Section 1: Overview of response

<table>
<thead>
<tr>
<th>Summary</th>
<th>ACT Requesting Member 1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Implementation period</td>
<td>14 August 2018 Start date 13 November 2018 End date 3 (months)</td>
</tr>
<tr>
<td>Geographical area</td>
<td>Lombok Island, West Nusa Tenggara</td>
</tr>
<tr>
<td>Sectors of response</td>
<td>☒ Shelter / NFIs ☒ Protection/ psychosocial ☒ Health ☒ WASH ☐ Food Security</td>
</tr>
<tr>
<td>Targeted beneficiaries (per sector)</td>
<td>1,500 individuals in North Lombok, West Nusa Tenggara</td>
</tr>
<tr>
<td>Requested budget (USD)</td>
<td>63,291 (USD)</td>
</tr>
</tbody>
</table>

Is there an updated ACT Forum EPRP? No

Section 2: Narrative Summary

Background
In the afternoon of Sunday, 05 August 2018, the district of North Lombok and East Lombok in West Nusa Tenggara, was hit by a 7.0 magnitude earthquake at 6:46 PM Indonesia local time. This earthquake exacerbated damage in areas previously affected by a 6.4 magnitude earthquake on 29 July 2018, which killed 17 people and injured over 160. The epicenter of the earthquake was 18 km north-west of East Lombok. A tsunami alert was sounded but later cancelled. The worst-hit areas are North Lombok, East Lombok and Mataram City. The Provincial Disaster Management Agency initially reported that 82 people died, and the latest reports from the National Agency for Disaster Management as of 10 August indicate at least 347 casualties, 1,033 seriously injured, and 270,168 displaced. 67,857 houses and 458 school buildings were seriously damaged. These numbers may still increase in the next few days.

Aftershocks are still going on, and the Meteorological, Climatological, and Geophysical Agency (BMKG) recorded that there were 344 aftershocks after the magnitude-7 quake on 5 August. A strong 6.2 magnitude quake struck Lombok on Thursday, 9 August 2018, causing people panic in the emergency shelters.

Humanitarian Needs
The earthquake has put the affected districts in a state of crisis. The affected population find themselves in a desperate situation, with many unmet vital humanitarian needs such as access to sufficient food, safe shelter and basic non-food items, health services and psychosocial support, safe drinking water, as well as sanitation facilities and hygiene infrastructure, hygiene promotion, livelihood activities, protection services, and adequate nutrition.

The dire situation is further compounded for people with vulnerabilities, specifically women and girls, children under five, the elderly, and people with disabilities. There is a pressing need to provide...
immediate assistance to minimize loss of life and to ensure that the needs of the most vulnerable are covered first.

**Capacity**
A team from YEU and Pelkesi, including 1 doctor and 2 nurses, have been in North Lombok District since July 31, 2018. Actions already taken include:
1. Assessment focused on health, WASH, shelter, psychosocial support and livelihoods
2. Provided emergency health services in 12 temporary shelters, serving 386 patients (188 women, 198 men, where 65 of those are under five children and 68 older people).
3. Initial assistance in inclusive shelter management

**Proposed response**
In collaboration with relevant stakeholders, YEU has identified gaps in temporary shelters to accommodate the needs and accessibility of vulnerable groups. YEU will therefore provide immediate basic needs for around 1,000 individuals through WASH, health services; shelter and non-food items, and psychosocial support. YEU will also develop inclusive and accountable temporary shelters by addressing the need and right of disaster affected people especially of vulnerable groups.

*Does the proposed response honour ACT’s commitment to Child Safeguarding?*
☐ Yes  ☒ No

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| Problems | Extensive damage of housing and infrastructure has resulted in large number people being affected
<table>
<thead>
<tr>
<th></th>
<th>Lack of comprehensive disaggregated data, results in the inability of vulnerable groups being identified effectively and their needs addressed.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target beneficiaries</td>
<td>1500 people who are living in North Lombok District, West Nusa Tenggara Province. Those belonging to vulnerable groups are identified and especially targeted (elderly people, pregnant women, lactating mothers, children under 5 years old and people living with disabilities).</td>
</tr>
</tbody>
</table>
| Main activities | **Shelter**
|          | 1. Two shelter management sessions to help people understand how to meet healthy living standards that allow for meeting needs and addressing accessibility rights of vulnerable groups
|          | 2. Provision of tarpaulins, mattresses and plywood to practice inclusive shelter management for vulnerable groups.
|          | 3. Provision of 100 packages of carpenter kits
|          | 4. Coordination meetings with local authorities

