DREF Operation

Indonesia Flores Earthquake Response

PMI supports patients at government hospital in Flores (credit: PMI)

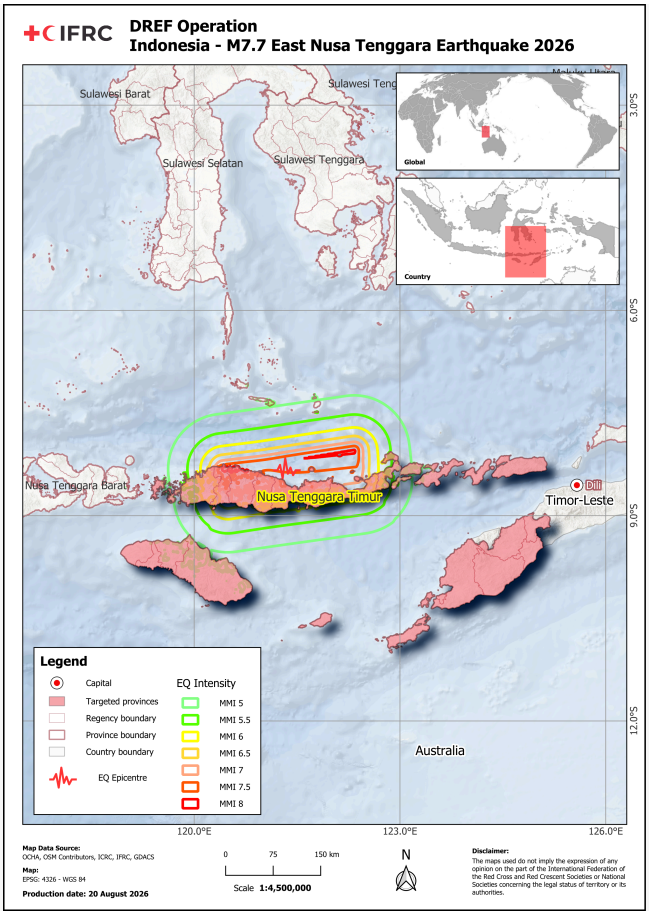
Appeal: **MDRID029**	Hazard: **Earthquake**	Country: **Indonesia**	Type of DREF: **Response**
Crisis Category: Orange	Event Onset: **Sudden**	DREF Allocation: **CHF 699,681**	
Glide Number: **EQ-2026-000150-IDN**	People Affected: **735,603 people**	People Targeted: **20,000 people**	
Operation Start Date: **23-08-2026**	Operation Timeframe: **9 months**	Operation End Date: **31-05-2027**	DREF Published: **24-08-2026**

Targeted Regions: **Nusatenggara Timur**

Description of the Event

Date of event

15-08-2026



Earthquake intensity map for the M7.7 East Nusa Tenggara earthquake

What happened, where and when?

Magnitude 7.7 earthquake struck Flores Island in East Nusa Tenggara Province. According to the Meteorology, Climatology and Geophysics Agency (BMKG), the earthquake was centred offshore at 8.41°S and 121.39°E, approximately 30 kilometres north-east of Mbay, Nagekeo District, at a depth of 15 kilometres. The earthquake was associated with activity along the Flores Back-Arc Thrust.

Following the earthquake, BMKG issued a tsunami warning for several coastal areas. Sea-level changes were observed at several monitoring locations, including approximately 0.94 metres at Maurole in Ende District. The tsunami warning was lifted at approximately 07:30 WIB after BMKG confirmed that the threat had ended. However, frequent aftershocks continued to affect the area. As of 16 August 2026 at 15:00 WIB, BMKG had recorded 995 aftershocks ranging from magnitude 1.9 to 6.2, of which 46 were felt by communities.

The earthquake affected seven districts across Flores Island: West Manggarai, Manggarai, East Manggarai, Ngada, Nagekeo, Ende and Sikka. Earthquake impacts and population evacuations were also reported in Bima, West Nusa Tenggara Province, and the Selayar Islands, South Sulawesi Province.

Landslides, damaged roads and debris continued to restrict access to several affected communities. The Larantuka–Maumere route had reopened, while the Ende–Nagekeo route remained reportedly cut off. Efforts to clear affected roads and establish alternative access routes were ongoing. Electricity and telecommunications services had largely begun to recover, although repairs were still required in several locations. Continued aftershocks were also affecting assessment, evacuation and emergency service delivery.

PMI conducts rapid assessment

PMI establishes Emergency Tents at Field Hostipal

PMI mobilizes volunteers for evacuation

PMI establishes Emergency Tents

Scope and Scale

The earthquake has caused widespread humanitarian impacts across seven districts of Flores Island: West Manggarai, Manggarai, East Manggarai, Ngada, Nagekeo, Ende and Sikka. Impacts and population evacuations were also reported beyond Flores, including in Bima, West Nusa Tenggara Province, and the Selayar Islands, South Sulawesi Province. The wide geographical coverage of the disaster, combined with the mountainous terrain and dispersed settlements across Flores, presents significant challenges for assessment and humanitarian service delivery.

According to preliminary government data available as of 17 August 2026 at 07:00 WIB, 56 people had died, 115 people had sustained serious injuries and 168 people had sustained minor injuries. Approximately 1,528 households were reported to have been affected, while more than 11,675 people remained displaced in evacuation sites and temporary shelters. These figures are expected to change as assessment and verification activities continue in affected and previously inaccessible communities.

Initial assessments recorded at least 4,674 damaged houses, including 2,806 severely damaged, 727 moderately damaged and 1,141 lightly damaged houses. The high proportion of severely damaged houses indicates substantial immediate and medium-term shelter needs. Many affected families are unable or reluctant to return to their homes because of structural damage and continued aftershocks. Consequently, displaced households require safe temporary shelter, essential household items, protection support and assistance to meet their basic needs.

Damage has also been reported to hospitals, health facilities, public buildings, places of worship, roads, electricity networks and telecommunications infrastructure. Damage to several health facilities has disrupted the continuity of essential health services, with patients temporarily moved outdoors while the safety of buildings is assessed. PMI has established emergency tents at affected health facilities, including RSUD Ruteng in Manggarai District and RSU Komodo in West Manggarai District, to support the continuation of health services.

Access remains a major operational constraint. Landslides, road damage and debris have restricted access to several communities. While the Larantuka–Maumere route has reopened, the Ende–Nagekeo route remains reportedly cut off. Electricity and telecommunications services have begun to recover in many locations, but disruptions persist in some affected areas. These access and communication constraints continue to limit the collection and verification of comprehensive impact data and may delay the delivery of assistance to remote communities.

