



## Rapid Gender Analysis, Indonesia

### Introduction

By May 31, 2020, Indonesia had confirmed 26,473 COVID-19 cases and 1,613 deaths. This crisis came at a time where 24.8 million people in Indonesia were in poverty, following years of steady economic growth. In the worst case scenario, COVID-19 could put as many as [8.4 million more people into poverty](#), erasing all the benefits of economic growth since before 2012.

Between April 17 and May 31, 2020, Yayasan CARE Peduli conducted a [Rapid Gender Analysis](#) which included 97 phone interviews with women from all over Indonesia and key government experts. The analysis also draws from secondary data analysis, CARE's [extensive project research in Indonesia](#), and government datasets. Together, this data paints a grim picture of women's experiences and risks in COVID-19. It also shows promising signs of women's leadership, government responses to COVID-19, and increased community mobilization to support each other during the COVID-19 crisis.

### Key Findings

- **Economic impacts are staggering, and getting worse.** 2.8 million workers have already been laid off, and the [Asian Development Bank](#) estimates that this number could go as high as 7.2 million in 2020. Women are most of workers who migrate to the Middle East and to cities for jobs—leaving their children with relatives. These women are especially impacted by job loss and quarantine, which make it impossible for them to return to their families.
- **Women-led households are already more vulnerable.** Single mothers are already twice as likely to be poor as families with men in charge. One in four single mother families relied on giving from other family members to survive before COVID-19, a safety net that dwindles as people lose jobs. These families have also seen much less progress out of poverty since 2011 relative to men.
- **Women are not effectively able to participate in COVID-19 decisions.** In addition to social norms that exclude women from decisions, the additional burdens of COVID-19 on childcare and unpaid labor. Women spend at least 50% of their time on unpaid labor, and COVID-19 is forcing them to work even harder to meet the needs of everyone at home. Women explained that it is almost impossible to

"I have no information. I don't know about any assistance ... maybe my husband knows since he attends the village meetings and I stayed home to mind house chores and watch the children."

- *Women's Group Member*

participate in the planning meetings or discussions when they still have household chores to tend to and oversee their children's studies which leaves little time for other activities.

- **Gender Based Violence is startlingly high, and services are dropping.** GBV was already rising sharply in Indonesia. Between 2018 and 2019, violence against adolescent girls rose 65%. Between 2007 and 2018, violence against adult women rose **16 times**. In this context, rising household tensions in COVID-19, and the budget cuts to GBV prevention and response services that helped pay for the stimulus package create GBV crisis conditions.
- **Food security is a challenge.** For families that have lost jobs and wages, they are already struggling to meet their food needs. In rural areas, people are relying on their home gardens to get food as prices spike and markets close. As the dry season approaches, production is dropping, and this safety net could become less viable. In areas with high stunting prevalence, food insecurity may increase stunting.
- **Water and hygiene restrictions will make it difficult to prevent the spread of COVID-19.** 35% of rural women and 19% of urban women can't access clean water. Women are primarily in charge of water, and are having to spend more time getting water for their families. Sanitary pads are scarce because of COVID-19 restrictions, so women are having trouble maintaining hygiene.
- **Lack of digital access is compromising women's access to information, health services, and education, especially in poor and rural families.** The government of Indonesia has made admirable and diverse efforts to continue education, provide COVID-19 information, and keep health services functioning remotely. In the COVID-19 context, these efforts rely primarily on digital tools and social media. For the 81% of Indonesians who do not regularly access computers, it is difficult to access services remotely. This exacerbates existing gaps between rich and poor, urban and rural in terms of education, health services, and access to COVID-19 information.

There are hopeful signs in communities, and at the national level.

- **The Indonesian government responded quickly to the crisis.** The government released a \$25 billion stimulus package, which included a \$6.9 million safety net program. The Ministry of Women's Empowerment and Child Protection is actively leading a campaign to promote gender equality and reduce violence during quarantine.
- **Local groups are leading.** Charitable contributions have risen across Indonesia, and local groups are finding ways to support poor members of their communities and those most hurt by the COVID-19 crisis. They are distributing food, and raising money through online platforms.
- **Where possible, women are leading.** Women are leading in places where communities had already invested in women's leadership. In some communities, "Resilient Women" groups form an integral part of the local disaster response task force. These women carried out data gathering and coordinated assistance, ensuring that elderly and disabled community members are included. They also recommended to the sub-district government to establish a public kitchen which they run to provide food for the poor, those that had lost their jobs and families that are in self-isolation because they have a family member infected with COVID-19.

## Recommendations

- **Actively consult and engage women, children, elderly and people with disabilities and other vulnerabilities** to design COVID-19 responses that meet their needs. CARE's projects have seen that when these people are involved in decisions, assistance is more fair, effective, and sustainable.
- **Get community volunteers involved.** Many community groups are already active in COVID-19 response. Supporting these groups in their mission and working together can greatly increase reach and effectiveness of response.
- **Ensure basic services are tailored to specific needs.** Services, especially anything relying on digital platforms, need to ensure they are accessible for all people. This is especially true for health services, education, and GBV prevention and response.