Community-led response to COVID-19 in Java, Indonesia

Summary
The coronavirus (COVID-19) pandemic is affecting people in many different contexts. While the right to life with dignity is universal, each response to the pandemic must be contextualised to apply humanitarian standards appropriately for that environment. This case study offers examples of good practice.

Community-led responses and community contributions are key in responding to the COVID-19 pandemic. Such responses harness local capacity when outside support is unavailable. They ensure that responses are inclusive, reinforce the dignity of the people and use the skills and capacities of community members. This also meets the Core Humanitarian Standard, which applies to every response.

Key question
How can we ensure COVID-19 response programmes build on local capacities and work towards improving the resilience of communities and people affected by crisis?

Humanitarian standards
Humanitarian standards emphasise the need to build on local capacities. This is particularly important during a pandemic where social norms may need to be modified to prevent disease transmission. Community beliefs and perceptions can support or hinder a response. An effective response requires clear communication, community engagement and trust, which is better achieved when affected communities lead the response. Core Humanitarian Standard Commitment 3 promotes the development of local leadership and organisations in their capacity as first-responders.

Gumuk Indah, Java, Indonesia
When COVID-19 began to spread across Indonesia, the Javanese village of Gumuk Indah did not wait for assistance from the government or for international NGOs to arrive. Taking matters into their own hands, residents put a response system in place to protect their community. They relied on their own skills and resourcefulness, while supporting the local economy and mitigating risks.

“We live on the island of Java, in an urban area near Yogyakarta,” explains Ary Ananta. Besides being a Gumuk Indah resident and volunteer, Ary is also project and emergency response manager at the local country office of Arbeiter-Samariter-Bund (ASB), a Sphere partner organisation. “My kampung [village] includes 130 households and sits on the slopes of the Merapi volcano. We were hit by an earthquake in 2006 and eruptions in 2010; then, in March this year, we were affected by the COVID-19 pandemic.”

The villagers did not know much about COVID-19, how to protect themselves, or how COVID-19 would affect their lives and livelihoods. Misinformation and misunderstanding created fear, especially among older people, those with disabilities and those without resident status. Traders and residents moved freely in and out of the village, risking the spread of infection.

“Through our community organisation’s WhatsApp group, we shared health and hygiene tips and motivated each other. We started thinking about ways to help the community. We decided to take action.”

In March, community volunteers promptly established a COVID-19 task force to tackle the spreading virus. The task force focused on three main areas: preventing the transmission of the virus through health promotion activities, supporting the local economy and reducing risks within the community.
“We set up a checkpoint at the entrance of the kampung with the help of volunteers,” explains Wisnu Isnawan, head of a neighbourhood association and part of the COVID-19 task force. “We required people to wash their hands before going through the checkpoint, measured the temperature of those entering the village and collected information about temporary visitors.”

Some volunteers were in charge of promoting frequent handwashing or spraying disinfectant in public places. Others helped older people and people with disabilities.

Women and girls were involved in conducting surveys, both online and offline, to gather data and plan further interventions. The community conducted evaluations every nine days, discussing people's needs with community leaders.

To reduce the impact of the pandemic on local businesses, the kampung task force started a ‘community self-help’ movement, collecting donations and distributing food and hygiene kits, while also disseminating health and hygiene information. Between March and June, residents received aid packs four times, with the first delivery taking place six days after the establishment of the task force.

Lessons
What happened in Gumuk Indah is an excellent example of a community-led response that puts the needs of the population at its centre. By focusing on human dignity and community engagement, humanitarian standards provide a helpful framework to guide responses. They also ensure that all members of affected communities are at the core of every decision made (Sphere Protection Principles 1 and 2).

A community-led response is often the most relevant and accepted response, and therefore the fastest and most effective. Using online and offline engagement tools – such as WhatsApp groups and door-to-door visits – allows a direct flow of information, raising awareness, gathering resources, and creating opportunities to collect feedback to improve the response (Core Humanitarian Standard Commitments 1 and 4).

Gumuk Indah was able to mobilise its residents rapidly because their disaster management structures, systems and leadership had been established during the volcano-related responses. Such local capacities are vital when travel restrictions during pandemics hinder external support (Core Humanitarian Standard Commitment 3).

Resources
- Learn more about the Gumuk Indah response and watch the webinar recording
- Read the Sphere guidance on the COVID-19 response
- Sphere Handbook: Core Humanitarian Standard chapter
- Sphere Handbook water, sanitation and hygiene chapter: introduction to community engagement (section on hygiene promotion)
- Humanitarian Inclusion Standards for older people and people with disabilities
- Guidance on disaster risk reduction and preparedness (Sphere thematic sheet)

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