Women and Children’s Victims of Violence Case Management During COVID-19 Pandemic

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Abstract
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Keywords
COVID-19, case study, violence, women and children, digital technology, case management

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Many studies have been conducted to prove the threat of violence against children and women during COVID-19. Unlike other studies, this study focuses more on government services in receiving complaints from victims of violence experienced by women and children during the COVID-19 pandemic. Using case studies as a qualitative method, documentary studies and in-depth interviews have been conducted on 13 informants from various parties in Bandung Regency, West Java, Indonesia. The results showed that the use of digital technology during the pandemic sometimes hampered the follow-up process for complaints of violence by victims due to a lack of equipment and the inability of officers or victims to use it. In addition, there is still a stereotype that the victim is the "guilty party" or "the party who bears the shame" of making the family cover up or refrain from pressing charges. There needs to be collaboration and coordination among the processing and accompanying officers who handle case management of violence against women and children. These cases are multi-dimensional; therefore, they require multiple approaches from many parties.

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Introduction

The COVID-19 outbreak caused a disaster that was never foreseen before. The number of people exposed to COVID-19 in the world at the time increased daily. The high wave of layoffs, people losing their livelihoods, and the implementation of full lockdown policies caused the burden of life to increase. Many countries are seeing increased domestic violence, especially against women and children. It was found that there were an additional 31 million victims of violence during the pandemic in various parts of the world due to the health crisis that impacted finances and injustice to women and children. In addition, there is difficulty in seeking medical help and legal assistance (Bellizzi et al., 2020; Mital & Singh, 2020; UNFPA, 2020). The situation in Kenya shows that the increasing number of victims of violence during the pandemic has reached the age of younger victims, carried out by people in the environment they are familiar with (Stevens et al., 2021). Rising gender-based violence also occurred in India, and Bologna, Italy, due to outbreaks and natural disasters (Godbole & Mehendale, 2005; Rose, 2018).

The increasing number of victims of violence against women and children often called the “quarantine paradox,” caused unrest and prompted the researchers to propose several recommendations. Among them are the creation of numerous and more adequate health shelters, the government's preparedness for faster services or handling of victims, and the inadequacy of accompanying workers and law enforcement in handling cases of gender-based violence. The longer quarantine duration exacerbates this situation due to the pandemic in
direct proportion to the increase in symptoms of gender-based violence in the household (Brooks et al., 2020; Lee et al., 2018; Mittal & Singh, 2021; World Bank, 2019).

The same situation also occurs in Indonesia. A study carried out by Kisid (2021) in NTB Province found an increase of 26.05% in gender-based violence cases in 2020 compared to the previous year, 61.18% of which were in the form of physical violence against women, and 40.1% were in the form of sexual violence against children. Several other studies have concluded that gender-based violence increases due to large-scale social restrictions (PSBB) during pandemic conditions (Ahsan, 2020; Purnamasari, 2020; Radhitya et al., 2020). Similar findings were found by Dewi (2020), who stated that in crises such as during the COVID-19 pandemic, the most vulnerable and at-risk groups are marginalized people, namely women, and children. Issues of discrimination, racism, exploitation, and gender-biased laws are still common against them.

Symphony data from the Ministry of Women’s Empowerment and Children’s Protection of the Republic of Indonesia shows that the number of violence recorded in 2020 had decreased by 0.14%, but in 2021 it rose sharply by around 22.97%. Meanwhile, data of victims of violence by sex shows that the number of male victims decreased by 11.20%, but in 2021 it increased by 22.26%. The number of female victims in 2019-2020 increased by 2%, in 2021 it increased by 23.77%.

**Figure 1**

*Data on Cases of Violence Against Women and Children 2019 – 2021*

![Data Kasus Kemen PPPA](image)

**Notes.** Symphony Data of the Ministry of Women's Empowerment and Child Protection (2019)

The National Commission on Violence against Women noted in its 2019 annual report, entitled "Victims Speak Out, Data Speaks, ratify the (Rancangan Undang-Undang) – Proposed Law (RUU) on the Elimination of Sexual Violence" (Women, K., 2019) involving 209 service delivery partner institutions throughout Indonesia. This annual record of Komnas Perempuan (Ministry of Women’s Empowerment and Child Protection, 2019) shows that the violence against women continues to increase annually, especially during the COVID-19 Pandemic, with increasingly complex causal factors and increasingly diverse forms of violence.

Indrawati (2018) obtained the findings of her research, which focused on how to respond to and find solutions and efforts to deal with violence against women, namely the need for effective and efficient services, using a multidisciplinary cooperation approach following
the Indonesian government policy through the Minister of Women's Empowerment and Child Protection (KPPA) on Minimum Service Standards for Violence Against Women and Children. The KPPPA Regulation has the mandate to carry out five types of essential services for victims: complaint services, health services, social rehabilitation services, enforcement and legal assistance services, as well as social repatriation and reintegration services.

Utami (2016) and Indrawati (2018) recommend a comprehensive service for handling women and children’s victims of violence. Kerry (2021) on gender-based violence during the COVID-19 pandemic in Australia shows that the pandemic impacts the complexity of client needs and the challenges of helping the victims and survivors. In the context of development, Indonesia also adheres to and carries the “Sustainable Development Goals” (SDGs), specifically the fifth point, "achieving gender equality and empowering all women and girls everywhere.” Thus, this study was conducted to see how development in Indonesia, especially services for victims of gender-based violence by the government, has been carried out and improved during COVID-19 Pandemic.

