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BASELINE SURVEY REPORT

PSYCHOSOCIAL SUPPORT PROGRAM



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1. INTRODUCTION

1.1 Background

Mental and psychosocial implications due to disasters have been overlooked, especially disasters occurred in limited settings. This condition is mainly due to lack of guidelines and resources available to provide mental health assistance and psychosocial support in disaster context (Tarev et al. 2010). In response to this challenge, ***Crisis Centre (CC) provides a community-based programme to build the capacity of local community workers/volunteers to be able to provide psychosocial support for people in their communities.*** In the longer term, this programme aims to build resilience within the community and to minimise mental and psychological implications due to disasters.

This approach has been applied in various limited settings which have a similar social structure as Indonesia, such as Nepal, Sri Lanka, and Philippines (Acharya, Upadhyya, & Kortmann, 2006). This approach also considered culturally relevant and economically efficient in limited resource settings. The effectiveness of this capacity building programme should be empirically measurable. Thus, CC carried out a baseline survey for later comparison of the programme implementation and when programme completed.

1.2 Aims

The aim of this study is to provide reliable baseline information and assess the effectiveness of the programme in building psychosocial capacity and fostering resilience to reduce disaster risks in communities. To achieve these aims, three methods were implemented in the study, which are a household survey, focus group discussions, and interviews.

1.3 Objectives

Generally, there are two main objectives which are:

1. Gathering quantitative data amongst stakeholders in order to measure awareness, knowledge, attitudes, perceptions, and behaviours about psychosocial support programme to build resilience within the communities and to reduce disaster risks.



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2. Gathering qualitative data amongst stakeholders and local people in order to collect additional information about awareness, knowledge, attitudes, perceptions, and behaviours related to psychosocial support programme in their communities.

Specifically, the survey collected data on following categories:

1. Demographic information of communities in project areas
2. Knowledge and perception of disaster risk: the likelihood of disasters in present areas, the risk perception
3. Hazard exposures: what disasters they had experienced, how those affected family members
4. Disaster preparedness in household and community level: knowledge about what individual and community should do when disaster come, early warning system
5. Level of risks awareness
6. Evacuation system: evacuation experiences
7. Knowledge on psychosocial supports: what people know and do to address psychological impacts of disasters

Locations – Name of villages

Cibadak, Bojong Koneng, Sukamakmur, and Karang Tengah, Bogor, West Java



2. METHODOLOGY FOR BASELINE STUDY

2.1. Approach

The baseline study employed both quantitative and qualitative methods. The quantitative methods implemented through a survey used to capture information from community based on a set of indicators in the programme. This household survey used a paper-based questionnaire to interview respondents. Enumerators interviewed base on the structured questionnaire and recorded respondents' answers. One of the advantage employed using structured questionnaire as interview guide is responses are gathered in a standardized manner amongst enumerators. This method is useful to reduce bias. A face-to-face interview potentially increase response rate and allow enumerators to observe the condition of respondents (their house, , their setting, etc).

The qualitative method used to explore and to provide additional perspectives from the survey. Qualitative data collected through a set of focus group discussions with community members as well as recent psychosocial volunteers. In addition, there was a number of in-depth interviews with the key stakeholders of beneficiaries of the programme.

2.2 Ethical Issue

The way the researchers interact with respondents is an important step in establishing a positive relationship and promoting their involvement. Field research conducted after a permit has been obtained from local authorities and respondents. In general, confidentiality and anonymity must be explained. The explanation must be stated very clear about the purpose of the study, who will have access to the data, what will happen to the data when the research is completed.

2.3 Sampling Design

The sample was drawn using purposive quota-multistage cluster sampling techniques in which sample was clustered into village and kampong. Sampling selection procedure for household survey was as follow: (1) set a minimum sample size for each village (N= 100 for each); (2) develop a respondent list based on randomly selected household in selected

kampung. The respondent list in each village selected with equal distribution between genders; genders of respondents were selected based on code number in the questionnaires, which were odd number was for male respondents and even number was for female respondents.

Table 1. Number of Respondents per Village

Village	Gender	
	Female	Male
Karang Tengah	50	50
Bojong Koneng	50	50
Cibadak	50	50
Sukamakmur	50	50
Total	200	200

Population

The study population is people living in four disaster prone villages in Bogor. They could have directly participated in the psychosocial support programme or not.

2.4 Respondent

Baseline survey targeting household with following criteria:

- Head of household: Adult (aged over 18 years) can be male or female adult, who can make decision related to family issues.
- Live in the program targeted areas (spending time or have activity at least 4 days a week at their place).

Respondents for qualitative study were selected purposively in targeted communities.

There were 4 interviews with village officials, 2 FGDs with community volunteers, and 4 FGD with community members (non-volunteer). The criteria of Participants for FGD:

- Adult with relatively the same age level (Its to improve active discussion between participants and to prevent younger participants being passive due to unequal age combination with the elders or community leaders)
- Live in the program targeted areas (spending time or have activity at least 4 days a week at their place).



- Informative and able to communicate their opinions, especially in a group discussion settings.
- FGD for women and men were separated in order to give women more opportunity to speak.

2.5 Implementation Activities

2.5.1 Preparation

There are 3 main activities on this stage: (1) tool development, (2) pilot study to test the questionnaires (it was conducted before enumerators training, to volunteers who have had adequate prior knowledge on the topic of this study), and (3) preparation meeting. This baseline survey used tools that were developed in close collaboration with the consultant with CC. CC provided information of the psychosocial program and its related documentations. The consultant conducted the pilot study and adjusted the questionnaire, when necessary, according to pilot test's result.

2.5.2 Enumerator and Supervisor Selection Process

CC conducted enumerator selection process on 16 May-20 May 2016. There were 12 enumerators who some of them have previously involved in CC programs. By doing so, those enumerators were much easier in understanding the tools and procedure of the study. All enumerators were directly supervised by lead researcher and research assistant.



2.5.3 Training of Enumerator and Supervisor

In close collaboration with CC, the consultant conducted half day training for enumerators (23 May 2016). As part of the training process, a mock survey was conducted.

