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Indonesia COVID-19 Response Situation Report



April – June 2021

Situation in Numbers (as of June 2021)

Highlights

- Indonesia has the highest number of COVID-19 cases in southeast Asia. Children under 18 years old make up 12.6 per cent of confirmed cases and 1.2 per cent of deaths.
- After a decreasing trend in cases and deaths in March, Indonesia recorded a surge in the number of COVID-19 cases following the Eid al-Fitr holidays in May. While there has also been increased testing capacity, in the last two weeks of June, the positivity rate nationally was at 23.2 per 100,000 population.
- The Government of Indonesia has [received nearly 8.4 million COVID-19 vaccine doses via the COVAX Facility](#). UNICEF is supporting the Government with vaccine deployment activities at the national level and in all 34 provinces, including targeting priority groups such as teachers and the elderly.
- To support safe school reopening, a new decree was issued to encourage all schools to conduct face-to-face learning with implemented safety and health protocols. In coordination with the Ministry of Education and Culture and the Ministry of Health, UNICEF is engaging key hygiene manufacturing companies as part of the Public-Private Partnership for Handwashing with Soap (PPP-HWWS) to support the reopening of schools through provision of "COVID-19 Safe School Kits".
- UNICEF engaged with NU (largest Muslim organization in Indonesia) to facilitate the acceptance of the AstraZeneca vaccine, contributing to increased acceptance of the vaccine among several prominent religious scholars in East Java.
- As part of World Immunization Week, UNICEF supported a series of activities across Indonesia promoting the use of vaccines. Furthermore, following the arrival of 1.6 million pneumococcal conjugate vaccine (PCV) doses procured via UNICEF Supply Division through the Gavi Advance Market Commitment mechanism, in June, UNICEF, WHO and partners supported the Ministry of Health with a [high-level PCV launch event in East Java](#) to expand the programme in additional provinces.
- UNICEF supported the Ministry of Health to develop the first-ever national platform to report violations against the International Code of marketing of breastmilk substitutes and subsequent World Health Assembly resolutions in Indonesia. A total of 133 cases of Code violations have been reported so far, which are being followed-up by the Ministry of Health and National Food and Drug Association.

273,523,615

at risk of COVID-19 (total population)

34 (all provinces)

provinces with confirmed cases

19,616,389

tests

2,135,998

confirmed cases

57,561

deaths

269,135

confirmed cases in children < 18 yo

691

deaths in children < 18 yo

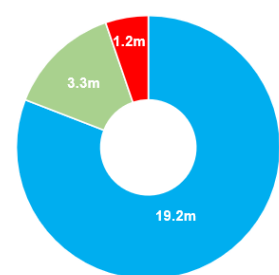
41,047,648

vaccine doses administered

Source: <https://covid19.go.id/>, [Vaksin Dashboard \(kemkes.go.id\)](https://vaksin.kemkes.go.id/)

| Indicator | Total Reached | Target |
|--|---------------|-------------|
| Nutrition: Number of people receiving messages on healthy diets | 8,500,000 | 15,000,000 |
| Health: Number of children and women accessing primary health care in UNICEF-supported provinces; | 734,115 | 4,402,542 |
| Number of children 0-12 vaccinated against measles in UNICEF-supported provinces | 349,586 | 1,369,126 |
| WASH: Number of people provided with access to appropriately designed hygiene and sanitation facilities | 101,100 | 320,000 |
| Child Protection, GBVIE and PSEA: Number of children and caregivers accessing mental health and psychosocial support; | 6,985 | 1,500,000 |
| Number of women, girls and boys accessing gender-based violence risk mitigation, prevention or response interventions | 3,220 | 1,000 |
| Education: Number of schools implementing safe school protocols | 12,750 | 30,000 |
| Social Protection: Number of households benefiting from new or additional social transfers | 3,000,000 | 4,200,000 |
| RCCE: Number of people reached through messaging on key life-saving behaviours and access to services | 200,000,000 | 200,000,000 |
| ADAP: Number of adolescents who participate in or lead civic engagement (including online) in UNICEF-supported programmes for preparedness, response and building back better (more resilient, peaceful, greener and sustainable) | 5,470 | 20,000 |
| T4D: Number of digital innovations developed to monitor COVID-19 impact on children and their families to inform policy responses | 4 | 4 |

Funding Status (in US\$)
Funding Requirement*: 21.3m



- Funds received 2021**
- Carry-forward 2020 to 2021
- Funding surplus

*Includes COVID-19 vaccine needs (technical assistance and procurement support)
**Includes multi-year grants

UNICEF Indonesia is grateful for the support received from key partners, including Binance Charity, French National Committee for UNICEF, Gavi, the Vaccine Alliance, the Governments of Australia, Canada, Japan, New Zealand and United States of America, Johnson & Johnson Foundation, KOICA (Korea International Cooperation Agency), Prudential Indonesia, Sumitomo Mitsui Financial Group, Temasek Foundation, Wings Group Indonesia and individual and corporate donations received via UNICEF's Private Sector Fundraising team.

