



Indonesia

Humanitarian Situation Report # 3

REPORTING PERIOD: 1 – 11 November 2018

SITUATION IN NUMBERS

Highlights

- The WASH Sector, with UNICEF support, provided 110.000 people with access to safe drinking water.
- In response to the high rate of diarrhoeal cases in Sulawesi, UNICEF coordinated a meeting with the Provincial Health Office to advance on the response strategy.
- 31 health care workers attended Training of Trainers workshops on Integrated Management of New-born and Childhood Illnesses.
- 300 pregnant and lactating women have received counselling on Infant and Young Child Feeding (IYCF) practices and 56 health care workers were trained in providing IYCF counselling.
- 5,738 children have received psycho-social support at child friendly spaces.
- A Child Protection Rapid Assessment has commenced in Lombok.
- UNICEF supported close to 23.000 children to resume their education through provision of temporary learning spaces.

15 November 2018

1.9 million affected people
 1.5 million in Sulawesi
 0.4 million in Lombok

665,000 affected children (<18)
 525,000 in Sulawesi
 140,000 in Lombok

1.4 million people to be reached
 1.1 million in Sulawesi
 0.3 million in Lombok

475,000 children to be reached
 375,000 in Sulawesi
 100,000 in Lombok

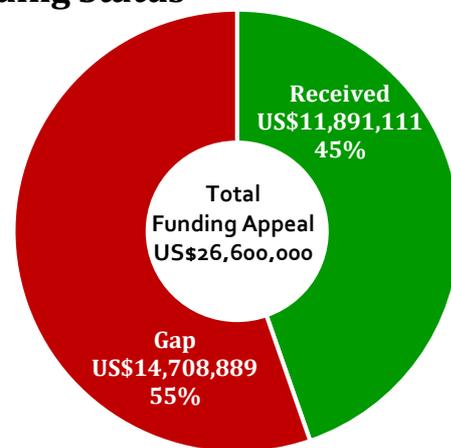
UNICEF Appeal 2018

US\$ 26.6 million
 US\$ 16 million for Sulawesi
 US\$ 10.6 million for Lombok

UNICEF's Response with Partners

	UNICEF		Sector	
	UNICEF Target	Total Results	Sector Target	Total Results
WASH: people accessing safe drinking water	100,000	18,666	191,000	110,160
Health: children reached with measles vaccination	1,926,022	1,377,103	1,926,922	1,377,103
Nutrition: caregivers of children under-five years receive IYCF counselling	2,000	300	72,000	TBD*
Child Protection: children accessing psycho-social support	25,000	5,738	82,989	5,738
Education: children accessing quality formal and non-formal education	63,000	22,640	193,175	44,960
C4D: 20,000 adolescents engaged to provide life-saving information	20,000	1,153		

Funding Status



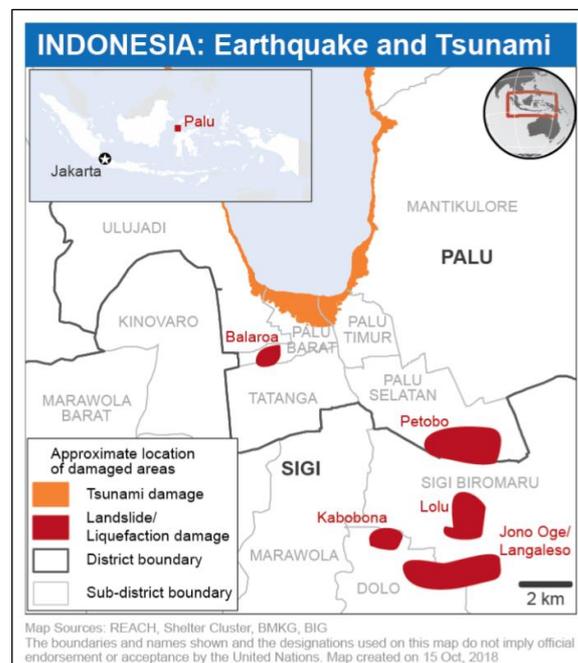
*Infant and young child feeding (IYCF) is offered routinely at health facilities (health clinics and village health posts). Discussions are underway within the cluster to better understand coverage.

Situation Overview & Humanitarian Needs

On 28 September, a series of earthquakes struck Indonesia's Central Sulawesi province. The strongest earthquake (7.4M) triggered a tsunami which struck Palu and Donggala districts, resulting in significant damage and loss of life. Instances of liquefaction and landslides also occurred. Thousands of families have lost their homes, access to services and sought refuge in safer areas.

