



# "DESIGNING" STRATEGIES IN UNCERTAINTY: MANAGING WOMEN'S COLLECTIVE STRUGGLE IN THE COVID-19 PANDEMIC ERA.

A Study on the Large-Scale Social Restriction Policy (PSBB) and Its  
Impact on Women's Constitutional Rights.



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and Its Impact on Women’s Constitutional Rights**

## **“Designing” Strategies in Uncertainty: Managing Women’s Collective Struggle in the Covid-19 Pandemic Era**

A Study on the Large-Scale Social Restriction Policy (PSBB) and Its Impact on Women’s Constitutional Rights

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# Preface

**E**ven though it has been almost a year, the Corona Virus Disease 2019 (Covid-19) pandemic continues to present new, unexpected problems and at the same time enhances pre-existing inequalities. Covid-19 developed rapidly and has spread widely throughout the world, and the World Health Organization (WHO) declared Covid-19 a pandemic on 11 March 2020. This determination has prompted governments around the world to organize their respective emergency preparedness plans to protect the public from the spread of Covid-19. In Indonesia, the government issued Presidential Decree No. 7 of 2020 on the Task Force for the Acceleration of the Management of Corona Virus Disease 2019 (Covid-19) and a number of policies for sectors that were directly affected. However, the measures that the government and other relevant agencies have taken thus far are considered by a number of parties to be slow, inaccurate, and not strategic enough in addressing the short-, medium- and long-term problems and impacts of the pandemic. The communities took some micro and ad hoc initiatives while the impact is increasingly felt not only in terms of public health, but also psychologically, socially, economically, politically, legally, as well as security-wise.

In response to the above context, from March to December 2020 the Indonesian National Commission on Violence against Women (Komnas Perempuan) developed a series of studies on the impact of the Covid-19 pandemic and the corresponding policies for its management on the condition of women. The study began by conducting an online survey on the Dynamics of Change in Households during Covid-19 and a study on the situation of Services for Women Victims of Violence and Women Human Rights Defenders During the Covid-19 Pandemic. In order to better understand the impact of the pandemic and its related management policies on women's lives, Komnas Perempuan conducted FGDs and literature reviews on six clusters of issues, namely security, social security, health, socio-economy, employment, and society and community. The reports of these studies are compiled into this report.

This study is mainly focused on mapping out the implications of policies to manage Covid-19, particularly those related to Large-Scale Social Restrictions (PSBB), to the fulfillment of women's constitutional rights. This mapping can only occur by providing space for women to share their experiences. These experiences are then compiled as a construction of women's knowledge, especially women victims of violence and discrimination. This body of knowledge is then used from monitoring (right of truth), to promote recovery (through policy advocacy, development of recovery and reparation systems), so that it will guarantee non-repetition as well as to minimize long term impact.

Therefore, Komnas Perempuan sincerely hopes that the government and other stakeholders are willing to not only heed this study, but also to consider, adopt, and develop the recommendations presented herewith. Building on women's knowledge and by employing the approach of both the constitutional and human rights of women, further interventions to manage the Covid-19 pandemic are expected to be more effective and on target to overcome the pandemic's impacts and to address the roots of women's specific vulnerabilities in disasters and crisis.

In conducting the series of preliminary study activities above, Komnas Perempuan utilized the state budget whereas the writing this compilation was carried out with donor funds. Komnas Perempuan would like to thank Dati Fatimah, Professor Meiwita Budiharsana, Lia Marpaung, and Nila Haryanti from the Australia-Indonesia Partnership for Justice 2 (AIPJ2) for their guidance on the study and the writing of the reports and policy recommendations, as well as for their support during the launching event and dissemination activities. We are of course also grateful for the hard work of the entire team at Komnas Perempuan, which has made this study possible.

Hopefully, with the course of interventions as proposed in this study and the mutual cooperation of all parties, we can build an Indonesian society that is more resilient and reflects substantive equality, greater than simply rising from the hardships resulting from the Covid-19 pandemic.

Komnas Perempuan  
(The Indonesian National Commission on Violence against Women)

December 2020





# Table of Contents

Preface	v
Table of Contents	vii
List of Tables	ix
List of Charts	ix
List of Figures	ix
Executive Summary	1
<b>Chapter I Gender Narrative and the Covid-19 Pandemic</b>	<b>3</b>
1.1. Introduction	3
1.1.1. Gender and the Covid-19 Pandemic	3
1.1.2. Pandemic Management and Social Restriction Policy	6
1.2. Research Questions	8
1.3. Purpose of the Study	9
1.4. Objectives of the Study	9
1.5. Scope of the Study	9
1.6. Study Methods and Approaches	10
1.7. Limitations of the Study	11
1.8. Outline of the Study Report	12
<b>Chapter II The Covid-19 Pandemic and Fulfillment of Women’s Rights</b>	<b>13</b>
2.1. Double Burden and Care Work	13
2.2. Gender-based Violence and Violence against Women	15
2.3. Women’s Employment and Economic Opportunities During the Pandemic	21
2.4. Reproductive Health During the Pandemic	26
2.5. Gender-based Access to Social Protection Programs	28
2.6. The Right to Protection and A Sense of Security	31
2.7. Online Access and Information for Women	34

<b>Chapter III Government Policies and Responses in Protecting Women’s Rights During the Covid-19 Pandemic</b>	<b>36</b>
3.1. Covid-19 Mitigation Policy	36
3.2. Gender in the Policies to Manage the Covid-19 Pandemic	39
<b>Chapter IV Women’s Resilience in Responding to the Covid-19 Pandemic</b>	<b>45</b>
4.1 The Capacity to Fight for the Protection of Victims of Violence in the Covid-19 Pandemic	46
4.2. Volunteerism and Women’s Solidarity Economy for Others	53
4.3. Public Kitchen: From Domestic Kitchens to Public Kitchens to Save Others	58
4.4. Inclusive Faith-based Movements for Women and Humanity	64
4.4.1. The Covid-19 Pandemic Response from ‘Aisyiyah and Muslimat/Fatayat	65
4.4.2. The Covid-19 Pandemic Response from WHDI & WBI, and Christian Organizations	66
<b>Chapter V Conclusions and Recommendations</b>	<b>70</b>
5.1. Conclusions	70
5.2. Recommendations	74
Bibliography	84
Abbreviations	89
Glossary of Terms	91
Graphic Records of Komnas Perempuan’s Study on the Implementation of PSBB Policy and Its Impact on Women’s Constitutional Rights	94

## **List of Tables**

Table 1. Key Policies in Response to Covid-19	9
Table 2. Regions with PSBB status according to the Ministry of Health's Approval	10
Table 3. Summary of Protocols Related to the Protection of Women, Children and Vulnerable Groups	43

## **List of Charts**

Chart 1. News on Domestic Violence during the Covid-19 Pandemic	20
Chart 2. News Coverage on Reproductive, Sexual, and Mental Health during the Covid-19 Pandemic	29
Chart 3 The Covid Pandemic Response from Aisyiyah and Muslimat/Fatayat	70
Chart 4. Responses from WHDI & WBI and Christian Organizations	70

## **List of Figures**

Figure 1. The Central Government's Social Safety Programs in Response to Covid-19	29
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# Executive Summary

**T**he implications of crisis, including a pandemic, have a very strong gender face. On the vulnerability side, the impact of a pandemic is different between women and men because it is influenced by their access to and control over resources to reduce the impacts, adapt to changes, and ability to recover when dealing with shocks. Pandemics upset economic and social systems, but gender constructs do not automatically change. Strong patriarchal culture means that in a crisis, women and vulnerable groups bear different, and often more severe, impacts. Before the pandemic, the issue of inequality in development was a fact, but the pandemic crisis exacerbated the existing gender disparities.

This study shows that the large-scale social restriction (PSBB) policy as a key policy in handling the pandemic serves in the context that influences the narratives of women's vulnerability when facing a pandemic. Various gender issues on the impact of the pandemic that have been identified include an increase in double burden, the risk of violence against women and gender-based violence, the impact on the economy and livelihoods, and access of vulnerable/marginalized groups to social security. In addition, the pandemic's impact endured by women and vulnerable/marginalized groups also include issues concerning reproductive health including child marriage, the right to sense of security and access to justice, as well as gender gap in the access to information and technology. Indeed, women cannot be defined as a homogeneous group, because their vulnerability will be different and influenced by social status such as economic class, marital status, sexual orientation, age, access to technology and information, etc. Some gender issues are hidden in the private sphere and normalized because this is how gender constructs have always been embedded, taught, and practiced across generations. Whereas some other issues do occur in the public sphere, but they are not yet fully considered as public issues and of interest.

Several policies and initiatives have been taken by the government to respond to the impact of the pandemic. There are numerous good practices that have been carried out by ministries and agencies for the protection of women and vulnerable and marginalized groups. Social security programs and adaptation of public services are examples of the country's response to the pandemic. The government has also issued various protocols for the protection of women and vulnerable groups. However, at the implementation level, there are challenges

that affect policy effectiveness. In addition, there remains to be a note on the extent to which gender has been meaningfully integrated into the policies and responses that have been implemented in relation to the pandemic.

In addition to vulnerability, the study also explores gender-based resilience, and there is evidence of women's contribution and resilience in facing the pandemic. This is well-reflected in how service providers for women victims of violence have adapted to be able to continue to provide protection for victims in pandemic situations, or the practice and development by women of sharing the economy while at the same time promoting a sustainable economy. Likewise, public kitchens and humanitarian responses across faiths also demonstrate women's resilience in various domains and regions. In these narratives, women have succeeded in overcoming various limitations in order to continue to contribute to saving lives and common living spaces. Even in the context of social restrictions, women are cleverly working their way around the increasingly blurred boundaries between the private and public spheres and shaping women's resilience in the pandemic. Although some of this occurs only at a micro scale and is informal and spontaneous by nature, we hope that women's contribution is recognized as an important, undeniable part of building the collective capacity to be able to reduce [the adverse impacts] and adapt and restore livelihoods equitably in the COVID-19 pandemic.

In relation to women's vulnerability and resilience in the pandemic and considering the context of social restriction policies, the study found gender-based needs that should be prioritized in the response to the pandemic. They include practical needs (such as victim protection services, access of vulnerable groups to social security programs and employment opportunities, or reproductive health services during the pandemic), as well as strategic needs (such as strengthening women's leadership and participation in decision-making, accountability in managing the pandemic, and promoting gender-just social norms).

For this reason, the study recommends that the pandemic management policies should: *first*, in the short term, focus on protecting the most vulnerable in order to reduce shocks caused by the pandemic. The short-term focus should be on saving lives and protecting women and vulnerable groups. *Second*, in the medium term, focus on increasing the adaptive capacity and flexibility to deal with changes or impacts caused by the pandemic, by ensuring access and affirmation for women and the most vulnerable. This stage also is part of the transition towards recovery. *Third*, in the long term, focus on transformative pandemic recovery. From a gender perspective, recovery is not only restoring and returning to norms [as it had been before the pandemic], but also encouraging transformation, where recovery is also an opportunity to improve gender-based power relations to become more equitable and just (i.e. building back better).



# CHAPTER 1 | Gender Narrative and the Covid-19 Pandemic

## **1.1. Introduction**

### **1.1.1. Gender and the Covid-19 Pandemic**

Disasters have strong social dimension, especially in relation to vulnerability, which results in impacts that cut across different social stratification (Blaikie et al, 1994). The same disaster could be experienced differently by people of different sexes, social classes, social networks, access to i.e. knowledge, technology, and decision-making. Gender is one of the explanatory variables of why vulnerability to disasters is not natural but rather very social in nature. Due to gender-imbalanced access to and control over resources, women and marginalized groups tend to have a more vulnerable position when faced with disasters. This is evidenced, among others, by the large number of women and vulnerable groups who have become victims of disasters and borne the impact caused by gender issues in disasters (Oxfam 2005, Roberts & Fatimah, 2019). In the tsunami disaster in Aceh, for example, an Oxfam study shows that 70% of the victims who died were women who were late in rescuing themselves because of their gender roles, such as rescuing children, and their lower self-rescue skills because gender constructs had limited them to learning certain skills such as swimming, climbing trees, and driving motor vehicles.

The same trend in which gender affects the distribution of vulnerability to disasters is also believed to be an important variable in understanding the impact of and vulnerability in the Covid-19 pandemic (IASC 2020, UN Women 2020). What might be slightly different is that a pandemic would bring extremely serious impact as it is massive in scale, has very high uncertainty in a very long term, and affects many development sectors. The pandemic has shaken the social structures and systems of society, such as the economic capacity to deal with the crisis, access to knowledge and technology, access to food, social safety networks, as well as the agency and engagement in decision-making processes at various levels. Surveys

in the UK, Germany, and the US suggest that while COVID-19 brings different effects in each country, in general it exacerbates the existing disparities. As an illustration, well-established workers are less likely to be affected compared to the casual or daily workers or those working in the informal sector. Meanwhile, in sectors where remote work could not apply, workers tend to lose their jobs or experience reduced income. Working women who are less educated are also highly vulnerable to being affected by a crisis (Cambridge University, 2020).

In a pandemic, the impact on women and vulnerable groups can be more severe. This happens because although there is a disaster, gender norms and relations often do not change significantly. Strong patriarchal culture has made women and vulnerable groups bear the brunt of the impacts of a pandemic crisis. Before the pandemic, the issue of inequality in development was already a fact, but the pandemic crisis could exacerbate the existing gender inequality. Gender issues arising from the pandemic are expected to escalate, namely the problem of increased burden of unpaid care work, the risk of violence against women and children, negative labelling of women, fulfillment of reproductive health needs, and lack of engagement in decision-making process (UN Women, 2020). The pandemic has also caused problems to women in the informal sector and women migrant workers, reduced access to sanitary needs and adequate nutrition, and a deteriorating standard of living for people who are in need of humanitarian assistance such as displaced people (CARE, 2020).

At the global level, violence during a pandemic also presents a real risk to the marginalized groups, as it is greatly influenced by the shifting in living spaces that have become increasingly limited due to restrictions on mobility during the pandemic. This, for example, can be seen from the increased risk of sexual violence among women refugee groups (UNHCR, 2020). Furthermore, in general, the issue of the risk of violence should also be a concern, considering that in many countries most violence happens in the private/household sphere and that social restrictions could trigger an increase in cases of domestic violence (BBC, 2020).

In response to this, the CEDAW Committee has issued a "Guidance Note on CEDAW and COVID-19"<sup>1</sup>, which expresses deep concern about the worsening inequality and the increasing risk of gender-based violence and discrimination faced by women as a result of the COVID-19 crisis. Therefore, the CEDAW Committee calls on countries to uphold women's rights. Despite having noble intentions to prevent transmission, physical restrictions and lockdown policies can have different implications for women and men, disproportionately limiting women's access to health care, safe shelter, education, work, and economic life. The impact is exacerbated for groups of women and women who are less fortunate in conflicts or other humanitarian situations. Therefore, countries that have ratified the CEDAW convention are obliged to ensure that actions taken to respond to the Covid pandemic do not have direct or indirect implications that

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1 CEDAW Committee, <https://bit.ly/37EEppD>

result in discrimination against women. States also have an obligation to protect women from, and ensure accountability for, gender-based violence as well as to enable women's socio-economic empowerment and ensure their participation in policy and decision-making in all crisis response and recovery efforts.

This global trend is also confirmed in the Indonesian context, as can be seen from the results of an online survey conducted by Komnas Perempuan (2020). Held between April and May 2020 and involving 2,285 female and male respondents, the survey noted how domestic violence makes up the experience of gender-based impacts of the Covid-19 pandemic. There's a tendency of increased violence against women, especially among married women from middle to lower economic background, working in the informal sector, and/or aged between 31-40 years. Unfortunately, most victims do not report the violence they experienced.

Another study also found the impact of the pandemic on the economic status and condition of women in Indonesia (Investing in Women 2020, SMERU 2020). Problems that arise range from the risk of being impacted by layoffs, reduction of working hours and wages, to other implications for women in the informal sector. In addition, the practice of physical and social restrictions, which make work and study activities have to be carried out at home, also posed a challenge for women in reconciling work and family interests. As boundaries between the public and private are merging and the separation between 'productive' work and care work becomes increasingly more fluid, this presents a challenge for women's productive work in the time of the pandemic. Issues that have emerged include, among others, women's double burden that consequently decreases women's economic productivity (SRI Institute, 2020).

Some of the gender issues described above are only examples of the gender-based impacts of the pandemic. The pandemic crisis puts those at the more marginalized social strata at risk of facing a greater impact but with a lower capacity for adaptation and impact recovery. Through gender analysis, the narratives concerning the impact of the Covid-19 pandemic highlight the differences in the situation and effects of the pandemic due to gender construction and its intersection with the existing social structures. Women, especially from marginalized groups such as female heads of household, women with disabilities, women victims of violence, women migrant workers, or women in the informal sector, face the multi-layered impacts of the pandemic. In general, the impacts are influenced by access to and control over resources by individuals or groups. Gender and intersectionality provide a framework as to how the same social phenomenon - in this case the Covid-19 pandemic - has different impacts and narratives for individuals and groups, and has multi-layered impacts on marginalized groups. The crisis that exacerbates gender gap that has existed before the pandemic, in turn, will become a serious problem in ensuring the fulfillment of women's constitutional rights.



This is particularly the case when considering that, unlike crisis caused by disasters, the pandemic crisis is non-linear. This means that a pandemic situation can fluctuate over a long period of time, therefore emergency crisis could come in waves. This makes the regular crisis management and post-disaster recovery approaches cannot be fully used in responding to a pandemic. From a gender perspective, this could have more serious implications for the fulfillment of the rights and protection of women and vulnerable groups because of the continuous waves of crisis and the long duration.

However, the narrative about women dealing with crisis also shows the face of resilience on which the community resilience is based. Experience from various crisis such as past disasters demonstrates women's survivability in dealing with difficult situations (Enarson 2012, Fatimah, 2012). Despite having to deal with multiple gaps and layers of exclusion in disaster management, women are not passive. Through both individual and collective schemes, women become part of actions which show their resilience and hardiness in facing disasters. Efforts to respond to the needs during a crisis, such as the establishment of public kitchens and care for the sick, are clear examples of women's contribution and resilience in times of disasters. Through these actions, women show their capacity and agency in crisis situations, including in challenging the negative views and labels that are often assigned to women. In a crisis situation, care work that was previously associated with work in the private sphere has become a lifeline for the community when such work is organized under women's collective schemes. Through these means, women and their contributions are an integral part of the narrative of community and state resilience in the face of disasters. The same framework can also be seen from preliminary studies on the Covid-19 pandemic, which show that networking, vitality, empathy, and solidarity are the values and binders that link the different contributions of women in facing the impact of the pandemic (Chuzafah, 2020, SRI Institute 2020).

### **1.1.2 Pandemic Management and Social Restriction Policy**

Although Covid-19 has become a global concern, especially since its appearance in the news media in early January 2020, Indonesia's response to Covid-19 was somehow late (BNPB-Universitas Indonesia, 2020). The government only officially announced that Covid-19 had been discovered in Indonesia on 2 March 2020<sup>2</sup>, later than neighbouring countries which already reported confirmed cases among people who had lived and transited in Indonesia. After officially acknowledging the reported cases, Indonesia then followed it up with the formation of a Task Force to Accelerate the Management of COVID-19 on 13 March 2020.

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2 Kompas (2020), *Breaking News: Jokowi Umumkan 2 Orang di Indonesia Positif Corona (Breaking news: Jokowi announces 2 people in Indonesia are corona positive)*, 2 March, <https://bit.ly/322UUu2>

In response to Covid-19, the government issued two strategic policies (BNPB & UI, 2020):

1. Large-Scale Social Restrictions (PSBB), with the aim of limiting the spread of the virus. The policy involves restrictions on people's mobility and economic activities, closures of workplaces and schools, restrictions on gatherings, and enforcement of physical distancing and health protocols, including wearing masks in public places and washing hands frequently with soap.
2. Periodic screening through testing, with the aim of early detection of cases, follow-up on case handling and isolation, contact-tracing, and imposing quarantine for those with contact history.

The manifestation of the state's commitment can be seen from the issuance of several policies related to social restrictions. In summary, some of the key policies issued in relation to the response to the Covid-19 pandemic are as follows.

**Table 1. Key Policies in Response to Covid-19**

Policy	Regulated Aspects
Presidential Decree No. 21 of 2020 on PSBB (Large Scale Social Restrictions)	<ul style="list-style-type: none"> <li>Designation of PSBB at local level, with approval from Minister of Health</li> <li>Criteria for PSBB (such as number of deaths and level of transmission)</li> <li>Scope of PSBB</li> <li>Procedures for PSBB application to the Minister of Health</li> </ul>
Minister of Health Regulation No. 9 of 2020 on the Implementation of PSBB (Large Scale Social Restrictions)	<ul style="list-style-type: none"> <li>The scope of PSBB includes: <ul style="list-style-type: none"> <li>Suspension of schools and workplaces</li> <li>Limitation of religious activities</li> <li>Limitation of activities in public places</li> <li>Limitation of socio-cultural activities</li> <li>Limitation of transportation modes</li> </ul> </li> <li>Restrictions on other activities specifically related to defence and security</li> </ul>

From a legal-formal perspective, there are relatively strict and step-wise criteria and procedures for social restrictions, especially when looking at its implementation at the local level, as regulated in the aforementioned Ministerial Regulation. This has also been criticized because it was considered to complicate and prolong the bureaucracy in a pandemic response<sup>3</sup>. Apart from the legal-formal perspective,

<sup>3</sup> Kompas (2020), *Permenkes tentang PSBB Dinilai Bisa Perlambat Penanganan Covid-19* (Minister of Health's

this study also looks at social restrictions as a policy practice, in which various measures and resources are devoted to limiting people’s mobility, restricting economic activities including workplaces, closing schools, limiting gathering activities, and implementing social distancing and other health protocols. Under the legal-formal approach, large-scale social restrictions (PSBB) shall apply only in a few provinces and districts, as can be seen in the following matrix.

**Table 2. Regions with PSBB status according to the Ministry of Health’s Approval**

Province	Regency/City
1. DKI Jakarta (Special Capital Region)	1. Tangerang City
2. West Sumatra	2. South Tangerang City
3. Gorontalo, and	3. Tangerang Regency
4. West Java	4. Buol Regency
	5. Barito Kuala Regency
	6. Palembang City
	7. Surabaya City
	8. Sidoarjo Regency
	9. Gresik Regency, and
	10. Prabumulih Regency

Whereas using the perspective of PSBB as a practice, the policy to restrict physical and social mobility shall apply in almost all regions in Indonesia, not only in the 4 provinces and 10 regencies/cities above. Indeed, the practice of maintaining distance and limiting mobility will vary from region to region, but in general, every region would have taken some measures in preventing the spread of and exposure to Covid. Therefore, this study adopts a broader approach in looking at social restrictions, both from a legal-formal approach and as a practice in public life and government administration.

## 1.2. Research Questions

This study was carried out to map out the implications of the policies for managing Covid-19, especially those related to Large-Scale Social Restrictions (PSBB), to the fulfillment of women’s constitutional rights.