Continued seismic activity is further increasing humanitarian risks. As of 16 August 2026 at 15:00 WIB, BMKG had recorded 995

aftershocks, including 46 that were felt by communities. Persistent aftershocks have heightened fear and psychosocial distress, discouraged families from returning to damaged homes and affected the delivery of assessments, evacuations and emergency services.

Priority humanitarian needs identified through initial assessments include emergency and transitional shelter support, essential household items, safe water and sanitation, emergency health services, psychosocial support, multipurpose cash assistance, protection and community engagement, and the restoration of family links. Particular attention is required for children, older people, pregnant and breastfeeding women, persons with disabilities, people with chronic health conditions and households whose homes and livelihoods have been severely affected.

The reported figures should be considered a minimum estimate of the overall disaster impact. The full scale of humanitarian needs has not yet been established due to continued aftershocks, disrupted access and communications, and ongoing assessments across the seven affected districts. Additional needs are expected to emerge as access improves and more comprehensive household-level assessments are completed.

Source Name	Source Link
1. BNPB	https://bnpb.go.id/
2. BMKG	https://inatews.bmkg.go.id/wrs/index.html
3. IHCP	https://ihcp-indonesia.org/

Previous Operations

Has a similar event affected the same area(s) in the last 3 years?	**No**
Did it affect the same population group?	**-**
Did the National Society respond?	**-**
Did the National Society request funding form DREF for that event(s)	**-**
If yes, please specify which operation	-

If you have answered yes to all questions above, justify why the use of DREF for a recurrent event, or how this event should not be considered recurrent:

-

Lessons learned:

Strong Coordination
Previous emergency operations in Indonesia, including the Cianjur Earthquake and Flood Sumatera response, highlighted the importance of strong coordination government authorities, humanitarian partners, and community-based actors. Building on these lessons, PMI will maintain close coordination with BNPB and relevant line ministries at the national level, while Provincial and District Chapters will coordinate closely with BPBD and local authorities through established emergency coordination mechanisms. PMI will actively participate in relevant coordination platforms to support information sharing, needs analysis, and response planning. All activities implemented under this operation will be coordinated with and reported to the relevant authorities to ensure an efficient, complementary, and well-coordinated response.

Locally-led Response and Capacity Building
Lessons learned from previous operations have demonstrated the value of locally led action in ensuring timely and effective humanitarian assistance. PMI will maximize the use of local capacities and resources, with Provincial and District Chapters leading the response in affected areas. Technical guidance, operational support, logistics, and financial resources will be mobilized by PMI National Headquarters, as required, to strengthen local response capacities and ensure the effective delivery of assistance. The operation will also serve as an opportunity for on-the-job training (OJT) and capacity strengthening of branch staff and volunteers through direct involvement in response activities. This practical learning approach will enhance local capacities in the delivery of sectoral interventions, including Health, WASH, Shelter, Cash and Voucher Assistance (CVA), and Logistics, while also strengthening competencies in operational management, financial procedures, reporting, and accountability. This approach contributes to sustainable institutional capacity and supports PMI's commitment to localization and preparedness for future emergencies.

Emergency Shelter and Safe Temporary Accommodation
Experiences from previous earthquake responses in Indonesia have shown that affected households often face prolonged shelter needs due to extensive housing damage, limited capacity to undertake repairs, loss of livelihoods, and concerns regarding ongoing aftershocks. In the immediate aftermath of a disaster, displaced populations frequently seek refuge in evacuation sites, public facilities, or with host families, where overcrowding and inadequate facilities can compromise dignity, privacy, protection, and safety, while also limiting equitable access to essential humanitarian services, particularly for women, children, older persons, persons with disabilities, and other vulnerable groups. Drawing on lessons learned from previous operations, PMI will coordinate closely with local authorities, the Shelter Cluster, and other relevant partners to support affected households through emergency shelter assistance, safer sheltering practices, and the promotion of minimum shelter standards. Protection, gender and inclusion considerations will be integrated into shelter interventions to ensure temporary accommodation arrangements provide adequate safety, accessibility, privacy, and dignity. Furthermore, PMI will advocate for the application of the Build Back Better (BBB) approach by promoting safer and more resilient construction practices, integrating disaster risk reduction measures into recovery efforts, and supporting community awareness on earthquake-resistant housing, contributing to strengthened resilience and reduced vulnerability to future disasters

Cash and Voucher Assistances Approach
Lessons learned from previous emergency operations have highlighted the value of Cash and Voucher Assistance (CVA) as an effective response modality to support affected households while contributing to local market recovery. Subject to the outcome of market and feasibility assessments, PMI may consider CVA for Multi-Purpose Cash Assistance (MPCA) and shelter assistance, providing affected households with greater flexibility and choice to address their priority needs. Prior to implementation, PMI will conduct an Emergency Market Mapping and Analysis (EMMA) or similar market assessment and coordinate closely with the Cash Working Group (CWG) and relevant authorities to determine market functionality, transfer values, and delivery mechanisms. Where feasible, PMI will utilize its Ranger digital platform for beneficiary registration, verification, distribution, and redemption processes, ensuring accountable, efficient, and transparent assistance delivery.

Community Engagement and Risk Communication
Previous operations have also highlighted the importance of timely and accurate information, particularly following earthquakes and tsunami warnings, to reduce uncertainty and support informed decision-making by affected communities. PMI will integrate community engagement and accountability approaches throughout the operation, ensuring that affected people have access to relevant information, can communicate their priority needs, and provide feedback on the assistance received.