The half-day training covered:

- The survey methodology and sampling selection.
- Interviewing technique (dos and don'ts).
- The data collection tools.
- Research ethic (the importance of safety, privacy, and maintaining confidentiality)
- Survey procedure (i.e., missing responses, clarifying contradictory answers, the importance of accuracy).
- Training exercises include role-playing, mock interviews, and discussions regarding the research and issues that potentially arise during data collection process.
- Team building, data collection plan, and logistics.

2.6 Data Collection

In the data collection process, consultant conducted following activities:

- Lead and guide data collection team.
- The consultant conducted on-spot quality assurance checks to 5-10% of interviewed respondents. In this process the questionnaire results were double checked to make sure the respondents were interviewed by enumerators.
- Make sure all submitted questionnaires are completely filled out.
- Daily evaluation on collection team and provide a daily progress report, including challenges in the field and actions are taken to address it
- Conducting in-depth interviews and FGDs. All data from interviews or FGDs were taped with consent from respondents.

3. FINDINGS

Demographic Data

Total respondents participated in this study is 404, consist of 103 respondents from Karang Tengah, 101 respondents from Cibadak, 100 respondents from Bojong Koneng and 100 respondents from Sukamakmur.

Table 2. Number of Respondents based on Gender and Age

	Cibadak		Karang Tengah		Bojong Koneng		Sukamakmur		Total
	N	%	N	%	N	%	N	%	
Sex									
Male	62	29	51	24.	64	30	33	15.7	210
Female	39	20	52	26.	36	18	67	34.5	194
Total	101	25	103	25	100	24	100	24.75	
Age									
17-25	14	13	1	1	22	22	17	17	54
26-55	73	70	85	84.	52	52	76	76	286
>55	12	11	15	14.	23	23	7	7	57
Total	99	24	101	25	97	24	100	24.75	

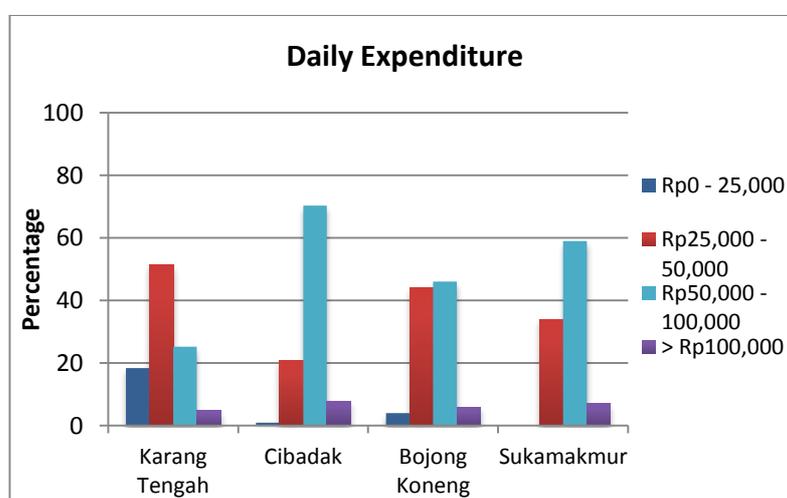
From 404 respondents, 210 respondents are male (52%), and 194 are female (48%). Age of respondents ranged from 17-89 years old. The majority of respondents aged 36-40 years old (N=62, 15.3%). There are 61 respondents (15%) aged 26-30 years old, and 55 respondents (13.6%) aged 41-45 years.

Table 3. Demographic Data of Respondents

	Karang Tengah		Cibadak		Bojong Koneng		Sukamakmur	
	N	%	N	%	N	%	N	%
Education								
Not finished elementary school	61	59.2	36	35.6	45	45	31	31
Elementary school	37	35.9	58	57.4	39	39	67	67
Junior high school	3	2.9	6	5.9	9	9	0	0
Senior high school	1		0	0	6	6	1	1
Diploma	1		0	0	0	0	0	0
Undergraduate or higher	0	0	0	0	0	0	1	1
Occupation								
Government officer	1		3	3.0	0	0	0	0

Private employee	3	2.9	0	0	34	34	2	2
Entrepreneur	2	1.9	16	15.8	10	10	28	28
Farmer	87	84.5	66	65.3	33	33	62	62
Labor	7	6.8	16	15.8	17	17	6	6
Other	3	2.9	1	1.0	6	6	2	2
Size of household								
1-4 people	53	72.6	72	72	62	62.6	64	64
5-8 people	20	27.4	27	27	35	35.4	34	34
> 8 people	0	0	1	1	2	2	2	2
Length of Stay in Current Residence								
1-5 years	12	11.7	19	18.8	9	9	5	5
6-10 years	21	20.4	3	3.0	5	5	9	9
10-15 years	10	9.7	6	5.9	9	9	8	8
>15 years	57	55.3	69	68.3	75	75	78	78

The educational background of respondents is dominated by SD/MI (elementary school) which is 201 respondents (49.8%) from total respondents and followed by non-education, namely 173 respondents (43%). The main occupation as the primary source of income is a farmer, 248 respondents (61.4%), it is followed by an entrepreneur for 56 respondents (13.9%), labor for 46 respondents (11.4%), and private employee for 39 respondents (9.7%). In terms of household size, 106 respondents (26.2%) have 3 family members including themselves, followed by 4 family members with 97 respondents (24%), and 5 family members with 61 respondents (15%). There were two respondents living with 10 and 11 family members, 9 respondents who live by just themselves. There is 279 respondents (69%) have lived in the Village since 15 years ago. There were 45 respondents (11%) of all respondents, who recently lived there, namely at least since 6 years ago.



Daily expenditure of each household was asked to measure economic level of respondent, . The data shows that 202 respondents (50%) spend Rp50,000 – Rp100,000 per day , or around US\$ 4-8 per day. It followed by 152 respondents (37.6%) spend Rp25,000 – Rp50,000 for daily expenditure, or around US\$ 2-4 per day. Only 24 respondents (5.9%) which reported their daily expenditure less than Rp25,000 or about US\$2, and 26 respondents (6.4%) reported that they spend more than Rp100,000 or about US\$8 per day.