Women, Children, and Violence

In many countries, patriarchal culture still exists, meaning that women are subordinated, powerless, dependent, and discriminated against. Indonesia is no exception; several cases show this evidence, such as what Mn experienced at the time of COVID-19, as quoted below:

“Mn” is a woman who experienced violence in her home where women are obliged to do housework daily, while men could be free and not burdened with the work. This privilege, according to Mn, made her younger brother often behave arbitrarily. Moreover, amid a pandemic with all the restrictions that come with it, domestic tasks such as cooking, washing, and cleaning the house are charged to men and other women in their families while men are exempt from the same obligations. The layered burden at home, plus limited social space during the pandemic, made Mn feel distressed. She felt almost unable to be allowed to take care of her mental health. However, when she challenged the discrimination she experienced, Mn received physical violence from her younger Brother. Mn was pushed to the ground. When complaining about the violence experienced by her mother, Her mother said, "Boys make no mistakes." Mn's mother has also undergone the treatment of being pushed to the ground by her brother. (Amindoni, 2020) downloaded from: https://www.bbc.com/indonesia/ KDRT: Women increasingly “trapped” amid COVID-19 social distancing, “I don't want to give up without a fight.” BBC News Indonesia May 19, 2020

What Mn experienced is in line with Simone de Beauvoir's question at the beginning of her book, What is a Woman? The concept that the female is alienated and defined by her existence by the male still occurs. It proves that de Beauvoir's idea of the female as “the other,” alienated from herself and her body, still occurs. Instead of breaking down the concept of “the second sex,” as advocated by de Beauvoir (1949), in this digital era, it turns out that there are still many women who are marginalized and do not have access to education and a decent life. As a result, the woman cannot make her own decisions. She seems powerless to break the subordination experienced. Women do not have freedom. They cannot live freely. They are the “second sex” (Evans et al., 2014).
Another case that describes a violence and injustice against a girl, namely "Y," a female student at a senior high school in Bandung Regency:

"Y" got acquainted and established a relationship with a man through social media, Facebook. This incident led to Y trapped into the seduction of a man whom she just knew, had an unwanted pregnancy and the death of her innocent baby. At the same time, Y was expelled from school and almost reported and prosecuted by local residents as the murderer of her biological child. The busyness of her parents, who went to work at dawn and returned home at night, caused Y’s pregnancy to go unnoticed by her parents. One day the surrounding residents were shocked by the discovery of a baby boy who was in terrible condition in the back garden of her house. Y had given birth in the bathroom in a panic. She then threw the newborn baby into the garden through the bathroom window. After surviving for a week in the hospital, Y’s baby died due to submerged lungs and amniotic fluid poisoning, while Y herself was bleeding heavily for almost a week, leading to the removal of the uterus because after giving birth the placenta was left behind and rotting. The Bandung Regency Government quickly stopped this news from spreading in the media and suppressed the residents' anger so that Y would not be reported as a murderer. However Y’s school still expelled her by making her signed an affidavit which was acknowledged by her parents, stating that Y resigned and would no longer attend school. (Aretha Utama Foundation, 2019)

The "Y" Case illustrates society’s poor understanding on the rights of victims of sexual violence. Victims are often positioned as a guilty party which leads to unsupportive and negative attitude from the society, including social exclusion of victims of sexual violence that increase their burden. It also indicates lack of institutional support for the victims and poor cross-sectoral coordination of the Bandung Regency Government. The latter intervened in dealing with the media, but it was insufficient to help the victims.

This research was conducted and equipped with primary and secondary data based on the author's research and her experience as a counselor in an institution providing services for women victims of gender-based violence since 2004–present.

Methods

The method used in this study is a qualitative method namely case study. A case study is an in-depth investigation of one individual or group over a particular event and period. The researchers explore a certain phenomenon at a time and activity and collect information in detail and in-depth data using various data collection procedures over a certain period. The challenges are also many, such as the findings cannot be generalized, the identity of the informant must be protected “anonymity” so that it needs permission from the person concerned if his identity is to be disclosed. It also requires a long time period of research or “time-consuming” (Starman, 2013). Another researcher also argue that case study research is a challenging endeavor that hinges upon the researcher’s skills and expertise (Yin, 2014). It is also a research method that describes a comprehensive explanation of aspects of an individual, a group, or an organization so that in the study, the researcher must process as much data as possible regarding the subject under investigation (Mulyana, 2013).

Case studies are an in-depth investigation of one particular individual, group, time period, or event. They encompass a range of qualitative and quantitative research tools to investigate the underlying principles of an occurrence within a real-life context. The most
significant benefit of case studies is that they enable a holistic review. Unlike standalone research techniques that give more of a snapshot, for example, surveys, a case study offers the opportunity for a researcher to use a range of tools on one subject. This gives time and space to build a detailed understanding of the topic, establishing a sound platform from which to explore the factors influencing the case study in greater detail (Yin, 2014).

Case study was one of the research methods used in the qualitative field. The case study method is often used in the research field of psychology, history, education, and medicine. Case study method has been found in many areas of social science and is particularly valuable in practice-oriented fields such as management, public administration, and social work. That is why this case study method was chosen because it is suitable with the orientation of this study which is public administration using a case management (Ozan Leymun et al., 2017; Starman, 2013).

