

# Rapid Response Fund Payment Request No. 10/2016



**Funds Sent To : YAKKUM Emergency Unit (YEU)**

**Amount Sent : USD 59,972**

**Date : December 13, 2016**

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## Details of Response

**Emergency : Earthquake in Pidie Jaya District, Nangroe Aceh Darussalam**

**Date of Emergency : December 7, 2016**

**ACT Requesting Member(s) : YAKKUM Emergency Unit (YEU) and Pelkesi (Indonesia Christian Association for Health Service)**

### I. NARRATIVE SUMMARY

A 6.5 Richter scale earthquake with the depth of 10 km struck Aceh Province in Pidie Jaya District at 05:03 am on 7 December 2016. The earthquake did not generate a tsunami; however many buildings in several areas collapsed. In addition to Pidie Jaya, both Pidie and Bireun districts were affected; but Pidie Jaya District was the hardest hit, requiring temporary shelters in 6 sub-districts: Bandar Baru (272 persons), Trienggadeng (1,099 persons), Meureudu (4,000 persons), Meurah Dua (4,270 persons), Ulim (200 persons), and Lueng Putu (460 persons)<sup>1</sup>. In total, at least 10,301 displaced people were relocated to temporary shelters, with some estimates putting the total number of displaced people at 43,000.

Based on the release from news local media, BNPB (National Disaster Management Agency) and the Crisis Centre of Ministry of Health about the severity of the situation as of 11 December 2016, there were 102 deaths, 136 severely injuries (mostly broken bones) and 600 persons minor injuries reported.

On December 9, the infrastructure damage report in Pidie Jaya District alone, revealed 2,874 severely damaged houses, one heavily damaged hospital, 234 collapsed shops, 29 damaged mosques, 3 damaged *pesantren* (Koranic schools) and one damaged college building.

For transportation access, although many roads were cracked, they are still accessible for the delivery of relief supplies. Assessments are ongoing, and there have been many challenges in compiling accurate, disaggregated data.

The government of Aceh province announced a state of emergency until 20 December 2016 with the possibility for a prolonged crisis response. While there is already a command post in place, and primary responsibility for the response has been taken by the provincial government, there are significant challenges to info-data collection, coordination and decision-making. The national government has taken on a support role.

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<sup>1</sup>Pusdatin BPBA (Data and Information Centre of Aceh Disaster Management Agency) at 08:30 a.m., 9 December 2016.



**ACTIONS TO DATE, AND EMERGENCY NEEDS**

People are still afraid to stay indoors with aftershocks and collapsed buildings, requiring the establishment of temporary shelter and camps nearby, which exacerbates health-related risks during the crisis phase. Moreover, with one heavily damaged hospital and limited health facilities to treat the influx of patients, there is an urgency to support the health system promptly. Thus, ACT Indonesia Forum members, YEU and Pelkesi, are applying for funds for a comprehensive health intervention in target areas, i.e., where temporary shelters require longer term assistance until a plan for rehabilitation and reconstruction is clear.

The multi-stakeholder coordination meeting on 11 December emphasized the urgency to:

- report valid and consolidated damage and loss assessment
- carry out a Rapid Health Assessment and mobilize health support under Ministry of Health (MoH) coordination
- distribute necessary non-food items (NFI): tarpaulins, tents and hygiene kits
- provide protection for vulnerable groups

YEU deployed emergency personnel on 9 December to assess issues related to (1) shelter management and (2) the rights and urgent needs of vulnerable groups. Pelkesi is currently preparing a medical team to address health issues: treatment of specific cases, as well as emergency health promotion.

For NFI distributions, stocks can be found in neighbouring districts and from cities like Banda Aceh and Medan, so there is a need for logistics / operational activities.

**PROPOSED EMERGENCY RESPONSE****OVERALL GOAL:**

Ensure essential assistance for two villages impacted by the earthquake by providing support to address basic needs and rights to ease current suffering and reduce future risk of diseases in accountable and inclusive manners.

**OBJECTIVE(S) OF THE EMERGENCY RESPONSE:**

1. To provide 1,000 affected people maintain their health status through comprehensive interventions in mobile health services, food distribution, psychosocial assistance and water, sanitation and hygiene (WASH) activities.
2. To improve conditions in temporary shelters in two villages by addressing the protection needs of displaced people, as well as promoting safer housing construction.

