the tension in the community could be reduced and prevented.

Challenges

- As mentioned in the shelter section, due to the false rumors circulated within the targeted area, the community were reluctant to communicate or to be listed as PMI beneficiaries as they were afraid that they were not eligible to receive government shelter compensation fund. To avoid and prevent any negative tension between the community and the government, volunteers actively communicate and coordinate with relevant stakeholder each time activity conducted with the government and community. In addition, false rumor received are recorded, addressed and conveyed back to the community through established CEA (feedback mechanism)
- This cash assistance was the very first cash programme conducted by PMI Cianjur. There were no cash trained or experienced volunteer nor staff available within Cianjur area. PMI NHQ with the support from IFRC CVA staff facilitated Cash and Voucher orientation to 25 volunteers in Cianjur. Preparation took more than a month to prepare the orientation.
- There was a bit of tension between community who received shelter cash and multi-purpose cash grant as they received different amount of support even though they feel it should be distributed evenly. However, within the cash socialization session provided, community understood the key objective and justification behind the intervention. From Q&A session and provided IEC, all shelter and Multi-purpose Intervention key message disseminated to the community and relevant stakeholder.



Budget: CHF 177,323

Targeted Persons: 18,500

Assisted Persons: 16,004

Indicators

Title	Target	Actual
# of people reached with epidemic-related health promotion activities	3,000	8,955
# of people who receive mental health and psychosocial services in emergency situations from RCRC	3,000	6,041
# of people reached by other NS health service delivery in emergencies	2,000	16,004

# of people reached with Health and hygiene promotion campaigns	18,500	8,955
---	--------	-------

Narrative description of achievements

Throughout the operation, PMI provided services to 16,004 (6,977 males and 9,027 females) people through first aid services, psychological first aid, health promotion and ambulance services activities. As the health infrastructure and resource in Cianjur could not cope with the needs shortly after the earthquake occurred, PMI NHQ coordinated with neighbouring PMI province to mobilize their health personnel and equipment to Cianjur. Based on PMI NHQ instruction, PMI Bogor hospital also mobilized doctors, nurses and staff equipped with logistics and ambulances to Cianjur. Within the emergency period, PMI managed to take care of 928 people (845 males 83 females) across six mobile clinics located in Warungkondang and Cugenang sub-district.

To support the mobile clinic activity, PMI operated two units of ambulance and ambulance team consisted of one doctor, one nurses and three volunteers. In total, PMI ambulances operated in the span of 14-days operational and managed to provide services to 80 people (33 males and 47 females) from 35 different villages across five sub-districts in Cianjur.

As the emergency response phase ended, PMI continued providing basic health service targeting people in evacuation centres and community around the evacuation centres with service such as home-based care activity, Health promotion, and Mental Health and Psychosocial Support (MHPSS) from January 2023 until May 2023, PMI managed to reach 8,955 people (3,516 males and 5,439 females) by providing basic health service and health promotion. PMI continued basic health service intervention because volunteers found respondents with complications that appear to be associated with exposure of debris materials, such as coughing and itchy skin from consuming contaminated water. The most common health concern found from the activity can be found here - <https://edwinreinhart.github.io/dref-cianjur/cianjur-health-concern.png>.

As indicated in the graph from the earlier link, the most commonly reported health concern among assisted communities was Acute Respiratory Infection, accounting for 384 cases or 19 per cent of the overall health concerns reported. Following this, skin rash was reported in 264 cases or 13 per cent of the overall health concerns. To complement basic health services, PMI provided health awareness sessions to raise community health awareness. The materials provided covered Covid-19 prevention (including wearing face masks, social distancing, and the importance of handwashing), vaccination campaigns for Covid-19 and children, and dengue prevention. As the situation improved, more evacuated households left the evacuation center to seek shelter with neighbors or relatives. Due to these circumstances, PMI ceased face-to-face health promotion at the evacuation center and disseminated health promotion messages through radio shows, social media, and public service announcements. By combining these activities, PMI managed to reach 25,000 people.

