



Palang
Merah
Indonesia

Hand in Hand

A Collection of Disaster Risk Reduction Success Stories

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RC/RC Movement in Indonesia

The international Committee of the Red Cross (ICRC) - is an impartial, neutral and independent organization whose exclusively humanitarian mission is to protect the lives and dignity of victims of war and internal violence and to provide them with assistance. It directs and coordinates the international relief activities conducted by the Movement in situations of conflict. It also endeavors to prevent suffering by promoting and strengthening humanitarian law and universal humanitarian principles. Established in 1863, the ICRC is at the origin of the International Red Cross and Red Crescent Movement

The International Federation of Red Cross and Red Crescent Societies (IFRC) is the world's largest humanitarian organization, providing assistance without discrimination as to nationality, race, religious beliefs, class or political opinions. The International Federation's mission is to improve the lives of vulnerable people by mobilizing the power of humanity. Founded in 1919, the International Federation comprises 187 members of Red Cross and Red Crescent societies, a secretariat in Geneva and 60 offices strategically located to support activities around the world

Indonesian Red Cross (Palang Merah Indonesia or PMI) is a neutral organization and independence that dealing with humanitarian activities. Founded on 17 August 1945, PMI's main mandate is to assist alleviating community suffering in disaster response and first aid. Today, PMI is located in 33 provinces and its 444 branches in district level with 1,438,387 volunteers spreading in all over Indonesia

Together, all the components of the International Red Cross and Red Crescent Movement (the Movement) are guided by the same seven Fundamental Principles: humanity, impartiality, neutrality, independence, voluntary service, unity and universality.

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Jakarta, June 2012

**Headquarters Executives
PALANG MERAH INDONESIA**

**Chairman,
H.M. JUSUF KALLA**

Greetings,

Indonesian Red Cross (Palang Merah Indonesia/PMI) is the national society which became a component and the International Red Cross and Red Crescent Movement. It has chapters and branches in 444 cities across the country

PMI is an auxiliary to the government to provide assistance to communities in emergency situation, natural or human-made disasters as well as to promote the voluntary blood donors. As a humanitarian organization, PMI belongs to the communities which membership is open to all classes without distinction. In its development, since 1995 PMI has not focused on relief assistance only, but also on disaster preparedness and risk reduction as important aspects in reducing number of victims

In line with the commitment of Government of Indonesia in achieving objectives of Hyogo Framework for Action 2005-2015 and Millennium Development Goals, PMI is implementing several risk reduction programmes through close collaboration with International Federation of Red Cross and Red Crescent Societies (IFRC), International Committee of The Red Cross (ICRC), Participating National Societies (PNSs), other humanitarian agencies, donors as well as government counterpart, to be better prepared to disasters

This document explains PMI's initiatives and activities in reducing vulnerabilities against disaster impact in Indonesia. We hope this is able to provide information as well as lesson learnt for those who are working with vulnerable communities in Indonesia. In addition, this media is expected to become an important note to be replicated and developed in other vulnerable areas

PMI is committed to continues our services for the people in reducing vulnerabilities by strengthening their resiliency

Jakarta, June 2012

Headquarter Executives
PALANG MERAH INDONESIA

Chairman
H.M. JUSUF KALLA



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PREPARING THE COMMUNITY, REDUCING RISKS

“The more governments, UN agencies, organizations, businesses and civil society understand risk and vulnerability, the better equipped they will be to mitigate disasters when they strike and save more lives.” - Ban Ki-moon, Secretary General of United Nation.

As the largest archipelagic country in the world with its geographical position, Indonesia is prone to various disasters. According to a global risk analysis issued by the World Bank, Indonesia has been identified as one of 35 countries with a high death risks due to multiple hazards¹. 40 percent of its total population live in disaster-risk areas. Based on the data from the Centre for Research on the Epidemiology of Disaster (CRED), more than 21 million people of Indonesia have been affected by 314 disaster occurrences in the last 30 years. Earthquake is the most occurring disaster, closely followed by floods, landslide and volcano eruptions. Other frequent disasters are drought, epidemic (whether due to bacteria, parasite or virus), hurricane and forest fire.

With such high level of risks, people cannot only rely on preparedness in dealing with disasters, but people cannot also blame nature whenever disasters strike and call them as parts of an inevitable destiny. Some disasters do not unexpectedly happen, some are triggered by vulnerabilities. For example, many deforestation cases will lead to flooding and landslides, littering, improper use of land will lead to poor catchment in some areas and eventually cause flood.

¹Margaret Arnold, Maxx Dilley, Uwe Deichmann, Robert S. Chen, Arthur L. Lerner-Lam, *Natural Disaster Hotspots: A Global Risk Analysis* (World Bank, 2005)

Additionally, disaster risk reduction is considered important, because disasters not only result in much loss of life, dreadful injury and impairment, they also destroy livelihood, personal property and critical infrastructure. The damages due to disasters can also impact the growth and development of a country, and also hinder the achievement of the Millennium Development Goals (MDG).

Investment in disaster risk reduction, including disaster preparedness activities in the community as well as strengthening infrastructures to survive from disasters, could drastically reduce the losses from disasters. Thus, risk reduction efforts would not only reduce the number of casualties and losses due to disasters, but also protects the achievement of MDG.

For instance, disasters destroys livelihood such as farms and livestock, which leads to food insecurity and unemployment, giving rise to long-term poverty. This would hamper the achievement of MDG goal “to eradicate extreme poverty and hunger”. Through disaster risk reduction programmes, livelihood alternative efforts are carried out to increase community resilience. These programmes aim to ensure that the community will still have a source of income when they are affected by disasters; so that the development prior to the disaster can be upheld.



Another example of a post-disaster situation is some diseases like malaria could spread more rapidly. This situation could be worse by the disruption of health services, like the destruction of health facilities. Some MDG efforts like “preventing HIV/AIDS, malaria, and other diseases” might fail. Health education would help reduce this situation, so that the condition prior the disaster will not be declining.

Globally, governments around the world have committed to reduce disaster risks, and the government of 168 countries have adopted the risk reduction agenda as outlined in the Hyogo Framework for Action 2005-2015 (HFA²) in the World Conference on Disaster Risk Reduction held in Kobe, Japan in 2005. This document is a guideline to reduce vulnerabilities to natural disasters and aims to assist the efforts of nations and communities to become more resilient to disasters and able to cope with hazards that could threaten their development as well as MDG’s.

²The five priorities for action of the Hyogo Framework for Action are:

1. To ensure that disaster risk reduction is a national and a local priority with a strong institutional basis for implementation.
2. To identify, assess, and monitor disaster risks and enhance early warning.
3. To use knowledge, innovation and education to build a culture of safety and resilience at all levels.
4. To reduce the underlying risk factors.
5. To strengthen disaster preparedness for effective response at all levels.

The change of paradigm from disaster response to disaster management (including disaster risk reduction) has been explicitly acknowledged by the government of Indonesia in the Disaster Management Law number 24 of 2007. This promoted some changes, from emergency-only actions to a more holistic approach to disaster. The pre-disaster management is put forward to reduce the disaster risks and community’s vulnerability.

Along with the paradigm shift, the Indonesian Red Cross (Palang Merah Indonesia/PMI) has strengthened its disaster preparedness and mitigation efforts. PMI has mainstreamed disaster risk reduction into various programmes; ranging from community-based programmes to its distinctive programs, reflected in its five-year programme outlined in PMI’s Strategic Plan 2010-2014.

PMI understands that the community takes the main role in disaster response. Therefore, community resilience and understanding on disaster must be improved, both when the disaster is happening and when the recovery and the disaster risk reduction efforts is taking into actions. PMI often faces challenges, like local community who help them first mostly have no disaster response skills while the more professional ones often face hindlers like distance and inaccessible disaster areas. PMI has to prepare this local community to be more skilled in disaster response as well as to organize various-yet-specific risk reduction efforts in their respective areas.

Aiming to increase the community’s resilience to disasters, PMI has organized its fourth mission called “developing community-based Red Cross activities”. PMI focuses on two activities to achieve this program. First, increasing local community’s ability to deal with natural disasters, outbreak/pandemic potential diseases, and man-made environmental health problems; Second, promoting and empowering both formal and informal community leaders in the management of disaster or disease outbreak and the increase of community-based health with a focus on risk reduction.

PMI’s mission “Developing community-based Red Cross activities” is in harmony with HFA’s general goal, namely “to build resilience of nations and communities to disasters, by achieving substantive reduction of disaster losses by 2015 - in lives, and in the social, economic, and environmental assets of communities and countries”. Therefore, all PMI’s disaster risk reduction activities which are implemented to achieve its own mission also contribute to the achievement of HFA goal.

In addition, PMI promotes the achievement of a common consensus to establish a safer and more resilient community as one of HFA goals. The followings are the key characteristics of safe and resilient communities:

- They can understand the disaster risks that they face, they can assess and monitor these risks and can protect and make themselves safe to minimize losses and damage when a disaster strikes;
- They are able to do much for themselves and can sustain their basic community functions and structures despite the impact of disasters;
- They can build back after a disaster and work towards ensuring that vulnerabilities continue to be reduced for the future. More safety and resilience means less vulnerability;
- They understand that building safety and resilience is a long-term, continuous process that requires ongoing commitment. In the face of such unknown factors as the effect of climate change, or the degree of urban growth or environmental degradation, they understand that there is much that can be done to adapt to future problems and challenges by building on their current knowledge;



- They appreciate the fact that being safe and disaster resilient means that there is a greater chance of meeting development goals which, in themselves, will greatly add to safety and resilience.

This book tells the success programmes which give direct or indirect contributions towards the community resilience, disaster and health risk reduction.

In accordance with the development of safe and resilient communities, a number of community-based programmes are implemented. PMI has also initiated a community-based disaster preparedness (CBDP) programme in 2002. In 2005, this program concept was further developed into an Integrated Community-Based Risk Reduction (ICBRR) approach. Thereby, community-based risk reduction efforts carried out with this approach do not merely focus on natural disaster risks, but all risks in general, including health, environment as well as social and economic risks. The main component of its activities is to enhance the community's capacity in response and reduce risks at the community level. Since 2002 until now, ICBRR has been implemented in 19 provinces.

Risk reduction efforts, particularly health related risks are also carried out simultaneously. The programmes use a Community-Based Health and First Aid (CBHFA) approach, which has been implemented since 1999 and has run in 21 provinces in Indonesia. This approach was at first launched as Community-Based First Aid (CBFA), but it was developed to also cover general health issues in 2008.

The main component of CBHFA is to reduce the community's vulnerability by lowering the rates of health risks. Some of the activities are training the villagers to be able to carry out basic first aid in accidents or injuries, and to be vigilant and more prepared to health emergencies. In addition, the community is also given basic knowledge on health risk reduction through health and environment promotion and education as well as prevention of epidemic diseases, including infectious diseases such as HIV/AIDS, dengue, malaria and avian flu.

Through programmes using ICBRR and CBHFA approach, PMI has recruited and trained volunteer corps (Korps Sukarela/KSR) and community-based action team (CBAT)/village volunteers. The CBAT members and village volunteers are local villagers who are trained with knowledge and skill and they will assist the implementation of the programme. Their job is to facilitate the community in various programme stages, in carrying out hazard, risk, vulnerability and capacity assessment, and identifying what action they will take to address the hazard, risk and vulnerability using their capacity. The role of KSR and CBAT as well as village volunteers is crucial in mobilizing and empowering the community, so that the targeted community are not merely receivers for the programs' benefits, but are also active participants in the programme implementation and in the decision making process.

PMI appoints the CBAT and the village volunteers to be their extension in facilitating and mobilizing the community in some village areas, and the same roles are taken by the Red Cross Youth (Palang Merah Remaja/PMR) to hold Disaster Preparedness in Schools (Sekolah Siaga Bencana/SSB) programme in a school level. Through this program, the members of Youth Red Cross are equipped with knowledge and skills to reduce disaster risks. They are expected to disseminate the knowledge and skills to their classmates as well as their respective families.

The Red Cross Youth Programmes started as extracurricular activities at the end of 2006. The peer education approach is believed to be effective in improving life skills, changing health behaviour, increasing environmental awareness and reducing disaster risks. Children and youth will work together in exchanging information, identifying problems and devising solutions through risk reduction activities and behaviour.

The above three programmes are only a small part of the synergized programmes which have been implemented since a long time ago. PMI activities cover pre-disaster activities, emergency response and post disasters, even recovery and reconstruction which is a combination of service and community capacity enhancement. For example, Water and

sanitation programme, is also implemented with a community-based approach in a non-disaster setting, besides to provide the clean water during emergency. The aim is to reduce community's exposure to water borne diseases due to the use and consumption of unsafe water.

A series of programmes such as the provision of temporary shelters, ambulance services, disaster command post, psycho-social support programme (PSP) and restoring family links (RFL), are correlated programmes implemented not only during post-disaster situation but also continuously to improve the quality of community's life in general.

In addition to increasing awareness on disaster risks, PMI integrates climate change adaptation component in each approach with the support of the Red Cross Red Crescent Climate Centre. The disaster risk reduction and climate change adaptation have similar interests and goals, namely to increase community's resilience and reduce vulnerabilities to hazards and impact due to disasters and climate factors. Therefore, both require strong collaboration between the sectors and an integrated development plan when they come to practice.

Not all PMI programmes can be summarized and described in detail, considering the extensive and comprehensive programmes. However, some can be depicted as an illustration on what and where the positive impacts have been formed. Although the efforts of reducing community vulnerabilities may not succeed immediately, but PMI's integration and hand-in-hand efforts with the community have come a long way. Various stories of the community have been etched, forming an account of a process towards significant outcome. This book is not merely a record of risk reduction activities, but also a narrative on complementary and supporting activities which depicts detail community mobilization.

PMI's community-based programs have organized a strong partnership. The integrated programmes have triggered awareness and behaviour change in the community. In its further development, the community rolled out the programme self-reliantly, even forming its own disaster risk reduction system and culture. The community involvement is the key, because once the community started to change on their own, the

positive behaviour will consistently be maintained. Risk reduction does not only become a programme, but has become a newly adopted life skill. Thus, it is hoped that each of the stories immortalized through this book can serve as a real-life illustration of a vigilant and resilient community.

PMI understands that the community takes the main role in disaster response. Therefore, community resilience and understanding on disaster must be improved, both when the disaster is happening and when the recovery and the disaster risk reduction efforts is taking into actions.

Disaster Preparedness



CBAT OF MERAPI: WHEN COMMUNITIES ARE BETTER PREPARED

When Mount Merapi erupted on 26 October 2010, the village officials and the community based action team (CBAT) members of Wonodoyo village, Boyolali district, sounded the long sirens to warn the community of the danger. At the time, the Integrated Community Based Risk Reduction (ICBRR) program just started its implementation and the community has not taken part in disaster preparedness simulation yet; therefore they were unaware on the siren's meaning.

Despite of the community's lack of response to the siren, the head of village and CBAT commander took an immediate action. They utilized the early warning system although they have just learned about the function. As the communities have not been familiarized with standard evacuation procedures, the village officials and CBAT faced difficulties mobilizing them. Some of them even refused to leave their homes. "Dust!" was their reason. However, the CBAT members persistently persuaded the residents to leave. The sirens continued to wail, up to a point that two of them broke down.

"Even when Merapi erupts, the community will not react much. They are mostly passive. This kind of reaction always happens, like a tradition." Slamet Haryanto, ICBRR field coordinator in Boyolali district said.

The community of Cluntang village, Boyolali district is much more responsive. They participated in a disaster simulation on 19 October 2010, just a week before the volcano erupted, and the simulation was very useful in this situation. The villagers immediately understood what to do when the sirens were sounded, the evacuation process was smooth, and they knew the location of the assembly point. Even the CBAT members were also well-prepared, since it has only been a week since the simulation. The procedures for evacuation and first aid were still fresh in their minds. Bottom line, The simulation training makes the mobilization much easier.

The conditions at Kemiren and Kaliurang villages were even more different. These both villages are most vulnerable areas to the effect of the eruption since they are located only 7 kilometres from the crater, and being in the pathway of the lava flow, exposed to hot ash and volcanic dust.

When the volcanic activities increased, the CBAT did not continuously tell the community with newest information. This helped keep the community calm and organized. Information from the Volcanology Agency was relayed to the village and the CBAT commander, and then it was then further shared with the community. CBAT members sent alert messages to the residents through mobile phones or HT radio, and visited the people one by one afterwards.

Once Merapi erupted, the volunteers helped evacuate the community. The people were immediately directed towards the assembly point, and further to the temporary shelters at the district, until all of them could be evacuated to a safe location in the city. The CBAT and PMI volunteers, putting their own safety at risk, together with the village officials divided up the responsibility to carry out evacuation, prepare the location of the shelters, arranged food for the displaced and sweep the area.

The people from both villages have been living with the hazards of Merapi for years and the ICBRR programme is nothing new for them. As a result of the programme implementation, they were more cooperative and responded positively to the CBAT's direction during the emergency response period.

The Indonesian Red Cross ICBRR program, supported by Danish Red Cross and International Federation of Red Cross and Red Crescent Societies (IFRC), had only been partially implemented at the time of the eruption. CBAT members had been recruited and CBAT members in 11 districts had been trained. They had undergone socialization programs in which they were given information on hazards from Merapi eruption.

Although the program cycle had not been completed, the CBAT members in four villages at the slope of the volcano were well prepared. They responded quickly and did their best to keep the villagers safe. The volcanic activities of Merapi may come and go, and will always impact the people living at its foot. The community, together with its CBAT, are now much more prepared - and this will certainly change their response next time.







BRINGING WATER OF LIFE TO DISASTER AFFECTED COMMUNITIES

A 60-year-old Wojo, father of three children, has witnessed the eruption of Mount Merapi many times. He would always insist on staying in his home which lies within the range of seven kilometres from Merapi eruption at the end of September 2010. Wojo eventually moved into a camp in the nearby village of Dompol, together with 1,800 others from the surrounding area.

His first concern was whether his family could get food and drinks. His concern was proved wrong since the Indonesian Red Cross (Palang Merah Indonesia/PMI) provided 1,900 individual food parcels three times a day through its field kitchen. Furthermore, the water and sanitation team also provided clean water to the displacement camp.