Table 4. Home Ownership

	Karang Tengah		Cibadak		Bojong Koneng		Sukamakmur	
	N	%	N	%	N	%	N	%
Ownership of Current Residence								
Own house	70	68.0	82	8	71	71	93	93
Parent's house	22	21.4	2	2	23	23	5	5
Rent house	0	0	0	0	0	0	0	0
Staying with others	3	2.9	16	1	5	5	2	2
Home office	0	0	0	0	1	1	0	0

We can also predict economic reliance of respondents from their home ownership status. Most of the respondents (N=316, 78.2%) have their own house and followed by 52 respondents (12.9%) that live together with their parent's.

Disaster Experiences

Table 5. Kind of Potential Disasters According to Respondent's Knowledge

	Karang Tengah		Cibadak		Bojong		Sukamakmur	
	N	%	N	%	N	%	N	%
What disasters that potentially to occur?								
Flood	2	1.9	0	0	0	0	3	2.2
Landslide	68		57	36.5	94	58.4	75	
Fired	0	0	4	2.6	0	0	0	0
Earthquake	2	1.9	15	9.6	1	0.6	6	4.3
Landslide	24	23.3	66	42.3	41	25.5	38	27.3
Drought	0	0	2	1.3	1	0.6	2	1.4
Tornado	0	0	0	0	22	13.7	1	0.7
Others	1		2	1.3	0	0	1	0.7
None	0	0	7	4.5	1	0.6	9	6.5
Don't Know	4	3.9	3	1.9	1	0.6	4	2.9

The majority of respondents (N=315, 78%) reported that they know potential disasters in their village; whereas only 89 respondents (22%) reported that they do not know about

the potential disaster in their village. In average, respondents who reported that they know potential disasters in their village answered two kinds of disasters, namely landslide (294 respondents, 73%) and horizontally land moving (169 respondents, 42%; respondents mentioned this as landslide also). It followed by an earthquake (24 respondents), none disasters (7 respondents), and fire (4 respondents). In particular, respondents from Bojong Koneng, mentioned that Tornado was another disaster that had occurred in their village.

Table 6. Type of Disasters That Have Experienced by Respondents

	Karang Tengah		Cibadak		Bojong Koneng		Sukamakmur	
	N	%	N	%	N	%	N	%
What disasters that you have experienced?								
Flooding	2	12.5	0	0	0	0	4	5.9
Landslide	5	31.3	20	52.6%	18	24.3	40	58.8
Fired	0	0	0	0	0	0	0	0
Earthquake	0	0	1	2.6	0	0	0	0
Landslide	9	56.3	15	39.5	13	17.6	21	30.9
Drought	0	0	0	0	0	0	1	1.5
Tornado	0	0	0	0	40	54.1	0	0
Others	0	0	2	5.3	1	1.4	2	2.9
None	0	0	0	0	1	1.4	0	0
Don't Know	0	0	0	0	1	1.4	0	0

* *Others: Tanah urug, flash flood (2), lightning (1)*

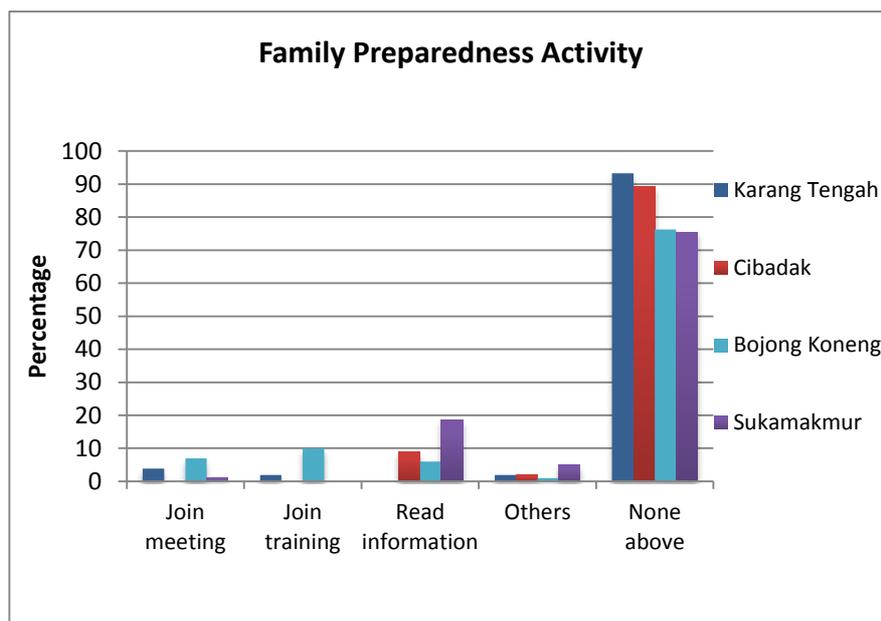
There were 184 respondents (45.6%) reported they never experience disasters in the past year, 162 respondents (40%) reported that they experienced disasters around their living areas, and 58 respondents (14.4%) do not know about disasters occurrence in their living area . From 162 respondents whom reported they experienced disasters around their living areas were able to mention type of disaster with the highest occurrence were landslide (83 respondents, 51%), landslides¹ (58 respondents, 36%), and tornado (40 respondents, 25%). Amongst the 162 respondents, 68 respondents (42%) reported they were survivors , and 92 respondents (57%) reported that they were not survivors of disaster occurred in their living areas.

Evacuated	30	16.7
Death	1	0.6
Injured	1	0.6
Property Damaged	82	45.6
Job Loss	31	17.2
Health Problems	10	5.6
Stress and Safety Issues	10	5.6
Others*	13	7.2

* Others: Field (paddy & plant) destroyed (5), None (6), Undefined (1), Landslide when rain (1)

There were 82 respondents (45.6%) who suffered from their property damage due to disasters, 31 respondents (17.2%) loss their job, and 30 respondents were evacuated from their house after the occurrence of disasters.

Family Preparedness



* Others: don't know (1), Undefined (2), Hearing from neighbors (1), Weekly meeting (1), goes to the field for planting (3)

In relation to disaster preparedness, a question of what activities they and their families have done to prepare themselves in facing disasters was asked. 34 respondents (8.4%) responded that they read information about the disaster, 12 respondents (2.9%) attend meeting about disaster preparedness and 12 respondents (2.9%) attend training on disaster preparedness. Most respondents (N= 341, 83.6%) answered none of above, and



some of them (N=9, 2.2%) chose another activity, such as talking with neighbors (1), join the weekly meeting (1), and went to field for planting (3).