Bandung Regency was chosen based on the location factor that can be accessible by the researcher, the access of beneficiaries (victims and their families) to service provider institutions is quite far and very limited, and the distribution of data on cases of violence over the past two years (2020-2021) has increased quite high. In 2020, the number of violence cases handled by the Regional Technical Implementation Unit for the Protection of Women and Children (UPTD PPA) of Bandung Regency amounted to 65 cases; in 2021, it rose to 104 cases (UPTD PPA Bandung Regency). This study adopt Patton’s purposeful sampling strategies to the process of this participatory research (Suri, 2011). The sample is taken from the experience of one of the authors who works as a companion in a foundation that handles victims of violence against women and children, but can still maintain a distance and be neutral with the cases handled.

Figure 2
Cases of Violence Per District/City in 2017–2020


In addition to the location factor that researchers can access, according to the permit granted by The Women and Children Service Unit (UPPA) of Bandung city Police, and it has been agreed that the result of the interviews will not state their full identity just initials. In addition, all the data is stored on the hard disk using a password. The data shows that distribution of violence cases in Bandung Regency over the past two years (2020-2021) has
increased numerically; namely, in 2020, the number of cases of violence handled by the Technical Implementation Unit of the Bandung Regency Women and Children Protection Area (UPTD PPA) amounted to 65 cases. In 2021 it rose to 104 cases (UPTD PPA Bandung Regency). As for the West Java provincial level, based on data from the West Java Provincial Symphony in 2017-2020, Bandung Regency is ranked fourth after Sukabumi Regency, Bekasi City, and Bandung City. The data is shown in Figure 2.

The location of Women and Children's Service Unit (UPPA), an institution that handles the problem of violence against women and children, which only exists within the Resort Police (POLRES) level located in the capital of Bandung Regency, including the secretariat of the Regional Technical Implementation Unit for the Protection of Women and Children (UPTD PPA). This fact is certainly a challenge for people who are in remote locations from the capital city to access services, especially during the COVID-19 Pandemic.

The flow of data collection and processing in the five research stages of this study is shown in Figure 3.

**Figure 3**
*Research Stages*

- **Stage 1**: Make a classification / category of respondents (stakeholders) and determine the number of respondents
- **Stage 2**: Create a list of questions for each respondent according to their category
- **Stage 3**: Conduct document studies and back-and-forth interviews on all respondents (stakeholders)
- **Stage 4**: Validate the answers of all respondents based on their categories (triangle validation)
- **Stage 5**: Conducting analysis based on the theory used, interpreting, and making conclusions.

**Notes.** Field research, 2022

To obtain in-depth data, the authors have compiled seven questions as guidelines for conducting interviews with 13 respondents relevant to research on case management during COVID-19. In selecting respondents, we ensure that those who will be used as respondents have knowledge and experience of how to apply the case management approach in handling women and children victims of sexual violence and violence in Bandung Regency, West Java Province, during the COVID-19 pandemic, by making the following criteria for respondents:

1. The Women and Children Protection Unit (UPPA) of the Bandung District Police
2. District-level government service delivery agencies are represented by the Regional Technical Implementation Unit for the Protection of Women and Children.
3. Community service providers are represented by the Aretha Utama Foundation, the Sapa Institute Foundation, and the Indung Bandung Foundation.

4. Victims and their families

After making the criteria for respondents to be interviewed, we started recruiting by contacting the potential respondents and asking for their willingness to participate. We identified two investigators from the District Police in Bandung, three case assistants from community service provider institutions, three case assistants from government service provider institutions, one head of the community service provider institution, two victims, and two victims’ families. During the outreach process, we explained the purpose of the research, and all those we contacted expressed their willingness and agreed to participate in this research.

After obtaining the consent of the 13 respondents we contacted, we then began the research process, which was carried out for a year (2021). The data collection and processing steps were carried out while maintaining the confidentiality of the respondents in the following ways: before the interview was carried out, all respondents signed informed consent; we conducted interviews for data fulfillment research; interview results and respondent documents are stored in confidential files; and the data shown in this study are only initials.

**Semi-Structured Interviews**

Given our limited knowledge of how to implement case management in the COVID-19 era, we chose to conduct semi-structured interviews to capture the descriptions and understandings of our study participants. With the same way as Dix et al. (2020) did we developed open-ended questions to encourage discussion within our respondents’ descriptions and understandings and provide relevant context to practitioners, police officers, government officials, victims, and their families.

While continuing to implement health protocols in the midst of the COVID-19 outbreak, interviews were conducted by researchers online and offline at private locations agreed upon by researchers and respondents. The interviews lasted between 30 and 60 minutes, depending on the depth of the respondent's experience working with victims of violence. To capture responses and answers from respondents, all interviews were recorded electronically. After drawing conclusions from each interview, the researcher conducting the interviews transcribed the recordings.

The interview began with questions about the nature of their work treating victims of violence to ensure that respondents understand the focus of the research topic. Next, we ask respondents to explain their understanding of the application of case management to handling victims of violence during the COVID-19 pandemic. We then ask respondents to share their experiences in supporting the implementation of case management during the COVID-19 period for handling women and children victims of violence that they serve or handle.