**WASH**
1. Distribution of clean and potable water
4. Lead monthly hygiene promotion campaign for 1,200 individuals in collaboration with local government health care provider
### Health/Nutrition
1. Health service for 3 months’
2. Provision of supplementary food every two weeks, particularly to those who stay in temporary shelters, taking into account specific dietary needs of elderly people, pregnant women, breastfeeding, children under 5 years old and people living with disabilities, in collaboration with local health care centers.
3. Physiotherapy for potential disability condition

### Protection/Psychosocial support
1. Facilitate play and recreational activities 2 times a week for 50 persons
2. Establish community-based child protection mechanism

<table>
<thead>
<tr>
<th>Specific objective(s)/ Outputs</th>
<th>Support 1500 survivors with immediate basic needs in shelter and non-food items; WASH, health intervention, and psychosocial support.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall objective / Outcome(s)</td>
<td>To facilitate and ensure the fulfilment of the basic needs and rights of the people in temporary shelters who were displaced and cannot return to their homes, in an accountable and inclusive manner.</td>
</tr>
</tbody>
</table>

### Reporting Schedule

<table>
<thead>
<tr>
<th>Type of Report</th>
<th>Due date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Situation report</td>
<td>13 September 2018.</td>
</tr>
<tr>
<td>Final narrative and financial report</td>
<td>12 January 2019</td>
</tr>
<tr>
<td>Audit report (90 days after the ending date)</td>
<td>11 February 2019</td>
</tr>
</tbody>
</table>

### Monitoring and evaluation
YEU will be responsible for overall monitoring and evaluation. The overall monitoring plan includes the following components:

1. The project manager will supervise the implementation of activities to ensure achievement of outputs and outcome that will be reported to the emergency coordinator
2. The emergency coordinator will carry out close monitoring and cross-checking in the field for the progress reported, analysing any gaps and identifying further humanitarian needs.

### Section 3: ACT Alliance coordination

### Coordination
YEU will continue its active participation in the coordination meetings established by national cluster and local authorities. YEU also will encourage local churches and Jakomkris TBI to be involved in coordination meetings. Information is also shared within the ACT Indonesia Forum. The activities will be implemented by the field staff in coordination with local stakeholders, women’s groups, elderly groups, health personnel and religious leaders, as well as local authorities.

### Implementation arrangements
YEU will implement directly and will collaborate with existing CBOs and other stakeholders. The overall response is conducted in an accountable and participatory manner, ensuring the involvement of communities/local volunteers/local authorities such as: local health care providers, local agency for disaster management (BPBD), in the project planning, implementation and evaluation. To involve the community, the following strategy will be used: (1) consult with community in setting beneficiary...
priorities; (2) give capacity to communities to manage on their own shelter in an inclusive and accountable manner; (3) facilitate the community to advocate the fulfilment of basic rights through meetings with government and community.

YEU also works hand in hand with local churches and local interfaith communities in implementing the program as a strategy for trust building purposes and empowerment for local churches and local interfaith communities in managing the aid.

**Human resources and administration of funds**

YEU is taking the responsibility for the management and the distribution of fund for the humanitarian assistance. It is also responsible for the implementation, administration control, and monitoring, report writing and project evaluation. The human resources and administration of fund will be managed according to already established procedures. The procedure of bookkeeping follows existing YEU standards (SOP). An audited financial report is budgeted and will be submitted to ACT Alliance Secretariat as per the reporting guidelines.

<table>
<thead>
<tr>
<th>Human Resources</th>
<th>No. of staff</th>
<th>Period of Work</th>
<th>Notes</th>
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</thead>
<tbody>
<tr>
<td>Project Manager</td>
<td>1</td>
<td>3 months</td>
<td>Full time</td>
</tr>
<tr>
<td>Community Organizer</td>
<td>2</td>
<td>3 months</td>
<td>Full time</td>
</tr>
<tr>
<td>Finance Staff</td>
<td>1</td>
<td>3 months</td>
<td>Full time</td>
</tr>
<tr>
<td>Logistic Staff</td>
<td>1</td>
<td>3 months</td>
<td>Full time</td>
</tr>
<tr>
<td>Information Staff</td>
<td>1</td>
<td>3 months</td>
<td>Full time</td>
</tr>
<tr>
<td>Medical doctor</td>
<td>1</td>
<td>3 months</td>
<td>Full time</td>
</tr>
<tr>
<td>Nurse</td>
<td>2</td>
<td>3 months</td>
<td>Full time</td>
</tr>
<tr>
<td>Physiotherapy</td>
<td>1</td>
<td>3 months</td>
<td>Full time</td>
</tr>
</tbody>
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**Communications**

Information will be shared in various ways from the project through filed reports, audio-visual materials and featured articles. Featured articles will be published in the Humanitarian Forum Indonesia (HFI), National Disaster Management Agency (BNPB), Province and District Disaster Management Agency (BPBD), Health Crisis Center, Indonesian health ministry, mailing list and YEU web, and ACT Alliance communication channels.

