

# Central Sulawesi Earthquake & Tsunami

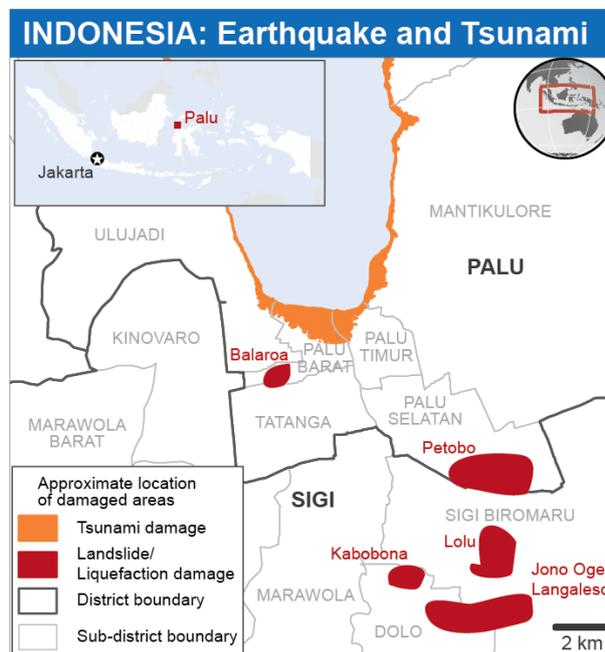
## Humanitarian Country Team Situation Report

(as of 16 October 2018)

This report is produced and issued by the Humanitarian Country Team in Indonesia. It covers the period from 12 to 16 October. The next report will be issued on or around 19 October.

## Highlights

- Following the earthquake and tsunami on 28 September, and resulting liquefaction and landslides, 2,096 people are known to have died, 10,679 people have been injured, as of 16 October.
- Search and rescue operations were stopped on 12 October. According to Indonesia's national disaster management agency (BNPB), at least 680 people are still missing.
- Around 79,000 people are internally displaced. At least 15,000 houses have been destroyed, with no prospect of return.
- The government-led response is underway, with NGOs, the Red Cross and the UN supporting efforts in line with Government priorities.
- The emergency response period has been extended by the Government for a further two weeks until 26 October.
- The HCT's Response Plan, requesting US\$ 50.5 million to provide assistance to 191,000 people, is funded at 23 per cent.
- The United Nations' Central Emergency Response Fund (CERF) has committed US\$ 15 million to the response.



**2,096**

People dead (BNPB)

**680**

People missing (BNPB)

**79,000**

Internally displaced (BNPB)

**11,000**

People injured (BNPB)

**68,000**

Houses damaged (BNPB)

**191,000**

Targeted by HCT Response Plan

## Situation Overview

On 28 September, a series of strong earthquakes struck Indonesia's Central Sulawesi province, the strongest a 7.4M earthquake only 10 km deep and with its epicentre close to the provincial capital, Palu. The earthquake triggered a tsunami striking beaches in Palu and Donggala. The earthquakes, tsunami and resulting liquefaction and landslides caused significant damage and loss of life.

As of 16 October, 2,096 people are known to have died. A further 10,679 people have been seriously injured. Search, rescue and retrieval efforts have been undertaken by more than 10,000 people from affected communities, Indonesian Red Cross (PMI), the National Search and Rescue Agency (BASARNAS), Indonesian National Armed Forces (TNI) and local government agencies. Search and rescue operations were stopped on 12 October. According to figures released by Indonesia's National Disaster Management Agency (BNPB), at least 680 people are still missing.

Areas affected by the earthquake, tsunami, landslides and liquefaction suffered extensive damage of buildings and infrastructure. An estimated 15,000 houses and land have been totally devastated with no perspective of return. An estimated 17,000 houses are heavily destroyed but the sites may allow for reconstruction. Around 35,000 families whose houses have been severely damaged are in need of emergency shelter support for a shorter term. The first damage assessment was based on satellite imagery, and more recent assessment data suggest that the initial figures may be higher. In view of persisting urgent needs, the Governor of Sulawesi, on 11 October, extended the emergency response period for two weeks until 26 October.