**PROPOSED ASSISTANCE:**

**OBJECTIVE 1:** To provide 1,000 affected people maintain their health status through comprehensive interventions in mobile health services, food distribution, psychosocial assistance and water, sanitation and hygiene (WASH) activities.

**Activities:****Health**

- 1.1 Provide mobile health services in two villages for three months
- 1.2 Provide physiotherapy through home visits for ≈ 200 people with potentially debilitating injuries

**Food assistance**

- 1.3 Distribute supplementary food every two weeks in two villages, particularly to those staying in temporary shelters, taking into account specific dietary needs of around 500 elderly people, pregnant women, <5 children and persons living with disabilities, in collaboration with local health care centres (Puskesmas, Posyandu)

**Psychosocial**

- 1.4 Facilitate culturally appropriate recreational activities during an emergency for ≈ 360 children and adults
- 1.5 Hold education sessions about psychosocial care and support for 25-30 teachers and community members

**WASH**

- 1.6 Distribute 500 hygiene kits to families, and to specific vulnerable groups: the elderly and people living with disabilities
- 1.7 Truck water to each village three times / day to ensure access to sufficient safe water for drinking, cooking and maintaining personal and domestic (household) hygiene
- 1.8 Build 12 emergency latrines in temporary shelter areas to ensure access to safe, sanitation facilities for different groups: (1) separate for women and men; (2) accessible for vulnerable groups, i.e., the elderly, people living with disability and children)
- 1.9 Lead monthly hygiene promotion campaigns for 1,000 persons in two villages in collaboration with local government health care providers

**OBJECTIVE 2:** To improve conditions in temporary shelters in two villages by addressing the protection needs of displaced people, as well as promoting safer housing construction.

**Activities:**

- 2.1 Hold two shelter management sessions in each village to help people understand how to build to meet healthy living standards that allow for meeting needs and addressing accessibility rights of vulnerable groups; elderly, under-five children and pregnant and lactating women
- 2.2 Organize an introductory training workshop about safe housing construction in accordance with government building codes and standards
- 2.3 Meet with local authorities to communicate the results of interventions and share key recommendations for district disaster preparedness efforts in the future

**Advocacy initiatives:**

Target local authorities and populations affected directly by the earthquake to (1) know, address and fulfil the rights of the affected people, with necessary support being provided by different duty bearers.

**IMPLEMENTATION ARRANGEMENTS:**

- YEU and Pelkesi will implement directly and collaborate with the local community-based organizations (CBOs) and other stakeholders such as Local Government Units (LGU), local health care providers, and the Aceh Disaster Management Agency (BPBA)
  - The main CBO YEU works with is JaRI (*Jaringan Rakyat Berdaya dan Siaga Indonesia*, The Network of Resilient People in Indonesia) in implementing the program. Moreover, JaRI is an Acehnese CBO and is therefore very knowledgeable with regards to the local context and is in a good position to solve arising local issues.
- The overall response is designed to be participatory, ensuring the involvement of local communities, volunteers and local authorities (as above) while encouraging coordination and collaboration. For community involvement, YEU's strategies are (1) consulting with communities to set their priorities for ACT Forum aid, (2) enabling communities to manage the temporary shelters in an accountable and inclusive manner, and (3) supporting communities in advocating with local authorities for the fulfilment of their basic rights

**COORDINATION:****Internal Coordination**

Activities will be implemented by YEU and Pelkesi field staff in coordination with local stakeholders, especially women's groups, government health clinic personnel, youth groups, and religious leaders as well as local authorities.

**Coordination with other organizations/local authorities in the area of intervention**

- YEU and Pelkesi will continue its participation in the coordination meetings established by the BPBA and local authorities. Information is also shared within the ACT Forum via agreed coordination meetings.
- YEU and Pelkesi will also continue coordinating with the Humanitarian Forum in Indonesia (HFI) and other local stakeholders lobbying for basic needs and rights fulfilment of the communities.

**COMMUNICATIONS:**

- Information will be shared through field reports, audio-visual materials such as video clips, Information-education-communication (IEC) materials, and during coordination with BNPB, BPBA, and local authorities.
- Sharing of information with the ACT Indonesia Forum and other humanitarian networks (such as HFI) as well as reporting to ACT Alliance Secretariat.
- Applying ACT Alliance visibility guidelines in audio-visual materials, IEC materials, and identification cards for staff.

**PRINCIPLES AND STANDARDS:**

YEU and Pelkesi pledges to abide by the ICRC Code of Conduct (CoC) as well as the ACT Code of Conduct for the Prevention of Sexual Exploitation and Abuse during the implementation of the emergency response.