From the above general question, the following sub-questions may be derived, as follows:

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*regulation on large scale social restrictions are considered to slow down the handling of covid-19*, 6 April, <https://bit.ly/3gLSpBl>

1. How can the government's policies related to large-scale social restrictions and their implementation be viewed from a gender perspective?
2. How, in the context of PSBB, does the pandemic have an impact on the fulfillment of women's constitutional rights? What are the conditions and status/dynamics of fulfilling women's constitutional rights during the pandemic?
3. How do women endeavour and employ tactics through solidarity-based movements in responding to the impacts of the pandemic?
4. What are the challenges and barriers as well as needs and support for the fulfillment of women's constitutional rights during the pandemic?

### **1.3. Purpose of the Study**

1. To identify the impacts of the pandemic in a social restriction setting on the fulfillment of women's rights, particularly in relation to sense of security and freedom from violence and double burden, the right to decent work and economy, the right to reproductive health, the right to access to information and decision-making, the right to social protection, and the right to security and justice.
2. To identify measures and strategies to survive and the solidarity that women developed in response to the pandemic.
3. To identify the needs and challenges in ensuring the fulfillment of women's constitutional rights during the pandemic.

### **1.4. Objectives of the Study**

1. To provide policy recommendations (policy paper) regarding considerations and proposed policy measures for handling Covid-19 that contribute to the fulfillment of women's constitutional rights.
2. To become a reference for the government and other stakeholders in addressing the impact of Covid-19 in the short, medium, and long term, particularly in fulfilling women's constitutional rights.

### **1.5. Scope of the Study**

This study is specifically carried out by exploring and linking various Komnas Perempuan's studies/documentation/publications to be able to formulate an agenda to fulfill the needs of women's constitutional rights during the pandemic, in order to make available a reference in developing state policies with regard to the pandemic.

Some of the operational definitions used in this study are:

- Women's constitutional rights  
The Indonesian National Commission on Violence against Women (Komnas Perempuan) notes that there are 40 women's constitutional rights that can be categorized into 14 clusters<sup>4</sup>. This study, however, focuses only on a number of constitutional rights that are considered relevant in relation to the situation and implications of the pandemic and have become the subjects of Komnas Perempuan's studies and concerns in the response to the pandemic. The constitutional rights discussed in the study are:
  - a. The right to be free from discriminatory treatment on any basis (article 28 I (2)). In this study, it focuses on the issue of double burden and violence against women/gender-based violence.
  - b. Right to work and decent living (article 27 (2))
  - c. Right to health services (article 28H (1))
  - d. Right to social protection (article 28H (3))
  - e. Right to communication and information (article 28F)
  - f. Right to the feeling of security (article 28G (1)) and equitable protection and legal certainty (article 28D (1))
- PSBB (Large Scale Social Restrictions). As described in section 1.1. on the Introduction, the operational definition of PSBB includes both PSBB as a formal-procedural framework (with reference to the Minister of Health Regulation No. 9 of 2020 on PSBB Implementation), and PSBB as a practice. By accommodating these two concepts, this study covers various PSBB implementation practices across regions and is not only limited to the administrative areas that have formally submitted their application and obtained approval to implement PSBB.

## 1.6. Study Methods and Approaches

This study used qualitative approach by way of the following methodology:

1. Stock taking assessment documents/FGD reports/study reports/survey reports produced by Komnas Perempuan. Some of the studies and surveys conducted by Komnas Perempuan include an online survey on household dynamics during the Covid-19 period as well as a survey on service providers for women victims of violence providing

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<sup>4</sup> <https://bit.ly/2Vreg8i>

protection services for victims of violence. In addition, Komnas Perempuan has also organized seven thematic FGDs involving various stakeholders. The seven thematic FGDs are: health, social protection, socio-economy, society and community, violence, service providers for women victims of violence and women human rights defenders, as well as security system. Komnas Perempuan also conducted media analysis, especially for online media. The media analysis study was carried out on approximately 600 online media, mainly to see the trends and algorithms of news and issues in the online media in relation to gender and women issues. With regard to protection and services for women victims of violence, which constitutes its mandate, Komnas Perempuan also provides services of receiving complaints of cases of violence.

2. Desk review of various policy documents on the response to the Covid-19 pandemic as well as other relevant studies to get an overview of the policy for handling Covid-19 and the implications of the pandemic on women in various aspects of development on global, national and local scales.
3. Case studies on women's efforts in coping with the pandemic through solidarity schemes, gathered from the process of extracting field data through offline and online interviews.
4. Limited focus group discussions (FGDs) with Komnas Perempuan to gather input and deepen the analysis of the prepared draft.
5. Limited focus group discussions (FGDs) with the Government and relevant Stakeholders to disseminate the results of the study and validate the recommendations to ensure that they are implementable.

### **1.7. Limitations of the Study**

- The limitation of the study in capturing rapidly changing dynamics of the pandemic as well as the dynamics of responses and policies that could also shift their course and development.
- Due to the pandemic context that sets out some limitations and requires adaptation, the risk of selection bias is highly probable because the study relied on online methods. This includes the risk of not being able to reach groups that do not have adequate access to information technology.

## **1.8. Outline of the Study Report**

CHAPTER I discusses the background of the study by describing the context and problems as well as the urgency of the study, and the aims and objectives of the study and the methods used. Chapter I also explains the scope and operational definitions used in this study

CHAPTER II provides an analysis of the impact of the pandemic on the status and dynamics of the fulfilment of women's constitutional rights, especially in relation to the double burden, issues of violence against women, access to work and decent living, reproductive health, access to social protection, access to the sense of security and protection, and access to information.

CHAPTER III discusses government policies, programs, and initiatives in addressing gender issues and the protection and empowerment for women in dealing with the impact of the pandemic.

CHAPTER IV outlines the narratives of how women develop solidarity schemes to respond to the impact of the pandemic. This section contains 4 case studies that demonstrate the narrative of women's resilience in the pandemic in relation to protection for women victims of violence, the sharing economy, the organizing of public kitchens, and the role of faith-based institutions in responding to the pandemic.

CHAPTER V discusses the conclusions, namely the answers to the predefined problems and the recommendations for Komnas Perempuan, the government, and relevant entities, particularly community organizations/civil society organizations and women's organizations, in ensuring the fulfilment of women's constitutional rights during the pandemic.



## CHAPTER 2 | The Pandemic and the Fulfillment of Women's Rights

**D**ifferent gender roles and space for mobility could expose women and men to different risks and impacts from the Covid-19 pandemic. This chapter describes the narratives of women in dealing with various impacts of the pandemic, particularly those related to the status and fulfillment of women's constitutional rights. This includes the impact of the pandemic on the risks of gender-based violence, double burden, economy, social protection, reproductive health, and the right to sense of security, access to information, and involvement in decision-making processes.

### **2.1. Double Burden and Care Work**

The work-from-home and study-from-home arrangements can bring different implications in the experience and conditions of men and women. Women bring their work to home, but they still have to divide their time and energy to fulfill the gender role related to caring for the children who are studying at home as well as household work that could potentially increase in order to comply with the health protocols for Covid-19 prevention. In unequal relationships, men are not faced with roles and obligations as what women are demanded to. UN Women (2020) emphasizes the importance of interventions to address the problem of increased burden of unpaid care work during the pandemic, including the importance of a gender-responsive social protection system.

Komnas Perempuan's online survey results show that the increased workload is one of the most apparent impacts of the pandemic on women. As many as 2 out of 3 respondents who do household chores admit that there has been an increase in the burden of caregiving during the pandemic. Women devoted more than 3 hours to do care work, which is 4x more than respondents who are men/transwomen/not answering.



In addition, the survey also found that as many as 1 in 3 respondents stated that the increase in workload had increased stress. When comparing women and men, more women reported an increase in household chores, i.e. 70% of female respondents, compared to 49% of male respondents. In addition, 57% of respondents said that the children would help doing household chores. Unfortunately, there is no further information whether the children who helped are both girls and boys, or only a particular sex, e.g. if such chores are shouldered only by girls.

These findings are also in line with a collaborative study conducted by Amnesty International, Oxfam, and UN Women (2020). The study found that lockdowns and school closings on the one hand increase the burden of caring for the children and the elderly, a task which is socially ascribed to women and girls. Apart from caring for the children, women are also assigned to the responsibility of caring for the elderly who are also very vulnerable to being infected with COVID-19. Having their time consumed for care work, limits the opportunities for women and girls for further employment and education. As paid work becomes scarce due to the impact of the pandemic recession, women, given the gender norms, are also more likely to be the ones who have to choose to give up their paid jobs to then take the unpaid care work at home.

The narrative of the pandemic's impact on double burden is also seen in the informal sector which is predominated by women. One of them can be seen in a study in Jogja on the local context during the pandemic, which attempted to track gender-based narratives and impacts on women in the informal sector (Fatimah et al, 2020). The study discovered how double burden is a key finding, where women have to contend with increased workload during the pandemic. Socially, the double burden becomes heavier when physical and social restrictions are put into practice, where all activities must be carried out at home, increasingly blurring the lines between private and public spaces. At home, women carry out activities to earn income, undertake the caregiving role, and take over the roles that were previously carried out by social institutions, especially educational institutions, as women then have to accompany their children to study at home. Maintaining the application of health protocols relies heavily on women, partly because they have to introduce the protocols and how to implement them to children and the elderly, and also because it implies additional workload, such as washing clothes or cleaning household items more frequently. This double burden creates a heavy mental and psychological burden for women. Economically, the workload of nurturing and caregiving takes up a lot of women's time, which makes their remaining time for 'productive' activities even more constrained. It can also lead to erroneous conclusions that could confirm the misguided view that from the economic perspective women are less productive than men.

## **2.2. Gender-based Violence and Violence against Women**

The link between the pandemic and gender-based violence (GBV) has been a concern of many. Along with the imposition of social restrictions during the pandemic, the existing gender inequality and social constructs have resulted in the rapid increase of gender-based violence. The UNDP report recommends concrete strategies and actions to prevent increased GBV in the context of COVID-19. It includes recommendations for services and support for victims of violence, as well as guidance for all policies to consider aspects of gender-based violence (UNDP, 2020). Moreover, there are also reports on the importance of the prevention of and response to the increase in violence against women and girls due to the COVID-19 pandemic. The economic impact of the pandemic and the long-term impact of violence against women and girls are also analysed in those studies. The accumulated insights and experiences provide the basis for formulating solutions in accordance with the conditions of countries affected by the pandemic crisis (UN Women, 2020).

The risk of domestic violence increases when lockdown is imposed, i.e. when women and children are locked at home with the offender who is the closest person, such as husband/father/uncle. Although there has been an increase in the number of calls on domestic violence hotlines in developed countries such as the United Kingdom and the United States, this is not the case with developing countries where women have less access to reporting violence. As an illustration, when the Ebola broke out in Africa, the increase in domestic violence against women was known only after a few months later (BBC, 2020).

This is also consistent with the findings from an online survey conducted by Komnas Perempuan. The survey, which involved 2,285 male and female respondents, found that as many as 80 percent of female respondents within the income group of less than IDR 5 million per month said that the violence they experienced tended to increase during the pandemic. Women who are vulnerable to multiple workloads and violence against women are mainly those with the background of having an income of less than IDR 5 million rupiah per month, are informal sector workers, aged 31-40 years, are married, have more than three children, and live in one of the 10 provinces with the highest exposure to Covid-19. Furthermore, physical and sexual violence increased mainly in households with increased expenditure. Unfortunately, a high number of respondents did not report their cases, and many of them have higher education backgrounds. In addition, nearly 69 percent of the respondents also did not keep the contact details of relevant services to be able to file a complaint about their cases. This shows that technological literacy and economic factors have a major influence on access to protection for women victims of violence.

Furthermore, an online survey conducted by Komnas Perempuan found several important findings related to the risk of gender-based violence during the pandemic, including:

- a. 10.3% of respondents reported increased tensions in the relationship with their partners, with a higher percentage among respondents who were married (12%) compared to the unmarried ones (2.5%).
- b. The relationship tensions with partners are twice higher among couples with the income of less than IDR 5 million than those who earn more than IDR 5 million.
- c. Psychological and economic violence is the type of violence with higher occurrence compared to other types of violence.
  - With regards to psychological violence, 19% of the female respondents reported of having subjected to it (either occasionally or often). Whereas for the males, only 11% reported of having endured it (either occasionally or often).
  - With regards to economic violence, 10% of the female respondents reported of having experienced it (occasionally or often) compared to 5% of the male.
- d. Most of the victims of violence are children, followed by partner and mother/mother-in-law.
- e. The most cited perpetrators of violence are the partner, and the second are the combination of partner and children.
- f. Violence increases during the Covid period (8% women, 4% men) for the group of respondents who are married, aged 31-40 years old, and with an income of less than IDR 5 million.
- g. Informal workers' vulnerability of being inflicted with violence is higher (11%) if compared to formal workers (6%).
- h. 85% of the respondents who reported increased violence in the pandemic era also reported increase in expenditure.
- i. 100 percent of the respondents who admitted to having subjected to sexual violence and 85% who acknowledged that they had experienced psychological and economic violence are those who reported increased expenditure during the pandemic.

Other findings from Komnas Perempuan's survey relate to the access to protection services for GBV victims. The survey found that:

- a. 14% of the respondents claimed that they would remain silent if subjected to various forms of violence, while 13% stated that they would tell their relative, friend, or neighbour; while 10% opted to file a report to a service provider for women victims of violence.
- b. In the group that chose silence or confide in a neighbour or relative, the percentage of married women is higher, and the group is

predominated by respondents with higher level of education (undergraduate or higher).

- c. The low percentage of the respondents who would report incidents of violence shows that data on violence is an iceberg phenomenon, whereby the reported cases are only a fraction of the real numbers.
- d. As many as 68.8% of the respondents claimed that they did not have the contact number of the service provider for victims of violence.
- e. 172 respondents claimed to have difficulty in accessing protections services for victims due to: technology literacy, infrastructure, and internet cost. This is also experienced by respondents who reported increased expenditure during the pandemic.

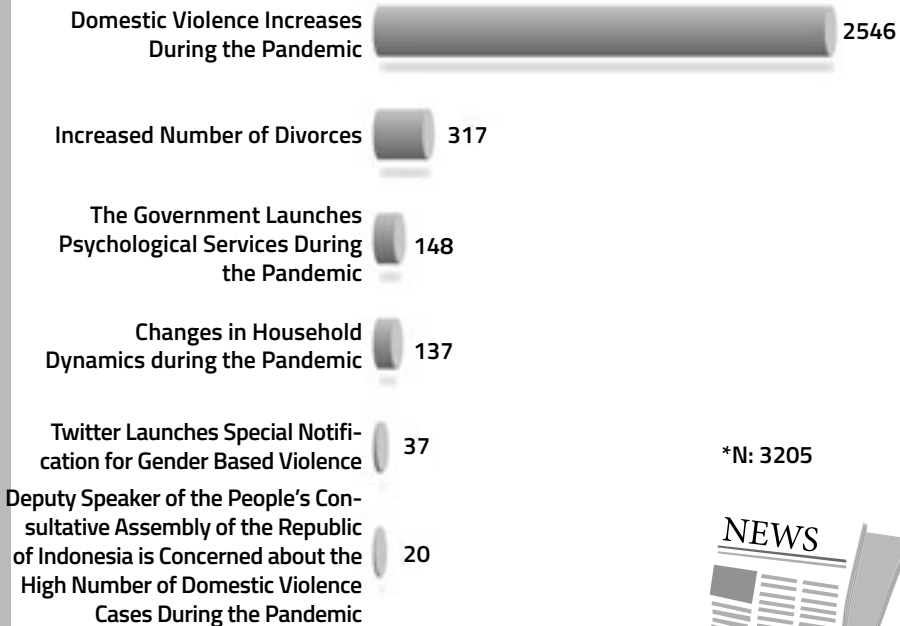
From the above data, a number of conclusions can be drawn: *firstly*, most violence against women occurs in the private sphere/at home. This shows that home is not yet a safe space for women. *Secondly*, the findings of the survey confirm the assumption that economic factor is a factor that propels violence. *Thirdly*, while women's vulnerability to violence have already existed before, the pandemic might increase the vulnerability and risk of violence due to the economic impact and the restricted mobility and confinement at home during social restrictions, which could potentially increase tensions in a relationship in the context of unhealthy family communication.

### **The Dynamics of Cases of Violence During the Pandemic**

One of the concerning data is related to sexual violence, which has been increasing over time. With regard to violence against girls, as confirmed by the data gathered by Komnas Perempuan from 64 service providers for women victims of violence, out of the reported 218 cases of violence against girls, 51% are sexual violence in the form of molestation/incest/intercourse. The same study also found that among cases of violence in public sphere, 45% are rape/intercourse/molestation and 11% are sexual exploitation. The same is also found regarding cases of state violence, where 53% of the reported cases are sexual harassment and 33% are rape. The data confirms that sexual violence has reached the level of gravity that the public should pay attention to.

The issue of violence during the pandemic also emerges in the news coverage of various online media. Media monitoring for the period of 2 March – 13 August 2020 captured the information that news on "Domestic Violence Increases During the Pandemic" dominated the news coverage on domestic violence, with the total exposure reaching 2,546 news. This can be seen in the following graph:

**Chart 1. News on Domestic Violence during the Covid Pandemic**



What is also important to pay attention to is the online gender-based violence. Komnas Perempuan and 64 service providers for women victims of violence recorded 129 cases of online violence against women that occurred during the pandemic. This is also in line with findings from SAFENet, which indicate that online GBV against women has increased by 3 times during the pandemic. Online GBV against women manifests at least in 4 forms, namely: revenge porn (intimate content for revenge), sextortion (distribution of intimate content for extortion), doxing (distribution and sale of personal data), and impersonating (falsifying accounts for defamation).

The aggregate trends derived from data collected by government agencies and civil society organizations show a high number of cases of violence during the pandemic. However, at the same time the recapitulation of cases collected by Komnas Perempuan from various parties shows that there is a downtrend in the number of recorded cases, as indicated in the Study Report on National Resilience (Komnas Perempuan, 2020). One of the explanations for this is that the limited space for mobility during social restrictions in the pandemic has caused limited space and access to schemes for lodging complaints on cases of violence. The Ministry of Women's Empowerment and Child Protection explained that the decrease in the number of reported complaints is the result of the work-from-home (WFH) and the social restriction policy, which made

women victims lose access to reporting cases of domestic violence. This is especially true in areas where communication and transportation facilities as well as infrastructure do not support access to services for women victims of violence. In addition, the WFH policy makes the local service providers for women victims of violence unable to function optimally.

Another explanation for why the issue of violence against women continues to be important during the pandemic can be seen from the mapping of the risk factors for violence. The study report on national resilience prepared by Komnas Perempuan indicates a number of risk factors that contribute to violence against women, namely:

- a. The impacts of the pandemic (both restrictions of movements and social interactions as well as their effects to workload and the economy), affect not only the physical but also the psychological aspect. This has increased tensions, conflicts, and frustrations that previously can be defused by stepping away from home, but this is no longer feasible due to the pandemic. This opens the possibility for cases of violence to occur.
- b. Economic factors, such as husbands who experience layoffs or could not earn any income due to the inability to operate businesses or the lack of social networks; families that do not get any income during the pandemic could experience increased tensions and blame each other, and violence often becomes inevitable.
- c. Another form is a woman/wife who has multiple roles as wife, mother, and online teacher because she has to assist the children when studying at home. This increases women's burden. Meanwhile, parenting also becomes increasingly difficult, partly because the children also experience stress as they cannot leave the house and become difficult to manage. When this happens, parents often commit acts of violence.

Vulnerability to gender-based violence can also multiply among vulnerable groups, such as women with disabilities, as noted in the Stakeholder Consultation FGD to discuss the draft of this study report (Komnas Perempuan, 2020). In the private sphere, many women with disabilities face cases of violence that are often hidden, including sexual violence perpetrated by their closest family members. Meanwhile, social restrictions can amplify the stigma against disabilities, due to physical and social distancing. Access to public infrastructure for people with disabilities had always been limited, and this could be more difficult during the pandemic. The burden becomes heavier because psychological pressures increase stress. Unfortunately, the disabled are still a hidden population, so special sets of studies and data must be sought to capture the narrative of disability and vulnerability in the pandemic.

While the risks and cases of violence during the pandemic tended to increase in some groups, the protection services for victims actually decreased due to the implementation of social and physical restriction policies during the pandemic. Protection services include legal consultation and information services, psychological counselling, litigation and non-litigation assistance, formation of support groups, and the empowerment of women and children's communities. At times, services would be complemented by field visits to reach victims who find it difficult to come to service facilities, as well as coordination with law enforcement agencies and health and social rehabilitation services to build an effective case referral system.

The narratives about how the support persons for women victims must deal with the pandemic, especially during social restrictions, can be seen from the following narratives collected by Komnas Perempuan:

- a. "People are depressed". Victims complain that their husbands are depressed because their work is more in the informal sector; their husbands react to this by committing more physical violence and becoming more brutal. Usually, it had not been very intense, but in June alone, there were almost 20 cases of domestic violence, and they were physical violence with more severity than before. In the past, we usually dealt with cases of infidelity and neglect. Previously there were approximately 5 cases of sexual violence, the domestic violence [was in the form of] neglect and [extramarital] affair, but no physical violence. From late April until now, physical violence is the highest [number]. There had been about 5 cases of domestic violence, but this month of June, by only the 15<sup>th</sup> day, there were already a lot of cases.
- b. "I don't know, (the perpetrator) is her own family member, but it is the family that made or shaped [her into] a woman with intellectual disabilities; s/he instead becomes impatient with their own family thus physical violence could occur. When there is an incident like this, with Covid-19 and with many lockdowns, we (the support persons) cannot step in, especially when everyone is in the house, we cannot meet the victim."
- c. "Covid-19 is an obstacle, the doctors came [but by] 11 o'clock and 12 o'clock they were gone. If you come on Friday, sometimes you have to come back on Monday. We have to adjust to their work schedules".

Barriers to victim protection are also related to the health aspects and victims of violence, as identified by Komnas Perempuan in a series of public consultations. In accessing safe houses, the victims face challenges because they have to provide proof that they are COVID-19 free. In addition, health services for women and victims of GBV are found to be lacking. In response to this, the Ministry of Health

has issued a Health Service Guide for Victims of Violence against Women and Children in the Covid-19 Pandemic. Referring to this guiding document, health workers must pay attention to the steps in handling cases of violence, including:

- Health services and *Visum et Repertum* (medical examination) for victims of violence against women or children should be referred to Non-COVID-19 Referral Hospitals.
- Health workers should be careful in performing early detection of cases of violence against patients/clients.
- Paying attention to clients/patients who have suffered violence before the COVID-19 pandemic, because domestic violence is very likely to recur.
- Improve coordination with networks for handling cases of violence, such as P2TP2A/UPTD PPA (The Local Government Centre for Integrated Services for the Empowerment of Women and Children), Local Government Office of Social Affairs, Police, and NGOs.

