

COVID-19 PANDEMIC EMERGENCY RESPONSE (COPE)

External Report 3 Months On 18 March - 17 June 2020



COVID-19 PANDEMIC EMERGENCY RESPONSE (COPE)

Coronavirus disease (COVID-19) is a respiratory illness caused by a new strain of coronavirus, first discovered in 2019 and has not been previously identified in humans, according to the World Health Organization (WHO). The new virus was identified during an investigation into an out break on December 2019 in the city of Wuhan, the Capital of Hubei Provincein China. On January 30 2020, WHO declared COVID-19 outbreak a Public Emergency of International Concern (PHEIC) due to exportation of cases to several countries.

On March 11, 2020, the WHO declared COVID-19 as a pandemic after increasing number of confirmed cases, with a total of more than 118,000 cases spread across 114 countries including Indonesia.

Three months on, per June 17, 2020, Wahana Visi Indonesia has reached and assisted:

974,218
people

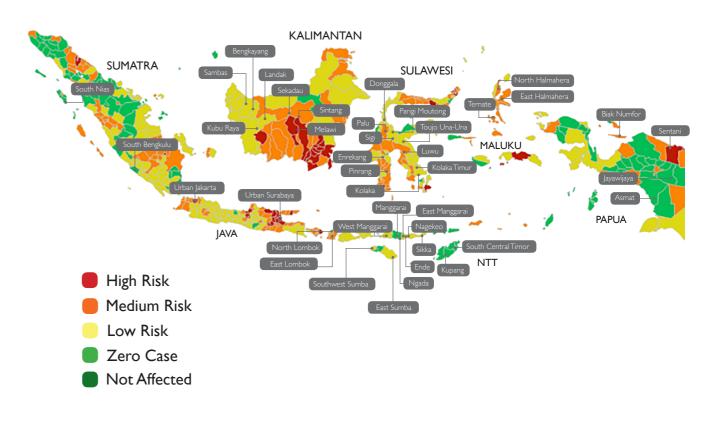
179,774 Children (91,132 boys and 88,642 girls)

402,413 Women 392,031 Men

through following strategic objectives:

- Scaling up preventive measures to limit the spread of diseases
- Supporting health system and workers
- Support for children impacted by COVID-19 through education, child protection, food security and livelihoods
- Collaborate and advocate to ensure vulnerable children are protected

COPE RESPONSE AREAS



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RESPONSE SUMMARY

(as of 17 June 2020)



522,712people received information about the COVID-19 prevention

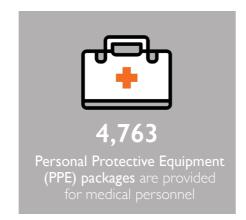








community-level public handwashing stations established or maintained





medical facilities are assisted (including hospital, clinic) with COVID-19 preventative or response support

180





children and their families are supported to continue learning from home





TESTIMONIAL



NURUL,

one of the beneficiaries from Jenggala Village, North Lombok, who received a food package from WVI as part of the COPE response

We are very grateful for this assistance. Previously, we had difficulties to meet our needs regarding to the existence of this outbreak



UUN,

a member of the Sekadau Child Forum, West Kalimantan

We distributed cloth masks to the children and put informative brochures in public spaces such as food stalls and places of worship. The community in my village understand more about how to prevent COVID-19 after reading the brochures that we posted in public places.



AFRIZAL,

a community member who uses handwashing facility in North Cipinang Besar

Thank you WVI for providing hand washing facilities in form of 2 reservoir units for community in RW 07, North Cipinang Besar, Jatinegara. We will take care of hand washing facilities

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Puskesmas Hilisimetano Puskesmas Bawomataluo

South Bengkulu

Puskesmas Pagar Gading Puskesmas Tungkal Puskesmas Air Nipis Puskesmas Talang Randai

Urban lakarta

Puskesmas Kelurahan Cipinang Besar Selatan I Puskesmas Kelurahan Cipinang Besar Selatan 2 Puskesmas Kelurahan Cipinang Besar Utara Puskesmas Kelurahan Rawa Bunga Puskesmas Kelurahan Kampung Melayu Puskesmas Kelurahan Kec. Penjaringan

Urban Surabaya

Puskesmas Tambak Rejo Puskesmas Simolawang Puskesmas Tanah Kali Kedinding Puskesmas Bulak Banteng

Sambas

Puskesmas Sambas Puskesmas Saiingan Puskesmas Sekura Puskesmas Pimpinan Puskesmas Terigas