Situation Overview

COVID-19 vaccine update

In January 2021, the Government of Indonesia launched an ambitious campaign to vaccinate 181.5 million people by 31 December 2021. The first phase, targeting health workers, has already resulted in nearly 1.5 million (almost 100 per cent) health workers receiving two vaccine doses. The second phase, targeting 21.5 million elderly and 17 million public workers commenced in February, with over 4.6 million elderly and 21.4 million public workers receiving their first vaccine dose and over 2.7 million elderly and 9.2 million public workers receiving their second vaccine dose.

As of June 2021, as an Advance Market Commitment (AMC) country of the COVAX Facility, Indonesia has received nearly 8.4 million vaccine doses. An additional 3.3 million doses are expected in beginning of July 2021.

The government has also established bilateral purchasing agreements with manufacturers. A private sector vaccination scheme is also being rolled out for companies to cover their employees and dependents.

As of 28 June 2021, a total of 2,135,998 COVID-19 cases have been confirmed in Indonesia. After a decreasing trend in cases and deaths in March, Indonesia recorded a surge in the number of COVID-19 cases across the country, following the Eid al-Fitr holidays in May. A drastic increase in bed occupancy rates since the beginning of June in high-risk provinces is a major concern. On 13 June, the Ministry of Health (MOH) reported that the delta variant of SARS-CoV-2 (B.1.617.2 variant) has been found circulating in six provinces in Indonesia, namely South Sumatra, DKI Jakarta, Central Java, East Java, Central Kalimantan and East Kalimantan. In addition, MOH reported that the alpha variant (B.1.1.7) and beta variant (B.1.351) of the SARS-CoV-2 virus have also been detected in the country.

There have been 19,616,389 tests conducted as of 28 June 2021. Daily testing numbers have increased from around 50,000 tests per day in March to close to 74,000 tests per day by the end of June. Nationally, testing positivity rate is high at 23.2 per 100,000 as of June.

The Government of Indonesia (GOI) has issued a decree on school reopening in the new academic year in July with safety and health protocols in place, supported by national guidelines

for face-to-face learning. The decree authorizes local governments to open schools based on the local situation and allows parents to decide if they would send their children to school. Vaccination for teachers has been rolled out across Indonesia targeting 5.5 million teachers and education personnel as part of school reopening efforts. As of June 2021, the percentage of teachers who received both doses remains quite low (23 per cent).

Additionally, authorities screened and vaccinated all 81 (62 adults, 19 children) Rohingya refugees who arrived by boat in East Aceh district, Aceh Province on 4 June, marking the first time that GOI vaccinated refugees and asylum seekers in Indonesia with the COVID-19 vaccine.

Lack of adequate handwashing with soap (HWWS) facilities and their poor functionality continue to present a challenge to sustainability of COVID-19 prevention efforts across all key settings. Latest data from a national hygiene monitoring system show that more than half of observed public places lack functional HWWS stations, with poor operation and maintenance observed as some of the main reasons for non-functionality of existing facilities resulting in poor hygiene practices. A recent UNICEF sustainability study of HWWS facilities in schools in South Sulawesi highlighted that more than 70 per cent of the facilities sourced water from shallow wells, while only 15 per cent of schools had access to tap water supply. The study also found that 30 per cent of the schools did not have soaps available at the handwashing facility, highlighting that schools need to prioritize utilization of school funds to procure adequate hygiene supplies and promote better hygiene practices.

As per the findings of the national survey on the socio-economic impact of COVID-19 on households supported by UNICEF, almost three-quarters (74 per cent) of people experienced a decrease in income since January 2020. Among households with children, 74 per cent experienced a decrease in income, creating concern for the livelihood of those families. Almost a third (30 per cent) of respondents were worried they could not feed their families due to income reduction and food disruptions. The disruption of education was a significant concern for 3 out of 4 parents. Several challenges were encountered with the learning-from-home format. Approximately, 57 per cent of households were concerned about reliable internet access and more than a quarter of parents surveyed said they had insufficient time or lacked capacity to support their children to learn from home. Women are also taking on additional responsibilities, as they lead on supporting children's schooling while managing the household.

Partnerships and Coordination

In 2021 the UN Humanitarian Country Team continues supporting the Government of Indonesia's COVID-19 response in priority areas such as health, vaccination rollout, risk communication and community engagement, mitigation of the socioeconomic impact of the crisis and ensuring continuity and access to critical multisectoral services – nutrition, water, sanitation and hygiene, education and child protection. Efforts under the 2021 HCT Action Plan are coordinated through a cluster mechanism led by the National Agency for Disaster Management (BNPB), the Coordinating Ministry for Human Development and Culture and line ministries. Within the HCT Action Plan 2021, UNICEF continues supporting the risk communication and community engagement, leading the education cluster,

nutrition sub-cluster, child-protection sub-cluster and WASH sub-cluster, and contributing to health cluster, and psychosocial support sub-cluster.

Summary analysis of programme response

UNICEF's 2021 COVID-19 Response Plan outlines core areas of UNICEF's support to the Government of Indonesia to respond to the COVID-19 pandemic and to support the Government's vaccine implementation plan.

Health

UNICEF continues supporting the Government with the COVID-19 response and deployment of the COVID-19 vaccine.

