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Emergency Plan of Action (EPoA) Indonesia: Volcanic Eruption – Mt Kelud

 International Federation
of Red Cross and Red Crescent Societies

DREF Operation / Indonesia – Volcanic Eruption – Mt Kelud	Operation n° MDRID009; Glide n° VO-2014-000022-IDN
Date of issue: 3 March 2014	Date of disaster: 13 February 2014
Operation manager: Phillip Charlesworth, Head of Delegation, IFRC Indonesia	Point of contact: Ir. Budi Atmadi Adiputro, Secretary General, PMI
Operation start date: 13 February 2014	Expected timeframe: two months
Overall operation budget: CHF 240,127	
Number of people affected (currently): 83,088	Number of people to be assisted: 16,500 people (3,400 families)
Host National Society(ies) presence (n° of volunteers, staff, branches): 400 volunteers, 4 branches, 1 chapter	

A. Situation analysis

Description of the disaster

On 2 February 2014, The Indonesian Volcanology and Geology Disaster Mitigation Centre (BVMG) set the status of Kelud volcano from NORMAL to AWARE. Eight days later, on 10 February at 16:00, the status was raised to ALERT. On 13 February 2014 at 21:15, BVMG then increased the status further from ALERT (Level III) to DANGER (Level IV).

Based on this status, the government ordered all communities living within a 10-kilometer radius from the crater to be evacuated. The area was declared a “Red Zone” prohibiting any activity or anyone from accessing it except emergency authorities.



Tens of thousands of families have been forced to leave their ash covered homes. Photos PMI

Just two hours after the declaration of the DANGER status the first eruption occurred at 22:55. A series of eruptions followed with plumes rising up to 19 km into the atmosphere. Ash and stones were thrown into the air and started falling throughout the nearby Kediri District. By the dawn of 14 February, the volcanic ash had drifted across the provinces of Central and West Java. Eighteen areas have been affected including Kediri, Malang, Blitar, Surabaya, Ponorogo, Pacitan, Solo, Yogya, Boyolali, Magelang, Purworejo, Temanggung, Wonogiri, Bantul, Sleman, Kulon Progo, Kebumen and Ampenan. In addition, seven international airports were closed. These included major airport hubs of Surabaya, Solo, Yogyakarta, Semarang and Malang.



Ash from the Kelud Volcano travelled more than 250km causing damage to houses and forcing the closure of 7airports. BNPB

Over the first few days, the eruption affected 201,228 people (58,341 families) from 35 villages in three districts: Blitar, Kediri, and Malang. The President of Indonesia instructed the National Disaster Management Agency (BNPB) to assist local governments in emergency response. The Governor of East Java declared a state of emergency until the 14 March 2014.

As of 14 February 2014, there had been seven fatalities and 70 people in hospitals in serious condition suffering from ash inhalation. The number of internally displaced persons (IDPs) had reduced to 100,248 people who had evacuated and camped across the province in 172 IDP camps set up to cater for their basic needs.

Over the following days, some of the displaced moved and found refuge with family and friends. By 18 February, a total of 83,088 IDPs from 40 villages in 10 sub-districts were in the camps. This includes 35,201 people in Malang District (42.37%), 39,694 people in Kediri District (47.77%) and 8,193 people in Blitar District (9.86%). In addition to the volcanic ash, heavy rain fell and produced cold lahar flooding in Malang, Kediri and Blitar districts. This caused further damage to buildings, farm lands, and roads.

The effect of the eruption has been devastating. Houses, schools, buildings and public facilities have been inundated with ash causing great damage and losses. Ash from the volcano had considerable impact on houses lying in the path of the ash cloud. Nineteen public buildings were totally damaged, 23 partially damaged, and 41 facilities had minor damages. Many factories and businesses have stopped production and trade respectively. The financial loss is estimated at 1.2 trillion rupiah (approximately CHF 91.5 million) with the largest loss being on the farming sector at 1.1 billion rupiah (approximately CHF 84,000). This figure is expected to increase once the ash has settled and a more thorough assessment is done.

Table 1: Damage to houses and other buildings as a result of volcanic ash

District	Totally damaged	Moderately damaged	Minor damaged
Kediri	8,622	5,426	5,088
Malang	1,514	1,066	1,378
Blitar	957	878	1,578
Total	11,093	7,370	8,044

On 20 February, the National Volcanology Centre (PVMBG) decreased Mt. Kelud's alert status from the highest level IV to III, with a 5km exclusion zone from the crater. The PVMBG urged people not to carry out any activities within the 5km radius of the crater and along the river banks, and to be vigilant to the possibility of cold lava flows.