Puskesmas Kec. Ngabang Puskesmas Kec. Jelimpo

Kubu Raya

Puskesmas Air Putih Puskesmas Ambawang Puskesmas Batu Ampar Puskesmas Kerawang Puskesmas KMB Puskesmas Korpri Puskesmas Kubu RS. Pratama Batu Buil Puskesmas Sokan Puskesmas Tiong Keranjik Puskesmas Ulak Muid RSUD Melawi Puskesmas Tanah Pinoh Barat

Bengkayang

Puskesmas Bengkayang Puskesmas Sungai Betung Puskesmas Seluas Puskesmas Lumar Puskesmas Sanggau Ledo Puskesmas Monterado Puskesmas Samalantan RSUD Bengkayang RS Bethesda Serukam

Puskesmas Nanga Taman Puskesmas Tapang Perodah Puskesmas Selalong Puskesmas SP3 Tran Puskesmas Nanga Belitang Puskesmas Sungai Ayak Puskesmas Balai Sepuak Puskesmas Sebetung Puskesmas Simpang Empat Kayu Lapis Puskesmas Rawak Puskesmas Sekadau

Puskesmas Nanga Mahap

Sintang

Puskesmas Sepauk

Puskesmas Nanga Lebang

Puskesmas Nanga Tempunak Puskesmas Jelimpau Puskesmas Tebelian Puskesmas Serawai Puskesmas Kemangai Puskesmas Tebidah Puskesmas Sungai Durian Puskesmas Tanjung Puri Puskesmas Dara Juanti Puskesmas Dedairu Puskesmas Empa Puskesmas Nanga Mau Puskesmas Kebong

Puskesmas Mensiku

Puskesmas Serangas

Puskesmas Merakai

Puskesmas Senaning

Puskesmas Sekubang

RS. Pratama Serawai

Puskesmas Ella Hilir

Puskesmas Nanga Pinoh

Puskesmas Menukung

Puskesmas Manggala

Puskesmas Kota Baru

RS. Pratama Batu Buil

Puskesmas Ulak Muid

Puskesmas Tiong Keranjik

Puskesmas Tanah Pinoh Barat

Puskesmas Sokan

RSUD Melawi

Puskesmas Tipo

Palu

Puskesmas Pemuar

Puskesmas Manding Pinoh Utara

Melawi

Puskesmas Nanga Ketungau

Puskesmas Marawola Puskesmas Biromaru

East Halmahera

Puskesmas Buli Puskesmas Wayamli Pesisir Puskesmas Wayamli Trans Puskesmas Kota Maba Puskesmas Maba Pura

Ngada

Puskesmas Watukanu Puskesmas Ladia Puskesmas Boba Puskesmas Boawae (Nagekeo) Puskesmas Nangaroro (Nagekeo) Ende Puskesmas Saga Puskesmas Detusoko Puskesmas Peibenga Puskesmas Welamosa

Sikka

Puskesmas Nita, Kec. Nita Puskesmas Habibola, Kec. Dorenh Puskesmas Nanga, Kec. Lela

Puskesmas Kopeta, Kec. Alok RSUDTC Hillers, Maumere

Kupang

Puskesmas Takari Puskesmas Oebunif Puskesmas Camplong RSUD Naibonat

South Central Timor

Puskesmas Niki-Niki Puskesmas Oedino Puskesmas Kuanfau RSUD SoeTTS

Jayapura

RSUD Yowari Puskesmas Sentani Klinik HIV GKI di Sentani

Jayawijaya

RSUD Wamena Puskesmas Wamena Kota Puskesmas Hom-Hom Puskesmas Hubikosi Puskesmas Elekma Puskesmas Wesaput

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STRATEGIC OBJECTIVE





Scaling up preventive measures to limit the spread of diseases

Communities including program beneficiaries and assisted children in ministry areas practice preventive measures to reduce COVID-19 transmission.

Through COPE, WV Indonesia has reached and assisted 974,218 people per June 17, 2020. Around 522,712 people are reached through the promotion of preventive behaviors.

To help the prevention of COVID-19, WV Indonesia disseminated 35,443 information, education and communication (IEC) materials, established 260 community-level public handwashing stations and distributed 9,389 handwashing supplies. Also, around 2,373 caregivers are provided with essential materials. WV Indonesia also cooperated with 435 faith leaders to disseminate preventive messages for COVID-19 prevention.