### **2.3. Women's Employment and Economic Opportunities During the Pandemic**

The pandemic is causing serious damage and disruption to the economy and labour market. FAO (2020) states that disruptions to supply chain security of food products and decent work is a serious issue mainly faced by informal workers and the rural economy. The Covid-19 crisis also hits the services sector with high social interaction, where women work predominantly. A survey in the UK shows that women are more prone to losing their jobs than men during the pandemic. With closures of day care centres and schools, childcare work tends to be performed by women (CEP-LSE, 2020).

In Indonesia, the impact of the pandemic has hit the livelihoods in many sectors. A SMERU study shows 6 sectors that are potentially affected by the pandemic, i.e. accommodation, food and beverage, trade, transportation, construction, other services, and the processing industry (SMERU, 2020). Some of these sectors are relied heavily by women workers, as indicated by the proportion of women workers in the accommodation and food and beverage sector (58.2%), other services (53.6%), trade (49%), and manufacturing industry (43.1%).

The study conducted by Komnas Perempuan involving various parties also recorded data related to the economic impact of the pandemic, including on women in various sectors:

- a. As of 27 May 2020, the Ministry of Manpower recorded that 1,792,108 workers were affected by COVID-19. About 10% were laid off and 90% were furloughed. In particular, the data on female workers show that during the pandemic 134,424 workers were laid



off and 355,737 were furloughed, and as many as 80,919 women in the informal sector were affected, bringing the total of 571,116 women who were affected. Meanwhile, a more detailed data that has been verified by the Social Security Agency on Employment (BPJS Ketenagakerjaan) shows that 1,058,284 formal sector workers were furloughed, 380,221 formal workers were laid off, while 318,959 informal sector workers were affected by Covid-19.

- b. The figures from the records by the Indonesian Chamber of Commerce and Industry (Kadin) are bigger. As of May 2020, 6 million workers have been laid off and/or furloughed as businesses suffered from lack of cash flow. The details by industrial sectors are: 2.1 million [workers] in the textile [industry], 1.4 million [workers] in land transport [industry], 400,000 [workers] in shopping malls, and the rest are a combination of several other sectors.
- c. This pandemic is also often cited as the reason for unilateral layoffs by employers where workers were not involved in the decision making. KASBI, a trade union, pointed out that with the policy to limit large-scale activities in place, workers were sent home and the majority did not get their full wages. Some were paid 25% to 50% of their usual wages and some were not paid at all. The problem becomes more pervasive when the majority of furloughed workers were women who were workers-in-training or contract workers.
- d. Information from the Trade Union Rights Centre (TURC) noted a more significant impact on informal sector workers, namely the homeworkers whom it provides assistance for. TURC assists 700 active homeworkers, [and] 500 have lost their jobs of which 300 are under the threat of hunger, and many of them do not receive any assistance from government programs. They received no severance pay because the employment relations were established based on verbal agreement, and wages are paid on per piece basis. Thus, the homeworkers are vulnerable because no jobs were available up to 5 months. *“Regarding the informal workers, especially those whom we assist in 6 cities/districts: before the pandemic, they were already vulnerable because they did not have (formal) employment relations. Even in the Labour Law there was not a single article that discusses informal workers, let alone homeworkers. In such vulnerability, exploitation often occurs in terms of wages, decent work, and the deprivation of the women workers’ rights. In the COVID-19 pandemic, [they are becoming] even more vulnerable. Homeworkers in urban areas, apart from relying on wages from their employers, do not have land to work on like in rural areas”.* (N4)

The findings of Komnas Perempuan's study are confirmed by several similar studies. Investing in Women's survey on Indonesia and COVID-19: Impact on the private sector (July, 2020), discovered some interesting findings. This is particularly on the implication of the pandemic on the reduced working hours among women (33.7%) and men (28.5%). As a result, 51.6% of women and 48.5% of men experienced a decrease in income. Afterward, more women (47%) work from home than men (35%). Consequently, this, on the one hand, makes their exposure to Covid transmission lower but on the other hand, women complain about significant increase in the amount of time spent on care work, especially in preparing the dishes and washing.

The impact on the informal sector, which is dominated by women, should also be noted. Data from Statistics Indonesia (BPS) and the Ministry of Women's Empowerment and Child Protection (KPPPA) (2019) shows that the informal sector in urban areas and even more so in rural areas is dominated by women. As many as 47.81% of working women aged 15 and over work in the informal sector in urban areas, while in rural areas the figure reaches 77.8%, making an average of 61.8%. The average figure for men of the same age group is 53.71%. Among sectors affected by the pandemic, the sectors predominated by women workers are accommodation & food and beverage (69.2%), trade (66.5%), transportation and warehousing (59.3%), construction (48.6%), and other services (45.6%) (SMERU, 2020).

For women in the informal sector, the pandemic brings social and economic impacts. The social impact occurs when the gender unjust social norms and the segregation of spaces and roles that have existed before the pandemic grew starker as the pandemic turned into crisis and aggravated women's double burden (especially for unpaid care work). Women in the informal sector suffered from the impacts of multiple burdens, excessive anxiety, risk of violence, problems on their skills and access to digital technology, and the breakdown of the communal schemes that women rely on. In addition, economically, women face the impacts of limited employment opportunities, lesser skills to survive during a pandemic, and the implications of double burden on their productivity, along with low access to economic social security programs (Fatimah et al, 2020).

This finding is in line with the results of the study by SMERU which conducted simulations on the unemployment rate. The study shows that the open unemployment rate increased from 4.99% in February 2020 to around 6.17% -6.65% in March 2020. By sector, the increase was mainly due to reduced employment in the trade sector and its supply chains as well as in the construction sector. Both sectors are dominated by workers with low level of education. Many parts in the trade sector and its supply chain are also driven by women. The report suggests that COVID-19 will further suppress women's participation in the economic sector (SMERU, 2020).

Indonesian migrant workers, with an estimated number of 9 million people, also face vulnerability to the impact of the pandemic. In the 2015-2019 period, there were 266,000 placements of migrant workers per year, where women make up around 60-70% (World Bank, 2017). Migrant workers turned to be essential workers during the pandemic, taking on jobs such as health workers, caregivers for the elderly and children, domestic workers, cleaning janitors, shop attendants, and ship crew. But at the same time, these jobs also put them in a vulnerable position to Covid-19 exposure. These types of work fall into the category of at-risk informal sectors that do not get adequate recognition and protection in many destination countries and are even excluded from the social and economic security systems (UN Women, 2020). The results of a collaborative study between several migrant worker advocacy organizations show that migrant workers, especially those who are undocumented (irregular migrants), have difficulty in accessing health services in 5 destination countries, such as in Malaysia and Saudi Arabia. Meanwhile, documented workers had constrained access due to the physical distancing policy and the employers' prohibition for them to leave the house. In Hong Kong, migrant workers complained about limited personal protective equipment and hand soap at work, so they had to buy their own at high prices due to shortages of supply (Hong Kong Media Release, 2020). Women migrant workers also complained about increased workload, especially for migrant domestic workers, as a consequence of working and learning from home arrangement, as well as the deprivation of time off and the withholding of salary payments with the pandemic as the excuse.

Furthermore, vulnerabilities are not only faced by migrant workers who are currently working overseas, but also by those who are held back and whose departure is postponed because of the Covid-19 pandemic. In an FGD held by Komnas Perempuan, it was revealed that according to the data from the Indonesian Ministry of Manpower, 34,179 prospective migrant workers failed to leave for their post abroad, and to be able to return home they had to pay their own return costs and deposit some money to the recruitment agencies to the amount of IDR 15-20 million (Komnas Perempuan, 2020). Data from the Ministry of Manpower shows that 107,776 migrant workers have returned to Indonesia through independent repatriation and by way of deportation, and it is estimated that this number will continue to increase in line with the prediction on the impact of the economic crisis on migrant workers layoffs.

In terms of the impact of the pandemic from the gender aspect, a slightly different data set is indicated by the social demographic survey conducted by Statistics Indonesia (BPS) on the impact of Covid, which shows that male respondents are more affected by layoffs (3.18%) than female respondents (1.87%). This finding raises the question: which sectors do the male respondents work in? For example, sectors such as construction, which are heavily affected by the pandemic, might contribute to the high number of layoffs due to men's dominance in this sector. Likewise, it may be good to explore further what factors

encourage companies to retain more female workers, such as the economical consideration that women are paid with lower wage or given less side-benefits. In addition, the survey also shows interesting findings because 44.67% of the male respondents and 38.55% of the female respondents suffered from a decrease in income due to the pandemic. It might be beneficial to conduct a more in-depth study on how the adaptation to the pandemic economy is better demonstrated by the female respondents, where the conditions that contributed to this interesting data set can be further examined.

Going forward, the economic and employment issues would be ensuring that the (prospective) workers take into account the Indonesian labour market landscape, especially because the number of new hiring would be lower than the number of laid-off workers, with preference for workers who have high-productivity and capability to take up multiple roles, and the need for skilled tech workers. In this context, it should be taken into account that outsourcing and contract work will be the preferred options among businesses. In the above conditions and as a result of the pandemic, there are risks that women will have fewer opportunities to gain equal access to and benefits from employment opportunities and economic development.

### **Disability, Work, and the Pandemic**

The implications of the pandemic are also experienced by people with disabilities. Prior to the pandemic, their access to job opportunities has been very limited, especially due to the social stigma that people with disabilities do not have the skills needed in the labour market as well as the various social implications of exclusion and the low access to education and public infrastructure that is not yet inclusive.

The impact of the pandemic on the economy and opportunities for decent work for people with disabilities can be read in a report prepared by the Disabled Persons Organizations (DPOs)'s Network on Covid19 Inclusive Response (2020). This study involved 1,683 disabled respondents. Apart from 250 respondents who were not in the productive age range, 665 did not have any economic activity before the pandemic. Meanwhile, for those who do, the majority (76.5%) were informal workers working in the service sector (beauty salon worker, tailor, therapist, masseuse), trade (shop, grocery store, traditional market, angkringan or mobile food shop, etc.) and casual daily laborers. During the pandemic, a decrease in income was experienced mainly by people with disabilities who work in the informal sector, and especially those with multiple disabilities. Another impact is the loss of job, which also intersects with gender. This can be seen from the study data which shows that the proportion of female respondents who lost their job was higher (21%) than that of men (16%).

In addition to the above impacts, people with disabilities are also faced with difficulties in paying their credit instalments and monthly electricity bills. As many as 80% of the respondents who experienced a decrease in income reported difficulties in buying basic foodstuffs, 44% had difficulty paying debt instalments, and 43% had difficulty paying electricity and water bills. What should be a serious concern is that there are but very few people with disabilities who have savings or relationships that can be relied upon when experiencing difficulties. The study found that 94.36% of respondents said they did not have either savings or other people they can rely on, and only 2.3% of respondents said they could survive on savings, and 1.95% said they had someone else they could rely on.

#### 2.4. Reproductive Health During the Pandemic

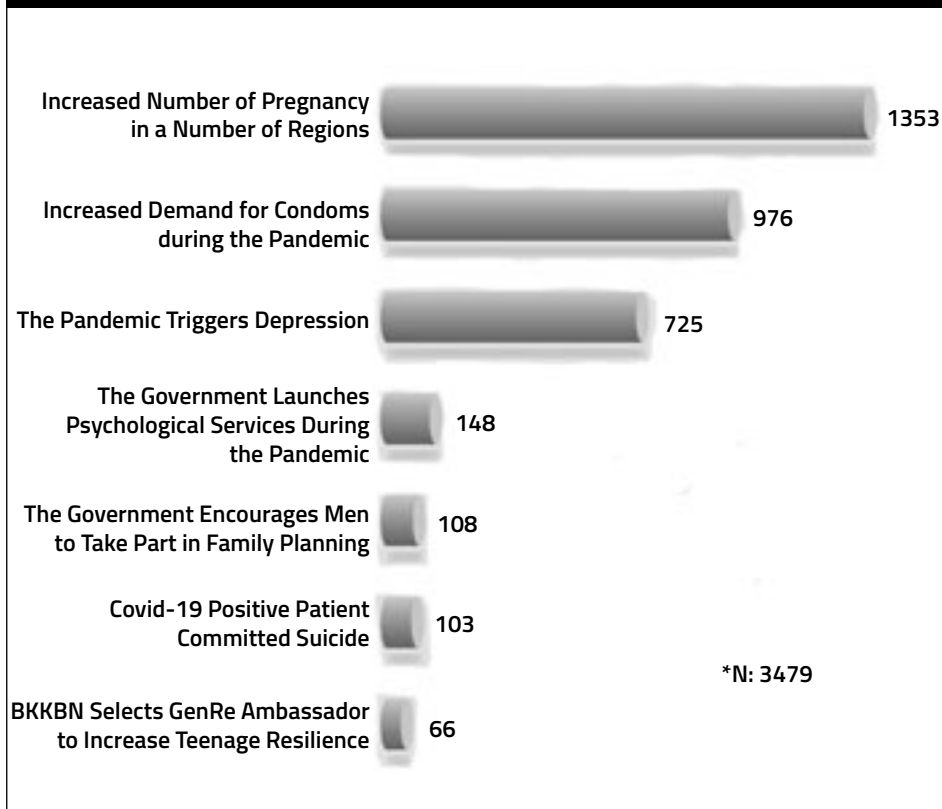
One of the needs that is frequently sidelined in a crisis pertains to women's reproductive health. This particularly happens in a pandemic situation, where the health service priorities are being focused on handling the pandemic, while health system capacity in developing countries is not fully adequate. This prioritization leads to various reproductive health problems as a result of the decreasing services for reproductive health. The National Population and Family Planning Agency (BKKBN) estimates that unplanned pregnancies could potentially increase, especially because of delays in contraceptive services, hesitation to check reproductive health at health facilities because of the risk of Covid-19 transmission, as well as due to a decrease in the number of family planning services<sup>5</sup>. This condition worsens the status of women's reproductive health, because even before Covid-19, many women could not access reproductive health services.

Further records from BKKBN show that at least 10% of productive age couples no longer use contraceptives in the period of March to April 2020. This gap-use was identified in seven types of contraceptive devices/methods and medicines, namely intrauterine device, injections, pills, condoms, implants, tubectomy, and vasectomy. The number reaches 2.5-3 million contraceptive users. Under this situation, BKKBN predicts that there will be an increase in pregnancy rates by 15%<sup>6</sup>. The issue of increased pregnancy rates also dominates media reports on Reproductive, Sexual, and Mental Health with the total exposure reaching 1,353 news stories.

5 Kompas. *Penjelasan BKKBN soal Kehamilan Meningkat di Tengah Pandemi Covid-19 (BKKBN's explanation on increasing pregnancy rate during covid-19 pandemic)*. <https://bit.ly/2RBYe9z>

6 CNN. *BKKBN Minta Warga Tunda Kehamilan Selama Pandemi Corona (BKKBN asks citizens to postpone pregnancy during corona pandemic)*. <https://bit.ly/2Hd9O9d>

**Chart 2. News coverage on reproductive, sexual and mental health during the covid-19 pandemic**



Reproductive health issues are also closely related to the risk of child marriage. The pandemic situation, in fact, is one of the factors contributing to the increase in child marriages. The Ministry of Women's Empowerment and Child Protection (KPPPA) stated that there had been an increase in child marriages during the pandemic by 24,000. This data is presented by the Ministry based on the data obtained from the Directorate General of Religious Courts<sup>7</sup>. Economic pressure as a result of the pandemic and moral views (especially on concerns about fornication) are assumed to be part of the main reasons why child marriage is seen as a solution to the situation. The illustration can be seen in the media quotes in the following box.

<sup>7</sup> Detik. *Kementerian PPPA Sebut Angka Perkawinan Anak Meningkat di Masa Pandemi Corona (Ministry of Women's Empowerment and Child Protection states the increasing number of child marriage during corona pandemic)*. 11 June. <https://bit.ly/3hHxjds>

## The Pandemic and Child Marriage

Hundreds of cases of child marriage were reported during the Covid-19 pandemic in Indonesia. Apart from the excuse of “avoiding fornication”, child marriage is also driven by economic hardship. “Very regretful, such a regret” said Eni, not her real name, a resident of a village in West Nusa Tenggara province, whose daughter had just married last May. Last week, on a Saturday night, Eni was lamenting how she was anxious about the fate of her daughter, Mona (not her real name), who became someone’s wife at the age of 14.

“Mona [said] that she wanted to get married after graduating from junior high school. I forbade her and said, ‘if you are already established then you can marry’. But the two of them were headstrong.” If not allowed ... [they said] rather than being embarrassed, you would be embarrassed as you would be the talk of the people in the village. [We are] already together, going everywhere like husband and wife ... “Eni told BBC News Indonesia over the phone.

The pressure made Eni give her blessings to her daughter’s marriage which was held in a religious ceremony and “witnessed by many people.” Mona is now living with her husband. She no longer goes to school, while her husband recently got an informal job with an income below the provincial minimum wage. Quoted from the BBC (2020, 25 August) Covid-19: ‘Ratusan kasus pernikahan anak terjadi selama pandemi’, orang tua ‘menyesal sekali’ dan berharap ‘anak kembali sekolah’ (Hundreds of cases of child marriage occur during the pandemic, parents ‘vey regretful’ and expect their children to return to school). <https://bbc.in/3kMqTp9>

## 2.5. Gender- based Access to Social Protection Programs

Referring to Law No. 40 of 2004 on the social security system, social protection is defined as a form of protection mechanisms to ensure that all people can fulfill their basic needs to live decently. Social protection is also stipulated in Law No. 11 of 2009 on Social Welfare, which defines social protection as an institutionalized scheme to ensure that all people can fulfill their basic needs for decent living.

The government has announced seven social safety net programs to reduce the impact of Covid-19 for marginalized groups. The seven “magic” moves are the Family Hope Program (PKH), Labour Intensive Work for Cash (PKT), Direct Cash Assistance (BLT), Staple Commodities Assistance Card (*Kartu Sembako*), Competence Development for Job Seekers Card (*Kartu Prakerja*), electricity subsidies for selected groups, and special social assistance in the Greater Jakarta

area (Jabodetabek)<sup>8</sup>. The description of the seven social protection programs can be seen in the following figure<sup>9</sup>

**Figure 1. The Central Government's Social Safety Programs in Response to Covid-19**



Prior to the pandemic, a variety of social protection programs had been implemented by the government. Program adjustments were made to respond to the pandemic, among others, in the form of increasing the number and the amount of cash delivered through Family Hope Program (PKH) and Non-Cash Food Assistance (BPNT). The government also issued a competence development program for job seekers, a flagship program of Joko Widodo's administration for the 2019-2021 period. Meanwhile, to respond specifically to the Covid pandemic, new buffer programs include the electricity tariff subsidy program, credit payment relief for the informal sector, and the appropriation of the Reserve Budget for procuring basic necessities. However, according to Prakarsa (2020), despite having issued various social protection policies, one thing that has been missing is the unconditional cash assistance, a very important scheme to cushion the impacts of a crisis such as a pandemic. This scheme is needed because the rapid and massive

<sup>8</sup> Kompas (2020, 8 April). *7 Jurus Sakti Pemerintah untuk Jaring Pengaman Sosial Atasi Dampak Covid-19 (7 government's magical steps in social safety nets to solve impacts of covid-19)*. <https://bit.ly/3jaoPqC>

<sup>9</sup> Covid19.go.id, <https://bit.ly/2FTj3uM>



impacts of the pandemic require cash assistance to be provided unconditionally, especially to maintain a decent standard of living and people's purchasing power, and should be targeted to all levels of society.

Although on paper the social protection program framework is relatively comprehensive, its implementation on the ground is faced with a number of challenges, especially concerning access for marginalized groups. Komnas Perempuan's records show various barriers faced by marginalized groups to access social protection programs, which can be seen in the following description:

- Access for transwomen. The main problem is the difficulty in accessing social assistance because access is constrained by the fact that the Resident Identity Card (KTP) does not acknowledge the nomenclature for their identity. This poses a significant obstacle in recognizing the rights of transwomen as citizens, including in accessing social protection programs.
- For people with disabilities, the challenges are related to the limited functioning of the social welfare institutions/centres/facilities for persons with disabilities. This condition brings a domino effect on the quality and quantity of services for families and communities.
- Challenges during the pandemic also include data collection process to register people with disabilities and women in the informal sector such as homeworkers. This was confirmed by one of the participants in an FGD organized by Komnas Perempuan to examine the pandemic's impact on the economy and employment. *"The homeworkers who could not feed themselves are in Muara Baru, Kapok, and Pademangan. We try to help because they did not get [any assistance] from the government because they are not registered, or even if they are registered, they do not get the social assistance. The employers no longer give [jobs] for them. They also find it difficult to access government programs because some of them are migrants. Some already have Jakarta Resident ID Card but they do not have a house, only renting [accommodation] so that it is difficult for them to access government assistance".*
- The issue of access to social protection programs was also described, for example in relation to the access to the job seeker competence development program (*Kartu Prakerja*) which is not easily accessible for the marginalized groups such as laborers. The problem is, this scheme has to be accessed online, and this is not easy for labourers. Resource persons in the FGD conducted by Komnas Perempuan said that one of the challenges in accessing the online trainings was the requirement to make a CV (Curriculum Vitae).

However, a positive aspect that should be appreciated is that the social security program schemes during the pandemic have started to consider the

aspects of gender and protection for women. This can be seen from aid packages for women that are divided into general category and specific category for elderly women. The package provided for women in the general category includes: milk to strengthen bones, sanitary napkins, ½ dozen masks, liquid hand soap, cleaning gloves made of rubber, disinfectants, vitamins, and flyers. Meanwhile, the package for the elderly women category includes: milk for the elderly, sanitary napkins, ½ dozen masks, liquid hand soap, cleaning gloves made of rubber, disinfectants, vitamins, and flyers.

## **2.6. The Right to Protection and A Sense of Security**

The issue of security and its implications for women's rights is one aspect that needs attention in a crisis situation. The strong security approach in handling Covid can be seen from the role of the Indonesian Military (TNI) in the distribution of medical assistance and basic necessities. The role of the military is based on the Law on TNI, where the military also has non-military functions in an emergency situation. Online mass media monitoring conducted by Indikator Indonesia for Komnas Perempuan between 2 March – 13 August 2020 shows a lot of media coverage on the non-military role of the TNI during the pandemic. This can be seen from news about *TNI Manunggal Membangun Desa*, a program where the military helped in village development in various regions, which dominated the news on National Defence with a total exposure of 103,533 news.

The dominance of security approach can also be seen from the role of the State Intelligence Agency (BIN) that takes part in organizing rapid tests<sup>10</sup> and in the clinical trials to discover Covid-19 vaccine and medicine<sup>11</sup>. Such arrangements become a source of concern related to its implications to the security sector reform that started since the onset of Reform era (Komnas Perempuan, 2020). The primary concern is that such involvement, without due care, could run the risk that the security and intelligence agencies are positioned in situations where human rights violations could potentially be perpetrated. This concern has been raised by many civil society organizations, including Komnas Perempuan. Such risk may weaken the protection for women in a situation where the pandemic crisis already increased many other risks, such as violence, double burden, and economic and social impacts.