YEU and Pelkesi also ensures that issues of gender and vulnerable people's inclusiveness, and of accountability to beneficiaries and others, are taken into consideration. Sphere standards will be used in consideration of local context and customs, especially with regard to distribution mechanisms for goods and services, construction of emergency latrines, and shelter management.

**PLANNED IMPLEMENTATION PERIOD:**

13 December 2016 – 13 March, 2017 (three months)

**HUMAN RESOURCES AND ADMINISTRATION OF FUNDS:**

YEU is taking full responsibility for the management and the distribution of funds for the humanitarian assistance. The human resources and administration of funds will be managed according to already well established procedures. The bookkeeping follows existing YEU Standard Operational Procedures (SOP). An audited financial report is budgeted for and will be submitted to the ACT Alliance Secretariat as per the reporting guidelines.

**Inputs for Project Implementation**

<b>Human Resources</b>			
<b>Positions</b>	<b>Number of staff</b>	<b>Period of Work</b>	<b>Notes</b>
Project Coordinator	1	3	Full time
Doctor	1	3	Full time
Nurse	1	3	Full time
Physiotherapist	1	2	Full time
Community Organizer	1	3	Full time
Logistician & Procurement Officer	1	3	Full time
Field Information officer	1	3	Full time

**MONITORING AND EVALUATION:**

YEU will be responsible for monitoring and evaluation with the following components:

- The Project Manager will supervise activity implementation to ensure achievement of outputs and outcomes, which will be reported to Emergency Coordinator Officer.

- The Emergency Coordinator Officer will closely monitor and cross-check progress in the field to ensure quality and accountability, and to analyse gaps in implementation and identify further humanitarian needs

**REPORTING SCHEDULE**

Type of Report	Due date
Situation report	Monthly
Final narrative and financial report	13 April 2017
Audit report	13 May 2017

**II. FINANCIAL SUMMARY/BUDGET****ACT RRF BUDGET FORMAT**

**Requesting ACT member:** YAKKUM Emergency Unit  
**RRF Number:** 10/2016  
**RRF Title:** Earthquake in Pidie Jaya District, Nangroe Aceh Darussalam  
**Implementing Period:** December 13 2016-March 13 2017

<u>INCOME</u>	RRF Budget <i>local currency</i>	RRF Budget USD
<b>INCOME - Received by Requesting Member via ACT Secretariat, Geneva</b>		
Date    Payment advice #	-	-
<b>TOTAL INCOME</b>	-	-

**EXPENDITURE**

Description	Type of Unit	No. of Units	Unit Cost IDR	RRF Budget IDR	RRF Budget USD
<b>DIRECT COST</b>					
<b>A    Objective 1:</b> To maintain the health status of around 1.000 affected populations through comprehensive health interventions covering food transfers, mobile health services, psychosocial assistances and WASH.					
<b>Food transfers</b>					
Provision of supplementary food every two weeks in two villages	lumpsum	12	1,500,000	18,000,000	1,385
<b>Health</b>					
Medical services in the camp for three months	patients	500	50,000	25,000,000	1,923
Physiotherapy for potential disability conditions	patients	200	150,000	30,000,000	2,308
<b>Other Health Related to Direct Costs</b>					
Doctor (100%) - 1 person	months	3	8,025,000	24,075,000	1,852
Nurse (100%) - 1 person	months	3	7,133,333	21,399,999	1,646

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<b><u>INCOME</u></b>	<b>RRF Budget <i>local currency</i></b>	<b>RRF Budget USD</b>
<b>INCOME - Received by Requesting Member via ACT Secretariat, Geneva</b>		
Date    Payment advice #	-	-
<b>TOTAL INCOME</b>	<b>-</b>	<b>-</b>

**EXPENDITURE**

<b>Description</b>	<b>Type of Unit</b>	<b>No. of Units</b>	<b>Unit Cost IDR</b>	<b>RRF Budget IDR</b>	<b>RRF Budget USD</b>
Physiotherapist	months	2	7,133,333	14,266,667	1,097
Travel and Accommodation	persons	2	9,500,000	19,000,000	1,462
<b>Total for Health</b>				<b>133,741,666</b>	<b>10,288</b>
<b>Psychosocial support</b>					
Sessions on self-protection (30 person from 2 post per meeting, 2 times meeting)	person	360	50,000	18,000,000	1,385
Training on Psychosocial care and support	lumpsum	2	5,000,000	10,000,000	769
<b>Total Psychosocial support</b>				<b>28,000,000</b>	<b>2,154</b>
<b>WASH</b>					
Distribution of hygiene kits	package	500	350,000	175,000,000	13,462
Temporary water trucking	package	3	2,000,000	6,000,000	462
Constructing of emergency latrines (6 toilet every post)	lumpsum	12	6,000,000	72,000,000	5,538
Hygiene promotion campaign (every month)	lumpsum	3	6,000,000	18,000,000	1,385
<b>Total for WASH</b>				<b>271,000,000</b>	<b>20,846</b>