"The condition in our camp was quite concerning at the beginning of the disaster. Clean water supply was not available for days. We even did not have water for bathing or washing, even for drinking. Fortunately, PMI

came and distributed clean water to wash and cook." Ms. Tuti Suciati, one of the displaced people from Desa Gulan Magelang, recalled.

PMI provided clean water not only to the IDPs (internally displaced persons) in camps and shelters but also to residents around the safer areas, who are indirectly affected by the volcano eruption, such as damaged water source or contaminated by volcanic dust.

"We had to collect rain water for our daily needs," said Ibu Yayuk, a mother of two, who was also displaced by the Merapi eruption. *"The water had been contaminated by volcanic dust, so we couldn't use it for bathing or cooking."*

The above stories represent only a small part of the common condition in displacement camps or shelters as well as areas affected by disasters. Tsunami disaster on December 2004 left thousands homeless survivors.

The condition in our camp was quite concerning at the beginning of the disaster. Clean water supply was not available for days. We even did not have water for bathing or washing, even for drinking. Fortunately, PMI came and distributed clean water to wash and cook.

Clean water was hard to find in refuges and many people contracted diseases due to drinking unsafe water. The same thing happened during Yogyakarta earthquake on May 2006. It damaged more than 1,500 water wells, contaminating it with bacteria and earthquake debris. The 7.6 Richter Scale earthquake in Padang in September 2009 also destroyed the main water lines, leaving affected people without clean water supply for days. Those disasters affected the availability of clean water for IDPs.

The need for clean water becomes increasingly important during disaster because the normal supply of clean water is almost certainly disrupted or often disappears. Human can only survive a week without drinking water and the clean water crisis forced IDPs or survivors to seek any available water sources which are not always safe for consumption.

PMI's emergency water and sanitation program started when the tsunami hit Aceh. At the time, Partner National Societies (PNS) of France, Germany, and Spain contributed to fulfil the needs for clean water for IDPs, using a variety of water treatment equipment at their disposal. After their operation ended, these National Societies donated the equipments to PMI and shared their knowledge on its operation and management, in order to be used in future disaster response operations. Furthermore, PMI has trained volunteers across Indonesian order to enable them to operate and manage the water treatment equipment effectively and efficiently.

Obtaining clean and safe water needs systematic process. The water extracted from various sources such as rivers, lakes, ditches or irrigation canals are still unsafe for consumption. This water has to be firstly pumped into a container called the sedimentation tank to remove solid particles and improve its clarity. Then, the water is channelled into the water treatment units and undergoes various processes including

sedimentation, filtration and disinfection. The water is then pumped into water trucks for distribution to the communities.

Even though this clean water provision program during emergency was still a disaster responsive program, a risk reduction component was still applied. An activity to reduce the risk of water borne and diarrhoeal disease caused by the lack of access to clean water in the affected areas was carefully carried out.

"In the field, we witnessed how clean water, which has often been taken for granted, becomes a critical need. It is very touching to accept the gratitude from people affected by the disaster who were willing to walk faraway only to get in line for clean water that we brought." Florentinus Isack N, fleet manager of PMI Emergency Centre for Water and Sanitation, said.

PMI recognizes that water is the source of life. Therefore, providing clean water for the affected community has become one of the highest priorities in any disaster response operation. This is further supported by the establishment of PMI Emergency Centre for Water and Sanitation in Bandung, West Java, which has been inaugurated in May 2010. This means of training and capacity building in water and sanitation is expected to help maximize PMI's effort of providing water of life for the disaster-affected people.



PMI BALI COMMAND POST : AN INCUBATOR FOR DISASTER MANAGEMENT INFORMATION SYSTEM OF BALI PROVINCE

The command post (*posko*) of PMI Bali is so small and nothing is special inside. A map of all districts in Bali province is attached on the wall, a big meeting table is hogs the centre of the room, a set of radio equipment is placed in one corner of the room, while on the other side a cabinet with disaster response unit equipment stands against the wall. Nevertheless, this small room has been a place for PMI Bali's disaster information management.

In the beginning, the purpose of establishing the PMI Bali *posko* as a part of emergency response was more to bridge the relief distribution process. However, recognizing the importance of comprehensive information management, PMI Bali province decided to develop the *posko* as a disaster information centre.

The *posko* was established by ensuring the availability of four basic components; there are space, communication system, mechanism, and human resources. As a centre for disaster information, PMI Bali *posko* plays many crucial roles, such as emergency response operation centre, a warning system messenger in early warning system and communication system coordination for PMI's service, like providing ambulance service.

This center used a radio-based communication system, in association with the Amateur Radio Organization of Indonesia (*Organisasi Amatir Radio Indonesia/ORARI*). This radio network has a very high frequency/VHF and ultrahigh frequency/UHF that connects PMI's *posko* at the provincial level to all PMI *posko* at the district level. A standard operational procedure has also been established as guidance for the *posko's* officer.

Budi Suharjo, the head of program, explained that the most challenging factor, and the most complicated part, is human resources. At the beginning, PMI Bali wanted to involve volunteers from all districts to

manage the centre in shifts. However, this idea seemed to be less efficient due to the distance and the cost issues. Thus, it was decided to recruit special staffs for the *posko*, who have to be stand-by at the *posko* in pre-determined shifts and who have to be responsible to update the disaster database, as well as monitor the condition of all districts and municipalities. This disaster information center currently has six staffs.

Regarding the coordination system between the *posko* and PMI office in Bali, Luh Diah Andayani, one of the *posko's* staff brought up about the 'PMI Bali office hours' (*jam PMI Bali*). "PMI Bali office hours' is a time when we conduct regular coordination. This 'office hours' has regular activity, for example, the coordination between PMI at chapter level and PMI at branch level will be conducted at 08:30 WITA (central Indonesian time zone) and the coordination between PMI *posko* at chapter level with all staff in charge of the HT radio, as well as with all heads of offices at branch level will be conducted at 19:00 WITA." Furthermore, Luh Diah explained that this coordination can be conducted because PMI chapter level offices also have a *posko* with the same communication system and equipment.

The information process in 9 branch-level *posko* is reciprocal, both between chapter-level *posko* and branch-level *posko* and branch-level *posko* and the local CBAT. For example, when an accident occurred in Tabanan, the report was immediately delivered to the chapter-level *posko* after the branch-level *posko* received the report from the CBAT through radio communication. This process simplifies the coordination for immediate response.

Furthermore, the value of disaster information management through PMI *posko* development in Bali has become an important record not only for PMI, but also for disaster response in all districts of Bali. PMI Bali's *posko* has been a nucleus/a basis for disaster information management



system at a bigger scale. The formation of emergency operation center (*Pusat Pengendali Operasi/Pusdalops*) at the provincial disaster management agency (*Badan Penanggulangan Bencana Daerah/BPBD*) of Bali province is the result of this posko.

PMI Bali played a vital role in the development of Pusdalops BPBD in Bali province by providing human resources to be its operators, by training Pusdalops personnel and by formulating standard operating procedure (SOP). The development of Pusdalops was supported by French Red Cross from 2008 to 2010.

Posko PMI Bali is considered as an appropriate unit for reference in the Pusdalops development. The system applied in PMI *posko* was adapted for a broader scale by undertaking some adjustments to the government's administration system and bureaucracy.

"PMI also assisted us in building capacity in this program. We should acknowledge that none of the civil servants had any knowledge of disaster response," said Ketut Memarta, a staff of Pusdalops. *"The*

training covered basic lessons for disaster management, emergency response, early warning system, radio communication, and logistics. PMI also facilitated the formulation of standard operating procedure for Pusdalops," he continued.

The implementation of Pusdalops development program was also a learning process for PMI. *"Facilitating Pusdalops development was also a chance for us to improve the system of PMI's own posko. Through this process, we also evaluated the SOP of PMI posko more comprehensively,"* Budi Suharjo revealed.

Disaster risk reduction is indeed the responsibility of many parties. The community cannot rely on the local government alone. Responsibility and modesty are always needed to share knowledge, share roles, and understanding in coordination. The cooperation in Pusdalops development was an initial step which was successfully and impressively taken by Bali province and BPBD Bali.



COMMUNICATION BONDING IN MERAPI PYROCLASTIC FLOW

The emergency response for Merapi volcano eruption, November 2010, has become an important record for the command post (*pos komando/posko*) of PMI Central Java. Ali Masyhar, *posko* coordinator of PMI Central Java admitted that during the period of his work, the Merapi eruption response gave him such an impressive experience. *"The coordination between PMI and the government was very good at that time. Roles and tasks distribution was clear, coordination system was uncomplicated, and most importantly, PMI took an essential role,"* he recalled.

When Merapi volcano erupted, PMI was appointed to coordinate field assessment, field kitchen and logistics management. The trained PMI disaster response team (*satuan tugas penanganan bencana/Satgana*) was immediately organized. PMI was in charge as a relief distribution control center; they receive relief goods from various areas, which were then centralized at PMI Central Java to be distributed to three districts affected by pyroclastic flow: Magelang, Klaten and Boyolali.

The field *posko* in three districts were the main channels of information traffic from the field to the *posko* at PMI Central Java. Disaster information was updated every hour, for 24 hours 7 days. Reliable information was coordinated well and it proved to play a big role in the success of a disaster response operation.

This information management and reporting centre can be one of the essential experiences of Merapi Disaster Response and can be a model of such operation in the future. *"Cooperation with many parties, from the government, related agencies, and also our closest partner; ORARI, was very well established. With the support from our friends at ORARI and their UHF equipment, we managed to establish field posko, as well as to operate vehicles equipped with APRS (Automatic Packet Reporting System),"* explained Ali Masyhar.

The partnership between PMI and ORARI has been made official in a memorandum of understanding, outlining their cooperation on radio communication for the purpose of disaster management, covering pre, during, and post-disaster period. The MOU stipulates the roles and responsibilities of each party and had been signed in 2009.

This positive experience shows the absolute need for efficient and integrated disaster information management.





PERFECTING THE MANAGEMENT, SAVING MORE LIVES

"We had just started our shift when the call centre called us to handle the traffic accident on ring road. As we were close to the given location, we reached the site within five minutes. My colleague Isral and I spotted the two casualties and they were helped by some bystanders.

Both have big open wounds and Andi is unconscious. We covered the wounds to stop the bleeding and put Andi in a position in which he would not choke on his own vomit. We brought both patients with the ambulance to the nearest hospital within ten minutes. The attending physicians took treated the casualties swiftly once we got to the emergency room. When we were ready to leave, I took a glance into Andi's room; his condition was stabilized and according to the doctor, he will survive."

Eci Sulvan, one of the ambulance crews retold the story on his work.

The number of emergency cases in North Sumatra province is quite high, but it was not counterbalanced by the availability of quality ambulance facilities. For example, casualties of accident would often be brought to the hospital using any available transport and they were not treated properly on their way to a hospital. Having expectations to respond to the existing need, the Indonesian Red Cross (PMI) started the implementation of an ambulance service program, supported by no less than two partners: the German Red Cross and the Hong Kong branch of the Red Cross Society of China.

Started in July 2008, this program targeted three areas, namely Langkat, Siantar and Medan municipality with the support from the consortium that ended on March 2010. Despite of this, PMI Langkat and Siantar districts have managed to support this program's budget independently so that this program could continue to serve the community. This was achieved by bringing the operational cost down and the income up.

The opposing story had been experienced by PMI in Medan municipality, which had no resources to implement this program and went bankrupt. The consortium put forward this program to PMI in North Sumatra and appointed Dr John Purba, the vice-chairman for disaster management, to take over this program and was in charge in its continuance. This ambulance program was handed over by PMI Medan municipality to PMI North Sumatra province at the end of October 2010.

Under the management of Dr. John Purba, the ambulance program underwent several changes. For example, PMI reactivated 12 out of 30 trained ambulance crews selected based on recommendation from the local health office, operated three ambulance units, and constricted several administrative regulations in order to increase accountability in financial management *"Our first step was to determine the fee for ambulance service based on the distance. Then, to control the use of fuel, the recording of travel in the vehicle's logbook was made mandatory. In addition, PMI also established cooperation with the local gas station to manage the system in refilling the ambulances' fuel. The operating ambulances will pay the fuel with a coupon that is later invoiced to PMI's finance department. This kind of system makes the logbook of all expenditure and income well-ordered."* Dr. John Purba explained in detail.

Within half a month after the ambulance program management was assigned to the provincial level, the number of cases handled by the ambulance crew more than doubled from 20 cases per month to 47 cases. However, in terms of funding, this program did not get sufficient income to pay for the crew's per diem and vehicle maintenance. One of many efforts to fund raise for operational was by placing of 60 donation boxes in the shopping centres. Currently the income from this effort reaches approximately two million rupiah (approximately 211 USD) per month.

Although Dr. John Purba applied a strict management style, several crew members revealed that he was able to improve the morale and motivation of all involving parts. *"The management was very transparent, so we could provide our input and solution to problems, especially in terms of constraints in the field,"* explained Irsan Daeng, one of the ambulance crew who experienced two different management styles.

The ambulance service has now established partnership with five hospitals across the city to allow for a more integrated emergency service. However, PMI will still need to maintain the well organized internal management as well as improve its facilities and socialization to the community in order to complete the mission of reducing death toll due to emergencies and increase the quality of emergency services.



COMFORTABLE TRANSPORT TO HELP PATIENTS' RECOVERY

When three ambulance crews arrived at Mr. Muniandidas's home at Glugur Street in Medan, he was not ready to go to the hospital. *"Please come in and have some drink first,"* said 57-year-old Muniandidas in friendly manner, asking them to wait while he went to get ready. It was not long before his wife showed up with three glasses of syrup. *"Please take some time to drink before you all go,"* she offered. According to some of the ambulance crews, Mr. Muniandidas would get upset if they don't drink what his wife has prepared.

The closeness between PMI Ambulance 118 crews and Mr. Muniandidas developed because he has become a frequent user. Because of contracting diabetes, Mr. Muniandidas is no longer able to walk but he needs to go back and forth to the hospital for treatment. Regarding this case, PMI ambulance also provides economical transportation service for casualties of accidents and disasters to go to hospitals.

"I have taken rides in many ambulances, including one with a driver who didn't know the way to the hospital. It took quite a while before arriving," he recalled a story with chuckle. *"Even worse, once I went with the dead body ambulance and passed the rough road. The car was very unsteady and left my body hurt all over afterwards."*

After his first experience using the PMI's Ambulance 118, Mr. Muniandidas refuses to use any other ambulances. *"The car's suspension is really soft, the bed is adjustable. In addition, the crews are very helpful. They help me get off the ambulance, accompany me to the treatment room, wait for me patiently and take me back home again,"* The eight-kilometer-round trip journey feels very comfortable, even though he is still in recovery process.

Conforming to the above statement, Irsan Daeng, an ambulance crew, said they always try to give their best service and maintain good communication with the patients. *"We make the patient as comfortable as possible. Hopefully, it will help their recovery process."*





FREE AMBULANCE: FOR THE SPIRIT OF THIS ORGANISATION IS HUMANITY

"I'm proud of my job as an ambulance crew, because I can help others," said Ari Setiawan movingly.

It was a simple and humane confession. Ari is one of the nurses of the PMI Surakarta free ambulance team. He was recruited professionally, but for him professionalism must be based on humanity.

Ari's spirit is one example of energy that PMI Surakarta has to provide free ambulance service for the society in Surakarta. This service has been developed positively since 1995.

Three ambulance units, equipped with Air conditioner and Standard operation tools, ATLS-certified (Advanced Trauma Life Support) professional doctors and Medical First Responder trained medical team are the components that support the development of this service. In order to be more alert and quick during disasters, each ambulance unit is installed with a radio-based Automatic Positioning Report System (APRS). Therefore, the team might be able to arrive at emergency sites in 10 minutes.

Socializing this service needs hard work since the word "free" might lead to many apprehensions, particularly on the funding. However, dr. H. Titis Wahyuono, Head of Blood Transfusion Unit of PMI Surakarta district office, put forward the PMI motivation on this service. "As one of Public Services, PMI should provide actual contribution such as free emergency ambulance.

She continued that after further evaluations, PMI decided to carry out this service professionally. *"The working team should not be considered as voluntary workers, who could work anytime they are available. The workers should have clear job descriptions and working hours."*

Various promotion media from flyers to correspondences with the local community association (*Rukun Warga/RW*) officials were used to reach audiences in a larger extent. *"There will be no longer pick-up truck to take the injured parties. They should be picked up by ambulance."* Dr. Wahyuono pointed out

People eventually support this service by providing the funding or providing more equipment. Rotary Club, for instance, granted one more ambulance unit.

Ari Setiawan said that the community's appreciation was also high. *"One day, after I took care and accompanied an elderly to his house, his family conveyed a heartfelt thank you. The feeling was amazing, it's worth the exhaustion. They offered me a tip but I refused, I have ethics to uphold. A thank you is more than enough."*

The free ambulance service is an actualization of humanity spirit within PMI. It should be carried out professionally, yet with full efforts to aid the emergency cases immediately.

ONE FIRST-AIDER FOR ONE FAMILY

In order to support the implementation of their entire program, PMI Surakarta doesn't solely rely on its monthly fundraising activity. The head of blood transfusion unit at PMI Surakarta district, dr. Titis, explained that PMI Surakarta has created various alternatives. *"As an alternative means of fundraising, we offer trainings on Emergency Life Support (ELS) to the community and institutions."*

Prior to training others, the PMI Surakarta firstly provided emergency life support skills to its entire staff; from the office helper to the board of management. The organization, which has obtained the ISO 9001 certification for international service, also offers free ELS training for blood donors as a form of appreciation.

Furthermore, the ELS trainings provided by PMI Surakarta are considered very useful in dealing with various emergencies. Many other outstanding factors on this training are: the trainers are professional doctors, its curriculum is related to Integrated Emergency Management System and includes Cardio-Pulmonary Resuscitation (CPR) skills, bleeding and shock as well as evacuation and transportation and it has other additional teaching materials such as pulmonary (respiratory) and children emergencies, burns, and poison.