PMI continued providing Mental Health and Psychosocial Support (MHPSS) sessions from the emergency period until the end of the response operation. In total, PMI conducted 226 MHPSS sessions, averaging two sessions per day from 23 November 2022 until 15 March 2023. From these sessions, 6,041 people (2,583 males and 3,458 females) benefited. MHPSS sessions were available for children, adults, and the elderly, with different materials and activities provided for each group. Methods such as playing, dancing, singing, and learning were used in MHPSS sessions for children. Meanwhile, for adults and the elderly, PMI volunteers conducted prayer sessions, sharing sessions, and meditation to alleviate stress.

Furthermore, to enhance local capacity, First-aid training, Epidemic Community Surveillance, MHPSS, and home-based care service training were conducted for Health volunteers in Cianjur. The training was divided into four separate sessions, facilitated by trained and experienced health staff from PMI NHQ and PMI Province.

Lessons Learnt

- To raise the communities' awareness and knowledge especially for health awareness, PMI had to meet and conduct the promotion services regularly in the communities. This was to ensure that the community understands the message and extends the practice of it in their daily lives. By disseminating the health message through local languages, it proved effective for the local context and was easily understood by the community.
- By coordinating with local health authorities, PMI managed to get access to medical supplies such as medicine, medical tools and equipment to support the mobile clinic activity. By coordinating and develop mutual relation with the local authority, PMI managed to run mobile clinic and provide basic health service to the community even beyond the emergency response phase.

Challenges

- Due to landslides and post-earthquake debris, access to the affected area was limited. The response team had to take a longer route to reach Cianjur. Despite this slight delay, PMI managed to reach affected households within hours after the earthquake.
- Hours after the earthquake, there was a health resource and capacity gap within the Cianjur district as local health infrastructure was also impacted by the earthquake. To cope with the needs, additional resources were mobilized from neighboring PMI chapters and PMI Bogor Hospital to support PMI Cianjur in managing the situation.
- During the emergency response, health services (mobile clinics, MHPSS, and Health Promotion) were provided, focusing on addressing the needs in the evacuation centers. However, as the situation improved, PMI became overwhelmed because affected households kept moving from one evacuation center to another, returning to their houses, or staying with relatives scattered throughout the districts. PMI established scheduled visits to each evacuation center to ensure continuous access to basic health services, and the community could also locate PMI's mobile clinic service based on the schedule.
- It was challenging to promote COVID-19 prevention messages at the evacuation centers when affected communities were forced to live in limited space situations. However, the COVID-19 prevention campaign was carried out through basic and practical materials, such as reminders about the importance of wearing face masks, avoiding unnecessary gatherings or crowding, and promoting vaccination.



Water, Sanitation And Hygiene

Budget: CHF 132,731

Targeted Persons: 25,900

Assisted Persons: 11,410

Indicators

Title	Target	Actual
# of water sources rehabilitated (wells with pumps, spring protection, community ponds with filtration)	2	1
# of people provided with handwashing facilities	500	793
# of people reached by hygiene promotion	25,900	11,410
# of people provided with sanitation facilities (this is more than excreta disposal)	200	2,112
# of constructed communal/shared sanitation facilities by male/female	10	35
# of litres of safe water distributed through RCRC emergency water supply (cumulative).	1,000,000	11,106,350
# of households received comprehensive hygiene kits	1,000	1,105

Narrative description of achievements

The assessment report indicated a substantial need for clean water in the Cianjur area due to the number of people evacuated to emergency centers. Over 190 evacuation centers were identified in Cianjur, accommodating approximately more than 190,000 people. Immediate needs at the evacuation centers included additional water tanks, latrines, washing stations, and water supply.

To address the water supply gap, PMI mobilized 14 water trucks with a 5,000-liter capacity to Cianjur. After coordinating with the local water company, PMI gained access to the company's water resources. The water truck units distributed clean water to three

different distribution points on a daily basis during the emergency response phase, primarily focusing on providing clean water to the evacuation centers. After the emergency phase ended, PMI NHQ demobilized seven units of water trucks as the number of evacuation centers reduced. However, PMI extended the distribution to provide clean water to surrounding villages or communal areas such as mosques or community centers.

