



CATCHING UP WITH TIME:

Protecting Children and Vulnerable Individuals Before, During, and After Covid-19

1

GOVERNMENT'S COMMITMENT TO ADDRESS THE PANDEMIC CAN NO LONGER BE POSTPONED

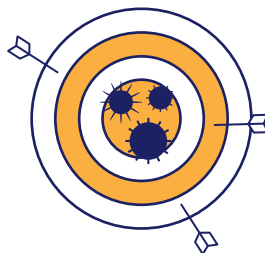


COVID-19 daily update is **not sufficient** to show us how critical the pandemic situation

COVID-19 CAN HAPPEN TO ANY OF US



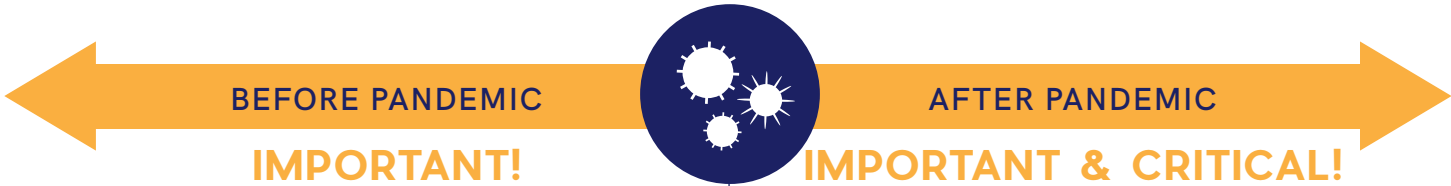
Children and groups that were not vulnerable, might now become vulnerable



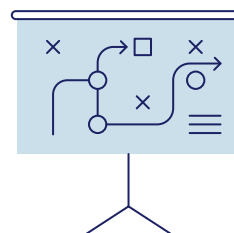
Inappropriate responses might create new vulnerabilities



Children and individuals who have been vulnerable might become even more vulnerable



The Government of Indonesia has committed to strengthen the system and services to be more responsive and inclusive



Our future is determined by how various sectors and regions address the pandemic and prepare for its recovery.



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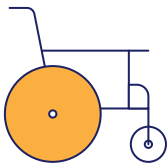
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2

WHO ARE VULNERABLE AND BECOME VULNERABLE DURING THE COVID-19 PANDEMIC?

VULNERABLE GROUPS WHICH ESTIMATES CAN BE IDENTIFIED

1



Children, Persons With Disabilities (PWD), and elderly

2



Children in household headed by single parents, mothers, elderly, and non-adults

3



Children, elderly, and PWD without legal identity

4



Children, elderly, and PWD in a household without clean water, electricity, and decent sanitation

5



Children, elderly, and PWD without health insurance

6

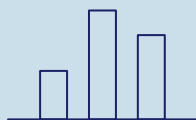


Children disrupted from learning opportunity

7



Children directly affected by COVID-19



The data analysis of SUSENAS is available in the full report.



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3

THERE ARE ALSO VULNERABLE GROUPS WHOSE INFORMATION IS INCOMPLETE

VULNERABLE GROUPS WHOSE DATA DEPEND ON THE PROGRAM

1



Children in detention and prison or children living with a caregiver that is being detained

2



Children in institutional care facilities (*panti*)

3



Children in boarding school and Islamic boarding school/ *pesantren*

4



Street children

5



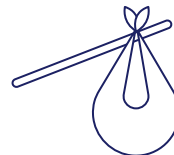
Children and adults living in households with perpetrators of domestic violence

6



Homeless children and adults

7



Asylum seekers in transit and refugees

8



Children receiving social assistance

GROUPS WHOSE DATA IS HARDLY OBTAINED



People who are stigmatized in community



People with domicile status issues



People whose identity status is not recognized by the state




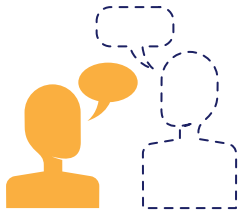









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4

IDENTIFYING THE SOURCE OF VULNERABILITY DURING COVID-19 PANDEMIC

“ Vulnerability is a disproportionate condition experienced by certain individuals due to the lack of access caused by poverty, remoteness, or limited mobility, gap in public service quality, and marginalization based on age, disability, and social identity. ”