Through embedded Health staff in the MOH and working in close coordination with the Ministry of Foreign Affairs (MOFA), National Agency for Drug and Food Control (BPOM), Biopharma (Pharmaceutical institution), Indonesian Technical Advisory Group on Immunization (ITAGI) and other partners, UNICEF provided technical support to various COVID-19 vaccine-related initiatives, including:

- As part of UNICEF's global role in the procurement and supply of the COVID-19 vaccines via the COVAX Facility, UNICEF has facilitated the arrival of more than 8.4 million doses as of June 2021
- Through staff and consultants across Indonesia, support to COVID-19 vaccine rollout including strategic inputs, planning, budgeting, capacity building of health workers, strengthening procurement and cold chain systems
- UNICEF also supported the development of continuous monitoring of COVID-19 vaccination through digital forms ([national](#) and [subnational level](#)) and a [dashboard](#)

UNICEF also continued support across key areas to ensure continuity of essential health services in the context of COVID-19, including:

- UNICEF provided technical support to finalize the antenatal care guidelines; this will lead to a significant change in practices by increasing the number of antenatal contacts from four to six visits and will include the introduction of ultrasonography screening. The implementation of this new guideline during the pandemic is a key component of advocacy efforts to maintain essential MNH services. To monitor the impact of COVID-19, UNICEF also provided support in finalisation and rollout of maternal perinatal death surveillance and response that includes death profiles of mothers, stillbirths and newborns.
- As part of [World Immunization Week](#) in April, UNICEF supported a series of activities across Indonesia. This included talkshows, public service announcements, webinars, social media packages, videos and youth-led initiatives, culminating in a high-level meeting with the Minister of Health where he committed to introduce and scale up new vaccines including pneumococcal conjugate vaccine (PCV), rota and human papillomavirus vaccine (HPV). Additionally, with the arrival of 1.6 million PCV doses procured via UNICEF Supply Division through the Gavi Advance Market Commitment mechanism, in June, UNICEF, WHO and partners supported the MOH with a [high-level PCV launch in East Java](#) to expand the PCV programme in additional provinces. Once at scale, this vaccine will protect 10,000 children from this type of pneumonia.
- To improve access to routine immunization, UNICEF supported the government with a widescale public-private partnership (PPM) consultation workshop, involving partners from both public and private sectors, as well as from UN agencies. As a follow up, regulation will be issued to support this initiative, along with the development of operational and business plans.
- UNICEF supported a series of webinars to elicit the perspectives of young people on healthy lifestyles and risk factors related to non-communicable diseases, particularly in the context of the COVID-19 pandemic. Nearly 3,600 participants from all 34 provinces [participated in this initiative](#)
- For the first time in its history, UNICEF Indonesia, in partnership with WHO, was engaged in World No Tobacco Day on 31 May, working on this year's theme, '[Commit to Quit](#)'. UNICEF supported a series of events including the release of the Adolescent Health Profile (in [English](#) and [Indonesian](#)), a [U-Report Chatbot](#) (with WHO), a [social media campaign](#) and an [article](#) highlighting key tobacco issues impacting adolescents.
- To increase awareness about malaria prevention behaviours, UNICEF supported the development, printing and distribution of [IEC materials](#) in the form of comics, flipcharts, inter personal communication modules, malaria games/team dynamic guides, and elementary school malaria curriculum. These IECs are targeted towards 2,233 elementary schools, 390 puskesmas (community health clinics), and 92 hospitals/clinics in 23 high endemic districts. UNICEF, together with MOH and partners, has also been closely involved in completion of formative research on malaria in high endemic settings, the results of which will be used to inform risk community and community engagement strategies.

Furthermore, UNICEF continues to enhance subnational capacity through its seven regional offices, where embedded staff have been supporting provincial COVID-19 Task Forces in developing contingency plans; reviewing and implementing protocols and guidelines; supporting improved data and information flows; designing and disseminating technical and communications materials and supporting essential health services. In the following provinces, this included:

- Aceh – UNICEF provided technical assistance for supportive supervision of integrated management of child illnesses, microplanning for next year's integrated budget for puskesmas focusing on reduction of malnutrition, and posyandu (integrated healthcare center) mapping.
- Surabaya – UNICEF provided technical support for district supportive supervision using online tools, addressing misinformation to target groups, particularly for elderly and teachers' associations. UNICEF was involved in advocacy efforts to "KADIN" (chambers of Commerce and Industry) to conduct the "Gotong-Royong" private sector vaccination. UNICEF has

been involved in raising awareness, knowledge and confidence for COVID-19 vaccination and adherence for public health measures through mobile youth platforms.

- South Sulawesi – UNICEF supported coordination meetings with over 35 members of the provincial COVID-19 taskforce to review the operational plan and implementation of COVID-19 in South Sulawesi province, with particular focus on the current COVID-19 vaccination.
- Maluku – UNICEF supported coordination meetings with over 35 members of provincial COVID-19 task force to review the provincial operational plan, preparation for mass migration during the month of Eid, and preparation and evaluation of micro-quarantine in Maluku province. UNICEF also supported meetings with 20 provincial-level personnel and the team tackling adverse events following immunization (AEFI), and built the capacity of the COVID-19 taskforce to investigate severe AEFI cases.
- Nusa Tenggara Timur (NTT) – UNICEF provided technical support to provincial technical staff on integrated approach in health programs, including supporting the provincial health office to develop a roadmap for reduction of maternal and infant mortality during the pandemic. Additionally, UNICEF supported development of guidelines targeting malaria elimination in NTT by 2023.
- West Papua – UNICEF provided technical support for supportive supervision and mentoring for a range of maternal, newborn and child health services, including integrated management of childhood illnesses.
- Papua – UNICEF staff were involved in the planning and implementation of COVID-19 vaccination campaign – “Gebyar Vaksinasi” – in five venues in Jayapura City and Jayapura District that brought together more than 3,000 participants. There was a specific focus on health promotion for the elderly and this was coordinated with local authorities so that vaccinations can be received at the same time the elderly collected their monthly pensions.