Dr. Titis stresses the importance of the ELS training for the community, *"Each house or family should have one person who has been trained in ELS, so that he or she can perform emergency response such as first aid, before the medical professionals arrive."*

Realizing that an emergency can strike at any time and place, PMI Surakarta does not provide training only for fundraising but also for building the community's capacity in dealing with emergencies.



MINUTES OF ALACRITY OF YES 118

"The Yogyakarta Emergency Service 118 (YES 118) will serve anybody from all over the world experiencing emergency situation in Yogyakarta municipality. It's free of charge, including hospital cost for the first 24 hours, and it's not restricted for residents of Yogyakarta only," said Awang Trisnamurti, a former board member of PMI Yogyakarta branch.

He was not just saying but he was telling the real service of PMI Yogyakarta. The medical emergency service has been such a long-standing aspiration of PMI Yogyakarta branch since a long time ago. It was triggered by the number of medical emergency occurrences which were not optimally handled and was hindered by having to take financial responsibility over the patients. In many occurrences, PMI's ambulance officers were often required to act as a 'guarantor' for the patients, until their relative comes to take over.

YES 118 ambulance officers still currently act as 'guarantors', to ensure the patients get free service. The guarantee is not only for the ambulance services, but also for the hospital cost for the first 24 hours supported entirely by the local government of Yogyakarta municipality. Having partnership network with 10 district hospitals in Yogyakarta, this program is expected to carry the injured patients to the nearest hospitals.

Mrs. Ana, resident of Canthel village in Yogyakarta municipality, has often seen YES118 ambulance pass by. She would spontaneously dial 118 every time she is experiencing a medical emergency situation. *"My mother, who was 87 years old at that time, fell down and felt pain in her thigh, we were worried that she got some fractures. My husband and I were afraid to act on our own to carry and get her to the hospital,"* she said. *"When I called 118, they asked me in detail what happened, where our address was, our name, our phone number, and the ambulance came with a medical team in 10 minutes."*

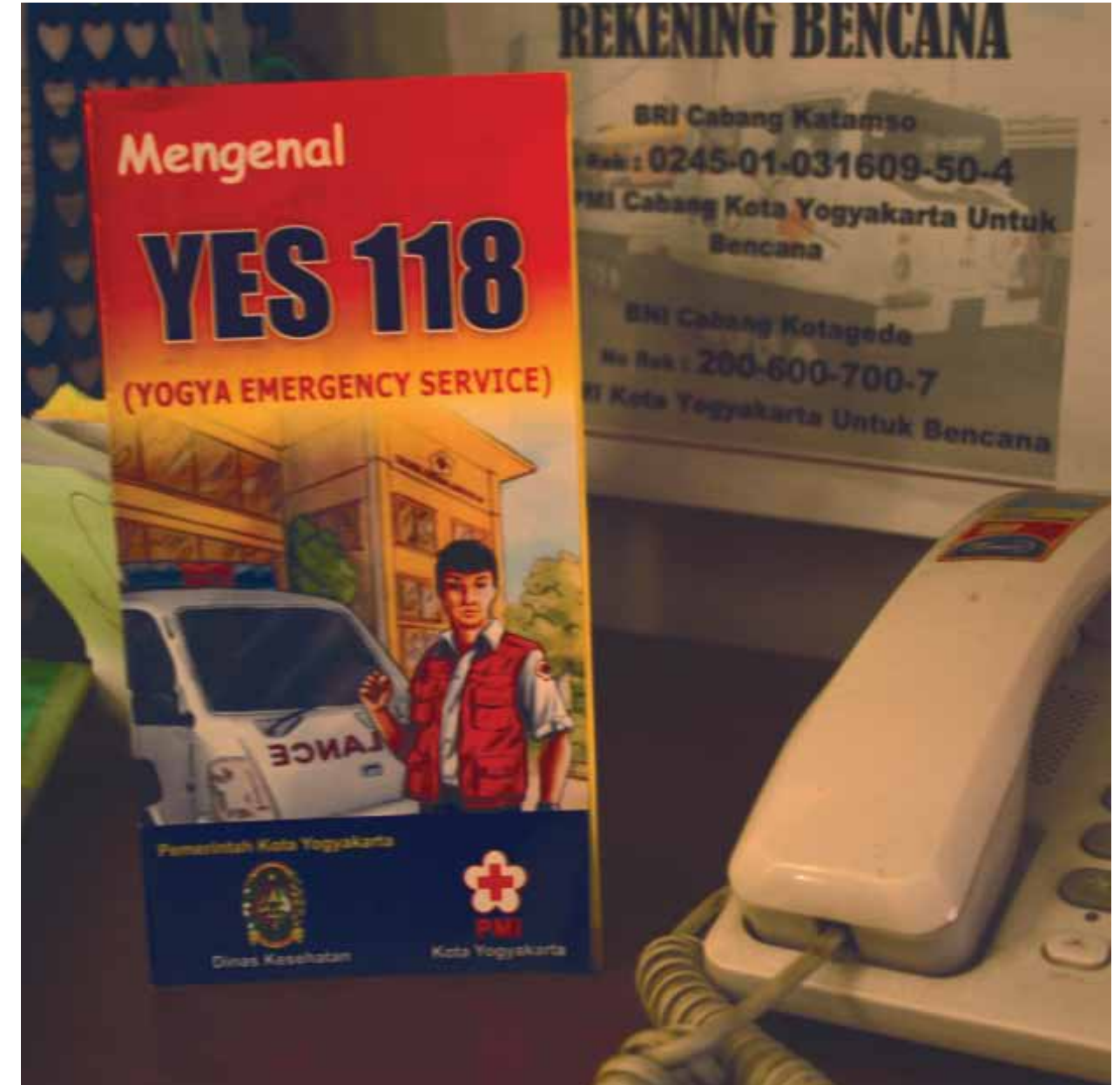
Mrs. Ana fully trusted the ambulance crews who came to assist. *"They looked skillful and really knew what to do. My mother was then brought to the hospital and I was surprised knowing that the emergency service and the ambulance are free of charge."* She was so grateful. This YES 118 takes process to be realized, starting with the concerns for the lack of adequate emergency service. PMI Yogyakarta branch pioneered the idea of Emergency Ambulance 118 by developing a program namely Health Assistance Center (*Pusat Bantuan Kesehatan/Pusbankes*) 118

since they were not satisfied with a sole concept of ambulance. The program tried to embrace a number of hospitals in Yogyakarta area, as well as various agencies like the police department (POLRI) and the health office. However, maintaining such partnership was not easy and the Pusbankes 118 partnership program even had experienced many obstacles and setbacks.

PMI was not discouraged but reworked the concept and intensively continued to advocate for the idea of a free ambulance service. After all the hard work, PMI succeeded to launch the ambulance service for medical emergency covering the whole part of Yogyakarta municipality on 1 November 2008 and they named it Yogyakarta Emergency Service 118 or YES 118. The municipal government fully supported this program by bearing all costs of emergency cases within the area and assist in the coordination of YES 118. The Free-of-charge facilities includes transport cost from the emergency scene to the hospital, treatments and medical material while on the road to the hospital and the cost during first 24 hours in hospital's emergency care unit.

The partnership has become insurance for anybody experiencing medical emergency in Yogyakarta municipality to get quick and prime service. After dialing 118 or 0274 420118, the officer in charge will dispatch the ambulance and will provide direction by phone for first aid measures to be taken until the ambulance reaches the scene if it is necessary.

An emergency could happen to anybody within the area of Yogyakarta municipality; valuable minutes should be utilized optimally to help each casualty. YES 118 believes that networking is a key to actualize such promptness.



STAYING ON AIR TO STAY ALERT

Earthquake rumbled and sounds of siren echoed, a moment later somebody with an assertive voice directed, “Come on everybody! This way! This way! Run here! This place is safer; it’s 10 meters higher and won’t slide! Just leave your car, sir! Get down, sir! Don’t stand under the pole, come here, this way!”

Then the narrator emphasizes, “Remember, our preparedness to respond to disaster can reduce casualties. This public service announcement is presented by the International Federation of Red Cross and Red Crescent Societies, Indonesian Red Cross and Irish Red Cross.”

This 57-second public service announcement has been airing in Banda Aceh and its surroundings through a radio station called *Rumoh* PMI. Seven public service announcements about Indonesian Red Cross (PMI) program have been broadcasted alternately, one after another. The messages contained various information about the Red Cross Red Crescent Movement, health and disasters, all designed harmoniously with the culture of the land of Nanggroe.

The choice of radio broadcasting as the media to convey messages was not unintentional. The people of Aceh are very familiar with radio broadcasting as it is easily accessible and in tune with people’s sense for entertainment. Thus, radio broadcasting was considered as a quick and cheap media messenger with a wide coverage.

With this concept in mind, PMI pioneered a radio program together with the Irish Red Cross in 2006 and called this program *Rumoh* PMI (PMI house); a place to reflect a sharing place. More specifically, it was a media of information during rehabilitation and reconstruction period in Aceh. Beneficiaries and donors, either from the International Red Cross and Red Crescent Movement or other organizations operating in Aceh, were brought together in a talk show at this radio station.

With an audience segment of family members in the range of 18 to 45 years old, *Rumoh* PMI Radio was a perfect media to discuss current

social issues. The Friday talk show, which aired every Friday from 17.00 to 18.00, was a program designed specially to perpetuate such discussion which has now become the identity of this station. Recent social issues, fresh and trending, were discussed interactively with relevant resource persons.

Now, *Rumoh* PMI Radio has been airing for five years. What once started with only six PMI volunteers as broadcasters, *Rumoh* PMI has 10 permanent broadcasters and 15 management staff. This *Rumoh* PMI Radio was diverted into a PMI business unit Since 15 February 2010, under PT Radio Reda Crossa to maintain its existence. The radio transmission was strengthened and the coverage was broadened. It has been reported that *Rumoh* PMI Radio reaches out to a radius of 30 kilometres and has a network with 40 community and private radios in Aceh and Nias.

Despite being officially established as commercial media and PMI business unit, *Rumoh* PMI Radio has not abandoned its Red Cross mission. “We still allocate 30 per cent of air time for PMI program and activities public outreach, whether in form of public service announcement, talk show or offline events,” said Andri Irvan, the station manager of *Rumoh* PMI.



“Several months ago, we conducted blood donation as an offline event and found that many youngsters were actually enthusiastic to donate their blood, but they just didn’t know how to do it and where to go. Thus, we plan to do this (blood donation) program regularly in the future. We will be encouraging people to donate blood as well as promoting the radio at the same time,” he added.

Such joint effort to organize a special event was an example of preserving PMI’s “portion” so it won’t be taken over by commercial interest. Another effort was by airing trending topics in the Red Cross, either at the international, national or regional level. One example was the support for public outreach for *Gampong Siaga* as a program encouraged by PMI Aceh. Two talk shows were aired over two months to support the program. By listening to explanation directly from PMI resource person and CBAT member of *Gampong Alu Daya Tuengoh*, the people were educated to start disaster preparedness from the closest community, the community of *Gampong* themselves.

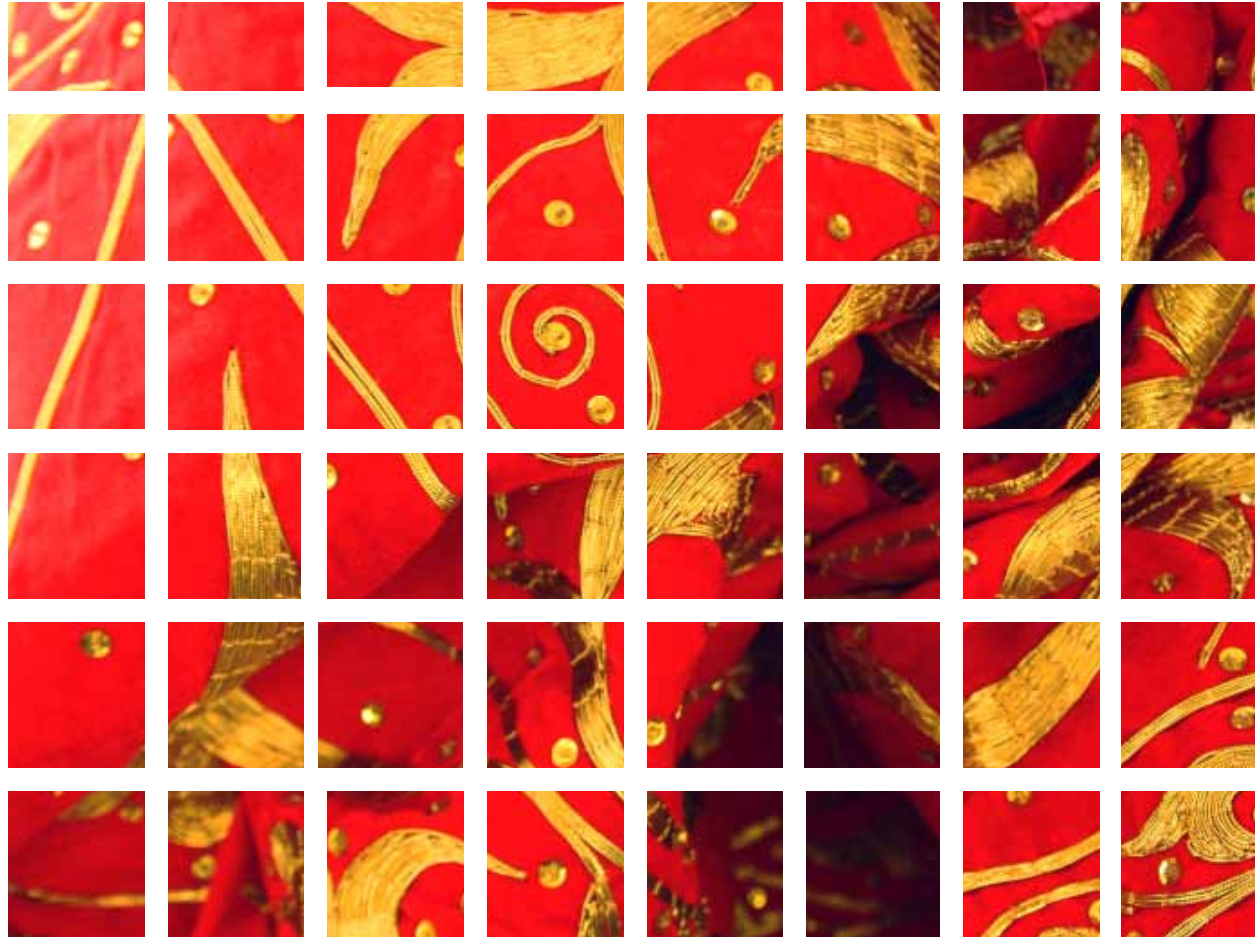
The role of *Rumoh* PMI Radio in raising disaster-related topics has gained positive recognition from people outside PMI. The Aceh disaster management agency (*Badan Penanggulangan Bencana Aceh/BPBA*) acknowledged *Rumoh* PMI radio as its official partner. Thus, *Rumoh* PMI Radio is expected to be a pioneer in promoting efforts to improve disaster preparedness and management in Aceh, as well as to become the main resource person during emergency response.

“The coverage of Rumoh PMI Radio was one of the reasons why BPBA partnered up with the radio station,” said Nursafri, the news and music director. *Rumoh* PMI Radio broadcast reaches the whole area of Banda Aceh, and parts of Aceh Besar, Pidie and Sabang.

Regardless of its function as an entertainment media for the people of Aceh, *Rumoh* PMI Radio is consistent with its spirit of humanity from the very beginning. Thus, *Rumoh* PMI will obviously remain on air to keep people alert.



Disaster Recovery



PUNGA JURONG WOMEN PIONEER THEIR 'INDEPENDENCE'

Many identical houses in *Gampong* Punge Jurong are lined up neatly and a bright green mosque stands in the middle. Soft breeze cooled the meeting hall of Al Mukarramah mosque in this bright day. From 2005 to 2010, this hall served as a meeting place for the women of Punge Jurong, Banda Aceh, where they carried out various post-tsunami psychosocial support program (PSP) activities.

"Many people were interested in the activities. Once we had a gathering, the meeting hall would be jam-packed." Said Rosalinda, one of the community facilitator, when she tried to recall what happened back then.

The PSP program was a collaboration of Indonesian Red Cross (Palang Merah Indonesia/PMI) and American Red Cross, which served some 130,000 people in 122 villages and 126 schools in Banda Aceh and Aceh Besar. Although the program has completed, the effects of the program is still visible.

This PSP had not only educated the women and added some skills like making cookies and Aceh embroidery, but also had established a strong bond between the women in the village - a bond based on their common grief after the tsunami. The PSP activities facilitated a gathering in which they would share their feelings while they were carrying out various activities. This fellowship is still going on strong, prompting them to help each other when they experience misfortunes.

This bond proposed an idea to establish a credit union called *Koperasi Wanita Mawaddah* (Mawaddah women cooperative). For women in Punge Jurong, the concept of credit union is already familiar since they are currently running business with a similar concept. One of the components is providing facilities according to their needs and condition. The women in *Gampong*



“The women of Punge Jurong has a simple goal; they want to establish a cooperative which can exclusively assist those who need additional financial support.”

Punge Jurong received sewing machines, overlock machines, plates, chairs and Acehese traditional costumes. The local community may rent these tools at low prices.

Instead of reducing because of the being used, the numbers of those tools has increased because of their good and disciplined management. The number of plates is increasing from 7 to 25 dozens, the number of chairs increased from 30 to 70, while the sewing and overlock machines were sold with the members approval. The inventory is listed in a good order. With this experience, the women of Punge Jurong feel that a credit union would be their next management learning opportunity, as well as an answer to their common needs.

The Mawaddah women cooperative office is still hosted at a member’s house since they haven’t collected enough money to register themselves officially as a cooperative. The members hold regular meetings quarterly, but also convene a meeting whenever needed, as a means to discuss and decide on general management issues.