The Government of East Java has been given the authority by the president to determine which villages are safe to return to and which remain on alert. For those areas where people can return, there is a lot of work involved in the repair of damaged houses, public infrastructure and facilities. Presently, the government has identified 13 March as the extent of the emergency period, although this may be extended depending on the volcanic activity.

The government's Incident Command Post has been leading the process to identify needs and manage the response. This post has been relocated to Selorejo Sub district as it is located close to the volcano and is easier to coordinate day to day activities. It is also tasked with preparing a rehabilitation and reconstruction programme to include all the relevant sectors, including health, education, infrastructure, agriculture, and socio-economic, using the provincial budget.

Three clusters have been formed as the main body for the disaster response. These include:

- i) IDP return: led by Vice Governor of East Java;
- ii) Security and safety of community: led by East Java Chief of Police; and
- iii) Improvement of houses, infrastructure and facilities: led by East Java Commander of Military Region.

Mobilization of resources will be initiated by the government starting on 1 March with the target of finishing the work within two weeks.

In addition to the support provided by the government, the Indonesian Red Cross (PMI), civil society representatives, humanitarian organizations and private sector enterprises continue to be active in providing support.

Summary of the current response

Overview of Red Cross Red Crescent Movement activities in country

Since 5 February 2014, prior to the eruption, PMI has been involved in activities which focused on providing early warning about the imminent eruption. Volunteers were placed on standby and spent time conducting refresher training for evacuation, IDP management and relief support.

On 12 February 2014, the PMI Chairman visited the affected location and requested that 500 volunteers be identified and ready for response. By the morning of 13 February, PMI (together with the local government) built evacuation signs and made public announcements about the imminent eruption. Everyone within a 10km radius of the volcano was issued a protective mask and prepared to evacuate. When the volcano erupted, 400 volunteers from three districts (Kediri, Malang and Blitar) worked with evacuation and search and rescue teams to move everyone to safe locations.

PMI set up public kitchens, distributed relief items, and provided clean drinking water to those affected. In total, 500,000 masks, 4,000 sleeping mats, 1,500 hygiene kits, 1,500 tarpaulins and 500 baby kits were distributed. Five water trucks were mobilized, seven ambulances assisted in the early response and seven medical posts were set up. Many more materials are still needed and will be used to support other families should additional funding be identified.

Action conducted by Government and other stake holders

The President of Indonesia directly oversaw the immediate response and directed the national disaster response agency to assist local governments in emergency response and meet the basic needs of displaced people.

The local government has since led the coordination of the emergency response. Various technical government departments such as the National Search and Rescue Agency (BASARNAS), military and police have been working together with other stakeholders from community organizations, political parties, NGOs and PMI. Coordination is led by the District Disaster Management Agency (BPBD).

BPBD, with support of National Disaster Management Agency (BNPB), have set up a local cluster network to ensure that various sectors are covered. These are led by respective government departments and agencies and include search and rescue, health and psycho-social, food and nutrition, temporary shelter, structure and infrastructure recovery, water and sanitation, education, logistics and equipment. . The field coordination mechanism is managed by a field-based provincial command post located in the governor's office which is near the base of the volcano. This post holds daily coordination meetings to mobilize resources from each of the provincial government agencies.

The East Java military commander has been given responsibility to support the repairing of infrastructure, houses and facilities. The government has taken responsibility to cover the provision of temporary roofing, set up of temporary sanitation, communication and other facilities until regular services are reopened

Updated IDP and relief data is communicated through phones and radios that are managed by the Emergency Operation Centre. The center is also coordinating assistance from other agencies and private sector enterprises. Both Kediri and Malang have recently established district level command posts which are managed directly under the provincial command.

Other actors involved in the response include Muhammadiyah Disaster Management Centre (MDMC), Yakkum Emergency Unit (YEU), Plan International, World Vision, Habitat for Humanity, PKPU, Catholic Relief Services (CRS) and the World Food Programme (WFP).

