Government and Non-Governmental Organizations in Responses and Challenges on Gender-Based Violence During Covid-19 Pandemic in Indonesia

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ABSTRACT

This study aims at identifying the government and non-governmental organizations in responses and challenges on gender-based violence during the Covid-19 pandemic. This research is employing library research methodology with the feminist perspective. Government and non-governmental response of GBV in the Covid-19 pandemic time are: launching program of BERJARAK (together we keep our families), SEJIWA, conducting research/survey related to the GBV, assisting the victim of the GBV both legal and personal while obeying to these protocols, they are: health protocol, distant service protocol, reaching out protocol, direct service protocol, home-service protocol, as well as social rehabilitation, and reintegration protocol. The challenges faced by the government and non-governmental organizations in overcoming the gender-based violence (GBV) case is (1) the changes and adaptation of services form (new normal adaptation), (2) The using of electronic devices for long period could disturb the people healthiness who involve in the GBV service and it feels uncomfortable, (3) The obedience in following health protocol in providing offline services. The health protocol includes wearing mask, washing hand, social and physical distancing, (4) Home-shelter service, not all provinces allocate home-shelter. This service is only provided by DKI Jakarta and Yogyakarta, (5) Donation and fund during the covid-19 pandemic is hard to get due to the government recession, (6) Communication technology illiterate, and (7) Access and control of the gadget.

Keywords: Government Organization, NGO, Gender-based Violence, Covid-19 Pandemic, Indonesia

1. INTRODUCTION

Gender-based violence (GBV) since and during Covid-19 is increasingly rampant. This is because the social restrictions imposed to reduce the spread of this pandemic have resulted in all activities being concentrated at home. This creates a huge domestic burden for women, from doing house chores to ensuring children in accessing education online from home [1].

Reports in increasing gender-based violence in this covid-19 pandemic have already been obtained from UK, Kenya, Australia, Brazil, China, United States of America, and other countries [2]. In the Regency of Jianli, China (Central Hubei Province), police have received 162 reports of violence which related to husband and wife conflict which experience threefold increase from February [3]-[4].

There have been 1,299 cases of violence against women (include girls) throughout March to May 2020. Cases of violence in the private sphere still exist which the highest rank with 784 cases (67%). Number of violence cases reported of girls was 218, dominated by cases of sexual abuse/ incest/ copulation as much as 51%. Meanwhile, 243 cases of violence occurred in the public sphere with the most cases that occurred was rape/ sexual intercourse/ sexual immorality as much as 45% and 11% sexual exploitation. Meanwhile, violence in the realm of the state is 24 cases were reported. As in other areas, cases of sexual violence still exist and occupy the highest number, namely 53% sexual harassment and 33% rape. Domination of sexual violence also occurred in 129 cases of online-based violence which were related with threats of immoral nuances [5].

Further, an article entitled Pandemic Triggers Violence against Women in Media Indonesia stated that the number of GBV is increasing. Based on the data taken from the Integrated Service Centre for the Empowerment of Women and Children (P2TP2A) and a national commission on violence against women
(Komnas Perempuan), cases of violence against women have increased by 75% since the onset of the pandemic Covid-19. The National Commission on Violence Against Women conducted a survey on 2,285 respondents during April-May 2020 and noted that 80% of female respondents in the income group below IDR 5 million per month experienced an increase in violence during the pandemic period. Meanwhile, LBH APIK noted that victims who reported the most cases experienced physical violence, followed by psychological violence and sexual violence [6].

This article tries to answer the following questions: 1). what are the responses on gender-based violence during the Covid-19 pandemic by the government, and Non-Government Organizations? and 2). what are the challenges have been faced by the government, and the NGOs? This study is employing library research. This research is also using the feminist perspective since feminism is pursuing the gender issue and upholds its equality. The data is taken from articles, papers, report, news, press release and other documents which are related to the government and non-governmental organizations in response and challenges on gender-based violence during covid-19 pandemic in Indonesia.

This article argues that covid-19 in Indonesia has increased the number of gender-based violence during covid-19 pandemic. To slow down the spreading of the covid-19 virus, government and local governments have launched a policy of stay at home which has also increased the gender-based violence. In responding to those matters, government and non-governmental organizations work hand in hand to cope that although there are also still challenges.

