



POLITICS IN ASIA

HUMAN SECURITY AND EMPOWERMENT IN ASIA

BEYOND THE PANDEMIC



Edited by
**MELY CABALLERO-ANTHONY,
YOICHI MINE, AND SACHIKO ISHIKAWA**

ROUTLEDGE

For scholars and practitioners who intend to place human security at the center of a post-COVID-19 era, the case studies in the volume offer a truly thought-provoking investigation into protection and empowerment and their roles in addressing the needs of vulnerable communities experiencing the effects of compounded human insecurities. Prior to the pandemic, the communities examined here were already experiencing diverse insecurities due to poverty, food shortages, and forced migration due to conflicts or disasters. The research case studies eloquently steer away from stove-pipe approaches, and embrace a multi-disciplinary comprehensive approach in ‘solidarity’, as argued in the 2022 UNDP Special Report, *New Threats to Human Security in the Anthropocene*. Research also reveals how ideas for empowerment can emerge from the process of protection. Three decades after the launch of the human security concept, the operationalization of human security is being severely scrutinized. This book offers a conceptual and practical guide map to its deployment.

Akiko Fukushima, Senior Fellow
Tokyo Foundation for Policy Research, Japan

The pandemic has caused havoc around the world—particularly in vulnerable communities—whether in the Global South or the Global North. This book provides an evidence-based account of how people and communities were affected by the COVID-19 pandemic in various parts of Asia, and how they have overcome the structural barriers through empowerment in critical cases of human security. This is a must-read for policymakers, academics, and students who have understood that the concept of ‘human security’ can provide a powerful tool to analyze and provide practical solutions for ‘freedom from fear, freedom from want, and freedom to live in dignity’ for all.

Eun Mee Kim, President, Professor
Ewha Womans University, Seoul, South Korea

The concept and practices of human security face serious challenges, not least of which is a resurgence of traditional geopolitical visions of security focusing upon military defense, reinforced by a rise in nationalism and great power rivalry. Yet, the current polycrisis demonstrates that human security, as a guide to policy, is needed more than ever. This excellent book explores the importance and feasibility of human security in East Asia, in response to COVID-19 and development challenges, amongst others. Building upon the internationally leading research undertaken by the JICA Ogata Research

Institute in the field of human security, it is conceptually rich and empirically rigorous, while demonstrating how ideas can have a positive impact upon people's lives.

Edward Newman, Professor of International Security
University of Leeds, UK

Human security is a beautiful concept that needs to be effectively operationalized, and this book aims to do just that by focusing on specific vulnerable populations in Japan and several Southeast Asian countries. The ten chapters cover a wide range of issues that scholars would find conceptually, theoretically, methodologically, and empirically stimulating and refreshing in light of COVID-19. I highly recommend this valuable book to everyone interested in delving into the latest research in the post-COVID world.

Sorpong Peou, Professor; Graduate Program Director
Toronto Metropolitan University, Canada

Over the past decade, JICA Ogata Sadako Research Institute for Peace and Development (Previously JICA Research Institute) has yielded numerous impressive products. This volume is a continuation of its path-breaking work in the field of human security. This book can be widely used in classrooms and research offices.

Ren Xiao, Professor
Fudan University, Shanghai, China

HUMAN SECURITY AND EMPOWERMENT IN ASIA

In the context of the COVID-19 pandemic, this edited volume revisits the framework of human security and development. It examines the protection-empowerment nexus as applied to various vulnerable groups and populations affected by the pandemic.

While the conventional human security literature has focused on top-down protection, this book offers new perspectives on human security by exploring bottom-up empowerment from both theoretical and practical perspectives. It also encourages readers to rethink the agency of vulnerable people in addressing the challenges posed by the pandemic. Through eight case studies from Southeast Asia and Japan, the contributors to this book demonstrate the importance of empowerment in achieving human security. They focus on the responses of vulnerable groups and communities to multiple threats to their lives, livelihoods, and dignity. The chapters discuss key human security concerns, such as poverty, the environment, food, forced migration, gender, health, aging, peace, and justice – all of which have been compounded and exacerbated by the COVID-19 pandemic.

An essential resource for students and scholars of human security in the aftermath of COVID-19 and its wider impacts.

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HUMAN SECURITY AND EMPOWERMENT IN ASIA

Beyond the Pandemic

*Edited by Mely Caballero-Anthony,
Yoichi Mine, and Sachiko Ishikawa*



ROUTLEDGE

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First published 2024
by Routledge
4 Park Square, Milton Park, Abingdon, Oxon OX14 4RN

and by Routledge
605 Third Avenue, New York, NY 10158

Routledge is an imprint of the Taylor & Francis Group, an informa business

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British Library Cataloguing-in-Publication Data

A catalogue record for this book is available from the British Library

ISBN: 9781032554433 (hbk)

ISBN: 9781032554426 (pbk)

ISBN: 9781003430742 (ebk)

DOI: 10.4324/9781003430742

Typeset in Times New Roman
by Deanta Global Publishing Services, Chennai, India

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FOREWORD

As we enjoy the benefits of our current progress toward globalization, we also experience how such progress has led to fragmentation around the world. The tripartite sources of threats—namely the physical, living, and social systems—correspond to interrelated problems such as climate change and disasters, infectious diseases, and geopolitical turmoil. The challenges we have faced in recent years have proved how complex our human insecurities have become. For example, climate change and the resulting extreme weather events and disasters have claimed many lives; simultaneously, we have had to confront the global ramifications of the COVID-19 pandemic, which has caused socio-economic repercussions and debt distress in many developing countries. The war in Ukraine has not only led to a deteriorating humanitarian situation in the affected conflict zones but also caused severe energy and food shortages around the world. Further, in early 2023, earthquakes of an unprecedented magnitude hit Turkey and Syria, including areas still affected by protracted conflict. This exemplifies the double crisis of a natural disaster occurring during a situation of armed conflict. Because human insecurity occurs in a chain of threats, responses must be comprehensive and contextual, addressing the threats as a whole.

In an age of such compounded crises, ‘human security’ has become more crucial than ever. Although human security began to attract attention after the end of the Cold War in 1989, active and substantial discussions have developed the concept further, placing every single human being at the center of the security paradigm. It is about ensuring people’s lives, livelihoods, and dignity. Achieving human security requires comprehensive, context-specific, and preventive responses. States and multiple actors are expected to cooperate in solidarity through two approaches: the protection and empowerment of all people and communities. While top-down protection refers to the State’s and multiple other actors’ outreach to the people,

the bottom-up empowerment of communities encourages people's agency. When people are empowered, they are able to make optimal choices for themselves and act to put those choices into effect without any reservations or fears.

This book explores how the protection provided by states and multiple actors can influence the empowerment of marginalized and vulnerable populations. The eight case studies analyze and visualize the diverse contexts in which vulnerable communities and groups are situated in the midst of different human security issues: poverty, environmental security, food security, forced migration, gender, health, aging society, and peace and justice in four countries in Southeast Asia—Indonesia, the Philippines, Thailand, and Vietnam—as well as Japan. The editors and authors of this book have conducted extensive studies about each of the countries to develop the case studies and analyses.

The findings of this book demonstrate that there is no single pathway for achieving human security. And while it is significant that states and other actors seek to maximize people's protection in the event of significant and compounded threats, it is also crucial that they should simultaneously and gradually empower individuals to promote people-led initiatives for recovery. The case studies in this book demonstrate how the combination of the two approaches of protection and empowerment varies from case to case, changing over time and depending on the local context. However, the case studies also reveal that the best combination of top-down protection and bottom-up empowerment is still being explored. The international community is expected to promote such human security approaches in solidarity with the goal of building resilient societies. Therefore, we must continually enhance our research and practice of human security, adapting to emerging changes.

The Japan International Cooperation Agency has set human security as its organizational mission, and we shall continue contributing to its promotion. The publication of this book comes at an opportune time for revisiting the concept and practice of human security in an era of rapid globalization, with a wide variety of complex and transnational threats. In the event of a worldwide crisis, such as the resurgence of international conflict, the argument that state security should take precedence may prevail. However, the irreplaceable basis of human security, setting people as the object of protection and empowerment, is as old as the history of modern political thought. I firmly believe that this publication contributes to the tireless quest to develop more effective research and practice of human security.

Akihiko Tanaka
President

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ACKNOWLEDGMENTS

This publication is the fruition of the collective efforts and support of many colleagues, to whom we express our sincerest gratitude. First of all, the editors extend their appreciation to the former directors of the Japan International Cooperation Agency Ogata Sadako Research Institute for Peace and Development (JICA Ogata Research Institute) Izumi Ohno and Akio Takahara, as well as past deputy directors Yasuo Fujita, Megumi Muto, and Koji Makino, who supported the arduous process of developing the project concept, reformulation, and implementation during the height of this global pandemic.