More than two weeks after the earthquake, most services in Palu are slowly resuming. Electricity and telecommunications have been re-established across much of the area. Roads are mostly functional, and access to outlying areas has improved. Many roads however are still covered by debris from landslides causing traffic congestion. Shops and markets are opening again but remain crowded. Hospitals are increasingly operational, and psychosocial support services are being conducted in 22 locations. Twenty-five public kitchens have been established, and emergency school units are opening.

While Palu begins the process of recovering from this traumatic series of events and the humanitarian response is well underway, many needs remain. Priorities include logistics and economic recovery, medical assistance, clean water, sanitation and hygiene, recovery of infrastructure and public services, shelter, protection, including child protection and gender-based violence, and education. Debris and damaged structures need to be removed to reduce risk of further damage and accidents.

An estimated 79,000 people are displaced from their homes. Around two thirds are displaced near their homes, and one third is staying with host families, on IDP sites in other villages, or have been evacuated. Many IDP sites remain informal and are overcrowded, with limited access to latrines and water and insufficient lightning, causing protection concerns. Sanitary conditions have significantly deteriorated since the disaster increasing risks of communicable diseases.

The response is led by the Government of Indonesia, with strong support from national NGOs, including 13 members of Humanitarian Forum Indonesia. The international community supports the government's efforts and leadership, and NGOs the Red Cross and the UN are on the ground augmenting the national response. The Indonesian National Board for Disaster Management (BNPB) has received international assistance from 15 countries, transported by air from Balikpapan to Palu, including generators, mobile power plants, heavy equipment trucks, medical equipment, aircraft spare parts, clean water equipment, sanitary equipment, public kitchens, family tents, food, and blankets.

## Funding

The HCT's Central Sulawesi Earthquake Response Plan requests US\$ 50.5 million for immediate relief activities following the earthquake and tsunami, outlining the support that the international humanitarian community is seeking to provide to affected people over three months. The Response Plan was developed in consultation with Government of Indonesia counterparts, and articulates how the humanitarian community working in the country will provide targeted, technical assistance and relief items in support of the Government-led response.

The Response Plan is not intended to meet the totality of needs following the disaster; the Government is well placed to lead the response and will continue to provide the bulk of humanitarian assistance. It reflects the specific areas where the Government of Indonesia has accepted offers of international assistance, or where agencies are scaling up existing programmes to meet the new humanitarian needs following this recent disaster.

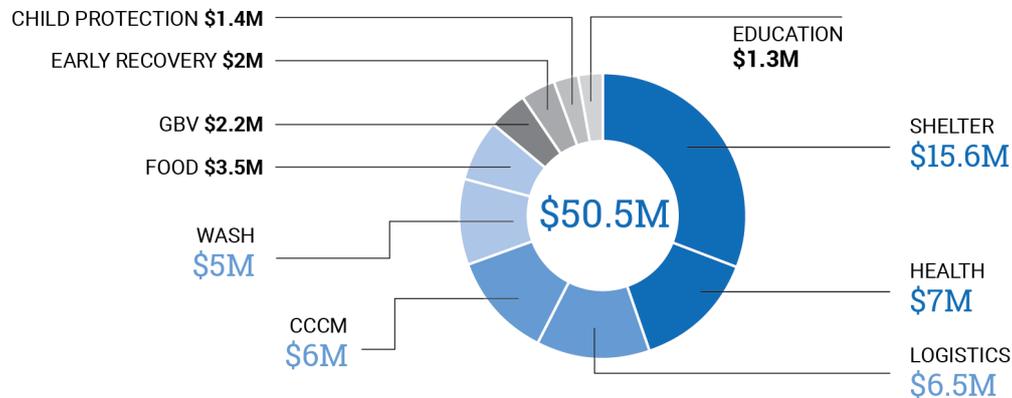
The United Nations' Central Emergency Response Fund (CERF) has committed \$15 million in funding to kickstart HCT support for the response. Several UN agencies have also mobilized internal funding to support the initial phase of the response, this includes, \$4 million mobilized by UNICEF; \$1.5 million by WFP; \$1 million by UNHCR; \$650,000 by UNDP; \$200,000 each by FAO and IOM; and \$100,000 by UNFPA. In addition, the Red Cross also mobilized CHF 1.25 million. Additionally, UN agencies and NGOs have launched funding appeals, including a UNICEF appeal for \$5 million and an appeal for CHF 22 million for IFRC.