We asked follow-up questions during the interview to ensure clarity and consistency of responses. Specifically, respondents were asked to clarify their understanding of the use of case management during the COVID-19 pandemic in providing services for women and children victims of violence related to developing multi-sectoral coordination and collaboration among stakeholders, increasing the capacity of service delivery agency staff, and increasing community participation.

Seven questions have been drawn up during interviews with those 13 informants from various stakeholders, which come from assistance officers, investigating experts, lawyers, psychologists, counselors, and victims and their families. The following are questions asked to all stakeholders:
1. What institutions have been cooperating with the Police and other government services in serving complaints (from victims) of gender-based violence, especially against women and children?

2. How has the process and flow of case services against women and children by local government service agencies been implemented?

3. How long do local government agencies usually carry out the case resolution process?

4. How to implement service flows and coordination-cooperation mechanisms between partner institutions, such as providers of medical, psychological, psychosocial, and safe house professionals, in the provision of services by local governments during the COVID-19 pandemic?

5. How is the adaptability of service personnel in terms of knowledge, skills, and management of the organization, using digital devices when service changes are made during the COVID-19 pandemic? This question is addressed to the officers, the victims, and the accompanying families.

6. What is the victim's condition before and after being given services by the service institution? This question is addressed to the officers, the victims, and the accompanying families.

7. How are government service agencies working to improve the quality of services for victims of gender-based violence, especially during the COVID-19 pandemic?

Analysis of the results of research on how the process of providing services carried out by the government and service delivery agencies for complaints of victims of gender-based violence has used the “case management” framework, as stated and explained in Figure 4.

Figure 4
Stages of Case Management Implementation

![Figure 4: Stages of Case Management Implementation](image)


The case management process listed in Figure 4 explains the six stages of the case handling process, starting from the case identification stages to termination, as follows:
Case Identification

Identification of the case as a first step and the entrance in the form of an introduction between the companion and the beneficiary. In this process, there is no element of coercion, pressure, or persuasion for the client. The case management team or counselor from the Service Pengan Service Institute makes a joint agreement in writing or contracts with clients. At this stage of the process, the community reported cases of violence that occurred and that it experienced to the UPPA Polres Bandung and the Service Profit Institute. Service institutions that receive reports both directly and indirectly will identify cases professionally and proportionally, using the principle of presumption of innocence, to then group and categorize domestic violence cases, trafficking cases, and cases of violence against children. And it is fired whether it will be followed up on or referred to other institutions in accordance with the needs of victims or clients.

Assessment

In its implementation, assessment, as a continued stage or second process in the theory of case management, seeks to gather information about various aspects of the client's life, which include problems, the potential or strength of the client, and sources available around the client. At the assessment stage, a referral has been made that needs to be developed in the form of multidisciplinary cooperation with other professionals needed by clients, such as doctors, psychologists, therapists, nurses, lawyers, etc. The assessment process as a continuation of the case identification will determine the direction of assistance and referral institutions/partners that will be contacted and invited to collaborate when the results of the assessment show the special needs of victims and their families that are not owned by the Bandung Police and Service Printing Institution that accompanied the reporting of the case. According to the State of the Republic of Indonesia No. 10 of 2007, based on Article 3, the PPA unit is tasked with providing services and protection for women and children who are victims of violence or legal crimes.

An Intervention Plan

The intervention plan is a follow-up to the assessment stage. A good intervention plan for handling cases is arranged collaboratively by the case management team, which consists of several professions that have been involved in the assessment stage.

The intervention plan becomes a part that requires communication and collaboration skills between service provincial assistants because, in this intervention plan, each service provincial institution will complement each other's shortcomings and limitations of the service owned by its institution.

Intervention

Intervention is the implementation of the preparation of an intervention plan in which the UPPA officer or service provider agency will execute the things that have been planned, for example, fulfillment of basic services that have been informed about and make referrals to other service provider institutions if the Bandung Police PPA Unit or service provider agency does not have the professional staff needed by victims and their families (medical staff, psychologists, psychiatrists, paralegals, social workers, advocates, and safe houses). In the intervention process, the officer or assistant implements the intervention plan that has been
prepared from the results of an analysis of the process and stages of handling previous cases so that the assistance provided is more structured and fulfillment of client needs is the main target.

**Monitoring and Evaluation**

Monitoring and evaluation are efforts to determine the success of the implementation of the intervention. For this reason, case assistants need to ensure that the services provided to clients can be accounted for and that client needs are met. In its implementation, in addition to the family and clients, it is also necessary to involve parties or institutions related to intervention. A good monitoring and evaluation process can be carried out collaboratively between professionals who are members of the case management team.

**Termination**

Termination is the process of terminating relations between caseworkers or case management teams and clients and other parties involved in the service they provide.

Termination is carried out as a closing of the entire series of implementation of the management of termination cases into a joint agreement between the service provider and the recipient of the service. At the police level, termination can occur in two ways, including through the mediation channel and when the police have completed the process of delegation of cases to the prosecutor's office in accordance with applicable rules.

The transcript of interviews with 13 then categorized in several findings and explained as follow.