The chapter authors are greatly indebted to the various communities, disaster and conflict survivors, networks of health workers, women's rights service providers, local organizations, and older people who were at the core of this analysis of empowerment and human security. The generosity and kindness of these individuals and communities in Indonesia, Japan, the Philippines, Thailand, and Vietnam were essential throughout the research process, and they contributed greatly to its success.

This research process was modified and adapted to meet the challenges imposed by the COVID-19 pandemic. In addition to being a crucial impediment to the research, the pandemic provided valuable additional insights relevant to the research themes. Despite the hurdles, the research project has made a timely contribution by systematically presenting the combined protection and empowerment framework of human security, while taking into account many of the limitations imposed by the pandemic. Providing substantive evidence for the approaches discussed in the book are eight working reports completed in 2021 as interim reports for this research project. These reports analyzed the impacts of COVID-19 at the country level, including the 'protection' strategies ubiquitously employed by

most countries in their responses to the crisis. Some of the case studies were also presented at the International Humanitarian Studies Association Conference in 2021 and the Japan Association for Human Security Studies' Annual Conference in 2022.

The chapter authors are grateful to the individuals and institutions that supported their research and writing, especially the following local research assistants: Tran Chi Thien, John Talan, Ezekiel Benedicto, Mariel Quiogue, and Signy Goto-Spletzer. The authors would also like to thank the following people: Paul Liu (Bappeda Kupang) and Harris Oematan (CIS Timor), Arwin Sulaksono, Wahana Visi, and Cash Working Group Central Sulawesi, Yasuo Suzuki, Keiko Omuta, Wilbert Mercado, and Joeven Reyes (Sulong Peace), Karen Tañada and Gaston Z. Ortigas (Peace Institute—GZOPI), Beth Yang (WE Act 1325), Naoyuki Ochiai (Advisor to the Chief Minister of Bangsamoro Transition Authority), Rhadzni M. Taalim, and Abdulbasir G. Calim. All the authors very much appreciate everyone's diverse contributions to the completion of the case studies.

The local offices of JICA graciously provided support for the remote fieldwork, including implementing a strategy to collect grassroots data that enriched the individual discussions in the case studies. We are also grateful to Chie Miyahara—the Institute's Director General and the head of the Peacebuilding and Humanitarian Support Cluster—for the generous support she gave in relation to the completion of this publication. We would also like to extend our gratitude to the management, editorial, and logistics teams of JICA Ogata RI, comprising Yasuhiko Sato, the efficient staff at JICA's library, and the research project members Ako Muto, Lisette Robles, Kaito Takeuchi, Shota Oboshi, Nobuaki Oyama, Vicka Kharisma, and Chihiro Toya. Their combined work and support at different moments in this project are greatly appreciated.

Finally, we would like to state that the views and interpretations expressed in this volume are those of the authors and do not necessarily represent those of the organizations or persons mentioned.

ABBREVIATIONS

3R	Reduce, Reuse, Recycle
ASEAN	Association of Southeast Asian Nations
BARMM	Bangsamoro Autonomous Region in Muslim Mindanao
BHRC-BARMM	Bangsamoro Human Right Commission— Bangsamoro Autonomous Region in Muslim Mindanao
BIATF	Bangsamoro Inter-Agency Task Force
BIFF	Bangsamoro Islamic Freedom Fighters
BJBS	Bandung Champion of Waste Free
BLT Desa	Village Direct Cash Assistance
BNPB	National disaster management agency
BNPT	Non-cash food assistance (food voucher)
BOL	Bangsamoro Organic Law
BPJS Ketenagakerjaan	Social Security for Employment
BTA	Bangsamoro Transition Authority
BWC	Bangsamoro Women’s Commission
CAB	Comprehensive Agreement on Bangsamoro
CARHRIHL	Comprehensive Agreement on the Respect for Human Rights and International Humanitarian Law
CBCS	Consortium of Bangsamoro Civil Society
CCSA	Center for COVID-19 Situation Administration
CHR	Commission on Human Rights
CI	Community Isolation
Com COVID-19	Community-led COVID-19 Support Workforce

CPP-NPA-NDFP	Communist Party of the Philippines-New People's Army-National Democratic Front of the Philippines
CSOs	Civil society organizations
CTP	Cash-transfer program
CUSRI	Chulalongkorn University Social Research Institute
DAS	Watershed
DD	Village Development
DDC	Department of Disease Control
DILG	Department of Interior and Local Government (Philippines)
DOP	Department of Older Persons (Thailand)
DoSA	Department of Social Affairs (Indonesia)
DTKS	Integrated Social Welfare Data
ECQ	Enhanced Community Quarantine
EIDs	Emerging Infectious Diseases
ER	Emergency Department
FGDs	Focused Group Discussions
GBV	Gender-based violence
GEJE	Great East Japan Earthquake
GPH	Government of the Philippines
GPPAC	Global Partnership on the Prevention of Armed Conflict
GSO	General Statistics Office
GUPAD-LN	Grupo ng Kababaihang Umuugnay sa Pamayanan ng mga Agta/Dumagat na Nagtatanggol sa Lupaing Ninuno
GWAPA	Group of Women Advocating for Peace in the Archdiocese
GZOPI	Gaston Z. Ortigas Peace Institute
HCDC	Ho Chi Minh Center for Disease Control
HCM	Ho Chi Minh
HI	Home Isolation
HRO AFP	Human Rights Office Armed Forces of the Philippines
HRO PNP	Human Rights Office Philippine National Police
IATF	Inter-Agency Task Force
IATF-MEID	Inter-Agency Task Force—Management of Emerging Infectious Diseases
IHRI	Institute of HIV Research and Innovation
IPALs	Wastewater treatment plants
IPCC	International Panel on Climate Change
IPs	Indigenous Peoples
IW	Indigenous Women

IWOs	Indigenous Women's Organizations
JICA	Japan International Cooperation Agency
KLHK	Ministry of Environment and Forestry
KMMK	Kamalitanan te Matigsalog, Manobo, Kulamanen ne Migsabeka
KSKK	Kumamura Sanson Kasseika Kyokai
LAPs	Local Action Plans
LBO	League of Bangsamoro Organizations
LGUs	Local Government Units
LIFDCs	Low-income food-deficit countries
LMICs	Low- to medium-income countries
LSA	Life Support Advisors
LSIs	Locally stranded individuals
LTC	Long Term Care
MAFAR-BARMM	Ministry of Agriculture, Forestry and Agrarian Reform—Bangsamoro Autonomous Region in Muslim Mindanao
MAR	Monitoring and Action Response
MILF	Moro Islamic Liberation Front
MILG-BARMM	Ministry of Interior and Local Government of Bangsamoro Autonomous Region in Muslim Mindanao
MIPA-BARMM	Ministry of Indigenous Peoples Affairs—Bangsamoro Autonomous Region in Muslim Mindanao
MNLF	Moro National Liberation Front
MOEF	Ministry of Environment and Forestry (Indonesia)
MoF	Ministry of Finance (Indonesia)
MOH	Ministry of Health (Vietnam)
MOH-BARMM	Ministry of Health—Bangsamoro Autonomous Region in Muslim Mindanao
MOLISA	Ministry of Labor, Invalids and Social Affairs
MoPH	Ministry of Public Health (Indonesia)
MoSA	Ministry of Social Affairs (Indonesia)
MoVDRT	Ministry of Villages, Disadvantaged Regions Development and Transmigration
MPOS-BARMM	Ministry of Public Order and Safety—Bangsamoro Autonomous Region in Muslim Mindanao
MSDHS	Ministry of Social Development and Human Security
NALKATI	Nagkahiusang Lumadnong Kababayan-an sa Tinanan
NAP WPS	National Action Plan on Women, Peace and Security
NCIP	National Commission on Indigenous Peoples
NCR	National Capital Region (Philippines)

