



INDONESIA: COVID-19 response

Multi Sectoral Response Plan Report No. 02

As of 27 August 2020

Situation Overview

As of 2 September, the Ministry of Health has confirmed that 180,646 people in Indonesia have tested positive for COVID-19 in 469 out of 514 districts / cities. Additionally, 129,971 people have recovered, and 7,616 people have died from the illness. Although all 34 provinces in the country are affected, records reflect that 78 percent of the total cases are identified in eight provinces: DKI Jakarta, East Java, West Java, Central Java, North Sumatra, Papua, South Sulawesi, and South Kalimantan. Java Island contributed 57 percent of all confirmed cases in Indonesia.

On 20 July, the President created the Committee for the COVID-19 Response and National Economic Recovery through the Presidential Regulation No. 82 of 2020. The committee consists of:

- The Policy Committee, that is led by the Coordinating Minister for Economy, Mr. Airlangga Hartarto, and the Minister of State-Owned Enterprises, Mr. Erick Thohir who is appointed as the Chief Executive. Later, the Chief of Staff of the Indonesian Army and the Deputy Chief of the Indonesian National Police are appointed as Vice Chief Executive.
- The Task Force for COVID-19 Response (*Satuan Tugas*), which is headed by Head of BNPB, Mr. Doni Monardo, who was previously the Chief Executive of the Task Force for the Acceleration of COVID-19 Response (*Gugus Tugas*).
- The Task Force for National Economic Recovery, that is chaired by the Vice Minister of State-Owned Enterprises, Mr. Budi Gunadi Sadikin.

In a ministerial meeting on 21 August, the Committee discussed and prioritized the following economic programme:

1. Accelerating the regional Loans that is regulated through Minister of Finance Regulation no. 105/2020;
2. Additional Regional Incentive Fund for the National Economic Recovery Program;
3. Labor intensive program on agriculture, particularly palm oil plantation;
4. Development of Digital Villages and Digital MSMEs;
5. Additional allocation and targeted recipients for the Pre-Employment Card Program;
6. Facilitation of traditional market; and
7. Labor Intensive Program through the National Strategic Project Development.

On 8 August, the Statistics Agency reported Indonesia's economic shrinking at 5.32 percent in the second quarter of 2020, while during the first quarter of 2020, it grew by 2.97 percent. The Government estimates the economy will grow 0.4 percent in July-September 2020 (Q III). The Agency calculated that the deepest shrinking between April and June is experienced in transportation and warehouse (-30.84 percent), accommodation, food and beverage (-22.02 percent), and other services (-12.60 percent). More recently, the Minister of Finance provided the Indonesia economic growth outlook in the third quarter of 2020 in the range of 0% to minus 2%. Meanwhile, the national economic growth forecast throughout 2020 would be between -1.1% to 0.2%.

Key COVID-19 cumulative figures

Health	Logistics	Risk Communications and Community Engagement	
<ul style="list-style-type: none"> More than 4.4 million Personal Protective Equipment (PPE) are provided to healthcare facilities staff and community health workers. A comprehensive assessment and an Intra-Action Review to identify best practices, gaps and challenges and develop contextualized recommendations for provinces is conducted to strengthen the COVID-19 response. Designed a platform for tracking COVID-19 related capacity gaps across hospitals. Technical protocols for this platform are disseminated to 834 hospitals across 34 provinces. Management and referral mechanism for indications of COVID-19 within the refugee communities are enhanced. Support the provision of Sexual Reproductive Health services through Indonesia Midwives Association in Greater Jakarta. Mental health and psychosocial messages have reached 1,090,695 people. 253,800 viral transport Media and swabs amounting to \$532,980 are handed over to government to enhance case finding in all 34 provinces. 	<ul style="list-style-type: none"> A Logistics Capacity Assessment is underway in 14 provinces concerning custom clearance, storage, cold storage, and transport capacities at the provincial level. Support the monitoring and evaluation tools for the ongoing logistics cluster operations undertaken by National Logistics Cluster. 	<ul style="list-style-type: none"> Support the national website which has received 22.6 million visitors and 71.6 million pageviews. Digital campaign #COVID19Diaries, which provide a platform for young people to share their experience during COVID-19, has reached 52.7 million people and engaged 1.57 million. 5,352 youth received support on Adolescent Sexual Reproductive Health through youth health lines. At least 27 videos and 118 infographics on health information in English and Indonesian have been published in July and August COVID-19 awareness posters are available at Trans Jakarta bus stations, serving tens of thousands of commuters daily. Information sessions on COVID-19 for nearly 8,000 refugees in their native languages. 467,897 people in 94 districts are reached with awareness and behavior change interventions using mobile vehicles ("COVID-19 cars"). 	
Food Security & Agriculture			
<ul style="list-style-type: none"> Developed and disseminated technical guidelines and strengthening capacity of health and community workers to ensure continuity of essential nutrition services. Roadmap of impact of COVID-19 on resilience of food systems is finalized. 			
Critical Multi-sectoral Services	Protection of Vulnerable Groups	Socio-economic Impact	
<ul style="list-style-type: none"> CCCM Development of TAGANA Multi-sectoral E-Learning platform and response plan and manual handbook on dealing with COVID-19 response. WASH More than 2,000,000 people reached with critical WASH supplies (including hygiene items) and services. Supported training of almost 10 000 healthcare workers from 20 provinces on waste management Shelter Support the development and dissemination of COVID-19 specific guidelines on: ✓ Safe reconstruction during Covid19 ✓ Self isolation and quarantine facilities ✓ Safe working practice for aid workers and volunteers 	<ul style="list-style-type: none"> Education Recent revisions to the national guidelines support school re-opening at both primary and secondary levels for learners across nearly half the country's districts deemed low-to-moderate risk. Supported digital assessment of over 4,000 students. Nutrition Key nutrition and social behavior change communication messages, materials and tools have reached 7.7 million people. 	<ul style="list-style-type: none"> 421,573 children living in or supported by 6,297 childcare institutions in 34 provinces were reached for hygiene, recreation kits and positive parenting/caregiver education materials. 10 series of advocacy and inclusion training activities are undertaken with MOSA for people with disabilities and Health Agency of DKI for protection against GBV. Engaged 1,515 people on issues related to parenting, capacity building for child and youth engagement, and strengthening the capacity of Islamic boarding schools on child protection during COVID-19. Capacity building for social and para-social workers has reached 2,918 people. Food packages, health and home rent allowance for 2,200 LGBTI in 12 provinces. 5,532 independent liver refugees (3,453 male and 2,079 female) are provided with cash-based intervention. 220 Drug Treatment Facilities in 34 Provinces used the SOP development to ensure safety; while 61 Prisons, 1 Prison Hospital, 1 Provincial Police Office, and 25,663 people in 7 provinces used the provision of supply. At least 7,914,000 households (affected by COVID-19) receiving humanitarian multi-sector cash grant for basic needs. Capacity gap mapping in 7 provinces on crisis response coordination. Support improving the web platform, LAPOR! to support COVID-19 awareness and reporting. Advocate and synchronize the "new normal" guidelines for the productive business sector with the private sector. Support MoV on a monitoring system for distribution of village funds as part of social protection. Support the development of guidelines for increasing coverage and benefits of unconditional cash transfers of a poverty-focused child grant program during COVID-19. 	

Partners' Response Overview

The Multi Sectoral Response Plan aims at complementing the efforts of the Government of Indonesia in addressing the direct and indirect impact of the COVID-19 crisis.

<p>Health</p>	<ul style="list-style-type: none"> • Working through the Ministry of Health, UNICEF has designed a platform for tracking COVID-19 related capacity gaps across all public and private hospitals in the country. Technical protocols for this platform have been disseminated to 834 hospitals across all 34 provinces. • IOM continues to deliver essential medical equipment and supplies to the COVID-19 task force and health providers across Indonesia. The medical equipment and supplies include ventilators, PPE for health care workers, x-ray viewers, defibrillators, and hospital beds, among other essential items. • IOM cooperates with various local health departments to enhance the management and referral mechanism for COVID-19 within the refugee communities, including on the use of isolation facilities, epidemiological surveys, and contact tracing. • UNFPA supports the continuation of the Sexual Reproductive Health and Family Planning services under the coordination of the Ministry of Health, BKKBN and with the Indonesia Midwives Association. • UNFPA continues to support the provision of Personal Protection Equipment in 400 Midwifery clinics in DKI Jakarta, Banten and West Java and will expand the support to East Java Province. • UNFPA supports the development of related guidelines on Sexual Reproductive Health, Family Planning and Elderly care in Crisis situations including the COVID-19 pandemic. • WHO and MoH jointly announced through a media release in English and Indonesian, Indonesia's involvement in a global serological study for COVID-19. The Study will involve more than 10 000 participants from 17 provinces and aims to estimate the national seroprevalence of antibodies to COVID-19. • WHO, the Directorate of Surveillance and Health Quarantine, MoH, the National Institute of Health Research and Development (NIHRD), and the COVID-19 Task Force are in discussions to optimize testing capacity in line with WHO recommendations, and to strengthen subnational surveillance and contact tracing. • WHO handed over 253800 viral transport media and swabs amounting to \$532,980 to the government to enhance case finding in all 34 provinces.
<p>Logistics</p>	<ul style="list-style-type: none"> • A Logistics Capacity Assessment concerning custom clearance, storage, cold storage, and transport capacities at the provincial level is underway in 14 targeted provinces: (East Java, West Java, Central Java, DIY, Banten, Jakarta, Central Sulawesi, South Sulawesi, South Kalimantan, West Sumatra, North Sumatra, West Nusa Tenggara, Bali, and Papua.) The interim result revealed that other than cold chain / storage most facilities seems to be intact in 14 provinces being assessed.
<p>Risk Communications and Community Engagement</p>	<ul style="list-style-type: none"> • UNICEF continues its support the national website for COVID-19 which has received 22.6 million visitors and 71.6 million page views. • IOM disseminates information on COVID-19 to returning Indonesian migrant workers in cooperation with the Ministry of Women Empowerment and Child Protection and the Ministry of Social Affairs through multi-media information materials. In addition, an awareness raising session to around 8,000 refugees continues, including to the newly arrived Rohingya women, men, and children in Aceh, in their native language.