Nutrition

UNICEF continued to demonstrate technical leadership in maintaining essential nutrition services during the pandemic. To protect, promote and support breastfeeding amidst COVID-19 pandemic, UNICEF collaborated with the Breastfeeding Mothers (AIMI) and Fathers (AyahASI) Associations to support the MOH in establishing the first-ever national online platform to report violations against the International Code of marketing of breastmilk substitutes and subsequent World Health Assembly resolutions in Indonesia. Just a few days after the launch of this platform, a total of 133 cases of Code violations were reported by the public, which were compiled and shared with the MOH and Food and Drug Association for follow-up actions. Moving forward, UNICEF will continue efforts to raise awareness about this platform particularly at subnational levels to improve coverage and use.

To respond to the anticipated increase in child severe wasting, UNICEF continued to scale up early detection and treatment services for child wasting in different parts of the country. For instance, in April alone, 120,474 children aged 6-59 months from Papua and NTT Province were screened for wasting, of which 135 children were identified as severely wasted and received treatment services. Following the documentation of successful introduction of innovations using the chatbot counselling service and engaging families in early detection of wasting, UNICEF is now supporting the MOH and subnational governments in scaling up these innovations across all 8 UNICEF focus provinces including Aceh, Central and Eastern Java, NTB, NTT, South Sulawesi, and Papua. In addition, UNICEF continued to strengthen subnational capacities for child severe wasting treatment service by training more than 1,200 health workers across the country.

Major efforts are underway to continue to develop and disseminate key messages, materials, and tools on nutrition, healthy diet, and essential nutrition services. Specifically, UNICEF has supported the MOH in developing key messages highlighting the safety and importance of vaccination for breastfeeding mothers, which are being disseminated through various channels starting from June. In total, to date approximately 8.5 million people across the country have been reached with key nutrition messages.

Child Protection, Gender Based Violence in Emergencies and Prevention of Sexual Exploitation and Abuse

By end of May, a total of 660 (25 per cent) of 2,681 social workers of the Ministry of Social Affairs (MOSA) received the COVID-19 vaccination. Among the vaccinated, 238 are social workers specialised in child protection, while 422 are social workers specialized in managing cases of the elderly and other vulnerable groups. UNICEF continues to advocate for the vaccination of the remaining 2,021 frontline social workers

With support from UNICEF, local civil society organizations (CSOs) supported building the capacity of local communities and supporting local governments to develop and implement new guidelines on child protection services. Community-based mechanisms (CBM) have been initiated in 225 villages in 10 districts of Central Java to identify vulnerable children and serve as early detection, response and referrals for child protection cases. In addition, UNICEF supported the training of key stakeholders on how to identify vulnerable groups as well as how to prevent and manage child victims of violence and child marriage in Central Java Province. A total of 82 (64 female, 18 male) social workers, CSO members, staff of integrated service centers and key local government officials participated in this training.

Initiated at the onset of COVID-19 in 2020, the Government of Central Java rolled out standard operating procedures (SOPs) called APEM KETAN to support the mapping, outreach and registration of vulnerable and at-risk children, women and households. Along with

other SOPs, APEM KETAN and community-based mechanisms facilitate access to child protection services in 10 districts and cities in Central Java. In East Java, three districts have completed the revision and testing of SOPs for PKSAI and UTPD PPA.

A total of 832 children (482 girls, 350 boys) in Central Java, including 49 children with disabilities, attended life skills education training to increase their knowledge on protective behavioral practices. The training was conducted by 150 children (111 girls, 39 boys) who are skilled facilitators on life skills education and are also members of various organizations, including the Children's Forum (Forum Anak), GENRE (Generation yang Punya Rencana, a government-initiated adolescent-focused sexual reproductive health platform) and Komunitas Sahabat Difabel (an association for young people living with disabilities). In East Java, CSO partners trained 749 children (542 girls, 199 boys) as peer educators. The Training of Trainers (TOTs) and support for outreach aims to create a safer and more friendly environment for children.

In East Java, government and CSO partners completed training of trainers (TOTs) on positive parenting, psychological first aid (PFA) as well as identification of vulnerable children and families, benefitting 41 participants (24 female, 17 male). This was followed up with another capacity building workshop for community-based facilitators on positive parenting which was rolled out in East Java on-line, reaching 671 participants, including 37 social workers (22 female, 15 male), 80 government representatives, as well as community facilitators. An additional 444 persons viewed the training sessions via YouTube.

To ensure that partners have adequate capacity to prevent and respond to sexual abuse and exploitation (SEA), 25 new UNICEF implementing partners have been assessed on PSEA. Partners will continue to be supported in the implementation of their respective PSEA action plans to increase their capacity and mitigate risks, including by conducting training and disseminating awareness, as well as establishing internal mechanisms for reporting, referral and investigation of cases of SEA.