NDFP	National Democratic Front of the Philippines
NESDB	The National Economic and Social Development Board
NESDC	The National Economic and Social Development Council (<i>Rename</i>)
NESDP	The National Economic and Social Development Plan
NEZs	New Economic Zones
NGAs	National Government Agencies
NGOs	Non-governmental organizations
NHSO	National Health Security Office
NKMGKK	Nagkakaisang Kababaihang Mangyan ng Gloria para sa Kaunlaran at Kapayapaan
NPA	New People's Army
NSCWPS	National Steering Committee on Women, Peace and Security
NSO	National Statistical Office (Thailand)
NTS	Non-traditional security
NTT	East Nusa Tenggara Province
OAA	Old Age Allowance
OLLD	Online Library of Legal Documents
OPAPP	Office of the Presidential Adviser on the Peace Process
PASAKK	Panaghiusa Alang sa Kaugalingnon ug Kalingkawasan
PCVE	Preventing and Countering Violent Extremism
PCW	Philippine Commission on Women
PD	Local Authorities (Indonesia)
Permenaker	Ministry of Workforce-issued Regulation (Indonesia)
PHBS	Healthy Living Community Behavior
PHC	The Primary Health Care
PKH	Family Hope Program
PKTD	Village Cash Work Unit
PPE	Personal Protective Equipment
PRG	Provisional Revolutionary Government
PSBB	Large-scale Social Restrictions
RCCE	Global Risk Communication and Community Engagement
RDRRMC	Regional Disaster Risk Reduction Management Committees
RDS	Rural Doctor Society
ROFs	Returning overseas Filipinos
RT/RW	Neighborhood Community
RTG	Royal Thai Government

SDG	Sustainable Development Goals
SFDRR	Sendai Framework for Disaster Risk Reduction
SGBV	Sexual and Gender-Based Violence
SKP	Samahan ng Kababaihan sa Puray
SPMS Box	Shariff Aguak, Pagatin now Datu Saudi Ampatuan, Mamasapano, and Datu Salibo
TGRI	Foundation of Thai Gerontology Research and Development Institute
TPMT	Third Party Monitoring Team
UCT	Unconditional cash transfer
UN	United Nations
UNDP	United Nations Development Programme
UNFCC	United Nation Framework Convention on Climate Change
UNFPA	United Nations Population Fund
UNGA	United Nations General Assembly
UNICEF	United Nations Children’s Fund
UNODC	United Nations Office on Drugs and Crimes
UNSCR	United Nations Security Council Resolution
UNV	United Nations Vietnam
VAW	Violence against Women
VND	Vietnamese Dong
WE Act 1325	Women Engaged in Action on United Nations Security Council Resolution 1325
WELD-Peace	Women’s Empowerment for Leadership in Development and Peace
WfH	Work from Home
WHO	World Health Organization
WORMD	Women’s Organization of Rajah Mamalu Descendants
WPS	Women, Peace and Security
WPT	Women’s Peace Tables

1

HUMAN SECURITY AND EMPOWERMENT

Lessons for a Post-Pandemic World

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1.1 Introduction: Complex and Compounded Crises in the Anthropocene

Nothing could have prepared the international community for the outbreak of the COVID-19 pandemic in early 2020. Dubbed a once-in-a-century pandemic, COVID-19 has exacted a huge toll on people's lives across the world, sparing no country. According to the World Health Organization (WHO), the protracted pandemic has already caused around seven million deaths and nearly 800 million cases globally—and the toll is still rising.¹ The global health crisis has upended people's lives, cost millions of jobs, severely restricted people's mobility and international travel, and resulted in an economic downturn not seen since the Great Depression in the 1930s. What is worse, there is no guarantee that pandemics of similar magnitude will not recur in the next hundred years. As noted in the latest report of the United Nations Development Programme (UNDP), 'it looks like roughly every three years you're going to have a global infectious-disease crisis, and that tempo is probably increasing'.²

The prolonged COVID-19 pandemic has had profound and far-reaching impacts, resulting in high levels of insecurity among individuals and communities globally due to its cascading and cross-cutting effects. According to the UNDP's special report on human security, *New Threats to Human Security in the Anthropocene: Demanding Greater Solidarity* (UNDP 2022a), and the subsequent *Human Development Report 2020–21* (UNDP 2022b), the global Human

1 WHO Coronavirus Dashboard, <https://covid19.who.int/>.

2 Richard Hatchett, cited in UNDP (2022a, 14).

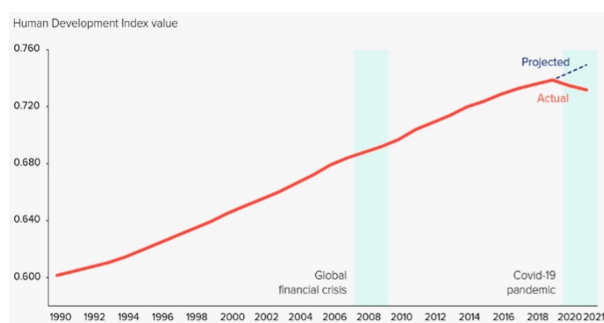


FIGURE 1.1 COVID-19 and the abrupt regression of human development, <https://hdr.undp.org/content/human-development-report-2021-22>

Development Index, a composite measure of achievements in health, education, and decent life, declined for the first time due to the rampancy of COVID-19 (Figure 1.1). A year after the outbreak, the World Bank and the Asian Development Bank reported a global economic contraction of 8–10%. The severity of the sudden economic downturn saw over 80 million job losses in the Asia-Pacific region alone, a figure that did not include the millions more lost in the informal economy.³ Global poverty rose significantly, with 150 million more people falling into extreme poverty. The crisis also impacted food security, adding 100 million more undernourished people worldwide, compounding the already dire situation of the other 135 million people facing acute hunger prior to the outbreak of the COVID-19 pandemic.⁴

The spread of COVID-19 should not be seen as an isolated event but needs to be viewed in the context of intensified human action against nature. New kinds of infectious diseases are likely to emerge as we go through ‘an unusually dramatic and drastic disturbance of the age-old balance between human hosts and disease organisms’ (McNeill 1998, 10). In the age of the Anthropocene, in addition to disruptions in the biological environment, we have also seen how rapid changes in the geophysical environment are generating critical and pervasive threats to human security.⁵ The most consequential of these is climate change, now regarded as the greatest threat to the survival of humanity. The multifaceted effects of climate

3 See World Bank (2021), ‘COVID-19 to Add as Many as 150 Million Extreme Poor by 2021’. Press Release, October 7. Available at: www.worldbank.org/en/news/press-release/2020/10/07/covid-19-to-add-as-many-as-150-million-extreme-poor-by-2021?cid=EXT_WBEmailShare_EXT.

4 Food Security Information Network, *Global Report on Food Crises. Technical Report*, 2020. Available at: www.fsplatform.org/report/global-report-food-crises-2020.

5 For a penetrating classification of threats to human security based on a distinction between the physical, living, and social systems, see Tanaka (2019).

change are known to compound existing vulnerabilities and exacerbate human insecurity, including health issues. According to the Sixth Assessment Report of the International Panel on Climate Change (IPCC), climate change is happening rapidly and intensifying around the world. Asia-Pacific is widely known as the region most exposed to climate change, which causes more frequent and intense extreme weather events such as typhoons and cyclones. In 2021, the Association of Southeast Asian Nations (ASEAN) Climate Change Report showed that six ASEAN countries (Indonesia, Malaysia, Myanmar, the Philippines, Thailand, and Vietnam) were highly vulnerable to climate change due to the ‘growing intensity and magnitude of extreme weather events and increasing economic, environmental and social damage’ (ISEAS 2021).

Emerging infectious diseases and climate change are not the only threats surrounding us. Many human societies face natural disasters, economic crises, and violent conflicts. One of the key features that distinguishes human security from national security is the concern over the question of ‘security from what’. If our aim is to defend ourselves against military aggression by a neighboring country, a national security agenda may be sufficient. However, we also face multidimensional, interconnected threats that extend far beyond military aggression. In recognizing the diversity and interconnectedness of threats, the human security and non-traditional security agendas resonate with each other (Caballero-Anthony 2018; Morada and Caballero-Anthony 2022). While the Ukrainian War fits within classic national security concerns, the protracted conflict has severe implications for food, energy, and economic security, as well as intensifying a sense of insecurity about the future in every part of the world.

This leads to questions of how—in the face of complex crises—we protect and ensure the security of people and states, prevent conflict, promote development, and achieve sustainable peace. To answer such questions, we must urgently draw lessons from grassroots practices in the quest for human security.

1.2 Inclusive Response and Resilient Recovery

Against the backdrop of the ongoing COVID-19 pandemic, this edited volume examines how the security of people and states in Asia has been severely affected by the pandemic. Through eight case studies that delve into a diverse set of human security issues, such as poverty, the environment, food security, forced migration, gender, health, and aging—as well as peace and security—we analyze how vulnerable groups and populations in Thailand, Vietnam, Indonesia, the Philippines, and Japan are acutely and disproportionately impacted by COVID-19, on top of the existing challenges they face. This entails examining the specific challenges of protection from sudden downturns and harms by identifying possible opportunities for empowerment as seen through different narratives and practices of the affected groups and communities. We can then assess the extent to which ensuring human security is possible.