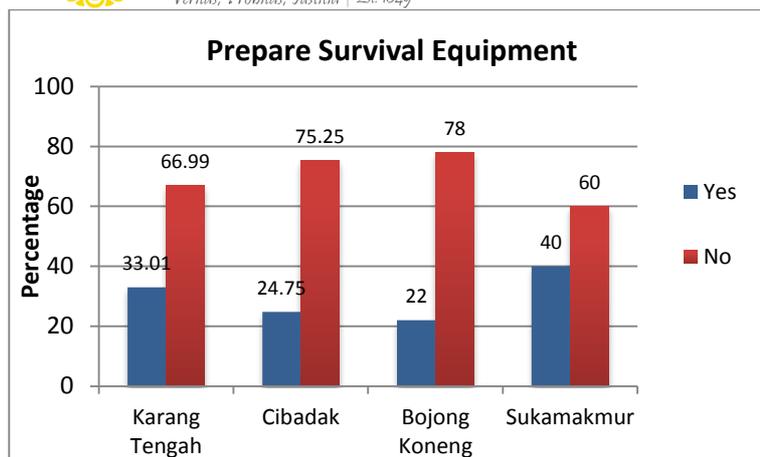
Source of information

Table 8. Source of Information

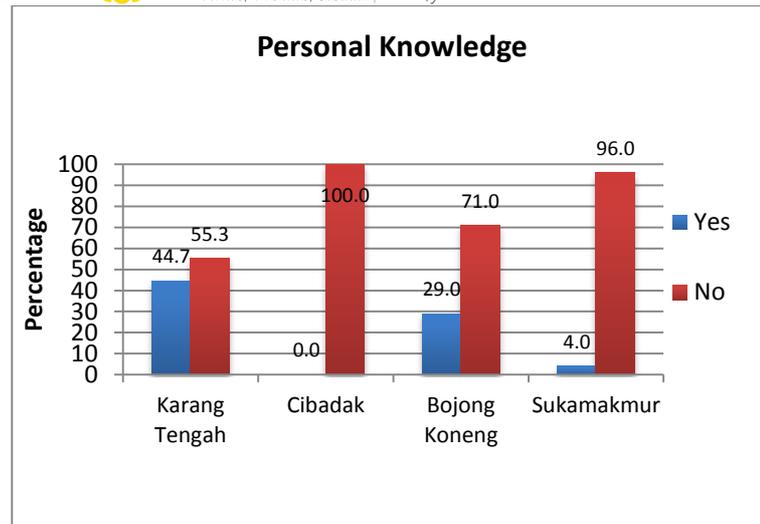
Source of Information	N	%
Socialization from volunteers	81	
Brochures	1	0.2
Television	131	32.4
Radio	0	0
Internet	0	0
Handphone (call/SMS)	6	1.5
Public figure	31	7.7
Government Officer	75	18.6
Neighbors	88	21.8
Others*	4	
None above	86	21.3

* *Others: Hear from another people 1, Undefined 1, From oneself: 1.*

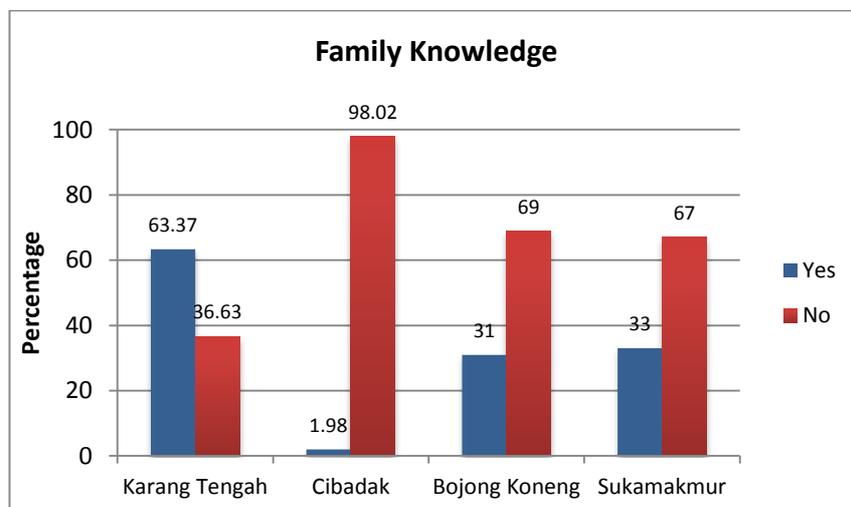
People can get information about disaster preparedness from many resources. In order, to identifies which source of information is the most suitable, the respondents were asked: where did they get information about disaster preparedness. Most of the respondents (N=132, 32.4%) responded they got the information from television. Respondents also obtained information from their neighbors (88 respondents, 21.8%), socialization from volunteers (81 respondents, 20%), and government officer (75 respondents, 18.6%). A limited number of respondents obtained information from brochures (0.2%), hand phone (1.5%), and other sources, such as heard from another people (0.2%), and from their self (0.2%).



Most of the respondents, (N= 283, 70%) reported that they did not prepare survival equipment for anticipation once evacuation needed. 121 respondents (30%) reported that they prepared the survival equipment. From 121 respondents that reported preparing survival equipment, we also asked what kind of equipment that they had been prepared. The Majority of respondents prepared flashlight (N= 60, 50%), sleeping bag/mattress/another mat (56 respondents, 46.3%), and also 38% of the respondents prepared food and beverage (N= 46). The Majority of respondents (N= 231, 57.2%) also reported that they not yet discuss disaster preparedness with their family (Yes= 173, Not yet= 231). Among those who have discussed it reported doing following actions: preparing an evacuation plan for family members (N=121, 60.5%), preparing stuff that would be brought when they have to be evacuated (N=29, 14.5%; e.g., important documents, medicine), and preparing telephone number of each family member (N=14, 9.5%). 13 respondents (6.5%) have divided tasks among their family for evacuation.



Further, respondents were also asked to indicate their knowledge about disaster preparedness. 79 respondents (20%) of all respondents answered “yes” as an indication that they have sufficient knowledge about disaster preparedness, whereas 324 respondents (80%) respondents answer “no” as an indication that they do not have sufficient knowledge about disaster preparedness.



