Maluku. In addition, USAID/OFDA provided \$131,500 to ACF/F for basic shelter, non-food relief items, and seeds and tools for Maluku refugees.

Madura/Java Island

During FY 2002, Madura Island and parts of East Java continued to host large IDP populations from other regions of the country.

USAID/OFDA provided \$378,000 to IMC for health and water and sanitation projects in Madura for ethnic Madurese refugees displaced from Central Kalimantan. In addition, USAID/OFDA provided \$355,912 to WVI for a temporary shelter program for IDPs in Madura and East Java.

Sulawesi

During FY 2002, conflict between Christian and Muslim groups continued in Central Sulawesi. Following the Malino Declaration Peace Accord in December 2001, levels of violence decreased temporarily. However, between May and July 2002, bombing and shooting incidents increased. In early August 2002, Christian-Muslim violence resulted in additional population displacements.

USAID/OFDA provided \$570,717 to CWS for shelter materials, water and sanitation activities, and other non-food relief items for IDPs in Sulawesi. In addition, USAID/OFDA provided \$377,000 to CARE for shelter materials and seeds and tools for IDPs in Central Sulawesi. USAID/OFDA also provided \$150,000 to Mercy Corps through quick impact grants for water and sanitation activities and health assistance in Central Sulawesi.

West Timor

Throughout FY 2002, West Timor did not experience any new significant levels of violence. However, toward the end of FY 2002, WFP reported that approximately 30,000 East Timorese remained in West Timor. USAID/OFDA provided \$250,000 to CARE for a nutritional emergency feeding project in West Timor.

General Indonesia

In response to an IFRC appeal for assistance in strengthening the disaster response capabilities of the Indonesian Red Cross, USAID/OFDA provided \$400,000 to UN OCHA through the 2002 U.N.

Consolidated Inter-Agency Appeal for Indonesia. During FY 2002, USAID/OTI provided approximately \$6.9 million through 293 grants to local and international NGOs, for projects that focused on strengthening civil society, civil-military relations, community stabilization, governance, and media outlets throughout Indonesia. In addition, State/PRM provided grants totaling more than \$2.3 million to UNHCR, UNDP, and IOM for East Timorese reintegration, transportation, and local integration programs.

USAID/OFDA Assistance	\$6,669,069
Other USG Assistance	\$9,240,319
Total USG Assistance	\$15,909,388

Indonesia

Floods

Between October 22 and 24, 2001, heavy monsoon rains caused flooding and landslides in the Central Java regencies of Banyumas, Kebumen, and Cilacap. Subsequent rains and the rupture of several river embankments caused severe flooding conditions in greater Jakarta. According to UN OCHA, the overall flooding and landslides caused 57 deaths and displaced an estimated 365,000 residents in greater Jakarta. The floodwaters also inundated more than 10,000 dwellings, destroyed 12,000 hectares of rice fields, and damaged a key rail line.

On October 24, U.S. Ambassador Ralph L. Boyce



A resident of Karawang, Indonesia helps carry livestock to safety during the October 2001 floods (photo by Dr. Krishna Pribadi, Institut Teknolgi Bandung).

declared a disaster due to the damage caused by the flooding and landslides. This disaster declaration was also applicable to subsequent monsoon-related flooding such as the Jakarta floods of January and February 2002. USAID/OFDA provided \$25,000 through USAID/Indonesia to the IFRC and the Indonesian Red Cross for the procurement and distribution of essential relief items to meet the immediate needs of flood victims. USAID/OFDA also provided \$25,000 to CRS to meet additional emergency needs of flood and landslide victims.

In addition, USAID/OFDA provided \$50,000 to Mercy Corps to provide essential non-food relief commodities benefiting flood victims mainly in north and west Jakarta. The USAID/OFDA

funding was used for the purchase and distribution of blankets, water containers, plastic sheeting, tarps, and kerosene. USAID/OFDA also provided an additional \$35,000 to CRS to supply family recovery kits and water containers for flood victims.

USAID/OFDA also provided \$158,780 through USAID/Indonesia to WVI to distribute emergency food commodities, basic survival kits, and clean-up tools to flood victims in the most severely impacted areas. USAID/OTI provided \$60,000 to WVI to procure and distribute emergency hygiene kits to 10,000 affected households.