Peer to Peer Learning Support
In line with the commitments of the Hanoi Call for Action and the Asia Pacific Movement's efforts to strengthen National Society preparedness, this operation will promote peer-to-peer support and learning exchanges among National Societies in the region. Through the deployment of peer staff and volunteers from neighbouring National Societies, the operation will provide opportunities for practical learning, knowledge sharing, and mutual capacity strengthening while supporting response delivery. Such exchanges foster solidarity, reinforce regional partnerships, and contribute to preparedness for future emergencies. The strong understanding of the regional context, cultural similarities, and operational realities enables peer support personnel to integrate effectively into the response, enhancing collaboration, local acceptance, and the overall quality and relevance of

humanitarian assistance. This approach delivers mutual benefits to both the host and supporting National Societies by strengthening technical capacities, operational readiness, and collective humanitarian action across the region	
Did you complete the Child Safeguarding Risk Analysis in previous operations, what was risk level?	No

Current National Society Actions

Start date of National Society actions

15-08-2026

Shelter, Housing And Settlements	PMI has established emergency tents at damaged health facilities to enable essential health services to continue, including at RSUD Ruteng in Manggarai District and RSU Komodo in West Manggarai District. PMI has also mobilized tarpaulins, blankets and sleeping mats for affected and displaced households. Initial assessments are identifying households whose homes have been severely or moderately damaged and are unable to return safely. Technical assessments and consultations are continuing to determine appropriate emergency and early recovery shelter assistance, including shelter tool kits and safer shelter awareness.
Livelihoods And Basic Needs	PMI is distributing or preparing to distribute essential household items to affected and displaced families, including blankets, sleeping mats, tarpaulins, sarongs, baby kits, hygiene kits and kitchen kits. Assistance is being prioritized based on rapid assessment findings and the level of household vulnerability. The impact of the earthquake on household income, markets and livelihoods is still being assessed. PMI is considering multipurpose cash assistance to enable affected households to meet their immediate and most urgent basic needs while supporting local market recovery.
Multi Purpose Cash	PMI plans to provide multipurpose cash assistance to approximately 1,500 highly affected households to help them meet immediate basic needs according to their own priorities.
Health	PMI is supporting evacuation, first aid, emergency health services and referrals in affected areas. At least seven ambulances have been mobilized to support the response. PMI has also established emergency tents at damaged health facilities to ensure the continuity of patient care while building safety assessments are undertaken. PMI National Headquarters has mobilized two emergency health teams to reinforce local capacity. The teams will support emergency medical services, mobile health services, health promotion and community-based surveillance, depending on identified needs. Psychosocial support is also being prioritized due to continued aftershocks, displacement, loss of family members and widespread fear among affected communities.
Water, Sanitation And Hygiene	PMI has mobilized 675 hygiene kits for affected and displaced households. Initial WASH assessments are examining access to safe drinking water, sanitation facilities and hygiene services at evacuation sites and affected communities. Continued assessments will determine priority locations, particularly evacuation sites

	and communities where water infrastructure or household water access has been disrupted.
Protection, Gender And Inclusion	PMI is working to integrate Protection, Gender and Inclusion (PGI) considerations into assessments, beneficiary selection and service delivery, with particular attention to children, older persons, pregnant and breastfeeding women, persons with disabilities, people with chronic health conditions, and households that have lost family members or sustained severe housing damage. Particular attention will also be given to women and girls staying in evacuation centres and host-family arrangements, where overcrowding, limited lighting and ongoing electricity disruptions may reduce privacy and safety. Identified needs include dignity kits, menstrual hygiene materials, psychosocial support and accessible information services, particularly for women, adolescent girls, pregnant and lactating women, older persons and persons with disabilities.
Community Engagement And Accountability	PMI will establish accessible channels for community feedback, questions and complaints. Risk communication will include information on aftershock safety, access to services, beneficiary selection criteria and planned assistance. Communication approaches will consider the needs of people with disabilities, older people and communities with limited access to telecommunications.
Coordination	PMI is coordinating its response with the National Disaster Management Agency (BNPB), provincial and district disaster management agencies (BPBD), health authorities, local governments and other humanitarian actors. At the field level, PMI branches coordinate with local emergency command structures to support assessments, evacuation, health services and relief distribution. PMI National Headquarters and PMI East Nusa Tenggara Province are maintaining regular coordination to consolidate operational information, identify response gaps and determine additional resource requirements. PMI is also coordinating with the International Federation of Red Cross and Red Crescent Societies (IFRC) and other Movement partners regarding technical support and potential funding for the response.
Assessment	PMI personnel at the provincial and district levels are supporting rapid assessments across the seven affected districts. The assessments focus on casualties, displacement, damage to houses and public facilities, access conditions, priority humanitarian needs and the operational capacity of local PMI branches. PMI National Headquarters has deployed personnel to strengthen assessment and information management capacity, including the consolidation and verification of information received from affected branches. Assessment activities remain constrained by continued aftershocks, landslides, damaged roads, intermittent telecommunications and the wide geographical coverage of the disaster.
Resource Mobilization	PMI has mobilized more than 24 staff and 39 volunteers from PMI NTT Province and the affected district branches to support assessment and response activities. Additional personnel from PMI National Headquarters and PMI NTT are being mobilized to strengthen ongoing assessments, coordination, and operational support. PMI National Headquarters is providing technical and operational support in assessment, information management, logistics, emergency health, and response coordination. Additional personnel and resources remain available for deployment based on assessment findings and requests from the affected branches. PMI National Headquarters provided an initial operational allocation of funding to PMI East Nusa Tenggara Province to support immediate response activities. PMI has mobilized and dispatched relief supplies from its national, regional, and sub-

	regional warehouses. The assistance mobilized includes: 675 hygiene kits, 1,075 blankets, 1,000 sarongs, 825 sleeping mats, 710 tarpaulins, 300 mosquito nets, 300 pairs of rubber boots, 220 baby kits, 200 kitchen kits, 120 volunteer vests, and 50 floor mats
National Society EOC	PMI has activated its emergency coordination and information management arrangements at national and provincial levels. The PMI National Headquarters Emergency Operations Centre is monitoring the situation, consolidating information from the affected branches, preparing situation updates and coordinating the mobilization of personnel, logistics and technical support. PMI East Nusa Tenggara Province is supporting coordination among the seven affected district branches and communicating operational needs to National Headquarters. Emergency coordination arrangements are also being supported at district level to facilitate assessments, service delivery and reporting.

IFRC Network Actions Related To The Current Event

Secretariat	IFRC Country Delegation and Regional Office support PMI through operational coordination, information management, situation reporting, assessment planning and technical assistance. In-country capacity is available in Operations Coordination, IM/Assessment, PMER, Health, WASH, Logistics and CVA. IFRC supporting PMI to develop Operation Plan it will include Coordination and Information, Technical Sector support and the IFRC's shelter coordination responsibilities as applicable in Indonesia. It will also describe engagement with Partner National Societies (American RC, Australian RC and Japanese RC) and how their potential support is coordinated through PMI and IFRC to maintain a coherent Movement response.
Participating National Societies	Partner National Societies in country (American RC, Japanese RC and Australia RC) has provided complementary technical, peer-to-peer and capacity support to PMI, as required during the operation. Support may include technical expertise in Assessment, health, shelter, CVA and logistics, as well as surge and operational learning. All PNS support will be coordinated with PMI and IFRC to ensure complementarity with the DREF-funded activities and avoid duplication. PMI will remain the lead National Society responsible for implementation of the operation.