An estimated 1.5 million people were affected including 5,000 children. Over 211,000 people are currently living in IDP camps with many more residing in spontaneous and informal settlements.¹ Initial estimates suggest around 80,000 people from Palu have left the affected areas.²

Needs assessments identified clean water, sanitation and hygiene, health and nutrition, recovery of infrastructure and public services, shelter, protection, food, education, logistics and economic recovery as priority needs. Many IDP sites have inadequate shelter, limited access to latrines and water and insufficient lighting, causing protection concerns. Sanitary conditions have significantly deteriorated since the onset of the disaster, with diarrhoea and skin infections on the rise, and increased risk of communicable diseases and malaria.



Humanitarian Leadership and Coordination

During the recovery phase, the response to the provincial-level emergency in Sulawesi is being led by provincial and local authorities with support from the National Government. The national "cluster" system has been activated, which is distinct from the global cluster system. UN and NGO partners support Government-led coordination at the sub-national level.

UNICEF is co-coordinator for WASH and Child Protection sub-clusters of the 'Protection and Displacement Cluster' led by the Ministry of Social Affairs (MoSA); co-coordinator for the Infrastructure Cluster under the Ministry of Public Works (MoPW); co-coordinator (at the national level) for 'Education Cluster' under the Ministry of Education and Culture (MoEC); member of the 'Health Cluster', and co-coordinator for the Nutrition and WASH sub-cluster under the Ministry of Health (MoH). Sub-national government is not well versed on the cluster system and is faced with sector coordination challenges.

Humanitarian Strategy

UNICEF is responding to the earthquake-tsunami disaster in Sulawesi and Lombok under the leadership of the Government of Indonesia, and in partnership with local and international NGOs, focusing on life-saving service delivery and early recovery according to its Core Commitments for Children in Humanitarian Action. UNICEF's response is aligned with the Central Sulawesi Earthquake Response Plan released by the UN on 4 October for a duration of three months.

With its dual mandate, UNICEF is uniquely placed to bridge immediate humanitarian and more long-term development interventions. In Sulawesi, UNICEF's response focuses on strengthening sectoral coordination and on provision of critical life-saving support across all sectors by building on existing capacities. In Lombok, UNICEF is

¹ Ref DTM

² Social media tracking indicates this population has mostly disbursed to South Sulawesi, but also to Kalimantan and Java islands.

also scaling-up recovery activities across all sectors. In this regard, UNICEF has finalized a 6-month response plan for both Sulawesi and Lombok that will articulate a comprehensive set of response and early recovery activities.

- WASH is a priority for UNICEF given the makeshift and spontaneous settlements and the potential for a catastrophic outbreak of disease, particularly Acute Watery Diarrhoea (AWD). The response will focus on the immediate provision of safe water, basic sanitation and community engagement around hygiene practices.
- UNICEF's Health sector support will include technical support to a coordination platform for the prevention of vaccine-preventable diseases, malaria control and management of newborn and childhood illnesses. To tailor the most effective response, UNICEF will facilitate health assessments of the affected population and identify intervention gaps for pregnant women, newborns and under-five children. Additionally, support will be provided for capacity development of local stakeholders in providing immunization, malaria and essential maternal, newborn and child care packages.
- In Nutrition, UNICEF's efforts will focus on strengthening the nutrition cluster coordination mechanism and nutritional assessment and surveillance system, as well as enhancing access to essential emergency nutrition services such as infant and young child feeding (IYCF) counselling and management of severe acute malnutrition (SAM).
- UNICEF's Child Protection sector will focus on strengthening the capacity of MoSA at district and provincial level for integrated child welfare services including case management support, birth registration and replacement of lost identity documentation.
- In Education, UNICEF will support Government with monitoring and coordination, its creation of access to quality education and learning for school-aged children and adolescents, and provision of psycho-social support to school children, school personnel and parents/caregivers.

Summary Analysis of Programme Response

WASH

The provision of sufficient quantities of safe water is constrained by the extensive damage to infrastructure, contamination of water sources, and limited water trucking capacities. As part of the Government led response, UNICEF is contributing to the operational costs of local water utility (PDAM Donggala) distribution and bulk water treatment which has the potential service capacity of 18,666 IDPs. Additionally, UNICEF is providing up 34 x 5000 litre water bladders for use in water trucking with partners. Five portable water purification systems providing water for 15,000 people will be distributed in the coming weeks.