**Discussion**

**Public Perceptions are that the Process of Dealing with Victims of Violence Against Women and Children Moves Quickly only When Wealthy People are Involved**

Each respondent has their own operational definition of service delivery and handling of victims of violence, which is broad and varied. Several respondents defined service delivery and handling of victims of violence using experience-based indicators and stories from other people's experiences, such as those obtained from the father and mother of one of the victims of sexual violence who reported their case to the police. They said:

> When we reported cases of sexual violence that our children experienced to the police, we almost gave up and thought that law enforcement would only proceed quickly and side with the victims if the victims came from the upper middle class.

The respondent was a father whose daughter was a victim of sexual abuse by her teacher. Ay's father dared to report the cases experienced by his son based on the results of the deliberations of all the victims' families and the support of local community leaders. They were very confident that the cases experienced by their children would be processed quickly, considering the victims included more than one child. For Ay's father, having evidence and bringing children who were victims of sexual abuse by more than one person to the police station would be strong evidence for the police to move quickly to arrest the perpetrators, as well as what Cs’s mother (Cs, a victim of rape by her teacher) felt and wanted. Cs’s Mom is very sure that with the information given directly by her son, the police should be able to move quickly to catch the perpetrators.
Opinions as well as clarifications from Hd, a police investigator, regarding the handling of women and children victims of sexual violence before and during the COVID-19 pandemic show that actually nothing has changed, even the notion that the police were very slow and did not side with the victims, which often happened especially during the COVID-19 period, which requires the implementation of strict health protocols for all levels of the police and civil society who enter the police office area, as expressed by Hd during the interview:

During the COVID-19 pandemic, in the midst of uncertainty over the rules and conditions as well as the ever-worrying epidemic situation, we as servants of the state cannot refuse when there are many reports of cases of violence that must be followed up immediately. When we have to obey and comply with the profession and government rules and then apply them strictly to the complainant and the reported, the result is that we are thought to not care and are seen as not taking sides and defending the victims and their families. We are considered law enforcers who do not want to enforce the law. We had to accept a lot of prejudice and became the target of the anger of the victims' families, who thought we were making it difficult and slowing down the process of handling the cases they reported.

Dn, a case manager who works at a community service provider institution, expressed the same thing and supported what was revealed by Hd, that the handling of women and children victims of violence during the COVID-19 pandemic caused services to be hampered and tended to be slow. The results of an interview with Dn revealed that:

The implementation of the PSBB (lockdown), which resulted in limited community movement, plus concerns about our health as companions who have families at home (children, wives, parents). In the end, it has an impact on the process of handling and assisting victims and their families, which is not optimal. So that it has the potential to make clients and their families feel they are not getting service. This also opens up opportunities for the presence of provocateurs who make the atmosphere in the field even less conducive.

Dn's story is supported by Dd and Ft, a social worker and psychologist who work for government service providers, who say that the handling of women and children victims of violence during the COVID-19 pandemic has been slower because there are many risk factors that must be considered by assistants when they have to accompany victims and their families. offline. The story of Dn and Ft was confirmed by Hn, a psychology assistant at a community service provider, who revealed that:

Providing psychological services will have far more optimal results if done offline, but since COVID-19, we have agreed to prefer providing online services. If the client and the victim need psychological consultation or counseling offline, then we must ensure safety and implement strict health protocols for the client and their family. This usually takes time and makes the client and family wait, so they think we don't want to handle the case.

Our respondents openly shared their experience of the mentoring process as well as negative labels that they received individually or institutionally as a consequence of delays in providing services from the implementation of health protocols and restrictions on people's space for movement as part of the government's efforts to prevent the spread of COVID-19. A
chairman of a community service provider said that education of the public about the process and flow of service delivery and the handling of women and children victims of violence must continue to be provided. The public must begin to know the stages of resolving criminal cases, starting from the initial reporting until the case is declared complete, which requires a long time and process, especially during the COVID-19 era. This needs to be done so that we social activists are not always blamed and receive negative prejudice when a case or report cannot be processed according to the wishes of the victim and his family.

**Development of Multi-Sectoral Coordination and Collaboration between Stakeholders**

The second finding is in line with the core of case management, which emphasizes collaboration and coordination because violence against women is multidimensional and a multi-dimensional approach and participation from stakeholders are needed. The results of the interviews show that to overcome violence against women and children, it is very important to develop multi-sectoral coordination and collaboration between stakeholders. This also simultaneously answers complaints from the community, especially from victims and their families, who feel that the handling of women and children who are victims of violence is very convoluted and slow. Investigators and assistants from service provider institutions provide experience and examples of handling cases that require multi-sectoral coordination and collaboration between stakeholders (HD investigator, District Police). Bandung says:

Our personnel consist of investigators who are tasked with receiving, conducting BAPs, and conducting further case titles whether or not a report is processed up to the prosecutor's office. To fulfill evidence in court, if other evidence is needed from professional staff, such as post mortem et repertum or post mortem et repertum psychiatry, then we will coordinate and collaborate with multi-sectors to refer the cases we handle to hospitals and professional psychologists and psychiatrists.

The same story was told by Dn and Sg, who are practitioners who have been accompanying women and children who are victims of violence in their community service provider institutions. They said that:

The different needs of each victim require that our agency be able to build coordination and collaboration with partner institutions that have professional services (medical and psychological) and safe houses. We do this in an effort to maximize service delivery to victims.

