DYNAMICS OF COLLABORATIVE GOVERNANCE IN COMMUNITY-BASED INTEGRATED CHILDREN PROTECTION (PATBM) DURING THE COVID-19 PANDEMIC IN INDONESIA

Antik Bintari1
Iman Soleh2

1Universitas Padjadjaran
Jl. Raya Bandung – Sumedang KM.21 Jatinangor, Sumedang, 45363, Jawa Barat, Indonesia

2Universitas Wiralodra
Jl. Ir. H. Juanda KM.03 Karanganyar, Indramayu, 45213, Jawa Barat, Indonesia

Correspondence Email: antikisw@gmail.com

Submitted: 15 August 2021, Reviewed: 15 October 2021, Accepted: 30 October 2021

ABSTRACT
Child protection is the responsibility of all parties, especially children are the key to the future of a nation. Therefore, the government does not work alone but requires synergy with other parties such as the private sector, universities, mass media, and the community where the children live and work. The governance model that involves multi-stakeholders to make public decisions is known as collaborative governance. Collaborative governance is one of the new strategies of government that involves various stakeholders in a forum to make joint decisions that aim to solve problems that exist in society. One of the collaborative networks in child protection initiated by the Ministry of Women's Empowerment and Child Protection (WECP) since 2016 is known as the Community-Based Integrated Child Protection (PATBM) movement. PATBM during the COVID-19 pandemic was part of efforts to fulfil children's rights, especially in preventing and responding to cases of violence against children at PATBM locations.

Keywords: Child Protection, Government, Collaborative Government, PATBM

BACKGROUND
The 2019 Corona Virus Diseases (COVID-19) pandemic has been declared an extraordinary event that directly and indirectly impacts all groups of people, both directly and indirectly. One
A vulnerable group that needs special protection during the COVID-19 pandemic is children. The pandemic has the potential for non-fulfilment of children's rights, including protection for the child itself, which adults should do. Children are a vulnerable group to experience mistreatment and some conditions that can worsen child development, such as the risk of becoming victims of exploitation, violence, discrimination, mental health, and psychosocial disorders (Bintari, 2020). Currently, the death rate due to COVID-19 in Indonesia, which continues to increase in the adult group, will impact the situation of the separation of children or the absence of care from the primary caregiver (parents, caregivers, or family members). The increase in deaths causes more children to lose their respect. This situation will be exacerbated if no alternative care for special protection for the affected children.

The pandemic also increases the amount of violence against children (KTA). Various risks that impact the pandemic on children can cause children's rights not to be fulfilled. The first risk is that there may be an increase in VAW in the household, abuse, and exploitation, especially against girls, both offline and online. Based on data from the Online Information System (SIMFONI) for the Protection of Women and Children at the Ministry of Women's Empowerment and Child Protection (WECP) until June 2021, there have been 3,122 cases of KTA, with parents occupying the third-highest position as perpetrators of the act of KTA, which is 741 perpetrators. The forms of violence that occur include sexual violence, physical violence, psychological violence, neglect, trafficking and exploitation, including child marriage. The pandemic can also affect children's psychosocial conditions and increase mental health issues. In Indonesia, limiting school learning activities has undoubtedly significantly impacted students’ mental health, although to varying degrees.

Data from the Indonesian Ministry of Health obtained from a rapid assessment survey conducted by the COVID-19 Task Force shows that 47 per cent of Indonesian children feel bored at home, 35 per cent are worried about missing lessons, and 15 per cent feel insecure, 20 per cent of children miss their friends. Friends and 10 per cent of children are concerned about the family's economic condition. Currently, the exposure to COVID-19 is even higher in the child group. Based on the Covid-19 Handling Task Force "National Data Update and Analysis of Covid-19 Cases in Children", as of June 24, 2020, it was stated that 250 thousand cases (12.66%) came from the child age group. The most significant proportion was in the age group 7-12 years (28.02%), followed by the age group 16-18 years (25.23%) and 13-15 years (19.92%). This is, of course, worrying. Moreover, the pandemic also increases the potential for service disruptions or growing difficulties in accessing health for children and, of course, can harm the overall development of children.
Child protection is the responsibility of all parties, especially children are the key to the future of a nation. Protection of children is regulated in the Law of the Republic of Indonesia Number 35 of 2014 concerning Amendments to Law Number 23 of 2002 concerning Child Protection which has mandated the division of roles in child protection efforts. Therefore, the government does not work alone but requires synergy with other parties such as the private sector, universities, mass media, and the community where these children live and work. There is a tendency that in current governance, collaboration is essential because there are problems that cannot be faced or handled by only one institution. By doing this collaboration, it is hoped that the difficulties encountered can be overcome. The governance model that involves multi-stakeholders to make public decisions is known as collaborative governance.