Education

UNICEF continues to support the MOEC in monitoring the school reopening status, including development of systematic data collection, analysis and visualization mechanisms. As of 21 June 2021, there are 34 per cent of schools were conducting face-to-face learning while 66 per cent continue distance learning. At the same time, UNICEF is also supporting the monitoring of teacher vaccination. As of 28 June 2021, 35 per cent of teachers and education personnel (2 million) have received the first dose of the COVID-19 vaccine and 23 per cent (1.3 million) have received both doses. There are significant disparities in terms of vaccination coverage. For instance, in DKI Jakarta 88 per cent of teachers have already received the first dose, while in Maluku Utara 5 per cent of teachers received the first COVID-19 vaccine dose.

On 2 June 2021, the MOEC and the Ministry of Religious Affairs (MORA) launched a national guideline on face-to-face learning, developed with the support of UNICEF, to support schools reopening in the beginning of the new academic year. The MOEC has initiated communication campaigns to raise awareness about the national guideline at the subnational levels and to accelerate vaccination of teachers throughout the country. To accelerate the process, the MOH has issued a Circular letter on vaccination for teachers and educational personnel, which urges local governments to prioritize vaccination of this group. Prioritization of teacher vaccinations was also emphasized by President Joko Widodo during the National Education Day on 2 May 2021.

UNICEF followed up on earlier monitoring results that showed 1 per cent of children in surveyed households had dropped out of school and 3 out of 4 children presented risk factors for dropping. Follow-up included capacity building workshops for village and district stakeholders in 59 districts to equip them with necessary knowledge and skills to address the identified issues. This capacity-building initiative has resulted in the integration of relevant interventions that can support children at risk of dropping out; it also brings this issue into local government planning and budgeting documents. Additional interventions that have been carried out include free internet facilities to support children's learning, provision of scholarships for children and adolescents at risk of dropping out, including those with disabilities, and facilitation of re-enrollment back to school.

To facilitate children's safe return to school and tackle potential COVID impacts on out-of-school children (OOSC), UNICEF supported the MOEC with "keep safe, keep learning" communication campaigns. UNICEF also supported the development of TV and radio public service announcements (PSAs) to ensure that the health protocols are well applied in schools that plan to reopen. An instructional video and story have been developed and ready to be aired for schools and families to improve their knowledge on preparations and actions needed when children start face-to-face learning as well as the video series on teachers' testimonies on vaccination and their expectation for the safe school reopening.

WASH

UNICEF leads WASH Cluster coordination among technical ministries, development partners, non-governmental organizations, and private sector actors to continue coordination and mapping of emergency preparedness and response, including COVID-19 activities. This includes ongoing efforts to build capacity of WASH partners to support school reopening activities, WASH improvements in health

care centres (with WHO) and scaling up of a national real-time hygiene monitoring system for 3M (handwashing with soap, proper mask usage and safe distancing) behaviours.

UNICEF continues to support the implementation of WASH and Infection, Prevention and Control (IPC) protocols in six provinces (Aceh, South Sulawesi, East Java, NTT, NTB and Papua). Distribution of WASH supplies have reached 113,600 beneficiaries since the beginning of the year. This includes installation of HWWS facilities in 260 schools and 20 health care centers and distribution of 2,500 COVID-19 hygiene kits to targeted populations. UNICEF conducted trainings for 476 government officials on hygiene behaviour change, WASH in Emergency coordination and community mobilization for sanitation and hygiene activities during the COVID-19 pandemic.

As part of a Public-Private Partnership for Handwashing with Soap (PPP-HWWS) initiative to support the safe reopening of schools, UNICEF is engaging key hygiene companies to provide 'COVID-19 Safe School Kits' to schools across selected districts and provinces. This national initiative will be rolled out in partnership with the MOEC and the MOH.

UNICEF has developed a national hygiene behaviour change training programme in collaboration with the MOH to build national capacity to improve hygiene practices across communities, schools, and health care centres. To support the roll-out of the training programmes, UNICEF supported pilot trainings for 70 sanitarians, health promotors and key WASH actors across 6 districts/provinces. The training (both offline and online formats) will be rolled out through the national WASH platforms such as the STBM (National sanitation and hygiene programme) programme and will help accelerate access to hand hygiene for all. Efforts are also underway to institutionalize the hygiene behaviour change training within the MOH's accredited training programme.

Latest data from the [national hygiene monitoring system or the 3M monitoring](#) continues to show a declining trend in all three hygiene behaviors: UNICEF is in the process of developing a MoU with the University of Indonesia to collaborate with 40 universities and engage with environmental health and public health students to increase data collection and strengthen youth engagement in WASH activities. UNICEF will also engage children's networks and parent-teacher associations to promote hygiene behaviour change through 3M monitoring in schools across six provinces. To scale up 3M monitoring, UNICEF has initiated collaborations with universities and schools across the country.

UNICEF carried out a sustainability check of HWWS infrastructure in schools and public places in South Sulawesi, to assess the functionality of existing facilities and to identify factors for improving their sustainability. Similar studies will be carried out in the other UNICEF focus provinces in the coming months to understand challenges in these regions. These findings will be shared at the national and provincial levels to inform hand hygiene programming strategies.