In response to the high diarrhoea cases among children under 5 years in Central Sulawesi, UNICEF coordinated a meeting with the Provincial Health Office (PHO) to examine the caseload and probable causes. The planned response plan includes components of: WASH, Nutrition and Health. In addition, during the coordination meeting held by WASH, 65 sanitarians from Puskesmas (government-mandated community health clinics) and NGOs received a briefing concerning the existing diarrhoea cases in the affected areas. UNICEF is coordinating the distribution of hygiene kits together with hygiene promotion training and delivery through the district health offices. The aim is to distribute up to 5,300 hygiene kits and conduct hygiene promotion (targeting 100,000 people) with local partners via the Health Centre in coordination with the District Health Offices during the next two weeks. A total of 20,000 hygiene kits will be distributed in the coming month, pending arrival of the remaining shipment. Hygiene kits for over 4,000 families have already arrived in Palu for distribution. 1,000 people have been provided access to safe sanitation through the construction of latrines in Donggala.

1,080 people have been provided access to safe sanitation through the construction of latrines in Donggala and this number will rise dramatically in coming weeks with the onset of three large partnerships in Donggala, Sigi and Palu aiming for 1600 latrines in the three districts.

In Lombok, support to date has been limited to cluster support and hygiene promotion not reflected in the sitrep indicators.

Health

1,377,103 children aged 9 months to 15 years have received Measles and Rubella (MR) vaccination in the earthquake- and tsunami-affected areas: 695,643 children (86%) in Central Sulawesi and 681,460 children (57%) in Lombok. This follows the successful recommencement of the national MR campaign that was interrupted in Central Sulawesi and Lombok due to the disasters. UNICEF's health team is working closely with district health offices to support them in meeting the MR campaign targets.

31 health care workers in Central Sulawesi, attended Training of Trainers (ToT) workshops on Integrated Management of New-born and Childhood Illnesses (IMNCI). The newly trained healthcare workers, will roll out the IMNCI training in their respective districts. The ToT was done in close collaboration with the MoH and further IMNCI training is planned.

More than 64,500 households are expected to benefit from the distribution of more than 129,000 Long Lasting Insecticides Mosquito Nets (LLINS) in Palu and surrounding districts from the last week of November. In parallel the distribution of 150,000 rapid diagnostic test kits for malaria should be sufficient to meet the needs in Central Sulawesi for six months.

Nutrition

UNICEF has prioritised improving infant and young child feeding (IYCF) practices due to the very low rates of exclusive breastfeeding in Central Sulawesi and the increased risks associated with using milk substitutes after natural disasters that have disrupted WASH services. 300 pregnant and lactating mothers received individual and group counselling on IYCF.

Alongside direct outreach to vulnerable households, UNICEF has focused on strengthening institutional capacity for IYCF, which is normally delivered at health clinics and village health posts. A total of 56 health providers have been trained at these levels in two groups. 26 health workers and community health workers attended a 3-day training on the IYCF counselling package. This training was organized by UNICEF, Selasih (a local NGO), and the Indonesian Breastfeeding Mothers Association (AIMI) in partnership with the District Health Office (DHO). An additional group of 30 health workers (heads of Health Centres, midwives and nutritionists) from health clinics (Puskesmas) in Sigi attended a half-day orientation workshop on Infant Feeding in Emergency (IFE). The event was organized in partnership with Sigi District Health Office.

UNICEF continues to provide technical advice to the national Nutrition Sub-cluster with the objective to support existing national capacity to respond to the emergency. This week marked the finalization of Nutrition Emergency Response Plan for Central Sulawesi Emergency. Going forward, the plan will be updated every two weeks.

Child Protection

Leadership for coordination of child protection (Joint Secretariat for Child Protection) is now fully led by Provincial Department of Social Affairs, with 34 organizations registered. UNICEF continues to provide technical support for coordination including monitoring sector needs and gaps and mapping of services and capacity development.

As of 11 November, 116 family tracing and reunification requests have been received, including those monitored from social media. 16 children have been reunified and tracing is actively ongoing. Social workers from MoSA, with support from UNICEF, also followed up cases of 10 children from the earthquake affected areas that have been relocated by a private social welfare institution for children to Jeneponto in South Sulawesi and a response to reunite these children with their families is being coordinated with MOSA in Palu. Primero, a software platform for secure management of protection-related data, is fully operational and is the primary information management system used to respond to cases of separated and unaccompanied children and requests for family tracing.