Another story told by Ds, Dd, and Ft practitioners as well as experts working in government service delivery agencies revealed that:

The Regional Technical Implementation Unit for the Protection of Women and Children, as one of the service delivery agencies formed by the local government, can be said to be fulfilled in terms of personnel, experts, and professionals, but in fact, the number of cases of women and children victims of violence who complain has not been comparable to the availability of personnel providing services, so that multi-sectoral coordination and collaboration are still needed in the process of providing maximum services for victims and their families.
The stories revealed by investigators and practitioners were confirmed by the experiences of the victims (Ay and Cs) and their parents (Ay's father and Cs’s mother), which revealed that:

After doing BAP at the police station, to make a post mortem et repertum, we were escorted by investigators to a hospital that is located far from the police station. As for psychological counseling services, we are waiting for the results of coordination between the police and partner institutions that provide psychological services.

From the results of interviews with respondents, we can see that each case has different needs, and currently there is no service provider agency that has complete and independent capabilities to provide comprehensive services to victims. Service providers, both the government and the community, and even the police currently have limitations in fulfilling services according to the needs of victims who report their cases to these institutions. Thus, building partnerships, collaborating, and coordinating multi-sectors is important and must be carried out by all service delivery agencies so that they are able to provide comprehensive services to victims and their families.

Implementation of health protocols and tightened restrictions on people's movement space have hampered the process of coordination and collaboration among service delivery agencies, as confirmed by the results of interviews with Dd and Dn from government and community service delivery agencies, which stated that:

During COVID-19, almost all service providers chose to provide online services for handling victims. If victims and their families wanted to have an offline meeting, they had to wait until all of them received the results of a medical examination and PCR test with negative results.

The results of interviews with Dn and Dd are supported by a statement from Hn, a psychologist from a community service agency, who revealed that:

Since the COVID-19 outbreak, our institution has implemented online services to provide psychological and consulting services to victims. We will hold an online meeting if both parties have mutually agreed and the results of the health examination have stated that all are healthy and negative for COVID-19. While waiting for the offline meeting, we open a space for victims and their families to conduct online consultations.

When we confirmed this with Cs’s mother, the stories told by respondents from the police and assistants from service providers, both government and community, showed that there were similarities that while waiting for the next process and offline meetings with psychologists, the police, companions from government service agencies, and community service providers who will provide offline counseling, continue to contact, coordinate, and communicate with us to monitor our child's mental development.

The results of interviews with respondents obtained an illustration that building coordination and collaboration in handling women and children victims of violence during the COVID-19 pandemic could still run well and optimally if all parties were technologically literate and had communication tools, but would be hampered when victims and their families did not have communication tools or were hampered due to difficulty accessing the internet. This was confirmed by Ay's father's story, who revealed:
After the reporting process to the police was completed, it was followed by an examination and making a postmortem et repertum at the hospital. We are waiting for further news to obtain psychological consultation services. Our house is located in the mountains, which means that online services cannot be carried out, while information and coordination with the police and partner institutions are hampered and delayed due to difficulties with internet access.

The COVID-19 pandemic and the implementation of the PSBB protocols (large-scale social restriction) in all regions limited the assistance movement. The limitation on offline service hours imposed by almost all service delivery agencies has had a negative effect on victims and their families, as well as an impact on their dissatisfaction because they feel that their cases have been ignored. There are many requirements that must be met as a result of implementing strict health and PSBB protocols. Limited technological facilities and infrastructure as well as the availability of an internet connection make the provision of information from the reporter to the recipient of the report or vice versa from the recipient of the report to the reporter frequently cut off, thus opening up space for unscrupulous provocateurs to cloud the atmosphere.

Building the Capacity of Service Delivery Agency Staff

There has been a significant increase in cases of violence against women and children during the COVID-19 pandemic. This is evidenced by the consistent increase in reporting coming to service provider institutions, both online and offline, both directly and indirectly. During the COVID-19 pandemic, officers and associates were faced with a process of change and a shift from conventional services to online services or using technology, which should have an impact on faster and better service quality. However, what happened was not necessarily as expected.

Bandung Regency case study shows a different reality. There are service officers or assistants who do not have sufficient skills, especially when using digital information technology and experiencing internet network problems, so that information delivery failures or information that has not been updated can occur, which can lead to inaccuracies or erroneous initial analysis. Therefore, the implementation of service case management for women and children victims of violence during the COVID-19 pandemic requires professional and field staff who are able to adapt to changes in services from conventional to online, which of course require special skills, thereby increasing the capacity of service delivery agency staff. These are important issues that must be addressed in order to provide maximum professional services in the midst of the COVID-19 pandemic.

This is the third finding of the analysis of interviews. The researcher obtained an overview of how respondents experienced new challenges that required special skills and fast and appropriate adaptations in responding to and providing services to women and children who were victims of violence. Hn, a psychologist who works for a community service provider, revealed that:

When case identification is carried out online, additional skills are needed, especially for field assistants who usually conduct offline meetings with their clients. During COVID-19, efforts were made and participants were required to be literate in technology and have additional abilities on how to carry out maximum identification and analysis without being able to see the client's body gestures.
The results of the interview with Hn were supported by stories and facts disclosed by lawyer DS and DD social workers at government service providers, which revealed that the process of assisting and handling women and children victims of violence during the COVID-19 pandemic demands that it be done online, and we feel it is not effective because we cannot observe the client’s body gestures as a whole, not to mention if during the online assistance process suddenly the internet signal is cut off, causing assistance to stop and have to be rescheduled. Not much different from the experience shared by Hn, DS, and DD, the same complaint was expressed by SG and DN that:

COVID-19 requires us to be able and have new skills in providing online services to women and children victims of violence, but on the other hand, we are faced with situations and conditions where people who are victims of violence in fact live in remote places, where it is difficult to get access to internet signals, and even still, some do not have means of communication.

