Accessing IDPs in post-tsunami Aceh

by Claudia Hudspeth

Half a million Acehnese – 12% of the province's population – became IDPs as a result of the tsunami. For humanitarian actors, gaining access was a major challenge. Important lessons can be drawn in order to improve access to IDPs in future emergencies.

Many of the displaced either left the province or were taken in by host families but a significant percentage, often the most vulnerable, lived in makeshift IDP camps in any available space – mosques, schools, stadiums, open fields, on the edges of destroyed villages or on higher ground in territory contested between the Indonesian authorities and the GAM separatist movement. While the international community was able to respond quickly and avoid preventable deaths, there were three main barriers to access in Aceh: physical, informational and 'social'. Overcoming these, while at the same time providing emergency relief to those populations who were more readily accessible, proved immensely difficult.

Physical barriers to access

From the outset it was clear that physical access to many IDPs would be problematic. First, the area of greatest impact – the 200km of coastline between Banda Aceh and immediately south of Meulaboh – was completely inaccessible. The tsunami had washed away roads and hundreds of bridges: a total of 26km of bridging capacity was required. The coastline itself had been transformed, with new sandbars and debris restricting the landing of larger sea vessels. As a result, access was only possible by helicopters and small boats. Ensuring access to IDPs on this coastline thus involved expensive logistical support, complemented by programming staff with solid field experience.

The tsunami response in Aceh led to an unprecedented level of interaction between the UN, NGOs and the military. Military support – helicopters, temporary harbours and specialised landing vessels – proved extremely valuable. However, this support could have been enhanced with improved coordination mechanisms between militaries and the humanitarian community, as well as between the various militaries themselves – at the height of the response there were military units from 15 countries. Although a regional combined military task force was established in Thailand to coordinate military support throughout the tsunami-affected countries, this mechanism could have been complemented by a local military combined task force or early establishment of a civil-military liaison unit (CIMIC).

There was also room for improved liaison between the Indonesian military, which coordinated all military assets, and the international community with regard to information sharing and mapping coverage. In the first few weeks, military assets were largely utilised to airlift in-kind private donations into remote areas. Although this was coordinated by the Indonesian armed forces, there was no clear connection between this immediate response and the strategic information and planning done by the humanitarian sector coordination groups.

In addition, since the air logistics option was available and free of charge other options were not developed. Developing a system to make use of small local boats could have contributed enormously to the livelihood of local fishermen, a group that was particularly devastated by the tsunami. Despite the operation in pre-tsunami Aceh of a local system of ferries to transport people and goods down the coastline, this option was not explored until the imminent departure of the international military presence forced the humanitarian community to investigate other transport options. Re-building local transport systems would have contributed to the local economy and the livelihoods of vulnerable people, invigorated the local transport sector and provided much-needed transport to affected communities. The use of military vessels and aircraft to perform humanitarian functions in conflict zones should always be an instrument of last resort.

Even with the use of helicopters, equitable access to IDPs was not guaranteed. The helicopters were limited to specific landing zones within agreed non-conflict areas, which ruled out access to IDP populations that had retreated to higher ground (often in insecure areas). Furthermore, due to security restrictions, the helicopters were not allowed to set down for extended periods. Ensuring equitable distribution of goods was therefore problematic and in many cases the Indonesian military was responsible for unloading the helicopters and disseminating the relief items. In the absence of a proper distribution system, those IDPs who had settled more than a few hundred metres from the landing zone were unlikely to receive their fair share. Security restrictions meant that UN staff were not permitted to stay overnight on the west coast except for a few restricted areas, thereby limiting their capacity to monitor the humanitarian response.

The devastation on the west coast and the availability of military transport diverted attention from larger and more accessible groups of IDPs elsewhere, particularly those on the northeast coast. A disproportionate amount of time and resources went into reaching the relatively small number of IDPs on the west coast.

Information barriers to access

Simply finding many of the IDPs in Aceh – where they were, and in what numbers – was difficult. Camps were peppered across the main towns of Banda Aceh and Meulaboh, and dotted along hundreds of kilometres of coastline and jungle. In total, there were more than 500 camps ranging from a few families to several hundred families, some in makeshift shelters, others in existing community structures.

There was no single comprehensive humanitarian needs assessment undertaken in the early days. An initial attempt was made to draw up a simple sheet of basic information for implementing partners to gather when out in IDP areas, including location, numbers, general situation and some basic sectoral information. However, this passive form of data collection had pitfalls. It relied on inputs from partners – who often considered information collection a third or fourth priority – and did not offer an overall picture of the situation. A wealth of information was available from accessible areas but very little from anywhere outside greater Banda Aceh.

Injured woman being transported to Banda Aceh for medical treatment.

Several sectoral assessments were undertaken, including one large-scale assessment operated from on board the US Navy warship *USS Lincoln* to gather information about the situation on the west coast, but there was an absence of multi-sectoral assessments. In addition, there were sensitivities about information, particularly regarding the politically-sensitive east coast, and to accessing information being gathered by the numerous humanitarian actors on board the initial military-supported helicopter missions as they conducted relief drops onto the largely inaccessible west coast.

