



Family Hygiene Kits Distribution in North Lombok (TRANSISI Project Team / Save the Children)

# INDONESIA COVID-19

# RESPONSE UPDATE



Save the Children

JANUARY 2021

## General Situation

**S**ARS-COV2 virus, or previously known as coronavirus, was first discovered to be the cause of COVID-19 in Wuhan, China, at the end of 2019. Right after the turn of the year, the transmission of the virus has been even faster and at least 200 and more countries around the globe have reported infection cases including Indonesia, which reported its first case in March.

On 11 March 2020, WHO decided COVID-19 as a global pandemic. President Joko Widodo officially decided COVID-19 pandemic as a national disaster and formed the COVID-19 Response Acceleration Task Force, which in July 2020 continued its function by the COVID-19 Handling and National Economic Recovery Committee led by the Coordinating Economic Minister.

## Statistics

**34**

Affected Provinces

**1,037,993**

Confirmed Cases

**166,540**

Active Cases

**842,122**

Recovered Patients

**29,331**

Fatality

— Latest data as of Thursday, 28 January 2021 based on report the Indonesian COVID-19 Task Force report.

## Response Objectives

Mitigate the impact of the disease itself by contributing to the reduction of illness and death due to COVID-19 and other diseases.

Maintain key program goals as much as possible across our three Breakthroughs while recognizing the immediate economic and social impacts such as loss of income, loss of access to normal services, and increased isolation.

## Four Key Focuses of the Response

1

### Disease Mitigation

Saving lives by preventing the spread of transmission and maintaining health service provision.

2

### Education Uninterrupted

Helping children learn, stay safe during periods of lockdown and return to school.

3

### Protection

Keeping children safe in their home and in communities.

4

### Family Financing

Increasing financial resilience through food security and livelihood recovery.

## How We Make A Difference



### Mitigated the Impact of COVID-19 Outbreak on Children Health & WASH (Water, Sanitation, and Hygiene)

1. Strengthened capacity of girls and boys, female and male caregivers, and communities to minimize and prevent transmission of COVID-19 and strengthen access to health services.
  - Risk Communication and Community Engagement (RCCE) materials are produced, distributed.
  - Improved access to personal hygiene materials to support sustained adoption.
2. Ensured continuation of essentials maternal-child health and nutrition services (antenatal care, postnatal care, nutrition, and immunization) from Puskesmas and other health facilities.
  - Health workers and community cadres skilled/oriented on new guideline/ protocols.
  - Existing mother and child health and nutrition services strengthened with adapted mechanism during the pandemic, i.e. innovating with tele-counselling.
  - Health facilities are supported with Personal Protective Equipment (PPE) to prevent transmission.
3. Improved coordination on response plan and policy/protocol with Local COVID-19 taskforce and leadership in responding to COVID-19.
  - Key stakeholders at national and sub national level are engaged and supported.
  - Vulnerable groups influence response plans.



## Mitigated the Impact of COVID-19 Outbreak on Learning Education

1. Girls and boys (aged 4-18) continue learning and remain healthy and safe throughout the crisis.
  - Affected girls and boys (including with disabilities) are able to access inclusive, age-appropriate learning materials at home (online/offline).
  - Girls and boys receive messages on Mental Health and Psychosocial Support (MHPSS).
  - Parents and teachers are provided support in the process.
2. Effective, inclusive and safe returns to learning for children when schools reopen.
  - Back to school campaign, all children return to school week one.
  - Children receive accelerated education, catch up classes to and other support such as home visits and protection services as necessary.
3. Strengthening capacity of education sector at national and sub-national levels for non-disaster crisis.
  - Leadership in the education cluster, development of response plan.
  - Support documentation of good practice and lesson learnt in education response, including child participation, localization, integration..