On July 2011, this cooperative has been operational for six months, with 50 women members and a turnover of nine million rupiahs. The women of Punge Jurong do not seem to have less enthusiasm even though their organization status is still ‘pre-cooperative’ since they have not yet reached the minimum turnover required by the Indonesian government to establish a cooperative. On the contrary, this cooperative has helped its members overcome their financial problems and increase their capital for their individual small businesses.

Syamsuwarni, a 35-year-old mother, used a loan from the cooperative to increase the capital of her small household and cosmetic shop. “By

borrowing money at the cooperative, I was able to buy more samples to present to customers. It sells better because the customers are able to see the goods directly rather than only rely on the catalogue,” she said. Now, she does not have to reduce her daily staple allowance.

Syamsuwarni is now able to earn up to Rp. 800,000 per month. She makes use the money to buy household needs and she often uses the money to be the main income when her husband is in between jobs.

The members are actually only able to borrow Rp 300.000 maximum, with low monthly instalments. The fund being loaned out is collected from a mandatory deposit of Rp. 100,000 per member. According to Rosalinda, the chairperson of the cooperative, the limited amount is to ensure that more members can benefit from it especially in some particular times like at the beginning of school year. The members need the loan to provide their children’s needs for school.

The women of Punge Jurong has a simple goal; they want to establish a cooperative which can exclusively assist those who need additional financial support. This cooperative turns out to be more profound. This is a proof of a strong bond and trust among the tsunami-affected community of Gampong.

Not only have the women recovered, they have also pioneered their independence.



NO MORE BLACK WATER

Karunia Putri is now 16 years old and is in the second grade of *Sekolah Menengah Kejuruan/SMK 1 Negeri* (state vocational school) Banda Aceh, but the memories of the tsunami since seven years ago is still lodged in the back of her mind. When the tsunami happened, she and her family, and a few of her neighbours fled to the second floor of her house just seconds before black water wiped away her entire village, Punge Jurong.

It was very traumatizing. *"I am even afraid just to touch the sea water,"* she tried to recall the horrible moment. Her family and she moved to the Dimibo for six months after the tsunami due to the massive destruction to Punge Jurong. The strong bond to their home made them back to their village.

Punge Jurong was far from recovered when Putri arrived back home. However, when she was in grade 5 of Sekolah Dasar/SD 2 (elementary school) of Banda Aceh, she found Al Munawarah Informal School as a place to meet friends with similar experiences and to be involved in various activities such as religious gatherings, play games, sing and dance. This informal school is one of PMI's psychosocial support program for the villagers of Punge Jurong.

One of the program's aim was to assist in the recovery of trauma, and this program implemented two approaches: through the community and through schools. For example, Putri, was encouraged to gradually reacquaint herself with the ocean to heal her trauma.

In the beginning, they were reacquainted with the river. The community of Punge Jurong were taken to Peukan Biluy River and conduct the PSP there. The participants were still afraid to be near the river when they were asked to. Therefore, the activities were done on land.

In order to continue the previous effort, the next program was conducted near the Krueng Jruen river. The tutors and some mothers led and accompanied their children to approach the water slowly and dip their toes. Eventually, they were able to swim together.

This activity was the starting point for Putri to be reintroduced to water. Although it still took three years for her to completely recover from her trauma, she has courage to approach the beach. She is able to remove her negative perception towards water progressively.

"The water looks different now, it's no longer black," she said with a big smile on her face.

SUMARYANTI: PARALYSIS WILL NOT PARALYZE ME

The 36-square-meter house, designed by the Indonesian Red Cross (Palang Merah Indonesia/PMI) and Netherlands Red Cross for people with disabilities, has been enlivened by the cries of a baby boy since March 2011. The baby was named Tegar Adipriyanto, "So that he will be a tegar (tough) boy!" Sumaryanti, the resident of the house explained the meaning her first son's name. The 27-year-old mother is paralyzed in both her legs due to spinal injury when the earthquake in May 2006 happened.

Her current physical condition hinders her to go back to her job as a salesperson. She had been working as a salesperson for two years and she cannot work anymore due to the injury. She often mourns over her condition and chooses to stay at home. She meets other 26 people with the same conditions in PMI and Netherland Red Cross psycho-social support program (PSP) activities and she gains back her life passion.

The psycho-social support program specifically targets people with disabilities, aiming at assisting them to recover from their depression and continue their lives with what they have. The activities include house visits, family-based activities and group activities. Visits are usually done once a week by a PMI volunteer. These programs are expected to be able to motivate the people with disabilities to be active in the community.

Family-based activities, such as cooking, are intended to teach them to become independent despite of their disabilities. People in this program usually undergo changes, especially in their behavior once they incur disabilities. Therefore, these activities encourage both the person with disability and their families to learn and adapt themselves with the new situation.



Group activities have more varieties as they are adjusted to each member's interest and talent, such as arts, sports and handicrafts. These activities are meant to make them open themselves up, convey their feelings and thoughts. The group members take turns in hosting these gatherings once a month in order to feel different atmospheres.

Sumaryanti now has more spirit to get involved in many activities. *"I don't want to be sad anymore and I have to accept this condition. I have the greatest God and many great friends who do not think this as a matter because I have never been excluded."*

She made use this PSP gathering as a place to share and make friends with other earthquake victims from Bantul and Gunung Kidul. Besides strengthening friendships, the members taught each other skills like baking cookies, making accessories and sewing.



Sewing is actually a skill that Sumaryanti has acquired before. She learned to sew when she was in junior high school, and continued to learn this skill at Imogiri vocational school. However, she did not continue learning this skills because she wanted to experience something new. Current situation enforces Sumaryanti to use and even improve this skill. With one sewing machine and one overlock machine provided by the psycho-social support program, she started to receive orders - from the community in the area and from a clothing factory.

She also equipped herself with computer skills by taking a course at a rehabilitation centre in Pundong, Bantul because she does not want to be technology illiterate.

She does not give up so easily on her efforts, so she wants to be more independent in doing her activities such as going to the market or attending some gatherings. She saved up some money and bought a motorcycle, which was modified for her special needs.

Indeed, Sumaryanti could not escape the life-altering event five years ago, but she can choose not to let it paralyze her whole life. She chose to continue her life, to contribute more to the society and to always be active.

She becomes more certain that her life is not different with other people, especially after she got married and had a baby. She understands and accepts whatever condition she has and continue her life with any life skill that she has.



MEMORIES OF BUILDING BAMBOO HOUSE

"I had been sleeping in here for years, before I slept in a tent for three months," Mbah Rubinah said, pointing proudly to her bamboo house which still stands intact in her yard until now.

It has been five years since PMI and International Federation of Red Cross and Red Crescent Societies (IFRC) distributed bamboo houses as temporary shelters in Patuk village, Gunung Kidul. Mbah Ruminah still feels comfortable to occasionally stay in her bamboo house, as well as to store her goods.

Patuk village was one of the 55 villages in Yogyakarta and Central Java provinces targeted by transitional shelter program. A total of 12,250 bamboo houses were built, involving around 60,000 people in the construction. Mbah Ruminah is one of the residents in Pathuk Village, Yogyakarta. This village was one of the 55 villages in Yogyakarta and Central Java provinces whose area became a site for bamboo houses construction, involving 60.000 workers.

"My house was badly damaged at that time, so I had to sleep in a tent. After sleeping there for three months, I heard about the bamboo house donation from PMI. Those houses were really built within a week. It didn't take a very long time because the whole community association (Rukun Tetangga/RT) helped in the construction," recalled Wati, one of Mbah Ruminah children.

The memory of the bamboo houses' construction process is still clear in Giyanto's mind, one of the Gilangharjo villagers in Bantul. His bamboo house was dismantled just a month ago because it has already broken down. For people affected by Yogyakarta earthquake, a tent was the only alternative place to stay after the disaster. He felt that the tent did meet the health requirements, especially for his one-year-old baby. Therefore, he welcomed the construction of bamboo house construction in his village enthusiastically. He still sounds enthusiastic in telling the bamboo house construction even it has already been five years. All community built 20 bamboo houses together, starting from buying the materials collectively, making the ompak (foundation for the house pillars), pillars, to finally installing the bamboo itself. *"The receiver of the house only needs to prepare the land,"* said Giyanto.

Giyanto emphasized that all villagers worked together hand in hand to build the bamboo houses, including villagers from outside this RT. In addition, the PMI volunteer corps (Korps Sukarela/KSR) worked together with the people during the implementation of the program. *"We were divided by ages, the elderly and the young. The young ones were responsible to build the ompak and the pillars; and the elderly will continue the finishing steps. As for the women, they were responsible to cook meals for the workers,"* Giyanto described the tasks division for the construction of the shelters.

As it was done in the spirit of togetherness and passion, the bamboo houses construction were finished only in two months. *"I was very happy because it was really joyous since everybody was gathered here,"* he added.

Now, the emergency situation has passed. The communities of Gilangharjo, Bantul, and Gunung Kidul villages affected by the devastating earthquake seem to have recovered. Permanent houses are built and the economic condition seems to have improved. The life process of the villagers is moving forward; and they keep and apply the spirit of mutual assistance in their everyday's life.

These temporary shelters designed with the community mutual assistance has generated an important memoir. The power of mutual-assistance creates the sense of security when they were facing emergency situation. It will for sure become the strength for the foundation of disaster preparedness.





BAMBOO HOUSE: NOW AND THEN

The bamboo house, designed as an earthquake-resistant house, is only 4 x 6 meter square. This house's strength has been experienced by Sri Handayani, a mother of three children who now stays in this bamboo house.

"I am no longer afraid of earthquake," said Handayani. "There was an earthquake when I first moved here, and I ran out of the house. I was still scared, and then I realized why should I be afraid? The (bamboo) house is strong enough. It's so strong that I only heard crackling noise," she recalled.

The September 2009 earthquake didn't destroy her house straightaway. Some cracks in the house were getting bigger and the roof finally collapsed few months later. This dangerous condition forced the whole family to stay at a musholla temporarily.

Sri Handayani was thrilled when the Indonesian Red Cross and the International Federation of Red Cross and Red Crescent Societies (IFRC), as well as Netherlands and Spanish Red Cross jointly donated 3000 bamboo houses for the people affected by the West Java earthquake. Within a week, the earthquake-resistant houses were ready to live in, so her entire family can practice the Ramadhan fasting as if it were in their own house.

The bamboo house has become a 'permanent home' for her family for the past two years. This house has several sections: a living room and two bedrooms, just like the former house. The kitchen was placed outside the house under an additional canopy roof. Since she cannot afford to build her own house yet, she plans to renovate her bamboo house by adding a thick layer to the wall, especially the perforated parts so the house will be warmer at night.

A total of 24 bamboo houses were donated in Ciharang village, Banjarsari district, Ciamis. Some of them were not immediately dismantled after the owners built their permanent houses. Nurlela, one of the beneficiaries, still maintains the bamboo house design for her own permanent house. She now lives in spacious uniquely-designed bamboo house.

Rosmanah, a resident of Cipapar village has her own story regarding bamboo houses. Her house and small shop collapsed due to the quake and she was forced to live in a tent for more or less three months. When the bamboo houses were distributed, she was very grateful; it was warmer and cosier than the tent. She was really fond of the house since it had been her comfortable shelter for eight months. She did not dismantle the bamboo house when she got her permanent house. She transformed the bamboo house into a small shop instead.

It didn't cost Rosmanah much to renovate her bamboo house into small shop. She only added a huge-wide window and long wooden chairs to transform the bamboo house into a small shop. It's quite spacious because it can receive many customers and also store a lot of goods for sale.

She is able to earn IDR 300,000 to 400,000 a month by selling vegetables, groceries and cold drinks and this amount of money is really sufficient for her. She expects to sell more goods so that her neighbours don't have to travel eight km to the Banjarsari traditional market to shop.

The bamboo houses, which were designed as a temporary shelter, turn out to be more permanent than they are supposed to be. The beneficiaries feel the house is safe for them and want to live in it as long as possible. These bamboo houses have become "a permanent home" for the quake-affected people since they know exactly the benefits of these houses.

A FATHER'S STRONG BELIEF BROUGHT LUIS SARMENTO BACK TO LIFE

The post referendum strife in East Timor (now Timor Leste) in 1999 left behind an unanswered question in the heart of Mateus Miguel. He and his family live in Dili, Timor Leste, and have lost contact with their son Luis Sarmento. Although they have held a memorial service for him, the elderly father had a strong belief that his son is still alive.

According to his father, Luis Sarmento has been living away from his family and worked at various places. The last information they had was that Luis Sarmento lived with and worked for a man named H. Amase, owner of 'Wahyu Ilahi' store. During the riots in 1999, almost all businesses were targetted by violence including H. Amase's. As a result, like most of other settlers, H. Amase is known to have moved out of the island, leaving behind a question mark for Mateus Miguel and his family as Luis Sarmento vanished without a trace.

During the riot, many families were seperated without knowing each other's whereabouts. Some of them were later found dead, or fled from the island to stay in Indonesian territory. Mateus Miguel was not satisfied with the assumption that his son had died, because he was not able to find his body. He believed there is a big chance that his son moved into Indonesian territory. He was really curious and he decided to brave himself and contact the Restoring Family Link (RFL) team of the Timor Leste Red Cross (Cruz Vermelha de Timor Leste/CVTL) in Dili to submit a tracing request.

RFL is a Red Cross Red Crescent program which restores link between family members separated by natural disasters or conflict. During disaster response operation, the RFL services is carried out using "I'm

alive" and "I'm looking for" forms. The names contained in the forms are then listed and put up in public places such as command posts, hospitals and shelters, to help families look for their missing family members. In normal cases such as this, RFL activities are carried out using Red Cross Messages (RCM) and Tracing Requests (TR).

This is what Mateus Miguel submitted to CVTL, aiming to find out about his son, Luis Sarmento's. This request was forwarded by CVTL to the Indonesian Red Cross headquarters in Jakarta via the International Committe of the Red Cross (ICRC), and was further forwarded to the South-East Sulawesi province office of the Indonesian Red Cross, as there was strong indication that Luis might have moved with H. Amase. After receiving the request, PMI South-East Sulawesi immediately traced the suspected address. Unfortunately, when they found the address, they were informed that Luis no longer works there and H. Amase no longer lives in South-East Sulawesi and had moved to Central Sulawesi. However, they were also informed that Luis was still residing in South-East Sulawesi, in the village of Pusiambo, Lembo sub-district, North Konawe district.

Various efforts were managed to find Luis, from coordinating with East Timor family forum in Kendari and visiting East Timor communities to finding further information about Luis's latest address and workplace. After all the hard work, the team finally obtained a lead on Luis's whereabouts. When the team arrived at the address, they were thrilled to discover that the person they encountered matched the description and biodata in the tracing request and the result was indeed Luis Sarmento. After the team introduced themselves, they conveyed the

purpose of their visit and then Luis was overwhelmed to receive news from his long lost family in Timor Leste. He then wrote several Red Cross Messages to his family in Timor Leste and also received their replies.

It turns out that during the riot, he followed H. Amase who decided to leave Timor Leste to move to South-East Sulawesi to avoid the chaotic situation. For a few years he worked at H. Amase's new shop in town but he quit his job and ventured into different other jobs as driver, store clerk to construction worker. Luis had been trying to contact his family but all ways did not give him any result.

Currently Luis is married and has one child. He longs to return to Timor Leste but due to financial constraints, he is not able to come back. He is, however, happy to be able to contact his family again. In his family's eyes, he has been "brought to life", and this happened because of his father, Mateus Miguel's belief.





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RAIN WATER CATCHMENT, A JOURNEY IN SEARCH FOR WATER

Sidoarjo village of Tepus sub-district in Gunung Kidul district has been experiencing shortage of clean water. This condition has apparently affected Samireh, one of the residents. She has been experiencing difficulties in getting clean water for her primary needs. Aridity was the worst threat for the residents of Sidoarjo village.

Lack of clean water supply has been an annual problem in In Gunung Kidul district of Yogyakarta province. The limestone covering the area makes the rain water directly absorbed into the underground river, instead of being collected on the surface. It appears that the PDAM service of clean water supply has not reached area of Gunung Kidul

Most Gunung Kidul residents are already used to walking in long distance to get clean water. Samireh and her family have to go to the neighbouring hamlet for 5 km. They sometimes could afford one or two jerry cans of water per day for 10,000 rupiah. She spends 20 litres of water for her daily basis such as for cooking, drinking, and feeding the cattle. However, she and her husband cannot continuously afford the water since their jobs as rock miners do not give them enough income. Another story was experienced by Villages in Patuk and Gedangsari sub-district. These areas have been experiencing aridity since Yogyakarta earthquake in 2006. Since the earthquake in 2006, these areas have lost wells and springs and are potentials to experience the lack of water supply. The community failed to obtain clean water by digging the ground or constructing water catchment.

The Indonesian Red Cross (Palang Merah Indonesia/PMI) and Japanese Red Cross worked together with the community and the local government to solve the problem. Since Gunung Kidul is actually a region with a high rainfall, rain water catchment (*Penampungan Air Hujan/PAH*) could have been a perfect mitigation alternative to overcome the lack of water.

The first step to make rain water catchment was by conducting assessment to determine PAH construction spots based on the agreement with the local community. After that, the community formed a community working group with 7 to 10 members, depending on the amount of PAH to be constructed. Next, each group sent their representative to receive a four-day training on PAH construction at the village hall, who then became the group leader during the PAH construction at their villages. It took six days to construct one unit of PAH, and each group was responsible for two to four units. All processes were carried out enthusiastically by the community in those two sub-districts.

The program started on August 2007 and finally by March 2009,, the community managed to construct 1,062 units of PAH in ten villages of Patuk and Gedangsari sub-district. There were two types of PAH based on their capacity: 8,800 litres and 12,700 litres. The mutual assistance in PAH construction involved 357 groups from 9,000 families. "Construction material for PAH as well as the tools were indeed provided by PMI and Japanese Red Cross, but the manpower were purely from the local community who worked voluntarily, including providing meals during the construction program. The atmosphere of mutual assistance at that time was really moving," said Lilik Rahmad Purnomo, head of office PMI Gunung Kidul district.