Needs analysis

As of 19 February, BNPB identified the following additional support that will be required to assist the displaced, returning and host families:

Water, Sanitation and Hygiene

Most of the water sources and community pipelines are either contaminated or damaged by volcanic material. The government is trying to support the need for safe water through its public works and district water company (PDAM). However, they have limited resources and the needs are immense. Water will need to be provided by tanker trucks in

the near future to ensure that safe and uncontaminated drinking water is provided. There is also a need to repair and clean wells. These activities are being done jointly with the government, PMI and other aid providers.

Even though many temporary sanitation facilities have been set up, there is still a great need to provide more services to accommodate the remaining IDPs. Thus, repairing and erecting new sanitation facilities is required. Hygiene promotion needs to be conducted and additional hygiene kits are also required. This is to be followed up by the East Java Commander responsible for the 3rd cluster as mentioned above.

Environmental Sanitation

The cleaning of houses and their surrounding environment is essential to ensure that volcanic material and debris are removed and houses are deemed safe for living. Cleaning has commenced in some areas but additional cleaning equipment will need to be provided to accelerate the clean-up operation.

Personal Protective Equipment

The volcanic residue covers 65% of the Java island population. Many masks have already been provided by the government, PMI and other relief organizations. More masks and protective equipment such as eye protection and gloves will be required long after the eruption has reduced.

Shelter

Most of the houses (especially the roofs) inside the “RED ZONE” or within the 10 km radius have been heavily damaged. Temporary roofing materials such as tarpaulins and basic family kits are needed while repairs are being made.

Health Services

The volcanic eruption damaged nine local health centers, or rendered them inaccessible due to debris and material, thereby disrupting the delivery of basic health services. Even when local health services commence again, many of the displaced persons will be unable to access these centers because of limited transportation and closed roads. Many people are suffering from respiratory problems and eye infections caused by the dust. Mobile health services are being run by the local governments’ health department and supplemented by PMI services. The mobile clinics of the PMI have been operating from their onsite trucks, ambulances and other vehicles since the eruption began. Government services are expected to be completely functioning again in the coming month. PMI services will continue to operate until the regular services are restored to ensure access to health services for the affected population.

Public Food

Many locations do not have facilities for individual cooking of food. Ready cooked meals need to be constantly prepared and provided to the displaced. Meals also need to be provided to the returning families while they repair and clean their homes.

B. Operational strategy and plan

Overall objective

To assist 16,500 people (3,400 families) to recover quickly from the effects of the volcanic eruption.

Strategy

Under the coordination of the local government, PMI have been asked to target 20 per cent of the current displaced population of 83,088 in Kediri, Malang and Blitar districts. This is to supplement ongoing government and other agency supported activities in other locations.

Shelter and Household items

Outcome: Emergency shelter items and relief items are distributed to 16,500 beneficiaries in three districts for one month.

Outputs (expected results) and activities planned:

- Conduct rapid emergency needs assessment.
- Identify beneficiaries to ensure effective distribution of assistance.
- Distribute tarpaulins for temporary repairs and sleeping mats.
- Control supply movements from point of dispatch to end user.
- Monitor and evaluate the relief activities and provide reporting on relief distributions.

Food Security (food items)

Outcome: Cooked meals are distributed to 16,500 beneficiaries while the government establishes its own services.

Outputs (expected results) and activities planned:

- Identify beneficiaries to ensure effective distribution of assistance.
- Ensure the provision of cooked meals through mobile kitchen services.
- Monitor and evaluate the relief activities and provide reporting on relief distributions.

Water, Sanitation and Hygiene Promotion

Outcome: The risk of waterborne and water related diseases has been reduced among 3,400 families in three districts for one month.

Outputs (expected results) and activities planned:

- Assess the existing water coverage with a view of ensuring availability of an adequate water supply.
- Provide safe water to affected populations through the use of water truck distribution to community distribution tanks.
- Distribute jerry cans and communal water containers.
- Distribute clean up equipment and tools.
- Conduct environmental sanitation especially in the public facilities.
- Conduct well and water source cleaning with PMI and community volunteers.
- Distribute hygiene kits and baby kits.
- Conduct training/information programmes for PMI volunteers and beneficiaries, in particular regional hygiene promotion for 2,000 people/day for one month.

Note: The water truck distribution operation is supplementing government supported services and expected to run for a month while the local government make repairs and clean out public facilities.

Health and Care

Outcome: The immediate health risks of 3,400 families are reduced through access to basic health care services.