## Children are Safe at Home and in the Community

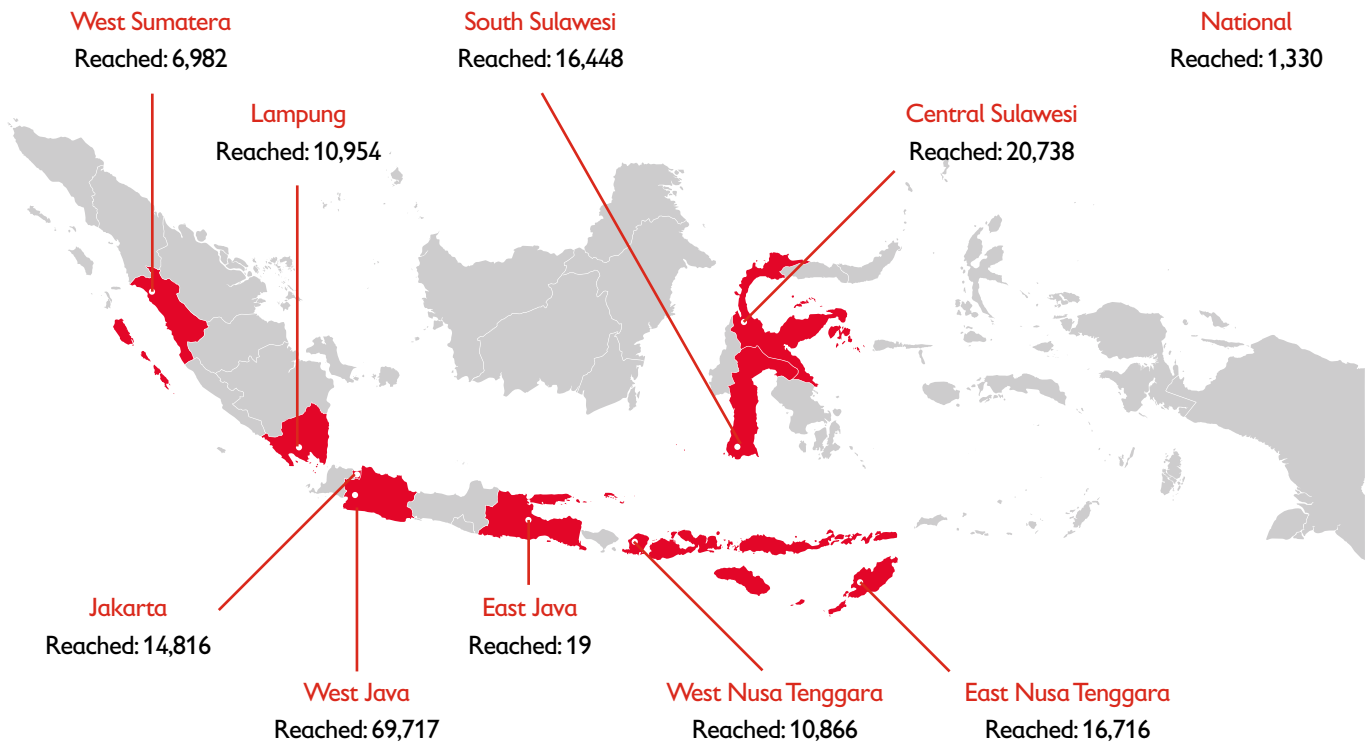
1. Psychosocial well-being and resilience of boys and girls is improved.
  - Boys and girls are well-informed on correct COVID-19 information (online/offline) and supported to claim their rights, children participation in development and communication of RCCE.
  - PFA hotline service for general public and children's group is running.
  - Support children-in-need alternative care.
2. Community care & social worker support for addressing children's issues within their environment is functioning.
  - The capacity of Community Based Child Protection (CBCP) in promoting critical prevention behaviors and in managing effective referral mechanism is increased.
  - Support the activation of case management mechanism at community level.
  - Direct support to social workers and Ministry of Social Affairs and Ministry of Women Empowerment and Child Protection.
  - Monitoring the condition of children in institutional care center and detention center.



## Families are resilient during the COVID-19 Outbreak

1. Family resilience is improved to address the issues affected by COVID-19 and prevent their children from harmful practices.
  - Increase number of vulnerable households able to cover their essential food security and clean water needs through cash and voucher assistance.
  - Increase access to the Government social safety net scheme.
2. Youth are activated to enable economic recovery.
  - Strengthened livelihoods or income generating activities for the most vulnerable families through online trainings, mentoring, and cash grants.
  - Youth are engaged into the public debate and decision-making forums and influencing decisions.

## Our Program Area



**168,586**

**Total People Reached**

**79,285**

Total Children Reached

**39,216**

Girls

**40,069**

Boys

**89,301**

Total Adults Reached

**38,606**

Female

**50,695**

Male

# Key Achievements

## March-December 2020

– Data source: Indonesia Covid-19 Response Monitoring Tool, Pulih Bersama Campaign Report



### Pillar 1

#### Mitigate the Impact of COVID-19 on Child Survival

**4,676**

Adults

Number of community health workers supported or trained to prevent and mitigate the impact of COVID-19 on child survival.

**73,205**

Items distributed

Number of Social Behaviour Change Communication (SBCC) materials distributed (disaggregated by type: e.g., printed and electronic materials).

**12,965**

Households

Number of households supported by Save the Children to access safe water, facilities for hand washing with soap and environmental sanitation practices.

**140**

Children

Number of children under five who received treatment for acute malnutrition.

**36,461**

Children

Number of girls and boys received/ accessed communication materials both online and offline platform.

**38,191**

Children

Number of children (in school and children care institution) received COVID-19 children hygiene kits.

**265,059**

Items

Number of Personal Protective Equipment (PPE) items distributed.

**37,979**

Items

Number of Hygiene Kits distributed.



### Pillar 2

#### Help Children Learn, Stay Safe and Return to School

**20,956**

Children

Number of children affected by school closures supported by Save the Children to access distance learning.

**807**

Adults

Number of people (representing schools) are trained to apply standard operating procedure/ protocol for safe and protective learning spaces.

**635**

Items

Number of hand washing stations installed/restored/repared by Save the Children.



### Pillar 3

## Protect Children from Risk of Violence, Exploitation, and Abuse in Their Homes and Communities

**953**

Children

Number of girls and boys are trained on and or participated in positive coping mechanism learning session.