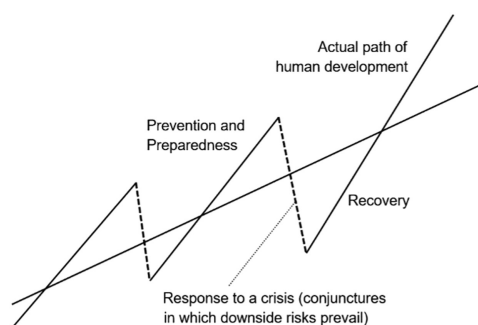


FIGURE 1.2 Human security and development, www.palgrave.com/gp/rights-permissions/authors-rights-to-re-use-content/6629026

It is critically important to note that sudden downturns affect people with different social characteristics and positions in different ways. Paying attention to differences in vulnerability is also relevant to the Sustainable Development Goals' ultimate objective of attaining a society where 'no one is left behind'.⁶ The case studies provide insights into the agency of certain actors in fulfilling their roles of providing protection and empowering people under trying circumstances.

Almost three decades after the introduction of the human security concept, the lived experiences presented in this volume further underscore its salience as a concept. It provides a framework for policy responses to the kinds of challenges brought on by a rapidly changing global environment. COVID-19 is a global health crisis and arguably the most consequential human security issue in recent history.

The discussion in the case studies included in this volume covers the phases of Response (downside) and Recovery (upside) illustrated in Figure 1.2, which is itself a more general representation of Figure 1.1. On the one hand, human development is the process through which people's choices expand so that they can live lives they value. Human development has 'a powerfully buoyant quality, since it is concerned with progress and augmentation' (Sen 2003, 8). On the other hand, human security supplements human development by securing 'what has to be safeguarded'. Human security pays direct 'attention to what are sometimes called "downside risks"' and 'demands protection from these dangers and the empowerment of people so that they can cope with—and when possible, overcome—these hazards' (ibid.). While we may hope that a global crisis such as COVID-19 will not arise again, sharp regressions in human development, as depicted in Figure 1.1, are likely to recur—at least at the local level. In this respect, lessons about resilient recovery can be learned from people's activities in coping with COVID-19. These

6 Japan's Human Security Indicators have been developed to understand the real challenges on the ground by disaggregating national statistics by local municipality. See Takasu (2020).

can then be applied creatively to the practice of human security in addressing future pandemics and other threats.

As the international community continues to address the lingering impacts of a long, drawn-out pandemic, we argue that applying the twin human security agendas of protection and empowerment to cope with and overcome crises has become even more critical to maintaining peace, security, and development in East Asia and beyond. It is therefore necessary to provide a broad overview of the human security concept in the next section.

1.3 Revisiting Human Security

Since the concept of human security was first introduced in the UNDP *Human Development Report 1994*, the importance of paying attention to the everyday experiences of individuals, groups, and communities has proved highly prescient as we move toward a post-pandemic world. The push both to go beyond efforts to protect state security and to adopt human-centered security practices draws attention to the challenges that affect the security and well-being of the people. It is useful here to recall the fundamental questions that underpinned the first iteration of the concept: ‘whose security’ and ‘security for whom’? The 1994 report was inspired by the seminal work of Mahbub Ul Haq, who argued that what matters in security is not just the security of nations but—even more so—the security of individuals. Haq wrote:

Human security is not a concern with weapons. It is a concern with human dignity. In the last analysis, it is a child who did not die, a disease that did not spread, an ethnic tension that did not explode, a dissident who was not silenced, a human spirit that was not crushed. [...] A powerful, revolutionary idea, the emerging concept of human security forces a new morality on all of us through a perception of common threats to our very survival. But many of the most profound changes in human society have come from crises—from war, economic depression, natural disaster. While great religions often move the human spirit through the sublimeness of their messages, they also carry in their messages the fear of eventual punishment. Much human change comes from a fear for human survival.

(Haq 1995, 116)

In the 1994 report, human security was conceptualized in three distinct ways: First, it shifted the referent object of security from the State to individuals or the people. Second, it identified four essential characteristics of human security issues. These are: the issue is of universal concern, the components are interdependent, it is better ensured through early prevention than later intervention, and finally, it is people-centered (UNDP 1994, 22–23). Third, the concept focused on two main aspects: ‘safety from such chronic threats as hunger, disease and repression’, and

‘protection from sudden and hurtful disruptions in the patterns of daily life—whether in homes, in jobs or in communities’ (ibid.). Following these features, the 1994 report identified seven core human security values. These are: economic security, food security, health security, environmental security, personal security, community security, and political security (ibid.). Despite these expanded definitions, the UNDP’s human security concept was essentially narrowed down to mean ‘*freedom from fear and freedom from want*’. This definition subsequently became the point of reference in many of the writings on human security.

Aside from placing the individual as the referent of security policy and analysis, the human security concept differentiates between non-military threats that can be detrimental to human welfare and ‘traditional military threats’. There is also skepticism about the ability of nation-states to resolve these threats, especially due to the global scale of some of these problems, such as climate change and pandemics. Since its introduction as a specific policy concept in the 1994 report, it has provided a framework for the analysis and discussion of threats at the scale of humans rather than that of states (Newman 2022).

The concept of human security went through two more iterations after its inception in 1994. The second iteration is found in the seminal 2003 human security report entitled *Human Security Now*, produced by the independent Commission on Human Security (CHS). Launched at the 2000 UN Millennium Summit, the emphasis moved from the consensus on ‘freedom from want’ and ‘freedom from fear’ to crafting an effective response to a globalized and interconnected era. As Sadako Ogata and Amartya Sen—co-chairs of the commission—point out in the foreword of the 2003 report, two major types of strategies or ‘keys to human security’ are needed to advance the goals and promote human security. These are protection and empowerment. These two strategies are considered critical in ‘nearly all situations of human security’ and are interlinked and mutually reinforcing by nature, though their ‘form and balance’ will vary depending on the situation (Commission on Human Security 2003, 10–12).

The strategy of protection is similar to the concept of human security outlined in the UNDP’s 1994 report and the general understanding of ‘freedom from fear’ and ‘freedom from want’ (UNDP 1994, 3–4). The 2003 CHS report focuses predominantly on threats from ‘events largely beyond the control’ of people and communities. Examples include threats from financial crises, terrorism, or armed conflicts, but may also include underinvestment in basic public services such as sanitation and healthcare. The report then presents an ‘infrastructure of protection’, which comprises ‘national and international norms, processes and institutions’ that seek to address human security issues in a ‘systematic, comprehensive and preventative’ way.

Where the 2003 report differs substantially from the 1994 report, however, is in the introduction of the strategy of empowerment. According to Sadako Ogata, ‘protection implies a top-down approach’, while empowerment ‘emphasizes people as actors and participants in defining and implementing their vital

freedoms—a bottom-up approach. People protected can exercise choices. And people empowered can make better choices, and actively prevent and mitigate the impact of insecurities’ (Ogata 2004, 26). The next section discusses the notion of empowerment at greater length.

1.3.1 Empowerment and Human Security

The 2003 report defined empowerment as ‘people’s ability to act on their own behalf—and on behalf of others’.⁷ As the report argues, this aspect of empowerment is what differentiates human security from other concepts, such as state security and humanitarian or development work. This is because its focus is on individuals and communities developing their own potential. Empowerment goes beyond protection and entails ‘creating genuine possibilities for people to live in safety and dignity’ (Commission on Human Security 2003). It creates a sense of confidence that is important; people feel confident about the future and about using their abilities to participate in/create/be part of this future. Empowerment includes allowing people and communities who are being protected to also ‘contribute directly to identifying and implementing solutions to [insecurity]’ (p. 6), as well as providing these communities with the skills and knowledge to cope with and overcome hazards. Such strategies enable people to ‘build their resilience to difficult conditions’ (p. 10). In this sense, empowerment is seen as a multiplier of protection strategies as it allows people to act in support of the human security of themselves and others.