The community of Sidoharjo village, where Samireh lives, proposed a similar solution. In a participatory assessment stage of the ICRR joint program between PMI and Danish Red Cross, They proposed that aridity risk could be reduced with PAH and through similar process, community managed to construct 110 units of PAH in 11 sub-villages with capacity of 6,000 litres each. This program turned out to be successful and Samireh could feel the benefits directly. "With PAH in my house yard, I can share water with my neighbours. I feel so relieved now, water is no longer a problem", said Samireh.

During the rainy season, PAH could function effectively to alleviate the community's burden regarding clean water provision. Although PAH can only slightly extend the duration of rainy season, it did not discourage the community. The community develop some methods dealing with clean water provision like constructing water reservoir for dry season, so that the PAH's large capacity can reserve the water in a more proper way. They can save more amount of clean water in their PAH at the moment. "Usually, we put water into the well, but it will vanish because it seeps to the ground. Now, if we buy 5,000 litres of water and reserve it inside the PAH, it can be used for a month even for three families," said Dasinah, resident of Sumberejo village in Patuk sub-district, explaining the advantage of PAH at her house yard.

The community's effort to search for water in a unique karst area of Gunung Kidul is an illustration of patience. The PAH are expected to shorten the dry period and also the search of clean water.



SENSE OF OWNERSHIP IN THE FLOWS OF WATER

With sparkle in his eyes, Syakban Siregar said his thoughts on clean water supply. *"We never dared to dream the water would flow in our village like today,"* Syakban's happiness was not without reason. Clean water has been one of the long standing problems, which has never been resolved in Krueng Raya sub-district because the PDAM (National Water Company) has never properly reached the villages in the sub-district for years.

Syakban is the head of Mata le Alue Pochik, a local community organization involving representatives of eight villages spread along 15 kilometres from Ladong to Lamreh. This organization is a non-governmental organization in charge of managing water distribution along those eight villages. During the course of their service, this organization was once temporarily off because clean water distribution was turned out to be an overwhelming responsibility. The members found it difficult to synchronize various interests from every village. Despite the temporary absence, PMI (Indonesian Red Cross) and American Red Cross spotted a zest for cooperation with the inception of Alue Pochik. Therefore, PMI tried to revive the organization's function during the clean water piping installation along Ladong-Lamreh.

Mata le Ale Pochik came back to life. PMI conducted some training for capacity development, such as administration management, finance, and health promotion and brought Ale Pochik progressively comes

back to life. Alue Pochik played a big role in setting up water piping system to the community houses, which was paid by the community members through the community's financial contribution in instalments, as well as in the maintenance and financial management.

Alue Pochik also puts forward the role and contribution of women, as they have the strongest interest in clean water. Women have become the most vocal speakers with strong persuasive energy in the socialization of clean water usage and other health issues in the village.

Alue Pochik was then entrusted to take over the American Red Cross and PMI's responsibilities to be in charge of the water management program. Alue Pochik even managed to undertake water selling to other places with needs, such as ship, and used the sales revenue to cross-subsidize the community's water management cost. At the end of the program, the system was handed over to PDAM as official institution in charge of water management. "Nevertheless, PDAM still entrusted the responsibility to Alue Pochik as an organization which belong to the community and which maintain community's sense of ownership," Syakban emphasized In the end, the great sense of ownership to the established system has proven to ensure program continuity as much as the flow of water ensures continuity of life.



Disaster Risk Reduction



MITIGATING DISASTER HAND IN HAND

The sweltering heat does not reduce the magnificent beauty of the lake Tempe that is located on the border of Laelo village, Wajo district of South Sulawesi. This nice scenery, added with the blow of gentle breeze in the corn field, has been soothing the working people of Laelo village. The people of two community associations (Rukun Warga/ RW), together with the Community Based Action Team (CBAT) of Laelo village and the disaster response team (Satuan Penanganan Bencana/ Satgana) of Wajo district, take turns working on setting up 6-metre-tall piles.

Lake Tempe has always been an important part of the Laelo villagers, yet it has also been causing problems for years. Apparently, this village is located in a flood-prone area and every rainy season, the flood also drags the amount of hyacinth which can potentially tear down houses. The community, the government, and Indonesian and Danish Red Cross synergized to make the community based disaster preparedness (CBDP) program. This program has identified that mitigation measures to contain the flood and water hyacinth must be taken to reduce the risk of the annually occurring disaster. The community contributed their time and energy to finish the construction of the piles. Their effort has received a large support from the Wajo district government. Fifty percent of the total program budget was given out and since this construction in 2005, the piles stand tall, stretching 700 metres, has fortified the edge of Lake Tempe.

Besides the effort of taking mitigation measures, PMI Wajo and the community also tried to make use of the abundant water hyacinth in Lake Tempe. PMI Wajo district office conducted skill training for CBAT and community members on how to produce handicraft using the water hyacinth. As a result, the community can create woven mats, bags, sandals and beautiful picture frames. By having this skill, the community are now able to earn additional income by selling the products.

Polewali Mandar district and Sepa Batu village has similar experience regarding the flood disaster. The high tide of the ocean water on the east coast contributes to the rising of the Mandar river water level and causes flood. The wave breaker that had been built there was not able to hold the flood and was destroyed.

The Indonesian and Danish Red Cross support the community to conduct a disaster preparedness program in this village. The Sepa Batu villagers, CBAT members and community agreed to build another wave breaker and the 170-meter length wave baker had been completed. Polewali Mandar mayor inaugurated this wave breaker in August 2006 and this breaker has diminished the Sepa Batu community's concern on the flood disaster.

This CBDP program was the embryo of the integrated community based risk reduction (ICBRR) approach. Although the program carries no 'risk reduction' component in its name, this program has conducted effective mitigation measures such as the construction of piles and wave breakers as the efforts to reduce the risk of upcoming disasters. Therefore, it was very easy for PMI to adjust its program when there is a shift of paradigm from disaster preparedness and response to risk reduction.

The community-based approach used by PMI in preparedness program has received full support and recommendation from the local government. Such support has been embodied through funding support from the government for the construction of the wave breaker. The risk reduction measures, both in Wajo and in Polewali Mandar, evidently required high level of participation not only from the community but also from the local government. In the future, such synergy in disaster risk reduction effort is hoped to be sustained and similar programs, including government projects to develop public facilities and infrastructures will emerge.





WORKING IN SYNERGY FOR DISASTER RISK REDUCTION

“PMI should be the *avant-garde* in disaster preparedness.” This strong determination of the Indonesian Red Cross (Palang Merah Indonesia/ PMI) Bogor district was stated by Abidin, the head of office. He continued that local government of Bogor district has agreed and given their support to be realized, so that those words would not only remain a slogan,

It started with PMI’s Integrated Community-Based Risk Reduction (ICBRR) program in cooperation with Danish Red Cross and Disaster Preparedness Programme—the European Commission’s Humanitarian Aid department (DIPECHO) in two villages: Citeureup and Sipayung, two areas that are prone to flood and landslides. This program succeeded to make the community skilled to measure the level of vulnerability and disaster hazard and to increase their capacity to respond appropriately.

Since the program was successful in those two areas, it is now expanded to four villages: Karang Tengah, Bojong Koneng, Cibadak, and Sukamakmur. The first achievement of PMI together with the local government was increasing the community’s capacity and reducing their vulnerability to disaster. This program was even more successful since the government changed its disaster management paradigm from emergency response to community-based risk management.

“The data resulting from the Vulnerability and Capacity Assessment (VCA) in four villages has been submitted to the Local Government and the response was very good,” explained Abidin when he mentioned one example of coordination with the Bogor district government.

The disaster risk reduction program was socialized intensively in those four villages. This program was not only useful for the targeted community, but also for PMI and for Bogor district government’s disaster management capacity on the inside.

The support of the local government of Bogor district has actually started since the beginning of the ICBRR program implementation. “*In the beginning, financial support from the government was not much, only 250 million rupiah. After seeing the results, the support increased to 1 billion rupiah and it’s been going on for two years now.*” Abidin

explained in detail about the support from the Bogor district government. This success made the both parts; PMI and the local government realized that sustaining the pattern of coordination is a mutual need. Therefore, the parties agreed to conduct a workshop in which they formulated a plan of action in order to establish a standard system. Since PMI already has a standard program for disaster management, PMI simply acted as the main resource person in this process.

Firstly, PMI designed the outline of the program plan. In order to ensure full integration of the plan, the detailed program activities were designed together afterward with relevant government agencies, such as the regional disaster management agency (BPBD), provincial health office, regional planning and development agency (Bappeda), etc.

The program was designed for five years to correspond in accordance with PMI’s governance term. This program started with disaster preparedness, emergency response, health service, human resources and organizational development. The inclusion of other components did not only address disaster risk reduction in the community, but also became a manifestation of program integration. In the future, this program will be implemented using a bottom-up approach, starting at the village, to the sub-district, and up to PMI at the chapter level.

At the policy level, PMI had succeeded to ensure and convince the local government of Bogor district to assume responsibility in the cooperation. Despite having established a good partnership, PMI still hopes companies through their corporate social responsibility program would also adopt disaster risk reduction efforts to strengthen and further expand the cooperation.

CBAT OF JABOI: BALANCING COMMUNITY SAFETY AND TOURISM

The sulphuric area of Jaboi Volcano, Sukajaya district, Sabang city is very prone to fire hazards. Fire is easily triggered by carelessly discarded garbage or cigarettes. Ironically this volcano is one of tourism destinations and it is not very difficult to reach this area, which is located between 100 to 200 meters above sea level.

Managing the risk in the area has become the main priority since the Community Based Action Team (CBAT) in Gampong Jaboi was established in 2008. The team, consisting of 20 people, realized that the fire hazard could have easily been minimized by closing access to the hotspots. There are three hotspots in Gampong Jaboi and two of them are tourist destinations. Therefore, closing them was considered unwise. Several prevention measures have been taken, such as placing a warning sign so people don't litter; unfortunately the local people often ignored the warning signs and the worse thing is the fire often occurs during holiday season when Jaboi volcano is packed with tourists.

The most recent fire took place in May 2011 on a 3x3 metre land and this fire was triggered by a piece of tissue. Muzakir, head of Gambong Jaboi village CBAT commander said that most of the fires occur due to human carelessness. He admits that the area sometimes catches fire due to natural phenomena but the smell of the smoke is different than those set by man.

"The smoke from fire caused by man is very painful to the eyes and its colour is blue," explained him.

Aside from the above specific characteristic, the method to extinguish fire in Jaboi is also different. The most effective method is by using water mixed with mud and this method passed from generation to generation.

In order to overcome this matter, the Jaboi CBAT together with the residents conducted a mapping and analysis of the hazard, risk and resources of Gampong, a village with only 685 residents. They altogether identified the needs and solutions to mitigate the disaster in their village. They realize that closing the access to the tourism spot is not an option; hence the residents must choose the right measures to manage the disaster-proneness of the area.

Therefore, the effort to raise awareness on disaster preparedness cannot be separated from the support of the local government. A challenging effort and firm negotiation to persuade the local government to help improve the facility finally succeeded. This year, 20 ton litre water reservoir has been built with the support of the government to be used in the event of a fire.

The local residents and the CBAT hope that the government will not only build a water reservoir, but also build observatory stations. These stations will be used by the CBAT to disseminate intensively the dos and the don'ts within the area to the visitors.

Now, after three years, the merit of having CBAT in the community has been proven. Their roles are essential; They protect the life of Jaboi residents from the fire, and they keep the Jaboi volcano tourism spot alive. If only all the tourists are aware and practice safe tourism, it won't be necessary to close the access; and the tourists can continue to admire the beauty of the Jaboi volcano without jeopardizing their safety and the safety of the local community.





PLANTING MITIGATION, HARVESTING COFFEE

Didi Rokhmat (a 45 years old villager), Suryaman (the chairman of the community body of forest village (Lembaga Masyarakat Desa Hutan/ LMDH), Ade Komala (the CBAT commander), and Andrawati (one of the village officials) were involved in a casual conversation inside the hut of the edge of spring lake of Pangauban village. Pangauban village is one CBAT area that has potentials for a landslide disaster and these people discuss about “harvesting coffee” on this area as one of the mitigation measures.

Didi Rokhmat, the withdrawn man, was one of 160 farmers who cultivate the 7-hectare village land on a landslide-prone spot, which was then popularly known as ‘CBAT land’. He had been working on 45 tumbak, approximately 0.4 hectares of land for four years before the coffee was cultivated. Other farmers used to work on approximately 45-100 tumbak, but he chose to plant cash-crops such as carrots, peppers, onions, corns, tomatoes, eggplant, and vegetables, which can be promptly harvested. Now, he has been learning to cultivate coffee for three years.

Suryaman found it difficult to convince farmers to change the habit of planting fast-growing and quick-harvested crops to perennial plants, which will produce after five years. This disaster mitigation activity was funded by Danish Red Cross and the Disaster Preparedness Programme-the European Commission’s Humanitarian Aid department (DIPECHO). The first framework of the ICBRR program was presented in the village forum, but this raised various problems. The land to cultivate coffee has been tilled by the community for decades with a revenue-sharing system. It means the people would lose some income once the plan starts.

The productive land was unlikely to be diverted into a forest; as the community should still obtain the yields from the land. Moreover, planting woods would cause people to lose their earnings from cash-crops and planting woods requires cutting down the existing trees. These issues cause difficulties to achieve the objective of mitigation program.

Pangauban village has a sharp angled slope, since it is located in a hill and this contour is prone to landslide disaster. The landslide disaster often causes material losses, for instance, the last disaster in 2007 took two causalities.

Intensive discussions among the village community, LMDH and CBAT members aimed to find a way out by analyzing the specific issue, its

potential and weaknesses. Finally, the consensus decided to plant coffee as a new commodity, as well as a way of disaster mitigation. Coffee is proven as vegetation whose root is strong enough to restrain the slide and whose harvest is promising. Moreover, the Cash-crops were still possible to plant between the coffee trees, so farmers were still able to collect the cash-crops while waiting the yielding of the coffee trees. LMDH Pangauban village actually pioneered this commodity before; the community did not trust them completely in their marketing skill.

In implementing this mitigation effort, the community had to face potential loss but they have full awareness to mitigate landslides instead. This awareness might be the strong encouragement to dispel their doubts for shifting commodity. Thus, on November 2009, 6000 coffee trees interspersed with 5000 umbrella trees were planted simultaneously on the landslide-prone land. Since the community was willing to contribute more, the farmers decided to give ten percent of their revenue for disaster contingency plan in the village in their revenue-sharing agreement.

The coffee trees have been able to grow well in one year under the hard work and joint effort of farmers, CBAT and LMDH. Ade Komala, CBAT commander, acknowledged that some rejuvenation had to be done, by replanting some withered trees. Meanwhile, farmers continue planting and harvesting cash-crops as before.

After four years, the coffee started to grow fruit. Some of them are able to be harvested and the farmers, including Didi Rokhmat, will be busy picking the coffee beans every week for the next four months.

“Isn’t great and such a relief after knowing that planting coffee is fruitful even though you and the community are still learning to carry it out?”, Suryaman, the initiator of coffee cultivation in Pangauban, glanced at Didi Rokhmat, who just responded with a smile.

The community’s choice to prioritize mitigation of landslides showed a real positive result gradually. Some coffee processing businesses are starting up around Pangauban village, and these businesses diminish people’s scepticism on coffee marketing. One community action has proved to result double success: resilience against disaster and resilience in economy.



BUILDING A FORTRESS OF MUTUAL ASSISTANCE AGAINST DISASTER



Morba village, Alor Barat Daya sub-district, East Nusa Tenggara, had completed constructing 140-meter length gabions and a 120-meter dike at four flood-prone spots/critical flood points along the river of Kikiray. The river, cleaving the village of 1303 households, floods every rainy season but it goes arid during the dry season. This contrasting condition causes problems for the residents. The flood only takes one-day rain on the hill. This rain makes the river, which is normally ankle-depth, turns into a deluge, erodes the riverbanks and overflows into houses.

Alila and Adang villages of North-west part of Alor sub-district have similar problems since these two villages are located at both sides of River Abuar. The rainy season always makes the river overflow to resident houses and this situation can happen three times a year. The residents have conducted prevention attempts and one of them was by planting bamboos along the riverbanks. This way turned out to be a failure.

"It takes 5 until 6 years for bamboo to grow strong and the flood comes every year. The flood can sweep away the bamboos easily." Levinus T Han, member of Adang village CBAT explained how the flood has overwhelmed them.

Another problem explained by Levinus, the oldest CBAT member of Adang village, is the Anuving River. This river is like drainage in a dry season, but becomes a source of flood in a rainy season. The spring on the hill would split into several river-flows streaming down the hill, striking soils, gardens and eventually inundating people's homes.

The community, CBAT members, local village government and volunteer corps (Korps Sukarela/KSR), carried out mapping of hazard, vulnerability, risks and capacity based on the condition of each village. As a result of the discussion, they agreed to construct gabions and a river dike at flood-prone spots to prevent flooding. This mitigation measure was the main step of a series of ICBRR program activities - a joint program of PMI and Netherlands Red Cross, which was implemented since March 2008.

It wasn't difficult to mobilize the community to work together voluntarily in building the gabions and dike. The communities of those three villages

were highly motivated because they understand that those efforts were aimed to fortify themselves against the flood. The construction was done one by one at the flood-prone spots involving not only the local people from where those gabions and dike were to build, be built, but all community members.

"After the consensus, the community and KSR agreed to carry out and supervise the construction to ensure its strong structure. Four spots were completed within a month." Cornelis A Menikari, head of Morba village explained. He was directly involved in the mitigation construction process, like carry the stones for the gabions together with the villagers.

In Adang village, the community's self-reliant efforts did not end with the construction of gabions and dike. Mutual assistance (gotong royong) among the community continued in building a one-kilometre-length drainage of Anuving River through people's lands and gardens. This was done to channel the flow directly to the sea through those small creeks during the rainy season so the overflowing river wouldn't inundate people houses.

The construction has almost been completed now. The 100-meter length gabions and a 170-meter dike are built in 5 flood-prone spots in Andang Village, while in Alila Village the community built a 220-metre long dike and 60-meter length gabions in 3 flood-prone spots. The mitigation efforts at the village of Morba, Alila and Adang did not stop at completing the mitigation measure itself. The ICBRR program may have initiated such series of efforts, but it's the community's self-reliance and strong mutual assistance which has become the people's solid fortress against disaster.