Aside from that, the government has adopted an early release policy under an assimilation program for at least 40.020 prisoners, with the objective to prevent the spread of Covid-19 in penitentiaries. The policy faced resistance from the citizens because it unsettled the public. The discussion on the pros and contras of the policy can be traced in online media coverage, where the work by Indikator

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10 <https://www.merdeka.com/peristiwa/rapid-test-ke-16-bin-di-surabaya-228-warga-ditemukan-reaktif.html>

11 <https://www.liputan6.com/health/read/4291691/bin-ungkap-alasan-di-balik-keterlibatan-pembuatan-obat-covid-19>

Indonesia shows that this topic dominates news coverage on Prison Inmates with the total exposure of 20,808 news in 2 March – 13 August 2020.

There is also a concern that the social and economic effects of the pandemic may be a factor that promote radicalization.<sup>12</sup> The views of extremist groups on the Covid-19 pandemic can be categorized into three groups (Komnas Perempuan, 2020): the pandemic as a plague thus opting to abide by the large-scale social restrictions, the pandemic as a sign of the end of times which triggers two opposite reactions namely staying at home or undertaking *hijrah* (a move to a better situation for the sake of God), and the extremist groups that see the pandemic as an opportunity to strike the enemy and launch acts of terror. This threat is also evident in the fact that already the security forces has arrested several groups that committed acts targeted at Chinese minority groups. For example, the arrest of the Zulfikar group (that used the issue of economic resentment and the end of times) and the Duhair group (that used the issue of communism and the end of times).

The issue of security and terrorism can also be viewed in relation to women's involvement in acts of terrorism. This issue has a long history, which could be traced back to the Darul Islam case. Initially women did not take central roles in acts of terrorism, but their roles have developed over time. In the past few years, it is evident that women have taken increasingly important roles in the movement, such as the case of the women's network in Suja, where women take the role as financial backer. The government (especially the National Counterterrorism Agency) and civil society organizations have taken preventive measures through deradicalization process for persons or groups that are vulnerable and exposed to radicalism. In this context, the shift of women's role in acts of terrorism requires appropriate intervention, especially because presently deradicalization interventions tend to be more focused only on men.

Aside from that, the issue of violence is also linked to the issue of national resilience. This is well understood if national resilience is seen as the ability to respond, adapt, and interact with the environment. Violence against women is a part of the threats against the human dignity of Indonesian women who should be able to live peacefully and with a sense of security. Therefore, all acts of violence against women that occur in a widespread manner is an issue related to the five aspects of national resilience, i.e. ideology, politics, socio-culture, economy, and defence and security (Komnas Perempuan, 2020).

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<sup>12</sup> <http://www.understandingconflict.org/en/conflict/read/89/IPAC-Short-Briefing-No1-COVID-19-AND-ISIS-IN-INDONESIA>

## Women's Access to Justice

Women's access to justice is a key aspect in gauging the fulfilment of women's rights and protection. This can be seen from, among others, the case of divorce in Indonesia. The data from a study conducted by AIPJ2 (2019) shows a number of important notes on women's position when having to deal with the law and justice. The data from the 2019 annual report of the Supreme Court of the Republic of Indonesia shows that from 462,841 divorce cases processed by the Indonesian judiciary, 447,417 were filed to the Religious Court while 15,424 were filed to the General Court. As many as 7 out of 10 women filed for a divorce through Religious Court, while in General Court the ratio was 5 out of 10. There is no data on divorce cases that involve, men, women, and children with disabilities.

Divorce cases affect the children's condition, whereby 95% of 450,000 divorce cases ruled by the Court involved children under 18-years-old, therefore it is estimated that every year there are 850,000 children affected by divorce. In this regard, the issue that emerges is the provision for the children, because petition for child support can only be found in 1% of divorce cases in the Religious Court and 9% of divorce cases in the General Court. As many as 50% of the petitions filed in the Religious Court and 56% in the General Court for Child Support were granted. Similarly, with child custody, only 2% of the divorce cases in the Religious Court and 49% in the General Court included a filing of petition for child custody, and the judges in 9 out of 10 cases granted the child custody petition in both the Religious and General Courts.

What is also concerning is the alimony for the wife, whereby only 1% of decisions of the Religious and General Courts on divorce cases granted the petition for the wife's alimony. Whereas petitions related to the division of assets were filed only in less than 1% of divorce cases in the Religious Court, and in 9 out of 10 cases the petitions were granted. As many as 7 out of 10 petitions related to community property were filed by the wife.

1 out of 4 women in divorce cases had gotten married when they were minors. The grounds for divorce as filed by women were abandonment by the husband for 2 years or more with no news (61%), failure of the husband to provide for the children (29%), and physical violence (13%). In terms of access to justice, the above data transpired against the setting that only 1 out of 10 women or men who brought their divorce case before the Religious Court, and 3 out of 10 women and men who brought their divorce case before the General Courts, had legal representation.

The condition above portrays low access to justice for women, and the situation may worsen during the pandemic. The online court trials during COVID-19 had not been run to the maximum level. Victims may also have to deal with multiple issues related to access, especially in terms of limited access and court fees, and other costs such as transportation when having to deal with the court.

## 2.7. Online Access and Information for Women

Access to digital technology is crucial during a pandemic, with a shift from offline to online mode in public services and socio-economic activities. The problem is, access to technology also has a very gendered face. Data from the 2018 Susenas (national social and economic survey), for example, shows that internet access among men is 42.31%, higher than internet access among women (37.39%). Other data from the GSMA (2019) also indicates gender disparities in terms of cell phone ownership and internet access. This report shows that for cellular phone ownership in Indonesia, there is a gender gap of 11%, while for internet access, the gap is even wider at 18%. One of the biggest challenges in cell phone ownership and internet access is price affordability for both women and men.

OECD (2018) mentions many factors that contribute to gender disparities in the digital world, such as barriers to access, affordability, education levels, and biases in socio-cultural norms that hinder women to benefit from digital transformation. This includes social norms that limit women's participation in STEM (science, technology, engineering and mathematics).

Gender-based challenges faced by women in accessing the digital world are becoming increasingly crucial in the pandemic, because it will have implications towards access and affordability of public services, limiting access and participation in social life, and becoming an obstacle to engaging in economic activities. Low access to digital means in the era of the COVID-19 pandemic has exacerbated economic inequality and poverty, causing poor people to find it difficult to work/study online, establish communication, or find new jobs due to lack of access (Cambridge, 2020).

Ignoring the issue of access and the lack of efforts to address this digital divide can have fatal implications because it can limit women's opportunities to access services and support needed for the safety of their lives during the pandemic. For example, because of the shift in protection services for victims of violence, the majority of which have shifted to online services, the lack of women's access to digital technology can make women victims of violence unable to access protection services that they need. For women victims of violence, technology can be a lifesaving line of defence, whether through instant messaging services with a geolocation function, free calls to domestic violence hotlines, or secret apps that covertly provide support and information to survivors in the event of close surveillance by the perpetrators of violence.

Because of such urgency, there is a push to make access to digital technology one of the human rights regardless of gender<sup>13</sup>. Furthermore, this digital gender gap will become an obstacle to being involved in decision-making process at

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13 See UN Women's statement on this matter at <https://bit.ly/3mXco3E>

various levels. This could have implications for the accommodation of voices and interests of women who are potentially marginalized during the pandemic.

In addition to access to digital technology and the internet, during the pandemic women are also faced with challenges related to gender roles. FGDs conducted by Komnas Perempuan found that this was related to the social responsibilities attributed to women/mothers to help their children to study at home as part of large-scale social restrictions. This makes women have to struggle in the midst of numerous other activities, as they also have to learn to help their children in their study and to have increased family expense to pay for the internet. Teachers' ability to deliver online instructions is still limited, so what happens is that teachers tend to give a lot of tasks to children. This then brings consequences of increased workload and stress for women when accompanying children to study from home.

## CHAPTER 3

# Government Policies and Responses in Protecting Women's Rights during the Covid-19 Pandemic

### 3.1. Covid-19 Mitigation Policy

In response to the pandemic, several policies and steps have been taken by various ministries and agencies. The following section describes several policy measures and programs/activities by various ministries as efforts to protect women and marginalized/vulnerable groups during the Covid-19 pandemic.<sup>14</sup>

- a. Responding to the issue of violence during the pandemic, the government has launched a psychological consultation service called SEJIWA. In his introduction, the President's Chief of Staff Moeldoko stated that one of the manifestations of the increasing threat of psychological pressure during the pandemic is domestic violence<sup>15</sup>. SEJIWA's services can be accessed via hotline number 119 ext. 8. This service includes special services and assistance for cases of domestic violence, sexual violence, and violence against children.
- b. The Ministry of Women's Empowerment and Child Protection has issued various protocols for complaints, provision of support services in cases of violence, referral to health services for women victims of violence, referrals to safe houses, psychosocial services in cases of violence against women, legal consultation and legal representation in cases of violence, and self-rescue protocols in cases of violence. Synergy and coordination were also carried out through the issuance

<sup>14</sup> Some of the information on policies related to Covid are extracted from Komnas Perempuan - Lemhanas (2020): Draft of Rapid Response Research on "The Elimination of Violence against Women in the Response to Covid-19 to Improve National Resilience" and Komnas Perempuan (2020): The Socio-Economic Impact of the COVID-19 Pandemic on Women Migrant Workers. Draft Report

<sup>15</sup> Tirto.id (2020, 29 April). *Pemerintah Luncurkan Layanan Konseling Psikologi Bernama Sejiwa (Government launch Sejiwa psychological counselling service)*. <https://bit.ly/3iPFnUm>

of a Joint Decree between the Minister of Women's Empowerment and Child Protection, Minister of Home Affairs, Minister of Village, Development of Disadvantaged Regions, and Transmigration, Minister of Social Affairs, and the Head of the National Population and Family Planning Agency Number 12 of 2020, Number 440-824.A of 2020, Number 4 7 of 2020 , Number 01 of 2020, Number 100 of 2020 concerning the Synergy of Programs and Activities to Protect Women and Children during the Covid-19 Pandemic.

- c. The Ministry of Health provides, among others, information on basic and referral services, standard health services for victims of violence against women and children which include promotive, preventive, curative, and rehabilitative efforts. It also provides information and education through counselling, family and community empowerment, through media that are available in the Ministry of Health. Information on the prevention of violence against women and children has been included in publications such as the Maternal and Child Health Booklet, Health Report Book, and the CIE Kit on Reproductive and Sexual Health for Future Bride and Groom (KIE Kespro Catin). Also, information about how to perform early detection of violence against women and children particularly among patients who come to the health facilities. The efforts also include issuing policies to support the implementation of the prevention and handling of violence against women and children at the Ministry of Health through 5 Ministry of Health's Regulations.
- d. For victims of violence, the Ministry of Social Affairs has provided safe house services such as Safe Houses and Trauma Centres (RPTC), which include case handling and referrals to competent institutions such as the police, as well as case outreach. RPTCs also work in partnership with social welfare institutions in several regions that specifically provide assistance for victims of violence, including to promote economic independence for victims of violence in 5 areas that have high incidence of violence against women. There is an increase in the number of victims who received services from May to July 2020, including deportees (477 cases), victims of trafficking in person (471 cases), as well as victims of domestic violence and exposure to radicalism. Adapting to the Covid-19 protocols is also carried out for clients undergoing referral services and by way of providing PPEs to all people who are in the RPTC environment.
- e. At the Prosecutor's Offices, the steps taken are to formulate guidelines for handling criminal cases related to women within the prosecutor's office. Joint trainings with other law enforcement agencies were organized on the topics of handling children who are in



conflict with the law and the protection of women. Courses have been delivered to 8 cohorts. The Attorney General's Office has also issued Attorney General's Letter Number 5 of 2020 dated 23 March on The Policies for Implementation of Duties and Case Management in the Prevention of the Covid-19 Transmission within the Prosecutors' Offices of the Republic of Indonesia. The judicial mechanism in which the public prosecutor ensures the victim's readiness to face trial and performs victim-sensitive examination has also been carried out based on a strong juridical foundation.

- f. The Correctional General Directorate at the Ministry of Law and Human Rights has conducted a mapping of Covid-19 transmission vulnerabilities and education sessions on personal hygiene for prison inmates and correctional officers. In addition, the infrastructures to support the implementation of health protocols in prisons have also been built, such as proper hand washing facilities.
- g. With regard to the protection of Indonesian Migrant Workers, the Decree of the Minister of Manpower No. 151/2020 on Moratorium on the Placement of Indonesian Migrant Workers and The Circular of the Minister of Home Affairs No. 440/2688/SJ on the Prevention of Covid-19 Transmission and the Acceleration of COVID-19 Handling for Indonesian Migrant Workers were issued. The Ministry of Foreign Affairs has put in place a number of protective measures such as facilitating the return of Indonesian citizens and migrant workers who were stranded overseas, evacuation from the Covid epicentre in Wuhan, and the provision of assistance in the form of daily necessities for vulnerable Indonesian citizens.
- h. The Witness and Victim Protection Agency (LPSK) took some steps in collaboration with the Ministry of Social Affairs in leveraging Social Workers, especially in providing support during legal processes, cooperation in the use of safe houses (Shelters or Institutions or Centres of The Ministry of Social Affairs as alternative protection sites to the protection services from LPSK). LPSK also cooperates with the Forum of Service Provider for Women Victims of Violence in providing support and assistance to witnesses and victims during examination at the police office and the court. Also, it coordinates with the National Police Headquarters/Attorney General's Office/ Supreme Court in handling cases of violence with victim's perspective.
- i. The Indonesian Police conducts examinations, inquiries, and investigations via online means. Although the online approach is not yet implemented in full, this shows the responsiveness of the police in adapting to the pandemic situation.

- j. The Supreme Court is also in the process of developing a policy on online court trial for selected cases, including cases of violence against women. However, in an FGD conducted by Komnas Perempuan with participation of the Supreme Court, the guidelines were still being drafted so they could not be referenced.

### **3.2. Gender in the Policies to Manage the Covid-19 Pandemic**

Some lessons learned from disaster management demonstrate that there are challenges in integrating the gender aspects into disaster management. This is also the case in managing the pandemic, which happens in Indonesia. In the pandemic management policies, especially those related to large scale social restrictions (PSBB), in particular the Presidential Decree 21/2020 and Ministry of Health Regulation 9/2020 as described above, there is indeed no specific regulation regarding gender aspects or protection and empowerment schemes for marginalized and vulnerable groups in the context of the Covid-19 pandemic. This condition is also reflected, for example, in the presentation and reporting of the Covid exposure data to the public, which in the initial period of pandemic management (until early May 2020) was not presented in a disaggregated manner. The subsequent progress which should be appreciated is the production of Covid-19 disaggregated data by gender and by age as a result of the hard work of various parties such as the National Disaster Management Agency (BNPB), the Covid-19 Task Force, and the Ministry of Health. This disaggregated data marks an important progress as one of the prerequisites in ensuring a gender-responsive pandemic management (KPPPA, 2020).<sup>16</sup>

The gender aspect which is also crucial is related to the involvement of women (organizations) to mitigate the pandemic. In the structure of the Covid-19 Task Force, women (organization)'s involvement is still low. The Ministry of Women's Empowerment and Child Protection (KPPPA), after going through a series of advocacy measures, finally succeeded to be included in the Task Force structure, which was endorsed by the Decree of the Head of the Task Force for the Acceleration of Covid-19 Management of 2020 dated 19 April 2020 on the Second Amendment to the Decree of the Head of the Task Force for the Acceleration of Covid-19 Management Number 16 of 2020 on the Duties, Organizational Structure, Secretariat, and Implementing Procedures for the Executive Officers of the Task Force for the Acceleration of Covid-19 Management. In the decree, KPPPA is included in the structure of the Task Force. However, KPPPA's representation is more on matters pertaining to child protection and child development, embedded in the structure of the Operations Division under the Deputy for Child Development and the Deputy for Child Protection. Meanwhile, KPPPA's representation on the issue of women's protection and empowerment is not evident in this Task Force.

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<sup>16</sup> KPPPA (2020). *Menteri Bintang Puspayoga Apresiasi Publikasi data Terpilah Menurut Jenis Kelamin dan Kelompok Usia (Minister Bintang Puspayoga appreciates publication on segregated data based on sex and age groups)*. <https://bit.ly/3IZLvvt>

In the course of managing the Covid pandemic, some progress also needs to be noted in terms of integrating the gender issues, especially through the issuance of several important protocols and guidelines related to the protection and empowerment of women and marginalized groups. Some of these guidelines specifically regulate the protection and fulfillment of rights for marginalized and vulnerable groups, such as dealing with violence, protection for children, the elderly and people with disabilities, and protection for migrant workers. In summary, the substance of these protocols can be seen in the following matrix.

**Table 3. Summary of Protocols Related to the Protection of Women, Children, and Vulnerable Groups<sup>17</sup>**

Protocol	Substance
Protocol for Handling Cases of Violence against Women during the Covid-19 Pandemic	<ul style="list-style-type: none"> <li>▪ Introduction</li> <li>▪ Understanding gender-based violence (GBV): forms and impacts</li> <li>▪ Coordinating mechanisms for handling cases of violence</li> <li>▪ Aims and targets</li> <li>▪ Service protocols for handling GBV cases: complaints, service provision, referrals, psychosocial services, assistance and representation in legal process, self-rescue</li> </ul>
General Guidelines for Child Protection in Handling COVID-19	<ul style="list-style-type: none"> <li>▪ Protection of children from violence (physical, psychological, and sexual), exploitation (economic and sexual), neglect and other mistreatment, and protection from child trafficking</li> <li>▪ Special approaches such as for children with disabilities, children victims of violence, and children in conflict with the law</li> <li>▪ Reduce the risk of separation of children from parents/families and ensure alternative care mechanisms in accordance with the COVID-19 protocol</li> <li>▪ Child-friendly preventive media</li> <li>▪ Confidentiality of family data</li> <li>▪ Psychosocial, health, education, and privacy guarantees</li> <li>▪ Members of the task force and volunteers understand and apply the Code of Conduct for Child Protection</li> </ul>

<sup>17</sup> Protocols are referenced from <https://covid19.go.id/>, accessed on 12 August 2020

<p>Protection for the Elderly with Gender Perspective during the Covid-19 Period</p>	<ul style="list-style-type: none"> <li>▪ The issue of violence against elderly women is often ignored</li> <li>▪ Protecting elderly women in particular, and the elderly in general, from violence, neglect, and discrimination due to the pandemic</li> <li>▪ Elderly protection institutions at the central and local level</li> <li>▪ KPPPA's measures to prevent violence and discrimination</li> <li>▪ KPPPA's measures for handling cases of violence, neglect and discrimination include curative services (such as complaints and case handling) and rehabilitative services (such as psychosocial services)</li> </ul>
<p>Protection Guidelines for Indonesian Women Migrant Workers during the Covid-19 Pandemic</p>	<ul style="list-style-type: none"> <li>▪ Exposure to Covid (lack of personal protective equipment) and migrant workers' vulnerability to the impact of the pandemic (such as low wages, job loss, work standards &amp; work safety issues)</li> <li>▪ Indonesian migrant workers risk facing gender-based violence (domestic violence, child marriage, sexual exploitation &amp; abuse), as well as human trafficking</li> <li>▪ The Decree of the Minister of Manpower of the Republic of Indonesia Number 151 of 2020 on the Moratorium on the Placement of Indonesian Migrant Workers</li> <li>▪ The Circular of the Minister of Home Affairs No 440/2688/SJ on the Prevention of the Spread of Covid-19 and Acceleration of Covid-19 Management for Indonesian Migrant Workers</li> <li>▪ The targets of the protocols</li> <li>▪ Intervention: prevention, handling, and recovery</li> <li>▪ Types of intervention: Information services, data collection, monitoring and repatriation, social assistance and economic empowerment, participation and cooperation between parties</li> </ul>

<p>Protocol in Managing Child-related Data</p>	<ul style="list-style-type: none"> <li>▪ Principles: best interests of children, no violation of children’s rights including children’s privacy</li> <li>▪ The collection of data on children during a health emergency is limited only to sectors/agencies implementing the COVID-19 management during emergency response period, such as hospitals and juvenile prisons</li> <li>▪ The use of children’s data at the Ministries/Agencies that manage the data shall be for the purpose of providing services for children, and they shall not share/publish the children’s personal data without formal consent from the parents/guardians of the child</li> <li>▪ Protection of Child’s Data</li> </ul>
<p>Protocol for the Protection of Children with Disabilities in the Covid-19 Pandemic</p>	<ul style="list-style-type: none"> <li>▪ Special vulnerabilities of children with disabilities to Covid-19, such as low access to information and the risk of neglect of their specific needs</li> <li>▪ Related parties and targets of the protocol</li> <li>▪ Interaction space and residence</li> <li>▪ Support, services, and assistance for children with disabilities during Covid-19 pandemic: <ul style="list-style-type: none"> <li>○ Protection of Child’s Data in the home environment</li> <li>○ In the social institution environment</li> <li>○ At the village/community level</li> <li>○ Rehabilitation and habitation services</li> </ul> </li> </ul>

<p>Protocol for the Management of Children Victims of Violence in the Covid-19 Pandemic</p>	<ul style="list-style-type: none"> <li>▪ Responsible parties and executing parties</li> <li>▪ Forms of management: Providing remote services, providing face-to-face (in-person) services</li> <li>▪ Stages of managing children victims of violence: <ul style="list-style-type: none"> <li>○ Receiving complaints</li> <li>○ Outreach, Collection, and Delivery of Children</li> <li>○ Case management</li> </ul> </li> <li>▪ Service delivery: <ul style="list-style-type: none"> <li>○ Remote legal consultation services</li> <li>○ Legal Assistance Services for Children Beyond Scheduled Arrangement in the Police Office</li> <li>○ Legal Assistance Services at the Prosecutor’s Office and Within Scheduled Arrangement in the Police Office</li> <li>○ Legal Assistance Services in court hearing</li> </ul> </li> </ul>
<p>Guidelines for Special Protection and Additional Services for Women with Disabilities in the Covid-19 Pandemic</p>	<ul style="list-style-type: none"> <li>▪ Multiple vulnerabilities faced by women with disabilities including during the Covid-19 pandemic, such as violence and vulnerability of women with disabilities who are heads of household</li> <li>▪ Targets of the protocol</li> <li>▪ Intervention stages, namely prevention, handling, recovery, empowerment, and monitoring and evaluation</li> <li>▪ Prevention, such as dissemination of information, special assistance and services, up to the involvement of women with disabilities in the Covid-19 Task Force</li> <li>▪ Managing those exposed and impacted by Covid-19</li> <li>▪ Recovery for those affected by Covid-19</li> <li>▪ Empowerment through consultation, involvement in organizations, and program planning</li> <li>▪ Monitoring and evaluation for accountability through an inclusive scheme</li> <li>▪ Collaboration across sectors</li> </ul>

<p>Protocol for Case Management of Gender-Based Violence &amp; Trafficking of Indonesian Women Migrant Workers during the Covid-19 Pandemic</p>	<ul style="list-style-type: none"> <li>▪ Gender-based vulnerabilities faced by Indonesian migrant workers, including vulnerability to being victims of violence</li> <li>▪ Objectives and targets of the protocol</li> <li>▪ Operational definition</li> <li>▪ Principles and approaches</li> <li>▪ Prohibitions for crisis centres/support persons</li> <li>▪ Basic information for victims and their families (especially measures to protect victims of particular type of violence)</li> <li>▪ Services and the flow of case management for victims</li> <li>▪ Targets of the protocol</li> <li>▪ The self-help protocol for women migrant workers</li> <li>▪ The guidelines for Indonesian migrant workers in maintaining mental health during the pandemic, including contact details for mental health services SEJIWA</li> </ul>
<p>Cross-Sectoral Protocol for Children Needing Special Protection in the Covid-19 Pandemic</p>	<ul style="list-style-type: none"> <li>▪ Children’s vulnerabilities, such as separation from parents/family, and the risk of violence and psychological pressure during the Covid-19 pandemic</li> <li>▪ General objectives and specific objectives</li> <li>▪ Protocol in managing child-related data: collection, use, and special protocols related to Covid</li> <li>▪ Care protocols for children affected by Covid, including the role of relevant parties</li> <li>▪ Protocol for children in conflict with the law, including protocol for release through assimilation and integration</li> <li>▪ Protocol for handling children victims of violence in the pandemic, including relevant parties and the stages of case management.</li> </ul>



## CHAPTER 4 | Women's Resilience in Responding to the Covid-19 Pandemic

**N**arratives of women's experience and perspectives in the dynamics of life are important and need to be recognized. Because of their gender roles, women and men may have different perspectives in responding to the social circumstances. This is also the case in facing a crisis such as a pandemic. This can be seen, among others, from the results of a socio-demographic survey on the impact of Covid-19 conducted by Statistics Indonesia (BPS, 2020). This online survey involved 87,370 respondents (49.74% male and 50.26% female). Looking at the respondents' distribution, this study is quite representative because it has close resemblance to the 2019 National Social Economic Survey (SUSENAS). There are several interesting findings of this study from the gender aspect. *First*, the survey results show that women are more knowledgeable and better than men in implementing physical distancing. For the knowledge aspect, 88% of female respondents are aware about physical distancing, compared to 85% male. Likewise, in practice, as many as 77% of female respondents admitted to implementing physical distancing, compared to only 67% male. *Second*, the important role of women is also evident in the practice of sanitary living and Covid-19 exposure prevention.