2. LITERATURE REVIEW

Gender-based violence, as it is called, is all forms of violence aimed against a victim depending on the gender of the person where this action causes harm such as physical, psychological, sexual, intimidation, bullying, lack of freedom, and others. Under the United Nations General Assembly Declaration on the Elimination of Violence against Women of 1993, it was stated that gender-based violence covers several forms but is not limited to it [7].

The Gender-based Violence (GBV) has four (4) forms; they are physical, emotional, economic, and sexual. Physical GBV can include physical attack, slavery, human trafficking, child, and honour killing. Emotional GBV covers harassment/ humiliation, confinement/ isolation, intimidation/ threat, and social exclusion based on sexual orientation. Economic GBV involves discrimination/ denial of opportunity, forced marriage, early marriage, as well as refuse education for women and children. The last, sexual GBV comprises sexual exploitation, forced prostitution, rape, rape in marriage, child sexual abuse, defamation, and incest [8].

![Figure 1 Gender Based Violence Forms](image)

Interestingly, World Health Organization (WHO, 2002) on its website dated on April 15th, 2020 has released question and answer section regarding violence against women during covid-19 pandemic [9]. It implies that WHO have acknowledged that this very matter occurred globally. In the website, WHO posted thirteen questions and the answers. The questions are: (1) home is not a safe place for me. What can I do? (2) I need medical attention because of violence. Who can help me and where should I go? (3) I am safe, but I am suffering from mental/ sexual/ social/ long-term physical health problems because of violence. Is there anyone who can help me during covid-19? (4) I am worried about someone I know. How can I help? (5) I want to report an incident of violence during covid-19. What should I do? (6) I have harmed or am worried about harming or hurting my partner (and children) with my words or actions. How can I stop? (7) I am a health worker. How can I help women survivors of violence during covid-19? (8) I run a health facility. What can I do to support women survivors of violence during covid-19? (9) I am a policy maker. What can I do to prevent and address violence against women during covid-19? (10) Has violence against women increased since the beginning of the covid-19 pandemic? (11) How does covid-19 increase risks of violence for women? (12) Who is most vulnerable? and (13) Why should I care about violence against women during covid-19?

In Indonesia, women also facing gender-based violence since and during covid-19 pandemic. For the past six weeks of PSBB or home quarantine, gender-based violence has been increased significantly. Ninety-seven cases of violence varied from physical abuse (such as rape, sexual assault, and pornography) to psychological or verbal abuse [10]. There also a data from the Ministry of Women Empowerment and Child Protection- Indonesia (2020) that is more shocking and
bizarre. They claim that until April 29th, the cases of gender-based violence are as many as 184 cases [5].

As a matter of fact, woman becomes very vulnerable in this unsettling condition of covid-19 pandemic. As Gita Sen said in The Jakarta Post article, an adjunct professor of global health and population at Harvard University, people are living in deeply unsettling times. In addition, the pandemic has turned everything upside down, how people live, how people work, and how people interact [11].

Due to economic recession in the PSBB time (restriction activities in large scale) and the government suggestion to stay at home, woman is overwhelmed by many things, such as domestic chores, at home parenting, child education, domestic cash flow, etc. In this very situation, woman in lower class who is very poor and has low income most likely to face threat or violence from the spouse while for single mother or woman, the effort to stay working is very limited because company/ stakeholder which hiring them face unprecedented condition too. Company/stakeholder have possibility to cut off the employee by firing them. When the company/stakeholder does that, the percentage of gender-based violence can soaring high because violence caused by one of them is economic condition.

The Covid-19 pandemic is not only impacting on the Indonesian health, education, economic, and social condition. The pandemic especially puts woman in a very difficult situation. Woman who is in the family will likely facing potential gender-based violence. Meanwhile, woman who becomes the breadwinner of the family will likely get difficulty in getting source of income because of limited access and underprivileged.