	<ul style="list-style-type: none"> • UNFPA continues promoting youth leadership in addressing the pandemic through online public discussions, dissemination of information through youth communities of practice, and the provision of psychosocial support through online gathering and counselling for adolescents and youth. • WHO is regularly sharing and translating important health information messages on its website and social media platforms and has recently published 15 videos and 49 infographics in English and Indonesian.
<p>Food security and Agriculture</p>	<ul style="list-style-type: none"> • The Roadmap of the impact of COVID-19 on the resilience of food systems is being finalized and the Technical Cooperation Programme is prepared to support addressing the most immediate consequences of the pandemic on food systems in the country. • Three bulletins on COVID-19 Economic and Food Security implications for Indonesia have been issued: <ul style="list-style-type: none"> - 1st edition March: Effects of the COVID-19 outbreak on food prices - 2nd edition in May: Economic and Food Security implications - 3rd edition August: Updated Economic and Food Security implications
<p>Socioeconomic impact</p>	<ul style="list-style-type: none"> • To get a comprehensive analysis on the socio-economic impact of community protection programmes, a series of survey are being conducted: <ul style="list-style-type: none"> - Household surveys with SMERU and BPS (using Susenas Database); targeting 20,000 respondents. The survey will be completed in three rounds via an interactive voice response and will assess the situation of household samples. Follow up surveys will focus on household access to social protection and welfare status. - Survey activity framework for MSME with LPEM UI and in coordination with the Ministry of Cooperatives; targeting 1100 MSMEs. - Gender based violence (GBV) and unpaid worker surveys with JPAL SEA that combine quantitative survey (targeted 1300 respondents) and in-depth interview (phone survey targeted 200 respondents) - Innovative financing analysis for social protection with LD FEB UI; targeting 7 provinces.
<p>Multisectoral services</p>	<ul style="list-style-type: none"> • Education: Recent revisions to the national guidelines supporting school re-opening at both primary and secondary levels for learners across nearly half the country's districts deemed low-to-moderate risk. A UNICEF supported digital assessment of over 4000 students suggests that 87% cent of them are eager to return to school despite concerns with COVID-19. • WASH: UNICEF's WASH and the Data and Analytics team have been supporting a national digital platform assessing the 'new normal' guidelines which includes real-time independent monitoring of handwashing, safe distancing, and mask-usage. As part of WASH advocacy and technical support to provincial and district governments in Papua, and as part of the Reopening of Schools Protocol, UNICEF has developed a WASH data analysis and costing tool to assess the gap in WASH services in schools and funding requirements. UNICEF has supported the Handwashing Technical Guidance for schools and public places and institutions, which were endorsed by the Ministry of Education and Culture (MOEC) and the Ministry of Health (MOH) and disseminated to all 514 districts in 34 provinces. • WHO has been supporting the MoH with webinars on waste management since 2 June. As of 06 July, 9,684 participants have been trained from 20 provinces. The Ministry of Environment and Forestry (MoEF), the MoH and WHO presented current policies on solid and liquid waste management, water, sanitation and hygiene as well as the use of incinerators and autoclaves.

	<ul style="list-style-type: none"> • CCCM: IOM continues to support the national cluster for displacement and protection coordinated by MoSA through regular coordination meetings with focused discussions on the response to COVID-19. • In collaboration with MoSA, IOM is developing the TAGANA Multi-sector E-Learning platform and response plan and manual handbook to support and enhance the capacity of TAGANA in dealing with the COVID-19 response. • Nutrition: UNICEF continues to support the national and subnational government in ensuring the nutrition security of mothers, infants and young children, by developing and disseminating technical guidelines and strengthening capacity of health and community workers to ensure continuity of essential nutrition services. Various behavior change communication materials developed with the government have been disseminated to more than 7.7 million people.
<p>Protection of Vulnerable Groups</p>	<ul style="list-style-type: none"> • IOM maintains the continuity of critical services to victims of trafficking of persons during the pandemic, assisting survivors in the return to their homes, and initiating tailored reintegration support, including legal assistance, psychosocial counselling, and economic reintegration services. • IOM works with the National Agency for the Protection of Indonesian Migrant Workers (BP2MI), MoSA, and the local government agencies and task forces in Pontianak, Bali, Tanjung Pinang, and elsewhere to enhance responses towards the specific challenges faced by returning Indonesian migrant workers at the respective points of entry. • UNFPA continues to support the prevention and Management of GBV during the new adaptation to the COVID-19 pandemic and the provision of survival kits to 500 pregnant woman and elderly in Central Sulawesi. • On child protection, UNICEF and partners directly engaged 1,515 people (337 children and 1,178 adults) on issues related to parenting, capacity building for child and youth engagement, and strengthening the capacity of Islamic boarding schools. 314 young people in Aceh Province participated in an online writing competition to promote mental health and wellbeing. By the end of July, capacity building for social and para-social workers has reached 2,918 people at national and sub-national level. • WHO continues to support the government with the programme analysis of essential health services to ensure their continuity during the pandemic, sharing programme-specific WHO guidance on continuity of services. Technical support provided to some programmes include Tuberculosis, Immunization, Dengue, Malaria, Hepatitis, Leprosy and HIV. • UNHCR delivered cash-based interventions to 5,532 refugees (3,453 male and 2,079 female) as part of COVID-19 Response. • UNHCR lead the coordination on the humanitarian response to 99 Rohingya refugees in Aceh, together with IOM, UNICEF, JRS, and several other local organizations. A coordinated approach is maintained to ensure the protection and provision of basic needs of the persons of concern. • UNHCR together with the Ministry of Social Affairs will deliver bar soaps to promote hand-washing to 5,000 refugees and 50,000 Indonesian families in Greater Jakarta and surrounding areas. • UNHCR continues to monitor the situation of a refugee who has been under Immigration detention at the International Zone Terminal 3 Soekarno-Hatta Airport since December 2019. UNHCR was recently granted in-person access to meet the

	<p>refugee for protection counselling and to deliver the refugee hygiene materials that would give him better protection from COVID-19 at the airport.</p> <ul style="list-style-type: none"> • UNHCR continues to monitor COVID-19 related discrimination against refugees and asylum seekers that were previously reported in Bogor and Garut of West Java. • UNHCR maintains communications with asylum seekers and refugees who are serving their sentence in different prisons, to make sure there are aware of health protocols and have access to health care.
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Partners' COVID-19 response by priority area

Health (including Reproductive Health, Mental Health and Psychosocial Support)

Vulnerabilities

- At least 70 doctors and 50 nurses have died from COVID-19 in Indonesia, with hundreds more contracting the disease while fighting the pandemic. The Indonesian Medical Association (IDI) estimated that between 200 and 300 doctors have been infected by the virus, while the National Nurses Association (PPNI) stated that at least 300 nurses have contracted the disease.
- Health resources have significantly increased. From the initial 132 referral hospitals, there are now 668 referral hospitals, with 166,233 beds and 2,338 isolation rooms. However, these remain low when considered against the total number of people in Indonesia.
- Prior to COVID-19, 5.4 million pregnant women per year required Ante Natal Care, Intra Natal Care, and Post Natal Care services, as well as 30 million couples of childbearing age needed family planning services. Interrupted reproductive health services are causing immediate and long-term issues.
- An assessment of immunization services among over 5,000 health facilities identified service disruptions in 84 per cent of facilities.
- 28 percent of Puskesmas (community health centers) are not fully functioning as per operational hours and 84 percent of Puskesmas experienced a reduction in the number of visits which is likely to impact the provision of Reproductive Health including Family Planning services.
- A 40 percent reduction of new Family Planning users in March compared to February 2020 means that unmet needs for Family Planning have likely increased.
- Reproductive Health services are needed for 5.4 million pregnant mothers and 30 million eligible couples.
- At least 900 private practicing midwives closed their services due to lack of PPEs.
- In family planning services, there is an estimated 30-40% reduction of new users of contraceptive methods.
- An estimated 370,000 to 500,000 additional unintended pregnancies were announced by BKKBN.

Activities

- WHO and UNICEF published a joint press release to commemorate World Breastfeeding Week. The statement calls on the government and stakeholders to safeguard and promote access to services that support mothers to continue breastfeeding practices during the COVID-19 pandemic.
- WHO, the Indonesia Global Compact Network (IGCN), ILO and UNDP conducted an Executive Roundtable Dialogue on 6 August, to be followed by a series of webinars on 'Business Unusual in the New Normal'. The webinars aimed to facilitate the dialogue between UN agencies, governments, business associations, the private sector and workers regarding the needs, concerns and challenges for health and safety standards for businesses in the private sector during the COVID-19 pandemic.