Other scholars have operationalized empowerment further to include several elements—choice, control, and agency. For Naila Kabeer, empowerment is not something that can be ‘given’ but is self-generated. In other words, while an external party can provide resources that one can use to become ‘empowered’, actual empowerment still requires an element of choice, control, and agency (to make a decision and act on it). Kabeer further argues that it is the quality of that choice that matters. As noted by Kabeer, ‘inasmuch as our notion of empowerment is about change, it refers to the expansion in people’s ability to make *strategic life choices* in a context where this ability was previously denied to them’ (Kabeer 1999). *Strategic life choices* here refers to choices that are ‘critical for people to

7 ‘Achievements related to agency do not necessarily overlap with those related to well-being: people can act based on values and commitments that may or may not advance their well-being. For instance, people care about how others are treated and about what they see as fair and may care intrinsically about many aspects of nature, even if that has no bearing on their well-being—and may even be detrimental to it’ (UNDP 2022a, 26). See Amartya Sen’s distinction between sympathy and commitment in ‘Rational Fools’ (Sen 1982).

live the lives they want (such as choice of livelihood, whether and who to marry, whether to have children, etc.)' (ibid.).⁸

Allowing people to make strategic life choices raises questions about the kinds of conditions and resources required to realize such choices. In this regard, an enabling environment is critical to allowing a better assessment of the ability to make choices freely. Without this enabling environment, societal prejudices, economic insecurity, impediments to political participation, and access to education and health can all perpetuate inequalities and, in turn, severely constrain the ability to make choices. Thus, people can be considered empowered when they can make decisions for themselves and, most importantly, act on those decisions freely, without having to worry about their situation. This could mean, for example, not being oppressed, or having the necessary abilities to facilitate action after making a decision (i.e., education, upskilling). Empowerment can thus go *beyond* just an individual making a choice to being able to work toward ensuring that their choice is respected and/or act upon it *themselves*. Importantly, such choices must be made in situations where other choices are possible. In the end, empowerment strategies enable people and communities to develop resilience to the difficulties and vulnerabilities they face in their respective environments and/or contexts (as indicated in the Response and Recovery phases shown in Figure 1.2).

An important question for this research, therefore, concerns whether empowerment can be measured. Kabeer notes that as empowerment 'is premised on the unpredictability of human agency and on the diversity of circumstances under which such agency is exercised', it is hard to pinpoint the exact measurements of empowerment (Kabeer 1999, 442). However, access to resources can be one measure of empowerment. The type of resources people have access to can potentially shape their future choices and achievements. At the same time, though, the extent to which a community has access to specific resources can be constrained by its circumstances (i.e., legally, a woman may have access to 'x' land. However, along with education and other factors, customary practices may mean these legal rights are not respected. In the same way, the amount of resources a community has access to may not reflect their actual resources).

The concept of agency—particularly agency in decision-making—can also be defined and/or constrained by context. This makes measurement problematic since not all decisions taken, particularly by women, have the same meaning and weight in all contexts. After all, few cultures operate entirely within 'starkly dichotomous distributions of power', with men making all the decisions and women making none. A hierarchy of decision-making responsibilities is more common, with certain key areas of decision-making being reserved for men while others are assigned to women in their capacity as mothers, wives, and daughters.

⁸ Power to choose matters not only at the individual and household levels but also in wider environments (Kabeer 2002).

As such, Kabeer argues, the evidence that women play a role in making decisions that were of little consequence or were assigned to women anyway by the pre-existing gender division of roles and responsibilities tells us little about the extent of their empowerment (Kabeer 1999, 447). Moreover, legally granted agency may not always reflect agency on the ground.

The same applies to achievement and whether the end result of an action or a decision is a measure of the extent of empowerment. In this regard, there needs to be specific analytical clarity in the selection of what is to be measured. For example, what does an increase in pre-natal healthcare uptake demonstrate about the level of empowerment of women? On the other hand, in looking at indicators tied specifically to a woman's role as a mother, there is the question of whether this can measure effective agency (i.e., agency within prescribed roles) or transformatory agency (i.e., agency beyond what is prescribed contextually), particularly in terms of determining which of the two is important and in what context.

Apart from resources, agency and achievement, there is also the issue of the normative environment. A conducive political environment may be necessary to enable people to 'act on their own behalf', be empowered to question social structures, and engage in collective action. As emphasized by John Friedmann, the agenda of empowerment should not only be social but also political (Friedmann 1992). The CHS (2003) report describes how empowerment entails

building a public space that tolerates opposition, encourages local leadership, and cultivates public discussion. It flourishes in a supportive larger environment (freedom of the press, freedom of information, freedom of conscience and belief and freedom to organize, with democratic elections and policies of inclusion)

(Commission on Human Security 2003, 11)

To illustrate this further and in the area of peace and security, the report suggests that empowerment strategies should focus largely on the construction of robust political institutions that support political participation and accountability. This includes establishing the rule of law through the implementation of legal frameworks, strengthening political institutions and democratic processes, improving political participation, and increasing public access to information, for example, by supporting independent press outlets (Commission on Human Security 2003, 60).

Moreover importantly, the 2003 report does not limit empowerment to simply institution-building. In the discussion of global health initiatives, the report suggested that empowerment strategies operate on two levels (Commission on Human Security 2003, 102, 104–107). On the local level, there is a need for community-based insurance and collaborations with local non-governmental organizations (NGOs) as a means of improving the resilience of communities to outbreaks of disease. In making such improvements, local communities can take charge of

their own healthcare system and are then better able to respond to other related threats to human security. Yet, it would be remiss to think of healthcare provision as taking place in local silos, especially as we emerge from the COVID-19 global pandemic. Thus, national and transnational efforts in disease surveillance and pandemic response systems are also important empowerment strategies that can allow societies writ large to understand and act to protect themselves from contagious diseases.

Thus, while several factors can be identified as part of an approach to measuring empowerment, there also needs to be a high degree of clarity as to the questions being asked. In this regard, context matters. This means that for specific questions on empowerment, more focused and relevant factors can be selected instead of other, less specific ones, and these indicators of a specific situation can then be examined accordingly. While there have been several related attempts at measurement, such as the empowerment evaluation principles (Fetterman and Wandersman 2005) and a list of the central human functional capabilities (Nussbaum 2000), the 2003 report stated explicitly that the commission refrained ‘from proposing an itemized list of what makes up human security’ because what people consider to be vital ‘varies across individuals and societies’ (Commission on Human Security 2003, 4). Case studies such as those in this book will provide a useful source of nuanced, context-specific human security information.⁹ An analytical mapping of the case studies, instead of general statements about them, will be provided in Chapter 10.

1.3.2 Empowerment—with Solidarity

The third iteration of the human security concept can be found in the UNDP’s most recent special report on human security, *New Threats to Human Security in the Anthropocene: Demanding Greater Solidarity* (UNDP 2022a). This report offers a substantive rethinking and reconceptualization of the role of empowerment in advancing human security. While endorsing the place of protection and empowerment, the 2022 report further operationalizes the latter by introducing the concept of ‘solidarity’ as a necessary strategy to improve human security. Solidarity is defined ‘broadly, as a sympathetic and imaginative enactment of collaborative measures to enhance our given or acquired relatedness so that together we fare well enough’ (ibid., 27–30, 141). The concept of solidarity is important because it is aimed at addressing the assumption in the 2003 report that empowered actors ‘can mobilize for the security of others’ (if they are able to) in an interdependent world (ibid., 11).

9 ‘Human security calls for people-centred, comprehensive, context-specific and prevention-oriented responses that strengthen the protection and empowerment of all people and all communities’. Follow-up to Paragraph 143 on Human Security of the 2005 World Summit Outcome Document (A/RES/66/290), September 10, 2012, www.un.org/humansecurity/reports-resolutions/.

Given the nature of urgent threats to human security in the Anthropocene, the 2022 report provides two reasons why it is necessary to further encourage this mobilization for others' security. First, at a fundamental level, 'the world is not only interconnected but also characterized by deep interdependencies across people as well as between people and the planet'. As such, an increase in human solidarity helps people to realize this interdependence—a recognition needed to tackle threats to human security, such as the COVID-19 pandemic and climate change. Second, as a corollary of the first point, individual states themselves are severely challenged and/or unable to guarantee human security because of the nature and complexity of threats to human security. The 2022 report then argues that when it comes to threats such as climate change, empowerment alone is insufficient and can even be problematic. Empowered local actors looking to meet their material needs can cause irreversible damage to biodiversity and drive climate change (ibid., 21–22). What is necessary to resolve such issues is the notion of solidarity: 'linking global challenges with *local action*' in order to create 'space for action based on shared aspirations' (ibid., 62). The stakeholders in human security are very diverse, ranging from local groups, municipalities, advocacy groups in capital cities, international organizations, global civil society, and religious communities, to the private sector. Solidarity is a concept that points to the need for their activities to be networked.

What is important to note here, however, is that the 2022 report has made it clear that empowerment remains crucial to the cause of human security and suggests that the only way to resolve human security challenges in the Anthropocene is to place human agency¹⁰ at the heart of strategies to improve human security. It finds that protection strategies employed to rectify inequalities can actually contradict empowerment strategies by 'associating certain groups of people with victimhood and weakness' and hence reinforcing unequal power structures in society (ibid., 94). As such, the report suggests placing the role of agency at the heart of all strategies—especially those meant to combat inequalities (ibid., 107). Here, agency is important because it is 'an enabler of protection and empowerment strategies that are legitimate and effective'. Further, the subjective experiences of people in relation to their own security are also important to the concept of human security (ibid., 15–18). Lastly, the report finds that 'dangerous planetary changes are the result of actions by people themselves' rather than natural hazards (ibid., 25–26). What then does this mean in practice?