A UNICEF-supported study on Climate resilient WASH by the University of Technology Sydney shows that climate hazards can adversely impact and reverse the gains made on improved access to safely managed sanitation services. With the COVID-19 pandemic, UNICEF is taking the opportunity to work with national, provincial and district stakeholders at all levels to increase attention to the WASH agenda and garner support to invest in more sustainable and durable WASH services for safely managed water, sanitation and hygiene.

Social Protection

UNICEF continues to support government in developing guidelines for increasing coverage and benefits of unconditional cash transfers of a poverty-focused child grant program during COVID-19 in four government social protection programmes that target 42 million households:

1. Family Hope Program (10 million household) (MOSA)
2. Food Assistance Program (20 million household) (MOSA)
3. Unconditional Cash Transfer (8 million household) (Ministry of Village (MOV), Disadvantage Region and Transmigration)
4. Cash for Work Program (4 million households) (MOV, Disadvantage Region and Transmigration).

Specifically, UNICEF continues working on the following key elements of social protection:

1. UNICEF is supporting the MOV and Disadvantaged Regions in designing an M&E system for Village-based social protection programmes under the village fund unconditional cash transfer scheme and a cash for work programme, including advocating for the expansion of vulnerability criteria.
2. UNICEF is the key player behind updating the social registry called Unified Database for Social Protection (*Data Terpadu Kesejahteraan Sosial*/DTKS). This database registered the bottom 40 per cent of populations eligible for social protection programme in Indonesia. UNICEF advocated for the inclusion of homeless people and/or people with no formal registration into the database. Specifically, UNICEF supported data collection and standardization, identification of supporting and inhibiting factors in the implementation of the system, and capacity building of local governments.
3. UNICEF continues to work with the Ministry of Finance, Ministry of National Development Planning (BAPPENAS) and National Bureau of Statistics on maintaining and updating INDOMOD in such a way that maximises its sustainability going forward.
4. In the context of Adaptive Social Protection (ASP), UNICEF is working closely with four ministries: BAPPENAS, the Ministry of Finance, the MOV, Disadvantage Region and Transmigration, and the MOSA in transforming the existing social protection programme to be more adaptive and responsive to shocks and stresses. UNICEF's work on ASP leverages protection for 15 million households, with 3.7 billion USD of government's biannual financing (constituting the second largest social protection

system in the world). Specifically, UNICEF, together with BAPPENAS, is supporting the capacity strengthening of the key government officials, NGOs and development partners on ASP.

C4D: Risk Communication and Community Engagement (RCCE)

The overall goal of UNICEF's RCCE strategy in support of the COVID-19 response is to create demand for the COVID-19 vaccine while promoting key prevention behaviours. UNICEF's RCCE strategy revolves around five main areas: 1. National Support and Coordination; 2. Public Awareness; 3. Advocacy; 4. Community Engagement, including young people; 5. Monitoring and Evaluation, including documentation.

1. National Support and Coordination

As the UN co-lead on RCCE, UNICEF facilitates the coordination of key stakeholders, including national and sub-national authorities, UN agencies, NGOs, FBOs, and private sector through weekly meetings in order to improve coherence and knowledge sharing on the COVID-19 RCCE response and vaccine rollout.

UNICEF's Communication Team continues to have embedded staff in the Government's Committee for the COVID-19 Response and National Economic Recovery (abbreviated as KPC-PEN). They provide direct support to national and subnational authorities, including the MOH, on all aspects of risk communication and community engagement in order to increase public acceptance of the COVID-19 vaccine and promote key preventive behaviours. During this reporting period, UNICEF facilitated bi-weekly national press briefings, including inquiries from media, and supported content production, talk shows, dialogues, webinars, and live programmes. In addition, UNICEF supported the creation of SMS messages reaching 200 million people with COVID-19 related messages on a weekly basis, in collaboration with Mobile Network Operators and the COVID-19 task force (SATGAS COVID-19). UNICEF also supported the management and content creation for the Government's COVID-19 website (www.covid19.go.id), which reached 3.2 million people in the reporting period (10.9 million since January 2021), with 6.8 million pageviews (21.2 million since January 2021).

UNICEF provided a range of RCCE support to the Bali Reborn (BaliBangkit) initiative, which aims to control the spread of COVID-19 in three main targeted areas (Sanur in Denpasar, Ubud in Gianyar and Nusa Dua in Badung District) aimed at reopening the island. The support includes coordination and communication with provincial and district health offices; operation research on behaviours and risk communication; testing and production of contents for public awareness; media mapping to support media placement; advocacy with key influential leaders and opinion makers, including identification of influencers.

2. Public Awareness

UNICEF continues developing and broadcasting a wide range of information, education, and communication content on COVID-19 and vaccinations through mass media, digital media and influencers to raise awareness among at-risk groups and the general population. During this reporting period, UNICEF content reached more than 10.4 million people and generated over 2.1 engagements on UNICEF's social media platforms. Dedicated COVID-19 pages on UNICEF Indonesia's website reached 91,914 visitors with practical information such as personal hygiene tips, home education guides, activities to enhance physical and mental health, and FAQs about vaccinations. The UNICEF chatbot information service registered 8,396 new people, who received up-to-date information on ways to protect against COVID-19 as well as information on hoaxes and misinformation about COVID-19 and COVID-19 vaccines (the total number of registered users since March 2020 is 297,247). A recent collaboration with MAFINDO, CDC, Wikimedia Foundation, ICT watch and Common-room was put in place to engage the public in producing and disseminating reliable content about COVID-19 on Wikimedia platform. The collaboration include the creation of [an online course about COVID-19 public communications for volunteers available at UdeMy learning platform](#) and a hoax buster chatbot.