Supported by UNICEF, MOSA's team conducted mapping of vulnerable children living in 62 Social Welfare Institution for Children, covering 1,557 children. Seven institutions are badly damaged. UNICEF is providing 10,500 Non-Food Items (NFI) sets in these institutions incl. tents, so services can be re-established.

Cumulatively 5,738 children (girls: 3,034; boys: 2,704) have taken part in regular structured psychosocial support activities in 10 UNICEF supported child friendly spaces in Sigi, Palu, and Donggala. 947 NFI packages (containing

basic commodities such as clothing, hygiene items, and education materials) have been distributed to vulnerable children living in IDP camps in the most remote areas and children living in child care institutions. 38 out of a total 60 tents for Child Friendly Spaces arrived in Palu and were handed over to the MOSA team who will begin distribution of the tents in the coming week.

A local UNICEF partner Yayasan Karampuang Mamuju has identified 18 (9 female) adolescent facilitators in Palu, who will be trained with at least 32 other adolescents from 25 areas in the three districts to deliver psychosocial support to adolescents and children. In total, 2,500 children (6 – 12 years old) and 1,153 adolescents will be provided with psychosocial support through Adolescent Circle activities and 2,500 children on the issue of birth registration.

Camp-based data collection has taken place to identify children who do not have birth certificates in 25 sites/camps in Palu, Donggala, Sigi. The data is being entered and will be analysed by 15 November after which mobile outreach will begin to register children who have either lost documentation or who were never registered.

UNICEF and UNFPA continue to train Community Service Organizations (CSO) partners on Prevention of Sexual Exploitation and Abuse (PSEA). In addition, UNICEF provided orientation to 8 newly arrived MOSA social workers, making a total of 38 social workers and MOSA staff trained on PSEA since the beginning of response. A total of 67 staff of UN, government and CSO have participated in the orientation through the combined efforts of UNICEF and UNFPA.

In Lombok, data collection is currently taking place (7 to 17 November) for the Child Protection Rapid Assessment covering 4 major districts, Mataram City and 16 sub-districts. UNICEF will also support the analysis workshop which is scheduled for 19 November. Results will inform the response planning for Lombok.

An assessment for establishing U-Report for PSEA, Family Tracing and Reunification reporting and psychosocial support is being undertaken in both Makassar and Lombok. U-Report training for 73 participants including school counselling teachers from South Sulawesi, members of Child Forum, social workers, university professionals, Red Cross, and local NGOs took place on 7th November in Makassar. Training covered how to utilize U-Report for assessments and referrals for children. School visits also took place to test U-Report with 30 IDP children for establishing a model for school counselling teachers to provide online counselling for IDP children in their schools in South Sulawesi. The Lombok assessment is currently underway.

Education

The Sector provided 45,000 children with access to education in Central Sulawesi in 562 Temporary Learning Spaces (TLS), including 283 from UNICEF. 64 schools in Palu, Donggala, Sigi and Parigi Moutong have reopened enabling around 60% of the children from those districts to resume education. UNICEF will provide an additional 88 TLS this week, allowing over 7,000 additional students to resume education. Local construction solutions are also being considered as an alternative to tents.

UNICEF has provided teaching and learning materials for 4,425 children through the provision of 177 School in a Box kits. Materials for an additional 6,320 children will be provided in the coming week.

The education cluster has started to engage in school structural assessment, working closely with the Ministry of Public Works and Housing. 1,500 schools are to be assessed whether the building is intact to conduct learning activities.

Supply and Logistics

A second wave of approximately 385 MT / 1,500 m³ of supplies will be delivered to implementing partners in Palu within the next week composed of: School in box, Early Childhood Development Kits, Tents of 72 sqm, family hygiene kits, water purification tablets, water tanks, and hygiene and dignity kits.

The Government of Indonesia in partnership with other neighbouring countries is providing the air assets (Royal Australian Air Force, Indonesia Air Force, South Korea Air Force, US Military) to move supplies from Balikpapan to Palu.

Media and External Communication

During this reporting period the Communication section focused on an update on Lombok, producing visuals and stories covering sanitation, hygiene promotion, health and nutrition, child protection and education as well as U-report.