Collaborative governance is one of the new strategic models of government that involves various stakeholders or stakeholders simultaneously in a forum with government officials to make joint decisions that aim to solve problems that exist in society. Ansel and Grash reveal that "Collaborative governance is, therefore, a type of governance in which public and private actors work collectively in a distinctive way, using particular processes to establish laws and rules for the provision of public goods" (Ansell and Gash, 2008). In other words, this concept states the importance of a condition where public actors and private (private) actors work together in specific ways and processes that will produce legal products, rules, and policies that are right for the public or society. One of the collaborative networks in child protection efforts initiated by the PPPA Ministry since 2016 is the Community-Based Integrated Child Protection (PATBM) strategy. PATBM during the COVID-19 pandemic is part of efforts to continue fulfilling children's rights, mainly to prevent and respond to cases or carry out early detection of acts of violence against children in the community. Based on this, the child protection strategy during the COVID-19 pandemic to fulfil children's rights through PATBM can then be analysed through a collaborative governance perspective that is expected to produce more comprehensive and integrated solutions with the involvement of all stakeholders with target groups child.

METHOD

The research method used in this study is qualitative. According to Creswell (2016), qualitative research explores and understands the meaning in some individuals or groups of people originating people originating from social problems. Qualitative research, in general, can be used for research on people's lives, history, behaviour, concepts or phenomena, social issues, and others. The data collection technique in this study uses library research. Researchers collect data by reading, studying, and analysing journals, books,
articles from previous researchers that relate to the object of research and other supporting sources. The research includes photographs, pictures, and electronic documents supporting the writing process. The data is obtained from data relevant to the problem to be studied by conducting other literature studies such as books, journals, articles, previous research. In this study, the data referred to are various articles related to community-based integrated child protection carried out in Indonesia during the COVID-19 pandemic.

RESULT AND DISCUSSION

Collaborative Governance

Before discussing more collaborative Governance, it is necessary first to explain Governance. Governance comes from the word "govern", which means taking a more significant role, which consists of all the processes, rules and institutions that enable the management and control of the joint problems of society. Broadly, Governance includes the totality of all institutions and elements of society, both government and non-government (Dwiyanto, 2015). It is known that "Governance refers to the development of governing styles in which boundaries between and within public and private sectors have become blurred. The essence of Governance, and its most troublesome aspect, according to its critics, is a focus on mechanisms that do not rest on recourse to the authority and sanctions of government (Bekke et al., 1995; Peters and Pierre, 1998; Stoker, 1998; Rhodes, 1996, 1997). In other words, there is a change in Governance in public services carried out by the government and carried out by the government and dissemination of authority from a single actor to a multi-actor. The governance paradigm is adopted and is becoming popular in several countries globally. In the 1980s, this paradigm began to be designed by Western countries to minimise the roles of the state in development and delegate it to other actors. This is due to the growing awareness that the government's ability is increasingly limited in providing public services. The government relies not only on its internal capacity to implement a policy and program. Limited capabilities, resources and networks supporting factors for implementing a program or policy encourage the government to collaborate with various parties, both with fellow governments, private parties and the community and civil society so that collaborative cooperation can be established in achieving program or policy objectives. (Purwanti, 2016).

Collaborative Governance emerges when there is a shift in the administrative paradigm from Old Public Administration (OPA) to New Public Management (NPM). The term government then changed to Governance. This term change aims to democratise public administration because when using the term government, the emphasis is more on government institutions; in contrast to when it shifts to Governance, there is an emphasis on the involvement of non-government, namely interest groups and the community (Sari, 2014).
Furthermore, in this study, researchers will analyse the PATBM program using the collaboration process theory from Emerson, Nabatchi, & Balogh (2012). The Collaborative Governance Regime (GCR) theory in question seeks to explain how the collaboration process is dynamic and cyclical by producing temporary actions and impacts before leading to the significant effects and adaptation to the immediate effect. The existence of this deliberative process makes collaboration a forum for developing innovation and creation, both in generating ideas and in dealing with the practice of collaborative activities in the field, namely if unexpected problems are found, then each actor is not afraid to act creatively, because there is no pressure to have actively served as instructed.