Not differently with personal knowledge, most respondents (N=272, 67.6%) also feel that their family did not really understand and ready for facing the disaster. With more optimistic perception, there are 130 respondents reported that their family’s knowledge on disaster preparation is a sufficient to compare to their personal knowledge, around 32%.

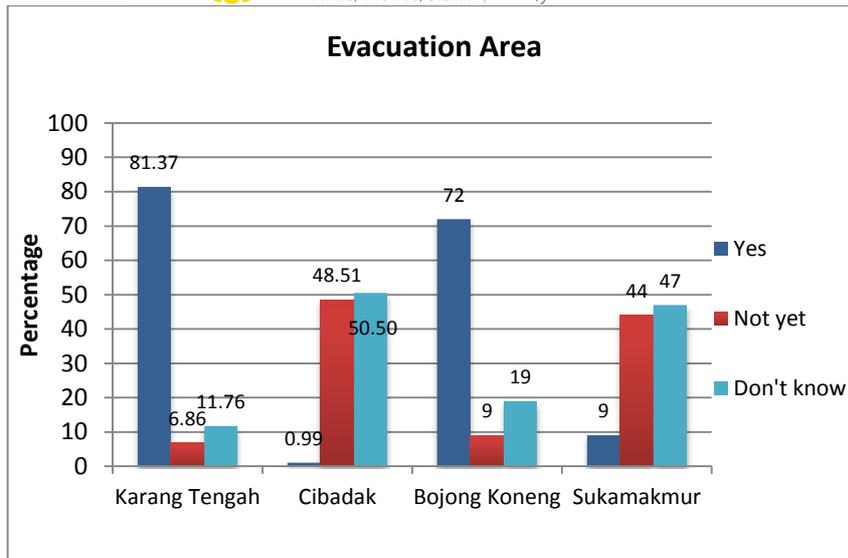
Table 9. Respondent's Responses of Disaster

	Karang Tengah		Cibadak		Bojong Koneng		Sukamakmur		Total	
	N	%	N	%	N	%	N	%	N	%
Responses										
Keep calm and don't be panic	30	29.7	7	6.2	19	15.4	22	15.9	78	16.4
Bring important documents	0		3	2.7	9	7.3	14	10.1	26	5.5
Bring medicine and First Aid Kit	0		0		9	7.3	0		9	1.9
Call important-emergency number	6	5.9	3	2.7	2	1.6	10	7.2	21	4.4
Evacuate family member	60	59.4	38	33.6	81	65.9	73	52.9	252	53.1
Tell neighbors	0		10	8.8	3	2.4	15	10.9	28	5.9
Others*	2		4	3.5	0		0		6	1.3
None	1		3	2.7	0		2	1.4	6	1.3
Don't know	2		45	39.8	0		2	1.4	49	10.3

* Others: Confused 1, Evacuated to safe place 2, Undefined 1, Run 1, Don't have to evacuate 1

When respondents were asked about what will they and their family do when disaster occur, the majority of respondents answered to evacuate the family members (N= 252, 53.1%). 78 respondents (16.4%) chose to keep calm and agree to not panic. Only 49 respondents (10.3%) reported that they do not know what they have to do when disaster occur.

Disaster Response



It is also important in this baseline research to evaluate village system according to disaster preparedness, one of which is assembly point when a disaster occurs. Respondents were asked about the location of safe assembly point. 165 respondents (40.84%) reported that they know the location of safe assembly point which agreed by the community. The slight different number was found if we look the data based on the village. 81% respondents from Karang Tengah and 72% respondents from Bojong Koneng already know the location of safe assembly point for their village.

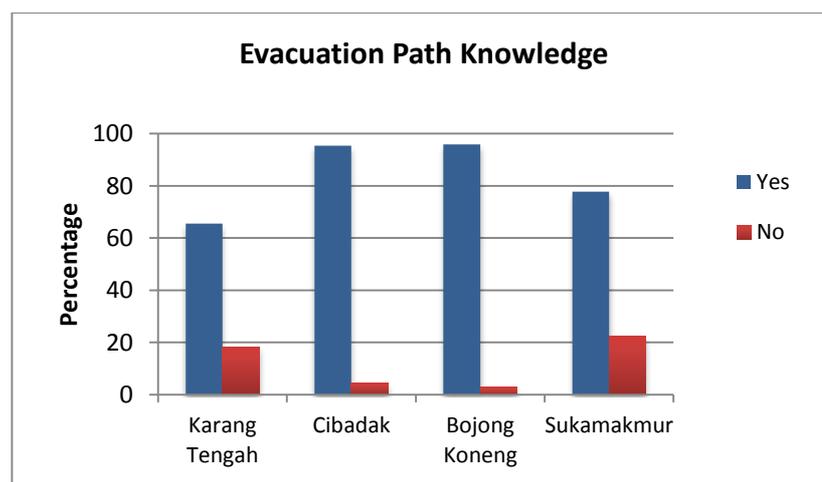


Table 10. Evacuation Area Mentioned

Village	Evacuation Area Mentioned
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Karang Tengah	Pustu PMI (31), SDN 01 Karang Tengah (41), SDN 02 Karang Tengah (6), SD Wangun 1 (2), Kantor Desa (3)
Bojong Koneng	School (18), field (45), Next Village (1), Hill (1), Pak RT's house (2), Curug Road (1), villa (3), Masjid (1)
Cibadak	MI Tarbiyah Falah (5) & MTs Tarbiyah Falah (4)
Sukamakmur	Can't mentioned (1)

Respondents who asked about the location of assembly point mentioned it as school building in each village. Other than that, they also mentioned the field and then Pustu PMI (community health center by Indonesian Red Cross). Respondents also claimed that they know how to go to the safe assembly point, as many as 155 persons. Only 21 respondents do not know how to get there.