Supporting health system and workers

WV Indonesia prioritized and provided support to the health workers through the distribution of 4,763 PPE for the medical personnel. The PPE is complying to WHO's standards and consists of surgical masks, goggles, gowns, gloves, head cover, and shoe cover. WV Indonesia also assisted 180 medical facilities including hospital and clinic with COVID-19 preventative or response support.



Support for children impacted by COVID-19 through education, child protection, food security and livelihoods

Through COPE, WV Indonesia support the Ministry of Education to ensure safe school operation (promoting procedures for teachers and students that become unwell, information sharing and targeted age-specific for COVID-19 prevention practices) and support the children, families and teachers to continue education when school are closed (e.g home learning materials, activity packs).

Up to now, 938 children and their families have been supported to continue children's education remotely while 1,272 children are reached with reached sharing and targeted age specific health education.

For child protection, WV Indonesia has coordinated with the local government (including child protection services, social services and health services) and community-based child protection group (PATBM) to facilitate the establishment of local-level community care.

Currently, 1,950 children are reached with Mental Health and Psychosocial Support (MHPSS), 8 PATBM Cadre are engaged and 458 children and their families are reached with registration and care protocols to prevent separation and stigma of child and caregiver during treatment and isolation.

In terms of food security, WV Indonesia will monitor the status of pregnant/lactating women, infants, and elderly. Nutritious food shall be provided for vulnerable families in quarantine, especially for under-two-year-oldchildren. Currently, 290 individuals received food security assistance from WV Indonesia's COPE project.



For livelihood sector, families who are presumptive and on observation for COVID-19 and have to self-quarantine will receive assistance through Cash and Voucher Programming (CVP) to ensure the continuation of their daily lives and support the cost of referral transportation and others. WV Indonesia has disbursed CVP program for 653 households.



Collaborate and advocate to ensure vulnerable children are protected

WVI takes an advocacy approach to the government and the National Task Force through COVID-19 national disaster management cluster meetings, as well as various collaborations with civil society organizations to ensure the implementation of responses to meet the humanitarian standards, human rights and the principles of child's rights. In the regional areas, WVI also carries out various advocacy approaches to the government or regional task force along with community groups.

At the national level, WVI and the Alliance of End Violence against Children (PKTA) are actively involved in drafting and encouraging the adoption of the General Guidelines for the Protection of Child's Handling during COVID-19; the Protocols of Child Data Management; the Parenting Protocols for Children and Parents of People without Symptom (OTG), Patients under Treatment (PDP), Confirmed and Death due to COVID-19; and the Protocols of Release of Children through Assimilation, Integration, Parole, Suspension of Detention and Acquittal.

WVI also contributes in to the Protocol for the Protection of Children with Disabilities in the COVID-19 Pandemic Situation and the Protocol for Handling Cases of Violence against Women and Children with Disabilities in the COVID-19 Pandemic Period. In compiling the guidelines, WVI contributes by providing input based on data and learning. The result is the Guidelines for Preparing Shelter Facilities for Community-based Quarantine and Isolation Related to COVID-19; Guidelines for Implementing Learning from Home during COVID-19 and Guidelines for Organizing New Academic Year Learning during the COVID-19 Pandemic Period. WVI in particular, together with the national facilitators, integrated community-based child protection, compiled an important guideline for Community-Based Integrated Child Protection (PATBM). All of these protocols and guidelines are policies applied nationally throughout Indonesia.

At the regional level, WVI encourages the formation of regional task forces, intergovernmental meetings and civil society organizations, as well as various webinars or media, to encourage the fulfillment of child's rights during COVID-19 crisis.



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Series of Virtual Event, Webinar, and IG Live hosted by Wahana Visi Indonesia during the COVID-19 Pandemic

























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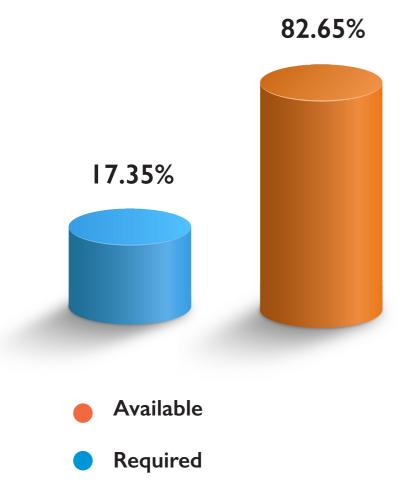






FUNDING

Total Response Program Budget	USD 4,920,510
Available	USD 4,066,829
Required	USD 853,681



OUR PARTNER



























































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