Community-Based Integrated Child Protection (PATBM)

The Indonesian government has made a significant commitment to child welfare globally and nationally, including realising the 2030 Sustainable Development Goals (SDGs). This provides countries with a valuable opportunity to spur development progress for children, supported by the principle of leaving no one behind. Child protection is an essential part of efforts to fulfil children's rights. In terms of child protection, according to the Child Rights Convention, a child is every human being aged eighteen years, which the Indonesian government later ratified through Presidential Decree No. 36 of 1990. Furthermore, as a manifestation of the state's commitment, Indonesia has issued Law Number 35 of 2014 concerning the Second Amendment to Law Number 23 of 2002 concerning Child Protection (Child Protection Law). Child protection as an essential part of fulfilling children's rights requires cooperation and collaboration between stakeholders considering that children's problems have extraordinary complexity.

One form of effort to fulfil children's rights and protection is to build community and institutional networks down to the grassroots. This is in line with Article 72 of the Child Protection Law, which states that the community participates in implementing Child Protection. PATBM is a movement of networks or citizens at the community level that coordinate to achieve child protection goals. PATBM is a community initiative spearheading to carry out prevention efforts by building public awareness to change understanding, attitude, and behaviour that protects children. PATBM during the COVID-19 pandemic was part of efforts to continue to fulfil children's rights, in particular preventing and responding to cases or carrying out early detection of acts of violence against children that occurred in the community (Bintari, 2016). Based on WECP data (2020), PATBM is held in 34 provinces with primary locations in villages or sub-districts in each district/city, and by 2020 the number of PATBMs has grown to 1,921 towns throughout Indonesia.

In the PATBM Guidebook published by the Ministry of PPPA
(2016), it is explained that the scope of PATBM activities is to make efforts to prevent violence against children and to respond or respond to violence against children through the development of networks with affordable and quality support services such as UPTD P2A in Office of Women's Empowerment and Child Protection (DP3A) at the provincial/district/city level P2TP2A, NGOs, Puskesmas, Babinsa and social institutions in the community. In other words, the work pattern of PATBM is participatory and collaborative because the substance is to build synergy between institutions, especially those at the village or sub-district level. Thus, the PATBM program is an illustration of the development of a collaborative governance model, which is related to the paradigm of child development so far, which is very partial, segmentation, sectoral, has not been integrated with other community institutions, does not involve, or involve the potential of the community. In the collaborative governance model, the concept of child protection is carried out by utilising all the potential that exists in the community to develop and grow children's problem solving creatively, holistically, integrative, and sustainably. PATBM has a framework consisting of governance, management and organisational arrangements, funding, information management, human resources, equipment, and community participation movements, as seen in the image below.

Figure 1. PATBM Framework

The ongoing COVID-19 pandemic has impacted various sectors of life and multiple groups of people. The whole world is facing multiple challenges related to overcoming the COVID-19 pandemic. One of the community groups that need attention is the risk associated with the safety and welfare of children as one of the most vulnerable groups. Various risks that impact the pandemic on
children can cause children's rights not to be fulfilled. The government and other stakeholders, including the community, play a crucial role in child protection during the COVID-19 pandemic, particularly in facilitating, monitoring, and promoting children's best interests in facing the increasing risk of child protection. Things that can be done include providing safe houses for children ensuring smooth and balanced access to health and education services for children. Also improving coordination and collaboration between sectors to ensure responses that reflect the multi-dimensional aspects of child vulnerability; establishing a community-based support mechanism for children whom their parents or caregivers abandon due to isolation or quarantine, and it is essential to increase the role of community leaders, religious and traditional leaders in educating the public about the COVID-19 pandemic (Bintari, 2021).