**B    OBJECTIVE 2:** improve the living condition of temporary shelters in two villages by addressing the needs for inclusive shelter management and safer housing construction.

Shelter management sessions in two villages	lumpsum	2	5,000,000	10,000,000	769
Introductory training on safer housing construction for the future in accordance to building codes and standards	lumpsum	1	35,000,000	35,000,000	2,692
Coordination meetings with local authorities	package	2	5,000,000	10,000,000	769
<b>Sub total</b>				<b>55,000,000</b>	<b>4,231</b>
<b>Other Direct Costs</b>					

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Date      Payment advice #	-	-
<b>TOTAL INCOME</b>	<b>-</b>	<b>-</b>

<b>EXPENDITURE</b>						
<b>Description</b>	<b>Type of</b>	<b>No. of</b>	<b>Unit Cost</b>	<b>RRF Budget</b>	<b>RRF Budget</b>	
	<b>Unit</b>	<b>Units</b>	<b>IDR</b>	<b>IDR</b>	<b>USD</b>	
Program Coordinator (100%) - 1 person	months	3	8,916,667	26,750,000	2,058	
Community Organizer (100%) - 1 person	months	3	7,133,333	21,400,000	1,646	
Travel and Accomodation	persons	2	8,000,000	16,000,000	1,231	
<b>Sub total</b>				<b>64,150,000</b>	<b>4,935</b>	
<b>Total for Emergency Preparedness</b>				<b>119,150,000</b>	<b>9,165</b>	
<b><u>Other Sector Related Direct Costs</u></b>						
Salaries & benefits for direct staff (co-ordinator, per diem for volunteers)				-	-	
Needs Assessment	lumpsum	1	22,300,000	22,300,000	1,715	
Communication/visibility cost				-	-	
Beneficiary Selection				-	-	
<b>TOTAL DIRECT ASSISTANCE</b>				<b>22,300,000</b>	<b>1,715</b>	

**TRANSPORT, WAREHOUSING & HANDLING****Transport (of relief materials)**

Car	month	3	5,000,000	15,000,000	1,154
Motorcycle	month	3	2,000,000	6,000,000	462
Fuel	month	3	1,000,000	3,000,000	231

**Warehousing**

Rental of warehouse	month	3	6,500,000	19,500,000	1,500
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**Handling**

Salaries for Finance Staff	months	3	5,350,000	16,050,000	1,235
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Date      Payment advice #	-	-
<b>TOTAL INCOME</b>	-	-

<b>EXPENDITURE</b>						
Description	Type of	No. of	Unit Cost	RRF Budget	RRF Budget	
	Unit	Units	IDR	IDR	USD	
(100%) - 1 person in the field						
Salaries for Logistician and Procurement Officer (100%) - 1 person	months	3	5,350,000	16,050,000	1,235	
Travel and Accomodation for Logistician and Finance	roundtrip	2	1,500,000	3,000,000	231	
<b>TOTAL TRANSPORT, WAREHOUSING &amp; HANDLING</b>				<b>78,600,000</b>	<b>6,046</b>	

<b>TOTAL DIRECT COST</b>	<b>670,791,666</b>	<b>51,599</b>
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**INDIRECT COSTS: PERSONNEL, ADMINISTRATION & SUPPORT**

<u>Staff salaries</u>						
Information Officer (100%) - 1 person	months	3	3,200,000	9,600,000	738	
Accounting Officer (100%) - 1 person in HQ	months	3	3,200,000	9,600,000	738	
<b>e.g.</b> <u>Office Operations</u>						
Office Rent	months	3	4,000,000	12,000,000	923	
Office stationery	months	3	750,000	2,250,000	173	
<u>Communications</u>						
Telephone and fax	months	3	1,300,000	3,900,000	300	
<u>Other</u>						
Insurance (25%)	person	2	750,000	1,500,000	115	
<b>TOTAL INDIRECT COST: PERSONNEL, ADMIN. &amp; SUPPORT</b>				<b>38,850,000</b>	<b>2,988</b>	