Since the disaster, a number of Member States have made bilateral pledges or contributions, including UK (GBP 3m), ECHO (EUR 1.5m), Australia (AUS \$10.25m), NZ (NZ\$ 1.6 m), ROK (US\$ 1m), Italy (EUR 200,000), USA (US\$ 3.7m), Singapore (US\$ 100,000), Canada (CAD\$ 1.5m), Switzerland (CHF2.5m), Norway (NOK 24m) and

Thailand (\$155,000), for a total, to date, of \$30.3 million in financial and in-kind assistance according to BNPB and media reports.

On 12 October, the World Bank announced an initial grant of USD 5 million to help kick start reconstruction programming. The Bank's rapid assessment estimated the damages at approximately USD500 million.

### Breakdown of funding requested in the Response Plan by cluster



All humanitarian partners, including donors and recipient agencies, are encouraged to inform OCHA's Financial Tracking Service (FTS - <http://fts.unocha.org>) of cash and in-kind contributions by e-mailing: [fts@un.org](mailto:fts@un.org)

## Humanitarian Response

### DISPLACEMENT AND PROTECTION



#### Shelter sub-cluster

##### Needs:

- An estimated 15,000 families need immediate emergency shelter and household items as well as longer term relocation and reconstruction support.
- An estimated 17,000 families need immediate emergency shelter and household items as well as longer term recovery and reconstruction support.
- A further 35,000 families are estimated to need emergency shelter and basic household items.
- Shelter recovery support will mainly depend on the geographic location and livelihoods of the affected population, with different needs in coastal areas, lowlands, city and hills. Depending on these categories people will need direct reconstruction support, technical and materials assistance, temporary shelter arrangements and rental support, or other cash-based assistance.
- IOM has started rolling out the Displacement Tracking Matrix (DTM). First damage data from the field (Sigi district) suggest that the initial figures based on satellite imagery may be low.

**67,000**

People need some form of shelter assistance

##### Response:

- Distributions are ongoing and picking up pace. Some 4,577 families in 39 villages have been supported with emergency shelter tents or kits.
- The first shelter strategy being revised and updated based on new information.
- The Ministry of Public Works announced the construction of barracks (steel frame with asbestos cladding) as temporary shelter for displaced populations.

#### Gaps and constraints:

- Issues regarding reception of relief items have been resolved. PMI has been appointed to be the recipient of all relief goods to hand over to respective agencies.



### Camp Coordination and Camp Management sub-cluster

#### Needs:

- An estimated 15,000 households have been most severely affected and lost their homes and all possessions. This population will most likely be required to relocate to camps until such time it is safe to return, and reconstruction efforts are underway.

#### Response:

- IOM is in direct consultation with government counterparts in the field to help realize both short term and longer terms solutions for these communities.
- The Displacement Tracking Matrix has been launched in collaboration with the Ministry of Social Affairs and its sub-national counter-parts. The DTM process will be supported by 300 volunteers from the Tadulako University in Palu. The first round of the DTM started on 14 October with the final report to be completed by 19 October.
- CCCM partners are supporting the National Cluster for Protection and Displacement, led by the Ministry of Social Affairs.
- CCCM partners are providing assistance packages to 1,700 of the most severely affected households, including 900 family tents as well as household and emergency shelter kits.



### Water, Sanitation and Hygiene sub-cluster

#### Needs:

- An estimated 152,000 people are in need of WASH support.
- The earthquake has damaged the urban water pipe system in Palu served by PDAM Donggala and PDAM Palu utilities.
- BPBD Donggala is requesting for WASH services, especially toilet construction and water supply, for three centralized shelters in Loli Saluran, Loli Oge, Donggala City for a projected number of 1,500 IDPs.
- Medical waste management is poor in some of the hospitals. An estimated of 46 health centres in Palu, Donggala and Sigi do not have a proper medical waste management in place.
- Water production in Kawatuna, used as source for water trucking services, is found to contain coliform bacteria. Poor water quality being distributed risks impacting up to 150,000 people.
- The Ministry of Health surveillance team found an increasing trend of diarrhea cases across Palu, Donggala and Sigi District.

**152,000**

People need WASH assistance

#### Response:

- WHO and UNICEF are coordinating with PDAM Donggala to determine the next sampling point where the surveillance team of Ministry of Health found many cases of diarrhea, such as sub-district Sirenja. The Ministry of Public Works and Housing provides rehabilitation support.
- Badan Geologi Nasional (National Geological Agency) will support PDAM Donggala to revitalize three boreholes to restore water production capacity.