DN revealed that for several cases, online services could not be provided due to the isolated location factor, so that the internet network was difficult or the victim and his family did not have temporary communication facilities when using an intermediary, and the information conveyed was incomplete and received by the victim and his family was wrong, so that it became new problems for the family of the victims, as revealed:

The position of the victim and his family in a place that was difficult to reach made us take the initiative to communicate initial assistance with one of the families who reported the case and had access to online communication with us, but when we conducted a home visit, it turned out that some information reached the victim and his family differently, so that it makes us confused and have to explain again from the beginning.

The results of interviews with practitioners as well as respondents and the thoughts put forward by Amartya Sen, who stated that development is a process of expanding human freedom, therefore, development demands the elimination of the main sources of non-freedom: poverty and tyranny. The concept of development in general is driven by the growing content of human interests and by taking advantage of new technological and scientific advances (Coccia, 2019; Coccia & Wang, 2016). What is called "independence" as one of the indicators of successful development by Amartya Sen cannot be realized and felt by the community, especially in suburban areas such as Bandung Regency. Services from the government are considered uneven, especially in suburban areas such as Bandung Regency.

We can see other facts that are not evenly distributed and that the results of development cannot be enjoyed from the results of an interview with SG, who revealed that during COVID-19, the most difficult thing for victims to access was safe house services for victims of violence:

During COVID-19, we, as community service providers, had difficulty accessing safe house services for victims of violence that were being handled because currently there is only one safe house service owned by the government and the rules are very strict.

The experience shared by Ay's father regarding online services during COVID-19 revealed that:
Consultations that are carried out online are more difficult to do and require additional costs because we have to have an internet quota. In addition, for those of us whose homes are in the mountains, internet signal is the biggest obstacle if we have to do online consultations. When online consultations are interrupted, sometimes we are not able to catch the messages conveyed by assistants, psychologists, and the police who contact us.

By looking at the overall results of interviews with respondents regarding the importance of increasing the capacity of service provider agency staff when providing assistance to women and children during the COVID-19 period, we can see that COVID-19 has influenced changes and shifts from conventional services to online services. This has had a major impact on achieving the implementation of management for handling women and children during the COVID-19 era. Not everyone can make changes quickly enough to be able to adapt to developments in science and technology, especially if the technology facilities themselves cannot be owned equally in society.

**Increasing Community Participation**

Handling victims of violence during the COVID-19 pandemic requires adaptability from all related parties, starting with the victims, their families, and the entire team involved in providing services, both professional staff (doctors, psychologists, advocates, and social workers) and field assistants (counselors), as well as the community around the victim's residence. Especially in terms of implementing online services, the challenges are quite large, and the impact makes access to the provision of assistance services for victims and their families not optimal and can lead to conflict in the community.

As an investigator on duty at the police, Hn revealed that there are still many people who do not know that the process of reporting to the police takes time, as revealed from the interview results:

Many people still don't understand the procedures for handling cases legally at the police, so they come to report their cases and immediately ask us to catch the perpetrators as soon as possible.

DN who has been actively involved in assisting victims of violence, said the same thing:

Our office is often visited by victims and their families who ask for support to be able to help the police immediately speed up the process of arresting the perpetrators.

If Hn and Dn found victims and their families who wanted the arrest of the perpetrators to be expedited, another story was told by Ds and Dd, who received complaints about how the victims and their families felt their reports were being ignored and received information and input from the surrounding community that their cases were handled slowly because they were poor people, as revealed from the interview results:

After the BAP and visum et repertum were carried out and the results showed that our child had indeed been a victim of abuse, the police let the perpetrators roam freely. Some neighbors advised us to stop fighting for justice for our children because laws can be bought.
The process of resolving cases of violence against women and children, which takes a long time and is a gradual process, is coupled with the COVID-19 situation, which hampers and slows down the process of handling cases carried out by the police and service delivery agencies, causing victims and their families to feel neglected and downtrodden and giving up hope that cases will be able to proceed to court. The victim's condition was getting worse, and she did not dare leave the house because many locals knew about what had happened to her. As expressed by C and his mother:

When my mother and I reported the rape that I experienced to the police, I had to go to the hospital to undergo a visum et repertum and then proceed with a psychological examination. After that, we were asked to wait a very long time, and every time we asked about the progress of our case, we did not get a convincing answer that our case would finally go to court at the insistence of the perpetrator's family and lawyers, as well as their statement stating that poor people like us would not be able to proceed to court. Finally, we decided to make peace and withdraw the case by signing a letter of agreement.

If Cs and her mother reconciled because there was a stigma that the legal process would be slow for the poor, leading to the revocation of the report, then another story was told by Ay's family, who told how the surrounding community stigmatized their child, which made Ay ashamed and embarrassed to leave the house, as revealed from the interview results:

The slow legal process, the provision of follow-up services with professional staff, which was hampered by the distance where we live far from the city and poor internet coverage, and the extended isolation period for the COVID-19 perpetrators ultimately made the cases experienced by our family revealed to the public. This makes our children feel ashamed and afraid to leave the house.