ICRC Actions Related To The Current Event

The ICRC will maintain coordination with PMI and IFRC as part of the Movement coordination mechanism. Where relevant, the ICRC may provide complementary technical advice within its mandate and areas of expertise, including protection, restoring family links, management of the dead, humanitarian principles, and safe access. ICRC support will be coordinated with PMI and IFRC to ensure complementarity and avoid duplication with DREF-funded activities.

Other Actors Actions Related To The Current Event

Government has requested international assistance	No
National authorities	The Government of Indonesia is leading the response through the National Disaster Management Agency (BNPB), the East Nusa Tenggara Provincial Government and the affected district governments. Provincial and district disaster management agencies (BPBD) are coordinating emergency operations, rapid assessments, evacuation, search and rescue, management of evacuation sites, relief distribution and the restoration of access and essential services. Search and rescue operations are being supported by the National Search and Rescue Agency (BASARNAS), the Indonesian National Armed Forces (TNI), the Indonesian National Police (POLRI), local authorities and community responders. Health authorities are coordinating emergency medical services, referrals, deployment of health personnel and continuity of services at damaged health facilities. In several locations, patients have been moved outdoors or treated in temporary tents while structural safety assessments are conducted. Relevant government institutions and service providers are working to clear landslides and debris, reopen damaged roads and restore electricity and telecommunications. The Larantuka–Maumere route has reopened, while efforts continue to restore access along the disrupted Ende–Nagekeo route and reach isolated communities. Emergency response arrangements have been established at provincial and district levels. Several affected local governments have declared or established emergency response periods to facilitate the mobilization of personnel, equipment, logistics and operational funding. BNPB continues to consolidate impact data received from the affected districts and provide operational and logistical support to local authorities.
UN or other actors	National and local civil society organizations, faith-based organizations, community groups, private-sector actors and humanitarian organizations are supporting or preparing to support government-led assessments and response activities. Areas of engagement include emergency shelter, essential household items, health, water and sanitation, logistics, protection and assistance for displaced communities. The Indonesian Humanitarian Coordination Platform (IHCP) is supporting humanitarian information exchange and coordination among national and local NGOs, United Nations agencies, Red Cross organizations, international NGOs, academic institutions and private-sector actors. The platform works closely with BNPB, the Coordinating Ministry for Human Development and Cultural Affairs and relevant government-led clusters. As of May 2026, IHCP included approximately 80 member organizations, making it one of Indonesia's largest nationally led humanitarian coordination platforms.

Are there major coordination mechanism in place?

Yes. The emergency response is coordinated through Indonesia's government-led disaster management system. BNPB provides national-level coordination, while the East Nusa Tenggara Provincial Government and BPBD coordinate operations at the provincial level. District governments and district BPBDs lead field-level coordination through their respective emergency command posts.

IHCP provides a complementary humanitarian coordination mechanism by facilitating information exchange, mapping organizational presence and capacities, identifying gaps and connecting civil society, UN agencies, Red Cross organizations, international NGOs, academia and private-sector actors with government-led coordination structures. IHCP does not replace the government's command and coordination arrangements; its role is to strengthen collective, locally led and accountable humanitarian action.

PMI participates in relevant coordination mechanisms as an auxiliary to the public authorities in the humanitarian field. Internally, PMI coordinates its response through its national, provincial and district emergency operations structures. PMI National Headquarters also coordinates with IFRC and other Movement partners to ensure a coherent and complementary Red Cross and Red Crescent response.

Needs (Gaps) Identified

Shelter Housing And Settlements

Preliminary government data indicate that at least 4,674 houses have been damaged, comprising 2,806 severely damaged, 727 moderately damaged and 1,141 lightly damaged houses. More than 11,675 people remain displaced in evacuation sites, temporary shelters or host-family arrangements.

Affected households require emergency shelter materials, including tarpaulins, blankets, sleeping mats and essential household items. Further technical assessments are required to determine whether damaged houses can be safely occupied and to identify households requiring shelter repair assistance, shelter tool kits or transitional shelter solutions. Safer shelter awareness and technical guidance will also be required due to continued aftershocks and the risk of families returning to structurally unsafe buildings.

Livelihoods And Basic Needs

Affected and displaced households face difficulties meeting essential needs, particularly those that have lost their homes, household belongings, income sources or access to local markets and services. Immediate requirements include food, essential household items, clothing, baby supplies, kitchen items, transportation and other daily expenses.

Health

Hospitals and health facilities in several affected locations, including Ende, Ruteng and Mbay, have sustained damage, with some services relocated outdoors pending structural safety assessments. Additional medical personnel, ambulances, medicines, medical supplies and temporary health facilities may be required. Continued aftershocks and displacement are increasing the need for first aid, mobile health services, referral support, community-based surveillance, health promotion and psychosocial support. Access constraints may also disrupt continuity of care for people with chronic illnesses, pregnant women and other vulnerable groups.

The affected provinces were already facing public health challenges, including rabies, dengue, malaria, acute respiratory infections (ARI), diarrhoeal diseases, and tuberculosis (TB). Following the earthquake, displacement, overcrowded shelters, disrupted water and sanitation services, and reduced access to healthcare may increase the risk of disease transmission, treatment interruption and delayed outbreak detection. Seasonal drought conditions in NTT further heighten the risk of waterborne and hygiene-related diseases. Community-based surveillance, health promotion, mobile health services and referral mechanisms will be essential to support early detection of public health risks, continuity of care and the psychosocial well-being of affected communities.

Water, Sanitation And Hygiene

Damage to water-supply infrastructure, electricity networks and access routes may reduce the availability of safe water in affected communities and evacuation sites. Further technical assessments are required to determine the condition of pipelines, reservoirs, pumps, wells, springs, water-treatment systems and household water-storage facilities.

The earthquake occurred during the dry season, when water availability in East Nusa Tenggara is already limited. BMKG reported that NTT had entered the dry season, while strengthening El Niño conditions were contributing to drier and potentially longer-than-normal conditions. This may place additional pressure on already limited water resources and increase the need for emergency water production, storage and distribution.

Ongoing volcanic activity at Mount Lewotobi Laki-laki presents an additional potential risk to open water sources in Sikka District. Where volcanic ash deposition is confirmed, water-quality testing and appropriate treatment will be required before affected water sources can be considered safe for household use.