Collaborative Governance PATBM program

As previously stated, PATBM, in its implementation, has a framework consisting of six components, namely governance, organisational management and regulation, funding, information management, human resources, equipment and community participation movements. Each piece is carried out in a networked/collaborative manner by involving various stakeholders in achieving common goals in child protection at PATBM locations. The government collaboration process in the implementation of PATBM will refer to what was conveyed by Emerson, Nabatchi, & Balogh (2012), who saw the dynamics of the collaboration process as an iterative cycle of interaction. Emerson focuses on three interactive components of the dynamics of collaboration. These components include Principled engagement, shared motivation, and joint action capacity.

Figure 2. Theory of Collaborative Governance according to Emerson, Nabatchi, & Balogh.

As previously stated, Ansell and Gash (2007) define collaborative governance as an arrangement that regulates one or more public institutions
that are directly involved with non-public stakeholders in a formal, consensus-oriented, and deliberation collective decision-making process that aims to make or implement public policy or manage public programs or assets. This definition can be formulated with several keywords that emphasise six characteristics, including:

1. The forum is initiated or implemented by public institutions and actors in public institutions.
2. Participants in the forum also include non-public actors.
3. Participants are directly involved in making and making decisions, and decisions do not have to refer to public actors.
4. Formally organised forums and joint meetings.
5. The forum aims to make decisions based on mutual agreement; in other words, this forum is consensus-oriented.
6. The collaboration focuses on public policy and public management.

Referring to the description above, the PATBM, which is the subject of this study, fulfils these characteristics: it is initiated by the community or actors in public institutions, in this case, the people in the Village area. PATBM is driven by community components, including the Village government, and plans to carry out joint monitoring, evaluation, and collaboration, focusing on the directives contained in public policy, namely the Law on Child Protection.

Principled Engagement

The movement of shared principles is something that constantly happens in collaboration. Emerson, Nabatchi, & Balogh mention that face-to-face dialogue or technological intermediaries are ways to move common principles. This component includes a reaffirmation of common goals and the formation and development of common principles, often expressed in the various actors' perspectives. The characteristics of each actor are key elements that influence how well the common principle works. The critical first step is choosing the actors involved in the collaboration. The analysis then looks at how big the impact and implications are, namely, differences in interests that affect the collaboration process (Lukito, 2016). The movement of shared principles is closely related to how each actor's roles are divided and efforts to construct common interests to achieve the agreed goals. Collaboration and networking are the hallmarks of PATBM by referring to the common principle, namely the best interests of children for the fulfilment of children's rights and protection from various acts of violence, discrimination, and exploitation. The management and organisation of PATBM as the first component in the framework relates to actors who have the authority to formulate the main policies for implementing PATBM, such as the Ministry of PPPA, the Provincial/District/City Women's Empowerment and Child Protection Agency (DP3A) as well as village governments and other actors. PATBM
implementers such as PATBM activists/cadres/volunteers.

All actors involved in PATBM at the central level to the grassroots have the same commitment and agreement, namely maximising the role of the community through the PATBM movement as one of the community movements to detect early threats or cases of violations of the fulfilment of children's rights and protection, including threats due to the COVID outbreak. Collective agreements include general rules, protocols for activities, and rules for making decisions, all of which can be realised through informal and formal arrangements. However, more formal contracts are needed in complex, long-term collaborations, such as establishing the legal basis for cooperation (Muqorrobin, 2016). The Ministry of PPPA as the manager of PATBM at the central level, has compiled and disseminated various child protection protocols, including the existence of the PATBM Guide during the COVID-19 pandemic. This reference is used for PATBM activists in assisting efforts to prevent the spread of COVID-19, reduce violence in children, and support the task force to accelerate handling COVID-19 and ensure that children receive protection and their rights are fulfilled during the emergency period until the recovery period. At the regional level, provincial and district/city DP3A have a role in facilitating various PATBM activities in villages, including PATBM, during the COVID-19 pandemic. The facilitation in question can be in the form of capacity building programs or activities, providing communication, information, and education (KIE) facilities, assisting activities in villages as activity informants and integrating various COVID-19 prevention and handling programs into child protection activities at PATBM locations. Meanwhile, at the village government level, the government conducts socialisation and coordinates with PATBM activists/relations/cadres in ensuring that PATBM activities during the pandemic continue to run according to the capacity and resources of each PATBM.