- The MoH, supported by WHO, is conducting a comprehensive field assessment to identify best practices, gaps and challenges and develop contextualized recommendations for provinces to strengthen the COVID-19 response. The assessment tool was piloted in nine provinces: Banten, East Java, North Maluku, North Sulawesi, Papua, South Sulawesi, West Java, West Papua and Yogyakarta. WHO assisted the MoH in a country-level Intra-Action Review (IAR) during the second week of August. The global IAR guidelines and facilitators' packages were translated to Indonesian and adapted to the country context and around 100 participants were trained from multiple sectors to conduct the IAR. The results of the field assessment and the IAR will be used to guide the development of national and province-specific recommendations when updating the provincial and national COVID-19 response plans.
- WHO is supporting IDI to develop supplementary comprehensive protocols for doctors, focusing on their personal protection during COVID-19 service delivery, and the establishment of an information system to collect data on the number of COVID-19 infections, hospitalizations, recoveries and deaths in doctors. Similarly, WHO also supports preventive measures for nurses, particularly in developing educational materials on IPC and to assess nurses' exposure to the virus.
- WHO supported the MoH with the finalization and dissemination of the fifth revision of the national Guidelines on COVID-19 Prevention and Control. The latest guidelines have revised some case definitions and discharge criteria, in line with WHO guidance.
- UNFPA, with the MoH's Family Health Directorate as Coordinator of Reproductive Health Sub Cluster, is developing awareness and educational videos for health providers and pregnant mothers for the continuation of Sexual Reproductive Health and Family Planning services.
- Under the leadership of Bappenas and the MoH, a rapid situational assessment on the immediate impact of COVID-19 on reproductive health services has been conducted and the results were shared on 18-19 August by Bappenas. A more extensive assessment will be facilitated in September 2020 – February 2021.
- UNFPA supported the Family Planning National Agency with the development and sensitization of the Operational guidelines on contraceptive availability in crisis situations; natural disaster and pandemic situations.
- The Indonesia Midwives Association, supported by UNFPA is facilitating capacity building/support for midwifery centres of excellence to implement distance learning mechanisms and disseminating guidelines for the provision of maternal and newborn health services during the pandemic.
- Coordinated with the MoH, UNFPA facilitated a capacity building seminar for health workers and programme managers by disseminating guidelines through virtual, video, and face to face, for the provision of maternal, newborn health and contraceptive services.
- UNFPA has provided Personal Protection Equipment (PPE) to 412 midwifery clinics in 3 COVID-19 epicentral areas in Jakarta, West Java and Banten Provinces, to help the continuation of their services from April to September. The expansion of services to East Java Province (Surabaya and Sidorjo Cities) is underway.
- The North Luwu District Health Cluster and its Reproductive Health (RH) Sub-cluster have been activated in mid-July, following flashfloods in the area. UNFPA has been supporting coordination and linking the regular RH Sub cluster coordination at the district level to the National RH Sub Cluster. Supported by DFAT, UNFPA distributed 120 dignity kits to the district.
- UNODC, the Ministry of Social Affairs (MoSA) and the National Narcotics Agency (BNN) launched guidelines on mitigating and preventing the impact of COVID-19 on drug treatment facilities. The two Government institutions run drug treatment facilities in the country. The Guidelines will help prevent COVID-19 among drug treatment patients and users and to protect doctors.

- As of 10 July, Muhammadiyah has treated 656 confirmed cases, and 6,359 suspected cases in its 79 hospitals.
- UNOPS is procuring oxygen respirator, PCR test machines, mobile labs for COVID-19 testing, respirator/ventilators, and ambulance without sound pressure function, as well as thermal imaging cameras for Jakarta LRT station funds, with support from KOICA (\$3.4 M). It also procures PCR test machines, ambulances, ventilators, reaction kits, packaging boxes, and medicine with funds from the Japan Ministry of Foreign Affairs (\$4 M). The medical equipment will be handed over through BNPB / MoH.
- UNDP works with MoH for the provision of 30 VG70-type ventilators. UNDP, WHO, and IOM have provided 45 ventilators through the National Agency for Disaster Management (BNPB) and the MoH.
- UNDP donated 500,000 medical masks to the Ministry of Foreign Affairs (MoFA) and BNPB.
- UNDP and WHO are working to strengthen COVID-19 related medical waste management and procuring 4 incinerators and 4 autoclaves to support the Ministry of Health in increasing the capacity for medical waste handling.
- UNDP provides advisory support services to the Government to strengthen data systems to ensure an informed, data-driven response strategy to the COVID-19 crisis.
- With the financial support of the Asian Development Bank (ADB) and other partners, UNICEF has procured a total of 177,667 units of critical health supplies and handed these over to the MoH. Additionally, key equipment such as syringe pumps and biomedical deep freezers have been procured.
- To improve the responsiveness of the health system, UNICEF has supported the update of technical protocols on hospital data, with socialization to 834 hospitals across all 34 provinces. Furthermore, UNICEF supported the MoH in the development of the 'new normal' guidance for health care facilities, for which field testing and piloting were completed. UNICEF has also supported the updating of the dashboard that visualizes COVID-19 related data for all private and public sector hospitals across the country, to reflect the adoption of new case definitions, as well as improved analyses of pediatric COVID-19 cases.
- UNICEF and partners continue supporting a series of capacity-building exercises for immunization, HIV, MNCH, malaria, which have reached additional 11,432 health care workers across 34 provinces. To further highlight the importance of continuing HIV/AIDS services, UNICEF has been providing close technical support to MoH in the development of IEC materials.
- UNICEF continues to enhance sub-national capacity through its network of 7 regional offices across Indonesia, where embedded staff have been supporting the provincial COVID-19 Task Forces in reviewing and implementing protocols and guidelines; surveillance and epidemiologic investigation; supporting improved data and information flows; supporting the establishment and monitoring of isolation centers and capacity building of health care workers; designing and disseminating risk communication and community engagement content; and locally adapting IEC materials. UNICEF has also been providing support around access to local government budget allocations as well as understanding the overall fiscal space in the health sector.
- Following the MoH letter on the inclusion of refugees to access COVID-19 mitigation measures, IOM held virtual coordination meetings with health departments and local community clinics to enhance the management and referral mechanism for COVID-19 within the refugee communities, including on the use of isolation facilities, epidemiological surveys, and contact tracing.
- On 22 July, IOM delivered essential medical equipment and supplies to the COVID19 task force and health providers across Indonesia. The medical equipment and supplies included ventilators, PPE for health care workers, x-ray viewers, defibrillators, and hospital beds, among other essential items.

- On 5 August, medical equipment and supplies were delivered by IOM to some places in Tangerang such as Tangerang hospital, BPBD office and several community health central. The distributed items were 1 mobile X ray, 12 hospital beds, 1,300 N95 masks and more.
- On 18 August, medical equipment and supplies by IOM were delivered to Bekasi Municipality and directly received by Mayor of Bekasi. The distribution took place in three different locations. The distributed items included 1.000 surgical masks, 400 N95 masks, 1.050 gloves pairs, 50 lt. hand sanitizers, and 1 mobile X ray.
- On surveillance efforts, IOM collaborated with the city health office in Makassar on epidemiologic surveys and contact tracing within refugee communities in four community accommodations. In addition, the online self e-health assessment tool has been continuously utilized by refugees following its launch in May 2020.
- Wahana Visi Indonesia has distributed around 250,000 masks, provided over 4,700 PPE packages for medical personnel, assisted 180 medical facilities including hospitals and clinics with COVID-19 preventative or response support, and reached 2,000 children with Mental Health and Psychosocial Support services (MHPSS).
- Save the Children provided PPE to over 34,000 people through 62 community health centers and its networks.

Gaps and Constraints

The COVID-19 pandemic has impacted the health systems in Indonesia, which require immediate and long-term support.

Logistics

Vulnerabilities

- There is growing concern on the readiness of cold chains/storage for upcoming COVID-19 vaccines. At the moment there is no available mapping or assessment of full cold storage/chains capacity in Indonesia.

Activities

- WFP continues providing coordination support to the Government-led National Logistics Cluster, by facilitating regular, bilateral and technical coordination meetings involving the relevant Government counterparts and private sectors at the National and Sub-national levels.
- BNPB issued a Decree of the National Logistics Cluster Companion/Supporting Team which formally acknowledge the logistics cluster as part of disaster response mechanism under BNPB's leadership. The momentum continues with the drafting of the provincial decree and its technical guidelines for the establishment of the Provincial Logistics Cluster of South Kalimantan which are currently being reviewed by BNPB.
- WFP facilitated a strategic dialogue on humanitarian logistics and supply chain on 28 July, which was attended by 169 people from various logistics stakeholders. Furthermore, in collaboration with the Coordinating Ministry for Human Development and Culture, WFP is developing a country commercial supply chain strategy on essential goods during the COVID-19 pandemic.
- WFP and National Logistics Cluster members continue to liaise with Indonesia Cold Chains Association (ARPI), MoH in regard to existing cold chain for vaccines, and other associations with limited to small

capacity of cold storage. WFP is facilitating the technical coordination with the relevant directorate within MoH and BNPB on these issues.

- WFP managed several TAGANA (Ministry of Social Affairs volunteers) capacity development sessions for 930 people, (M:754, F:176) members from five provinces (South Kalimantan, West Java, East Java, Central Java, and East Nusa Tenggara) in July and August 2020. The sessions were facilitated collectively by IFRC, WFP, IOM, UNICEF, RedR Indonesia, WHO and OCHA.
- The Logistics Capacity Assessment in 14 provinces is being completed, through the support of Provincial Logistics Clusters and private sectors.
- WFP is working closely with BNPB and NLC supporting teams to finalize the monitoring and evaluation tools for the ongoing logistics cluster operations undertaken by NLC.
- A dedicated logistics web-page and a Share-Point are maintained by WFP, with more documents available in Bahasa Indonesia and English. All can be assessed at <https://logcluster.org/countries/IDN> and <https://wfp.sharepoint.com/sites/KlasterNasionalLogistik>
- WHO is coordinating a procurement portal for the COVID-19 response aimed at facilitating plans to request critical supplies. Information about international shipments would be consolidated through the WHO Procurement Portal, so that WFP/NLC can coordinate the necessary logistics services with the relevant authorities and service providers (such as; customs documentation, BNPB recommendation, anticipate the needs of cold storage, transport capacity, etc.)

Gaps and Constraints

- WFP and NLC partners from the private sector see the importance of setting up a 'hub and spoke' business model, by utilising alternative entry points to speed up the delivery of critical supplies. This is also important for long term strategy, for instance once the vaccine has been produced, and requires fast distribution globally.
- Activating the provincial logistics cluster and engaging more the private sector to be part of the provincial logistics operation partners remains of paramount importance.
- There are growing needs for logistics management capacity at the downstream level concerning the implementation of health protocols, proper handling of goods, storage and distribution during the COVID-19 pandemic.

Risk Communications and Community Engagement (RCCE)

Vulnerabilities

- Important to maintain public trust in the government and health authorities in messages and instructions (including to protect the public from incorrect information).