**AUDIT, MONITORING & EVALUATION**



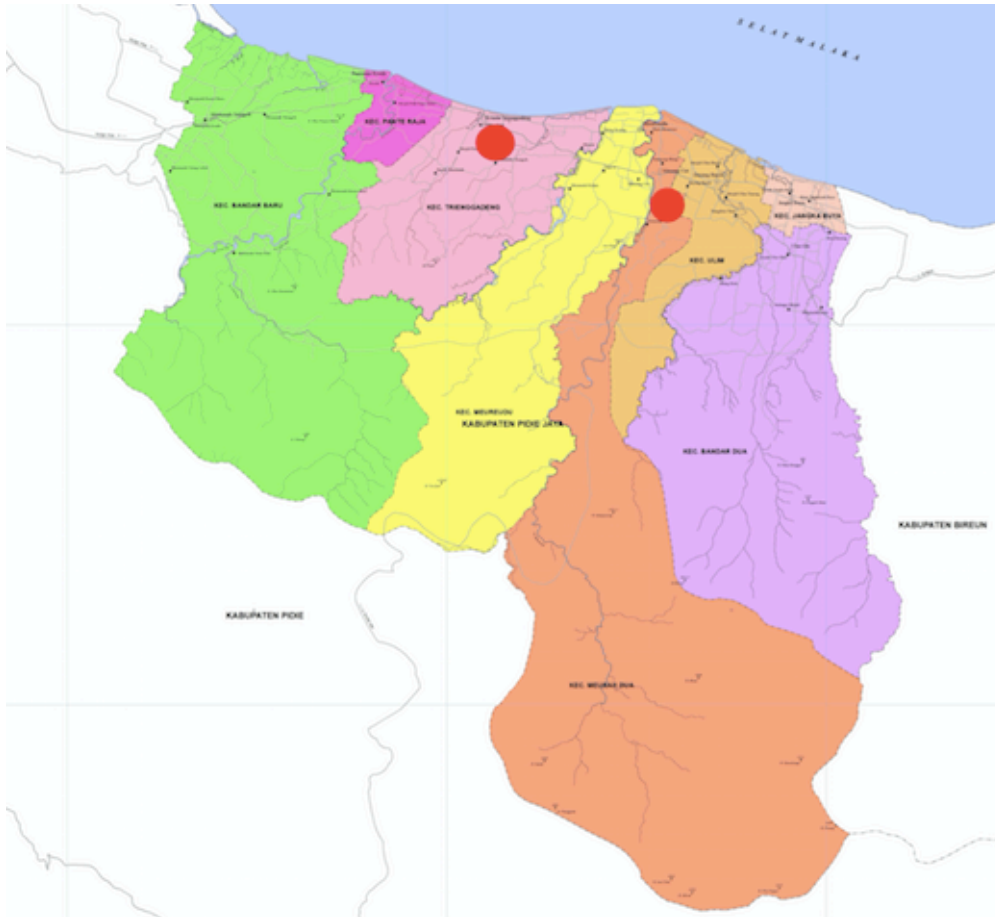
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Date      Payment advice #	-	-
<b>TOTAL INCOME</b>	<b>-</b>	<b>-</b>

**EXPENDITURE**

<b>Description</b>	<b>Type of</b>	<b>No. of</b>	<b>Unit Cost</b>	<b>RRF Budget</b>	<b>RRF Budget</b>
	<b>Unit</b>	<b>Units</b>	<b>IDR</b>	<b>IDR</b>	<b>USD</b>
Audit of ACT RRF	Estimate	1	40,000,000	40,000,000	3,077
Monitoring & Evaluation	Estimate	3	10,000,000	30,000,000	2,308
<b>TOTAL AUDIT, MONITORING &amp; EVALUATION</b>				<b>70,000,000</b>	<b>5,385</b>
<b>TOTAL EXPENDITURE</b>				<b>779,641,666</b>	<b>59,972</b>

**ANNEX .1 Affected Area****ACTION**

The ACT Secretariat has approved the use of US\$ 59,972 towards the budget from its Rapid Response Fund and would be grateful to receive contributions to wholly or partially replenish this payment. Should there be an appeal for this emergency, the RRF payment will be considered as an advance.

**For further information please contact:**

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