Despite the inclusion of the notion of solidarity, 'solidarity strategies', as mooted in the 2022 report, very much build on the empowerment strategies found in the 2003 report. The 2022 report states clearly that human security policies and

10 A human 'agent' is 'someone who acts and brings about change, and whose achievements can be judged in terms of her own values and objectives, whether or not we assess them in terms of some external criteria as well' (Sen 2000, 19).

programs must include a normative component that tackles the conventions denying certain groups the ability to *freely make choices*, suggesting that

people can continue to face exclusion and indignity even when they are formally protected from discrimination. Societal prejudices, economic insecurity and impediments to political participation, education and health can all work to perpetuate inequalities. In this context achieving broad realization of human rights demands action going well beyond legal protection.

(*ibid.*, 108)

Further, the 2022 report also recognizes that ‘many institutions connected with enhancing security can be underpinned by patriarchal, colonial, and traditional social norms. When that happens, they endow some groups with greater power while others are placed in a subordinate and submissive position’. The importance of changing norms and values to increase agency, particularly of those from marginalized communities, flows clearly from the 2003 report. It is noteworthy that the emphasis placed on an enabling normative environment in the 2022 report reinforced earlier recommendations in the 2003 report. For instance, the earlier report recommends the need for a ‘universal basic education’ that promotes the ‘mindset of global citizens in an interdependent world’ with a ‘global human identity’, in which schools would ‘teach mutual respect and solidarity’ (*ibid.*, 140–141).

Operationalizing how to address structural impediments that severely limit agency has been a contentious issue among scholars and policymakers. Looking at the literature on empowerment, it is useful to note that when it comes to the substantive content of empowerment strategies, the 2022 UNDP report and Kabeer’s works on empowerment fundamentally agree that measures to improve empowerment must include a normative component that tackles existing norms to advance people’s ability to freely make choices. For instance, the 2022 report acknowledges that

people can continue to face exclusion and indignity even when they are formally protected from discrimination. Societal prejudices, economic insecurity and impediments to political participation, education and health can all work to perpetuate inequalities. In this context achieving the broad realization of human rights demands action going well beyond legal protection.

(*ibid.*, 108)

Furthermore, the 2022 report also recognizes that ‘many institutions connected with enhancing security can be underpinned by patriarchal, colonial, and traditional social norms. When that happens, they endow some groups with greater power while others are placed in a subordinate and submissive position’. Similarly, as Kabeer states,

empowerment takes the question of capabilities beyond the goals that people may have reason to value to ask whether their exercise of agency is seeking to question power relations or merely accommodate and hence reproduce them. Empowerment is thus concerned with the meanings and motivations that people bring to their choices, their recognition of injustice as well as with what they can achieve.

(Kabeer 2021)

Where the two differ is perhaps in terms of how these outcomes can be achieved. The 2022 report suggests that empowerment strategies '[require] systemic action, not isolated policies, embodying a commitment to the broad realization of human rights' (UNDP 2022a, 108). Several United Nations Treaty Bodies and documents can serve as starting points for the development of such a strategy. Kabeer, on the other hand, suggests that the nature of empowerment renders it difficult to measure and tackle in a straightforward way. As Kabeer argues,

as far as empowerment is concerned, we are interested in possible inequalities in people's capacity to make choices rather than in differences in the choices they make. An observed lack of uniformity in functioning achievements cannot be automatically interpreted as evidence of inequality because it is highly unlikely that all members of a given society will give equal value to different possible ways of 'being and doing'.

(Kabeer 1999, 439)

This echoes Amartya Sen's capability theory. Kabeer further points out that, 'in assessing whether or not an achievement embodies meaningful choice, we have to ask ourselves whether other choices were not only materially possible but whether they were conceived to be within the realms of possibility' (ibid., 442).

How then, in Kabeer's view, should empowerment strategies be designed? As she suggests, 'while the choices available to people are clearly bound up with the resources they have at their disposal, a concern with empowerment focuses on the transformative potential of these resources' (Kabeer 2021, 3). At the same time, Kabeer also notes that 'power relations can operate through dominant ideologies, thereby ruling out certain possibilities or even rendering them inconceivable' (ibid., 4). In these situations, 'the processes of empowerment must encompass 'the power within' by challenging these internalized structures of constraint'.

In brief, this discussion has drawn attention to the difficult issues and challenges in operationalizing empowerment. Indeed, these challenges are found to be highly relevant to the different experiences of empowerment that are covered in the case studies curated in this volume.

1.4 The Nexus of Empowerment and Protection

Before presenting an overview of the case studies, let us extend our argument on the relationship between protection and empowerment a little further using a temporal framework. These two key elements of human security action are closely interconnected. However, when a society is faced with a particular threat or a combination of several threats, one of the two may receive more attention and the other may recede into the background. Moreover, over time the relationship between the two may be reversed.

When an emerging infectious disease such as COVID-19 spreads abruptly, people may be alarmed and feel powerless (the downside of empowerment in Figure 1.3), and top-down measures need to be taken to effectively protect those vulnerable to health risks (the upside of protection in the same figure). The same dynamics apply to other human security crises. When violent conflicts or natural disasters give rise to refugees and/or internally displaced persons, it is imperative that protection is provided to them in a timely and effective way. During economic crises, those who have lost their jobs or whose incomes have been significantly reduced must be promptly supported. Thus, in the early stages of a crisis, the provision of protection is particularly important.

However, protection cannot be provided forever, as special measures will have to be terminated at some point. The process of recovery will be driven by the local people and the power and authority of decision-making will be gradually transferred to the people. The resources that can be redirected to protection all at once may also be limited. Where emergency operations are not required, mutual help between residents may play a central role from the outset. In the case of COVID-19, mandatory lockdown proved insufficient: All citizens were required to change their behavior to ensure that they would not infect themselves and others. As noted by Kunii, ‘we are each responsible to protect ourselves, our families, and our communities, rather than relying solely on national leaders and waiting for their measures’ (Kunii 2022). Moreover, in situations where top-down protection efforts are prioritized, such as those involving the military, development practitioners still need to

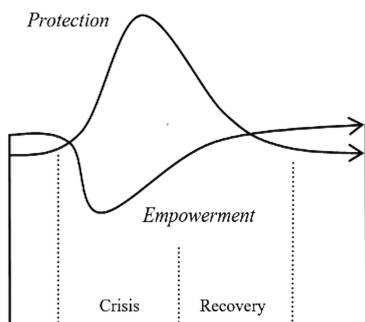


FIGURE 1.3 Resilient recovery, www.palgrave.com/gp/rights-permissions/authors-rights-to-re-use-content/6629026

listen to the voices of the protected and respect their dignity and self-determination. Even in the midst of a crisis, the level of empowerment is not reduced to zero.

To summarize the arguments presented here, in times of emergency crises, actors with resources take the initiative to provide top-down protection to actors experiencing dire distress. Even at that stage, people's participation and empowerment must be promoted as far as possible. Thereafter, the wave of empowerment should be encouraged to continue growing, and as a result, the recovery may gain momentum. This typical flow is illustrated in Figure 1.3. Many of the case studies in this publication deal with protection as an immediate response to COVID-19, but some mechanisms allowing for the gradual resurgence of empowerment should be built into such activities. On the other hand, it is important to note that even in 'normal times', people in need of care have the right and entitlement to receive protection. As shown in Figure 1.3, the level of protection cannot be reduced to zero, as human life is intrinsically precarious, and humans are inherently caring. Only when there are caring institutions and networks can people make confident choices about their lives.

The case studies in this book shed light on the conditions through which protection strengthens people's autonomy and power to choose. In examining the quality of protection, it is necessary to scrutinize whether the resources provided are conducive to restoring and advancing people's right to self-determination, and whether the modalities of support are not perpetuating a system that limits the right to choose on the part of the vulnerable population. As is often witnessed in natural disasters, aid is distributed through heads of households, and if the majority of the recipients are male, the patriarchal system will eventually be reinforced through well-meaning assistance. Causality matters, as human security is a dynamic concept. Protection in the first stage may induce a resurgence of people's empowerment in the second stage—or it may not. The nature of protection as an immediate response to crises should therefore be closely examined.