Activities

- The RCCE team works to communicate messages effectively on the MoH 5th revision of the National Guidelines on COVID-19 prevention and control. New terminologies and definitions introduced in the revised guidelines are explained in a developed FAQ that will be disseminated to sub-national stakeholders.
- The first edition of Suara Komunitas (Community Voice) includes 28 surveys and studies conducted between February and June by 18 organizations and to be available in mid-August.
- WHO and Wahana Visi Indonesia conducted a rapid assessment during the last week of July to gain insight into community receptiveness and information needs as well as identify appropriate communication strategies in 16 districts of four provinces: East Nusa Tenggara, North Maluku, Papua and West Kalimantan.

- WHO continues to share important health information on its website and social media platforms in English and Indonesian; 27 videos, 118 infographics and several guidance have been published in July and August
- UNICEF's Communication Team is embedded in BNPB and the Government's COVID-19 Task Force and provides direct strategic and coordination support on all aspects of risk communications. UNICEF has facilitated more than 350 daily national press briefings with 500 experts and continues to provide technical and content creation support for the Government's COVID-19 website (www.covid19.go.id), accessed by more than 22.6 million users between March 17 - Aug 5, with 71.9 million pageviews.
- UNICEF also supports COVID-related SMS messaging which reaches 200,000,000 people using weekly blasts through an agreement with Mobile Network Operators.
- UNICEF supports a wide range of digital content design and dissemination. These have reached 50 million people and generated over 4 million engagements on social media platforms; 500,000 visitors have been reached with practical information related to COVID-19; a UNICEF Chatbot has provided up-to-date information on ways to protect against COVID-19 as well as information on hoaxes to 300,000 people who registered; and UNICEF-produced radio PSAs have reached 13 million people on public and private radio stations.
- Five prominent public figures recorded video PSAs on key COVID-19 messages for UNICEF. In addition, a partnership with 130 micro and nano digital influencers amplifies COVID-19 related messaging to highly targeted audiences and directing them to UNICEF's digital platforms.
- Indonesia's National Children's Day activities on the theme of COVID-19 include a live TV show on national television during which children 'took over' the studio, produced the show and linked with children around the country.
- Partnerships with the country's two largest faith-based organizations (NU and Muhammadiyah) and three community-based organizations have mobilized 4,500 community volunteers in 94 districts. These have reached 467,897 people with awareness and behavior change interventions through the use of mobile vehicles ("COVID-19 cars"), disseminating messages through inter-personal communication in public places and communities, and has included installation of simple hand washing facilities.
- To support youth engagement, a digital campaign called #COVID19Diaries provides a platform for young people to share their experience during COVID-19 and mobilize others to take action through stories, photos, videos, drawings, etc. So far, the campaign has reached 52.7 million people and engaged 1.57 million on social media through over 800 submissions shared by young people.
- A series of online media briefings covering various aspects of the impact of COVID-19 on children was launched following the release of a Policy Brief on the socio-economic challenges facing children. Each media briefing brings together experts to discuss a specific aspect of COVID-19 and its impact on children and advocate for child-friendly policies. So far, six media briefings were held: 1. child poverty (link + press release + explainer video); 2. mental health (link); 3. immunization (link + press release); 4. education (link + press release + explainer video); 5. nutrition (link + press release + explainer video); 6. young people (link + press release) attended by over 1,200 journalists and participants, leading to over 250 articles in national and international media.
- UNDP teamed up with Trans Jakarta to provide COVID-19 awareness posters spread out all of Trans Jakarta bus stations, serving tens of thousands of commuters daily.
- On youth awareness UNDP teamed up with online media Katadata, National Geographic and Magdalene to provide information on the risks and impact of COVID-19 with specific themes on gender violence, environment and rights for disabled communities. With the aforementioned media, UNDP held a series virtual discussion, targeting over 2000 attendants so far from all part of Indonesia.

- In July, UNDP's monthly SDG Talks series featured a panel discussion on Gender Based Violence (GBV) during the COVID-19 pandemic and the situation that victims have faced. It discussed UNDP's initiatives to address the issue.
- At least 5,352 youth received support on Adolescent Sexual Reproductive Health through youth health lines in Indonesia facilitated by UNALA Clinics, Supported by UNFPA.
- In collaboration with the Ministry of Women Empowerment and Child Protection, IOM developed a public video campaign to address the stigma against returning Indonesian migrant workers. A video series, titled "Avoid the Virus, not the Person," was posted on government websites and distributed through civil society partners and migrant advocacy groups.
- IOM continued cooperation with MoSA and other national actors, including the National Agency for the Protection of Indonesian Migrant Workers (BP2MI) to increase awareness on COVID-19 among returning Indonesian migrant workers and their families. In July, community engagement in this realm extended to West Sumba and South West Sumba of East Nusa Tenggara, where IOM distributed posters and brochures to the migrant worker communities on COVID-19 prevention and mitigation measures.
- IOM field teams throughout Indonesia provided on-the-spot and online targeted information sessions for nearly 8,000 refugees under IOM care on COVID-19 prevention and mitigation measures in their native languages. IOM facilitated refugee access to testing and health care services.
- As of mid-June, 522,712 people received information about COVID-19 prevention and 35,433 Information, Education and Communication (IEC) materials were printed and distributed by Wahana Visi Indonesia.

Food Security and Agriculture

Vulnerabilities

- Fragilities in supply chain and markets are reducing people's access to adequate diverse sources of food, both in rural and urban areas, especially where the pandemic has been severe and food insecurity is in any case pronounced.

Activities

- WFP has finalized the third bulletin on food security with snapshot of the implications of the pandemic on employment, livelihoods, food security and impact on social protection programmes.
- WFP has initiated discussions with the Food Security Agency (BKP) of the MOA and BPS on its feasibility study on utilization of a WFP's mobile data collection and monitoring (mVAM) in Indonesia. The system allows collecting data on early warning and monitoring the situation in remote locations.
- The Rome-based Agencies (FAO, IFAD, and WFP) roadmap of the impact of COVID-19 on resilience of food systems is finalized and the Technical Cooperation Programme (TCP) is prepared to technically support the Government of Indonesia in addressing the most immediate consequences of the on-going pandemic on the food systems in the country.
- FAO, UNICEF and WFP are in the process of implementing a survey to assess the status and determinants of household food security and the nutritional status of under-five and their mothers in informal urban settlements of Jakarta. This study, in such settings, will bring robust evidence on critical issues related to food security and nutrition and provides recommendations to Government and stakeholders for adapted interventions specific to poor urban communities.
- WFP initiated collaboration with BKP in strengthening its unified food security and nutrition early-warning monitoring, which builds on the existing Food and Nutrition Surveillance Systems (SKPG).

- As of 12 July, Rumah Zakat has provided about 20,000 food packages and 6,000 ready-to-eat meals benefitting to 24,381 poor households.

Gaps and Constraints

- There is limited multi-stakeholder coordination platform to address the most immediate consequences of the COVID-19 pandemic on the food systems in Indonesia.

Mitigating the socioeconomic impact of the crisis

Vulnerabilities

- BAPPENAS has estimated that the unemployment rate in Indonesia will increase by 4 million to 5.5 million people in 2020 (8.1-9.2 percent), and in 2021 by 10.7 million up to 12.7 million people (for a 7.7 to 9.1 percent rate).
- In March 2020, BPS (Statistics Indonesia) indicated that the country's poverty increased by 0.37% compared to last year's figure, meaning that there are 1.28 million Indonesians that fell into poverty. In rural area, the poverty increases from 12.62% to 12.82%, while in urban area it increased from 6.56% to 7.38%. The trend is expected to increase.
- Remittances of Indonesian migrant workers dropped by 10% between the first quarter of 2020 compared to the fourth quarter of 2019. Updated estimates indicate that total remittance receipts for the year will decrease by at least 13% due to reduced opportunities for Indonesian migrant workers to go and maintain their livelihoods abroad.

Activities

- UNDP is mapping the capacity gap in seven provinces on crisis response coordination. The results will trigger the provision of technical personnel and other resources to strengthen cross-sectoral coordination capacity. These activities are conducted between April to July 2020.
- UNDP supported the Ministry of Administrative and Bureaucracy Reform to improve its citizen reporting platform, LAPOR! allowing it to support COVID19 awareness and reporting. Currently, UNDP supports the adjustment of the program operation, and development of a framework for synergizing the reporting system between the regional and National Government.
- UNDP is supporting big data analysis mechanisms in accordance with the data privacy code of conduct and international standards for ethical use of data. It identifies digital solutions that can help collect and share information, provide telecommunications services and essential public services e.g. telemedicine. These efforts, conducted in May – July, will enable effective response interventions.
- To get a comprehensive analysis of the socio-economic impact for the community protection programme, a series of surveys are being conducted:
 - UNDP and UNICEF - Household surveys with SMERU and BPS (using Susenas Database); targeting 20,000 respondents. The survey will be completed in three rounds via interactive voice response and will be assess the situation of the household samples from the full-scale survey. These follow up surveys will focus on household access to social protection and welfare status.
 - UNDP - Survey activity framework for MSME with LPEM UI and in coordination with Ministry of Cooperative; targeting 1100 MSMEs.
 - Gender based violence (GBV) and unpaid worker surveys with JPAL SEA that combine quantitative survey (targeted 1,300 respondents) and in-depth interview (phone survey targeted 200 respondents)
 - UNDP - Innovative financing analysis for social protection with LD FEB UI; targeting seven provinces. The study attempts to explore the opportunities and challenges in leveraging

innovative finance to strengthen government social protection system and facilitate the involvement of the private sector and philanthropy in ensuring social protection for most affected people, including households, MSMEs, informal workers, and vulnerable groups.