- Support from UNICEF and RedR facilitates the improvement of water trucking services. Currently, there are 6 trucking providers in Central Sulawesi: Ministry of Public Work and Housing (16), Palang Merah Indonesia (22), CWS (4), Asian Muslim Charity Fund (1), Sampoerna Rescue (1), PT. Astra (2), PKPU (4). The discussion with providers is ongoing to agree on service zones for water trucking distribution.
- Yayasan Sayangi Tunas Cilik is supporting PDAM Donggala to improve water trucking services by providing nine staffs in three water production sites.
- UNICEF, WHO, PDAM Donggala, Palu Health Polytechnic, Ministry of Health, and the Provincial Health Office have conducted water quality assessments in 27 sites, including water production sites for water trucking, several public hydrants, and bore-wells. Poltekes provided water sample laboratory testing for microbiology and chemical parameters. 17 water quality samples taken by Poltekes are already completed.
- New water treatment plants are being established: two units by the Danish Emergency Management Agency with a total capacity of 60,000 litres per day and one by the Indonesian Red Cross with capacity of 100,000 litres per day.
- The third WASH Cluster meeting in Palu was held on 13 October, chaired by the Ministry of Public Works and Housing.

#### Gaps and constraints:

- Water trucking services require further streamlining to meet the needs of an estimated 70,000 affected people who currently do not have timely access to water supplies.
- Key messages and communication materials on hygiene promotion need to be developed and endorsed by the Ministry of Health at national level to ensure consistent messaging.
- Supplies to Palu are delayed pending clearance.



#### Child Protection sub-cluster

##### Needs:

- An estimated 460,000 children are affected in four districts.

**460,000**

children affected in  
four districts

##### Response:

- On 11 October, MOSA issued a decree on prevention and responding to separation of children affected by the disaster in Central Sulawesi in line with the Inter-agency Guidelines on Unaccompanied and Separated Children.
- With support from UNICEF, MOSA has deployed 20 staff and social workers to support coordination on child protection, initiate registration and family tracing and reunification (FTR) of separated children and facilitate psychosocial activities.
- Joint Secretariats for Child Protection, to serve as coordination points, were established in Palu on 3 October, and in Makassar on 7 October, led by MOSA/Central Sulawesi Provincial Department of Social Affairs with technical support from UNICEF and Yayasan Sayangi Tunas Cilik. The Joint Secretariat in Palu also serves as a child friendly space and a venue to register family tracing and reunifications. Makassar monitors the situation of children and families from Central Sulawesi in sites in Makassar, including Asrama Haji.
- An additional six posts have been established for registration of unaccompanied and separated children. Social media messages on reporting unaccompanied and separated children are being circulated. As of 14 October, the Joint Secretariat had registered 78 cases. Four cases have successfully been reunified. A case management app (Primer) is now in use, and paper-based family tracing and reunification forms are moved to Primer.
- Joint training on child protection for social workers, volunteers and NGO staff has been conducted in Palu (26 participants) and Makassar (30 participants), with a focus on family tracing and reunification,
- Partners have initiated child friendly spaces/psychosocial support/child protection activities including family tracing and reunification in more than 60 sites, reaching more than 4,000 children.



## Protection of Women's Rights sub-cluster

### Needs:

- Of the 1.4 million people affected in Palu City, Donggala, Sigi District and Parigi Moutong District, more than 350,000 are women of reproductive age at increased risk of sexual and gender-based violence (GBV).
- People are traumatized and need psychosocial support. Local women's NGOs are conducting community based psychosocial support, which can be developed and expanded to provide access to counseling and referral for those in need.
- GBV prevention needs to be mainstreamed across clusters; women have reported feeling unsafe when gathering firewood and using the limited toilet facilities which lack locks and lighting.
- Women need access to information of available services; a mapping of functioning community-based services and programmes on women's protection and GBV is underway.
- Strengthening the referral system on GBV, including a multi-sectoral response, providing safe, accessible, confidential, survivor-centred services to address GBV, provide case management, psychosocial support, and referral services.