Protection, Gender And Inclusion

Disaggregated information on affected and displaced populations remains limited. Further assessments are required to identify protection risks and the specific needs of children, older people, pregnant and breastfeeding women, persons with disabilities, people with chronic health conditions and households separated from family members.

Education

Damage to schools and other educational facilities has been reported, but the number, location and severity of damage have not yet been fully consolidated. Some schools or public facilities may also be used as temporary evacuation sites, potentially disrupting teaching and learning.

Migration And Displacement

More than 11,675 people remain displaced across the affected areas. Population movements include evacuation from coastal communities following the tsunami warning, displacement from damaged or unsafe houses, and movement to formal evacuation sites, temporary shelters and host-family arrangements.

Community Engagement And Accountability

Affected communities require timely, accurate and accessible information on aftershocks, evacuation arrangements, available services, assistance criteria and safe return procedures. Information must be adapted to local languages and accessible to people with disabilities, older people and communities with limited telecommunications access.

Operational Strategy

Overall objective of the operation

Communities in 7 districts in East Nusa Tenggara affected by the 7.7 magnitude Flores earthquake have their immediate and early recovery needs met through equitable access to safe shelter, multipurpose cash assistance, essential household items, health and

psychosocial support, and WASH services, enabling them to recover safely, with dignity, protection, and inclusion over a nine-month period.

Operation strategy rationale

The Emergency Operational Strategy was developed based on the findings of PMI's rapid assessment, which identified the priority needs, affected population, geographic areas and key sectoral gaps following the earthquake. The nine-month operation will address the immediate and early recovery needs of approximately 20,000 people across seven affected districts of Flores. The strategy prioritizes emergency shelter, basic needs, health, psychosocial support and WASH assistance based on the scale of housing damage, displacement, disrupted essential services and continued aftershocks. Geographic and household-level targeting will be adjusted as assessment findings are verified, particularly in remote and difficult-to-access communities.

Shelter: PMI will distribute essential household items and provide Shelter Toolkits through a Cash and Voucher Assistance (CVA) approach, together with Build Back Safer and technical repair guidance, to approximately 500 households whose homes have sustained moderate to severe damage. In collaboration with the Habitat for Humanity shelter team, PMI's Shelter team will conduct technical assessments, provide safer-repair guidance and practical demonstrations, and undertake follow-up monitoring. Selected PMI volunteers at branch level will receive basic shelter assessment and safer-shelter orientation to support community engagement.

Additionally, The DREF will clarify the conditionality assistance is targeting households need essential shelter repairs, who have not received similar assistance from other actors. The CHF 69.68 transfer value will cover eligible shelter materials/toolkits and other eligible costs, subject to further shelter and market assessment. The delivery mechanism will be determined through the feasibility and Rapid Market Assessment, with voucher will consider

Basic Needs: Multipurpose cash assistance will be provided to approximately 1,500 vulnerable households with transfer value IDR 1.000.000 or CHF 46.68 to meet identified priority needs, including food, essential household items, clothing, baby supplies and other basic needs, while preserving dignity and supporting local markets. Cash assistance will be subject to market, feasibility and financial service provider assessments, with in-kind assistance used where markets or financial services are not accessible. PMI will most likely use PT Pos Indonesia's services, as a pre-existing agreement is in place to facilitate MPCA delivery. In addition, to response the immediate needs PMI distribute in -kind including Blanket, Sarong, Baby Kits, Tarpaulin, Hygiene Kits and Emergency tents, for those items will be replenished under DREF Support.

Health and MHPSS: PMI will provide emergency and mobile health services, first aid, referrals, health promotion, community-based surveillance and psychosocial support to affected and displaced communities.

WASH: PMI will provide emergency water production, storage and distribution, water-quality monitoring, hygiene kits including Menstrual Hygiene Management (MHM) kits, sanitation support and hygiene promotion. These interventions are particularly important because the earthquake occurred during the dry season, when water availability in East Nusa Tenggara is already constrained.

Cross Cutting Themes : PGI, Safeguarding, CEA and RFL: Protection, Gender and Inclusion (PGI), safeguarding, Community Engagement and Accountability (CEA), and Restoring Family Links (RFL) will be integrated throughout the response. Based on identified needs, PMI will provide dignity kits to affected women and girls, as appropriate. PGI and safeguarding orientations will be provided to staff and volunteers implementing the response at branch level.

Coordination, Monitoring and Accountability: The operation will be implemented through PMI's national, provincial and district structures in coordination with government authorities, IFRC, Movement partners, IHCP and other humanitarian actors. As a co-chair of the Indonesia Humanitarian Coordination Platform (IHCP), PMI actively engages with relevant government agencies and humanitarian actors through sectoral coordination mechanisms, including Logistics, WASH, Shelter, the CVA Working Group and Health, to ensure a coordinated and complementary response.

Monitoring and accountability: PMI will conduct regular monitoring of activities and outputs through field visits, activity tracking, beneficiary verification and post-distribution monitoring (PDM). Community feedback and complaints will be collected through accessible feedback mechanisms and reviewed regularly to identify gaps, exclusion, protection concerns or issues with the quality and relevance of assistance. Monitoring findings and community feedback will be discussed with PMI branches and relevant sector teams and used to adjust targeting, activities and implementation approaches where required. Key lessons, good practices and challenges will be documented throughout the operation and captured in the final evaluation/operational learning to inform future PMI emergency preparedness and response.

Targeting Strategy

Who will be targeted through this operation?

The operation will target approximately 20,000 people affected by the earthquake across West Manggarai, Manggarai, East Manggarai, Ngada, Nagekeo, Ende and Sikka. The target population includes displaced people, households whose homes have been moderately to severely damaged, communities with disrupted access to health services, safe water and sanitation, and people requiring essential relief items, psychosocial support, protection services and humanitarian information. Geographic targeting will be based on the severity of impact, concentration of affected and displaced people, disruption of essential services, accessibility and gaps in assistance. Within the overall target, approximately 1,500 highly vulnerable households will receive multipurpose cash assistance, while approximately 500 households whose homes have sustained moderate to severe damage and require shelter repairs will receive shelter assistance through a Cash and Voucher Assistance (CVA) approach, along with safer shelter and repair guidance.

