



WHEN: May 2020 to August 2020

WHERE: The communities of Pasar Minggu, Jati Padang, Lebak Bulus and Cilandak Barat in South Jakarta District, Jakarta Province, Indonesia

CHILDFUND LIFE STAGES: 1 (0 - 5 years old), 2 (6-14 years old) & 3 (15-24 years old)

CHILDFUND'S COVID-19 RESPONSE PRIORITY AREA(S): 1-Stop COVID-19 from infecting children and families
2-Ensure that children get the food they need

REACH: Over 8,000 households

SUPPORTED BY: ChildFund Korea

IMPLEMENTED BY: ChildFund Indonesia, Yayasan Panti Nugraha (YPN) and Perkumpulan Marga Sejahtera (PMS)

EVIDENCE LEVEL: Preliminary

GOAL(S): Improve the health protection of children and caregivers and reduce financial stress and illness during the COVID-19 pandemic.

HOW WE STUDIED THE PROGRAM:

- One-group post-test study design.
- Data were collected with key informant interviews (local government and community leaders), focus group discussions and household surveys with cash assistance recipients.

²¹ Ubaidillah, H. & Sukanto, R. (2020). Final report: 2019 novel coronavirus (2019-nCov) CFK integrated response program in Indonesia. Jakarta: Child Fund Indonesia.

HIGHLIGHTS:

- **Intervention strategies** included establishing handwashing stations, delivering health communication materials, and providing emergency cash assistance and health education awareness to prevent COVID-19 transmission.
- **13 handwashing facilities were installed** to enable people to wash their hands properly and 8,323 households were provided with basic health and hygiene items (i.e., soap, hand sanitizer, masks, gloves, etc.).
 - All handwashing stations were officially handed over to community and local government for further maintenance and management to ensure their sustainability.
- **5,500 child-friendly information, education, and communication materials** (flyers, handouts, etc.) and 12 banners were distributed to educate the public on adapting to new health habits during the COVID-19 pandemic.
- **Household hunger was reduced**, with moderate hunger decreasing by 10% (24% to 14%) for a sample of 3,901 households.

LESSONS LEARNED:

- Collaboration with local government to determine the location of each handwashing station helped to maximize their benefit to the communities.
- Distribution of flyers to families receiving cash assistance helped increase health promotion reach.

SDG CONTRIBUTIONS



“The cash assistance is very helpful. I can pay all our electricity bills, buy my children’s favorite food as well as diapers and vitamins for them. I am also eventually able to re-run my small shop,”
— Household member (Mother)