- UNDP, WHO, ILO, and OCHA are working with other clusters to advocate and synchronize the "new normal" guidelines for the private sector:
 - Webinar - Executive Roundtable Dialogues on the New Normal Protocol for Sustainable Business delivered on 22 July 2020. https://youtu.be/o_Jdz9jcVis
 - The first sectoral webinar delivered on 6 August with the focus on how to establish health and safety protocols for getting back to general workplaces. <https://youtu.be/MQe1YC2oaB0>
 - The second webinar delivered on 13 August with the focus the health and safety protocols in food business. <https://youtu.be/UsG6bh0cGLw>
 - The next webinar series will focus on hotel and tourism (19 August), mass gathering and sport event (27 August) and transportation (3 September).
- UNDP and UNICEF are supporting the Ministry of Villages (MoV) and MoSA on data synchronization mechanism for cash assistance schemes provided by both ministries.
- UNDP is supporting MoV for the formulation of a monitoring system for the distribution of village funds for labor-intensive activities as part of social protection to strengthen community economic security.
- UNDP is supporting MoV to strengthen its socio-economic response to COVID-19 at the subnational level thru an area-based integrated response using a social platform approach. The platform interconnects a wide-range of local stakeholders and initiatives to work on a systematic and comprehensive response to COVID-19.
- UNDP, through its Youth Co Lab, and in partnership with UNICEF's U-Report conducted a survey among 756 young entrepreneurs to identify the challenges and most needed support from all across Indonesia with a majority of respondents coming from West Java, Central Java, East Java, North Sumatera and working in the service, F&B, and retail sector. From the survey results, 79% of youth entrepreneurs reported that COVID-19 brought negative impact to their business where 21% of youth entrepreneurs had to close their business.
- CARE Indonesia implements four cash-for-work and voucher assistance interventions; 1. for 100 laid-off female garment workers in Sukabumi and Purwakarta Districts of West Java, 2. the Multi-Purpose Cash Assistance for 200 women in the same locations, 3. Cash for Labour Intensive benefitting 160 people in NTT, and 4. Cash Assistance that will target 2,971 low-income households with pregnant and lactating mothers, children under 5 years, person with disability and elderly, in Serang District of Banten and Bone District of South Sulawesi.
- Oxfam will start a cash transfer programme in Banten and Bogor in West Java Province, targeting 2,300 beneficiaries, working with the Red Cross Indonesia and PT Pos Indonesia. Main target group is the communities affected by flash floods in early 2020.
- Wahana Visi Indonesia is supporting 2,557 households through cash and voucher assistance for livelihoods.
- UNICEF is providing ongoing support to the government in developing guidelines for increasing coverage and benefits of unconditional cash transfers of a poverty-focused child grant program during COVID-19. UNICEF also provided support on the design of a modified mechanism for a locally controlled 'village fund' that has so far benefitting 6.5 million of poor families not currently accessing national social protection programmes. Finally, UNICEF is working with the Ministry of Finance and the National Bureau of Statistics with INDOMOD projections to simulate the impact of government spending on social protection through COVID-19 safety net programmes, and to identify priority programs for children for secured financing in the 2021 Annual Budget.
- UNFPA is facilitating a situation analysis on the impact of large scale social distancing measures on the experiences of youth during the COVID-19 pandemic under the leadership of the Coordinating

Minister for Human Development and Cultural Affairs (Kemenko PMK), MoH's Family Health Directorate, the report will be available in September.

- UNIDO Indonesia is conducting an online survey on the socio-economic impact of SMEs. Initial findings highlight industrial sector operating at under-capacity and supply chains disrupted, thereby limiting cash flow for the concerned SMEs in the sector.

Gaps and Constraints

- The Government launched the National Economic Recovery Program (PEN – Pemulihan Ekonomi Nasional) on 11 May. This program includes the fiscal stimuli distributed since the end of February. Currently the program has a total budget of IDR 695 trillion; however, its implementation is challenged by various obstacles that require solution support.
- Further augmenting government capacities to support the safe return and stabilization of Indonesian migrant workers – including seafarers and fishers – cut off from their economic livelihoods, including addressing protection needs and strengthening recovery prospects.

Critical multi-sectoral services

Camp management

Vulnerabilities

- Camp Coordination and Camp Management (CCCM) was never fully implemented in Indonesia; this caused the lack of clear guidance on the implementation of CCCM.
- Most of the displacement sites were spontaneous without proper consideration on the standards. Lack of space and protection.
- Lack of planning to provide a dignified life for displaced persons since the beginning of displacement until the time a durable solution is in place.
- Support has mostly focused on the emergency phase.

Activities

- IOM facilitated weekly multi-sectoral cluster coordination meetings on the COVID-19 response alongside MOSA including on the issue on camp management / camp coordination.
- IOM distributed a series of operational guidelines for COVID-19 mitigation in displacement camps and camplike settings to government and non-government humanitarian actors in Indonesia, including Inter-Agency Standing Committee (IASC) guidance on the scaling up of COVID-19 Outbreak Readiness and Response Operations in Humanitarian Situations and IOM's practical guidelines for virus prevention and control during CCCM operations.
- Localization of CCCM training for 36 practitioners from 9 national NGOs was conducted. As part of the immediate actions following the training, a joint action was initiated between Humanitarian Forum Indonesia and IOM on CCCM webinar that has taken place on 12 August, with BNPB and MoSA.
- A series of CCCM trainings on managing the Rohingya refugees took place on 5 – 7 August in Lhokseumawe, Aceh. The trainings were held in three batches, in each batch, 25 participants from local government, army and several humanitarian actors were included.
- In collaboration with BAZNAS, IOM is exploring the possibility of a displacement tracking matrix (DTM) operation for Luwu Utara.
- With other National Cluster partners, IOM is currently developing training curricula for TAGANA where CCCM will be one of technical expertise that will be needed by TAGANA.

- In collaboration with MoSA, IOM is developing the TAGANA Multi-sectoral E-Learning platform and response plan and manual handbook to support as well as enhance the capacity of TAGANA on dealing with the COVID 19 response.
- Rapid assessments on quarantine facilities were initiated by IOM to support the National Cluster on Displacement and Protection and local governments in ensuring the maintenance of standards and availability of multi-sectoral services for quarantined individuals, including services such as WASH, food and nutrition, protection, and the overall management of quarantine facilities.

Gaps and Constraints

- Only few organizations are committed to support the CCCM sector.
- Due to the lack of space and socialization, health protocols are difficult to implement in camp locations.
- Lack of updated data in camps.

Shelter

Vulnerabilities

Shelter Sub-Cluster members remain concerned about:

- The remnant post-disaster shelter support needs of communities still recovering in Palu and Lombok. Almost 2 years on from these twin disasters it is less and less clear who remains in need of assistance living in inadequate temporary or incomplete shelters.
- Loss of livelihoods is resulting in increasing rates of evictions of both renters and mortgagees in urban centres. Loss of income has extended for so long now that even households on longer term contracts and those with mortgages are now facing potential éviction. The exact numbers of those affected are yet unknown.
- Increasing need for self-isolation and quarantine facilities. This includes helping communities to overcome stigmatism of those suspected of having COVID-19, as well as then training communities on how to select and manage appropriate self isolation / quarantine facilities.
- Congestion in camps, informal settlements and slums leading to increased COVID-19 risk.
- Need for medical related accommodation for medical staff closer to place of work and families of those seeking medical assistance.
- Concern about preparedness and contingency planning for parallel disaster during a pandemic. Over the last 20 years large scale natural disasters have regularly struck Indonesia with the shelter sector, commonly the most impacted and requiring the greatest level of response. Cluster partners remain concerned about how to effectively respond to a parallel disaster, when all resources are already severely stretched and restrictions on movement and interaction still apply.

Activities

- Support to the Ministry of Social Affairs to develop and disseminate COVID-19 specific guidelines on:
 - Safe reconstruction during COVID-19;
 - Self isolation and quarantine facilities;
 - Safe working practice for aid workers and volunteers.
- Training of TAGANA volunteers on safe shelter and sheltering during COVID-19.
- Cluster partners are continuing to finalise housing recovery reconstruction and relocation programs in both Lombok and Palu.
- Coordination:

- National Sub-cluster coordination meetings are still being conducted weekly, hosted by Kemensos with 30-50 participants.
- A Strategic and Technical Advisory Group has been formed to represent cluster partners and provide ongoing advice to the Ministry.
- Sporadic provincial meetings are held on an as needs basis.
- Seconded district shelter focal points in Central Sulawesi continue to provide support to district level coordination.
- **Note:** the IFRC led Shelter Coordination Support Team which was deployed in late 2018, is now reaching the end of its funding and mission. The team currently plans to downsize significantly at the end of September with full closure by early 2021.

Gaps and Constraints

- Gaps in shelter needs remain difficult to determine with any accuracy. The shelter Sub-cluster are currently planning for a joint rapid SMS based assessment in both Lombok and Palu and the broader COVID-19 impact to provide clearer understanding of emerging and preexisting needs.
- The shelter sector remains significantly underfunded. While it is clear that the impact of COVID-19 is far greater than just health, there has been limited donor or government attention on emerging needs in the shelter sector. An increasing number of households are facing growing insecurity of tenure as loss of livelihoods impacts both on renters and homeowners.

Education

Vulnerabilities

- Regarding the academic year for 2020/2021 that began on 13 July, only a small percentage of schools reopened for classroom learning. Only schools in “green zones or no cases”, and recently added in “yellow zones or low risk regions”, which fulfill the health and safety protocols are allowed to open. Re-opening of secondary schools is prioritized, followed by primary and special need schools in September, and pre-primary schools in November 2020.

Activities

- The second phase of a national assessment was conducted to monitor the effectiveness of off-line learning through TV broadcasts of the Ministry of Education and Culture (MoEC) by using UNICEF’s RapidPro platform. A survey on the wider effectiveness of learning from home was conducted targeting parents and students across Indonesia, with a specific focus in Papua remote areas.
- UNICEF and MoEC conducted a series of webinars aimed at teachers’ capacity building with a focus on the topics related to both safe school reopening and continuation of home-based learning. More than 8,000 teachers across the country have attended the webinar series.
- An online survey has been conducted by UNICEF to capture adolescents’ views and perceptions on home-based learning and school reopening, and received more than 4,000 responses from students in all 34 provinces. The survey results demonstrate the majority of students are eager to return to school: about two-thirds (66 per cent) said they feel uncomfortable studying from home and a majority (87 per cent) said they want to go back to school soon. When asked about going back to school amid the pandemic, half of respondents said they believe it would be best to return once the number of COVID-19 cases is reduced.
- UNICEF supported the development of national school reopening guidelines for the new academic year which resumed on 13 July 2020. Initially only schools in the “green” districts at low COVID-19 risk could reopen for face-to-face learning. However, recent revisions as of 7 August 2020 allow greater numbers of schools to reopen in both green and yellow districts if schools fulfil the minimum safety requirements. This would allow 49% of schools to re-open with others continuing distance learning.