FLOOD TESTS NEWLY COMPLETED DIKE

"I heard a rumbling sound and water suddenly rushed down." Daniel Laukare, leader of neighborhood association (Rukun Tetangga/RT) 08, who happens to live near the riverbanks explained about the signs of flood coming. Kanai Alakai, which is called RT 08 in this area, was one of the flood prone areas in Morba village. The Flood inundates at least 20 households in its each strike.

The ICBRR and The Netherland Red Cross determine to point Kanai Alaka as one of four flood-prone spots in Morba village. Since the decision was announced, the community agreed to construct a dike and gabions to overcome the flood problem. They were highly motivated to work together constructing a 60-metre dike and 40-metre long gabions. The construction of gabions took two weeks while the construction of the dike took a month.

However, the community had to remember that disaster never compromises with time. When the non-stop rain poured on the hills for few hours, the

flood hit their village when the dike's construction was just completed in that morning.

The people of Morba never expected that their disaster mitigation efforts would be tested immediately. They worried that the dike would not withstand the flood since the construction hasn't completely dried. On the contrary, the dike and gabions were still standing, although some 30 centimetres of the bottom part were slightly eroded.

Now, they don't have to worry about the flood that would inundate their houses and lands. Their hard work to construct the flood mitigation in a month was finally paid off. They feel secure because the dike and gabions that they have built have freed them from flooding.

UMAUTA CBAT: PLANTING NUTMEG, PREVENTING DISASTER

More than just a rescue team, CBAT is not only the driver of disaster preparedness activities at village level but also motivators of the community's participation. In fact, they took up the role to drive forward the community's social-economy development in Umata village, Bola district, in Sikka regency.

Bola sub-district has potential plantation areas to grow candlenut, nutmeg, coconut, cacao and cashew. The situation is the same in Umata village, where its residents cultivate plants to make a living. However, besides its farming potentials, this very hilly village is also hiding potential for disasters since this village has several records of several disasters, like landslides.

Recognizing the potential hazards, the CBAT and the community's solution to landslide is planting nutmegs. It was not difficult to encourage the villagers to plant nutmegs, since they understand its benefits in protecting critical landslide points. With PMI's supports, two thousand seeds of nutmeg are planted along the potential landslides areas to prevent the land from sliding.

The economic development potential for the villagers is another reason for the planting of nutmegs, although it is still in a limited scale. On the right soil, the nutmegs can be harvested in four years, while it's going to take five years on other kinds of soil. In addition, compared to other plantation crops, nutmegs are much easier to cultivate. Evidently, planting nutmegs has two benefits; as a prevention to natural disasters, and as an improvement to economic life.

Currently, the CBAT members of Umata village hope for more donation of nutmeg seeds to be distributed to all communities, not only for the people in the landslide prone areas. With the seed donation, the community is expected to increase the togetherness as well as the communities' resilience towards disaster.



SIGAB COOPERATIVE: FINANCIALLY PREPARED FOR DISASTER



Andi Suratna, a 40 year-old book vendor, was very curious when he saw a small office with a banner "Siaga Bersama Credit Union Cooperative," near where he sells books in Rawa Buaya. He saw several vendors like him enter the office and have serious discussions with the cooperative staff.

"I pass by the office every day, wondering, what kind of office this is. One day, I braved myself to enter the office and had a small chat," he said.

The office turned out to be a cooperative, which was established by Rawa Buaya and Kedaung Kaliangke CBAT supported by the IFRC, Netherland Red Cross, German Red Cross and Rabobank Foundation. The cooperative provides an economic safety net for people affected by disasters. The idea of the cooperative establishment came from most of the local residents of Rawa Buaya and Kedaung Kaliangke who often face financial difficulties to repair their houses whereas the flood happens almost every year.

"Due to the flood, one year work earning is gone, and people often need to borrow some money from loan sharks in order to repair the damaged house," explained M. Sumarmin, one of the CBAT members who initiated the Sigab (Siaga Bencana: disaster preparedness) Cooperative. The Sigab Cooperative was established on 15 October 2009 and it was first attached to the Indonesian Red Cross West Jakarta province office but since March 2011, the office moved to Rawa Buaya market. The purpose of its relocation is to be more accessible for the members and to encourage more people to seek more information and join the credit union cooperative.

The response from the people was very positive; in just five months, 104 new members joined the cooperative and on July 2011 the total members reached 263. Andi Suratna, one of the members, is one of them, and upon joining he could immediately utilize the loans facility.

His curiosity on this credit union cooperative gave him the solution of his financial problem. Before he knew this cooperative, he had to borrow some capital money from loan sharks for his small business, like what any other small and medium entrepreneurs do. Despite its high and burdening interest rate, it was considered to be the best and fastest

alternative compared to dealing with the bank's requirements and red tape.

At the Sigab Cooperative, Mr. Suratna could freely calculate the loan nominal and instalment period according to his daily income. The cooperative will do an assessment and will analyse and give their approval with the help from the field surveyor, who is also a CBAT member. This simple procedure is very helpful for people like Mr. Suratna, he was able to pay off his debt to the loan shark by the first loan he received. He hopes he could get another loan to expand his home-based business soon after he clears his first loan.

The close relationship with existing and potential members is very well maintained that the cooperative would help members who have difficulty to pay their loans. *"We do not want any single member to give up his/her membership. Therefore, if a member is having difficulties to pay back their loans, we will discuss with them to find the best solution. One option of solution is by partnering with another member,"* explained the Cooperative's Manager, Sapta.

The Sigab Cooperative is very determined in improving itself for the benefit of its members. In March 2011, the first annual members' meeting was held. In the event, all members discussed about the progress of the cooperative during the whole year, as well as regarding any possible services that the cooperative might provide to its members. Even though its interest rate is still higher than the banks', but the members' involvement in formulating the principle, the loan term and the repayment method will hopefully meet the needs of small and medium entrepreneurs for a financial institution.

Thus, the Sigab Cooperative, as its name, will be able to bring significant contribution in improving economic resilience of the residents of Rawa Buaya and Kedaung Kaliangke. The flood maybe inevitable, but improving the financial capacity of the residents of both regions might be the most efficient solution.



MELODY OF TRADITIONAL CULTURES FOR DISASTER RISK REDUCTION

"Is there any evacuation route at your school?" Klepon asked all volunteers and some 175 Red Cross Youth (PMR) members of Grobogan district, and was replied enthusiastically by PMR members from basic, intermediate, and advance level, "Yes, there is! Yes, there is!"

Klepon is one character of wayang tenda (shadow puppet performed in a tent), created together by Indonesian Red Cross, German Red Cross, and Nandang Wuyung wayang association.

One of the characters, Gendon, drew out another question, "Really? How does it look like? Can anybody tell us?" The audience enthusiastically shouted to answer, and one PMR member was then appointed to explain in detail about the evacuation routes at school.



A similar performance was also presented by the Betawi people in Rawa Buaya and Kedaung Kaliangke village, but of course using their traditional culture, *lenong Betawi*. The lenong is popularly known as Lenong CBAT, since all of the casts are the CBAT members from both villages.

"That's why you shouldn't litter, Bro!", said one character in a local Betawi dialect. The message was wrapped in a witty, effective and efficient way to directly introduce the DRR to the community. 'Not littering' was one of the disaster risk reduction efforts proposed in those two villages because their neighbourhood is flooded nearly every year.

The *Lenong Betawi* was performed at the secretariat of community association (*Rukun Warga/RW*) 02 of Rawa Buaya Village and was attended by women from the family welfare program (PKK). The CBAT would often use this lenong as a means of socialization to the community. The performance contained messages that were adjusted with the needs of audience. It could be about disaster management, health as well as other PMI programs. Besides making the campaign more interesting for the audience, the performance also serves as free and refreshing entertainment.

"I think people become more aware than before. For example, they are aware of how to create a healthier environment, how to reduce flood risk and how to prevent dengue fever and they no longer litter. It would be different if they were just provided with information using conventional method such as brochures over and over again; they would eventually get bored. As for my own benefit, I gained more experience," said Atik W, one of the *lenong* cast and CBAT member.

Lenong, which has rooted overtime within Betawi culture, can be used as a media to enlighten people about positive and useful things. Therefore, the CBAT's idea to form a group of lenong Betawi as a mitigation effort was ideal. The characters and the stories of the lenong represent close reality of the community, so it is easily understood.

Meanwhile, the melody of gamelan accompanied *reog* dancing of the Wonodoyo and Cluntang Village CBAT as means of promotion in Boyolali district of Central Java. Reog has existed in this district for a long time even though it is known as a traditional culture from Ponorogo. Witnessing the potential of mixing *reog* culture with disaster risk reduction socialization program, CBAT members from community cultural group and community cultural studios prepared a disaster risk reduction scenario to be performed in front of PMI volunteers and the community.

This shadow puppet, which was performed in a triangular tent and lighted by a lamplight, turned in to a very interactive and interesting dialogue. The characters like Klepon, Gendon, and Gemblong played as a portrayal of PMR members who were trying to introduce disaster risk reduction at school. The accompanying music instrument was guitar and *gendang* (kettledrum) instead of regular gamelan, so it feels more dynamic and suitable for youngsters.

The *wayang tenda* show was performed to commemorate International Youth Day on 12 August 2011, and was aimed to promote disaster risk reduction among the young generation. This modern wayang performance was used as a media for socialization. This is found effective and turned to be a good method to reach the community down to the grassroots level, especially compared to conventional socialization method.



"With the presence of CBAT reog, the community's activities became more varied. Especially since the ICBRR program started up, reog was brought to life again," said Slamet Haryanto, field coordinator of the ICBRR program.

Now, *reog* performance has been more popular not only in the village area but also in sub-district and district level. Reog was not the only one to become popular, the CBAT members of ICBRR program and PMI also became well-known by community.

The irrefutable power of art was able to lead its audience to sway with the rhythm of the melody. Through traditional culture, the message was presented with the language and tones close to the local community's heart to be easily absorbed. It is hoped that disaster risk reduction behaviour, together with the beat of *gendang*, witty stories and dynamic wobble of dances, will be rooted within the community as much as the traditional culture itself and positive behaviour changes will surely result from this effort.



Disaster Preparedness in **School**

LET'S HAVE A DISASTER-PREPARED SCHOOL!



"One staircase on the west-side was built so the children won't overcrowd and bump into each other at the east-side staircase during an evacuation when an earthquake strikes," said Oki Priyatna, A.Md, headmaster of junior high school (SMP) Al Azhar 15 Cilacap.

Physical adjustment of the school building was made after a disaster preparedness comprehensive simulation in Al Azhar education complex in 2010. "The simulation was conducted simultaneously, involving all students of SMP, SD (elementary school), and teachers. Some SD students were really scared and even crying, since the drill was so exciting and looked so real. We were so enthusiastic," Oki Priyatna recalled.

Many important lessons were learned during the simulation, and these lessons generated some management policies to make the school environment more prepared for disaster. Oki Priyatna said that due to the high earthquake frequency in Cilacap, the central office of Al Azhar foundation in Jakarta was concerned about their students' safety. "The central office was afraid that the students would jump from the second floor due to their alarms," he said.

As a form of concern from the foundation, the management was encouraged to find out more about disaster preparedness in school. The Al Azhar School just by chance launched a new extracurricular activity namely PMR, and through the volunteer corps (KSR) program of Al Azhar PMR coach, they found the perfect answer.

Actually, the *Ayo Siaga Bencana* (let's be prepared for disaster) jargon is familiar among PMR members since it is one of the main training materials. The teenagers are expected to have high awareness on disaster preparedness because they will become disseminators of prepared behaviour among their peers, as well as in their school's neighbourhood after the training. This significant function of PMR was then used to implement *Sekolah Siaga Bencana* (disaster preparedness in school), which is a joint program by PMI, German Red Cross and DiPECHO. From 2008 to 2009, the implementation of the program started in two municipalities prone to earthquakes and tsunamis: Cilacap and Kebumen.

This program aimed to enable the school to manage disaster risks in its neighbourhood. The school policies would completely support disaster risk reduction activities at school to measure the ability to reduce disaster risks. The school should have an early warning system, an emergency contingency plan, and the changes of attitudes and behaviours regarding disaster risk reduction issues.

Disaster Preparedness in School Program were first established in 15 junior high and senior high schools. Although the program has been completed, the core of the program is still maintained at each school. This program was next developed and expanded to many other schools at various levels in 2009. Some public institutions like hospitals and companies have participated in implementing disaster preparedness concept in their working environment with the assistance from PMI Cilacap.

SMP Al Azhar 15 was one of the private schools implementing disaster preparedness proactively and did the program wholeheartedly. Besides improving the knowledge of teachers and the school board about disaster preparedness, they also worked together with PMI in conducting PMR trainings and capacity building. Furthermore, the school management formulated a policy on school development with an orientation towards disaster preparedness efforts.

"We were lucky that the physical school construction is still ongoing, so we can conform to the recommendations from the evaluation of disaster preparedness simulation," said the headmaster. "Apart from constructing an additional staircase, we and the foundation have reviewed the idea of constructing a new building on the vacant land in the school compound, since this building is needed as a safety zone."

Disaster preparedness certainly requires comprehensive efforts from various parties. A disaster-aware policy in school is a key to integrated actions to improve resilience and safety in school environment. Yet, PMI and the disaster-prepared school management still have to maintain the preparedness behaviour among students and school neighbourhood.

"We do not want the students to forget the whole training materials; they need to be constantly reminded. Disaster preparedness drill is going to be conducted periodically." The strong determination has been agreed to by the management of SMP Al Azhar 15 for the sake of constant awareness of disaster preparedness.



MORE DISASTER-PREPARED THROUGH GAMES

A 30 cm square carton dice was thrown, rolled for a while before it stopped, showing two dots on its surface. A pawn standing on column number two was moved to column number four, and the instruction in the column read: "Your warning saved many people. Move five steps forward." The number of children shouted with joy.

Their reaction was completely different when one of the players had to move the pawn to column number 24 and the instruction written in that column was, "Watch out, earthquake strikes! Move five steps backwards!" The children spontaneously expressed their disappointment, "Aawwww..."

"The children get so excited when playing the game. They fully focused and are fascinated to follow each step to the end," said Sari Wahyudiningsih, a member of volunteer corps (*Korps Sukarela/KSR*) and a coach for Red Cross Youth (*Palang Merah Remaja/ PMR*) at SMPN 8 Cilacap every Thursday.

The 'Disaster Preparedness Dragon Snake' is one of PMR's favourite games. The game, which is popularly known as 'snake and ladder', was made on a six by three metres tarpaulin sheet. Some 39 columns are drawn on the tarpaulin sheet, containing instructions pertaining disaster risk reduction efforts in each column. One round of the game is played by 3 to 4 people. "The children usually compete with each other to be the pawn and we have to play several rounds, so every child can get a turn to be the pawn," added Sari with laughter.

According to Sari, coaching intermediate level PMR (*PMR madya*) is very interesting, especially when the training is delivered through games. "The volunteers used to coach like teachers and this made the children bored and would rarely attend PMR training," said Sari, who has trained disaster prepared school development in national level.

"The volunteers used to coach like teachers and this made the children bored and would rarely attend PMR training."

Endro Teguh, a KSR member who is also involved in PMR development in Cilacap, has similar opinion. "Children are fascinated by training involving more practices and outbound activities. By implementing 'learning by doing' method, the children are able to explore the training materials by themselves. Games turned out to be their favourite method and they were willing to extend the training duration just to finish the game."

A Game called Disaster Preparedness Dragon Snake aimed to attract children's interest towards disaster risk reduction efforts. Using games has become effective methods to attract their participation, to raise their eagerness to attend the next training, and to make knowledge transfer much easier. The *Ayo Siaga Bencana* (let's be prepared for disaster) training material, which has been repackaged into *Ayo Bermain untuk menjadi Siaga Bencana* (let's play a game to prepare for disaster) has shown positive results. The PMR members' interest and knowledge improvement have been noticed by the PMR coaches and KSR during the training. Therefore, maintaining such effective method in every PMR training has become an inevitable challenge.

SAFE ZONE SMPN 2 AYAH: PREPARED FOR EMERGENCY, USEFUL DURING PEACE TIME

"When this school was chosen as the safe zone during emergency period for Jintung village, I had something different in my mind," recalled Sujarwo, who was the headmaster of state junior high school/ SMPN 2 Ayah when the program started. *"Drawing from other villages' experience, a safety zone was built for evacuation, but this zone is abandoned and useless during peace time like now."*

The headmaster's rationale was then discussed in a forum attended by school board members, school committee, the village's community based action team (CBAT), village board members, head of sub-district (*camat*), Indonesian Red Cross (Palang Merah Indonesia/PMI) and German Red Cross. Technically, the building should be useful and should be multipurpose not only during emergency period. This concept generated an idea to build a sports hall to be a place for conducting community activities during peace time. *"We hope that the building could serve not only as a sports hall for the students, but also as a place for community activities such as sports, meetings, even for celebration venue,"* Sujarwo added.

Standing on a 9,990-square-meter land with 5,347.3 square meters building area, SMPN 2 Ayah indeed meets the criteria as the safe zone for Jintung village in Ayah sub-district of Kebumen municipality. Referring to the assessment report of the German Indonesia Tsunami Early Warning System (GI-TEWS) and based on the experience in 2006, the school's location is safe from tsunami risks. Meanwhile, Jintung village, located between beautiful hills and a stretch of beach, is potentially at risk of tsunami, earthquake and landslide.

As an effort of preparedness, SMPN 2 Ayah has been implementing Disaster Preparedness in School (*Sekolah Siaga Bencana/SSB*) program since 2009. This joint program between Indonesian Red Cross, German Red Cross and DIPECHO covers 15 high schools in Kebumen. The construction of emergency shelter building in the school was a part of this program, aiming to provide temporary shelter for the community. Several schools had been selected as safe zones in Kebumen and Cilacap and two schools which meet the safety zone criteria in Kebumen are SMPN 2 Ayah and SMP Petanahan.