1.5 Empowerment in Practice: Experiences in East Asia

Building on the outcomes of the research project on human security in East Asia commissioned by the Japan International Cooperation Agency (JICA) (Hernandez et al. 2019; Mine et al. 2019), this project was set up to address the question of empowerment during the COVID-19 health crisis through case studies of Asian countries conducted by researchers in the region. The eight case studies present interesting findings on the state of human security in the age of the Anthropocene and their implications for promoting empowerment among vulnerable communities.

1.5.1 *Growing Complexity of Threats to Human Security*

The prolonged COVID-19 pandemic has demonstrated the growing complexities of the kinds of human security threats facing humanity today. Deepening human connectivity brought on by travel and technology and rapid environmental

changes have significantly contributed to the kinds of emerging infectious diseases (EIDs) confronting the global community, making new types of viruses more virulent and more difficult to contain.

The outbreak of COVID-19 has shown how a health crisis of global proportions can have cross-cutting impacts on economic security, food security, environmental security, and personal security. These multidimensional effects are discussed extensively in each of the case studies in this volume, demonstrating how one threat to human security can have a domino effect on other facets of human security.

1.5.2 Compounding Vulnerabilities

COVID-19 has done more than just create a domino effect; it has compounded existing vulnerabilities and fragilities of different groups and communities. For the undernourished, the health crisis has severely restricted their mobility, making it more difficult to obtain food and access essential services, such as healthcare, and further exacerbated their economic insecurity. Similar challenges are faced by other vulnerable groups, including the elderly, women, and those in disaster-induced displaced populations. Restrictions on people's movement as part of the strict public health measures to stop the spread of the pandemic have impacted the ability of these groups to seek assistance from their families and relatives who do not live with them, as well as friends.

For the urban poor, the pandemic has aggravated their economic condition, impacting their ability to get jobs and pay for food, medicines, shelter, and other essentials. It has also seriously affected the schooling of their children. As noted in the chapter on poverty, sudden and unexpected crises expose the different manifestations of poverty, making those experiencing them even more vulnerable. For the elderly in particular, the pandemic has posed a serious threat not only to their health but also to their mental well-being.

For communities living in conflict settings, the pandemic has aggravated existing fragilities and compounded risks of instability and conflict. For women experiencing health issues, such as access to sexual and reproductive healthcare, the pandemic has only served to worsen their marginalization, making them one of the most at-risk groups in societies. More significantly, the pandemic proved disastrous for the environment, as discarded plastic, masks, and other medical devices increased environmental waste, further polluting rivers and other waterways.

1.5.3 Reinforcing Structural Impediments

For many vulnerable groups, seeking support and protection from the multifaceted impact of a health crisis can mean that they find themselves seriously

challenged, given the structural impediments that had prevented them from being able to achieve human security before the pandemic. These kinds of challenges are shown in the case of the urban poor in Vietnam in Chapter 2, *Urban Poverty during COVID-19 in Vietnam Case Study: Ma Lang-Dong Tien Neighborhood, Ho Chi Minh*. The chapter, written by Vu Le Thao Chi, details the heavy burden borne by these groups in making the right choices to eke out a living, even with limited resources, leading to a cycle of vicious poverty that they cannot break away from. Similarly, Chapter 3, by Jonatan A. Lassa, entitled *COVID-19 Impact on the Most Vulnerable Communities in Indonesia*, discusses the plight of survivors of devastating disasters in Indonesia. These communities' constant struggle to avoid hunger and famine will continue until the problem of displacement and exclusion is resolved.

Structural inequalities are also perpetuated in times of health crises. These inequalities are highlighted in Chapter 4, titled '*Lacking in Care*': *COVID-19 'Shadow Pandemics' in the Philippines (2020–2021)*, which focuses on health workers in the Philippines. The author, Maria Tanyag, has shown how COVID-19 jeopardized the well-being of women health workers who were the frontline responders during the crisis. The pandemic has also exposed what the author calls 'the hidden pandemic', which refers to the rise in the number of cases of domestic violence and restricted access to essential sexual and reproductive health services and supplies.

1.5.4 Providing Protection in Extremely Difficult Circumstances

Finding the right policies to protect the most vulnerable groups has also proven to be very challenging, particularly during a global pandemic. As discussed in the abovementioned chapter on food security by Jonatan Lassa, providing social protection for affected communities who are living in transitional shelters comes with its own set of challenges. However, as the study reveals, setting up emergency cash-transfer programs has proved to be the most efficient means of addressing hunger and malnutrition. This type of program also opened up spaces to empower recipients to have more choices in purchasing food, as well as providing training to develop skills, such as opening small food kiosks in camps to allow greater access to food items in these affected areas.

The provision of protection for the displaced residents of Kuma Village in Kumamoto, Japan, who were affected by the July 2020 South Japan flooding, also offers interesting insights. As discussed by Lisette R. Robles in Chapter 5 on forced migration—titled *Finding Empowerment Amidst Displacement and Immobility during Disasters*—the speedy provision of temporary housing was a valuable policy response and went a long way toward doing more than just attending to the immediate need for the shelter of affected communities; it also addressed the psychosocial impact of disasters. As noted by Robles, housing became an 'important preliminary element that anchor[ed] all other needs'. Most significantly, protection

through temporary housing has provided an enabling environment for residents to empower themselves to help both themselves and other residents cope and adjust to new conditions, as well as the space to engage with other residents to build capacity and resilience. These coping mechanisms, according to Robles, have allowed the affected communities ‘to gain ownership of the crisis and control their future, which is the seed of their empowerment’.

1.5.5 *Protecting the Environment as (the Other) Security Referent*

Chapter 6, on COVID-19 and the environment, *COVID-19 and Plastic Pollution in the Citarum River, Indonesia*, by Arisman, provides a grim reminder of the failure of humanity to exercise care for a rapidly deteriorating environment. Using the case study of plastic pollution in the Citarum River in West Java, Arisman describes how the pandemic has led to several human activities that were extremely detrimental to the health of the river. While the period of the lockdown temporarily slowed down industrial activities and reduced the global carbon footprint, the need for extreme public health measures generated negative externalities. The most widespread impact was the massive increase in the accumulation of waste from single-use medical equipment like face masks and personal protective equipment (PPE), as well as plastic packaging from online shopping and takeaway food, exacerbated by the persistent problem of waste mismanagement. As Arisman notes, this surge in plastic waste is not only an Indonesian problem but a global one.

The environment is an integral component of human security. Any threat or disruption to natural ecosystems threatens the survival and well-being of humans. To stop the further deterioration of the Citarum River and other waterways, Arisman argues for responsibility to be shared between the State and the citizens of Indonesia. Efforts to protect the environment should go beyond proper waste management to include significant behavioral changes in all societies with a view to reducing and stopping plastic consumption. State-led efforts are therefore insufficient to sustain a threatened ecosystem. What is required is an empowered society that exercises its rights and responsibilities to peacefully co-exist with the environment. Empowerment, in this instance, should take a form that is transformational if the ultimate goal is protecting and sustaining human security.

1.5.6 *Exercising and Claiming Back Agency*

Despite the huge challenges the pandemic has brought in terms of providing protection to vulnerable groups such as the elderly, women, and marginalized communities in conflict settings, finding spaces and opportunities for individuals and communities to help themselves and others is still possible. In Chapter 7 on gender security, *From Vertical to Horizontal Empowerment of Women (in) Peace and Security: Toward a Feminist Perspective of Human Security* by Ma Lourdes Veneracion, women’s groups organized themselves to carry out advocacy work, education, and training to empower women to improve their economic condition and emancipate themselves from marginalization and exclusion. Her

case study of the plight of women in a situation of armed conflict in Mindanao province in the Philippines has shown how several women's groups can work together to help prevent violence against women. They were also able to provide humanitarian assistance to displaced women and girls while ensuring their participation in resolving the conflict in the town of Marawi. As argued by Veneracion, through the framework of the Women, Peace, and Security agenda, the advocacy and work of women's civil society groups proved to be invaluable not only in providing protection but also in empowering other women to have their voices heard and develop their capacity to engage in dialogues for peacebuilding and development. Women assisting women demonstrates a two-dimensional process of empowerment that is both top-down (at the national level) and vertical (at the grassroots level).

The same kind of agency by civil society groups is found in the case of the protection of elderly groups in Thailand who suffered the unintended consequences of the strict government policy of imposing lockdowns to contain the COVID-19 pandemic. Chapter 8 is titled *Aging Society in Thailand during the COVID-19 Pandemic*, and was written by Surangrut Jumnianpol, Nithi Nuangjamnong, Thananon Buathong, and Montakarn Chimmamee. The chapter explores the downside risks of strict movement control and includes, among other things, an analysis of the significant hardships faced by the elderly due to decreased income and the lack of access to public health services. Despite the government's provision of several social support schemes for the elderly, these proved to be insufficient, given the long duration of the pandemic and the multiple waves that hit the country. However, with the timely intervention of a network of civil society groups that set up community isolation centers, the lack of services for the elderly was addressed. The community-based civil society initiative designed to deal with the pandemic filled in the gaps in protection and supported the government's efforts in promoting health security for all.