2.1. Responding Covid-19 with Feminist Perspectives

Responding to the Covid-19 pandemic without a feminist lens will undoubtedly result in gender blind programs and activities that often harm women [12]. The Covid-19 pandemic has exposed and exacerbated pre-existing structural inequalities in Asia and Pacific countries and beyond [13].

Programmes for handling gender-based violence often fails because they lack of a more appropriate approach to achieve transformative change in a patriarchal society. Power structures and norms that sustain gender inequalities such as GBV are closely linked and need to be addressed systematically for interventions to succeed [14]. Therefore, feminist perspectives are needed to provide a deeper understanding of the handling Covid-19 by analysing how work and study from home effects men and women differently. As it is proven that the lockdown policy has increased the number of violence against women.

3. RESULT

3.1 Responses

In this paper, the researchers divide the organization which related to Gender-based Violence (GBV) into two large groups: 1) government organization, and 2) non-governmental organization. In this division, organizations which are funded by the government and related to it include into government organization. Whereas, the organizations which are funded by parties other than government include into non-governmental organization, this NGO is important organization because it does not dictated by the government. So, NGO very existence depends on their vision and mission.

The role of government and non-governmental organizations is essential to uphold the gender equality. So that’s why those organizations experience many limitations and obstacles in this Covid-19 pandemic. The organizations are being forced to adapt with this unprecedented situation. In Indonesia, organizations of the government and NGO across the regions have adjusted to new realities; they creatively think how to response by continuing their previous initiatives and programs, while also having to come up with strategies to deal with the pandemic.

As it is mentioned above, the raising case of gender-based violence (GBV) triggers organizations to go hand in hand to response it though they also will deal with some challenges.

The responses of each organization toward gender-based violence (GBV) in general are the same. They want to do something in their position so that the case of GBV can be handled properly. Starting from the victim report to the police, the hospital check the evidence, an even assist the victim to go through trial in the court and protect them for the possibility that the perpetrator will avenge them.

According to research report by the UNRISD (United Nations Research Institute for Social Development) entitled When and Why the State Responds to Women’s Demands: Understanding Gender Equality Policy Change in Indonesia; gender case in Indonesia is not only dominated by the gender-based violence. Gender case in Indonesia also covers case of marriage, girls/ children sexual abuse, economic, reproductive health, politic, and gender mainstreaming [7].
Table 1 The Response of Government Organizations in Indonesia

| No. | Government Organization                                      | Responses                      |
|-----|--------------------------------------------------------------|--------------------------------|
| 1.  | Ministry of Women’s Empowerment and Child Protection         | BERJARAK                       |
|     |                                                               | SEJIWA                         |
|     |                                                               | Gender Mainstreaming           |
| 2.  | Ministry of Finance                                         | Gender Mainstreaming           |
| 3.  | Ministry of Environment                                     | Gender Mainstreaming           |
| 4.  | Ministry of National Development (Bappenas)                 | Gender Mainstreaming           |
| 5.  | Ministry of Law                                             | Gender Mainstreaming           |
| 6.  | Ministry of Social Welfare                                  | Gender Mainstreaming           |
|     |                                                               | Assistance for GBV Victim      |
| 7.  | Ministry of Health                                          | Gender Mainstreaming           |
|     |                                                               | Assistance for GBV Victim      |
| 8.  | National Commission on violence against women (KOMNAS Perempuan) | Survey                        |
|     |                                                               | Research                       |
|     |                                                               | Legal Assistance               |
| 9.  | Indonesian Police Force                                     | GBV Report Service             |
| 10. | Local government in the level of province, city, district, sub-district, and village | Assistance for GBV Victim | |
| 11. | Public Service Institution and UPTD-P2TP2A                  | Assistance for GBV Victim      |

The elaboration of table 1 below is the responses of government organization toward gender-based violence (GBV) in Indonesia during this Covid-19 pandemic:

1. The Ministries: the leading actor to eradicate gender-based violence (GBV) is the Ministry of Women’s Empowerment and Child Protection (PPPA). In this pandemic, this PPPA responses the case of GBV by launching a slogan of BERJARAK (bersama jaga keluarga kita/ together we keep our families) and provides SEJIWA program. SEJIWA is psychological services, which expected to be a space for people, especially women and children, who are vulnerable to experiencing psychosocial problems due to pressures that arise during the pandemic [15].