These households will be included within, rather than additional to, the overall target of 20,000 people. Particular attention will be given to women-headed households, children, older people, pregnant and breastfeeding women, persons with disabilities, people with chronic health conditions, families affected by death or serious injury, economically vulnerable households and people living in remote or difficult-to-access locations. Although no specific refugee or cross-border migration caseload has been identified, assistance will be provided according to humanitarian needs without discrimination based on nationality, ethnicity, religion, gender, disability, legal status, migration status or possession of identity documents.

Explain the selection criteria for the targeted population

Selection will be based on transparent criteria that consider both the severity of the earthquake's impact and each household's capacity to cope and recover. Priority will be given to households whose homes have been destroyed, severely damaged or assessed as unsafe; families staying in evacuation sites, temporary shelters or host-family arrangements; households that have experienced death, serious injury, disability or family separation; households that have lost income, productive assets or essential belongings; and households that have not received adequate equivalent assistance from other sources. Household composition and additional vulnerability factors will also be considered, including households headed by women, children or older people and households with pregnant or breastfeeding women, infants, persons with disabilities, older people or members requiring continued medical care. PMI will verify potential recipients through household assessments, community consultations and coordination with local authorities and other humanitarian actors. Selection criteria and assistance entitlements will be communicated publicly, while accessible feedback, complaints and appeal mechanisms will be established to address exclusion or errors. The absence or loss of identity documents will not automatically exclude affected people, and alternative verification arrangements will be explored where documentation is required for cash assistance.

Total Targeted Population

Women	**6,900**	Rural	**75%**
Girls (under 18)	**3,240**	Urban	**25%**
Men	**6,700**	People with disabilities (estimated)	**15%**
Boys (under 18)	**3,160**		
Total targeted population	20,000		

Risk and Security Considerations (including "management")

Does your National Society have anti-fraud and corruption policy?	No
Does your National Society have prevention of sexual exploitation and abuse policy?	No
Does your National Society have child protection/child safeguarding policy?	No
Does your National Society have whistleblower protection policy?	No
Does your National Society have anti-sexual harassment policy?	No

Please analyse and indicate potential risks for this operation, its root causes and mitigation actions.

Risk	Mitigation action
Cash assistance may be affected by market disruption, price increases, limited financial service provider coverage, fraud, loss of identification documents or risks related to personal data.	PMI will conduct cash feasibility and market assessments, monitor prices, undertake financial service provider due diligence and establish secure beneficiary verification and data-protection procedures. Distribution will be monitored, complaints channels will be available, and in-kind or alternative assistance will be considered where cash delivery is not feasible or safe.
The scale and duration of the response may expose staff and volunteers to fatigue, psychological distress, safeguarding concerns, health and safety incidents, or misconduct that could harm affected people and PMI's reputation.	PMI will provide appropriate insurance, personal protective equipment, duty rotations, psychosocial support and regular health, safety, safeguarding and code-of-conduct briefings. Safe and confidential reporting and referral mechanisms will be established, and reported incidents will be addressed promptly in accordance with PMI and IFRC procedures.
Continued aftershocks, landslides, tsunami-related hazards and volcanic activity may endanger affected communities and response personnel, damage temporary facilities and disrupt planned activities.	PMI will continuously monitor official warnings from BMKG and relevant authorities, conduct regular safety briefings, apply movement and evacuation protocols, identify safe assembly points and suspend or relocate activities when conditions are unsafe. Contingency arrangements and flexible implementation schedules will be maintained.
Damaged roads, difficult terrain, dispersed settlements and disruptions to transport and telecommunications may delay assessments, relief delivery and monitoring, particularly in remote communities.	PMI will prioritize access mapping, use local branches and volunteers, pre-position essential supplies, coordinate transport and access information with government authorities and adapt delivery routes and schedules. Alternative communication methods and decentralized distribution points will be used where required.
Incomplete or rapidly changing impact data may result in exclusion, duplication, inaccurate targeting or unequal	PMI will conduct household-level verification, apply transparent vulnerability criteria and coordinate beneficiary information

distribution of assistance.	with local authorities and humanitarian actors. Selection criteria will be communicated publicly, and accessible feedback, complaints and appeal mechanisms will be established. Targeting will be adjusted as assessment information improves.
Security conditions may deteriorate during the response operation due to aftershocks, damaged infrastructure, civil unrest, overcrowded displacement sites, or limited access to affected areas, potentially compromising the safety and security of staff, volunteers, surge personnel, and affected communities, and disrupting the timely delivery of humanitarian assistance.	The National Society's security framework will apply throughout the duration of the operation to their staff and volunteers. In case of need for deployment for personnel under IFRC security's responsibility, including surge support and integrated PNS, the existing IFRC country security framework will apply, and rapid security assessments and analysis will be carried out. All IFRC must, and RC/RC staff and volunteers are encouraged, to complete the IFRC Stay Safe 2.0 e-learning courses. Staff and volunteers to be aware of the security status and briefed on reactions in emergency

Please indicate any security and safety concerns for this operation:

No major conflict-related security concerns have been identified in the targeted areas. However, continued aftershocks, landslides, unstable buildings, damaged roads, difficult terrain, volcanic activity and disrupted telecommunications may pose significant safety risks to affected communities, staff and volunteers. Road travel and access to remote areas may also be affected by debris, poor road conditions and limited lighting. Relief and cash distributions may create crowd-management, theft, fraud or community-tension risks if information and targeting criteria are not clearly communicated. Staff and volunteers may face fatigue, psychological distress, communicable disease exposure and safeguarding risks during prolonged field deployment.

PMI will monitor official warnings, conduct regular security and safety briefings, undertake route and site assessments, apply movement tracking and check-in procedures, provide insurance and appropriate personal protective equipment, establish safe distribution and evacuation arrangements, and coordinate with local authorities. Activities will be suspended or relocated when conditions are unsafe, while safeguarding, code-of-conduct and confidential incident-reporting procedures will apply throughout the operation.

Has the child safeguarding risk analysis assessment been completed?	No

Planned Intervention

Shelter Housing And Settlements

Budget: CHF 121,731
Targeted Persons: 2,000

Indicators

Title	Target
Number of people reached with Build Back Better and safer shelter promotion	2,000
Number of households receiving cash-based shelter tool kit assistance	500
Number of households reached with essential shelter and household items	500

Number of people reached with essential shelter and household items	2,000
Percentage of assisted households reporting that the shelter and household items received met their priority needs	80

Priority Actions

• PMI will conduct Build Back Better and safer shelter promotion for 2,000 people .
• PMI will provide cash-based shelter tool kit assistance to 500 households.
• PMI will also replenish household items : 2,000 Hygiene Kit, 1,000 blankets, 2,000 sarongs, 700 baby kits, 3,000 tarpaulins and 1,000 items of clothing.