USAID/OFDA provided an additional \$150,000 to WVI to fund a program to improve water quality,

Supporting Earthquake Preparedness in Asia

In 1950, nearly half of the world's urban earthquakethreatened populations lived in developing countries. By 2000, that number increased to approximately 85 percent. Urban populations in Asia are especially at risk because of major fault lines in the region. In an earthquake, 95 percent of the fatalities occur almost instantaneously as a result of collapsing buildings and flying debris. The level of community awareness, the enforcement of earthquake-resistant construction standards, municipal code development and enforcement, and the level of preparedness of those who are first to respond with assistance, can lessen the severity of the damage and the number of people killed. Community-level preparedness is the cornerstone of USAID/OFDA's activities in targeted earthquake-prone regions of Asia such as India, Indonesia, Nepal, and the Philippines.

The Program for the Enhancement of Emergency Response (PEER) focuses on earthquake preparedness by assisting local, regional, and national agencies in Indonesia, India, Nepal, and the Philippines. PEER courses are organized and conducted in medical first response, collapsed structure search and rescue, and hospital preparedness. PEER was started in 1998 as a collaborative effort between USAID/OFDA, the Asian Disaster Preparedness Center (ADPC), and Miami-Dade (Florida) Fire Rescue. First responders are instructed on how to develop and strengthen

skills that enhance their ability to provide effective and coordinated on-site management of rescue and medical response needs following a disaster. After the initial training, graduates of PEER develop replication courses in their local languages and countries in order to train other disaster management personnel.

The Asian Urban Disaster Mitigation Project (AUDMP), implemented by ADPC, has been operating with USAID/OFDA support since 1995. AUDMP is designed to help reduce the disaster vulnerability of urban populations, infrastructure, critical facilities, and shelter through

Continued on Page 56, "Earthquake Preparedness"



Cities such as Kathmandu, Nepal are highly susceptible to earthquakes in the Asia region (photo by Rebecca Scheurer, USAID/OFDA).

"Earthquake Preparedness," continued

national demonstration projects, information dissemination and networking, policy seminars, and policy training in 10 Asian countries. AUDMP also conducts national demonstration projects in earthquake risk management in Kathmandu, Nepal; Bandung, Indonesia; and San Carlos, Philippines.

Nepal is one of the most seismically active countries in the world, located along the Great Himalayan Range. Urbanization, the lack of zoning in hazardous areas, and uncontrolled development without adequate building codes or safe building practices, have made urban populations in Nepal increasingly vulnerable to earthquake damage in recent years. AUDMP partnered with the National Society for Earthquake Technology (NSET) in Kathmandu, Nepal and GeoHazards International in Palo Alto, California to implement the Kathmandu Valley Earthquake Risk Management Plan to reduce the earthquake vulnerability of the Kathmandu Valley. Nepali masons, who had been taught earthquake-resistant construction techniques, traveled to India following the 2001 Gujarat earthquake to share their knowledge. They assisted Indian masons in retrofitting homes and rebuilding dwellings that had been destroyed. This initial AUDMP-NSET project ended in 2001, but



Schools in Nepal, such as this one in the Kathmandu Valley, were seismically retrofitted by USAID/OFDA partner National Society for Earthquake Technology (NSET) as part of a large-scale earthquake mitigation program in Nepal (photo by David Lillie, USAID/OFDA).

because of its success, USAID/OFDA continues to support this mitigation program.

The NSET project in Nepal disseminates information to public officials and citizens on issues such as earthquake-resistant construction techniques, what to do in the event of an earthquake, and probable damage that may result from earthquakes of varying intensities. The awareness material is distributed via NSET representatives and international NGOs through schools, community organizations, professional associations, and government ministries. NSET materials are also distributed at the annual Earthquake Safety Day on January 15, an event organized and promoted by NSET to raise public awareness about earthquakes in Kathmandu.

In 1950, approximately half of the world's urban earthquake-threatened population lived in developing countries. By 2000, that number increased to approximately 85 percent.

USAID/OFDA further expanded its support in the Asia region through a Central Asia Seismic Hazard Mitigation program. The program emphasizes community-based initiatives to expand local organizational capacity to prepare for, manage, and respond to major earthquakes. Mitigation programs are currently being implemented in Tajikistan, Uzbekistan, and Kazakhstan.

By informing and preparing local communities in earthquake-prone regions, USAID/OFDA minimizes the need for U.S. Government assistance after an earthquake. USAID/OFDA is establishing community preparedness activities, public education campaigns, and training of first responders for the eventuality of an earthquake. Preparedness makes a significant difference in a community's response ability, and can greatly reduce the eventual economic and human toll in an earthquake's aftermath.

—By Olga Bilyk