2. PPPA coordinates with the other ministries and relevant government institutions to tackle GBV and order its office in the level of province to be ready if there is an increase of GBV. Other ministries such as Ministry of Finance, Ministry of Environment, Ministry of National Development (Bappenas), Ministry of Social Welfare, Ministry of Law, and etc. support the gender mainstreaming in their institutions based on approval of the Presidential Decree on Gender Mainstreaming in Development No.9/ 2000 [5]. They even allocate funds and prepare policy to support gender equality and diminish GBV. PPPA collaborate with Ministry of Health, Ministry of Social Welfare and Indonesia Police Force to create such system from bottom to the top to accommodate the victim of GBV. The Ministry of Health creates a system to accommodate the victim of GBV in the local/ national hospital.

3. Indonesian Police Force responses toward a report of GBV are they follow it up. It is starting from asking the victim to be examined in the hospital and make sure their safety [5].

4. Public Service Institution and UPTD-P2TP2A is institution under Ministry of Social Welfare which concern about gender-based violence. This institution response is still the same as usual. But during pandemic, the form of service is changes. It forces them to make new services online [16].
The elaboration of table 2 below is the responses of non-governmental organization toward gender-based violence (GBV) in Indonesia during this Covid-19 pandemic:

1. Aisyiah and Muslimat is women organization under Muslim two biggest Muslim organization in Indonesia, they are Nahdlatul Ulama and Muhammadiyah. This two organization response the GBV during the pandemic by providing assistance to the victim. Aisyiah collaborates with MAMPU. The Australia-Indonesia Partnership for Gender Equality and Women’s Empowerment. MAMPU supports the Government of Indonesia in achieving the Sustainable Development Goals (SDGs) by building women’s leadership and empowerment to improve their access to essential government services and programs. MAMPU works with 13 organizations and their networks of over 100 local partners in 1000 villages across 27 of Indonesia’s 34 provinces. MAMPU and its partners during the pandemic continued to carry out intervention activities in the field while still paying attention to the needs of women and other vulnerable groups through a gender and inclusive perspective approach. MAMPU partners strengthen the organization of women's groups in villages, build resilience in communities and involve multi-parties in handling Covid-19 [17].

2. MAMPU responds to the GBV during pandemic by building Partner with the Female-Headed Family Empowerment Program (PEKKA) which monitored social assistance provided to residents affected by COVID-19 through a survey of 6,553 respondents spread across 91 villages in 42 districts and 17 provinces. Twenty-two districts are supported by the MAMPU Program. Before conducting the monitoring, PEKKA provided training for enumerators on 18 and 19th May to teach survey procedures, questions and data synchronization. According to Dwi Indah Wilujeng, PEKKA’s MAMPU Program Coordinator, the monitoring aimed to ensure that social assistance programs from the government and private sector were delivered on target [18].

3. HAPSARI, one of MAMPU’s Partners in North Sumatra that is part of the Service Providers Forum (FPL), has also received increasing numbers of reports of violence against women since the pandemic began. From January to December 2019, HAPSARI responses to the GBV by handling 73 case of violence; however, during the pandemic, from January to June 2020 HAPSARI has already handled 32 cases and each day this number continues to rise [19].

4. The Foundation for Rural Capacity Building (BITRA) responses to the high report of GBV by gives training for homeworkers in Deli Serdang Sumatra. It aims to give employment for women. In the union, women homeworkers are trained how to make and market face masks to fulfill their daily needs [20]. As a matter of fact, one of GBV causes is the economic condition. If women/man are self-sufficient, they are not likely to do violence.

5. Rifka Annisa Women’s Crisis Center which is operated in Yogyakarta has responding to the GBV during Covid-19 pandemic by doing these following actions [21], they are:
   1) Mitigate COVID-19 risks and adaptation of services
   2) Provide COVID-19 risks and adaptation of services
   3) Strengthen protocols for handling cases of violence in crisis situations
   4) Network with Task Forces and Task Forces Handling COVID-19 in each region
   5) Ensure the welfare of female counselors. Increasing burden of female counselors must be taken into account.