**350,000**

women of reproductive age at increased risk of GBV

### Response:

- Three Women Friendly Spaces (WFS), established by the sub-cluster, are functioning in Petobo, Vatulemo and Mesjid Agung (Palu City), offering psychosocial support, information on available services and referral mechanisms for affected women and girls. Assessment of sites in Sigi and Donggala Districts is ongoing.
- Coordination with the WASH sub-cluster is ongoing to ensure adequate sanitation facilities nearby the tents.
- 31 children and 14 women accessed services in Vatulemo WFS, including psychosocial support supported by Yayasan Pulih and PKBI Central Sulawesi.
- Four women and children received psychosocial support in Mesjid Agung WFS, supported by Yayasan Pulih.
- Conducting 4W data collection and making 4W maps; developing and training of KoboCollect applications for data collection by the Protection of Women's Rights sub-cluster.
- Strengthening existing mechanisms and standardizing tools and training materials for psychosocial support.
- A learning session on the Gender marker was facilitated by UNWOMEN with 40 participants.
- Coordination meetings were held at National and Provincial levels.

### Gaps and constraints:

- Collecting information and data related to GBV from the field remains a key challenge.
- Protection issues: most of IDP camps don't have appropriate toilets, clean water sources, and no camp coordinator.



## Economy

### Needs:

- Gaps in data on damage and loss related to food security and livelihood remain significant, as information so far focuses more on infrastructure.

As per a preliminary assessment by the Ministry of Agriculture (MOA), a total of 9,709 Ha of agricultural land was damaged with 1,653 ha in Donggala, 7,900 ha in Sigi and 156 ha in Palu.

**9,700**

Ha of agricultural land damaged

- An analysis by BAZNAS (Badan Amil Zakat Nasional) using the Damage and Loss Assessment (DaLA) methodology estimates the highest damage to horticulture in Palu Municipality (40%) and Donggala (38%), and to livestock in Palu Municipality (38%) and Donggala (23%).
- Cash-based assistance needs to be well coordinated and take into account conflict sensitivity.
- Partners support the government in conducting the PDNA for the economic sector including food base production and livelihood. FAO can provide technical support in preparing a comprehensive questionnaire on the agriculture sector.

**Response:**

- The response plan targets 80,000 affected people through rice planting; household vegetable production; storage facilities for harvested crops and agricultural inputs; livestock production for households; capture fisheries for coastal communities.
- FAO will implement the CERF funded project, approved on 11 October, aiming to restore food production and livelihoods of 50,000 people depending on agriculture and 3,000 fishing families. It will provide households with agricultural inputs to help them replace the lost productive assets and resume production.
- An additional 10,000 people are targeted through FAO funding, and FAO is currently developing several project proposals to reduce the gaps.

**Gaps and constraints:**

- The CERF project has not yet been implemented, and no beneficiaries have been reached.
- Out of \$5 million required, only \$1.2 million has been secured.

**Health****Needs:**

- Twenty-two healthcare facilities have been affected, including three hospitals, ten primary health centres (PHC), four sub-primary health centres and five village posts. Of these, four in Sigi District are classified as severely damaged. 18 PHCs and two district hospitals in Donggala are intact.
- Vaccine stockpiles are required for routine immunization.
- Medical resources are needed to support public health and restoring health programmes in the affected areas. These include psychosocial support, water and sanitation, vector control.
- Rapid Diagnostic Tests (RDT) for Dengue, Leptospirosis and Malaria.