Table 11. Condition of Evacuation

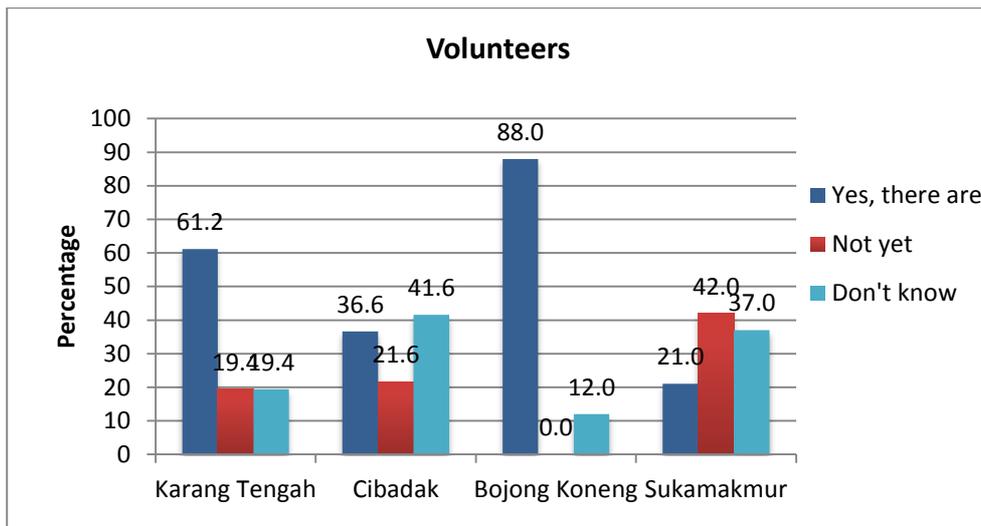
	Karang Tengah		Cibadak		Bojong Koneng		Sukamakmur		Total	
	N	%	N	%	N	%	N	%	N	%
If heard of disaster warning	23	21.9	15	15	64	64	55		157	
If others evacuated	28	26.7	30	30	4	4	21		83	
When disaster come	43		27	27	28	28	19	14.5	117	26.8
After being evacuated by officer	3	2.9	15	15	4	4	32	24.4	54	12.4
Others*	0		5	5	0	0	1	0.8	6	1.4
I don't have to evacuate	8	7.6	8	8	0	0	3	2.3	19	4.4

* Others: confused 1, when landslide come 2, Undefined 2

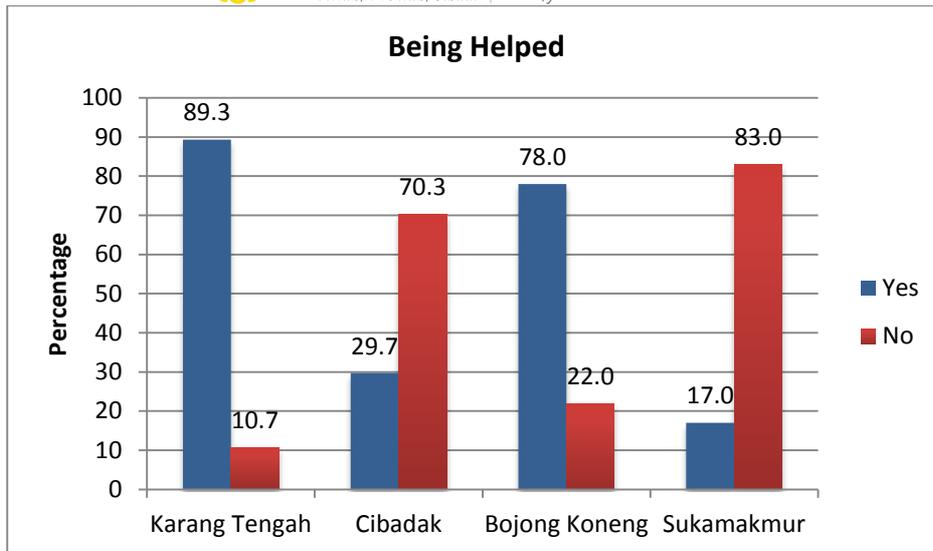
In addition to knowledge on assembly point, respondents also asked about safe evacuation path to the assembly point. Most respondents declared to evacuate after heard the disaster warning (157 persons, 38.9%). 117 respondents (29%) reported that they will start the evacuation after disaster occur, 83 respondents (20.5%) reported to evacuate after their neighbours start to evacuate as well, and 54 respondents (13.4%) reported only start to evacuate if being evacuated by the officer. There are also 19 respondents answered that they will not evacuate if disaster occurred because of various reasons, such as: still feel safe (4

respondents), still feel appropriate to stay (1 respondents), feel not bothered by the disaster (7 respondents), feel sure that will be not impacted (1 respondents), there is no disaster (1 respondents).

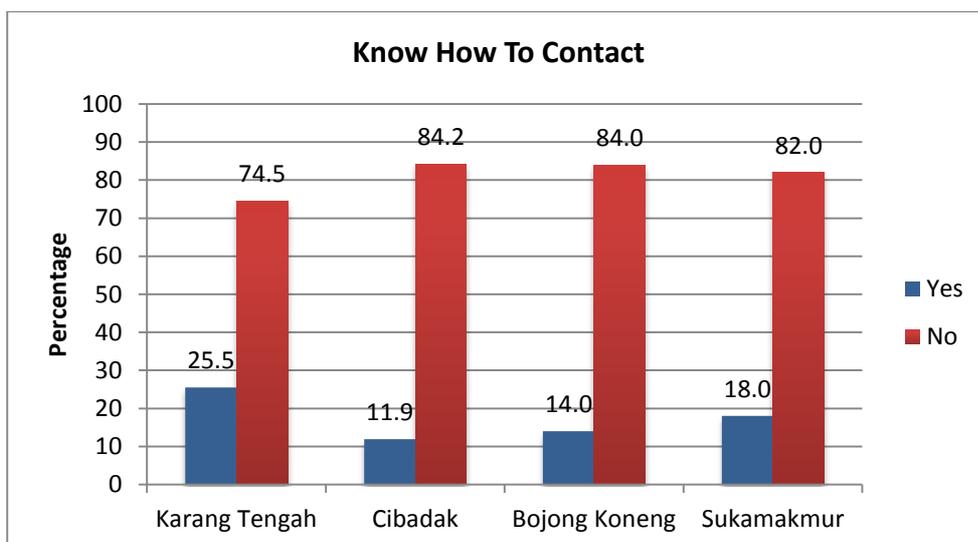
Disaster Volunteers' Evaluation



In total, there were 209 respondents (51.7%) who reported that they have known about the volunteers work specifically on disaster related issues in their living areas. However, there is a group of respondents who reported that their village did not have any disaster volunteers yet: 42 respondents (42%) in Sukamakmur, 20 respondents (19.4%) in Karang Tengah, 22 respondents (21.78%) in Cibadak, but no one said so in Bojong Koneng. It is also important to note that a great number of respondents are still not sure whether their villages are prone to disasters or not: 20 respondents (19.4%) in Karang Tengah, 42 respondents in Cibadak (41.58%), 12 respondents in Bojong Koneng (12%), and 27 respondents in Sukamakmur (27%).