The survey found that women are more compliant than men when it comes to washing their hands with soap as part of preventing the spread of Covid-19. The survey data shows that 84.61% of female respondents often/always wash their hands with soap, compared to 75.74% of male respondents who do the same. *Third*, the contribution can also be seen in relation to the practice of wearing masks when outside the home. As many as 88.5% of female respondents admitted that they often/always use masks when they are outside the home, compared to 77.18% of male respondents. These data show that women have an important role in responding to crisis, especially in developing new attitudes and life practices that are more adaptive to the pandemic.



Furthermore, the question that this chapter will elaborate is how and in what way do women respond to the pandemic? By discussing 4 case studies, chapter 4 will describe how women respond to the pandemic by looking at the good practices that demonstrate women's contribution in maintaining life not only for themselves, but also for the community and others. This also shows an alternative narrative about women and the pandemic crisis, which challenges the dominant narrative that tends to underestimate women's leadership and contributions in a crisis. At the global level, the contending narrative is demonstrated by, among others, the quality of women's leadership in responding to the pandemic crisis, where women's leadership proves to be more effective, among others because it is more responsive to crisis, uses a leadership approach that is full of empathy, and effective and humanizing communication (Forbes, 2020).

In this chapter, the selected case studies show how models of initiatives that are led and driven by women at various levels are important examples of how women seek to mobilize goodwill and resources to mitigate and respond to shocks and build new living practices that are adaptive to pandemic. These efforts are interesting, because they also demonstrate the expertise and skills of women in responding to various limitations due to gender norms and roles that tend to limit women's movement and control. The selection of the four case studies illustrates a variety of issues and approaches, ranging from responses related to handling gender-based violence and violence against women, solidarity economy for pandemic response, inclusive faith-based movements for humanity, to public kitchen initiatives as a buffer scheme for the urban poor in facing the pandemic.

#### **4.1. The Capacity to Fight for the Protection of Victims of Violence in the Pandemic**

Women's crisis centres for victims of violence is one of the spearheads in providing protection and in handling cases of violence against women. Women's crisis centres may be organized by civil society or the government, providing legal consultation and legal aid services, psychological counselling, litigation and non-litigation assistance, as well as establishing support groups and strengthening women and children communities. Women's crisis centres also undertake coordination and build referral systems by engaging law enforcement agencies as well as health and social integration services.

Komnas Perempuan's study identified such extraordinary enthusiasm and tactics demonstrated by institutions and activists in women's crisis centres to adapt to the pandemic. Among community-based women's crisis centres, the majority (43 organizations) have shifted their services from offline to online in receiving complaints, while 5 other organizations continue to avail offline services. But unfortunately, protection services for victims in the context of the Covid-19 pandemic are confronted with challenges such as longer time to provide support, transportation constraints due to social restrictions, and limited online

methods to explore the condition of the victims. Most of the organizations (36) also reported a decrease in the number of volunteers. The main challenge relates to budget support. A total of 14 organizations only relied on volunteers who paid expenses from their own pockets, while 23 organizations did not mention their source of funding. Only a few women's crisis centres are funded by the provincial office of women's empowerment (P2TP2A) (1 organization) and donors (2 organizations). As many as 8 other organizations stated that funds were available but with no mention of the source of funding. The challenge also includes issues with referrals to safe houses, e.g. barriers to access transportation, although the majority of the organizations stated that they faced no obstacle in this regard (15) or did not provide an answer (18). Government's women crisis centres also face similar conditions. Some have switched to online services to take in complaints. Some of them have less volunteers and less budget from the government - as many as 8 organizations reported a budget cut of up to 75%.

The change in services from offline to online has implications to protection services for victims due to uneven internet access and issues related to the victims' access to internet-based communication devices. The Komnas Perempuan study above elaborates on some of these challenges, that are graver for victims in islands and remote areas. Another challenge is that not all victims are comfortable to express their problems through online channels. In addition, counsellors also face difficulties in exploring and identifying the victims' problems, because they could not see the clients' facial expressions and body gestures when answering questions. Telephone and online counselling can either take very long time, exhausting for both the victim and the counsellor, or too short to capture the victims' stories and situation details. What is equally important is the problem of inadequate protection for support persons, both to reduce the risk of covid transmission and in dealing with the centres' organizational problems such as in mobilizing donations and support for the sustainability of services for the victims. They also have to deal with the problem of increased workload and adapting to the new mode of delivering services via online means.

The narrative of how the pandemic affects the issue of violence against women becomes much clearer when there are intersections with special circumstances, such as the aftermath of a disaster, as clearly illustrated in the case of Central Sulawesi. Studies and data collection on cases of violence have confirmed that the issue of violence against women and children—including sexual violence and child marriage—is a serious problem in the post-disaster context. The data from Central Sulawesi's Office for Women's Empowerment and Child Protection (DP3A) and the United Nations Population Fund (UNFPA) in collaboration with Libu Perempuan and KKPST, both are NGOs, show that as of November 2019 there were 83 cases of child marriage in 12 temporary settlements. This shows that emergency situation and economic pressure, combined with strong patriarchal ideology and norms related to sexuality, have aggravated the issue of gender-based violence.

When the pandemic hit, women and children faced conditions that increase their risk of being exposed to and becoming victims of various forms of gender-based violence. Dewi Amir from Libu Perempuan said<sup>18</sup> that they had some confusion when the pandemic occurred, because they had not yet recovered from the triple disasters of earthquake-tsunami-soil liquefaction that occurred on 28 September 2018. When a disaster is compounded with a pandemic, women and children would feel extreme hardship.

In the early days of Covid-19, Libu Perempuan together with volunteers in various villages and temporary settlements distributed basic foodstuffs from raised donations. *"We collected donations for basic necessities. At that time, we worked with about 30 volunteers in various shelters. Alhamdulillah, we received many donations. We ourselves did not expect such good response from many entities,"* said Dewi Rana. However, Libu Perempuan has concerns about how cases of violence will be handled in the context of the pandemic and amidst the stumbling progress of post-disaster recovery.

It is hard not to be anxious. As this post-disaster region was hit by the pandemic, Libu Perempuan noted how this gives rise to the risk of multiple and more complex violence. Of the cases of violence that came to Libu Perempuan's attention, quite a number of them were related to economic violence along with physical and psychological violence against women and children. There are cases where women were abandoned by their husbands, and they have to think about how to continue to feed their children while jobs and income have been lost due to the pandemic. These women victims, on average, work as casual daily laborers, such as doing laundry for other people or working in food stalls that were closed during the pandemic; as a result, they have no income to feed their children. *"In one temporary settlement in Palu, there was a woman victim who could no longer afford to support her children. She was a victim of child marriage, and her husband was a perpetrator of domestic violence who then remarried after the disaster and never returned home. She has to support her 2 children who are under five, including breastfeeding her youngest who is only 7 months old. She had worked at a food stall that closed after the pandemic. She complained to [Libu Perempuan's] office and said that she could withstand her husband beating her, but she could not stand being unable to feed her children. This pandemic is very hard".*

Libu Perempuan also tried to figure out on how to handle cases of increasingly complex violence. As in the case of the woman victim of child marriage and husband neglect described above, Libu Perempuan must also think about how to enable child care and fulfill the children's rights, especially because one of the children was only 7 months old and still breastfed, which means that the best care for the child was to be with the parent. *"In addition to basic food donations, we also organized milk donation to help women victims of violence who have to pay*

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18 Online interview with Dewi Rana (Libu Perempuan), 15 October 2020

*for the care of their children in the midst of the pandemic. Such donation, support we receive in cash and in kind, is very helpful".*

The gravity and complexity of the problem of violence also gave rise to new forms of violence and their impacts on women victims. The severe impact of the disaster and the pandemic that made men leave while women struggled with the demands of continuing their lives, in Libu Perempuan's observations, has also led to changes in the sexual orientation of some of the women victims. Until early October 2020, Libu Perempuan took in 2 cases of changes in women's sexual orientation. In the context of a patriarchal-conservative society, as well as with the rise of formalistic-textualistic religious sentiments in controlling women's bodies, Libu Perempuan opted for a careful approach in responding to this kind of situation.

The strategy undertaken by Libu Perempuan is an approach that strengthens community-based case handling schemes. Libu Perempuan created and distributed banners containing information on violence against women and children as well as the address and other contact details that can be referred to when someone suffers from or finds cases of violence against women and children. Until now, the banners are still placed in the village offices in rural areas such as in Nupabomba (Donggala), Mpanau (Sigi) and in the urban areas such as in Balaroa (Palu city) and also in a temporary settlement in Petobo. Such information on case management services received a good response from women's community. There are women victims who come directly to Libu Perempuan office because they get information from the banner posted at the village office. This shows that this information is directly beneficial for the victims because follow-up actions can be taken where victims can access protection services.

Libu Perempuan together with some volunteers have also built a referral system and services for rapid reporting in temporary settlements; it is hoped that quick case response will minimize the impact on victims. [Establishing a] referral system and case reporting contact that involve volunteers who are also support persons and paralegals is a method that Libu Perempuan had developed long before the pandemic. The organizing of women and volunteers that has been carried out before the pandemic, which builds close connection with communities and women victims, is an important strength of Libu Perempuan's referral system. For coordination and capacity building purposes, Libu Perempuan develops a series of training, [maintains] coordination via WhatsApp Groups, and encourages [them/the participants] to advance in women's leadership in temporary shelters, neighbourhoods, and village government. Having volunteers and strong networks at the community level has led to innovations of community safe houses. Currently, there are 3 safe houses in the city of Palu that have been built and managed by the community, including support schemes for victim's safety, protection and support systems in meeting the basic needs of the victims while they stay in a safe house.

In addition, Libu Perempuan also encourages the strengthening of local institutions such as traditional, customary institutions and rural/urban village administrations. Although gender-biased practices remain, approaching the local leadership and encouraging changes from them will provide tangible and sustainable benefits because of the strong leadership, especially in customary institutions. To embrace local leaders, one critical strategy is to show evidence that the problem of violence is a real problem in the immediate environment (such as in the case of child marriage) so it must be taken seriously as it is contrary to the values they uphold. In addition, particularly with rural and urban village heads, showing policies and regulations related to the protection and rights of victims of violence also proves to be an effective method. This way, quite a number of village heads take an active role as the focal point for the community and refer cases of violence in their areas.

Women human rights defenders who provide assistance to women victims of violence also face harsh conditions. Some of the volunteers who assist in cases of violence are actually victims who then dedicate themselves to volunteering. Some of them still have to fight to save their lives while at the same time provide support to other women victims. Such transformation from a victim into a change maker is an important modality that keeps the energy and support for victims from receding. But on the other hand, it also raises problems related to fulfilling the right to live decently and with dignity (wellbeing). In working together to meet the needs for psychosocial recovery, Libu Perempuan cannot fully fulfill [the needs] of women human rights defenders who work for the protection of women victims of violence. Even so, Libu Perempuan has collaborated with [Sejenakhening.com](http://Sejenakhening.com) to provide counselling for women support persons so that it can help unravel stress, including helping some who are in the process of transforming from victims to survivors and then to become human rights defenders.

It is fortunate that Libu Perempuan has sufficient sources of funds for the operation of the organization, both from partnership with the government (among others, with the Ministry of Law and Human Rights under free legal aid program) as well as with several donor agencies. However, what is far more important is the invaluable contribution of volunteers and paralegals that formed an important pillar for surviving the pandemic. Libu Perempuan also changed some of their services due to the pandemic, namely by conducting case assessment and screening thus that not all cases were followed up with in-person meeting. For cases that are complex and require fast handling, such as rape, Libu Perempuan has a policy of delivering an offline service in compliance with the Covid protocol. Likewise, changes were made to service delivery schemes and office lay-out to allow complaints regarding cases of violence to be taken in but by minimizing and anticipating the risk of the spread of Covid.

LAPPAN, a service provider for women victims of violence based in Ambon, Maluku, has also adopted a strategy to respond to limitations in handling cases

of violence. Baihajar Tualeka (commonly called as Bae) from LAPPAN said<sup>19</sup> that a network to respond to cases of violence against women and children had been established in several districts long before the pandemic. This includes a jointly initiated command post as well as collaboration with the church. With an average of around 200 cases of violence handled each year, the typologies of violence cases range from domestic, sexual, to economic violence which are often combined with psychological violence such as neglect. Currently, LAPPAN is also handling 4 cases of sexual violence against 4 girls whose perpetrators are their closest relatives, such as their brother-in-law, uncle, and boyfriend.

LAPPAN has developed cooperation with law enforcement officials who are very helpful in managing cases. LAPPAN has also identified important entities in the referral system in handling cases to enable appropriate and effective response to be made. In the context of the pandemic, case management, including during the trial process, is carried out by LAPPAN in compliance with the health protocols. For example, Bae shared that she always carried a mask wherever she went to work on cases. *"We are making efforts by implementing health protocols. I always carry a mask, because many in the sub-village [kampung] do not believe in Covid. This is also a challenge for us. We always remind others, how can we help people, if we are not healthy?"*

Because some women's crisis centres no longer provide support due to budget constraints and limited mobility during the pandemic, LAPPAN has identified referral agencies so they can save energy and funding. In particular, cooperation was developed with P2TP2A (the local government Centre for Integrated Services for the Empowerment of Women and Children), making the case referral scheme effective. The role considered to be of primary importance was to collaborate with support persons from P2TP2A to accompany victims when they are dealing with the police throughout the process of formulating the police investigation report (BAP). *"We are working with support persons from P2TP2A so that they can accompany the victim during the drafting of police investigation report up until the trial. For example, in ensuring that the application of articles of law cited in the police report are safe for the victims and do not turn out to be 'rubber articles' [giving flexibility] for the offender(s). Also, to explain the rights of the victims. Before signing the document, the report must first be read. Since there are victims who cannot read and write, we have to help read out [the document]."*

To get around their limitations while at the same time having to handle many cases from outside the city, LAPPAN also coordinates with the Police and strengthens victims' families, especially for victims of sexual violence. This is to minimize backlash because most of the perpetrators are the victims' closest people and have strong positions so they can intimidate the victims. This condition requires LAPPAN to go back and forth to provide support and assistance, and also

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19 Online interview with Baihajar Tualeka, 16 October 2020

to build support from the surrounding community, including from the rural/urban village administration.

In addition, LAPPAN also collaborated with the Faculty of Psychology, Universitas Indonesia to organize online psychosocial recovery. They often arrange video calls via social media platforms. *"We see considerable psychological [issues] among the children because of violence. Stress due to pregnancy among children, which can lead to children become troublesome and unhealthy. Once there was a victim's child who was disabled, because the mother was stressed. This online psychosocial service is very helpful for them"*. In cases of sexual violence with child victims, LAPPAN advocates and provides empowerment so that their rights can be fulfilled. In cases of unwanted pregnancy, the organization advocates that [girls] can return to school after childbirth, and that a support system from the immediate family should be built to help with the reproductive health recovery, and that support system from the community should not blame the victims.

LAPPAN notes the importance of integrated services, and that recovery for victims that can bring forth their independence is crucial. Some case handling measures often miss this, said Bae, which is understandable because part of the work is done by volunteers, and the tasks at hand are very energy consuming. As a result, many victims fall back into the cycle of violence because there are no options. This is exemplified in the case of child victims of sexual violence who were then forced to do sex work due to their circumstances and because their lives had been destroyed and they were no longer accepted by their families and immediate community. Problems like this become public homework for service providers for women victims of violence.

During the pandemic, LAPPAN also used a strategy to provide support for volunteers by holding online weekly learning forums and coordination meetings. Until 16 October, when the interview was conducted, the online learning forums had been conducted 24 times, including by inviting several resource persons to speak about new themes to strengthen the capacity of volunteers and networks. Bae said she always emphasized that community work for victim protection is an opportunity to learn and increase knowledge. However, challenges in terms of limited telephone and internet access, especially for networks in small islands and remote areas, often have to be dealt with. *"In a village on the island of Seram, a cell phone was placed hanging from a tree. When the cell phone rings, the women have to run to pick it up by climbing the tree. Sometimes, when we get to the top of the tree, the calls have stopped"*. In addition, there are also problems related to the ownership of gadgets, so that not all victims can afford nor access services that are very important during this pandemic.

Although there are notable improvements in the coordination and response of law enforcers to the victims, some issues related to victim-responsive case management need to be continuously advocated. Bae noted several challenges, especially in trials for special cases with child victims, such as the absence

of comfortable waiting rooms and, more importantly, child-friendly court proceedings. She had been in a trial where the victim was confronted in-person with the perpetrator of violence, one who invoked terror to the victim. She has also encountered trials involving children with long waiting period and without child-friendly waiting room facilities.

The above narrative of the two service providers for women victims of violence provides an important strategy for women human rights defenders to adapt to the pandemic situation and puts the handling and protection of victims as a priority. They face various constraints, e.g. security, organization and management, stigma and social norms, as well as challenges related to protection from exposure to Covid. However, they tried using various ways, looking for windows and space for manoeuvre to address those constraints. Measures to protect the rights of victims of violence will be meaningless without the extraordinary efforts from those at the frontline, such as the woman human rights defenders.

#### **4.2. Volunteerism and Women's Solidarity Economy for Others**

The EMPU women's solidarity movement is an example of a humanitarian movement based on women economic actors. Originally focused on sustainable fashion, these alternative economy actors started to respond to the pandemic in March 2020 through the manufacture and distribution of masks. "*We started the Masks for All movement due to the anxiety about the impact of the pandemic on women's fashion business, which suffered a blow such as stagnant market demand and inability to pay employee's salaries. Also, we learned from the experience of other countries such as Czechia, which has proven that the spread of Covid can be reduced by using masks. Together with other mask donation initiatives across many regions in Indonesia, such as JogjaMaskeran, we inspired each other;*" said Leya Cattleya, one of the initiators of EMPU community<sup>20</sup>. At that time, the government had not yet recommended wearing masks for healthy people for preventing Covid-19.

The B-19 facemask model that allows tissue paper insertion was adopted from Budi Laksono, a physician in Semarang. The facemasks are made from environmentally friendly fabrics, a unique signifier of EMPU products, such as *batik*, *tenun* (weavings), and *lurik* (striped cloth) – all of which are traditional textiles. Mask production was carried out in 3 locations, namely Cinangka, Cibitung, and Jember, involving around 23 tailors. Some of the tailors were women who were affected by the pandemic and have lost their income. In addition to the simple B-19 model masks, EMPU also produced premium masks under the coordination of Zubaidah Djohar, which were then offered for sale through social media and received a positive response. Many friends and volunteers who are friends on Facebook donated various Indonesian traditional fabrics, which become EMPU's working capital. The pricing of the premium masks allows a portion of the production cost margin to be set aside for the manufacturing of masks to be donated to the

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<sup>20</sup> Online interview with Leya Cattleya, 12 October 2020



marginalized groups. Since the beginning of the pandemic, EMPU has donated 30,000 masks to the [workers in the] informal sector, the elderly, orphans, people living with HIV, domestic workers, migrant workers, women prisoners, survivors of violence, survivors and displaced people of the Central Sulawesi earthquake and floods in Luwu (South Sulawesi), fisherfolks (in Semarang), and women's salt farmer groups in Central Lombok and East Lombok. In addition, donations were also given to women who were enforced to prostitution (Surabaya and Semarang) as well as indigenous people (West Kalimantan). EMPU also donated/distributed aid in the form of powdered milk for children under three- and five-year-old who were displaced by floods in Aceh Besar as well as those in the temporary settlements and IDP camps in Central Sulawesi.

What does involvement in EMPU mean for women fashion entrepreneurs? Mbak Zie, an activist in the EMPU community whose daily work involves developing natural-dyed batik business in the city of Semarang, feels that it is worthwhile to be part of a community with a social and environmental mission such as EMPU. *"What is important is the feeling of being a member of a community. And we can work with whatever we can do for the interest of others. I can make natural-dyed batik and then, from that, I can make masks to be donated to others. Especially at the beginning of the pandemic, it was difficult for the public to get masks".*<sup>21</sup> Through EMPU community, Zie and the other members try to design masks that not only meet health standards, but are also beautiful and promote sustainable fashion because they use environmentally friendly materials. Unlike most business communities which tend to focus on competitive skills, at EMPU Zie has more space to collaborate and to make EMPU as a shared learning space. *"We share with each other about mask sewing patterns and techniques. We also share about how businesses adapt to the pandemic".* She also commits that for every 4 masks she makes, she would donate 1 for those in need. Even under the masks making and donating scheme, Zie said that her batik business could survive even though there was a decrease in turnover. She can even add more employees, i.e 3 tailors for the mask production process, besides being able to continue to employ batik craftswomen who have been around since before the pandemic and are currently working at home.