All these actors carry out considerations in determining PATBM activities during the pandemic in stages. An example is the PATBM Guide during the Adaptation of New Habits (2021), which results from a study conducted by the Ministry of PPPA in collaboration with Wahana Visi Indonesia and involves a national facilitator as a research team. The survey carried out was a rapid assessment of the implementation of PATBM during the COVID-19 pandemic based on the previous PATBM guidelines, which was carried out using mixed-methods, namely a research step by combining two forms of approaches in research, namely qualitative and quantitative. This rapid assessment came from 14 cities/districts in 12 provinces implementing PATBM. Data collection was carried out through survey applications, interviews with informants, and online/online Focus Group Discussions (FGD) involving implementers and beneficiaries of
PATBM activities in villages. The beneficiaries of this activity are the three target groups of PATBM activities, namely children, families, and communities. So, the PATBM guidelines during the pandemic compiled by the central government and Non-Governmental Organizations are based on the needs of the community, especially PATBM activists/volunteers/cadres. The latest guide was produced based on the study results, namely the PATBM guide during the adaptation period for new habits (IMR).

Figure 3. PATBM Guide in COVID-19 Pandemic Adapting to New Habits

Source: Ministry of PPPA (2020) Source: Ministry of PPPA (2021)

The IMR guide was prepared to guide PATBM activities during the COVID-19 pandemic with adjustments to the IMR policy. Specifically, the objectives of this guide are to integrate and strengthen various child protection policies during the COVID-19 pandemic and the IMR set by the government at the central, provincial, district/city and village levels.

1. Ensure steps and optimise the role of PATBM in preventing and responding to cases of violence against children that occur during the implementation of the IMR.

2. Improve the coordination and integration of the PATBM network in preventing and responding to cases of violence against children during the COVID-19 pandemic and IMR at PATBM locations.

Based on the purpose of the guide, there are priority roles of PATBM that can be carried out during the COVID-19 pandemic and the IMR period, namely:

- We are supporting COVID-19 prevention and handling programs in the community through the RT/RW task force in villages, including villages, hamlets, and banjars, by promoting various protocols and guidelines issued by the Ministry of PPPA to protect families, especially in efforts to protect children from the dangers of exposure to COVID-19, 19, including the importance of the
COVID-19 and IMR vaccination programs.

1. Building awareness and shared responsibility from parents, nuclear family, or the surrounding community through information about parenting patterns on the risk of separation of children from their parents/adults infected with COVID-19.

2. They are informing health or psychosocial services at the Central Villages Community's Health (Puskesmas), referral area hospital if there are children or adults with symptoms of COVID-19 to obtain childcare and protection services such as UPTP2A/P2TP2A if there are children who experience violence to get psychosocial support and good treatment mentally or physically.

3. It collects data and documents cases in children at PATBM locations, both instances of COVID-19 infection and cases of violence against children.

4. Help minimise the negative impact on children, parents and families who have been assigned to COVID-19 care in areas from stigma and discrimination.

**Shared Motivation**

Shared motivation emphasises collaboration dynamics' interpersonal and relational elements, sometimes referred to as social capital. This component is initiated by mobilising the familiar principle, the medium-term outcome. However, according to Huxham and Vangen in Emerson, Nabatchi & Balogh (2012), shared motivation also strengthens and enhances the process of moving shared principles. The first element of shared basis is the development of shared trust. According to Fisher and Brown in Emerson, Nabatchi & Balogh (2012), mutual trust will develop along with the parties' involvement when collaborating, getting to know each other, and proving that they can be trusted, responsible and reliable. Trust is an essential and absolute part of the progress of collaboration. Furthermore, a commitment to shared knowledge and resources is needed in building shared motivation.

PATBM collaborates between the community and other stakeholders who have the same goal: protecting and fulfilling children's rights. The pandemic situation has prevented many PATBM activities from being carried out, both in the context of routine activities carried out by activists and activities carried out by DP3A at the district/city and provincial levels. Several provinces that continue to increase the capacity of PATBM activists during the pandemic, based on data held by researchers, include the governments of Bali Province, West Java Province, DKI Jakarta Province and Lampung Province. This is one strategy to keep motivating PATBM actors, especially activists. Meanwhile, at the PATBM location, village officials continue to carry out various activities by adjusting their funding and human resources. During the pandemic, activists' involvement with the COVID-19 task force at the RT/RW and
village levels can be seen. The Ministry of PPPA, as the government at the central station, has a variety of programs to keep motivating and maintaining commitment with all PATBM actors, including holding webinars, thematic training, online-based training and facilitating child protection short video competitions for all activists in villages throughout Indonesia, both those who have formed a PATBM and those committed to creating a PATBM.