Further questions on disaster volunteers showed that there were 217 respondents (53.7%) who reported that they had been helped by volunteers, whereas 187 respondents responded that they not yet been helped by those volunteers. Qualitative data from FGDs indicated that community members from four villages have known that there are disaster volunteers in their villages. One of the participants in FGD in Karang Tengah, said that there was a volunteer who helped her in a landslide in 2012 by giving her some money. Participants in FGDs in Sukamakmur also said that they have known the disaster volunteers they could reach in case of emergency during disasters.



Although most of the respondents said that they had been helped by volunteers, but only small number of respondents have known how to contact the volunteers. This data as shown in the chart where: 26 respondents (25.49%) in Karang Tengah, 12 respondents (12.37%) in Cibadak, 14 respondents (14.28%) in Bojong Koneng, and 18 respondents in Sukamakmur (18%) responded that they know how to contact the disaster volunteers. However, data from FGDs indicated that communities in all districts realized that they indeed need disasters volunteers in their living area. For them, the main purpose of these volunteers is to deliver assistances during a disaster, such as save their children and/or family members, help them to save their belongings, help them to find funding to rebuild their house, or to give them daily support in evacuation areas. None of them mentioned that volunteers could help them reduce any psychological impacts potentially arise due to disaster occurrence.

In supporting the activities of disaster volunteers, village officers in Bojong Koneng were found took a strategic action by allocating some funding for them. Data from key informant interview indicated that they gave monthly fee (Rp 150,000) for the volunteers. This policy was initiated by the head of the village. The money was taken from local revenue and cost budget (APBD: Anggaran Pendapatan dan Belanja Daerah). Meanwhile, village officers in another village said that they did not have specific budget allocation for the volunteers, but they indeed have some collaboration with external parties to support volunteers works, for example, by training.

Psychosocial Supports

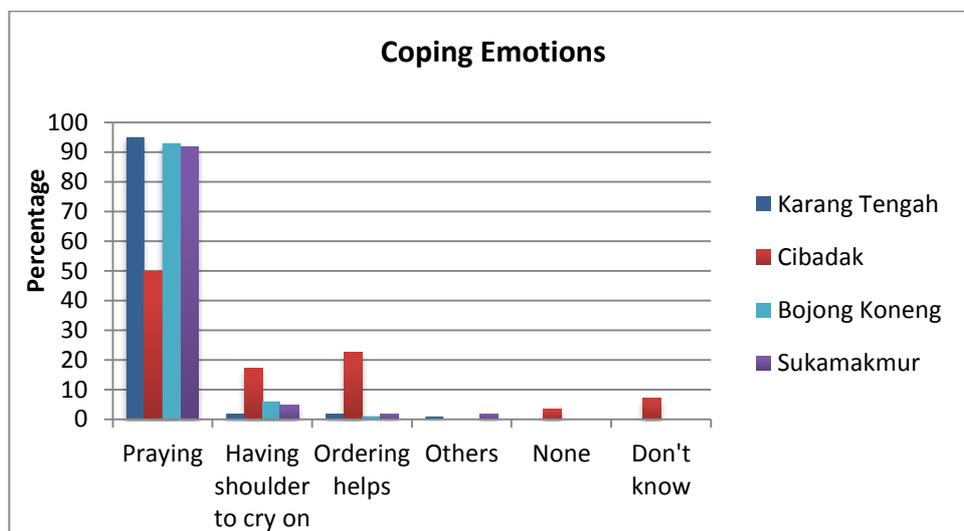
Table 12. How To Deal with Psychological Impacts

	Karang Tengah		Cibadak		Bojong Koneng		Sukamakmur		Total	
	N	%	N	%	N	%	N	%	N	%
Stay together with family and friends	75	71.4	23	22.5	86	83.5	81	76.4	265	63.7
Sports	1		1		0	0	0	0	2	0.5
Take a time to relax	10	9.5	7	6.9	4	3.9	18		39	9.4
Enough sleep	11	10.5	44	43.1	8	7.8	7	6.6	70	16.8
Eating regularly	0	0	21	20.6	1		0	0	22	5.3

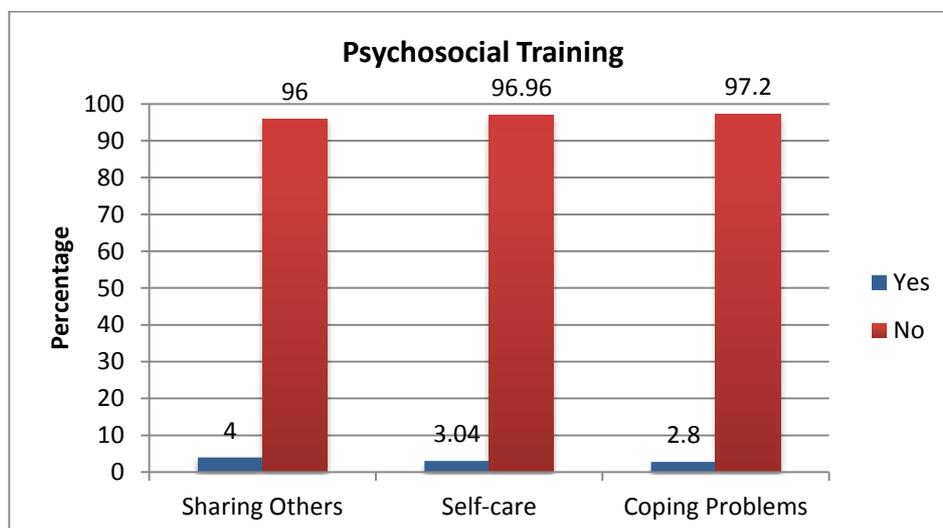
Others (*)	7	6.7	6	5.9	4	3.9	0	0	17	4.1
Undefined	1	1.0	0	0	0	0	0	0	1	0.2

* Others: Reading Al Qur'an: 1, Don't know: 2, Undefined: 3, Walking around:1, Planting: 3, contemplating in Masjid: 1, Undefined: 2, Go to field: 2, go to warnet: 1, harvest the clove: 1

In order to understand how the community deals with the psychological impact of disasters, a question of what kind of activities they did to keep them feel comfort and reduce stress following disaster was asked to the respondents. Most of the respondents answered that it was by staying together with family and friends (N= 265, 65.59%), followed by enough sleep (N= 70, 17.3%) and take a time to relax (N= 39, 9.6%). When the respondents were asked about how to cope with negative emotions, the majority of respondents answered with praying (N= 359, 88.86%).