EMPU's collaboration is not only with those under *Masks for All*, but also with a network of several alumni and philanthropic organizations such as the Rotary Club to distribute masks, face shields, and Personal Protective Equipment (PPEs) for health workers in 97 health centres in the outermost and remotest areas that could not access PPE distribution from the government. To address the logistical barriers, EMPU worked with various parties such as the National Disaster Management Agency (BNPB), the Indonesian Air Force (AURI), and KagamaCare to donate PPEs to health workers in a number of locations, such as Alor, Saumlaki-

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21 Online interview with Zazilah, better known as Mbak Zie, 13 October 2020

Maluku, Yahukimo-Papua, and Entikong District Police, as well as health clinics at the Correctional Facilities in Cipinang and Pondok Bambu in Jakarta and in Bulu in Semarang. In addition to the masks program, EMPU also set up *pamong benih*, a plant seed stewardship program led by Chandrakirana Prijosusilo, also known as Mbak Kiki, to reduce the impact of the pandemic by distributing around 3,000 bags of seeds to more than 500 women/families/women's groups/women salt farmers groups, violence/post-disaster survivors in a number of regions such as Greater Jakarta, Padang, East Sumba, Central Kalimantan, Ambon, Central Sulawesi, East Java, East Nusa Tenggara, and other areas.

Other than the masks and seeds programs, EMPU later organized women who sell *jamu* (traditional herbal drinks) in various regions. Originally started with the distribution of masks for the women *jamu* sellers, EMPU then supported the women to implement health protocols in the production and sale of *jamu* and in the distribution of seeds of tuberous medicinal plants, the main ingredients of *jamu*. Support for women *jamu* sellers is based on the belief that *jamu* can be an alternative supplement built upon local culture and knowledge to maintain immunity, yet so far the sellers tend to never get any support from the government. Currently, there are 201 women *jamu* sellers from different regions who are engaged by EMPU, including in areas such as Tangerang, Yogyakarta, Mijen-Semarang, Sragen, Temanggung, Batu-Malang, Cilacap, Sumenep (Madura), Palu, and Ambon, where there are quite a large number of women *jamu* seller. In order to maintain quality, EMPU developed a scheme called *Pamong Jamu*, where a regular customer of *jamu* is positioned as quality controller, monitoring the implementation of health protocols (particularly wearing masks and face-shields) and hygiene.

Besides the economic aspect, support for *jamu* is also due to the strong element of solidarity, such as *jamu* seller who does her trade while also selling snacks produced by her neighbour. Meanwhile, in Ambon, support for women heads of households who were affected by the Ambon conflict in the 2000s was organized. Collaboration was also carried out with the Food and Drug Supervisory Agency (BPOM), which provides technical training on hygiene for women *jamu* sellers. Collaboration is also carried out with Yayasan Benih Baik through crowd funding. Presently, there is an agreement with BPOM and Yayasan Benih Baik to develop *jamu* for the next 3 years. Through BPOM, EMPU was also invited to discuss the opportunity to develop the business of door-to-door sales of *jamu* with the support of well-developed and established herbal companies, such as Sido Muncul, Konimex, Kino, Martha Berto, and Sari Ayu. Kino, for example, has initiated talks on how to support women *jamu* sellers in Serang, so that their business can grow and be provided with an option for certification. Such steps are expected to help women *jamu* sellers, who are known to be informal traders, to attain a better status.

For the women *jamu* sellers, being part of the EMPU community means being required and being enabled to comply with and advocate for the implementation of health protocols in their *jamu* production and sales. When protocols are implemented, EMPU would facilitate the women *jamu* sellers to attend the technical training held in collaboration with BPOM. The use of glass bottles as a substitute for plastic bottles, or the use of durable and safe plastic bottles to replace used mineral water bottles, and the wearing of masks, face-shields, and rubber gloves have increased their prestige and earned them appreciation from the customers, the public, and the government for their *jamu*'s quality and hygiene. The women have also become familiar with the diversity of *jamu* ingredients and have started to plant tuberous medicinal plants in their yards.

Furthermore, *jamu* sellers are now recognized as a respectable occupation, with knowledge and cultural base for public health. According to Theresia Eko, who is usually called *mbak* Eko, a facilitator for women *jamu* sellers in Sragen<sup>22</sup>, previously the sellers were often labelled as women who dress up to the nines while doing their trade and like to tease other people's husbands. Women *jamu* sellers also learned other things, such as food security, clothing, because the tubers from medicinal plants can be used as natural dyes in sustainable fashion. The women can bring their children to community activities so the children can have some opportunities to learn, and this facilitates a compromise between the women's roles in care work and productive work. The learning process in the community also encourages each member to become a change maker and share the knowledge gained. "*When you have received unconditional goodness (knowledge), your job is to spread this knowledge to others. So don't be stingy in conveying knowledge and good things to all those who need it,*" said *mbak* Eko. This makes members who do not participate in the activities feel that they are at a loss. In fact, the husbands of the *jamu* sellers also acknowledge the benefits of participating in the activities, so that there was a shift of perspective, from previously seeing EMPU community activities as trivial to now encouraging women/their wives to be active in EMPU activities because they are regarded to be positive. Through activities and empowerment in EMPU community, women *jamu* sellers also learn to recognize their identity and increase their self-confidence.

According to Theresia Eko, a woman *jamu* seller gave the following testimony, "*I am grateful for being 'forced' to speak in group meetings. If you don't want to talk, you will continue to be encouraged to do so. In the past, I was underestimated by others. But now, if I speak, I will be listened to and appreciated.*" This shows that doing the activities and being involved in the community has strengthened women's self-confidence and built their collective identity. The process of building solidarity to empower women *jamu* sellers was also initiated. For example, the community of women *jamu* sellers in Sragen has carried out several capacity building activities on *jamu*, e.g. the quality and the different types of *jamu*, which were organized

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22 Online interview with Theresia Eko, 14 October 2020

together with the Faculty of Agriculture of Bogor Institute of Agriculture (IPB). Also, a philanthropist gifted a 2,350 m<sup>2</sup> plot of land located in Sragen District to the *jamu* group in Sragen. Such *waqf* (Islamic charitable endowment) also includes the construction of rainwater storage tanks to be used for watering the garden.

The same can also be seen in the story of women *jamu* sellers in Ambon, where the development of *jamu* and food security also connects communities that were previously segregated based on religion as a legacy of the bloody conflict of Ambon. "*Through jamu and empon-empon (tuberous medicinal plants) as well as seeds-sharing, cooperation is built between the Catholic women's community in Lourdes, the Christian women's community in Waihoka, and the Muslim women's community in Arbes. The Muslim community produces and sells jamu while the Catholic and Christian communities become the growers and suppliers of tubers from medicinal plants. This collaboration has gone further because it has expanded to the communities sharing seeds of food and vegetable crops,*" said Baihajar Tualeka from LAPPAN<sup>23</sup>, who organized the women's communities in 3 villages. The spaces where communities can meet to work on *jamu* and seeds have broken down the barriers and prejudices inherited from the conflict. Through this initiative, solidarity economy works its ways as part of the effort to promote and strengthen peace.

Support and collaboration with various parties allows EMPU to organize various COVID-19 response programs worth IDR 469,481,598, both in cash and in kind, which sources included the sales of EMPU masks (IDR 40,298,000), financial donation (IDR 39,365,000), partnership (IDR 7,700,000), and donated PPE/medical equipment/masks/material/fabrics valued at approximately IDR 191,200,000 as well as the contribution of EMPU community and team members (IDR 172,000,000) and the conversion into rupiah value of logistical support, transportation, and group management and organization. The accountability in the management of volunteerism and fair business is a value that is highly upheld by EMPU. EMPU is also in the process of developing innovations to answer the needs of the most marginalized, as it currently works to develop environmentally friendly sanitary napkins in collaboration with the Indonesian Association of Women with Disabilities (HWDI), Mental Health Association (PJS), and Biyung Indonesia.

However, according to Leya, EMPU still has some tasks to do in formulating a community organization model that is suitable to drive solidarity economy and volunteerism. "*We are still in the process of formulating a model for community movement and governance which embodies a community model that is financed and cared for by members' contributions and ownership. But also, what is no less important is to continue to uphold the principle of accountability and no one left behind. The one who needs to get the most benefit is the groups served, not the EMPU team that organizes the activities*". Leya sincerely questioned whether the forms of arrangements such

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23 Online interview with Baihajar Tualeka, 24 September 2020

as cooperative, association, or foundation would be compatible with the fluidity in how the EMPU community works, and whether the community wanted [such formal structure].

Some community members said that flexibility and fluidity were desired. As long as it benefits the community, they are willing to be part of the movement. Perhaps what is needed is a secretariat that facilitates ideas to be consolidated and linked with various resources, while the community is only bound by a common spirit and principle. Theresia Eko also stated, *"As a movement that involves many parties and many commodities, it is necessary to build a common vision, what is EMPU's collective dream of change to be achieved, and what routes need to be formulated to achieve it"*.

Through women's volunteerism model developed by EMPU, solidarity economy models provide an alternative in times of crisis. Not only it serves as an emergency buffer through charity, the solidarity economy scheme has also succeeded in bringing in new values of respect and support for groups that have been marginalized, as seen from the support for women *jamu* sellers. Access to market and technology to adapt to the pandemic allows some added values to the *jamu* and the sustainable fashion actors, and in turn, they are expected to increase the income and welfare of women entrepreneurs. In addition, the development of sustainable fashion and alternative health through *jamu* that is driven by women is also an alternative economic practice and a more responsible attitude towards the preservation of the planet and lives.

#### **4.3. Public Kitchens: From Domestic Kitchens to Public Kitchens to Save Others**

Attempts to survive and to share solidarity in a crisis have shown a variety of responses, both individually and collectively. One of the collective responses driven by women for crisis relief is the public kitchen. According to Ita Fatia Nadia, the initiator and coordinator of Solidaritas Pangan Jogja (SPJ), public kitchens as women's collective action for crisis relief can be found both in the history of many crisis in Indonesia as well as in other parts of the world.

The public kitchen organized by SPJ in Jogja as a response to the pandemic emerged after Ita and her two daughters, Dina and Nisa, carried out a simple gender-based social mapping of the impact of the pandemic in early March 2020. The mapping exercise was carried out to get an idea of how each individual would have different degrees of vulnerability due to interrelated factors, such as gender, economic conditions, and age. Most of the women respondents in this social mapping exercise work as porters and traders in 4 traditional markets in Jogja (namely Ngasem, Beringhardjo, Patuk, and Kranggan markets), as well as hawkers and scavengers. Meanwhile the men work as pedicab drivers, hawkers, and scavengers. The questions asked during the mapping exercise were ownership

of resident ID card (KTP), place of residence, income before and after the large-scale social restrictions were implemented, and where they would go to seek assistance during the pandemic.

The short interviews yielded a mapping result that shows that the most affected are the urban poor—men, women, children, and the elderly—who have no ID card, work in the informal sector as small traders, laborers, and scavengers, are homeless or live on the streets. They could not meet their needs for food because their daily income flow has completely stopped. “All of the women porters admitted that they don’t know what the Covid pandemic is, except that this is a new, deadly disease. They also did not know how to get masks and hand sanitizers, and were confused about how to feed themselves because the market was closed. Likewise, street food vendors also complained about the absence of income because no one was buying what they sell,” said Ita Nadia.

The first action taken in response to the mapping outcomes was to build a public kitchen in Ngadiwinatan to prepare 50 packets of rice-based meals which were gone in less than 10 minutes. The next day, another batch of meal-packets were made, and they were also gone shortly. They then decided to engage a group of university students who are members of the Social Movement Institute (SMI) and started to organize the 2<sup>nd</sup> and 3<sup>rd</sup> public kitchens in Gamping and Seyegan. They publicly announced the formation of Gerakan Solidaritas Pangan Jogja (the Jogja Food Solidarity Movement, or SPJ) on 22 March. Another public kitchen was set up, i.e. the Balirejo kitchen organized by Ernawati together with university students and the domestic workers network to specifically cater the porters of the Beringhardjo and Giwangan markets. Other kitchens joined, namely the Prawirotaman kitchen, the northern area kitchen in Condong Catur, the Wonocatur kitchen for scavengers, the Keparakan kitchen for the elderly, the Bongsuwung kitchen for commercial sex workers, the kitchen for transwomen, and the Sembungan kitchen.

Along with this initiative, they also started to raise donations, where the smallest value received was IDR 10,000 and the largest was IDR 10 million. In addition, SPJ also received donations and support in kind, such as vegetables from agriculture farmers in the sandy soil of Kulon Progo, Ambarawa, and Muntilan. One pick-up car full of vegetable donation came every week. They also purchased eggs at very cheap price from chicken egg farmers, where SPJ could buy eggs at the price of IDR 15,000/kg, lower than the market price of IDR 20,000. They also received other necessities such as rice from farmers. Through this initiative, apart from raising donations, a direct relationship was built, bringing together producers (agriculture and animal farmers) and public kitchens as well as rural villages (where the farmers reside) and the urban poor as recipients of food donations.

The public kitchens itself were managed by volunteers, including university students, activists, housewives, school students, artists, the urban poor, and

ordinary citizens. The majority of them were students from universities, i.e. UIN (State Islamic University), UMY (Muhammadiyah University), and UNISA (Aisyah University), the 3 campuses that are not part of the elite but have a fairly strong mass base in Yogyakarta. Through this initiative, SPJ becomes a collective movement of citizens. Even though it was started by university students, the initiative was later welcomed by the women members of Asyiyah (one of the biggest Islamic women organization and other Islamic prayers groups (pengajian) such as in Gamping and Seyegan, as well as men pedicab drivers who joined to lend their hands to cook in the public kitchens. Meanwhile in Ngadiwinatan, women from the sub-villages cooked the dishes to make packets of rice-based meals. In some public kitchens, the cooking process was carried out by involving the street food vendors in turns, so they can earn some income. Within 1 month since it was declared, 15 public kitchens had been organized. Solidaritas Pangan Jogja (Jogja Food Solidarity) was the name proposed by student volunteers. The logistics of food supplies and the kitchen management were accounted for and managed by the university student volunteers. In a day, each public kitchen produced between 100-200 packets of rice-based meals. SPJ operated for approximately 5 months, from March to August 2020.

The experience of volunteering and coordinating public kitchen is a valuable experience for Munti, who had just completed her undergraduate degree at UIN Sunan Kalijaga in the Department of Community Development.<sup>24</sup> Prior to joining SPJ, she was active in Fopperham, a human rights NGO, focusing on facilitation and advocacy for the elderly victims of the 1965 communist purging ('65 tragedy) as well as senior citizens in general. Some of the elderly people who survived from the '65 tragedy are among those who have suffered the most from the pandemic, partly because they lost their jobs and also because their children/families were also economically affected by the pandemic. Munti, together with two of her colleagues from Fopperham, joined SPJ from early April 2020 until June 2020. Munti and her 2 colleagues were in charge of managing the kitchen for the elderly located in Keparakan and overseeing several distribution points for the elderly in the city of Yogyakarta, such as Kotagede, Wirobrajan, Keparakan, Tegalrejo, and Umbulharjo. The rice-based meals, totalling 75-100 packets per day, were prioritized for the elderly survivors, while any extra packets will be brought to the market to be distributed.

Later, the distribution of the rice packets was arranged to cover adjacent areas and in alternating manner to make it more efficient and to reduce the risk of aid dependence. In addition to cooking the meals themselves, they also started ordering food from elderly survivors who were still healthy in order to also provide them the opportunity to earn some income. Logistics, including vegetable donated by farmers, as well as basic foodstuff such as rice and eggs, were coordinated by SPJ. Daily distribution reports were posted in the WhatsApp group and there

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<sup>24</sup> Online interview with Munti, 16 October 2020

was also a weekly coordination meeting to track the challenges on the ground. By being involved in this initiative, Munti feels that her life now has meanings as she can contribute, no matter how small, to help the elderly, as well as communicate and find out more about the conditions and problems faced by the elderly, including during the pandemic. Through distributing packets of rice-based meals to the survivors, they could discover new data on the '65 survivors who have long been hidden. These were revealed through the word of mouth from one elderly to another. However, she also encountered some challenges, especially in reducing the risk of dependency and in overcoming jealousy among the elderly. She regards positively that many students volunteered in the SPJ, because the issues and actions taken were positive and could educate fellow young people through social media. Practicing patience and logistics management in crisis situations are important lessons she learned from her involvement in SPJ.

The public kitchen management model was relatively spontaneous and organic. There was no grand strategy at the start, with the exception of several principles such as autonomy in managing the volunteers and distribution in each public kitchen. In addition, because the initiative involves public fund raising, accountability was built through biweekly coordination meetings as well as monthly donation source and application report through the SPJ website. Coordination meetings were held to keep track of the challenges faced by each public kitchen. The meetings, apart from being a coordination space, were also a bridge that connects the different public kitchens as well as a connecting link between the producers (agriculture and animal farmers) and the consumers/recipients of packaged rice. Through this forum, the producers (farmers) are aware that there were problems of poverty and food shortage, so they made food donations and learned to whom the donations would be given. Likewise, representatives of the meals packets recipients who were involved in the monthly meeting also found out about the process of how this collective energy is being managed. Through this initiative, SPJ also played a role as a liaison between various groups in managing this collective energy.

Besides distributing rice packets, SPJ also distributed foodstuffs to several affected communities that had not been reached by the daily distribution of rice packets, such as the traders in Parangtritis beach. The donated foodstuffs included rice, cooking oil, sugar, and tea. The cooking oil was produced by craftsmen in Kulon Progo, and it was the coconut oil that the market could no longer absorb. Some in-kind donations were also passed on to the affected groups such as artists and university students. In addition, SPJ also included an agenda for each public kitchen to monitor cases of violence against women. Leaflets containing the addresses of women's crisis centres for women victims of violence were distributed to the community distribution hubs along with the distribution of rice packets and other assistance such as masks.



SPJ has several times been offered funding support by donors. However, the offers were rejected because the preservation of collective energy was considered to be a more important priority. Currently, only 2 public kitchens are still running, namely those for the elderly and the commercial sex workers, because they are still needed to support these two groups. Meanwhile, packets of rice-based meals for scavengers and porters are no longer made because the intended recipients had refused to accept the packets as they can already return to work. This is a form of honesty and independence which SPJ regards as an important achievement and attitude to be appreciated. Currently, SPJ is in the process of restructuring and formulating the agenda for future response in managing the pandemic's impact, including formulating a model for regeneration of organizers (cadres) of the public kitchen movement. By collaborating with Gus Durian network that provided land as well as with the farmers from Kulon Progo who provided technical assistance through coaching, SPJ is currently working to develop gardens to supply vegetable needs for the urban poor and university students affected by Covid.

Several challenges were faced in managing the public kitchens, ranging from funding and management to social segregation and the strong security approach in the response to the pandemic. In terms of funding mobilization, a pandemic is a little different from a disaster, because everyone suffers from the impacts and that there is no clear estimate as to how long the pandemic would last, which makes donation-raising not always easy to do. Meanwhile, in terms of the public kitchen management, the challenges that are also the opportunities are related to managing the volunteers who were mostly young people, and as well as managing logistics and donations. Beyond those, the social challenges were the toughest. This is because the practice of micro lockdowns at the local level (which was a common phenomenon in many sub-villages in Jogja during the early period of the pandemic) has affirmed membership-based social segregation in a community/sub-village. According to Ita Nadia, *"The sub-village fence has become a divider between us and others, between the natives and the immigrants. This segregation, for the urban poor who are part of the non-permanent residents, was a deep gap that made it difficult for them in trying to survive and adapt to the impact of the pandemic."* Likewise, the political challenge presented by the strong security approach has led to solidarity initiatives of sharing, such as SPJ, being subjected to repressive actions from the security apparatus, as transpired in April 2020, ranging from excessive oversight to the forced disbandment of public kitchen activities. Fortunately, advocacy to the government has succeeded in suppressing and stopping these repressive actions, but this presents a lesson on the importance of state recognition of initiatives by citizens and women in solidarity with others during the pandemic.

Through the solidarity actions, public kitchens become a symbol of strengthening women's politics because kitchens are the political domains of women that have been domesticated and are not recognized. Through public kitchen initiatives, the kitchen transforms into a common space and collective

awareness to address the problem of food shortages among the urban poor. The establishment of public kitchens was also a political memory movement by way of recalling memories of collective energy, including women's, in responding to a crisis. As has been widely studied, women's organizations have been the driving force behind the establishment of public kitchens during era of struggle for the nation's independence as well as during political upheavals and economic crisis. Solidarity between communities is an important social asset but has been tremendously muzzled especially due to the New Order's political approach, which impact still lingers until today. SPJ came to realize that when public kitchens were organized as to facilitate and stimulate collective energy, it was not difficult to get people to mobilize and take part in this solidarity. Also, SPJ facilitates the creation of space that bring together those who have been segregated by social divides and prejudices, as evident in the encounter between women of *majelis taklim* (Islamic prayer groups) and the commercial sex workers who both worked in the public kitchens.

What is also encouraging is that SPJ saw the emergence of many other public kitchens in various city, which is a very positive development on the rise of the civic-based solidarity movements. One of them is illustrated by a public kitchen operated by Sri Haryati, a resident of Ngadiwinatan, Jogjakarta.<sup>25</sup> She admitted that she had been inspired by the establishment of SPJ and its activities, yet she opted to organize an independent public kitchen operated under no particular branding. Sri called it a 'private movement'. The 70-year-old woman who is active in social and community activities had mobilized her school alumni friends and the female painter community where she is a part of.

Members of this community then mobilized their respective family members, friends, children, and grandchildren to support and donate to the public kitchen. Word of mouth also made many people give their donation in various forms: some transferred money, others sent tofu or rice according to their abilities. In managing donations, she adopted the principle of "*sithik ora ditampik, okeh soyo bek oleh*", [a Javanese phrase] which means "a little should not be rejected, and a lot will be more rewarding". What is touching is that she received a lot of donations from those who lived with economic limitations. The kitchen started with making 25 packets of rice-based meals and now the kitchen generally makes around 100-150 packets per day, ready by 11 a.m. to be distributed by volunteers to those in need in various parts of the city of Jogja. By using word-of-mouth, especially through WhatsApp, [at the time of this report writing] the public kitchen has been running in their 7<sup>th</sup> month since it was first established on 22 March. In cooking, Sri is assisted by a close relative who cook and prepare the food to be distributed later with the help of the volunteers. She felt that there is divine intervention that makes the donations never stop and that she is never short of money nor ingredients to cook in the public kitchen. The cooking process would start at 5 in

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25 Online interview with Sri Haryati, 16 October 2020

the morning, and some of the tasks such as preparing seasoning concoctions or cooking parts of the menus, have been completed during the spare time. The meal packets are home-cooking style, with rice and side dishes that include vegetables such as *urab* (boiled vegetables mixed with shaved coconut) or stir-fried bitter melons, and protein sides such as egg or tofu and tempeh, plus some crackers. In Sri's calculations, the price of ingredients for each meal ranges from IDR 6,000 – IDR 6,500.

Through the public kitchen initiative, Sri feels that she should be more grateful because she has been given a lot of ease. She also learned to manage many limitations by trying to get around difficult situations and by thinking innovatively to respond to problems. Sri expressed her belief that this model of collective volunteerism is one of the nation's social capitals that plays a key role as a lifeline during a crisis. Ita Nadia also said that public kitchens assembled different strategies and models for women's movements that work hand in hand with the wider social movements in facing and surviving a crisis such as the current pandemic.