Funding

UNICEF Indonesia has launched its 'Humanitarian Action for Children' (HAC) appeal for US\$26.6 million for a 6-month period for immediate response, early recovery and rehabilitation assistance for children affected by the earthquakes in both Lombok and Sulawesi. Initially, UNICEF advanced US\$4 million as a loan to the Country Office using the internal Emergency Programme Fund (EPF) mechanism to ensure a timely response and allow for the scale up of UNICEF's humanitarian assistance.

As of 12 November 2018, the country office has mobilized more than \$11.8 million, including US\$4.5 million from the Central Emergency Relief Fund (CERF) for immediate, life-saving interventions, against its HAC appeal and wishes to express its sincere gratitude to donors.

Appeal Sector	Requirements	Funds available	Funding gap	
		Funds Received Current Year	US\$	%
Water, Sanitation & Hygiene (WASH)	9,600,000	5,028,976	4,571,024	48%
Health	5,000,000	1,285,572	3,714,428	74%
Nutrition	2,000,000	1,131,595	868,405	43%
Child Protection	2,400,000	1,900,822	499,178	21%
Education*	5,000,000	1,247,020	3,752,980	75%
C4D	600,000	61,810	538,190	90%
Cluster Coordination	2,000,000	1,235,316	764,684	38%
Total	26,600,000	11,891,110	14,708,890	55%

* Additional funds received for Education Sector from Education Cannot Wait funds for Indonesia total of \$1,600,000 excluded from HAC 2018

Next SitRep: 29 November 2018

UNICEF Indonesia: www.unicefindonesia.org

UNICEF Indonesia Social Media: [Twitter](#), [Facebook](#) and [Instagram](#)

UNICEF Indonesia Humanitarian Action for Children Appeal: www.unicef.org/appeals/files/2018-HAC-Indonesia-October.pdf

Whom to contact for further information:

Richard Wecker

Disaster Risk Reduction Specialist

UNICEF Indonesia

rwecker@unicef.org

Debora Comini

Representative

UNICEF Indonesia

dcomini@unicef.org

SUMMARY OF PROGRAMME RESULTS

	Location	Overall needs	UNICEF and IPs			Cluster Response		
			2018 Target	Total Results*	Change since last report	2018 Target	Total Results	Change since last report
WATER, SANITATION & HYGIENE								
# people accessing safe drinking water	Sulawesi	212,000	100,000	18,666	18,666	191,000	110,160	110,160
	Lombok	173,085	100,000	0	0	100,000	0	0
# people accessing appropriate and safely managed sanitation	Sulawesi	212,000	100,000	1,080	1,080	191,000	21,520	21,520
	Lombok	173,085	20,000	0	0	20,000	0	0
# people receiving hygiene messages & kits	Sulawesi	212,000	100,000	0	0	191,000	123,668	123,668
	Lombok	173,000	20,000	0	0	40,000	0	0
HEALTH								
# children reached with measles vaccination	Sulawesi	808,847	808,847	695,643	0			
	Lombok	1,001,774	951,685	517,000	0			
# health workers trained in on IMNCI	Sulawesi	250	250	31	31			
	Lombok	NA	NA	NA	0			
NUTRITION								
# of caregivers of children under two years receive IYCF counselling	Sulawesi	72,000	2,000	300	263	72,000	TBD*	263
	Lombok	NA	NA	NA	0	NA	NA	0
# health staff and community workers trained on IYCF	Sulawesi	155	155	26	26	155	26	26
	Lombok	1,080	1,080	0	0	1,080	0	0
CHILD PROTECTION								
# children access psycho-social support at CFS	Sulawesi	82,989	20,000	5,738	5,738	82,989	5,738	5,738
	Lombok	40,679	5,000	0	0	NA	0	0
# unaccompanied and separated children receive case management services	Sulawesi	244	171	16	16	244	16	16
	Lombok**	500	300	0	0	500	0	0
EDUCATION								
# children access quality formal and non-formal education	Sulawesi	272,813	63,000	22,640	22,640	193,175	44,960	44,960
	Lombok	TBD	0	0	0	TBD	0	0
# children receiving individual learning materials	Sulawesi	272,813	20,000	4,435	4,435	193,175	4,435	4,435
	Lombok	218,224	10,000	0	0	137,112	0	0

*Infant and young child feeding (IYCF) is offered routinely at health facilities (health clinics and village health posts). 56 health workers have been trained in IYCF intensification as part of the emergency response. As these data are not routinely collected in the health service, discussions are underway within the cluster to better understand coverage.

**A Child Protection assessment is currently ongoing in Lombok.