**531**

Children and Adults

Number of children and caregivers receiving MHPSS (Mental Health and Psychosocial Support) support during the COVID-19 pandemic.

**41,438**

Children and Adults

Number people received child safeguarding session facilitated by Save the Children (disaggregated by gender and origin organization).

**1,682**

Adults

Number of parents participated in parenting session.

**40**

Children

Number of children receiving case management child protection support during the COVID-19 pandemic (e.g. for reintegration/ alternative care, risk of family separation, violence in the home, sexual and gender-based violence).



### Pillar 4

## Support Family Survival and Food Security through Safety Nets

**2,534**

Households

Number of households supported by Save the Children to receive cash and voucher transfers.

**0**

Children

Number of girls and boys participated in any thematic life skill education learning/training session.



### Advocacy

**5**

Lessons Learned

Number of documented lesson learned and good practices developed by Save the Children related COVID-19 presented or shared to key stakeholders at different levels.

**5**

Innovative Solutions

Number local strategies and/or innovative solutions related to COVID-19 initiated by youth and endorsed by Save the Children in national/sub-national level.

# Pulih Bersama (Heal Together) Campaign

Pulih Bersama (Heal Together) Campaign invite communities to help children and their families coping with the hard situation during Covid-19 pandemic. This pandemic has rapidly changed lives of many people, including children, and forced communities to adapt as rapidly as possible. With all uncertainties and sudden changes, children are put at a vulnerable situation of various risks.

1. Losing their parents due to COVID-19.
2. Their parents have lost their livelihood.
3. Difficulties to access quality educational services.
4. More vulnerable to be abused and exploited.
5. Difficulties to access basic health care and nutrition.
6. Living in disaster-prone areas.
7. Limited support for children with disabilities.

We have mapped that there are seven main risks that children has currently to face during the pandemic, including:

Through this online campaign, we want to help ensure children and families are able to get through all the challenges to keep developing and find new opportunities.

## Total Outreach

<b>3,905,755</b>	<b>2,051,821</b>	<b>40,655</b>
Facebook*	Instagram*	Twitter*
<b>14,269</b>	<b>138,995</b>	<b>223</b>
YouTube*	Website	Media Coverage

– **Total Outreach** (excl. media coverage) is the number of people or account who are exposed with campaign contents or activities.

– **Media coverage** is the total number of news or article about campaign content or activities published in the mainstream media.

\*) Data as of end of October 2020. The number is subject to double counting.

## Engagement Rate

<b>12.6%</b>	<b>0.9%</b>	<b>2.4%</b>
Facebook*	Instagram*	Twitter*

– **Engagement Rate** is the level of audience engagement or interaction with campaign contents or activities. Factors that influence engagement rate are audience's comments, shares, likes, etc.

\*) Data as of end of Oktober 2020. The number is subject to double counting.

## Campaign Webinar and Talkshow

**2,955**

Total Participants\*

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– **Total Participants** is the number of participants who attend webinar and talkshow through Zoom, YouTube, or Facebook platform..

\*) Data as of end of October 2020. The number is subject to double counting.

## Budget Allocation and Spending for COVID-19 Response

**Total Budget** :  **USD1,005,437**

**Total Spending** :  **USD684,050**

– Preliminary report as of Desember 2020. The number is subject to change.

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## Story of Mrs. Simpen, Working and Looking After Her Child during the Pandemic

*Text and photo by Rafael Gomes*

Since the Covid-19 pandemic was declared as a national disaster in Indonesia, activities in many public places have been very limited; making almost all community activities paralyzed. Many parents who used to rely on odd jobs, are now at risk of losing their income. One of them is Mrs. Simpen's family. Her husband almost never got another odd job offer.

Mrs. Simpen then has to help earn a living by raising fish in their small pond, cultivating their small rice fields, and becoming a farm laborer in people's fields, while still being a housewife. She also has to accompany her children to continue studying at home or wherever she is. Her youngest child is a toddler girl who is now attending Edelwais ECCD Center, which is one of the ECCDs assisted by Save the Children through the TRANSISI Project.

To help children from families like Mrs. Simpen's, Save the Children has provided learning kits assistance for

children. This is to ensure children continue to learn and play at home during the pandemic.

"We are helped by the learning kits provided. In a difficult economy situation like this, we don't have enough money to buy these necessities. My child likes the learning kits. While I was working in the fields, I guided my child in learning to draw and color," said the mother of three children.

Mrs. Simpen always looks after her youngest child when she has to work both in the fields and in the fishpond. She always takes the time to accompany her children even though at the same time she had to work. Meanwhile, the ECCD also took ways to ensure their students continue to study at home. Every week, the teachers regularly visit each students' family home and share with parents about how to assist children in learning at home. •



**Save the Children**

Save the Children in Indonesia has been registered as a local foundation named as Yayasan Sayangi Tunas Cilik by the Decree of the Indonesian Minister of Law and Human Right No.AHU-01712.50.10.2014 on May 21, 2014.

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