**Section 4: Budget Summary**
### DIRECT COSTS

<table>
<thead>
<tr>
<th>Type of</th>
<th>No. of</th>
<th>Unit Cost</th>
<th>Appeal</th>
<th>Appeal</th>
<th>Budget</th>
<th>Budget</th>
</tr>
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<tbody>
<tr>
<td></td>
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<td>Unit</td>
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<td>Units</td>
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**Program Staff**

1. Project Manager: 3
   - Cost: 900,000
   - Total: 2,700,000

2. Community Organizer (2 persons): 6
   - Cost: 700,000
   - Total: 4,200,000

3. Finance staff: 3
   - Cost: 600,000
   - Total: 1,800,000

4. Field Information staff: 3
   - Cost: 600,000
   - Total: 1,800,000

5. Logistic: 3
   - Cost: 500,000
   - Total: 1,500,000

6. Medical doctor: 3
   - Cost: 750,000
   - Total: 2,250,000

7. Nurse (2 persons): 6
   - Cost: 600,000
   - Total: 3,600,000

8. Physiotherapist: 3
   - Cost: 650,000
   - Total: 1,950,000

9. Community Volunteers: 3
   - Cost: 210,000
   - Total: 630,000

10. Insurance: 11
    - Cost: 75,000
    - Total: 925,000

**TOTAL PROGRAM STAFF**

- 240,000
- 15,450

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**Program Activities**

1. Shelter and self-help / Non-food items: 1340
   - Cost: 125,000
   - Total: 1,560,000

2. Shelter management sessions: 2 lump sum
   - Cost: 250,000
   - Total: 500,000

3. Provision of protective clothing, mattresses and plywood: 250
   - Cost: 400,000
   - Total: 1,000,000

4. Coordination meetings with local authorities: 3
   - Cost: 150,000
   - Total: 450,000

5. Water, sanitation & hygiene / WASH: 22,500
   - Cost: 16,000
   - Total: 16,000

6. Distribution of clean and potable water by temporary water trucking: 12
   - Cost: 50,000
   - Total: 120,000

7. Construction of 5 emergency latrines in the temporary shelters: 5
   - Cost: 100,000
   - Total: 100,000

8. Lead monthly hygiene promotion campaign: 2
   - Cost: 200,000
   - Total: 400,000

**TOTAL PROGRAM ACTIVITIES**

- 482,000
- 32,324

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**Program Implementation**

1. Needs Assessment: 5
   - Cost: 500
   - Total: 2,500

2. Communication / Visibility: 5
   - Cost: 200
   - Total: 1,000

3. Complaint mechanisms: 1
   - Cost: 100
   - Total: 100

4. Monitoring & Evaluation: 3
   - Cost: 100
   - Total: 300

5. Audit: 1
   - Cost: 200
   - Total: 200

**TOTAL PROGRAM IMPLEMENTATION**

- 75,000
- 5,214

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**Program Logistics**

1. Hire / Rental of Vehicles-car: 3
   - Cost: 770,000
   - Total: 2,310,000

2. Hire / Rental of Vehicles/motorcycle: 3
   - Cost: 280,000
   - Total: 840,000

3. Travel & Accommodation: 5
   - Cost: 500,000
   - Total: 2,500,000

4. Fuel: 3
   - Cost: 200,000
   - Total: 600,000

**TOTAL PROGRAM LOGISTICS**

- 1,100,000
- 7,040

**Total Direct Cost**

- 953,000
- 98,634

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**Indirect Costs: Personnel, Administration & Support**

<table>
<thead>
<tr>
<th>Description</th>
<th>No. of</th>
<th>Unit Cost</th>
<th>Appeal</th>
<th>Budget</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Unit</td>
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<td></td>
<td></td>
<td>Units</td>
<td>IDR</td>
<td>IDR</td>
</tr>
</tbody>
</table>

1. Staff salaries
   - 20% for Programme Director: 3
     - Cost: 250,000
     - Total: 750,000

2. Staff salaries for Accountant: 3
   - Cost: 200,000
   - Total: 600,000

3. Office Operations: 3
   - Cost: 200,000
   - Total: 600,000

4. Communication: 1
   - Cost: 175,000
   - Total: 525,000

**TOTAL INDIRECT COST**

- 880,000
- 82,791
ACTION
The ACT Secretariat has approved the use of US$ 63,291 from its Rapid Response Fund and would be grateful to receive contributions to the Global RRF Appeal (GRRF18) 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:
ACT Regional Representative – Asia/Pacific, Anoop Sukumaran (ask@actalliance.org)
ACT Regional Programme Officer, James Munpa (James.Munpa@actalliance.org)
ACT website: http://www.actalliance.org

Alwynn Javier
Global Humanitarian Coordinator
ACT Alliance Geneva