6. LBH APIK responses to the GBV by reinforcing their law assistance to the victim of GBV [22].

Each organization both government and non-governmental during the Covid-19 pandemic have applied the new normal adaptation which already based on health protocol by Ministry of Health and WHO. The institutions mentioned above have socialized about the danger of Covid-19 which spreading fast through any media. Parties who are involve in the GBV such as

| No.  | Non-Governmental Organization   | Responses                                      |
|------|---------------------------------|------------------------------------------------|
| 1.   | Aisyiah – MAMPU                 | Assistance for GBV Victim                      |
| 2.   | Muslimat NU                     | Empowering Women to Avoid GBV                 |
| 3.   | MAMPU – PEKKA                   | Assistance for GBV Victim                      |
| 4.   | HAPSARI                         | Assistance for GBV Victim                      |
| 5.   | BITRA                           | Economic Assistance for Women                  |
| 6.   | Rifka Annisa Women’s Crisis Center | Assistance for GBV Victim                      |
| 7.   | LBH-APIK                        | Legal Assistance                              |

Table 2 The Response of Non-Governmental Organization in Indonesia

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Note: The information and data provided in the table are for educational purposes only and may not reflect the latest statistics or current situation. The responses and actions taken by these organizations are crucial in addressing the challenges posed by the pandemic and ensuring the safety and well-being of victims of gender-based violence.
counselor, victim, police, family, lawyer, judge, etc. should be undergone rapid test to make sure their safety.

Since the case of GBV requires thorough system to tackle, not only health protocol that needed to be implemented. As response, these several other protocols also necessary to be carried out [23], they are:

1) Distant Service Protocol (enable victim to get online service)
2) Reaching Out Protocol (enable victim to be easily get the service in their own area, better in their living neighborhood)
3) Direct Service Protocol (enable victim to get offline service from the stage of reporting, legal assistance, psychological counseling for rehabilitation, etc.)
4) Home-Shelter Service Protocol (enable victim to access shelter/AMAN house for staying at necessary time till the victims ready to return to the society)
5) Social Rehabilitation and Reintegration Protocol (ensure the society not to put stigma on the victim of GBV and enable victim to return to the society safe and sound).

### 3.2 Challenges

In tackling the gender-based violence, two organizations of government and non-governmental deal with some of challenges [5], they are:

1) The changes and adaptation of services form.
   - In this pandemic time, the offline services turn into online since both central and local government put into action the policy of quarantine/ stay at home to slow down the spreading of the Covid-19 virus. This changes and adaptation are known for the name ‘new normal adaptation’.

2) The using of electronic devices for long period could disturb the people healthiness who involve in the GBV service and it feels uncomfortable.
   - When victim chooses distant service in accommodating his/ her cases, she/ he will employ electronic devices to get in touch with the police, counsellor, legal assistant, etc. electronic devices may not only disturb the victim healthiness but also the parties include and it can cause uncomfortable too due to staring at laptop/ screen in a long period, the using of earphone/ headphone can damage the ear, the still position when accessing devices cause a fatigue, etc.

3) The obedience in following health protocol in providing offline services. The health protocol includes wearing mask, washing hand, social and physical distancing.
   - As the fast-spreading Covid-19 virus at the moment, the only vaccine people can afford is obeying health protocols. It is easy for the government to set rule about it, but to make sure people obey it, it is a hard work. Not all people believe that Covid-19 virus is real; some even think that this virus is such kind of conspiracy. So that’s why, the rules that have been set out need to be upheld.

4) Home-shelter service, not all provinces allocate home-shelter. This service is only provided by DKI Jakarta and Yogyakarta. Though local government has gotten autonomy since the shift of new order era to the new democratic era, it is proven difficult to build advanced system regarding GBV if the local government does not have the funding and policy about anti GBV to be determined.

5) Donation and fund during the covid-19 pandemic is hard to get due to the government recession. People spend their money by prioritizing it to fulfil their basic need.
   - Government and non-governmental organizations certainly have their own funding. The government gets the finding from the APBN (state expenditure budget) and NGO obtains the funding from the other party or society who have concerned about GBV. In this pandemic situation, unfortunately the funding has been cut off and concentrates it on the pandemic funds.