Commonly, a school located in disaster prone area will become temporary shelters for the surrounding community in the early days of disaster. The schools are expected to be a place which can function as an evacuation zone, temporary displacement shelters, and reachable meeting points. Therefore, strengthening and improving school facilities as safe zone during emergency situation has become a basic need. Some physical improvements and developments were also done in two schools, such as clean water storage, sanitation system, and public bathing-washing-lavatory (*mandi cuci kakus/MCK*) facility.

In line with disaster preparedness in school, a similar effort also started at the community level. The village's CBAT members consisting of youth, teachers, and village officials were recruited and trained. Together with the village officials and the community leaders; they coordinated and conducted a vulnerability and capacity assessment, followed by a risk and resources mapping. After that, the CBAT team socialized the result of the assessment and mapping to the community.

Disaster preparedness in educational institutions and the community was then integrated. An integrated disaster preparedness simulation was conducted, involving the community, village officials, school board members, and disaster management related government offices on disaster management. The simulation's purpose was not only to improve their emergency response ability, but also to develop partnership and coordination with each other.

"It was exciting! We went all-out and it felt real even if it was just a drill," recalled Syarifudin, CBAT member of Jintung village. *"CBAT and Red Cross Youth (RCY) were practicing emergency response activities, such as first aid and evacuation."*

Although coordination has been established, the construction progress of the multipurpose building was not free of constraints. In order to serve its multipurpose function, the building design was developed more and this development make the fund provided by Indonesian Red Cross insufficient. The school and the community work and cooperate together to raise more funds.



"I was so confused, but I didn't want to give up. I was confident that the building would be useful for the community, so I kept moving forward!" said Sujarwo with a vehement tone. *"Eventually, together with the village officials and the camat, we managed to obtain a no-interest-loan from a local businessman in Kebumen. I was so glad that our endeavour to construct the building worked out."*

As of February 2011, the 24 by 15 square meters building stands tall as a monument that the school has become a 'shelter' for the village community during disaster. Although Mr. Sujarwo is no longer the headmaster of SMPN 2 Ayah this year and has been transferred to another school, he still carries the pride for taking part in the struggle of the school and Jintung village community in constructing the safe and multipurpose building.

"Recently, I heard that the building has been used by the community for various activities until 2 am. It has even generated income from the rent payment," he said this happily.

Undeniably, SMPN 2 Ayah safe zone is a multipurpose disaster preparedness and risk reduction effort.

SOWING PREPAREDNESS, REAPING LIFESKILL

"Drop under the table; once it is safe, move out carefully and protect my head with my bag."

That was how Gatra described his response if an earthquake struck during his school time. Gatra is a member of PMR at junior high school Muhammadiyah 2 Yogyakarta who had just received training on disaster preparedness, as part of the PMR training curriculum. This PMR drill is conducted on a weekly basis involving volunteers of PMI in Yogyakarta municipality.

"We learned about family care, how to take care of sick people at home," said Aisyah, another member of PMR, when she talked about other materials in the PMR training. *"My favorite training material is first aid, because later on we can help ourselves as well as we can help others,"* Said Ria, other PMR member.

SMP Muhammadiyah 2 is one of the schools who had the initiative to partake in replicating Disaster Preparedness in School (*Sekolah Siaga Bencana/SSB*), a disaster preparedness program initiated at 6 schools by German Red Cross and PMI Kota Yogyakarta between 2008 and 2009. This program is carried out through the PMR extracurricular activities.

"I firstly received materials on disaster preparedness at school from a socialization conducted by PMI when I was escorting my students to a PMI jamboree two years ago," said Bu Ismiyati, a PMR coach at SMP Muhammadiyah 2.

Bu Ismiyati's endeavor to encourage disaster preparedness program at school was fully supported by the principal and the students. The disaster simulation drill has now become a permanent agenda at the school, and it is conducted regularly at the beginning of every semester. *"We do the simulation at the end of the (flag) ceremony at the beginning of the semester or sometimes in other occasions, like in class-meetings. We also give the students some theory on disaster preparedness both in the school auditorium and in the class. We also invite PMI to present the material,"* Bu Ismiyati explained.

This just a small beginning: PMR and Bu Ismiyati tirelessly sow the seeds of preparedness in the school aiming to eventually instill preparedness as a life skill among the students.

Ibu Ismiyati and PMR will be never tired to develop the disaster preparedness program in schools since the preparedness will eventually be an essential life skill.



INVESTING IN RED CROSS YOUTH FOR A RESILIENT FUTURE

Reroroja village in Sikka district is blessed with the view of vast blue sea in the north and green hills in the south, stretching as far as the eyes can see. However, behind its eye-pampering beauty lies an imminent risk of various disasters. Based on the village vulnerability and capacity assessment carried out by the community-based action team (CBAT), village official and volunteer corps (Korps Sukarela/KSR), Reroroja village is prone to fire, flood, earthquake, land abrasion, drought, tornado and tsunami.

The Indonesian Red Cross (PMI), in association with the Netherlands Red Cross, has carried out The Integrated Community Based Risk Reduction (ICBRR) program since 2009 in the village. Besides Reroroja village, Mapeganda sub-district, the program has also been carried out in Nangahale village, Talibura sub-district and Umauta village, Bola sub-district. The PMI's KSR and CBAT started up the program by raising the awareness of the community on various issues regarding climate change adaptation and disaster risk reduction. They also introduced this program in schools. They realize that schools, as integral part of the community, are also prone to disaster. The team performs disaster simulations and encourages the teachers and the school officials to be more involved in the disaster risk reduction program.

The CBAT commander in Reroroja, Bernard Kelan, believes that the children need to know what to do when disaster strikes, including identifying evacuation routes. He believes that the Red Cross Youth (*Palang Merah Remaja/PMR*) is one potential agent to disseminate disaster management skills and knowledge to their friends in school as well as to their family.

"At least (the training received through) PMR will enable them to help themselves and their friends apart from knowing how to manage the situation when disaster occurs," said Mrs. Agnetha Sika, a PMR trainer at Magelo'o elementary school in Reroroja village. She added that the children were very enthusiastic during the regular training, mostly because the training involved games and direct practice of what they have just learned.

In the disaster risk reduction session, the PMR members are trained to observe their school, to identify its vulnerabilities and strengths. They are also trained and to formulate their own response plan, for example marking the evacuation routes at their school and practice what they have planned out. In Reroroja, the trainings were mainly focussed on fire hazard and flood, two of which most often occurring disasters in the village.

Through their approach, the CBAT successfully encouraged the establishment of PMR at three of four elementary schools in Reroroja village. The KSR and PMR trainers, who are also the teachers who have received PMR trainer's training from PMI, held the responsibilities to conduct weekly training with assistance from the CBAT team.

The PMR at the Reroroja village elementary schools has now been established for two years, and its membership grows each year. The CBAT, PMR trainer and KSR hope that the PMR members will embody and continue to grow awareness of preparedness towards disasters. In the future, they could become the next PMI volunteers – one of PMI's strength in performing humanitarian actions in health and disaster preparedness.





Health

FROM ZERO TO HEROES



PMI never thought that a community-based first aid programme (CBFA), launched in Nias island on March 2007, would turn into a great success. *“At the beginning, there were no volunteers – so we had to start the programme completely from scratch,”* said Indonesian Red Cross Society (PMI) health officer Mariani Gulo, who worked with the International Federation of Red Cross and Red Crescent Societies to develop this community-based health and first aid (CBHFA) program.

Today, more than 800 community-based volunteers are teaching first aid in 39 villages across the island, reaching people in need in even the remotest area. It's a remarkable achievement for the PMI and the International Federation, considering the remoteness of the island.

Nias faced a number of challenges even before the December 2004 tsunami and the March 2005 earthquake, which killed around 800 and resulted in ten thousands homeless persons. Thousands of families in remote villages were having daily health problems because they were unable to reach the island's hospital or local medical centre. This situation led PMI and the International Federation to launch a community based first aid programme in several areas, to empower local people to respond to daily emergency where health professionals are unavailable. PMI and the International Federation began to recruit volunteers in Nias to start carrying out the program and to make sure this program

was sustainable. It started with five persons and increased into 35 persons. They were then trained to national standards and were given understanding on the nature of the voluntary work they would be doing.

Once the volunteers were trained, community leaders were invited to select new potential first-aiders from each of the 39 villages involved in this new programme. The volunteers sometimes needed nearly four hours to reach the settlements because of the remoteness of the area that were inaccessible even by motorcycle.

In order to be effective and efficient, PMI and the International Federation decided that all volunteers must stay for three days in a targeted area to deliver modules for village volunteers and to arrange activities in the community. This decision was highly appreciated by the villagers, considering that the volunteers have spent time and energy to reach their places.

Community based first aid volunteers must complete a minimum of 52 hours of training. Most villagers, who are farmers and local traders, found it difficult to meet with the obligation. Therefore, a new approach was developed to suit the community. First, the training module was split into six parts and was delivered gradually. Each module consists of specific topics such as vector diseases like malaria and dengue fever; diarrhoeal diseases caused by poor hygiene conditions; nutrition and first aid. These method, combined with disaster preparedness and disaster response topics, will encourage the formation of community based action teams and can be used effectively in emergency situations. The volunteers also received some information on PMI profile, its work, and on the International Red Cross and Red Crescent Movement's Fundamental Principles. *“The villagers and we synchronized the schedule.”* said dr. Eka Airlangga, the International Federation's health programme manager in Nias. This flexibility allowed some first aid topics to be taught during community church services. Dr. Airlangga added that the first aid trainers also made use important cultural events to carry out training, such as Maena (a community gathering with singing and dancing). Volunteers also organized a competition and delivered health messages in the form of songs, which were later adapted by village dancing and singing groups. The creativity in conveying health messages is important to invoke the community's interest and to ensure the information is easily understood in the social and cultural context.

The community are regularly involved in first aid trainings involving primary school students, teachers, and senior citizens in order to maintain the village volunteers' capacity.

The programme has achieved a great deal in the ten months since its launch. *“The good news is that the volunteers embraced the skills in accordance with the PMI standard – and in some cases even higher,”* said Dr. Jeyathesan Kulasingam, an International Federation health delegate with the Aceh tsunami operation.

The villagers are making use the most benefits out of this program. For example, when Nias was hit by a diarrhoea outbreak last summer, the villages supported by the community based first aid programme suffered less than others.

“In many cases, we can now save the money that we used to spend travelling to the city hospital,” said Faolozisokhi Zega, a volunteer coordinator from Lolo'ana'a lolomoyo village in Gunung Sitoli Utara sub district. He added that the most important thing is that villagers can now respond quickly and effectively if a family member or neighbour falls ill or has an accident.

DEBUNKING MYTHS, PREVENTING MALARIA

Sabang, Aceh, is one endemic area for malaria. Two coastal villages of Keunekai and Paya Pasir Putih in Sukajaya sub-district have been recording two malaria outbreaks since a long time ago. Their community's knowledge on its prevention and medication was unfortunately surrounded by misconception; whereas people's understanding and subsequent behaviour are keys to solving health problems. Responding to this issue, PMI (Indonesian Red Cross) and American Red Cross tried to encourage people to take real risk reduction measures by improving community health quality through the Community Based Health and First Aid program (CBHFA) which was implemented from 2007 to 2010.

PMI supported and facilitated the program to train some volunteers formed in this village. These 20 volunteers in each village played an important role in improving people's knowledge on health issues. The training will make them enable to provide service to their own community, such as first aid for injury treatment, malaria and diarrhoea prevention, and other important topics.

The village volunteers carried out two main activities in this program. The first was health education and promotion which involves the whole community. They discussed various topics on malaria and the health conditions of each village with some resource persons from government health office, Indonesian Red Cross and the village volunteers from the villages

The home visits, as the second activity, were conducted in a form of a direct and more intense counselling for the family. The face-to-face approach conducted by volunteers took an essential role to make this program successful. It enabled a more interactive environment to explore in more detail about the family's health issues. In this activity, each village volunteer was in charge for 20 to 25 households and conducted monthly home visits to convey information in phases.

This malaria control program surely had to face constrains. *"The elderly would often refuse to put up mosquito nets. They assumed that mosquito nets can cause asphyxiation, and prefer to burn mosquito coil even though it is not good for our health. They finally started to change their habit after our further explanation,"* said Yurmani, a volunteer of Keneukai village.

This program gradually result many good changes among the community. For example, people have a habit to use the normal water to reduce the fever. *"People used to use hot water compress when somebody has fever. We explained that normal water would be better to compress instead hot or cold water. When they asked why they should not use cold water, we explained that there will be extreme temperature difference between cold water and the body, and this should be avoided,"* Nurliani, volunteer of Keunekai village shared her experience.

The village volunteer coordinator in Paya Village had different unique experience regarding the home visit activity. *"Sometimes we had to answer some questions that we haven't mastered yet.*

"They would continue to remind us to answer until we give them the explanation," said Chaerani with a laugh. She realized that there were still a lot of misconceptions regarding the malaria symptoms among Paya villager, who are often contracted by malaria. *"Before, any fever would be presumed as malaria. They would immediately take malaria medication, whereas its side effect is hearing impairment." She and other village volunteers explained carefully that malaria can only be detected through blood testing. "Now they understand that not all fever is malaria, and that fever is only a symptom. Fever itself could be a symptom of many diseases. Thus they should first find out whether it is malaria or not through blood testing before consuming malaria medication."*



Changing people's understanding and behaviour was not as easy as flipping the palm, the same with changing the beliefs of Keneukai and Paya villagers about malaria and health issues in general. Such misconceptions can develop into a myth, and might turn into a disaster risk. However, the hard work of volunteers in 2 of 17 PMI partner villages proved that reducing risks by debunking myths is very much feasible.

THE ZEALOUS VILLAGE VOLUNTEERS

A campaign on Malaria mosquito net (A Malaria Hang-Up Campaign) initiated by the Indonesian Red Cross (Palang Merah Indonesia/PMI) had been conducted from August 2006 until February 2007 in Bangka Belitung. They had been distributing 16,662 insecticide treated mosquito nets for 8,337 families in 10 villages across 4 sub-districts. In order to ensure whether the program ran well or not, some trained village's volunteers go from one house to another to check whether the long-lasting insecticide treated mosquito net was properly installed and in good condition.

"In order to ease the data collection process, we put stickers on each house which has installed mosquito net," explains Nurmia (38 years old), one of the volunteers from Tanjung Binga village, Belitung district.

Nurmia is one of the volunteers, who has received extensive training on health promotion. Together with her fellow volunteers, they have pivotal roles in helping the villagers understand how to prevent malaria and the importance of using mosquito nets.

The volunteers shared malaria related information from door to door. They explained about malaria, its cause factors, its symptoms, its prevention, first aid care for malaria-suspected cases, and the importance of installing insecticide treated mosquito net inside the house in detail.

This malaria hang-up campaign was supported by the American Red Cross through the International Federation of Red Cross and Red Crescent Societies (IFRC) and had been implemented by PMI in 70 villages, seven districts/municipalities across three provinces namely Bangka Belitung, Bengkulu and Jambi. It started on December 2007 until March 2010. This campaign was actually a follow-up program of the mosquito net distribution program of February 2007, which was conducted simultaneously in malaria-endemic areas around Indonesia by the district health office.



The program applied community volunteers' empowerment approach in its implementation. PMI really concerned on volunteers' readiness and competency in implementing this program. A total of 89 PMI district/ municipality volunteers were chosen and received training for trainers. They were further deployed to 70 program target villages to train 587 community members.

The training in district level was expected to guide and mentor the village volunteers and 10 members of the village committee. "The volunteers will be the spearhead of the Malaria hang up campaign," explains H. Zakaria, the person in charge of the campaign program at PMI Bangka Belitung district office.

The volunteers were able to bridge the gap between the local community and the local health centre, since they were also the health crew of the local centre for health care. Therefore, they were the perfect agents to conduct this strategic approach since the health centre cadres as volunteers can ensure that the program fits with the local health needs. Various skills of village volunteers were seen as valuable learning inputs. PMI analyzed and identified those skills to be a better management pattern and to be a framework to determine appropriate training for the volunteers.

Regardless of PMI's management pattern, the volunteers' high commitment and motivation to help others were evident since the beginning of the program, and they were crucial factors to the success of the program. "We never promised them anything, it's their own drive that kept them involved until the campaign program was finished," said dr. Dewindra, health program manager of the American Red Cross in Indonesia.

Although they were only equipped with simple tools, but boosted by tremendous zealousness, the village's volunteers had done enormous efforts in preventing malaria disease and in improving the community's health.





BLOOD DONOR FRATERNITY TO SAVE LIVES

Tawangrejo village of Jatipurno sub-district in Wonogiri is one of the villages that implement the Community-Based Health and First Aid (CBHFA), a joint program between PMI (Indonesian Red Cross) and American Red Cross. This program gives many benefits to the community of Tawangrejo village and one of the benefits was the experience of blood donation activities.

Slamet Riyadi, one of the village volunteers in Tawangrejo who has been trained about blood donation, is often asked to be a resource person in various socialization activities. He discovered that a lot of people who would like to donate blood hesitated to do so because of the falsehood related to blood donations. *"I explained the benefit of blood donation for the donors themselves, and especially for the recipients. Some people were actually enthusiastic to donate, but they didn't know how and what the requirements are. Therefore, I explained in detail about who is qualified and who is not, how to donate and what the requirements are."*

The people of Tawangrejo were no longer afraid to donate blood due to the intensive persuasion of the village volunteers, PMI and the village health workers. They even established a fraternity (*paguyuban*) of blood donors which they named *Gumregah* in June 2011. The purpose of this fraternity was to coordinate people and to encourage collective blood donation at least once every three months. The initiative of Tawangrejo

village was followed by two other villages in Jatipurno sub-district. In Jatipurwo village, a donors' fraternity has been established and named *Paguyuban Bakti Ludiro Husada*, while the fraternity in Slogoretno village is named *Paguyuban Retno Ludiro*. The community can discuss, share, and communicate with village volunteers and consult with the doctor from PMI's blood transfusion unit about health issues in their neighbourhood during the gathering.