* Others: contemplating (1), talking with neighbors (1), talking with government officer (1)

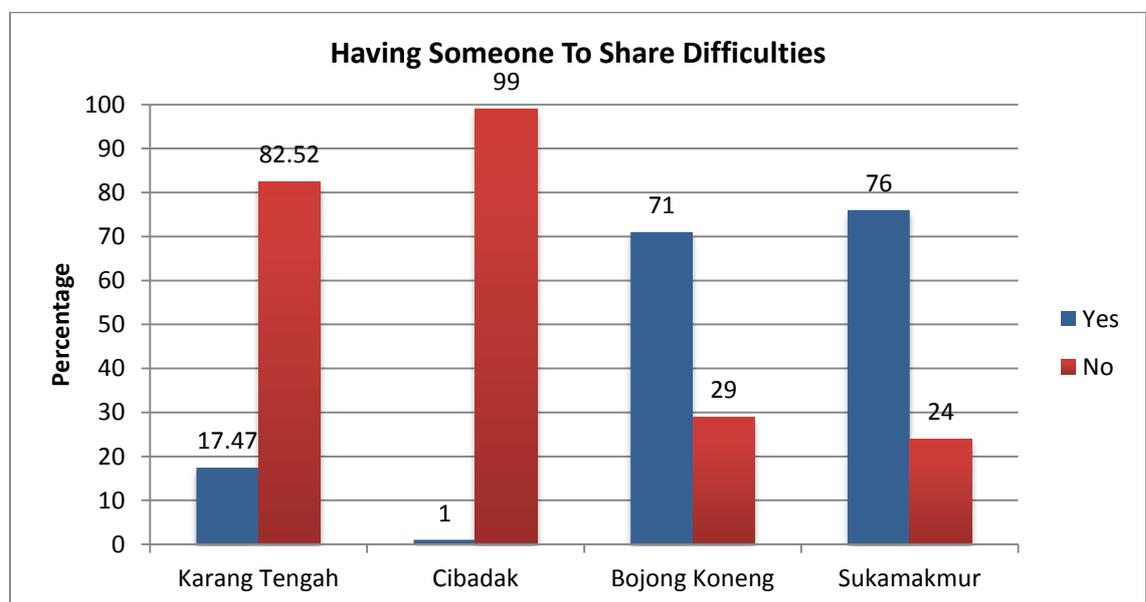


The respondents were asked about whether or not they have received any socializations or read information about Sharing Others, Self-care, and How to Cope With Problems by the volunteers. Data indicated that most of the respondents did not get any of it yet (95%, 94.5%, and 94.5% respectively).

These findings were supported by FGDs, which indicated that communities did not have certain strategies to reduce psychological impacts of disasters. All of FGD participants did not mention any psychological impacts when they were asked about impacts of the disaster. The discussion of psychological impacts emerged after follow up questions introduced, namely “Did you feel any psychological impacts, such as fear, sad, helpless, stress, etc?” Such questions were answered with YES by most of the participants. However, they do not have any specific ways to reduce the impacts.

“I was sad, crying. Just cry. Others also cried” (Woman, Karang Tengah)

“We were afraid, sad. Just sad. No one asked. Because all of us were sad” (Woman, Sukamakmur)



In relation to that topic, it was also confirmed that most respondents (N =237, 58.66%) felt that they do not have any people to share their difficulties and to help comfort them. There were 166 respondents (41.08%) said that they do have someone to share their



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difficulties, such as their spouse, family in general, neighbors, and Public Figure/village officer/RT/RW/staff.



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Conclusions



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The baseline study has two main objectives. First, gathering quantitative data amongst stakeholders measuring awareness, knowledge, attitudes, perceptions, and behaviours about psychosocial support programme to build resilience within the communities and to reduce disaster risks. Second, gathering qualitative data amongst stakeholders and local people in order to collect additional information about awareness, knowledge, attitudes, perceptions, and behaviours related to psychosocial support programme in their communities. The data indicated that there is still limited awareness on the importance of disaster preparedness and sense of urgency on psychosocial support as part of disaster response plan.

Quantitative data indicated that community members did not practice enough disaster preparedness activities despite their sufficient knowledge on potential disasters in their living areas. The data indicated that there were still a limited number of respondents who attended disaster preparedness meetings (e.g., training, seminar, etc), did not prepare survival equipment, not sure on where the evacuation area (particularly in Cibadak), and limited knowledge on what stuff should be brought when disaster occurred. These findings are supported by Qualitative data obtained from a set of FGDs. Based on the qualitative data, it showed that respondents did not have clear information about things they need to do when disaster occur .

In relation to psychosocial support, FGD data indicated that most of the respondents did not mention psychosocial impacts as one of disruptive impacts due to disasters which they need to care about. They even did not mention the psychological impacts disruptive impacts they potentially suffered after disasters occurred. After given follow up questions, some of FGD participants answered that they experience a number of psychosocial impacts. However, they did not sure whether it is important to address those impacts or not. They understand that most survivors should experience psychological impacts at some point after the disaster occurred and these impacts will be abate by the time goes by.

In terms of disaster volunteers, most of the respondents have known that there are disasters volunteers in their living areas. Some of them received assistances from the volunteers. However, most of the respondents did not know exactly how to contact them. Data from FGD indicated that they did not know what are the roles of these volunteers. They



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thought that these volunteers are very important to help them during a disaster and to help them fulfil their personal needs.