Due to justified needs, water trucking activities continued until the end of the operation, primarily because the majority of the water systems were not yet functioning. Consequently, PMI continued to receive requests for clean water distribution from the Cianjur community. To cover the additional cost, with prior communication and approval from IFRC, PMI shifted pipeline construction costs to cover the operational costs of water trucking. In total, 28 volunteers actively supported the water truck operation, distributing 11,106,350 liters of water to an average of 3,398 people daily. Even though the pipeline construction budget was shifted, PMI Cianjur constructed and rehabilitated pipelines in the Cianjur district using their own internal resources.

In addition to providing clean water, PMI constructed seven emergency latrines and four bathrooms, including sanitation systems, in the Cugenang sub-district evacuation center. Moreover, PMI rehabilitated 17 bathrooms, seven latrines, and one communal well across the Cugenang sub-district. To maintain household hygiene in the evacuation center, PMI distributed 1,105 hygiene kits (following PMI's standard hygiene kit specifications) to 929 households, accommodating 3,714 people (1,894 males and 1,820 females). PMI volunteers conducted hygiene promotion sessions in the evacuation centers and surrounding areas, covering topics such as proper handwashing, personal and environmental hygiene, household waste management, and maintaining cleanliness in latrines, bathrooms, and water tanks.

Through face-to-face sessions provided to 59 villages across the Cianjur district, PMI managed to reach 11,410 people (4,505 males and 6,905 females) with hygiene promotion activities. Similar to health promotion, PMI concluded face-to-face hygiene promotion and disseminated hygiene awareness materials through radio shows, social media, and public announcements, reaching a combined total of 25,000 people. The IFRC-DREF support also contributed to the local capacity development of PMI Cianjur, conducting WASH training for 20 WASH volunteers in water trucking operations and water purification. As the operation concluded, all materials, best practices, and knowledge remain within PMI Cianjur for future operations.

Lessons Learnt

- PMI used online reporting platform such as KOBO to reduce double-counting issue especially from water trucking activity
- Promotion and dissemination activity had to be conducted on regular basis to maintain hygiene awareness within the community.

Challenges

- During the emergency phase, multiple organizations provided clean water to the affected community. Water was distributed not only in bottled form but also through water trucking. Coordination was a significant challenge as overlapping water distribution was reported at evacuation centers, including the distribution of hygiene kits. Later, BPBD managed to map out all present humanitarian actors in Cianjur and assigned specific target areas to them.
- The progress of water system rehabilitation and recovery was slow, leading to water trucking activities extending beyond the agreed plan. The budget allocated for pipeline construction was reallocated to cover the extended water trucking activities, while two constructed pipelines were covered by other PMI resources.
- The mechanism for tracking activities and the number of people reached posed challenges, as double-counting was reported in the system. Continuous and close monitoring is necessary to maintain quality reporting.

Financial Report

DREF Operation

FINAL FINANCIAL REPORT

MDRID025 - Indonesia - Cianjur Earthquake

Operating Timeframe: 28 Nov 2022 to 31 May 2023

Selected Parameters			
Reporting Timeframe	2022/11-2023/8	Operation	MDRID025
Budget Timeframe	2022/11-2023/5	Budget	APPROVED

Prepared on 26/Sep/2023

All figures are in Swiss Francs (CHF)

I. Summary

Opening Balance	0
Funds & Other Income	794,131
DREF Response Pillar	794,131
Expenditure	-723,240
Closing Balance	70,891