#### **4.4. Inclusive Faith-Based Movements for Women and Humanity**

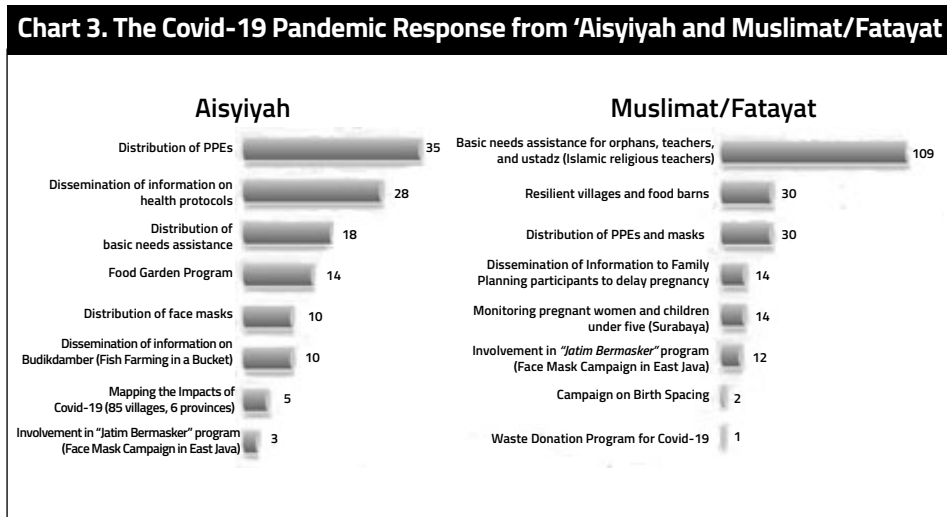
The pandemic situation has also become a priority issue for socio-religious organizations. The socio-economic problems faced by *ummah* (religious followers) demand a serious response from socio-religious organizations. This is not something new; in crisis response, such as during a natural disaster, faith-based organizations play an important role to alleviate the impacts of the crisis. Socio-religious organizations have formed an important part in the welfare regime in the context of disaster mitigation in Indonesia (Fatimah & Zubaedah, 2018).

Similarly, in the context of a pandemic response, measures to respond to the pandemic have been carried out by faith-based organizations and communities of belief. The values of coexistence with nature and fellow human beings are a universal message carried also by adherents of traditional beliefs. The traditional religions of the Indonesian archipelago have adopted values and practices of harmony with nature, an important life principle that has re-emerged along with the pandemic crisis, as well as the recognition of the equal position of men and women as citizens of the earth and God's creatures on the planet. However, it should also be noted that in practice, this is often not the case. This is because interpretations of religion and traditional belief often legitimize values and practices that are gender biased or reinforce the existing gender gaps. Andy Yentriyani from Komnas Perempuan said that women believers of traditional religions have different experiences in their daily lives and therefore also have different needs (PUSAD, 2020).

How women's organizations that are affiliated with religious groups and sects and beliefs responded to the crisis is an interesting aspect to see the manifestation of care and concern from the different faiths and religions towards

women’s issues in the pandemic. The results of media monitoring conducted by Indonesia Indicator reveal the responses of women’s organizations from several religions, such as ‘Aisyiyah, Muslimat/Fatayat, WHDI (Indonesian Hindu Women) and WBI (Indonesian Buddhist Women) as well as Christian Organizations. This can be seen in the following diagram.

#### 4.4.1. The Covid-19 Pandemic Response from ‘Aisyiyah and Muslimat/Fatayat

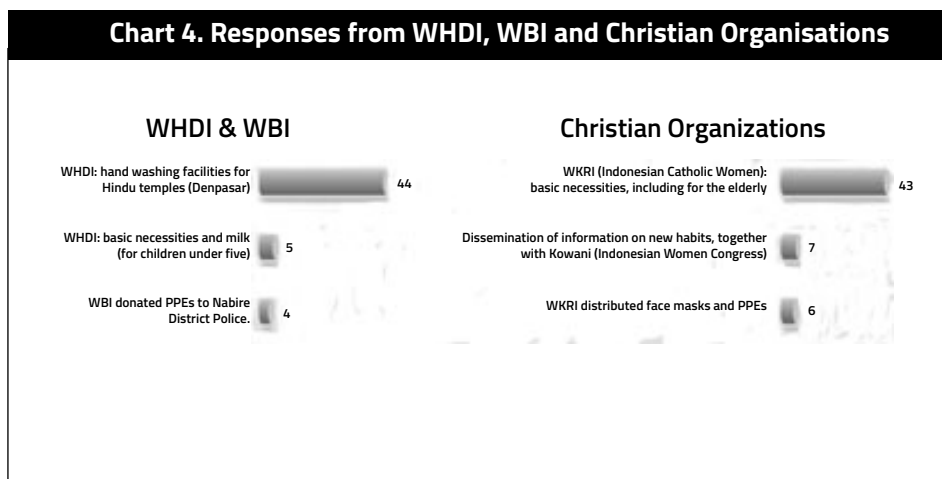


‘Aisyiyah’s pandemic response activities which were covered in the media include efforts to alleviate the pandemic’s adverse impacts through aid distribution of basic necessities and dissemination of information regarding health protocols through the distribution of masks and PPEs. In addition, the organization carried out a mapping exercise on the impact of Covid in 85 villages as well as programs to build food self-sufficiency by promoting food gardens and fish farming and water spinach cultivation, two activities that can become a basis for interventions that are not simply based on charity.

In line with this, responses from Muslimat/Fatayat included the distribution of face masks and PPEs as well as distribution of basic necessities for the affected. As captured in the online media coverage, Muslimat/Fatayat’s responses and concerns also cover reproductive health issues through monitoring of pregnant women and birth spacing campaigns.

#### 4.4.2. The Pandemic Response from WHDI & WBI, and Christian Organizations

Similarly, in responding to the pandemic, WHDI and WBI have taken some measures, such as distribution of basic foodstuff and milk, distribution of face masks and PPEs, as well as providing hand washing facilities in places of worship in compliance with the health protocols. Christian organizations also carry out public-spirited actions through distribution of basic necessities, face masks and PPEs as well as dissemination of information regarding new habits in the new normal. This can be seen in the following media coverage review.



The above actions are the manifestation of care and concern towards the conditions and problems of society and *ummah* (religious followers) in a pandemic situation. Nevertheless, most of these responses are generic and do not seem to specifically respond to women's problems.

In this case, it was a good practice when some attempts to identify these issues accurately and in more detail had started, by the mapping of the impact of the pandemic on women (as undertaken by 'Aisyiyah) and by addressing women's reproductive health issues (as undertaken by Muslimat/Fatayat).

The attempts to map the impact of the pandemic can be seen from a study conducted by 'Aisyiyah Research and Development Institute (LPPA) of the 'Aisyiyah Central Board of Management in identifying the impact of the pandemic on women and the organization (LPPA, 2020). The study was carried out via online survey involving 218 individuals in 'Aisyiyah's leadership at the village, sub-district, district, provincial, and national levels. The study was also complemented by in-depth interviews and profiling to further explore information related to the impact of the pandemic and the narratives of the resilience of women and the organization in dealing with the pandemic. An online FGD that involved representatives of

regional and central managers and was held in collaboration with the Ministry of Women's Empowerment and Child Protection, also forms part of the study's methodology to validate its findings and formulate recommendations on gender-responsive policies for managing the pandemic.

The study identifies the gender issues faced by respondents in their immediate environment, as indicated by problems caused by the pandemic on women's economy, such as layoffs (confirmed by 64% of respondents), access to information and stigma against people who are Covid positive (confirmed by 68% of respondents), violence against women (36% of respondents stated that they found this in their surrounding community), reproductive health issues (confirmed by 36% of respondents), and access to social protection programs including data-related problems (confirmed by 61%).

However, the study also found that women are not passive, because the respondents have taken various measures to care for their surrounding environment. For the record, as of 17 July 2020, Covid response from Muhammadiyah-Aisyiyah's amounted to IDR 182,183,057,389 had been distributed to 3,304,287 people. The LPPA survey indicates that 87% of respondents have donated foodstuff, 98% have organized education sessions on Covid prevention, 49% provided assistance for micro and small businesses regarding online marketing, 22% carried out policy advocacy, and development of food barns. The respondents also stated that the responses and concerns regarding the impact of the pandemic were also demonstrated in inclusive proselytization, where the recipients of the response programs were not only members [of the organization], but also the affected communities, especially marginalized and vulnerable groups. This is also a manifestation and interpretation of the theme in 'Aisyiyah's Anniversary in 2019: "The Actualization of the Writ of Enlightenment for Trans-Boundary Call [to Islam] (*Da'wah*)".

What the organization has put in place is also reflected at the family level, where the concept of the *sakinah* (peaceful) family is a reference for members of Muhammadiyah and 'Aisyiyah regarding marriage/family relations which are based on equality and reciprocity, put forward dialogue and negotiation, and provide opportunities to develop the potentials and capacity of women and men in social life. Through these models, Islamic women's organizations that uphold the principle of progressive Islam have shown the contribution of women in trying to mitigate the impact of the crisis (known as absorptive capacities), build adaptations of new habits and practices in the pandemics (adaptive capacities), and encourage the transformation of family relations that are more equal and just (transformative capacities) (Fatimah & Setyowati, 2020).

The contribution of women from different faiths in responding to the pandemic also shows some important notes, as identified in the discussion organized by the Covid-19 Gender Mainstreaming Working Group in collaboration with AMAN Indonesia. In an online discussion titled "Interfaith Women Leaders Responding

to the Pandemic” which was held on 13 November 2020, there were female speakers from inter-faith organizations, e.g. Wandani (Theravada Women), GKJ (Javanese Christian Church) of Manahan in Surakarta, Matakín (Confucianism Council), Mubadalah.id, and Peradah (Hindu Youth). For example, Retno Ratih, a woman priest, described the experience of GKJ Manahan Surakarta in conducting mapping exercise and implementing solidarity actions for those affected by the pandemic. “We did a survey, then we responded to the survey results with several programs. The first was [to respond to] what we saw in our neighbourhood. For example, a pedicab driver who complained about the difficulty in getting food, so then a lunch donation [was organized]. During Covid-19, we distributed 27,000 packets of rice-based meals, and this became an interfaith movement. This did not transpire out of nowhere as we have had some experience doing charitable activities during the fasting month (Ramadhan), a couple of years ago, [also by distributing] packets of rice”<sup>26</sup>.

In that event, another interesting data was related to how women contributed to faith-based institutions and religious practices in adapting to Covid. Dr. Sim Mettasari from Wandani Board of Trustees explained how religious practice is carried out by the Buddhist Theravada community. “In the early days, (someone asked), why can’t we go to the service, huh? We continue to educate [our congregation] on how it is so important for us to take care of ourselves, [so it would be] better to stay at home. So, if something is not too important, don’t go out to do it. There are some [religiously] important days, [yet] do not [go and celebrate] at the temple. For example, the prayer days or the birthday of the Prophet. Only board members were invited to pray at the temple as long as they stick to the health protocols. So, when we do come, we have to wear masks. So far it was fine. We also arrange for one meter spacing for those who wish to perform their worship”. Although initially the process takes time, adaptations have been made where online services are carried out regularly every Sunday.

In the time of the pandemics, reciprocity and role sharing, including in doing care work, are extremely important. In the discussion above, experiences were also shared about how religious communities and organizations took part to promote equal parenting, as told by Mrs. Liem Liliany from Matakín: “So now they have become one body and are equally humbled and have promised to love one another. So, between a man and a woman there is no one who is higher, ... their positions are the same, yes, they are equally noble. So educating children is not only the responsibility of the mother, but the father also has a role to play... Hence the balance must be struck between the father and the mother as they still have to educate their children... ”

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<sup>26</sup> Cited from minutes of online discussion of the Covid-19 Gender Mainstreaming Working Group and Aman Indonesia, “*Tokoh Perempuan Lintas Iman Merespon Pandemi*” (*Cross faith women figures responding pandemic*) held on 13 November 2020

Through the above narratives, women in faith-based institutions and communities have become agents to mitigate the impact of the pandemic through sharing with women and others, not only in their own community. They are also part of the effort to promote new narratives and norms related to reciprocity, which are important initiatives and contributions of women in showing the face of humanity and equality of religions and religious community.





## CHAPTER 5

# Conclusions and Recommendations

### 5.1. Conclusions

The Covid-19 pandemic has brought many changes in the lives of women and men. The different situations and impacts of the pandemic are a reflection of the differences in access to and control over resources, as well as how social constructions have shaped different norms, roles, and worlds for women and men. As one of the important policies for preventing the spread of Covid-19, the implementation of Large-Scale Social Restrictions (PSBB) has brought a lot of consequences, as social, economic, and public service activities must be carried out with minimum direct interactions, leading to a shift from offline to online arrangements. Studies have shown that the pandemic had impacted the lives of women and the marginalized and vulnerable groups in multiple areas of life.

The impact of the pandemic is also seen in relation to the fulfillment of women's constitutional rights as a result of the pandemic. Studies and consultations and documentation made by Komnas Perempuan and supported by numerous other studies and documentation from other entities have suggested the impact of the pandemic on the fulfillment of women's rights. This can be seen, for example, in relation to an increase in double burden due to the increased workload in care work, as well as in relation to the risk of gender-based violence during the pandemic. Multiple burdens and violence were already problems before the pandemic, but the current crisis has increased the risk factors, although the impact on women is not homogeneous as it is influenced by social status such as economic class, education, and age.

The study also shows that the economic shock of the pandemic has implications for employment opportunities, fulfillment of rights, and the risk of layoffs for women. Issues related to decreased income and welfare of female workers, lower productivity due to the double burden, and exposure to Covid-19 in the workplace were also found from studies that have been conducted, including among those in the informal sector, migrant workers, and workers in the care work sector which are mostly women. The same also applies to reproductive health, which

has become of lower priority when the health system is focused on Covid, where serious issues such as unwanted pregnancy and increase in child marriages require immediate response. In this case, the social security programs are an important buffer to mitigate the impact of the pandemic for women, especially those in marginalized and vulnerable groups. However, although the social security programs are conceptually good on paper, women and marginalized groups such as informal workers, transwomen, and people with disabilities still face various challenges in accessing the programs, due to, among others, barriers to access to information-technology and challenges related to the programs' disorganized database.

The issue of the fulfillment of women's rights is also related to the extent to which women feel safe in a pandemic situation like today. The right to a sense of security is an important issue amidst various impacts and issues related to women's basic rights, including protection from violence. Furthermore, the strong security approach in handling Covid-19 also presents a risk of setbacks in ensuring the accountability, transparency, and participation of women as citizens in the response to the pandemic, as well as women's access to justice. This also correlates with the shift from offline to online arrangement, in a situation where we find gender gaps in digital access, which presents a significant barrier for women in accessing public services, ensuring the fulfillment of their constitutional rights, as well as being engaged in various public affairs and decision-making processes.

Policies, programs, and schemes have been developed by the government to respond to the impact of the pandemic, including those related to fulfilling the rights of women and vulnerable and marginalized groups. The series of protocols to protect victims of violence, may they be women, children, people with disabilities, and migrant workers, are examples of good government's policies. Adaptations in relation to preventing exposure [to Covid-19], adaptations in the approaches to deliver public services (such as capacity building and access to justice), and social security programs to mitigate the impact of the pandemic, are examples of measures that have been made by the government to alleviate the pandemic's impact. This is also the case with the right to health, specifically the right to reproductive health and to health services for victims of violence.

On the other hand, a narrative that illustrates resilience is also evident in the initiatives taken by civil society organizations under solidarity schemes to reduce the impact and to adapt to the pandemic. This can take the form of the strategies employed by service providers for women victims of violence in ensuring protection and support for victims through adaptation in delivering their services and mobilization of support based on local resources, which are the extension of what had been initiated before the pandemic. It is also evident how the solidarity economy builds the fighting power of small businesses in the economic sector, which not only seeks to reduce impacts, but also offers new values of sharing and sustainable economy that are women-driven. Another factor that is also an

important part of the pandemic response is food solidarity, which turned kitchens into a hub for a solidarity movement for others. The kitchen becomes a way for women to re-demonstrate their capacity as change-makers by working together beyond borders, mobilizing resources in the time of crisis, and collaborating with marginalized sectors in rural and urban areas. No less interesting is the solidarity measures driven by faith-based institutions, which also illustrate social responsibility to save people during the crisis, not only for the *umma* (religious followers), but also for the wider citizenry. Solidarity movement of women from faith-based organizations has shown a real form of the contribution of religion to humanity, although there are some notes related to gender and women's leadership in faith-based organizations that should be collectively improved.

Nevertheless, there are challenges in ensuring the protection and fulfillment of women's rights during the pandemic. The following illustrate the existing challenges that must be addressed at the micro, meso, and macro levels.

- a. Challenges at the micro level, i.e. at the individual and family level:
  - Unequal gender construction and family relations
  - Families and homes are not always safe places for women and children
  - Many problems of uneven power relations exist in the family, and are considered to be a private matter
  - Implementation of policies, services, and protocols for the protection of the rights of women and children could not be effective because it would breach the "private" domain that is impenetrable by policy and legal instruments
  - Changing social norms that are not gender neutral, and family relations that are imbalanced, require a good strategy and is not an easy process
  - Gender gaps existed before the pandemic, but the shifts during the pandemic may widen the gaps and inequalities
- b. Challenges at the meso level, i.e. at the institutional and community level:
  - Challenges for organizations and women human rights defenders in upholding women's rights, especially related to resource management, funding, technology, and infrastructure
  - Effective community-based approach, but limited scale-up to deliver change
  - Challenges related to women's participation and leadership in decision-making
  - Challenges of adapting the role of women's rights organizations in the context of the pandemic

- Adapting to limited human resources and mobility challenges
  - Challenges to adapt to increasingly limited funding capacity
  - Challenges related to the effectiveness of referral systems in protecting rights and handling cases of violence against women
- c. Challenges at the macro and state level:
- Emphasis on responding to the systemic impacts of Covid, which actually encourages the government to intensively use aggressive economic and investment approaches on the one hand, and a security approach on the other, could have implications to further marginalization of women from adequate economic opportunities. This condition can affect the context of women’s participation in the public sphere
  - Not all of the progressive policy instruments, including protocols that are pro-women and children, are well-safeguarded
  - Planning and budgeting for the specific needs of women/children and efforts to close the gaps in development and the fulfillment of rights.
  - Weak collaboration between the state and non-state actors in terms of their roles and contributions in protecting women’s rights in the pandemic situations:
    - Low level of recognition and acknowledgement of the space and contributions of the non-state initiatives
    - Limited replication of good practices and initiatives related to the protection of women’s rights on a wider scale, through their adoption in policy, planning, and budgeting
    - Coordination challenges in a pandemic context between state institutions at the national and sub-national levels and non-state institutions, including women’s rights organizations, when dealing with a pandemic context.
    - Strong security approach combined with capital-intensive investments can have serious implications for women’s rights
  - Changes related to social norms that are gender biases
    - Public space and conversations are dominated by the promotion of values and practices that are still gender biased
    - Challenges in building synergies with influential charitable institutions, including faith-based institutions, to develop textual interpretations and religious practices that are more friendly to women.

## 5.2. Recommendations

From the descriptions and analysis related to the impact of the pandemic as well as the challenges and initiatives to respond to the pandemic that have been described, the following is an identification of gender-based needs that are essential in managing the pandemic. These gender-based needs are divided into practical and strategic gender needs.

### Identification of practical gender needs.

Women's Rights	Recommendations
Protection from violence	<ul style="list-style-type: none"> <li>▪ Safe houses with supporting facilities, including to implement the Covid-19 protocols.</li> <li>▪ Budget support for service providers for women victims of violence</li> <li>▪ Periodic review and monitoring of the effectiveness of referral schemes.</li> <li>▪ Increase life skills for gender-based violence prevention, including incidents of domestic violence.</li> </ul>
Economic Access	<ul style="list-style-type: none"> <li>▪ Adaptation schemes, especially for online business development.</li> <li>▪ Strengthen the capacity of women's economic enterprises for online business, business management, and managing business risks.</li> <li>▪ State support for care work (such as provision of day care at work).</li> <li>▪ Capacity building and market access, including to digital markets, for women heads of household, homeworkers, and women workers in the informal sector, as well as women victims, as support for integrated recovery.</li> <li>▪ Access to economic social security programs for women and marginalized and vulnerable groups.</li> <li>▪ Business capital assistance schemes for women victims of layoffs.</li> </ul>

Right to Reproductive Health	<ul style="list-style-type: none"> <li>▪ Childbirth services separated from other health services.</li> <li>▪ Increase understanding and life skills about sexuality and reproductive health.</li> <li>▪ Maternal and Child Hospitals must remain open, with government-funded health protocols.</li> <li>▪ Improve reproductive health services and contraceptives, such as injections, IUDs, and others through mobile health centres and home visits for patients who need special services.</li> <li>▪ Intensive education related to adolescent reproductive health through various media to suppress cases of unwanted pregnancy in adolescents and child marriages. Education can be delivered [in collaboration] with influential educational institutions and socio-religious institutions.</li> </ul>
Access to Technology and information	<ul style="list-style-type: none"> <li>▪ Increase digital literacy for women and marginalized and vulnerable groups</li> <li>▪ Improve equitable digital technology infrastructure</li> <li>▪ Correct, accurate, and effective Communication, Information, and Education (CIE) about Covid-19 and its impact on women.</li> </ul>
Social Security	<ul style="list-style-type: none"> <li>▪ Women as the subject of social security programs.</li> <li>▪ The intersection between economy and social security, with marginalized women (such as female heads of household, women victims of violence, women ex-migrant workers, women victims of layoffs) having access to economic and social security programs.</li> <li>▪ Complaint mechanisms and responsive data update to accommodate marginalized women and marginalized/vulnerable groups who do not yet have access to social security programs.</li> </ul>
Right to Security and Justice	<ul style="list-style-type: none"> <li>▪ Complaint mechanism that is responsive and accessible for women, including in accessing victim protection services.</li> <li>▪ Ensure that access to justice is included in judicial services in the context of the Covid-19 pandemic.</li> </ul>

Meanwhile, some of **the strategic gender needs** that should be prioritized are as follows:

- The importance of advancing women’s empowerment and leadership in the response to the Covid-19 pandemic.
- Development, updating, and utilization of disaggregated data as a foundation in the development and implementation of effective and gender-responsive pandemic management.

- Ensuring an open and equal access to information for women in pandemic management, including in relation to access to information on vaccines and transparent statistical data. This is also needed to reduce the potential decrease of public trust and support towards accountable and transparent management of Covid-19.
- Integration of gender perspectives into policies, institutions, and planning-budgeting in the response to and recovery from the Covid-19 pandemic.
- Strengthened accountability, particularly through monitoring (by developing a public complaint scheme) and evaluating public services, including by measuring the responsiveness of services for women and marginalized/vulnerable groups.
- Strengthened enforcement of the laws on policies to prevent the spread of the risk of being exposed to Covid-19.