- UNICEF has supported the MoEC on the monitoring of school reopening including development of systematic data collection, analysis and visualization mechanisms. Findings have indicated around 400 out of 514 districts and cities from all risk zones have already initiated preparation for school reopening, applying necessary health and safety protocols.
- To promote safe return to school and address potential COVID-19 related concerns regarding out-of-school children, UNICEF is supporting the Government in conducting 'Back-to-Learn Campaign.' This targets parents, school communities and local governments with key information materials on safe re-opening (e.g. health protocols, simplified curriculum).
- A rapid assessment of home-based learning among children with disabilities is being conducted with UNICEF's support. This aims to gather information on the needs, challenges and recommendations based on the learning experiences of children with disabilities during the COVID-19. The study will be finalized in mid-August 2020 and will inform guidance on learning from home for these children.
- Wahana Visi Indonesia supported about 1,000 children and their families to continue learning from home.
- Save the Children supports 4,843 children in 33 schools to continue learning through visiting teachers and community learning hours.

Gaps and Constraints

- Lack of access to internet, electricity, TV and radio as the media for distance learning persists in several areas in Indonesia, especially in the rural areas. Based on the rapid survey conducted by UNICEF, bad internet connection is a major obstacle (35% of students) to Learning from Home.
- Many districts open the schools, which is not in line with the joint agreement between the four ministries, especially outside of the green and yellow zone.
- The school's readiness in the green and yellow zone to meet the requirements, especially on the availability of health mapping at the school level and communication with the school's committee and parents.
- Schools' readiness especially teacher's capacity to implement the teaching and learning activities during the pandemic situation both on the face-to-face meeting and distance learning. The rapid survey from UNICEF has shown some of the children also feel boredom, more than 65% children feel unhappy with distance learning.
- The activation of the Education Post as the information management centre for education sector at the sub-national levels is not well monitored and implemented. This caused some of the data needed by the national government to have a low response rate, for e.g. the school re-opening data.

WASH

Vulnerabilities

- Many primary health care facilities face challenges with basic hygiene and disinfection – with 20% having no water source within 500m of the facility, 52% of facilities with inadequate wastewater management and only 33% having Handwashing with soap facilities (UNICEF 2019).

Activities

- As part of the Hygiene Behavior Change Coalition global partnership with DFID/UNILEVER, UNICEF supports the development of the national coalition for public-private partnerships for handwashing with soap. The initiative is endorsed by the Ministry of Health, BAPPENAS and Ministry of Public Works. To operationalize sub-national protocols for WASH and Infection Prevention and Control, UNICEF supported 11 trainings for health care centres and trained 405 health facility staff.
- A rapid assessment survey has been developed, tested and disseminated to all provinces. UNICEF has finalized WASH data analysis and costing tool to assess the gap in WASH services in schools and the

funding requirements, alongside a video tutorial to support dissemination of hand washing with soap guidance for schools.

- Distribution of WASH supplies is ongoing at health facilities, schools, public places and households in six provinces, reaching a total of 1,777,861 beneficiaries to date. Disinfection protocols and services have been implemented in 1,202 healthcare facilities, 196 schools and 2300 public places. Handwashing with soap stations have been installed in 408 HCFs, 59 schools and 193 public places. Through the Indonesian Red Cross Society, Unilever soap bars were distributed to 132,700 households. To operationalize WASH and Infection Prevention and Control (IPC) protocols, UNICEF supported 37 trainings for health care centers and trained 651 health facility staff. Orientation sessions for setting up handwashing with soap (HWWS) units and ensuring good operations and maintenance are conducted for the provincial and district offices.
- UNICEF-supported the development of new guidelines for Community-based Total Sanitation that include precautionary measures to safeguard community members and front-line workers against COVID-19 transmission during community mobilization activities. On 30 July, the UNICEF WASH team organized a school reopening workshop convened by the Papua Provincial government that was attended by 22 district government officials, school administration staff and school associations. WASH technical and advocacy resources for improving WASH conditions in schools including WASH in schools' data analysis, costing tool, HWWS technological options and funding guidance for school improvements were disseminated at the workshop.
- To further roll-out the Reopening of Schools agenda, UNICEF supported two webinars convened by the Directorate of Senior Secondary Schools of the Ministry of Education and Culture (MoEC) and the Directorate of Madrasah of the Ministry of Religious Affairs (MoRA) to disseminate HWWS guidance to 5,000 madrasah and schoolteachers across Indonesia. Additionally, in collaboration with the Early Childhood Development (ECD) Teachers' Association UNICEF supported national dissemination of WASH in ECD and HWWS guidance to 500 ECD teachers.
- The UNICEF WASH team has designed and used a 3M (handwashing with soap, wearing a mask and social distancing) real-time monitoring system to monitor access and compliance with key hygiene behaviours related to curbing COVID-19 transmission. The system is being piloted in DKI Jakarta before national rollout by end of August in conjunction with over 30,000 national volunteers.
- In collaboration with WHO, the WASH-FIT HCF assessment tool will be piloted in one of UNICEF support provinces with a view toward national scaling up activities.
- Wahana Visi Indonesia established or maintained 260 public hand-washing stations.
- Save the Children's handwashing stations and hygiene kits reached 103,829 people, which also received RCCE services.

Gaps and Constraints

- Handwashing rates remain low in the country with high numbers of open defecators and limited access to safely managed water and sanitation services. Access to handwashing is limited in major transmission risk areas including health facilities, schools and public transport points. More than half of the schools do not have access to basic handwashing facilities.
- A data analysis of 1484 schools in the 15 green districts in Papua set for the phase one of schools reopening revealed that only 10% of schools have access to basic sanitation, 15% to handwashing with soap facilities and 35% to adequate water facilities.

Nutrition

Activities

- Protocols for the safe resumption of essential nutrition services are finalized, with UNICEF support. Continued advocacy and technical support has been provided to the national and sub-national

governments to implement the protocol, with intensive coaching and capacity building workshops to accelerate implementation.

- Key nutrition and social behaviour change communication messages, materials and tools disseminated through online and offline platforms by UNICEF have reached more than 7.7 million people. The MoH and UNICEF have jointly organized webinars on various nutrition topics such as stunting, nutrition in emergencies, adolescent nutrition, infant and young child feeding, and maternal nutrition, that were participated by tens of thousands of stakeholders.
- UNICEF provided lead technical and advocacy support to the government in celebrating World Breastfeeding Week from 1-7 August in the context of COVID-19 pandemic. A few landmark events were organized, including a series of webinars and talk shows engaging thousands of key stakeholders to highlight the importance of breastfeeding during the pandemic, and to launch a national breastfeeding campaign. UNICEF and WHO issued a joint press release, which resulted in a national media coverage urging government and stakeholders to prioritize services and programmes to protect, promote and support breastfeeding as a critical component of the health and nutrition response during the pandemic.
- Engaging school age children and adolescents on nutritional issues has been a key focus area of UNICEF. First, UNICEF organized a Tik Tok live event engaging a celebrity doctor and chef to highlight the importance of good nutrition which engaged more than 220,000 youth participants. UNICEF also conducted and disseminated findings from a U-Report survey on adolescent dietary intake, physical activity and utilization of nutrition services during the pandemic.
- In addition, upon the request of the Ministry of Education, UNICEF and WFP have agreed to develop a series of innovative nutrition education materials targeting school-age children, which will be disseminated to millions of children through government's digital platforms.
- UNICEF has supported assessments of essential nutrition services and Infant and Young Child Feeding; and the development and dissemination of guidance re-opening of essential nutrition services.
- UNICEF is also developing online training materials for frontline workers and caregivers to improve access and quality of counselling services during COVID-19. A chatbot has been developed to facilitate online counselling of mothers and caregivers of malnourished children while minimizing the risk of infection for health workers and community volunteers.
- UNICEF continues to support the National Nutrition Sub-cluster which hosts weekly meetings of key nutrition stakeholders. Sub-national task force groups are established to focus on critical issues such as infant and young child feeding.

Protection of Vulnerable Groups

Vulnerabilities

- As the groups that would be impacted more severely during the COVID-19 pandemic, vulnerable groups tend to be not prioritized.
- Uninterrupted access to specific services required by a specific group.

Activities

- A Rapid Gender Assessment is conducted by CARE Indonesia has been undertaken to identify gender sensitive needs and emerging issues for the response design, in 13 districts in six provinces: West Jakarta (Jakarta Province); Serang District (Banten); TTS and Kupang districts and Kupang City (East Nusa Tenggara); Bone District (South Sulawesi); Palu City, Donggala, Sigi Districts (Central Sulawesi); Sukabumi, Purwakarta, Bandung Districts (West Java).