Conflicts in providing services for victims of violence frequently occur in the uncertain conditions of the COVID-19 pandemic, when everyone is panicking with the ever-changing rules—following developments and adjusting to national health protocols. Socialization and advocacy need to be done or provided for the community and families in treating victims, especially women and girls, who are always stigmatized by society as a vulnerable and weak group and will no longer be valuable when their honor is tarnished. Awareness needs to be carried out so that society no longer blames the victim, puts the victim in a corner, and judges the victim and his family, which only prolongs and exacerbates the psychological wounds of the victim and his family.

**Conclusion**

From the results of the research, we can see that the management for handling victims of gender-based violence has been prepared by the Ministry of Women and Children's Empowerment with Case Management Framework (as described in Figure 4) has become a guideline for service providers in the process of handling victims of gender-based violence since it was implemented during the COVID-19 pandemic. In theory, the concept can still be carried out according to the principles and flow of services. Changes that occur and are felt by beneficiaries (victims) with service provider institutions (service provider institutions) are at the level of implementation in the field, such as:
In the process of problem identification, assessment, intervention plan, intervention, monitoring, and evaluation, as well as the termination of the provision of complaint services and handling of women victims of violence during the COVID-19 Pandemic becomes more difficult and not optimal, due to the PSBB protocols.

The victims of violence are not well served and have an impact on the dissatisfaction of victims and their families because they feel that their cases are ignored and often trigger social conflicts in society.

Limited technological facilities and infrastructure and the availability of internet connections cause the collection of data and information from the whistleblower to the report recipient or vice versa from the report recipient to the whistleblower to be unclear and often interrupted.

These situation results in incorrect analysis that causes services to be not optimal, so efforts are needed to develop special abilities and “skills” for officers or assistants from service providers in facing the process of changing and shifting service delivery from conventional services to online services.

During the COVID-19 Pandemic in 2020-2021, the change and shift from conventional services to online/digital services actually had an impact on slower service quality, making obstacles.

Another thing is the complaint about the difficulty of accessibility in trying to seek help due to limited shelters. Women and children are often victims of sexual violence and still need access to complaints services and follow-up treatment processes in the health, social, and legal fields.

Several points that also need to be highlight is the concept of human freedom by Amartya Sen, especially for women and children during COVID-19 pandemic. If development is a process of expanding human freedom, therefore development requires eliminating the main source of non-freedom: poverty as well as tyranny. The concept of development in general is driven by the growing content of human interests and by taking advantage of new technological and scientific advances. The so-called "freedom," as one of the indicators of successful development by Amartya Sen (Coccia, 2019; Coccia & Wang, 2016; Beyer, G.J., 2019), has not been realized and felt by the community, especially in suburban areas such as Bandung Regency. Services from the government are deemed to be uneven, especially in suburban areas such as Bandung Regency.

The increasing cases of gender-based violence during the COVID-19 Pandemic also prove that the struggle and movement to voice feminism to the wider community must continue and be fought for. Even though the government has included points in the Medium-Term and Long-Term Development Plan (RPJMD and RPJM), many people, especially women, choose to surrender and accept the fact that patriarchal culture still dominates in Indonesia. Women and children are still confined under the subordination and domination of men. This concept of patriarchal society and the pressure-domination of men over women are being debated more widely and openly (Zembat, 2017).

Participatory development that should empower women and children as marginalized, equitable, violence-free parties has not been realized. Development should respect human rights and focus on gender mainstreaming, as men and women are equally entitled to breathe the air of "freedom" of development in Indonesia. An explanation of the flow of case management supplemented by data from interviews with respondents involved in the research, can provide an illustration of the complexity of handling cases in the field, so that multi-sector collaboration and coordination are needed. Handling complaints of gender-based violence victims in government service agencies, which use a case management framework, still
requires collaboration and coordination in each stage to provide full services for victims of violence and their families.

Violence against women is a multi-dimensional problem, and many factors can encourage or hinder a victim from coming and reporting to service personnel from the government; there are cultural factors that often still adhere to patriarchal culture, and there are factors of proficiency in using information technology, there is also a sense of "shame" because there are "stereotypes" that the woman or victim is the one who is guilty and even smears the good name of the family. Thus, taking a multi-dimensional approach and the participation/coordination of various stakeholders is necessary. The objectives of implementing case management should be supported by increasing staff capacity and public participation.

**Suggestion and Limitation**

The government and academics are encouraged to continue to conduct various studies to see the impact of COVID-19 on gender issues as well as prevention and handling programs for victims of violence, accompanied by “capacity-building” programs for officers/social assistance from service providers to be able to provide full services to victims of violence during outbreaks or natural disasters, such as the COVID-19 pandemic. In addition, it is important to carry out socialization and advocacy through the integration of development programs in the women's protection and health sectors and community involvement.

This research was only conducted in Bandung Regency area with limited sources. Research in other places with the same topic to compare the results will sharpen the analysis and the result of this study.

**References**


Coccia, M. (2019). Theories of development. In A. Farazmand (Eds.), *Global encyclopedia of*
public administration, public policy, and governance (pp. 1–7). Springer. https://doi.org/10.1007/978-3-319-31816-5_939-1


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