The agenda for protecting women's rights in the response to Covid-19 also needs to consider the uncertainties faced in relation to the pandemic as well as the character of a pandemic crisis which tends to be spiral and non-linear. Therefore, pandemic management policies need to combine short-term, medium-term, and long-term approaches. In general, the focus of each phase is as follows:

- **Short term:** protecting and keeping others safe, by putting forward strategies for protecting and prioritizing women and vulnerable/marginalized groups. The focus of the short-term approach is to provide a safety net to reduce the shocks caused by a pandemic so that it can reduce the impact on women and vulnerable/marginalized groups, including the double burden faced by women during a pandemic.
- **Medium Term:** developing adaptive capacity in the transition to the recovery from the Covid pandemic by giving emphasis on community resources. Adaptive capacity emphasizes on the ability to learn and maintain knowledge, experience, and skills to be flexible in dealing with the changing situations. In the stage of transition to recovery, adaptation is developed by ensuring the access of women and vulnerable/marginalized groups to various policies, programs, and public services.
- **Long-term:** advancing equitable transformation in the Covid-19 pandemic recovery program. The focus of this stage is to encourage changes for equitable power relations, so that recovery also provides opportunities for women and vulnerable/marginalized groups to build a better life from the pre-pandemic period (i.e. building back better).

The recommendations to the following entities are prepared by taking into account the three different spectrums as well as the mandate or functions of each entity.

## 1. The Government

**a. Short-term recommendations.** The short-term recommendations are outlined for the different ministries/agencies by taking into account their respective duties and functions

### i. The Covid-19 and Economic Recovery Committee

- The Task Force for the Acceleration of Covid Management
  - Encourage the implementation and monitoring of the compliance with protection protocols for women and vulnerable groups in the pandemic.
  - Coordinate protection services for women and vulnerable groups during the pandemic.
  - Develop disaggregated data to ensure the effectiveness of pandemic response services.
  - Develop of an accountability scheme to ensure access to the social safety net for women, vulnerable groups, and groups affected by the pandemic.
- The National Economic Recovery Task Force
  - Provide affirmation for women and vulnerable groups in economic response policies during the pandemic.
  - Provide affirmation and amplification of women's resilience initiatives in the pandemic within the schemes to improve the economic condition.
  - Develop accountability scheme to ensure access to economic recovery programs for women, vulnerable groups, and groups affected by the pandemic.

### ii. The Ministry of Women's Empowerment and Child Protection (KPPPA)

- Provide adequate safe houses for victims and with the implementation of covid protocols.
- Strengthen the effectiveness of coordination among service providers for women victims of violence, including the technical support and funding needed for non-state service providers for women victims of violence
- Apply and monitor the implementation of protection protocols for women, vulnerable groups, and women support persons/ human rights defenders in a pandemic situation.



- Provide funding for service providers for women victims of violence, including non-state service providers for women victims of violence to ensure the sustainability of access and protection for women victims.
  - Deliver effective CIE related to gender issues in the pandemic, including issues of gender-based violence and women's double burden during the pandemic.
- iii. The Ministry of National Development Planning (Bappenas)
- Prioritize coordination and synergy among ministries/agencies in planning and budgeting for the protection of women during the pandemic, including protection for women victims of violence and non-state service providers for women victims of violence.
  - Improve coordination and synergy in planning and budgeting to strengthen the capacity of service providers for women victims of violence that are managed by state ministries/agencies, especially in archipelagic and outermost areas.
  - Strengthen coordination and synergy across ministries/agencies in planning and budgeting related to monitoring the implementation of large-scale social restriction policy towards the fulfillment of the rights of women and other vulnerable groups.
- iv. The Ministry of Social Affairs
- Provide affirmation for women and vulnerable groups in social security programs during the pandemic.
  - Develop an accountability scheme to ensure access to social safety net programs for women, vulnerable groups, and groups affected by the pandemic during the pandemic.
- v. The National Disaster Management Agency (BNPB)
- Implement the Regulation of Head of BNPB No. 13/2014 on Gender Mainstreaming in Disaster Management as adapted to the pandemic context.
  - Implement the protocols for protecting women and vulnerable groups in disaster response activities during the pandemic.
- vi. The Ministry of Manpower
- Strengthen the implementation of policies on the protection of women migrant workers through social security system applicable overseas and for their families at home.
  - Implement the protocols for protecting women including Indonesian migrant workers in the context of the pandemic.

- Strengthen access to social security programs for workers during the pandemic.
- vii. The Ministry of Health
- Provide free rapid tests and swab tests for women victims of violence at Community Health Centres/Hospitals.
  - Provide health insurance and PPEs for women human rights defenders/support persons in cases of violence.
  - Increase access and referral services for childbirth and women's reproductive health in hospitals that are separated from covid patients during the pandemic.
  - Provide priority services on Covid-19 vaccine for vulnerable groups
- viii. The Ministry of Education and Culture
- Provide access and technology services for women and girls during the pandemic in relation to online learning practices.
  - Build teachers' capacity on online curriculum and learning methodologies that students can enjoy.
- ix. The Ministry of Communication and Information
- Increase digital literacy for women victims of violence and vulnerable groups.
  - Strengthen and equitably distribute internet technology infrastructure accessible to women in all remote areas, especially in archipelagic, outermost, and frontier areas.
- x. Law Enforcement Agencies
- Improve special services for women and girl victims at trial.
  - Effective cross-sector and cross-agency coordination on protection of women victims.
- xi. The Coordinating Ministry for Political, Legal, and Security Affairs
- Improve coordination across Ministries/Agencies on the enforcement of laws to prevent the spread of Covid-19.
  - Improve coordination across Ministries/Agencies to ensure access to justice for women and vulnerable groups during the pandemic.
- xii. The Supreme Court
- Increase supervision of the implementation of judicial processes to ensure access to justice for women and vulnerable groups who are victims of violence, including in cases of sexual violence.

- xiii. The Ministry of Home Affairs
  - Issue a policy on the integration of protection of women and vulnerable groups in managing the pandemic at the subnational level
- xiv. The Ministry of Villages, Development of Disadvantaged Regions, and Transmigration
  - Issue a policy on the integration of protection of women and vulnerable groups in managing the pandemic at the village level.
  - Issue an annual policy related to guidelines for the use of village funds for the protection of women and vulnerable groups in the pandemic.

**b. Mid-term recommendations**

- Ministry of Women’s Empowerment and Child Protection: Recognize and amplify the schemes of women’s resilience in various fields; encourage the strengthening of women’s leadership in the organizational structure for managing Covid at various levels.
- Ministry of Social Affairs: Develop public services that are adaptive to the context of Covid so that they can increase the ability, of especially women and marginalized/vulnerable groups, to adapt to changes due to the pandemic.
- Ministry of Communication and Informatics: Support the infrastructure development, including technology-based, as a form of adaptation of public services in the pandemic context that is accessible to women and vulnerable/marginalized groups.
- Ministry of Women’s Empowerment and Child Protection: Use the affirmative approach in public services so that it can support the transition and adaptation process of women and vulnerable/marginalized groups who may have special needs and different speeds in adapting to changes.
- Ministry of Women’s Empowerment and Child Protection & Statistics Indonesia (BPS): Develop a gender data base and analysis as a basis for policy development to ensure the effectiveness of women’s protection.

**c. Long-term recommendations**

- Ministry of Women’s Empowerment and Child Protection: Increase the coordination in the implementation of gender mainstreaming policies in the affirmation towards women

and vulnerable/marginalized groups in the policies on the Covid-19 pandemic recovery.

- Ministry of National Development Planning (Bappenas): Coordinate and integrate gender perspective in planning and budgeting for the Covid-19 pandemic recovery programs in ministries/agencies, as well as at various levels of government, from national level to village level, including funding allocations for service providers for women victims of violence and women's organizations/marginalized and vulnerable groups' organizations.
- Ministry of Education and Culture: Integrate gender perspective into the national education system, including in the learning-at-home arrangement.
- Coordinating Ministry for Human Development and Cultural Affairs: Coordinate accountability schemes including monitoring and evaluation of various pandemic recovery policies and programs by ensuring the participation of women and vulnerable/marginalized groups; Promote changes in social norms related to the protection of women and the issue of gender-based violence, as well as women's double burden, including through community institutions such as the village government and institutions, religious [institutions], and youth groups

## **2. Civil Society Organizations (NGOs, service providers for women victims of violence, faith-based institutions, universities, community organizations)**

### **a. Short-term recommendations**

- Strengthen the effectiveness of services from non-state service providers for women victims of violence for case management and victim protection during the pandemic.
- Carry out networking and coordination to strengthen referral schemes across service providers for women victims of violence and law enforcement agencies to ensure comprehensive protection and case management for women victims.
- Strengthen advocacy and monitoring of the effectiveness of social security programs and pandemic emergency response policies from the perspective of women and victims.

### **b. Mid-term recommendations**

- Promote capacity building and networks of women and vulnerable groups in adapting to the pandemic situation.

- Integrate gender perspective in community-based schemes to build adaptation and transition in the pandemic recovery.
- Recognize and amplify women's resilience schemes in various fields.
- Advocate for and support women's leadership within the structure of organizations in Covid management at various levels.
- Strengthen access to technology so as to enable women to take a more substantive part in the process of managing Covid, including in the transition in the pandemic recovery.

**c. Long-term recommendations**

- Advocate for the integration of gender perspective and the needs of victims in the Covid-19 pandemic recovery policies in various sectors.
- Conduct community-based and women-based monitoring and evaluation related to the fulfillment of the constitutional rights of women and vulnerable/marginalized groups in the Covid-19 pandemic recovery policies.
- Promote changes in social norms related to the protection of women and the issue of gender-based violence.

**3. Komnas Perempuan**

**a. Short-term recommendations**

- Strengthen the monitoring of the integrated service system between service providers for women victims of violence and law enforcement agencies to ensure comprehensive protection and case management for women victims.
- Strengthen advocacy and monitoring of the effectiveness of economic and social security programs from the perspective of women and victims.
- Coordinate and strengthen advocacy to integrate gender perspective and the needs of victims in policies for managing the Covid-19 pandemic in various sectors.
- Collaborate with ministries and agencies to monitor the implementation of protection protocols for women and vulnerable groups.

**b. Mid-term recommendations**

- Strengthen the monitoring of adaptation schemes and capacity of service providers for women victims of violence, including non-government service providers for women victims of violence.

- Develop a mechanism for providing regular feedback based on the results of further studies on the content and implementation of protocols for protecting women and vulnerable groups in managing the pandemic.

**c. Long-term recommendations**

- Coordinate and strengthen policy advocacy to integrate gender perspective and the needs of the victims in the Covid-19 pandemic recovery policies in various sectors.
- Encourage and advocate for women’s leadership within the organizational structure in the recovery of the Covid-19 pandemic.
- Conduct studies, monitoring, and evaluation related to the fulfillment of women’s constitutional rights in the Covid-19 pandemic recovery policies, with special attention to groups of women who are vulnerable to multiple discrimination.
- Encourage changes in social norms related to the protection of women and the issues of gender-based violence.
- Deliver public education related to discrimination against women in the pandemic, including issues related to gender-based violence and women’s double burden.

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# Abbreviations

<b>APD</b>	: <i>Alat Pelindung Diri</i>
<b>PPE</b>	Personal Protective Equipment
<b>BAP</b>	: <i>Berita Acara Pemeriksaan</i> Investigative Report
<b>BDR</b>	: <i>Belajar dari Rumah</i> Learning from Home; Study from Home
<b>BKKBN</b>	: <i>Badan Kependudukan dan Keluarga Berencana Nasional</i> National Population and Family Planning Agency
<b>BNPB</b>	: <i>Badan Nasional Penanggulangan Bencana</i> National Disaster Management Agency
<b>BNPT</b>	: <i>Badan Nasional Penanggulangan Terorisme</i> National Counterterrorism Agency
<b>DP3A</b>	: <i>Dinas Pemberdayaan Perempuan Perlindungan Anak</i> Local Government Office of Women's Empowerment and Child Protection
<b>GBV/KBG</b>	: Gender-Based Violence/ <i>Kekerasan Berbasis Gender</i>
<b>HIV /AIDS</b>	: Human Immunodeficiency Virus/Acquired Immune Deficiency Syndrome
<b>KBGO:</b>	: <i>Kekerasan Berbasis Gender Online</i> Online gender based violence
<b>KDRT:</b>	: <i>Kekerasan Dalam Rumah Tangga</i> Domestic Violence
<b>KPPPA:</b>	: <i>Kementerian Pemberdayaan Perempuan dan Perlindungan Anak</i> Ministry of Women's Empowerment and Child Protection
<b>KtP</b>	: <i>Kekerasan terhadap Perempuan</i> Violence against Women (VAW)
<b>LAPPAN:</b>	: <i>Lingkar Pemberdayaan Perempuan dan Anak</i> Circle of women's and children's empowerment

<b>LPSK</b>	: <i>Lembaga Perlindungan Saksi dan Korban</i> Indonesian Witness and Victim Protection Agency
<b>ODHA</b>	: <i>Orang Dengan HIV/AIDS</i> People Living with HIV/AIDS (PLWHA)
<b>PSBB</b>	: <i>Pembatasan Sosial Berskala Besar</i> Large-Scale Social Restrictions
<b>P2TP2A</b>	: <i>Pusat Pelayanan Terpadu Pemberdayaan Perempuan dan Anak</i> Integrated Service Centre for Women and Children Empowerment, a local government unit
<b>RPTC</b>	: <i>Rumah Perlindungan dan Trauma Center</i> Safe House and Trauma Centre
<b>Transpuan</b>	: Women Transgender; Transwoman
<b>WFH</b>	: Work from Home



# Glossary of Terms

## **Adaptation**

The manifestation of individual flexibility in the face of environmental changes with reference to the process of [building] anticipatory behaviours towards emerging situations. Adaptation includes the following components: changing situations, awareness that change is needed, changes in cognitive processes, changes in emotions and behaviours, and the ability to survive after the change.<sup>27</sup>

## **Personal Protective Equipment**

A set of tools that can protect someone, which function is to isolate part or all of the body from potential hazards in the workplace.

## **Assimilation**

The process of rehabilitating adult and juvenile prisoners in correctional facilities by reintegrating them in community life.

## **Deradicalization**

Efforts to rehabilitate prisoners who were convicted of terrorism, with the aim of reducing or lessening their radicalism or violent behaviour and providing knowledge in the context of national and state life.

## **Covid-19**

COVID-19 (coronavirus disease 2019) is a disease caused by a novel coronavirus, i.e. Sars-CoV-2, which was first reported in Wuhan, China on 31 December 2019. COVID-19 can cause symptoms of acute respiratory problems such as fever above 38°C, cough, and shortness of breath in humans. In addition, it can be accompanied by weakness, muscle pain, and diarrhea. People with severe COVID-19 may develop pneumonia, acute respiratory syndrome, kidney failure, and even death.

## **Gender**

A culturally based and socially constructed category that governs the expected roles and behaviours of men and women and the interactions between them.

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<sup>27</sup> Gifford, R. (1987). *Environmental psychology: Principle and practice*. Boston: Allyn and Bacon, Inc.

Rench, T. (2009). *Understanding the individual-level adaptation process: A new conceptualization and a model*. (Master of Arts), Michigan State university.

- **Gender Based Violence**

Direct violence against a person based on sex or gender that causes physical, mental or sexual harm or suffering, threats to such acts, coercion, and the elimination of liberty.<sup>28</sup>

- **Gender Mainstreaming/Integration**

The process of integrating awareness of the different needs of women and men in the design, implementation, and evaluation of all policies and activities to ensure that no one is harmed. Effective gender mainstreaming tries to solve the unequal barriers that men and women face in political and economic terms.

- **Gender Perspective**

Includes consideration of how gender expectations affect power relations; participation in the economic, political and social domains; and the different needs and opportunities for women and men.

## **HIV/AIDS**

A set of symptoms and infections (or: syndromes) that arise because of the damage to the human immune system due to HIV virus infection; or infection of other similar viruses attacking other species (SIV, FIV, etc.). The virus itself is called Human Immunodeficiency Virus (HIV), i.e. a virus that weakens immunity in the human body. People who are exposed to this virus will be susceptible to opportunistic infections or prone to tumors. Although existing treatments can slow down the rate of viral growth, this disease is not yet completely curable.

## **Intersectionality**

A theory that recognizes the strong relationship between ideology and power that facilitates the dominating party to control the subordinates by creating politics that legitimizes differences as an order of oppression.<sup>29</sup>

## **Social security**

One form of social protection to ensure that all people meet the basic needs of a decent life and increase their dignity towards a thriving, just, and prosperous society.

## **Domestic Violence**

Any act against a person, particularly a woman, which results in physical, sexual, psychological harm or suffering, and/or domestic neglect, including threats to commit such acts, coercion, or illegal deprivation of liberty within the scope of the household.<sup>30</sup>

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28 UNHCR

29 Ritzer, George. Douglas J. Goodman, Modern Sociological Theory. 2011. Jakarta: Prenada Media Group

30 Article 1 Paragraph 1 of Law No.23 of 2004 concerning the Elimination of Domestic Violence

## **Vulnerability**

Conditions determined by physical, social, economic, and environmental factors or processes that increase the vulnerability of a community to the impact of threats.

## **Lockdown**

A territorial quarantine, i.e. restricting the movement of people within an area, including closing access to and from it. The closures of entry and exit routes and restrictions on people's movement are carried out to reduce contamination and spread of the COVID-19 disease.

## **Pandemic**

An outbreak that occurs worldwide or in a very large area, which crosses the borders of several countries, and usually affects large numbers of people.<sup>31</sup>

## **Large-Scale Social Restrictions**

The restriction of activities of people in a certain area suspected of being infected with Corona Virus Disease 2019 (Covid-19) in such a way as to prevent the possible spread of the Corona Virus Disease 2019 (Covid-19).

## **P2TP2A (The Integrated Service Centre for the Empowerment of Women and Children)**

An integrated activity centre established by the Ministry of Women's Empowerment and Child Protection, providing services for the Indonesian people, especially women and children victims of violence. P2TP2A aims to provide services for victims of violence against women and children and strive to contribute to the empowerment of women and children to achieve Gender Equality and Equity. The management of P2TP2A includes people from the community, government, women's NGOs, women's study centres, universities, and women's organizations as well as other entities who care about the empowerment of women and children, together with the Community Empowerment Agency facilitators in every province throughout Indonesia.

## **Resilience**

A person's capacity to respond healthily and productively when faced with adversity or trauma, which is necessary to manage the stresses of daily life, or the ability to adapt and remain strong in difficult situations.<sup>32</sup> (Reivich and Shatte, 2002)

## ***Visum et Repertum***

Expert testimony; a certificate from a medical doctor or others with similar expertise on the conclusion of an examination that has been carried out in accordance with the profession and expertise of the said expert.

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31 <https://www.who.int/csr/resources>

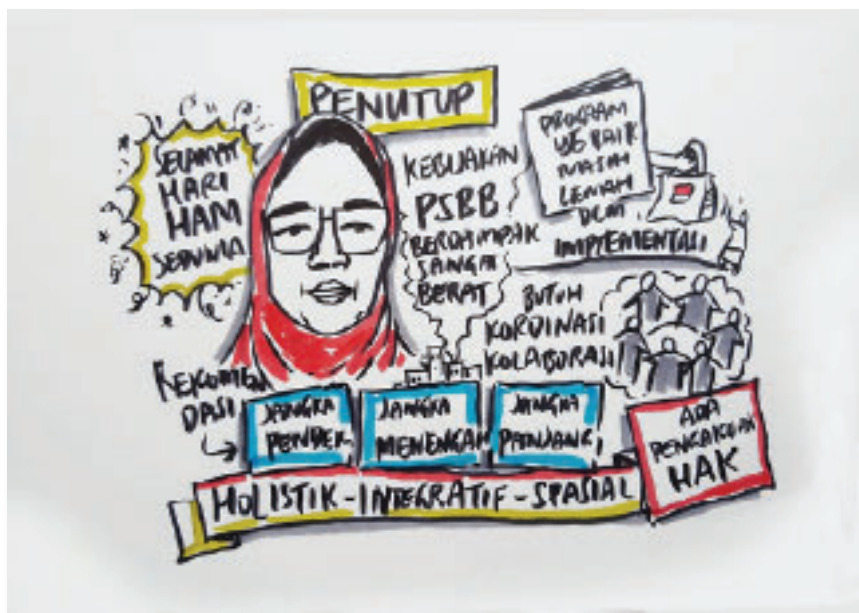
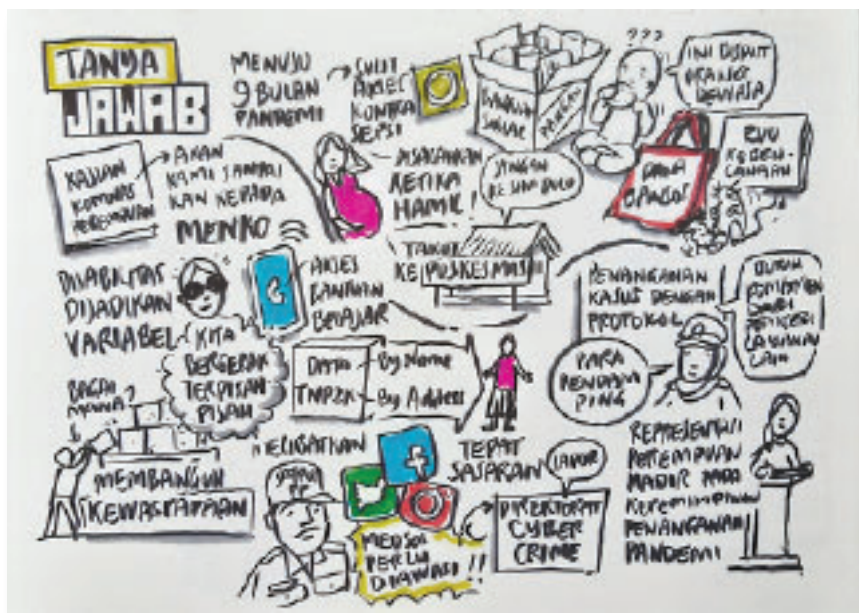
32 Reivich and Shatte. (2002). Psychosocial Resilience. *American Journal of Orthopsychiatry*, 57, 316. doi: 10.1111 / j. 1939-0025.1987.tb03541.x
















This study mainly focuses on the mapping of how policies in response to Covid-19, particularly those related to Large-Scale Social Restrictions (PSBB), have affected the fulfillment of women's constitutional rights. This mapping can only be developed by providing space for women to share their experiences. These experiences are then compiled as a construction of women's knowledge, especially women victims of violence and discrimination. This body of knowledge is then used to promote the fulfillment of victims' rights such as to attain protection, the right to truth, justice, and non-recurrence in the event of other pandemics, as well as to minimize the prolonged impact. Therefore, Komnas Perempuan sincerely hopes that the government and other stakeholders are willing to not only carefully observe this study, but also to consider, adopt, and develop the recommendations presented in this study. Grounded upon women's knowledge and with the approach of women's constitutional rights and human rights, further interventions to manage the Covid-19 pandemic are expected to be more effective and right-targeted to overcome the impact of the pandemic and to address the roots of women's specific vulnerabilities in disaster and crisis situations.