3. Advocacy

UNICEF was successful in carrying out a number of advocacy efforts in support of COVID-19 vaccination, including:

- UNICEF engaged and advocated with Nahdlatul Ulama (largest Muslim organization in Indonesia) to promote acceptance of the AstraZeneca vaccine. This contributed to several prominent religious scholars in East Java accepting the vaccine, setting an example for the broader community.
- In collaboration with the UN RCCE Working Group, UNICEF facilitated a coordination meeting on COVID-19 vaccination for humanitarian workers and contributed to the formulation of recommendations that are being used for nationwide COVID-19 vaccination of humanitarian workers.
- UNICEF also supported advocacy efforts to address AEFI issues related to the AstraZeneca vaccines.

4. Community engagement, including with young people

UNICEF is working with the country's two largest faith-based organizations (Nahdlatul Ulama and Muhammadiyah) and several community-based organizations, as well as the Independent Journalist Alliance to support community engagement and advocacy aimed at increasing demand for vaccines and promote preventive behaviours.

In terms of youth engagement, the digital campaign #COVID19Diaries continues to be a platform for young people to share their experience during COVID-19 and mobilize others to take action through stories, photos, videos, drawings, etc. During this reporting period, 61 new submissions from young people were received (187 since January 2021), reaching 144,000 people (715,000 since January 2021) and generating more than 11.000 thousand engagements (142,000 since January 2021) on social media. In May 2021, a youth immunization cadres (YIC) initiative was launched under "Mitra Muda" (Youth Engagement Network), a UNICEF-supported youth network that aims to provide adolescents and youth with opportunities and platforms that support their civic engagement journey. The YIC will support the promotion of COVID-19 vaccines among teachers, the elderly and young people.

5. Monitoring and Evaluation, including Documentation

In support of teachers' vaccination and school reopening, a survey of teachers on COVID-19 vaccination was done using Rapid-pro: 4,644 teachers from 30 provinces participated. The survey found that 83 per cent of respondents were willing to take COVID-19 vaccines. Fear of side-effects was a common reason for those who are unwilling to take the COVID-19 vaccine.

UNICEF also continued to support quarterly Nielsen surveys to measure perception and behaviours about COVID-19 prevention and vaccine acceptance. The latest survey in April 2021 revealed that: only 34 per cent of the surveyed population were practicing the recommended preventive behaviors (known as the 3M in Indonesia). On the vaccine acceptance, willingness to take vaccine increased by 20 per cent from 31 per cent in December 2020 to 51 per cent in April 2021.

UNICEF also continued its social listening programme with the government and civil society organization partners to combat hoaxes and misinformation about COVID-19 vaccines. In collaboration with MAFINDO (anti-hoaxes NGO) and the Centers for Disease Control and Prevention (CDC), UNICEF coordinates a social listening programme aiming to inform an ongoing strategy to combat hoaxes and increase the acceptance of COVID-19 vaccination. A weekly social media listening report is produced to monitor vaccine-related conversations topic in the digital sphere to guide RCCE interventions. During this reporting period, the social listening programme has been expanded to include other topics related to COVID-19, namely mental health and school reopening.

Stories on UNICEF's response to COVID-19 were published regularly on UNICEF's website, promoted on social media platforms, and made available on Weshare for use by partners, donors, and National Committees for UNICEF. Recent web stories covered several topics, including a story of school reopening in the island of Lombok, how UNICEF's child marriage intervention programme has contributed to a girl saying no to child marriage amid the pandemic, and the importance of countering the infodemic during COVID-19 pandemic.

T4D: Data Collection & Social Science Research

UNICEF continues to leverage big data analysis to get a more detailed understanding of the impact of the pandemic, including the analysis of satellite imagery to make up-to-date poverty projections at micro-level in collaboration with the National Statistic Office; and the analysis of mobile network data to assess the internet connectivity across all schools. Further, exercises were performed to establish automated data pipelines for relevant big data sources (Facebook Geinsights, other open data) to assist in assessing vaccine distribution preparedness at health facilities across Indonesia (e.g. electricity and internet access).

UNICEF provides consistent strategic technical support to the Government to improve the overall performance of the One Data Vaccination System, particularly in identifying and establishing interoperability within multiple digital platforms, enhancing database management capacity, conducting essential data analysis, as well as providing training and troubleshooting.

Continuous enhancement [of the COVID-19 Vaccine Introduction Readiness Assessment Tool \(VIRAT\)](#) – ONA and web based platform – were performed according to the phases of vaccination to monitor progress of preparedness activities at national and subnational level prior to and during the vaccine introduction, identify issues and course-correction along the way in timely manner.

UNICEF also continues to support the MOH to deploy RapidPro-based WhatsApp daily vaccination reporting to complement the Government's main online recording system and close data gaps in vaccination monitoring, particularly in areas with limited or no internet connectivity. Analysis of data gaps is conducted daily and synthesized for the MOH for immediate data verification and validation at all levels. Coverage data is fed back to reporters and health managers at all levels and visualized in a [web dashboard](#) for easy monitoring.