**1,800**

health personnel on the ground

**Response:**

- 1,793 health personnel are on the ground in the affected areas including 91 Emergency Medical Teams (EMT) comprising of 855 healthcare volunteers.
- A rapid health assessment by MoH and partners found that 50 primary health care facilities (PHCs) are functional, including 13 primary health centres (PHC) in Palu, 19 PHCs in Donggala and 18 PHCs in Sigi. 11 pharmacies in Palu and three pharmacies in Sigi are functional.
- Routine MR campaign is continued in three affected districts with additional focus on IDP camps. As of 11 October, 620,357 children aged 9 months to 15 years had been vaccinated against measles and rubella.
- A hotline number has been established for reporting disease surveillance and outbreaks.
- MOH is conducting a mental health assessment in Palu and has sent psychopharmacological medications to provide operational support and ensure stock sufficiency.
- The Expanded Programme on Immunization (EPI) is assessing the cold chain in three affected districts. The Vaccine Viral Monitor (VVM) is at usable stage in all PHCs in Palu city. EPI coordinators/KORIM are providing services in five PHCs in Sigi district, however the routine EPI programme has not resumed.
- Six WHO personnel are supporting health cluster coordination and technical response.
- IFRC and ICRC, working in support of the Indonesian Red Cross, have deployed 64 national personnel including 7 psychosocial support service (PSS) staff, 5 PMI mobile medical teams and 1 EMT. They have distributed 1,900 hygiene kits, 250 mosquito nets, and 100,000 masks.
- UNAIDS is setting up HIV sub-stations at UNFPA reproductive health centres to provide information and support for people living with HIV. There are 333 people including 3 children registered as taking ARVs. Local CSOs continue to ensure emergency supplies from centres in Makasar to Palu.
- Save the Children has deployed 20 personnel to support the health and nutrition needs for infants, young children and mothers. These include establishing public kitchens for young children and complementary food for pregnant women, scaling up breastfeeding, and assessing gaps in nutrition.
- Four UNFPA personnel in the field are supporting the Reproductive Health cluster and the Protection of Women's Rights sub-cluster. This includes assessment, establishing three reproductive health tents, and distributing maternity kits, newborn baby kits and 32 mosquito nets, with plans to scale up the supplies.

- Handicap International is supporting response to people with disability and working to compile statistical data for people with injuries (fractures, people with wheel chair, etc.).
- UNICEF has deployed personnel to support WASH, risk communication, child protection, health, strengthening immunization including MR campaign. UNICEF in collaboration with WHO also supported rapid health assessment on cold chain, detection and protection against malaria, reproductive health, support essential needs for under five, and nutrition support for IDPs.
- Muhammadiyah (MDMC) established six medical posts in Palu and maternity clinics. Up to date, 1,561 patients have been treated. MDMC is supporting case management and response in Palu, Donggala and Butong.
- MoH will integrate the mental health support programme established by Ministry of Social Affairs and Health Reproduction.
- The Reproductive Health (RH) sub-cluster is meeting three times a week in Palu
- Five RH tents are currently functioning, providing ante-natal, delivery and post-natal services, family planning services, information and awareness sessions to women and young people.
- Kits containing essential hygiene, menstrual and protection items targeted for pregnant and lactating women and newborn babies are being distributed.
- Psychosocial support is being provided to frontline health staff.
- Outreach mobile clinics conducted by Indonesian AIDS Coalition and HIV Community Workers are delivering ARVs in affected areas.

### Gaps and constraints:

- Limited vaccine stockpiles at Sigi district will hamper resumption of routine immunization programme.
- MoH indicated additional medical resources will be required including medical doctors, specialists, psychiatrist, psychologist, nurse, midwives, radiographer, environmental health officers and nutritionist.
- Rapid Diagnostic Tests (RDT) for Dengue and Leptospirosis are not available. RDTs for Malaria are available in primary healthcare centres, however the number is uncertain.
- Limited access to primary healthcare centres in Sigi.
- Reporting from primary health centres is still limited.



## Logistics

### Needs:

- 1.5 million USD is needed to address logistics gaps and facilitate the response.

**\$1.5M**

needed to address  
logistics gaps

### Response:

- WFP is supporting BNPB and AHA by providing coordination and information management to support operational decision-making and improve the predictability, timeliness, and efficiency of the humanitarian emergency response.
- In addition to the three trucks contracted by DHL, WFP has secured ten local commercial trucks from Palu which have been utilized from 15 October for transportation of relief items.
- WFP identified eight additional trucks operating in the area and is negotiating details to best support the current efforts and fill-in any gaps.
- WFP is liaising closely with the Government, Indonesian National Armed Forces (TNI), BNPB, the ASEAN ERAT Team and the Indonesian Red Cross (PMI) regarding distribution mechanisms and structures to ensure coordination at all levels.
- WFP is working with the Global Logistics Cluster to implement the Relief Items Tracking Application (RITA) in this response. An expert will be deployed to Palu to support the Government, BNPB, the ERAT Team and the organisations present in the implementation phase of the common services.
- The two Mobile Storage Units (MSUs) at Palu airport, managed by ASEAN-ERAT are operational, and currently full of supplies awaiting delivery. Ten MSUs belonging to PMI and WFP arrived and were offloaded.
- WFP is finalizing the details of the contract with the seaport authority and operators to secure approximately 500 sq<sup>2</sup> of the facility to be used as common storage.