Multi Purpose Cash

Budget: CHF 103,199
Targeted Persons: 7,500

Indicators

Title	Target
Number of households receiving multipurpose cash assistance	1,500
Percentage Household able to meet their basic needs	80

Priority Actions

• PMI will provide one-off multipurpose cash assistance of IDR 1,000,000 to 1,500 vulnerable earthquake-affected households to help them meet their priority basic needs.

Health

Budget: CHF 90,039
Targeted Persons: 10,000

Indicators

Title	Target
Number of people reached through health promotion and community-based surveillance	10,000
Number of people receiving emergency or mobile health services	10,000
Number of people reached with mental health and psychosocial support services	2,000
Number of affected districts covered by PMI health interventions	1

Number of technical health orientation sessions conducted for PMI staff and volunteers	1
Number of volunteers trained on community-based surveillance	100
Number of community members reached through community-based surveillance	10,000

Priority Actions

• PMI will provide emergency and mobile health services across the seven affected districts through the mobilization of medical personnel, ambulances and health teams from PMI National Headquarters, PMI East Nusa Tenggara and affected district branches.
• Services will include basic medical consultations, first aid, referral support, essential medicines and medical supplies, and support to temporary health-service areas where health facilities have been damaged.
• PMI will also provide mental health and psychosocial support services for affected and displaced communities, particularly people experiencing bereavement, injury, displacement and distress due to continued aftershocks.
• Health promotion and community-based surveillance will be conducted to communicate key health messages, identify potential public health risks and facilitate early referral. Technical orientation on ambulance services, medical services, epidemic control for volunteers and community-based surveillance will be provided to strengthen the capacity of PMI staff and volunteers supporting the operation.

Water, Sanitation And Hygiene

Budget: CHF 112,376
Targeted Persons: 20,000

Indicators

Title	Target
Number of people reached with safe-water production and distribution services	20,000
Number of affected districts supported with WASH services	7
Number of water-production equipment sets procured and deployed	2
Number of people reached through hygiene-promotion activities	10,000

Priority Actions

• PMI will support emergency water, sanitation and hygiene services across the seven affected districts through the mobilization of specialized WASH personnel and the deployment of water-production and water-quality monitoring equipment.
• Activities will include clean-water production, storage and distribution, provision and maintenance of water-storage facilities, water-quality testing, hygiene promotion, sanitation support and environmental cleaning.
• PMI will provide hygiene information and materials to promote safe water handling, handwashing and appropriate use of sanitation facilities.
• The WASH priority actions will also specify the expected sanitation support, based on assessment findings, including safe and functional sanitation at evacuation sites/affected communities, rehabilitation or minor repair where appropriate, operation and maintenance, solid-waste management, and hygiene measures required to reduce disease risk

Protection, Gender And Inclusion

Budget: CHF 28,410

Targeted Persons: 20,000

Indicators

Title	Target
Number of affected districts supported through PGI monitoring and technical assistance	7
Number of PMI staff and volunteers completing PGI and safeguarding orientation	100
Number of people reached through protection-sensitive and inclusive humanitarian assistance	20,000
Number of NS programmes that have completed the IFRC Child Safeguarding Risk Analysis	1

Priority Actions

• PMI will mobilize PGI personnel to the seven affected districts to conduct PGI and safeguarding assessments and analysis, identify access barriers, and integrate gender, age, disability and diversity considerations across sectors. These assessments will be conducted alongside other sectoral assessments.
• The team will support the identification and safe referral of protection concerns, review the safety, accessibility and dignity of services and distribution arrangements, and promote the collection and use of sex-, age- and disability-disaggregated data.
• PMI will also conduct PGI and safeguarding orientation for staff and volunteers, covering the prevention of sexual exploitation and abuse, child safeguarding, code of conduct, safe referrals and confidential reporting mechanisms.

Migration And Displacement

Budget: CHF 2,650
Targeted Persons: 1,675

Indicators

Title	Target
Number of affected districts covered by Restoring Family Links services	7
Number of displaced people provided with information on available RFL services	1,675
Number of people receiving direct Restoring Family Links services	1,000

Priority Actions

• PMI will provide Restoring Family Links services across the seven affected districts for people who have lost contact with family members due to displacement, telecommunications disruptions, hospitalization or evacuation.

Community Engagement And Accountability

Budget: CHF 6,915

Targeted Persons: 2,000

Indicators

Title	Target
Number of people receiving timely and accessible information about the operation and available services	2,000
Number of affected districts with functioning community feedback and complaints mechanisms	7

Priority Actions

• PMI will integrate Community Engagement and Accountability throughout the operation by providing timely, accurate and accessible information on available assistance, selection criteria, distribution schedules, aftershock safety and available services
• PMI will establish and manage accessible feedback and complaints mechanisms,
• conduct CEA training for staff and volunteers, regularly collect and review community feedback to inform programme decisions and adjustments, and monitor community satisfaction and accountability through feedback and post-distribution monitoring

Secretariat Services

Budget: CHF 97,980
Targeted Persons: 6

Indicators

Title	Target
Percentage of financial reports complying IFRC financial management reporting procedures	90
Number rapid response/surge/peer to peer deployment to support the operation	2

Priority Actions

• Identifying, planning and conduct field assessment for emergency and early recovery
• Surge deployment peer-to-peer support from neighboring national societies under the sectors of CVA, assessment, relief distribution, WASH)
• Updating EPoA based on continuing field assessment, propose actions and early-recovery plan
• PMI branch equipped with technical and operational skill during the operation

National Society Strengthening

Budget: CHF 136,382
Targeted Persons: 700

Indicators

Title	Target
Number of PMI staff and volunteers supported through operational capacity-strengthening activities	700
Number of PMI volunteers covered by accident or operational insurance	700
Number of affected districts covered by assessment, monitoring and supervision activities	7
Number of post-distribution monitoring completed	1
Number of lessons-learned workshops conducted	1

Priority Actions

• PMI will strengthen its operational capacity at national, provincial and district levels through technical guidance, deployment of assessment, information management, logistics, disaster management, finance and operational coordination personnel, and support to emergency operations centres and field warehouses.

About Support Services

How many staff and volunteers will be involved in this operation. Briefly describe their role.