<p>1</p>  <p>Individual health challenges Physical and mental health problems</p>	<p>2</p>  <p>Change or loss of caregiving environment and social support</p>	<p>3</p>  <p>Limited options and safe space for children and adults</p>	<p>4</p>  <p>Increased risk of violence, particularly domestic violence</p>
<p>5 Limited or declining quality of public and essential services</p> <div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;">  <p>a. Limited healthcare and nutrition fulfillment services</p> </div> <div style="width: 33%;">  <p>b. Limited education services</p> </div> <div style="width: 33%;">  <p>c. Limited welfare services</p> </div> <div style="width: 33%;">  <p>d. Limited population administration and civil registration services</p> </div> <div style="width: 33%;">  <p>e. Limited livelihood, social assistance, and the social security net</p> </div> <div style="width: 33%;">  <p>f. Limited access to online technology support infrastructure</p> </div> </div>			<p>6</p>  <p>Basic data constraints affect individuals and services</p> <p>a. Individuals' existence has never been officially registered</p> <p>b. Individuals has no proper civil registration documents</p>



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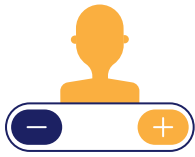
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5

WHAT DOES THE GOVERNMENT NEED TO DO IN SHORT AND MEDIUM-TERMS?

1

Reducing exposure to COVID-19 and other communicable diseases that are still prevalent in Indonesia



TESTING



TRACING



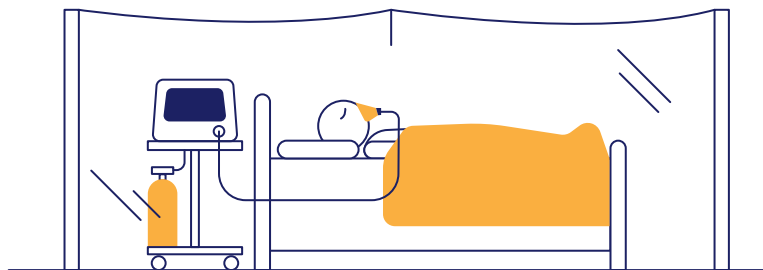
TRACKING



ISOLATING

2

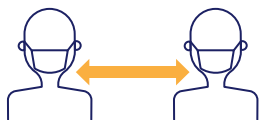
Reducing impacts from COVID-19 infection



TREATMENT

3

Reducing negative impacts of social restriction on basic services



Providing basic infrastructure and services that support the community to comply in **wearing face mask, keeping distance, maintaining hygiene, and washing hands**



Providing social assistance and social security net



Ensuring workers' safety and health in the workplace and during their commute



Strengthening community assistance and support for families



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6 WHAT DOES THE GOVERNMENT NEED TO DO IN LONG-TERM?

1



Preparing a universal vaccination system and management system of COVID-19 and other communicable diseases (TB, Dengue Fever, etc.)

2



Developing quick detection and response mechanisms that are available for regular use

3



Training service providers and developing online essential services for long-term

4



Improving child protection system

Basic services have not protected all citizens yet. For every 1 million citizens, there are only:

1.410

Hospital Beds



Source: PERSI per April 2018

402

Doctors



Source: MOH per 31 December 2019

1.413

Nurses



Source: MOH per 31 December 2019

31

Ventilators



Source: ASPAK per March 2020

3

Social Workers



Source: MOSA per January 2020



Meanwhile there are **>266 million** of Indonesians*

NUMBER OF BASIC SERVICES MUST BE INCREASED NOW!!

*Source: Office of Population Administration and Civil Registration (Dukcapil) per 31 December 2019



The Government must prepare newly governance from now on, so various services can operate in the "New Normal" after tackling the pandemic.