Figure 5. Short Video Competition Poster

Source: WECP (2021)
Capacity for Joint Action

The existence of collaborative governance can be seen from the aspect of the need for institutions to collaborate between institutions because of the limited ability of each institution to carry out its programs/activities. One of the dynamics of collaboration is the capacity to take collective action. Capacity is defined as "a collection of cross-functional elements that come together to create the potential for taking effective action" (Balagh, 2012). In this case, the capacity for collective action is conceptualised in a framework that combines four essential elements, including institutional procedures and agreements, leadership, knowledge, and resources. These elements must be sufficient in achieving the agreed objectives.

The human resources that drive the development of PATBM in the regions to villages consist of representatives of provincial and district/city government agencies/DP3A who are responsible for the implementation of child protection, the Camat and Village Heads/Lurah, as well as Section Heads/Welfare Affairs in sub-districts and villages. /Ward. Then there are those known as PATBM activists. PATBM activists in the town have concerns about child protection issues and voluntarily express their willingness to be a work team that actively mobilises PATBM. In implementing PATBM at the village level, activists/cadres/volunteers have generally been equipped with a decree (SK) to establish PATBM to provide legality for all ongoing activities and is a form of commitment from the village government in facilitating PATBM activities. During the COVID-19 pandemic, the village government actively planned PATBM activities and adapted them to pandemic conditions. The Village Head/Lurah is one of the actors who can determine the performance of PATBM during the pandemic.

Based on the results of a rapid assessment on the implementation of PATBM during the COVID-19 pandemic (2021), it was found that activists/cadres/volunteers did not participate in PATBM activities. This is because, during the pandemic, many PATBM activities cannot be carried out based on considerations of public health, safety, and security. During the COVID-19 pandemic, the division of tasks was based on mutual agreement and did not follow a pre-agreed structure because it was adjusted to individual willingness and activity funding. Most of the activists/cadres/volunteers collect personal funds donations from relatives and community leaders in the village. Most activists carry out activities related to increasing public awareness of health protocols, such as the importance of wearing masks, washing hands, and maintaining distance.
The quick study results also showed that most PATBM activists/cadres/volunteers during the pandemic used social media such as WhatsApp groups to discuss activity planning, including case reports about children at PATBM locations. The movement's message that is a priority is efforts to prevent and respond to instances of COVID-19 exposure to groups of children, including socialising health protocols, the importance of vaccines and reporting procedures if there are residents whose family members are exposed to COVID-19. However, preventing and responding to violence against other children (issues of child marriage, dropping out of school, assisting children during the learning process at home, stigmatisation, and discrimination) are still carried out at certain times. These activities are coordinated with the COVID-19 Task Force at the RT/RW, village, and sub-district levels. Activists/cadres/volunteers in several areas are directly accompanied by PATBM facilitators from childcare institutions/communities, the District/City level Women's Empowerment and Child Protection Service (DP3A), as well as components of community organisations and other institutions such as PKK, Youth Organizations, Community Health Centers, Babinsa and Bhabinkamtibmas. What needs to be further concern is the capacity of human resources, in this case, local governments, communities and activists/cadres/volunteers in the implementation of PATBM, which differ in the ability to plan activities, the ability to build networks, the ability to mobilise the community and record activities. During the COVID-19 pandemic, the activities varied both in quality and quantity.

CONCLUSION

Based on the results of the description in the discussion, it can be concluded that collaboration between
actors/stakeholders in community-based integrated child protection (PATBM) during the COVID-19 pandemic in Indonesia fulfills the collaboration component that Emerson said earlier, namely the three interaction components of the dynamics of collaboration. These components include Principled engagement, shared motivation, and joint action capacity.

Although the central government initially initiated PATBM (WECP), the substance and implementation of PATBM were returned to the community's needs. In the end, it becomes a child protection strategy at the village level, which is rooted in the community living in the village. The movement of common principles starts from planning the formation of PATBM to monitoring and evaluating the implementation, where all actors/stakeholders from the central to village levels have their respective roles to collaborate and coordinate sustainably.