The problem therefore, was not so much an absence of information but rather an absence of comprehensive, multi-sectoral information on the humanitarian situation across the province. Assessment information of many different kinds trickled into the OCHA Humanitarian Information Centre[1], which did its best to consolidate and release this information to organisations in a usable form. Yet it was not until several weeks into the crisis that agencies began to receive a complete picture of IDPs' locations, their condition and their needs. However, despite the absence of perfect information, UNICEF and other agencies put to use what was available, responding quickly and avoiding preventable deaths from emergency killers such as measles and cholera.

Social barriers to access

Many IDPs sought refuge in host families and their 'invisibility' made reaching them a challenge. Although this group did not for the most part require direct emergency assistance, they did require support in terms of getting children back to school,

psychosocial support and tracing programmes to reunite separated children and relatives. Furthermore, over time, IDPs became an added burden to many host families.

Although the international community made some progress in accessing this population, the Indonesian government took the lead role by providing an innovative solution through cash assistance to families who were hosting IDPs. The cash grant was allocated per person, and required IDPs to register with the local humanitarian community post. This programme served to register IDPs, thus facilitating their access to other programmes. It was also possible to gather information on the scale of the problem, and to encourage community support in addressing the thousands of displaced individuals and families. Lastly, the programme provided both a useful mechanism of direct support and a vital injection of cash into the local economy.

For UNICEF, a particular problem of access arose with respect to unaccompanied and separated children. One of UNICEF's major tasks in Aceh involved the registration of separated and unaccompanied children, the tracing of their families and, where possible, family reunification. Yet this was an especially difficult group to access since the majority of separated children were fostered. In contrast to other emergencies, there were few visible unaccompanied children. Given the tragic numbers of children who died in the tsunami – vastly more than any other demo-

graphic group – families were desperate to take in those children who remained. Relatives were nervous and reluctant to identify a separated child, fearing that the child might be taken away. While UNICEF fully supported fostering as a critical support mechanism, it was nevertheless extremely important to register all separated children, both to increase the chances of family reunification and to enable them to access programmes aimed at reducing the financial and care burden they might place on foster families.

Through building networks of local NGOs, UNICEF conducted an intensive campaign of advocacy and liaison with local communities. UNICEF supported local agencies to establish child-friendly spaces and registration centres with community outreach programmes. Local NGOs were more trusted and accepted by the community, and were willing to integrate within the camps to access community structures and local knowledge. Despite this success, however, it would have been possible to reach more children at an earlier stage through identifying and working directly with community structures that were revived within the camps, and through building partnerships with religious networks, including local mosques.

Lessons learned

The Aceh experience suggests ways of overcoming barriers to access in future emergencies. With respect to physical barriers, four key lessons emerge.

1. While the use of military assets can be crucial to an effective response, efforts should also be made to strengthen and utilise local transport means. This can improve logistical support based on local knowledge, bypass security restrictions and rebuild livelihoods.
2. Wherever possible, local distribution systems should be established as quickly as possible using established community structures or the Red Cross/Red Crescent. This will help ensure equitable distribution of relief items according to accepted humanitarian principles, while reducing opportunities for their diversion.
3. Equal consideration and assistance should be given to all IDPs based on strategic information and humanitarian need.
4. In rebuilding damaged infrastructure, efforts should be made to situate critical structures in areas less vulnerable to natural forces.

Experience with information barriers also presents a number of lessons:

- In an emergency with an unprecedented number of national and international NGOs (UNICEF had around 400 partners), the UN Humanitarian Information Centre was critical to information consolidation, analysis and dissemination: the establishment of an HIC should always be one of the first priorities in an emergency.
- Despite some hiccups, information sharing through sectoral working groups was generally good.
- Global Positioning System (GPS) handsets provided by the UN Office for the Coordination of Humanitarian Affairs (OCHA) were crucial to mapping and later accessing more remote and less visible IDP populations: OCHA should ensure GPS is made available in future emergencies.
- The many volunteers who poured into Aceh provided crucial eyes and ears on the ground for gathering information: these less traditional information systems should be used and supported as much as possible.
- *Ad hoc* approaches to assessments should be avoided: where possible a consolidated multi-agency and multi-sectoral humanitarian assessment should be prioritised and undertaken within the first few days to form the baseline for response.
- When military assets are at hand for humanitarian purposes, it is essential to ensure a CIMIC (civil-military coordination centre) is established in the first few days in order to enable access to military resources for assessment purposes and ensure that valuable military information on the humanitarian situation is accessible.

Perhaps most importantly, however, the response in Aceh made it clear that nothing replaces presence. Establishing field offices in more remote areas early on and staffing them with experienced field staff makes an enormous difference to the quality of response.

Accessing IDPs presents a major challenge to the humanitarian community in its efforts to ensure a timely and equitable humanitarian response. Yet as emergencies involving IDPs become more frequent, and the business of emergency response becomes more professionalised, our collective experience is growing. By drawing on this experience and incorporating the lessons learned, we can strengthen our response to future crises.

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1. www.humanitarianinfo.org/sumatra

UNICEF-supported children's centre, IDP camp, Banda Aceh.