6) Communication technology illiterate.
   - Sometimes the victim of GBV is children or old people and they could not operate the gadget. So that’s why, they will file a case through their RT/RW (neighbourhood community chairman) verbally if they think they already felt uncomfortable and gain threat from the perpetrator.

7) Access and control of the gadget.
   - The victim of GBV which is children and old people could not access the gadget due to the control of it commonly controlled by the perpetrator.

### 4. DISCUSSION

The findings of this study indicate that the Indonesian government together with non-governmental organizations has responded to gender-based violence during Covid-19 period with several strategic programs to protect GBV victims, ranging from psychological assistance to prevention.

This is in congruence with what the Argentine government has done in dealing with gender-based violence during the Covid-19 pandemic. More than what the Indonesian government has done, the Argentine government also provides education to male perpetrators of violence. There are four provinces out of a total of 24 provinces following a strategy of attracting and providing direct resources to male perpetrators of gender-based violence. The first two provinces to promote this strategy were Córdoba and Mendoza, both
6 days after mandatory stay-at-home military service, and the other two, Catamarca and Salta, centers and workshops to re-educate men on the diseases of gender-based violence are largely concentrated in the most populous province of provincia de Buenos Aires [24]. This finding is different from the research result of Al-Ali that pandemic is highlighting intersectional gendered vulnerabilities, patriarchal violence and toxic forms of masculinity [12]. It has also exacerbated the growth in authoritarian politic. Indonesian government with its gender mainstreaming is more gender friendly and more cooperative with NGOs.

5. CONCLUSION

The government and non-governmental organizations are proven to have fast and well-organized responses toward the case of gender-based violence during covid-19 pandemic. They have their own responses of it, such as launching program of BERJARAK (together we keep our families), SEJIWA, conducting research/survey related to the GBV, assisting the victim of the GBV both legal and personal while obeying to these protocols, they are: health protocol, distant service protocol, reaching out protocol, direct service protocol, home-service protocol, as well as social rehabilitation, and reintegration protocol.

The challenges faced by the government and non-governmental organizations in overcoming the gender-based violence (GBV) case is (1) the changes and adaptation of services form (new normal adaptation), (2) The using of electronic devices for long period could disturb the people healthiness who involve in the GBV service and it feels uncomfortable, (3) The obedience in following health protocol in providing offline services. The health protocol includes wearing mask, washing hand, social and physical distancing, (4) Home-shelter service, not all provinces allocate home-shelter. This service is only provided by DKI Jakarta and Yogyakarta, (5) Donation and fund during the covid-19 pandemic is hard to get due to the government recession, (6) Communication technology illiterate, and (7) Access and control of the gadget.

The conditions of GBV linked to the pandemic might provide an opportunity for government and non-governmental organizations to develop social awareness of the importance of the policy concerning GBV and make it possible to push the parliament to pass the law of anti-gender-based violence.

Because this study is a library research, especially using online media, it is limited only to those available on a website basis. Future research is expected to elaborate on this issue with field research in order to be able to cover these shortcomings.

AUTHORS’ CONTRIBUTIONS

The data of this research were collected and analysed by Istitiah. Then, Asni Furaida as the researcher’s co-author gave her assistance to finish the research.

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REFERENCES

[1] B. M. Rauhaus, D. Sibila, and A. F. Johnson, “Addressing the Increase of Domestic Violence and Abuse during the COVID-19 Pandemic: A Need for Empathy, Care, and Social Equity in Collaborative Planning and Responses,” Am. Rev. Public Adm., vol. 50, pp. 668–674, 2020, doi: 10.1177/0275074020942079.

[2] S. Flaxman et al., “Estimating the number of infections and the impact of non-pharmaceutical interventions on COVID-19 in European countries: technical description update,” no. March, pp. 1–35, 2020. [Online]. Available: http://arxiv.org/abs/2004.11342.

[3] N. John, S. E. Casey, G. Carino, and T. McGovern, “Lessons Never Learned: Crisis and gender-based violence,” Dev. World Bioeth., vol. 20, no. 2, pp. 65–68, 2020, doi: 10.1111/dewb.12261.