Moreover, UNICEF provides technical support to the MOH to develop a [public dashboard on COVID-19 vaccination coverage](#) to facilitate data transparency and accountability to the public. Dedicated section on teacher's vaccination coverage is available at the landing page to improve visibility and focus on related programme acceleration. The dashboard is also equipped with a private view for health officials to Tableau-based detail analyses on cases, health system capacity, vaccine distribution, and teacher vaccination at subnational level.

To strengthen case testing-tracing-treatment (3T) monitoring, UNICEF is supporting the MOH to modify RapidPro based WhatsApp 3T reporting to expand community engagement and improve coverage of the case monitoring programme. The platform is complementing and integrated with the 3T online reporting which has been established at primary health facility level.

Adolescent Development and Participation

UNICEF has been supporting skills development programmes to empower young people to become active citizens. 5,470 adolescents (57 per cent girls) were involved in an innovation challenge to propose solutions to issues affecting them in their lives. Adolescents submitted 1,018 solutions, including: an app to help students during remote learning, an app to support a COVID-19 patient looking for healthcare, a game to teach young people about COVID-19 health protocols in interactive ways and an app to support students with hearing impairments using a transcriber during remote learning. A selection of the most promising teams was made in April and currently, 42 teams made up of 521 adolescents (58 per cent female) are participating in a bootcamp that will run until early September. During this time, they will further refine their ideas and present to private sector and government partners later in October 2021.

Next Situation Report: September 2021

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| Health | <p>Guidance documents: 1) Prevention and control of mental emotional disorders; 2) Health service for depression patients</p> <p>Training videos:</p> <ul style="list-style-type: none"> • Short video PSA for Metro TV Aceh and TVRI Aceh <p>IEC materials: Job aid for mental health service at health facility level</p> <p>Stories and profiles:</p> <p>A historic arrival: Indonesia receives its first shipment of COVAX vaccines In East Java, ventilators keep patients breathing as they fight COVID-19 Bringing care and hope to children in their first moment Adolescents commit to quit on World No Tobacco Day</p> <p>Immunization:</p> <p>Youtube video on World Immunization Week – an expert interview with MoH Youtube video on strategy to improve immunization coverage during COVID-19 pandemic Indonesia Technical Advisory Group on Immunization (ITAGI) and UNICEF on the importance of immunization during COVID-19 pandemic: Youtube video “Medical students try to explain vaccination to Kids” Posyandu Gampong Lampaseh – Aceh family empowerment for welfare Ikatan Cinta Keluarga NTT – Youtube video on Protecting Children through Immunisation Instagram Ureport on youth, local dialect, and risk communication strategy – language ambassadors from NTT, NTB and South Kalimantan Video competition on “COVID-19 vaccination flow” from West Papua MOH webinar “Do not hesitate to get vaccination, together we’ll recover” PSA by head of PHO Papua to health workers during World Immunization Week PSA by chairperson of Pediatric Association of Papua Province PSA by chairperson of midwife association of Papua province PSA by social media influencer from Papua province Advertorial on national TV (TVRI) PCV scale up: Protecting children from the most-deadly infectious disease in Indonesia</p> <p>Malaria IEC materials: IEC materials for malaria</p> <p>Adolescent health profile in Indonesia:</p> <ul style="list-style-type: none"> • Press release on Adolescent Health Profile (in English and Indonesian) • U-report adolescent opinion on healthy lifestyle and risk factor on non-communicable diseases https://indonesia.ureport.in/opinion/5012/ • Instagram: https://www.instagram.com/p/CPkoQKzhHOR/?utm_source=ig_web_copy_link • Chatbot <p>Photos:</p> <p>Delivering COVID-19 vaccines for the COVAX Facility – Indonesia (March 8, 2021)</p> |
| Education | <p>Stories and profiles on school re-opening:</p> <p>Back to school in the pandemic: A lesson in patience and perseverance (story) Back to school in pandemic (video) Handwashing helps schools safely reopen across Indonesia</p> <p>Guidance documents:</p> <p>Guidebook for the learning implementation during the COVID-19 Pandemic 2021 Joint decree on school re-opening March 2021</p> <p>Website:</p> <p>School Re-opening Readiness and Learning Process Dashboard</p> |
| Child Protection | <p>Story: My Life is My Choice: The Story of Mara</p> |
| Social Protection | <p>Grateful for every penny</p> <p>https://www.unicef.org/indonesia/coronavirus/stories/be-grateful-every-penny-marlinas-story</p> |
| T4D: Data Collection & | <p>Report:</p> <p>Impact of COVID-19 on Child Poverty and Mobility in Indonesia</p> |

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| Social Science Research | Socio-Economic Impact of COVID-19 on Households in Indonesia Websites: COVID19 Vaccination Coverage Monitoring Dashboard (public) COVID-19 Vaccine Introduction Readiness Assessment Tool v.3.0 (VIRAT) RapidPro based vaccine coverage monitoring dashboard (internal) |
| Adolescent Development and Participation | Young people with disabilities expressing their hope about life after COVID-19 |

[Link to the UNICEF Indonesia COVID-19 material inventory 2020](#)