PMI Wonogiri district perceived the large potential for donors in the villages, but it has not been maximized yet. Therefore, a big plan to manage a blood donation village was scheduled, together with the people of Wonogiri and related agencies. This plan targeted 25 villages in the whole district of Wonogiri.

The secretary of PMI Wonogiri, Annajib Thohari, plans to have at least one blood donation village in each sub-district. He hopes this will ease PMI's blood transfusion unit's effort to rally donors by simply visiting the donors' spots in scheduled villages. *"If the blood donor fraternity is organized, the blood transfusion unit's work will be easier, because all they need to do is just visit the scheduled villages,"* he said.

This is a positive effort of the fraternity to obtain drops of blood to save lives.



WHEN THE FRESHNESS OF WATER WASHES AWAY THE SWEAT OF A LONG STRUGGLE

The people of Bandaran and Pandean sub-village of Jarangan village in Pasuruan East Java were facing a dead end in terms of obtaining fresh water. The PDAM (the regional drinking water company) in this area was not able to reach this coastal village and the water wells that 3% of people have tend to contain turbid, brackish, and pungent water. They had no choice but to accept their predicament; leading to long tiring walk carrying jerry cans of water back and forth to supply their daily needs.

“We have to buy water for drinking and cooking from another village which has PDAM water four kilometres away from here. It would cost three thousand rupiah for two jerry cans and the water was able to be used for five people in two days. Meanwhile, water for bathing and washing were taken from absorption wells in the rice field. *“I had to ride a bike to get there, and I was only able to carry two jerry cans at a time. I had to go back and forth ten times to fill the tub in my bathroom,”* said Kholifah, a mother from Bandaran sub-village.

Some people who could not afford to buy fresh water were those who suffered the most by the difficult access to fresh water. The same condition happens when the absorption well in the rice field desiccates during the dry season and this condition forces the people to go to Rejoso River. Rejoso River, which flows through those two villages becomes the main water source for their daily needs despite of its poor water quality, especially after being contaminated by industrial waste.

“Some people are forced to use water from Rejoso River for various necessities. *It's not only for bathing, washing and defecating, but also for cooking and drinking,”* Anisa, a young woman, expressed her concern about the unhealthy habit of the people in her hamlet.

A private company near the village tried to provide a solution by installing three water containers. However, the community still lived in a poor health and sanitation condition because they still use the water from the river without any further process.

This condition did not make the community support the solution program. When the Community-Based Health and First Aid program (CBHFA) and the water and sanitation program tried to explore the issues to provide a better solution, the community was sceptical. *“The community did not want to understand that this program needed process. They kept asking the result but did not want to join the process.”* said M. Bisri, one of the village volunteers who was involved in the community-based approach by the Indonesian Red Cross and Netherlands Red Cross.

The CBHFA and water and sanitation program started in 2007, and was funded by Akzo Nobel. The program has combined clean water facilities, good sanitation and health facilities by improving community awareness of healthy life. A good coordination between the community, the village government and PDAM eventually led to the success of clean water supply in this village. The community was no longer being sceptical, but was enthusiastic when pipes for water installation came.

The water installation was completed on May 2010 and was able to flow clean water to houses. Kholifah was enthusiastic since she could get access to clean water without having to walk the distance. *“I was once afraid to break the faucet, since the water flowed rapidly and it was clean! I do what I want to do with this clean water like taking a shower or washing all my clothes.”* Her happiness on getting the clean water remains until now.

People in Bandaran and Pandean villages managed the use of water using water-meter. For example, Kholifah shared the monthly expense on water with three households near her house. Some diseases caused by unclean water such as skin rash, sore eyes due to brackish water and diarrhoea also disappeared.

The community also started to apply healthy habit, along with the clean water provision. For example, they now use community latrine instead of bathing and excreting in the river.

The long struggle of Jarangan villagers to obtain fresh water has finally ended. They have the access to get clean water. Anisa said that the clean water supply has changed the community's looks at some points. *"After one year of consuming clean water, the people's skins look fresh now, since they no longer bathe with brown or salty water. I myself feel that my skin colour is turning alive."* Her statements made people laugh. The community could not agree more with Anisa's statement. Clean water and healthy behaviour have improved their quality of life.





PEER EDUCATORS SPEARHEAD HIV/AIDS PREVENTION AMONG TEENS

'If HIV/AIDS turns out to be a teen problem, how come teenagers are not aware?'

This question was raised by Noviyanti three years ago, after a teen peer educator training held by Indonesian Red Cross (Palang Merah Indonesia/PMI), East Jakarta branch. The two facts of high prevalence level of HIV/AIDS transmission among teenagers and considerable amount of intravenous drug users shocked her. Especially because her peer group is not at all free from intravenous drug use. *"One of my good friends just died because of overdose,"* she recalled sadly.

Joining as a peer educator was not only to spend a leisure time, but this seemed to be an obvious choice for her. Her duty is to inform people around him about HIV/AIDS in Rawa Bunga, Prumpung. However, she often provides counseling outside the assigned area. In every possible opportunity, she brings up information about HIV/AIDS in casual discussions with her friends.

She feels that her function is fairly similar to a psychiatrist. Her friends would consult and trust her completely that she will keep their problems in confidence. Her friends often ask her about whether sexual intercourses with a drug user will expose one to HIV, or whether abortion poses a risk to diseases. Various sensitive problems among teenagers living in big cities are openly discussed. As a peer educator, Noviyanti tries her best to answer without prejudice. *"I try to explain the effect to their health, but I don't steer them to act upon certain behaviour."*

The same approach is used by Remon, who lives in Pulo Gebang, the area that is also assigned for him. That area has high risks of sex intercourse before marriage and the use of intravenous drug among its teenagers. he always tries to raise the discussion everytime he hangs out with his friends. This way is more effective since teenagers tend to avoid or ignore a scheduled meeting.

A better understanding on HIV/AIDS between his peers does not automatically prompt them to stop the behaviour. However, they are more aware of the use of condom as a preventive measure and care more about reproductive health.

"I'm glad that they listen to me and open up when they feel they may have contracted a sexually transmitted disease, so that I can refer them to a place where they can get affordable treatment." Remon observes that the behavior among teenagers undergo changes. Those teenagers help their friends who are experiencing similar symptoms.

PMI branch in East Jakarta and Local governments, especially the areas that have high risks on the issue, decide to recruit and train 66 more teen peer educators. The training was conducted in three batches, with 22 teenagers in each batch. The peer educators are expected to become 'mentors' and disseminators of information on HIV/AIDS, reproductive health and other important teenage related issues in their assigned areas. With the support from the Netherlands Red Cross, this program started in 2006 covering 60 villages across ten districts in East Jakarta and was concluded in 2010.

Although this programme has ended, the peer educator's enthusiasm to increase understanding and awareness of their peers has not faded away. *"Being a peer educator is so much more rewarding than being anything else, especially when they listen to us and follow our input and advice."* Other peer educators nod in agreement to Remon's admission.

They believe that peer education is an effective approach, because most teenagers are often more open to their peers. This is what drives the real effort of preventing HIV/AIDS transmission among teenagers - with peer educators as the spearheads/the driving forces.





GREETING LISTENERS, INTRODUCING HIV/AIDS THROUGH RADIO

PMI's hotline service is part of the HIV/AIDS prevention and response programme supported by the Netherlands Red Cross which started in 2003 in West Kalimantan. Several PMI branches implementing this programme are PMI Pontianak Municipality, PMI Sambas District, and PMI Sanggau District.

In 2005, a similar programme was launched with the support of the United Nations Population Fund (UNFPA). This programme targets high risk groups in penitentiaries and correctional facilities. The programme is implemented not only by the experienced PMI Pontianak Municipality, but also by several other branches such as PMI Singkawang Municipality and PMI Sambas District.

When it was first launched in 2005, the hotline service was not very popular and did not receive many calls. Only after it was introduced through a radio talk show, which started to air in January 2007, PMI's service started to attract many listeners. It has become one of PMI's noteworthy services other than blood donation which was already well-known in West Kalimantan.

The use of radio talk show is an excellent choice to raise community awareness. In cooperation with 'Primadona FM', which is the most popular radio station in West Kalimantan, PMI's hotline service was introduced through a one-hour talk show titled *Konselor Menyapa* (literally: greetings from the counsellor), airing from 8 a.m. to 9 a.m. in the morning. The talk show was part of the *Zodiak* program which airs every Sunday from 7 a.m. to 11 a.m.

Fully managed by PMI West Kalimantan, the talk show was implemented by volunteers of the PMI Pontianak Municipality branch. The program was designed with a fresh approach and targeting youth audiences. Every person, who called in or sends a text message with a question about HIV/AIDS and reproductive health, would receive a reading of his/her horoscope for the day.

The talk show was successful in promoting PMI's hotline service, especially to the youth audiences. No less than 10 callers and dozens of text messages were received during the one-hour on-air session. This success is with no doubt attributed to the right timing of the talk show, which is every Sunday, and to the creative approach of inserting it into the popular horoscope reading program.

The success of the talk show in promoting PMI's HIV/AIDS hotline service brings positive influence to the HIV/AIDS program. With the hotline service well-known by the community, PMI was motivated to give its best service to the community. PMI would refer those who need further consultation to its partners from the National AIDS Commission (Komisi Penanggulangan HIV/AIDS or KPA). These partners are institutions who have the capacities to further handle the client's specific issues, such as HIV Test, Care, Support and Treatment/CST, and face-to-face meeting.

This hotline service became PMI Pontianak Municipality's regular activity for two years. Unfortunately the program had to come to an end due to financial restrictions which led to lack of equipment maintenance and regeneration of hotline service and talk show personnel.

"Although the hotline service no longer operates and the project support from NLRC has ceased since 2007, PMI's HIV/AIDS prevention program in West Kalimantan has not ended." Asep Mulyadi, Staff of PMI West Kalimantan Provincial Office, explained.

Furthermore, Asep added that before the Netherland Red Cross-supported project ended, PMI West Kalimantan had already prepared an exit strategy, among others by joining the KPA at the provincial and district level. Through active participation and networking with other members of KPA, PMI will retain its chance to continue its contribution in the prevention of HIV/AIDS.

SPREADING HEALTHY LIFESTYLE, PREVENTING AVIAN FLU

"I have moved the chicken cage to be exposed by the sun and always remember to clean it regularly as suggested by my village volunteer friends," says Deden Romli, who has been raising chickens in his backyard for 15 years. When the avian flu mitigation program reached his neighbourhood in Pangauban village, West Bandung district, he was "infected" with a healthy lifestyle from the village volunteers in order to prevent bird flu.

Bu Pipi, a village volunteer in Pangauban village explained that encouraging people to lead a healthy lifestyle is not an easy task. *"We cannot change the community's long-standing understanding overnight. For example, the people still have some habits to consume raw eggs and the people still have this concept that avian flu is no different from tetelo (Newcastle disease)."*

Despite of the difficulties, all 30 village volunteers in Pangauban village tried to correct the misconception creatively and intensively. Within three months, various public outreach sessions were conducted collectively and individually. The materials provided include how to lead a clean and healthy lifestyle. Materials on handling, consuming poultry, and proper construction and care of the cage were emphasized. *"We directly ask the community what they need, for example how to alter the chicken cages, what materials are needed and we also directly assist them in making the cages. Thus, we must possess the skills to build cages,"* says Komalasari, another volunteer. The volunteers have to ensure that the cages fulfil the health standard. Two conditions of a healthy cage are: first, they should be located at a minimum of 10 metres from the owner's house facing the sunlight. Second, together with the animal husbandry office, they should carry out regular spraying of the cages.

Apart from that, the volunteers also trained the community on how to raise the poultry properly, starting from feeding, maintaining their cages, and vaccinating the poultry regularly. Poultry vaccination was quite a challenging process because most the volunteers are women. They often feel awkward and scared, in spite of having been trained beforehand.

However, the solid team quickly overcame their awkwardness by persuading the villagers in 12 community units or RW to spare some time to have their poultry vaccinated. *"Sometimes we have to run around chasing the chicken because the owner forgot to lock them*

inside their cages although we have scheduled the vaccination. But it doesn't matter, as long as they are free from bird flu," says Bu Pipi with laughter, recalling the funny experience.

In reference to the fact that the West Java province had the highest rate of bird flu case in Indonesia in 2009, the Indonesian Red Cross (PMI) felt the need to respond to the situation with real actions. With funding from USAID and active participation of the community, PMI implemented the Community-Based Avian Influenza Control (CBAIC) program from January 2009 to April 2010. The program implementation focused on five districts/municipalities, namely Bandung Barat, Bandung Barat, and Tasikmalaya district, as well as Cimahi and Bogor municipalities. It covered 18 sub-districts, 54 villages and 5 traditional markets and involved 1,331 trained volunteers divided in 51 teams.

For the Pangauban villagers in particular, the program has increased their knowledge on avian flu prevention. They now understand that prevention starts from living a healthy life, proper care for poultry and proper consumption of poultry and eggs.

Bu Yayah R, wife of the head of village says the villagers' behaviours have significantly improved. *"The villagers will no longer consume a sick chicken, regardless what causes the sickness. They used think it's alright to consume chicken infected by Tetelo disease. Moreover, the ladies know that they have to throw away the water used to boil the chicken. Usually they would use it to boil vegetables."*

The village volunteers are quite satisfied with the positive result of their hard work. Although the program has ended, the villagers still practice a healthy lifestyle consistently. Spreading a healthy lifestyle turned out to be the key to prevent this communicable disease.



VOLUNTEERS' CONSISTENCY IN FIGHTING INDIVIDUALISM

Living in a metropolitan city, the Jakartans certainly have distinct characteristics from the people in suburban area. Only few people who are willing to participate voluntarily in an environment care activity. This statement was uttered by Muhartini, the head of the neighbourhood association (RT) 05, East Pejaten village, Pasar Minggu sub-district, South Jakarta district.

"The residents are very reluctant to participate in cleaning their neighbourhood. One time they were asked to participate in the Community-Based Health and First Aid (CBHFA) program activities, and they always say that they clean it up themselves regularly anyway," explained Martini.

Amsir Supriadi, a volunteer and resident of neighbourhood association (Rukun Tetangga/RT) 14, added, *"The residents care about nothing else other than to make a living. They always expect something in return to clean the neighbourhood, even though they know the benefits of maintaining a clean environment."*

Murhatini didn't give up easily in facing this discouraging situation. She made herself a role model for others in preserving the environment, and made herself available whenever her residents complained about health issues. She emphasized the importance of living a healthy life among the residents. For example, one of the residents once contracted dengue fever, she then warned others to stay alert. The residents finally voluntarily cleaned their neighbourhood in order to prevent the breeding of mosquitoes and further spreading of the disease.

Similarly, Amir Supriadi tirelessly encouraged his fellow neighbours to lead a clean and healthy life. He also notices when the residents litter. *"Once, there was a tenant nearby who just disposed of his garbage everywhere. I took the garbage bag and put it back in front of his house. I did it over and over again until he realized that he must take it to the waste disposal facility nearby the traditional market,"* he recalled.

Like other densely populated neighbourhood in the Jakarta capital, East Pejaten village is surrounded by poor sanitation, inadequate public latrines, insufficient garbage disposal centre, clogged sewage, and river sedimentation. The situation is worsened by the difficulties of mobilizing residents to participate in making changes for the betterment of their own neighbourhood. However, there is a small hope from consistent people like Muhartini and Supriadi along with a few other active members of the village volunteers. They fight against the individualism of the urban people and prove to others that they too can care about the environment.



Glossary

| | |
|-----------------|---|
| ATLS | : Advanced Trauma Life Support |
| BPBD | : Regional Disaster Management Agency (in Bahasa Indonesia) |
| CBAIC | : Community Based Avian Influenza Control |
| CBAT | : Community Based Action Team |
| CBDP | : Community Based Disaster Preparedness |
| CBFA | : Community Based First Aid |
| CBHFA | : Community Based Health and First Aid |
| CST | : Care, Support and Treatment |
| DIPECHO | : Disaster Preparedness Programme-the European Commission's Humanitarian Aid Department |
| ELS | : Emergency Life Support |
| GI-TEWS | : German Indonesia Tsunami Early Warning System |
| HFA | : Hyogo Framework for Action |
| HIV/AIDS | : Human Immunodeficiency Virus/ Acquired Immune Deficiency Syndrome |
| ICRC | : International Committee of the Red Cross |
| ICBRR | : Integrated Community Based Risk Reduction |
| IFRC | : International Federation of Red Cross and Red Crescent Societies |
| KPA | : National AIDS Commission |
| KSR | : Volunteer Corps (in Bahasa Indonesia) |
| MDG | : Millenium Development Goals |
| MFR | : Medical First Responder |

| | |
|------------------|---|
| PAH | : Rain Water Catchment (in Bahasa Indonesia) |
| ORARI | : Amateur Radio Organization of Indonesia (in Bahasa Indonesia) |
| PDAM | : National Water Company (in Bahasa Indonesia) |
| PMI | : Indonesian Red Cross (in Bahasa Indonesia) |
| PMR | : Youth Red Cross (in Bahasa Indonesia) |
| Posko | : Command Post |
| PSP | : Psycho-social Support Programme |
| Pusdalops | : Emergency Operation Center (in Bahasa Indonesia) |
| RFL | : Restoring Family Links |
| RCM | : Red Cross Message |
| Satgana | : Disaster Response Team (in Bahasa Indonesia) |
| SOP | : Standard Operating Procedure |
| SSB | : Disaster Preparedness in School Programme |
| TR | : Tracing Request |
| UNFPA | : The United Nations Population Fund |
| USAID | : United States Agency for International Development |
| YES 118 | : Yogyakarta Emergency Service 118 |

7 FUNDAMENTAL PRINCIPLES

1. HUMANITY

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

2. IMPARTIALITY

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

3. NEUTRALITY

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

4. INDEPENDENCE

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

5. VOLUNTARY SERVICE

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

6. UNITY

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

7. UNIVERSALITY

The International Red Cross and Red Crescent Movement, in which all societies have equal status and share equal responsibilities and duties in helping each other, is worldwide.