### Gaps and constraints:

- Local storage capacity in Palu is limited, and existing warehouses are still being cleared of debris. Transport capacity is limited and access, in particular in Sigi, is hindered by landslides and road damages.
- Lack of forklifts and adequate machinery to accelerate the response.
- Limited visibility over the procedures and the aid coming in at the airport.

## Education

### Needs:

- The disaster affected include 164,651 students and 11,273 teachers.
- 1,149 schools were affected, with 1,214 class rooms with severe damage.
- 5,766 temporary class rooms or 2,883 Temporary Learning Spaces (TLS) are required.

**165,000**

students estimated to be affected

### Response:

- 910 TLS tents are prepared and processed for shipment from MoEC, UNICEF, YSTC, WVI, YPII, BAZNAS and Yayasan Kerlip.
- Psychosocial activities for early childhood are being provided by YPII, WVI, Yayasan Kerlip, HIMPSI.
- Psychosocial support was provided for 100 teachers on 15 October in Palu City facilitated by UNICEF, YSTC, WVI and HIMPSI.

### Gaps and constraints:

- The Education Post for cluster coordination has only received 19 tents for TLS, all already set up with 9 in Palu, 7 in Donggala and 3 in Sigi district. The TLS tents already set up lack latrines and hand washing facilities
- A further 855 tents are expected. The first batch of 200 tents from UNICEF arrived in Malaysia on 16 October and is expected to arrive in Palu, through Balikpapan, on 16-18 October.
- Most schools need debris clearance and removal.



## Early Recovery

### Needs:

- The first early recovery needs assessment indicates that the volume of waste and debris that needs to be cleared is up to 6.6 million tonnes.
- Some critical infrastructure is blocked and/or inaccessible due to buildup of debris and waste, including roads, hospitals, schools, and irrigation systems.
- BNPB emphasizes that impacts are not only on public infrastructure and housing, but also many other sectors. A rough assessment by cluster members indicate less than 50% of public service capacity is restored.
- Immediate debris clearance is needed to allow access to all affected communities.
- Restoration of core governance functions in the local authorities is required to allow local communities take the lead in defining their future through recovery efforts.
- Emergency employment schemes are urgently required.

### Response:

- UNDP is working with relevant government institutions and communities to agree on: areas where debris and waste clearance will be implemented; final landfill site (TPA/Tempat Pembuangan Akhir) for debris clearance; and standard of compensation rate of Cash for Work.
- The cash grant working group will provide information on the recommended Financial Service Provider for the Cash for Work programme.
- The upcoming rapid recovery assessment report will provide analysis and recommendations for 5 PDNA components i.e. damage, losses, disruption of access, disruption of functions in society and government and emerging risk after disaster, covering five development sectors i.e. housing and settlements, infrastructure, productive economy, social and cross-cutting sector.

**Gaps and constraints:**

- Challenges found during the rapid recovery needs assessment include data availability; data gaps; limited information on level of damage.
- The recovery needs assessment must be harmonised across with partners to ensure adherence to prevailing laws and regulations on post disaster needs assessment.

## General Coordination

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Coordination across the traditional global clusters/sectors and mainstreaming of cross-cutting issues and common modalities has been facilitated by Indonesia's national adaptation of the cluster approach. There are eight national clusters (Health, Education, Logistics, Displacement and Protection, Early Recovery, Infrastructure and Facilities, Economy, SAR).

The National Cluster for Displacement and Protection brings together partners active in various sub-clusters, i.e. Shelter, Camp Coordination and Camp Management, Protection (and its various sub-clusters on GBV, Child Protection, Older People, vulnerable groups including those living with HIV/AIDS, and psychosocial support). The national clusters are led by the line ministries and the members are the NGOs, INGOs, and government institutions.

At the national level, the Displacement and Protection Cluster (or Klasnas PP in Indonesian) has been meeting every two days since the earthquake and tsunami to coordinate the immediate response. The national equivalents to the Health, Education, Food Security and Early Recovery clusters have also been activated to coordinate the Central Sulawesi Earthquake Response, with support from the international co-coordinators. At disaster-affected areas, Child Protection, WASH, and GBV sub-clusters as well as Health, Nutrition, Education, Logistics and Early Recovery are also active.

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