- UNAIDS and its partners mobilized resources to support around 2,200 LGBT in 12 provinces in terms of rent allowance and food packages. It also conducted a survey on the socio-economic impact of the pandemic on people living with HIV and key affected populations. The survey identified that more than 60% of the respondents have been adversely affected mostly by loss of income, thereby making it difficult for them to afford rent or food. The second phase of the survey is planned.
- UNFPA in coordination with the Ministry of Women Empowerment and Child Protection (MOWECP) is ensuring the continuity of and access to multi-sectoral GBV response services for women and girls. 1,000 dignity kits have been procured customized for COVID-19 context to the affected women in April – July.
- Under the leadership of BAPPENAS and the MOWECP, UNFPA is facilitating a rapid assessment on the COVID-19 Impact on GBV through analysis of the existing reporting data from both government and CSO Networks for GBV Services.
- UNFPA supports the leadership of MOWECP in leading the GBV Sub Cluster coordination and facilitated coordination meetings.
- UNFPA supports the continuation of distribution of essential needs through voucher assistance for 132 pregnant mothers and 300 older persons in Central Sulawesi in collaboration with local NGOs, Libu Perempuan, Yayasan Kelompok Pejuang Kesetaraan Perempuan Sulawesi Tengah, and Yayasan Kerti Praja in April – August.
- UNFPA, Yayasan Pulih, Forum Pengada Layanan provided inputs to the development of protocols by the MoH for accessing safe house in COVID-19 and new adaptation situations.
- Organisasi Pekerja Sosial di Indonesia (OPSI) with support from UNFPA developed Infographic and videos on HIV, mental health, and COVID-19 and disseminated via OPSI's social media and network to minimize COVID-19 infection among Female Sex Workers.
- UNHCR, UNICEF and IOM support the development of protocols for protection of displaced children and their families, including refugee children. This process coincided with interagency support to Rohingya refugees in Aceh, including support for dissemination of information on COVID-19 and MHPSS support.
- UNODC have delivered 30,000 facemask and other items such as medical face shields, nitrile gloves, disinfectant, water containers, infrared thermometers, disinfectant liquid/bleach, soap bars, hand sanitizer, hand sanitizer refills, and vitamin C in some prisons in six provinces.
- On 6 July, UNODC also handed over 10,000 face masks and other essential health and safety equipment to the Indonesian National Police, especially East Java Regional Police as the region is currently experienced a significant increase of COVID-19 cases. This essential component of personal protective equipment (PPE) is now available for around 40.000 East Java Regional Police officers who were performing their official duties as they have been showing a crucial role in keeping the communities safe during the pandemic. UNODC assistance is benefitted to 61 Prisons, 1 Prison Hospitals, 1 Provincial Police Office, 25.663 people in 7 provinces and 220 Drug Treatment Facilities in 34 Provinces.
- In the last four weeks, mental health and psychosocial support (MHPSS) reached an estimated additional 392,414 individuals through messages related to awareness and tips on mental health broadcast through both traditional and social media channels, webinars and other activities organized by UNICEF in partnership with government and NGO partners. A total of 1,090,695 (364,438 children; 726,257 adults/young people/caregivers) were reached with messages on mental health and psychosocial through a range of platforms.
- UNICEF supported the MOWECP and BNPB to organize a 'children's takeover' of the COVID-19 Task Force during the celebration of the National Children's Day on 23 July 2020. Five live broadcasts were aired by national TV and through 10 government social media accounts. Eighteen children representing 10 provinces led the takeover sessions. Data, tips and messages, on child protection, education, health and MHPSS were shared. The event generated at least 119 articles and 59 social media posts, reaching more than 847 million accounts/viewers.

- Distribution to orphanages and childcare institutions of hygiene, recreation kits and positive parenting/caregiver education materials has enabled the MoSA to identify an additional 1,671 childcare institutions, which were not registered previously by the government. Reaching these additional unregistered institutions will enable better registration and protection of children in these facilities. A total of 421,573 children living in or supported by 6,297 childcare institutions in 34 provinces have been reached. This includes 350,777 children living in childcare institutions without parental care.
- To strengthen child protection activities, UNICEF and partners directly engaged 1,515 people on issues related to parenting, capacity building for child and youth engagement, and strengthening the capacity of Islamic boarding schools on child protection during COVID-19. The participants include 337 children and 1,178 adults. 314 young people in Aceh Province also participated in an online writing competition to promote mental health and wellbeing. As of the end of July, capacity building for social and para-social workers at national and sub-national level has reached a total of 2,918 people.
- UNDP is undertaking advocacy and inclusion training activities with MoSA for people with disabilities (10 series of training/advocacy done) and Health Agency of DKI for protection against GBV (expansion of GBV referral services to other 7 hospitals in DKI and other provinces). UNDP supports the Jakarta Provincial Government to strengthen the integrated service center for GBV victims by facilitating the revision of Standard Operating Procedure at P2TP2A (Integrated Service Center for Women and Children) and at Local Government Hospitals (RSUDs). The new SOPs have been adjusted to allow the implementation of proper health protocols in providing services to GBV victims during COVID-19 pandemic. As a follow up, UNDP had also provided a series of trainings to frontliners (medical staffs and police officers) in Jakarta Province to implement the new SOPs.
- UNDP supports BNPB in managing risk information management systems (InaRISK), COVID-19 information dissemination application and self-assessment tools on COVID-19 risk for villages, families and individuals.
- IOM is coordinating with the local government agencies and task forces in Pontianak, Bali, Tanjung Pinang, and elsewhere to enhance responses towards the specific challenges faced by returning Indonesian migrant workers at the respective points of entry.
- In Jakarta, IOM distributed 500 cloth masks and 50 half-litre bottles of hand sanitizer to NGOs and faith-based groups based in Jakarta actively providing support to victims of trafficking.
- IOM continued to ensure refugees' access to COVID-19 health care and actively conducted rapid tests and PCR tests in collaboration with local health service providers.
- For refugees under quarantine or isolation, IOM provided well-being kits to help maintain individual mental and psychological health. Counselling services are also provided to individuals and their families to help ensure that they are well informed, able to maintain communication with each other, and better able to cope.
- Following the Joint Decree Letter of four Ministries on Learning Guidance for the new academic year, IOM continued to provide internet allowances for children and young-adult students to support home learning. 506 refugee children and 261 adults actively participated in online education programme conducted by formal schools, NGO partners, as well as Indonesian and refugee volunteer teachers.
- IOM has maintained the continuity of critical services to victims of trafficking of persons during the pandemic, assisting survivors with return to their homes, and initiating tailored reintegration support including legal assistance, psychosocial counselling, and economic reintegration services.
- In coordination with MOWECP, IOM organized a virtual workshop attended by 95 participants from national and sub-national government and civil society counterparts, to identify key challenges in providing assistance to survivors of human trafficking amid the pandemic. IOM will support MOWECP and other stakeholders in the follow-up actions to remedy the ongoing protection challenges for survivors of trafficking.
- Following the lifting of the temporary global halt to third country resettlement of refugees, IOM re-initiated resettlement movements with newly incorporated COVID-19 protocols in June 2020. IOM

also maintained coordination with the relevant national authorities, hospitals, and countries of origin for the reopening of assisted voluntary return programmes.

- Save the Children conducts Pulih Bersama (Heal Together) public campaign focused on seven risks and seven actions related to children rights during COVID-19 pandemic. So far, the campaign has reached 1,299,606 people and 54 media coverage. It also supports Ministry of Social Affairs & Ministry of Women Empowerment and Child Protection developed national guidance for families and mother led households on parenting during COVID-19.
- UNHCR conducted protection counselling for a refugee who has been stuck at the International Zone Soekarno-Hatta Airport since December 2019. The refugee was recently given hygiene materials by UNHCR.
- UNHCR delivered hygiene materials to a refugee who is serving his sentence in a prison in Makassar.
- Protection counselling conducted to refugees who serve their sentence in different prisons in Indonesia to make sure the COVID-19 Health Protocol is enforced and the refugees have access to health care, when/if they need it.

Funding Status

Priority Area	Resource Required (in USD)	Resource Received (in USD)	Resource Received per Agency
Health	60,908,920	41,616,519	WHO, UNFPA, IOM, UNICEF, UNOPS, UNDP, UNHCR, Muhammadiyah, Save the Children, WVI
Risk Communications and Community Engagement	7,094,720	5,140,332	UNFPA, UNICEF, IOM
Logistics	236,954	212,816	WFP
Food Security and Agriculture	5,055,000	5,258,507	FAO, Muhammadiyah
Mitigate the Socio-economic Impact of the Crisis	15,227,000	9,563,636	UNDP, UNICEF, UNAIDS, UNWomen, CARE, Muhammadiyah, WVI, Oxfam, Save the Children
Critical Multisectoral Services	24,537,679	15,870,957	UNICEF, UNHCR, IOM, Oxfam, CARE, Save the Children, Muhammadiyah, WVI
Protection of Vulnerable Groups	11,204,004	6,920,768	UNFPA, IOM, UNICEF, UNHCR, UNDP, UNWomen, Oxfam, Save the Children, CARE, Muhammadiyah, WVI
Combined (uncategorized per priority area)		9,616,990	IFRC, Save the Children, PMI, OXFAM, CARE
TOTAL	124,264,227	94,200,525	

Source: [Financial Tracking System](#) and agencies' information.

Annex 1

Achievements per Monitoring Indicators

Achievement	Indicators	Agencies
HEALTH		
21,848	Number of health workers trained on (or health facilities supported on) surveillance, rapid response, MHPSS, and case management.	UNFPA, WHO
24,044	Number of healthcare providers trained in detecting, referral and appropriate management of COVID-19 cases.	UNICEF, WHO
400	Number of health facilities staff and community health workers trained in detection, referral and management of suspected and confirmed COVID-19 cases.	WHO
4,431,664	Number of healthcare facilities staff and community health workers provided with Personal Protective Equipment (PPE).	UNFPA, UNICEF, Muhammadiyah, IOM, Wahana Visi Indonesia, Save the Children, PMI, Rumah Zakat, Caritas Indonesia, YAKKUM, Human Initiative
36,642	Number of children, parents and primary caregivers provided with community based mental health and psychosocial support.	Muhammadiyah, Wahana Visi Indonesia, PMI, Dompot Dhuafa
300	Number of midwifery clinics providing Sexual Reproductive Health and Family Planning services to keep women and babies safe amid the COVID-19 pandemic.	UNFPA
150	Number of health workers trained on Clinical Management of Rape.	UNFPA
100	Number of midwives accessed a functioning and accessible tele-health tool at the Indonesian Midwives Association for reproductive health counseling and supervision of midwives.	UNFPA
	Weekly number of new confirmed cases of COVID-19 nationwide (and by province), disaggregated by age and sex ; Weekly number of new deaths from COVID-19 nationwide (and by province), disaggregated by age and sex ; Weekly number of new confirmed cases under care or in isolation due to COVID-19 nationwide (and by province), disaggregated by age and sex ; Weekly (or monthly) number of new confirmed cases in healthcare workers by sex.	Available at Min of Health / WHO Sitreps
Risk Communication and Community Engagement		
70,000	Number of organizations and community groups engaged on COVID-19 response through RCCE actions.	UNICEF
11,757,755	Number of people engaged on COVID-19 through RCCE actions.	UNICEF, Muhammadiyah, Wahana Visi Indonesia, PMI, YAKKUM, IOM