PMI has mobilized personnel from National Headquarters, the East Nusa Tenggara (NTT) Provincial Chapter, and affected district branches to support the earthquake response operation. As of the latest update, 24 staff and 39 volunteers have been deployed across the operation. In addition, a five-person rapid assessment team from PMI National Headquarters and PMI NTT Provincial Chapter has been deployed to support assessments, operational planning, and coordination in the most affected districts. Two Emergency Medical Teams, comprising doctors and nurses from PMI Bogor Hospital and PMI DKI Jakarta, have also been mobilized to Flores to strengthen emergency health service delivery.

To scale up the response, PMI plans to mobilize an additional 100 volunteers from affected branches, PMI NTT, and neighbouring provinces to support both technical sectors and operational support functions. These volunteers will be engaged in Health services, WASH, Shelter, Relief Distribution, Cash and Voucher Assistance, MHPSS, Information Management, Community Engagement and Accountability (CEA), Protection, Gender and Inclusion (PGI), restoring family links (RFL), and monitoring activities.

Staff and volunteers involved in this operation include:

PMI NTT Provincial Chapter and Branch Staff responsible for overall operational coordination, government liaison, logistics management, information management, finance, reporting, monitoring, and technical supervision.

PMI National Headquarters Staff and Emergency Rosters supporting the operation through disaster management coordination, Emergency Operations Centre (EOC) functions, logistics, information management, PMER, finance, communications, and technical support.

PMI Volunteers supporting assessments, relief distributions, health and WASH activities, shelter assistance, psychosocial support, community engagement, accountability mechanisms, protection services, and post-distribution monitoring.

Does your volunteer team reflect the gender, age, and cultural diversity of the people you're helping? What gaps exist in your volunteer team's gender, age, or cultural diversity, and how are you addressing them to ensure inclusive and appropriate support?

PMI's response teams include local volunteers from East Nusa Tenggara and the seven affected districts who understand the local languages, culture and community structures, which supports trust and culturally appropriate assistance. However, sex-, age- and disability-disaggregated information on deployed personnel is not yet fully consolidated, and potential gaps include insufficient female volunteers, limited representation of persons with disabilities and uneven availability of personnel trained in PGI, safeguarding and communication with vulnerable groups. PMI will address these gaps through the personnel help desk and deployment database, which will record the gender, age, origin, language skills and technical competencies of staff and volunteers. This information will be used to promote gender-balanced teams, mobilize additional female and locally based volunteers, and ensure appropriate personnel are available for assessments, health services, cash distributions and sensitive protection concerns. All deployed personnel will receive briefings on PGI, safeguarding, cultural sensitivity and accessible communication, while community feedback will be used to identify and address any remaining representation or service-access gaps.

Will surge personnel be deployed? If yes, please provide the role profile needed.

Yes
Yes. learned from previous DREF operations and successful peer-to-peer support arrangements with neighbouring National Societies (NSs), PMI may request surge support from National Societies within the region, particularly those familiar with the local context, culture, and operational environment. Such support will complement national capacities and strengthen the quality and effectiveness of the response. Priority surge profiles may include assessment and Cash and Voucher assistance.
The deployment of surge personnel will be based on verified operational needs, identified capacity gaps, and access considerations. Beyond supporting the immediate response, the peer-to-peer surge approach aims to strengthen preparedness and response capacities among National Societies in the region through practical learning, knowledge exchange, and mentoring during the operation. It also reinforces regional solidarity and cooperation within the Red Cross Red Crescent Movement, contributing to stronger collective readiness for future disasters in Asia-Pacific

If there is procurement, will it be done by National Society or IFRC?

IFRC will undertake procurement/replenishment process of mobilized items back to PMI Regional Warehouses. However, small items such as cleaning kit, fuel, office material to support activities implementation will be procured locally in accordance with PMI financial and procurement regulation and IFRC CRRA policy.
The operation will also consider lessons learnt and experiences from the previous operations to ensure that procurement standards are followed at all levels. IFRC procurement staff will closely monitor, involved and provide technical support to the NS.

How will this operation be monitored?

PMI National Headquarters (NHQ) will serve as the overall operation coordinator, providing strategic oversight, technical guidance, monitoring, and support to PMI East Nusa Tenggara (NTT) Provincial Chapter and affected district branches, which will lead and implement response activities at the local level.

IFRC country delegation staff will support the operation across Disaster Risk Management, Health, WASH, PMER, CEA, PGI, programme management, procurement, and finance, with joint field monitoring conducted alongside PMI NHQ. In addition, IFRC and PMI may mobilize regional and global surge capacities, particularly in Health, WASH, Shelter, Cash and Voucher Assistance (CVA), Information Management, PMER, and Operations Coordination, to provide targeted technical support and mentoring to national, provincial, and branch teams.

Building on successful peer-to-peer support arrangements in previous DREF operations, PMI will also explore support from neighbouring National Societies familiar with the local context, language, and culture, with the dual objective of strengthening operational quality while promoting mutual learning, preparedness, and solidarity among National Societies in the region

Please briefly explain the National Societies communication strategy for this operation

PMI, IFRC Country Cluster Delegation (CCD) Jakarta, and IFRC Asia Pacific Regional Office (APRO) will work closely together to ensure timely and consistent communication on the evolving situation and Red Cross Red Crescent response efforts.

Communication activities will include documenting response operations, community impacts, volunteer actions, and humanitarian assistance through photographs, videos, beneficiary stories, and operational updates. These materials will support reporting, donor and stakeholder engagement, media outreach, social media content, and visibility efforts across the Movement. PMI and IFRC CCD Jakarta will lead the collection, production, and dissemination of communication materials, while coordinating with IFRC APRO and Movement partners to ensure coherent and effective external communication.

Budget Overview

IFRC

DREF OPERATION

MDRID029 - Indonesian Red Cross
Indonesia - Flores Island Earthquake Response

Operating Budget

Planned Operations	**465,319**
Shelter and Basic Household Items	121,731
Livelihoods	0
Multi-purpose Cash	103,199
Health	90,039
Water, Sanitation & Hygiene	112,376
Protection, Gender and Inclusion	28,410
Education	0
Migration	2,650
Risk Reduction, Climate Adaptation and Recovery	0
Community Engagement and Accountability	6,915
Environmental Sustainability	0
Enabling Approaches	**234,362**
Coordination and Partnerships	0
Secretariat Services	97,980
National Society Strengthening	136,382
TOTAL BUDGET	**699,681**

all amounts in Swiss Francs (CHF)

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Click here for the reference