II. Expenditure by planned operations / enabling approaches

Description	Budget	Expenditure	Variance
PO01 - Shelter and Basic Household Items	267,351	246,657	20,694
PO02 - Livelihoods			0
PO03 - Multi-purpose Cash	137,918	213,067	-75,149
PO04 - Health	177,323	81,995	95,328
PO05 - Water, Sanitation & Hygiene	132,731	128,862	3,869
PO06 - Protection, Gender and Inclusion	17,040	5,216	11,824
PO07 - Education			0
PO08 - Migration			0
PO09 - Risk Reduction, Climate Adaptation and Recovery			0
PO10 - Community Engagement and Accountability	6,390		6,390
PO11 - Environmental Sustainability	6,923	11,916	-4,994
Planned Operations Total	745,674	687,713	57,961
EA01 - Coordination and Partnerships			0
EA02 - Secretariat Services	10,650	9,192	1,458
EA03 - National Society Strengthening	37,808	26,336	11,472
Enabling Approaches Total	48,458	35,527	12,930
Grand Total	794,131	723,240	70,891

[Click here for the complete financial report](#)

Please explain variances (if any)

A total of CHF 794,131 was allocated to address the humanitarian needs of households affected by the earthquake in Cianjur district, West Java province. Over the six-month implementation period, total reported expenditures amounted to CHF 723,240 (91 per cent), leaving a balance of CHF 70,891 to be returned to the IFRC-DREF pot.

Several budget underspends occurred within the IFRC-DREF operation, particularly in shelter, health, PGI, CEA, and National Society Strengthening. Below is an explanation for the underspends:

- Shelter Sector: The underspend here primarily pertained to operational costs like volunteer mobilization and preparation expenses. As shelter cash assistance ran parallel with the multi-purpose cash grant, operational costs were shared between sectors to maximize fund utilization. Hence, only half of the operational costs were used for implementation.
- Health Sector: Initially, neighboring branches or provincial health teams, along with the PMI Bogor Hospital team, facilitated most health services in the first two months. The intention was to allocate all expenses to the IFRC-DREF, but following coordination, they preferred using their own fundraising resources, as part of their operational funds sourced from local fundraising activities. As local health facilities regained capacity, especially at the evacuation centers, anticipated expenditures and further implementation, notably mobile clinic activity, were no longer necessary, resulting in unspent health budgets.
- PGI and CEA: Underspending mainly occurred in operational costs. Given their cross-sectoral nature, operational expenses were allocated across sectors. For instance, costs related to community engagement and socialization activities under the Multi-purpose Cash Grant/Shelter were charged to MPCG operational expenses rather than specifically to CEA budget lines. Consequently, the CEA and PGI budgets weren't fully utilized at the field level.
- Overall Support: The response received support from various PMI branches and provinces, not only participating in the response but also aiding PMI Cianjur district in enhancing volunteer capacity. Several essential planned trainings in the plan of action were later conducted by supporting PMI branches or provinces. For instance, health-related training was conducted with the support from Bogor Hospital and WASH-related training by trained volunteers from PMI Jatinangor Warehouse. The IFRC-DREF operation supported PMI Cianjur volunteers with refresher orientation to ensure service quality provided to the community.

The financial report noted overspending in the Multi-purpose Cash Grant and environmental sustainability sectors. In the Multi-purpose Cash Grant sector, more beneficiaries were identified, justifying targeting additional households. Utilizing the surplus/exchange gained, PMI reached more households, though it was recorded as overspent in the financial report. The environmental sustainability, overspend mainly covered operational costs like assessments in three villages, radio shows, and media communication.

Contact Information

For further information, specifically related to this operation please contact:

National Society contact: Sudirman Said, Secretary General, Sudirman_said@pmi.or.id, +62211811945

IFRC Appeal Manager: Elkhan Rahimov, Head of Country Cluster Delegation, elkhan.rahimov@ifrc.org, +6281113210123

IFRC Project Manager: T. Khairil Azmi, DRM Coordinator, tkhairilazmi@ifrc.org, +628126991332

IFRC focal point for the emergency:

Farah Nur Wahyuni Zainuddin, Operations Coordinator, OpsCoord.SouthEastAs@ifrc.org, +60136503391

Media Contact:

Annisa Marezqa, Programme Development and Quality Assurance Coordinator, Annisa.MAREZQA@ifrc.org, +6281281039155

[Click here for reference](#)