3,128,588	Number of people sharing their concerns and asking questions/clarifications for available support services to address their needs through established feedback mechanisms.	UNICEF
7,104	Number of Adolescent and Youth reached on Adolescent Sexual Reproductive Health information and services during COVID19 situation through youth engagement online platform.	UNFPA
200,000,000	Number of people reached on COVID-19 through messaging on prevention and access to services (Past month, SMS based)	UNICEF
47,393,311	Number of children reached with targeted messages and information on COVID-19 on personal hygiene and improved sanitary practices (specific to schools and ECD centres)	UNICEF
LOGISTICS		
372	Number of organizations provided with logistics services facilitated through the NLC members and/or wide range supply chain services in country.	WFP
1,375	Number of community volunteers trained in Logistics management and logistics in pandemic situation, through the National Logistics Cluster (NLC).	WFP
2	Logistic portal built and functioned to support information management, collecting, consolidating and visualizing logistics data.	WFP
1	Number of provincial logistics cluster initiated and/or activated.	WFP
2	Number of relevant Standard Operating Procedures (SoP)s in emergency logistics operations developed and issued.	WFP
FOOD SECURITY AND AGRICULTURE		
3	Number of assessment and analysis on food security and agriculture conducted and shared.	WFP
1	Number of policies and measures on food security and food-system livelihoods supported.	FAO, WFP
MITIGATE THE SOCIOECONOMIC IMPACT OF THE CRISIS		
1	Number of assessment and analysis on socio-economic impact conducted and shared.	UNIDO
7,914,498	Number of households (affected by COVID-19) receiving humanitarian multi-sector cash grant for basic needs.	UNICEF, WVI, Dompot Dhuafa, Oxfam, CARE, Mercy Corps Indonesia, YAKKUM
CRITICAL MULTISECTORAL SERVICES		
70	Number of institutions/organizations received Guidance on specific critical services.	IOM
1,958,437	Number children that have access to essential nutrition services during the Covid-19 pandemic period.	UNICEF
7,762,104	Number of people reached with nutrition messages in the context of Covid-19.	UNICEF
2,070,504	Number of people reached with critical WASH supplies (including hygiene items) and services.	UNICEF, Muhammadiyah, Wahana Visi Indonesia, Save the Children, Habitat for

		Humanity, PMI, Rumah Zakat, Caritas Indonesia, YAKKUM, IOM
61 Prisons, 1 Prison Hospital, 1 Prov Police Offices, 25.663 people	Number of Law enforcement personnels and people in related government facilities (or entities e.g. prison, police, drug treatment facilities) received and used the provision of supply.	UNODC
220	Number of Drug Treatment Facilities or Prisons (owned by National Narcotics Board / Directorate General of Correction / Ministry of Social Affairs / Community) used the SOP development to ensure safety in the facility across the country.	UNODC
45,837,448	number of children supported with distance/home-based learning	UNICEF, Muhammadiyah, Wahana Visi Indonesia, Save the Children
PROTECTION OF VULNERABLE GROUPS		
8	Number of protection and referral mechanism that are established or strengthened.	UNFPA
3,792,068	Number of children and adults that have access to a safe and accessible channel to report sexual exploitation and abuse.	UNICEF
350,777	Number of children without parental or family care provided with appropriate alternative care arrangements.	UNICEF
6	Number of community groups or civil society organizations supported to better prevent and manage protection issues.	UNHCR,
3048 independent lives pocs, 8,254 refugee children, 300 refugee women, 2,087 elderly, 1,111 PwD, 304 PLWHIV, 2,200 LGBT, and 35,715 individuals	Number of targeted beneficiaries (i.e women, older persons, and persons with disability, refugees, migrants) received direct assistances during COVID-19.	UNHCR, YAKKUM, UNAIDS, IOM, UNFPA
3	Number of policy brief with concrete strategic and programmatic recommendations developed and disseminated with relevant policy-makers/stakeholders to improve policies and programmes that respond to women's needs, reduce risks, and mitigate adverse effects during and after the pandemic.	UNFPA

Annex 2

Detailed Funding Status

Agency	Resource required	Repurposed/ reprogrammed	Funding received	Funding still needed	Funding percentage (%)
Priority 1: Health					
IOM	4,900,000		1,382,320	3,517,680	28
UNICEF	3,524,760		2,559,955	964,805	73
UNICEF	4,557,000		4,557,671	(539,671)	113
UNFPA	569,450	3,200	805,378	(239,128)	142
UNDP	2,400,000		2,200,000	200,000	92
Save the Children	600,000		200,000	400,000	33
WHO	17,000,000		12,502,177	4,497,823	74
UNHCR	130,520		130,520	-	100
UNHCR	274,750		145,213	129,537	53
UNOPS	12,000,000		7,400,000	4,600,000	62
Muhammadiyah	7,800,000		6,083,169	1,716,831	78
Nahdlatul Ulama	1,300,000		2,787,150	(1,487,150)	214
Human Initiative	600,000			600,000	
Wahana Visi	586,000		813,366	(227,366)	139
Dompot Dhuafa	170,000			170,000	
Yakkum	212,000			212,000	
Caritas Indonesia	15,000		49,600	(34,600)	331
Priority 2: Risk Communication and Community Engagement					
IOM	400,000		50,000	350,000	13
UNFPA	150,000		188,615	(38,615)	126
Save the Children	250,000			250,000	-
UNAIDS	50,000			50,000	-
Oxfam	200,000	15,000		185,000	-
WHO	1,000,000		560,000	440,000	56
MPBI	34,000			34,000	-
UNICEF	2,663,200		2,162,868	500,332	81
CARE	150,000	30,000		120,000	

UNHCR	113,520	53,983		59,537	
UNDP	250,000		210,000	40,000	84
Muhammadiyah	750,000		608,317	141,683	81
Nahdlatul Ulama	430,000		929,050	(499,050)	217
Human Initiative	200,000			200,000	-
Wahana Visi	292,000		406,683	(114,683)	139
Dompot Dhuafa	100,000			100,000	-
Yakkum	20,000			20,000	-
Caritas Indonesia	8,000		24,800	(16,800)	311
Planas	34,000			34,000	-
Priority 3: Logistics					
WFP	236,954	-	212,816	24,138	90
Priority 4: Food Security and Agriculture					
FAO	250,000		276,073	(26,073)	110
Muhammadiyah	1,550,000		1,216,634	333,366	79
Nahdlatul Ulama	1,700,000		3,716,200	(2,016,200)	219
Human Initiative	1,200,000			1,200,000	-
Dompot Dhuafa	340,000			340,000	-
Caritas Indonesia	15,000		49,600	(34,600)	331
Priority 5: Mitigate the Socio-Economic Impact of the Crisis					
UNFPA	150,000		-	150,000	-
IOM	1,000,000			1,000,000	-
UNICEF	3,528,000	-	1,158,489	2,369,511	33
MPBI	34,000			34,000	-
Save the Children	300,000			300,000	-
UNAIDS	210,000		10,000	200,000	5
Oxfam	550,000	100,000		450,000	-
UNIDO	50,000			50,000	-
UNDP	3,350,000		2,400,000	950,000	72
UNWomen	320,000		200,000	120,000	63
Muhammadiyah	1,550,000		1,216,634	333,366	79

Nahdlatul Ulama	1,700,000		3,716,200	(2,016,200)	219
Human Initiative	1,200,000			1,200,000	-
Wahana Visi	586,000		813,366	(227,366)	139
Dompét Dhuafa	350,000			350,000	-
Caritas Indonesia	15,000		48,947	(33,947)	326
Planas	34,000			34,000	-
Priority 6: Critical Multisectoral Services					
IOM	2,000,000		587,314	1,412,686	29
Save the Children	300,000			300,000	-
Oxfam	400,000	50,000		350,000	-
Save the Children	300,000			300,000	-
UNICEF – education	2,002,328	-	503,877	1,498,451	25
UNICEF – WASH	5,550,000	-	3,849,577	1,700,423	69
UNICEF – nutrition	2,463,640	-	1,538,352	925,288	62
UNHCR – livelihood	83,520		8,983	74,537	11
UNHCR – education	183,520		8,983	174,537	5
UNHCR - partner to restructure & adjust	246,916		8,983	237,933	4
UNHCR – support to UAC’s	86,755		62,218	24,537	72
Muhammadiyah	3,200,000		2,433,268	766,732	76
Nahdlatul Ulama	2,560,000		5,574,300	(3,014,300)	218
Human Initiative	800,000			800,000	-
Wahana Visi	878,000		1,220,049	(342,049)	139
Dompét Dhuafa	260,000			260,000	-
Caritas Indonesia	23,000		75,053	(52,053)	326
Priority 7: Protection of Vulnerable Groups					
UNICEF	2,627,800		1,528,158	1,099,642	58
UNFPA	900,500	309,000	961,635	(370,135)	141
UNHCR	2,333,704		279,352	2,054,352	12
UNDP	240,000		205,090	34,910	85
Oxfam	150,000	10,000		140,000	-

UNAIDS	50,000			50,000	-
IOM	1,700,000		466,750	1,233,250	27
ITU	50,000			50,000	-
UNWomen	330,000		200,000	130,000	61
CARE	150,000	15,000		135,000	-
Muhammadiyah	750,000		608,317	141,683	81
Nahdlatul Ulama	860,000		1,858,100	(998,100)	216
Wahana Visi	586,000		813,366	(227,366)	139
Dompot Dhuafa	150,000			150,000	-
Yakkum	26,000			26,000	-
Combined Priority Areas					
IFRC	1,585,000		1,585,000		
Save the Children			2,158,854		
PMI	5,036,445		5,036,445		
OXFAM			772,993		
CARE			63,698		