Outputs (expected results) and activities planned:

- Conduct rapid emergency health assessment.
- Provide essential health services to the displaced population through deployment of mobile units to hard-to-reach areas.
- Replenish essential medical supplies.
- Provide affected people with personal protective equipment.
- Provide psychosocial support services and activities, particularly to displaced children.
- Conduct disease prevention and health awareness/education sessions to displaced populations through mobilization of volunteers working with WatSan and relief teams, with involvement of beneficiaries.

Replenishment, reimbursement and ongoing activities

As PMI has been using existing stock from their regional warehouses, this DREF will not only be used to ensure that services and additional materials are provided to the displaced communities, but it will also be used to replenish stocks and materials already used during this emergency. The following are the items that have been distributed and those still to be procured and distributed.

Table 2: Summary of items distributed and to be distributed		
No	Item	Amount
Items distributed		
1	Food from the public kitchen	4,000 packages/ day for 15 days : 60,000 food package
2	Mask	200,000
3	Tarpaulin	1,500
4	Hygiene kit	2,000
5	Baby kit	1,000
6	Sleeping mat	2,500
7	Shovel	1,000
Items yet to be distributed		
1	Food from the public kitchen	4,000 packages/ day for 15 days : 60,000 food package
2	Tarpaulin	1,900
3	Hygiene kit	1,400
4	Jerry can	3,400
5	Communal water container	50

Selection of beneficiaries

PMI has a longstanding relationship with the local communities in the districts of East Java. The local government has requested PMI to assist in the immediate response and early recovery operation. Selection of beneficiaries included the following considerations:

- Beneficiaries in areas where PMI has been active for many years and are not being reached by other agencies.
- Families that have been severely affected by the eruption.
- Families from locations unlikely to return in the short term.
- People located in highly vulnerable areas near the edge of the volcanic crater.

Community volunteers and leaders have been consulted in the beneficiary selection and are involved in the relief process. Within the targeted beneficiaries, priority is given to female headed households, the elderly and infants.

Time frame

The operation will run for two months and finish on the 12 April 2014.

Planning, monitoring, evaluation and reporting (PMER)

Monitoring of PMI activities will help to ensure the impact and appropriateness of services provided by PMI. Monitoring will be done through field visits, daily progress reports, weekly updates and a final report. An internal final evaluation will be done at the end of the operation to measure success and identify any challenges. The evaluation team will consist of representatives from PMI branches, chapters, national headquarters and IFRC.

Potential Risks

PMI is proposing to support communities with the cleaning up of their homes as soon as the eruption has decreased. A quick clean-up operation will help to reduce health risks, vectors, sanitation issues and other problems.

Past experience has shown that the risk of skin rashes, chest infections and other health related problems is extremely high after these kinds of events. Unless the communities are provided with the necessary items to quickly clean-up their homes and neighborhoods, store safe potable/drinking water and improve hygiene and basic living conditions, they will be highly vulnerable to these potential risks.

Contact information

For further information specifically related to this operation please contact:

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How we work

All IFRC assistance seeks to adhere to the [Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations \(NGOs\) in Disaster Relief](#) and the [Humanitarian Charter and Minimum Standards in Disaster Response \(Sphere\)](#) in delivering assistance to the most vulnerable.

The IFRC's vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

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The IFRC's work is guided by [Strategy 2020](#) which puts forward three strategic aims:

1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.
 2. Enable healthy and safe living.
 3. Promote social inclusion and a culture of non-violence and peace.
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EMERGENCY APPEAL

26/02/2014

MDRID009 INDONESIA : KELUD VOLCANIC ERUPTION

Budget Group	DREF Grant Budget CHF
Shelter - Relief	27,462
Food	13,462
Water, Sanitation & Hygiene	78,769
Medical & First Aid	2,308
Utensils & Tools	26,154
Total RELIEF ITEMS, CONSTRUCTION AND SUPPLIES	148,154
Transport & Vehicle Costs	16,942
Total LOGISTICS, TRANSPORT AND STORAGE	16,942
National Society Staff	28,846
Volunteers	29,221
Total PERSONNEL	58,067
Office Costs	2,308
Total GENERAL EXPENDITURES	2,308
Programme and Services Support Recovery	14,656
Total INDIRECT COSTS	14,656
TOTAL BUDGET	240,127



Indonesia: Volcanic Eruption - Mt Kelud