[4] H. Lau et al., “The Positive Impact of Lockdown in Wuhan on Containing the COVID-19 Outbreak in China,” J. Travel Med., no. March 17, pp. 1–7, 2020, doi: 10.1093/jtm/taaa037.

[5] D. Muridjana and S. Ramli, “Melayani dengan Berani: Gerak Juang Pengada Layanan dan Perempuan Pembela HAM di Masa Covid-19,” 2020.

[6] “Pandemic Triggers Violence against Women,” 2020. [Online]. Available: https://mediaandindonesia.com/read/detail/319738-pandemi-picu-kekerasan-ke-perempuan.

[7] S. W. Eddyono et al., “When and Why the State Responds to Women’s Demands: Understanding Gender Equality Policy Change in Indonesia,” 2016.

[8] Istitiah, “Gender-based Violence.” 2020.

[9] “Special Report on COVID-19 and Violence Against Women: What the Health Sector/System Can Do?,” 2020. [Online]. Available: https://apps.who.int/iris/bitstream/handle/10665/
331699/WHO-SRH-20.04-eng.pdf?ua=1.

[10] L. A. Jakarta, “Reflection on Kartini’s Day Amidst the Pandemic ‘Women and Increased Vulnerability to Violence during the Covid-19 Pandemic,’” LBH APIK Jakarta, 2020.

[11] S. Emilia and R. Widiadana, “Coronavirus Triggers Gender-Based Violence: Inequality,” *The Jakarta Post*, 2020.

[12] N. Al-Ali, “Covid-19 and feminism in the Global South: Challenges, initiatives and dilemmas,” *Eur. J. Women’s Stud.*, vol. 27, no. 4, pp. 333–347, 2020, doi: 10.1177/1350506820943617.

[13] “Call for Application: Feminist Rapid Response Research (FRRR) on COVID-19 2020-2021,” APWLD (Asia Pacific Forum on Women, Law and Development), 2020. https://apwld.org/call-for-application-feminist-rapid-response-research-frrr-on-covid-19-2020-2021/.

[14] P. Dhanani, “Covid-19 Is a Feminist Issue,” *The Asia Foundation*, 2020.

[15] “Protokol Penanganan Kasus Kekerasan terhadap Perempuan di Masa Pandemi Covid-19,” Jakarta, 2020. [Online]. Available: https://drive.google.com/file/d/1fVq1W0YFDqHvglcYiyXYn7VeReYhnAxI/view.

[16] E. Rosnawati, “Peran Pusat Pelayanan Terpadu Pemberdayaan Perempuan dan Anak (P2TP2A) dalam Mengatasi Kekerasan dalam Rumah Tangga,” *J. KOSMIK Huk.*, vol. 18, no. January, 2018.

[17] “Aisyiah,” Yogyakarta. [Online]. Available: https://www.mampu.or.id/en/partners/aisiyiah-2/.

[18] “PEKKA,” Yogyakarta. [Online]. Available: https://www.mampu.or.id/en/partners/pekkayayasan-pemberdayaan-perempuan-kepala-keluarga-2/.

[19] A. Hamdi, “Tetap Berikan Layanan Penanganan Kasus Secara Langsung di Tengah Pandemi,” 2020.

[20] A. Hamdi, “Tetap Terampil Untuk Bertahan Hidup,” 2020.

[21] R. Annisa, “Akses Keadilan Perempuan Korban di Tengah Pandemi, 2020.”

[22] A. Hamdi, “Perempuan Rentan Tertular Virus, Rentan juga Menjadi Korban Kekerasan di Masa Pandemi Covid-19,” 2020.

[23] S. Murti, *Peran FPKK dalam Perlindungan Korban Kekerasan Terhadap Perempuan dan Anak di Masa Pandemi Covid-19*, 2020.

[24] L. Polischuk and D. L. Fay, “Administrative Response to Consequences of COVID-19 Emergency Responses: Observations and Implications From Gender-Based Violence in Argentina,” *Am. Rev. Public Adm.*, vol. 50, no. 6–7, pp. 675–684, 2020, doi: 10.1177/0275074020942081.