PATBM, in its implementation, has a shared motivation by the objectives of child protection, namely the fulfilment of children through prevention and response to violence that occurs, including efforts to educate the public regarding health protocols. While joint action is carried out by the PATBM concept, which focuses on networking, of course, PATBM activists/volunteers/cadres as the main actors cannot work alone but are supported by other components such as the government, private sector, community or child watchdog institutions and other communities.

However, problems in implementing PATBM during the COVID-19 pandemic cannot be ignored. In the movement of shared principles, for example, although there are guidelines for implementing their activities, not much has been done for assistance and supervision—likewise, the motivation and joint actions taken during the pandemic. PATBM in several locations in Indonesia is still under-appreciated so that alignments with activity budgeting are often not visible. Including efforts to increase the capacity of the activists that have not been carried out optimally due to limitations in financing and supporting human resources.

DP3A needs to strengthen its capacity through the preparation of regulatory documents within the DP3A environment (Standard Operating Procedures (SOP) for PATBM development, technical guidance, routine coordination mechanisms, etc.) as well as expanding policy advocacy efforts at the local government level (across OPD) and village to PATBM development.

REFERENCES
Ansell & Gash. (2008). Collaborative Governance in Theory and Practice. *Journal of Public Administration Research and Theory*, 18(4).

Bekke, H., W. Kickert and J. Kooiman. (1995). *Public Management and Governance*, In Kickert and F. A. van Vught, eds. *Public Policy and Administrative Sciences in the Netherlands*. London: Harvester-Wheatsheaf.

Bintari, Antik. (2021, Juli 23). *Perlindungan Anak di Masa Pandemi*. https://tandamatabdg.wordpress.com/2021/07/23/perlindungan-anak-pada-masa-pandemi/.
Bintari, Antik. (2016, Juni 9). *Perlindungan Anak Berbasis Masyarakat*. https://tandamatabdg.wordpress.com/2016/06/09/perlindungan-anak-berbasis-masyarakat/.

Dwiyanto, Agus. (2015). *Manajemen Pelayanan Publik: Peduli, Inklusif dan Kolaboratif*. Yogyakarta: UGM Press.

Emerson, Kirk, Tina Nabatchi & Stephen Balogh (2012). *Integrative Framework for Collaborative Governance*. *Journal of Administration Research and Theory*, 22(1):1-29.

Kementerian Pemberdayaan Perempuan dan Perlindungan Anak RI (2016). *Pedoman Perlindungan Anak Terpadu Berbasis Masyarakat*. Jakarta.

Kementerian Pemberdayaan Perempuan dan Perlindungan Anak RI (2020). *Panduan Perlindungan Anak Terpadu Berbasis Masyarakat (PATBM) dalam Pandemi Covid-19*. Jakarta.

Kementerian Pemberdayaan Perempuan dan Perlindungan Anak RI (2021). *Sistem Informasi Online (SIMFONI) PPPA*. https://kekerasan.kemenpppa.go.id/register/login

Kementerian Kesehatan RI (2021). *Lindungi Anak dan Remaja Kita dari Varian Baru Covid-19* (2021). https://promkes.kemkes.go.id/lindungi-anak-dan-remaja-kita-dari-varian-baru-covid-19

Lukito, Dimas. (2016). *Collaborative Governance (Studi Tentang Kolaborasi Antar Stakeholders Dalam Pengembangan Kawasan Minapolitas di KabupatenSidloarjo).* Surabaya: Unair.

Muqorrobin, Muhammad. (2016). Proses Collaborative Governance dalam Bidang Kesehatan (Studi Deskriptif Pelaksanaan Kolaborasi Pengendalian Penyakit TB-HIV di Kabupaten Blitar). *Jurnal Kebijakan dan Manajemen Publik, 4*(1).

Purwanti, Nurul D, (2016). *Collaborative Governance (Kebijakan Publik dan Pemerintahan Kolaboratif, Isu-Isu Kontemporer)*. Yogyakarta. Center for Policy & Management Studies, FISIPOl UGM.

Kementerian Pemberdayaan Perempuan dan Perlindungan Anak RI (2021). *Laporan Kajian Cepat (Rapid Assessment) PATBM di Masa Pandemi COVID-19*. Jakarta.