1.5.7 Empowerment at Multiple Levels

The different case studies in this volume illustrate that empowerment can be seen at multiple levels. They describe programs that are either carried out or facilitated by different actors, including the State. While the role of non-state actors is critical in providing protection and helping empowerment, the State remains a key actor in the provision of all facets of human security. Despite its limitations, the State is regarded as the only institution that has 'the mandate to address the claims of all its citizens, regardless of their status in the economy' (Kabeer 2021). This is particularly true in times of global crises, such as the COVID-19 pandemic.

In Chapter 9, titled *COVID-19 and BARMM: The Nested Process of Protection and Empowerment*, on the protection and empowerment of the local people in the territory of the Bangsamoro Autonomous Region in Muslim Mindanao (BARMM) in the Philippines, Sachiko Ishikawa provides perceptive insights into multi-level empowerment strategies carried out by the previous Duterte Administration.

These strategies were designed to address a range of human security challenges caused by the pandemic. Using a ‘nested process’ framework, Ishikawa describes the close interactions between the national and local governments in dealing with the pandemic while managing the other risks and fragilities in the autonomous region. These include the issues of poverty, religion, *rido* (clan conflict), and terrorism. To manage the kinds of security challenges facing this region, the Bangsamoro Transition Authority (BTA) has had to work closely with the national government, local government units, and civil society organizations to enhance the community’s ability to deal with their protection needs.

The multi-level empowerment approach was carried out vertically by the national government, allowing the BTA to have better access to information and support local organizational capacity. The horizontal empowerment was achieved through collaborative efforts among the sub-system actors in the BARMM to deal with the problems of exclusion and protection of communities affected by *rido* and terrorism. Despite the challenges of political transition and peacebuilding, this case study underscores the importance of the devolution of political power to sub-systems in the governance of security challenges as a way to provide local people with an environment that is more conducive to empowerment. As pointed out by Ishikawa, creating spaces for empowerment at multiple levels and among different sets of actors is critically important. This is integral in peacebuilding efforts and in sustaining peace and human security.

1.5.8 *Unpacking the Continuum of Protection and Empowerment*

It would be ideal if protecting the vulnerable communities from the COVID-19 pandemic and consequential threats to human security also led to empowering those same communities to ‘act on their own behalf and on behalf of others’ (Commission on Human Security 2003). But as the case studies have shown, the process is not seamless and is beset by several challenges. More significantly, context matters in defining the kind of protection provided and the extent of such protection. The context also allows us to examine the kind of normative environment that enables or impedes empowerment.

The concept of human security compels us to answer the questions we asked at the beginning of this chapter: ‘whose security and for whom?’ To be sure, state capacity has been seriously challenged as human security threats, like the COVID-19 pandemic, become more complex. The severity of the global health crisis has generated multiple competing demands for protection, which has, in turn, required more concerted efforts to enable empowerment for multiple stakeholders to support state-led programs. Communities needing protection cannot be passive recipients but must be part of an inclusive, transformational process that engenders empowerment. Protection and empowerment, therefore, require no less than a multi-stakeholder and multi-level commitment to achieve human security. The conditions under which empowerment is advanced will be discussed again in Chapter 10, the concluding chapter of this volume.

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2

URBAN POVERTY DURING COVID-19 IN VIETNAM

Case Study of Ma Lang-Dong Tien
Neighborhood, Ho Chi Minh

Vu Le Thao Chi

2.1 Introduction

As a socialist country, Vietnam has been consistent in its ambition to achieve the universalization of healthcare and primary education—both important pre-conditions for empowering people to ‘make informed choices’ and ‘act on their own behalf’ (Commission on Human Security 2003).¹ Vietnamese people have enjoyed the increase in freedom to make their own choices. While freedom of choice is generally considered a positive aspect of life, it can also be a burden for many people, including in situations in which people need to make crucial decisions about basic healthcare and education. People can find themselves engaged in cumbersome decision-making about almost every aspect of daily life. Moreover, this freedom to make choices only protects people’s autonomy to make their own choices, while the choices themselves do not necessarily reflect their welfare status (Sunstein 2015, 95), especially in situations in which income is a major constraint.

This chapter examines the Vietnamese urban poor’s struggles despite the government’s poverty alleviation efforts before and during COVID-19. The greatest challenge for the government’s empowerment policies is the heterogeneity of the urban population and the diversity of their problems. These problems are deepened by the multiplicity of various underlying socio-economic and historical issues. This reality has hindered the aim of freedom becoming an essential instrument for people to live the life they value—the noble goal of human security.

1 The idea of human security as the freedom to ‘make informed choices’ and ‘act on their own behalf’ was first introduced in *Human Security Now* (Commission on Human Security 2003). This built on the concepts of ‘freedom from fear’ and ‘freedom from want’, which were included in the *Human Development Report 1994* (UNDP 1994).

There are high hopes for the ongoing efforts of the Vietnamese government, with its piecemeal reform approach, to better embrace diversity. The author suggests the need for increased attention to reducing the burden of decision-making becoming overwhelming by providing minimum protection (e.g., for healthcare) and building a local network of volunteers who can help to provide a timely response to contingencies. Hence, people can concentrate their limited resources on other important aspects of life. This author believes that minimum protection for those who fall out of the government's safety net will, in the long run, reinforce empowerment, through which people's realization of autonomy can generate better welfare for themselves.

2.2 Poverty in Ho Chi Minh City and Its Dual Contingencies during COVID-19

2.2.1 *Ho Chi Minh: A City without Poor Households*

Since the 1980s, Vietnam has recorded remarkable economic development, with an annual growth rate of 6% to 9% (World Bank n.d.), thus facilitating poverty reduction across the country. The poverty rate dropped from 58% in 1993 to 37% in 1998 (Glewwe and Dang 2011). According to Glewwe and Dang (2011, 583), 'such a sharp drop in poverty in only five years is an achievement that is rarely seen in any developing country'. Vietnam continued to score impressive achievements in poverty reduction in the following years, with the poverty rate declining to 15.5% in 2006 (General Statistics Office (GSO) 2007). From 2016 to 2020,² the percentage of poor households dropped sharply, falling from 9.9% to 4.8% (GSO 2020). In 2021, despite the impacts of COVID-19, the poverty rate decreased to 2.23% (609,049 households) (Ministry of Labor, Invalids and Social Affairs (MOLISA) 2022). However, this number is still based on the national poverty line for 2016–2020. Vietnam will apply a new poverty line starting from 2022: 24 million Vietnamese dong (VND) per person per year (USD 1,200)³ for urban areas and VND 18 million per person per year (USD 900) for rural areas (OLLD 2021a), which is more than double the previous poverty line. Changes in poverty rates can also be seen in Ho Chi Minh City (hereafter, the City or HCM), which has been described as the economic hub of the country (contributing 22% to the national GDP and 27% to the national budget in 2020) (Nguyen 2021). The City boasts a similar success story in poverty reduction. In 1992, when the City started its 'hunger eradication and poverty alleviation' program, the poverty rate

2 In 2016, Vietnam started applying the multiple poverty index (MPI) to measure poverty based upon Decision 59/2015/QĐ-TTg on promulgating the MPI from 2016 to 2020. The national income poverty line applied during this period was 10,800,000 VND per person per year for urban areas and 8,400,000 VND per person per year for rural areas (OLLD 2015b).

3 USD 1 is roughly equal to VND 20,000.

in the City was 17%, with 121,722 poor households (Nguyen 2015). Twenty years later, the City, together with neighboring Binh Duong, are the only two areas in Vietnam that have a record of no poor households or near-poor households in both of the national surveys in 2015 (OLLD (Thu Vien Phap Luat—Online Library of Legal Documents) 2016) and 2018 (OLLD 2019b) (see Footnote 2).

In addition to its efforts to alleviate poverty, HCM has consistently revised and increased its poverty line, independent of the national poverty line, every three to four years. This is designed to capture the poverty situation more precisely, given its fast-growing economy. The City's poverty line for 2016–2020 is VND 21 million per person per year for poor households and VND 28 million per person per year for near-poor households⁴ (OLLD 2015a). This is twice as high as the national poverty line for urban areas and the highest among the metropolitan areas in Vietnam. Below this poverty line, there were 3,767 poor households (0.19%) and 22,882 near-poor households (1.15%) in 2019 (Quang Huy 2019). In 2019, the City revised its poverty line (2016–2020) to VND 28 million per person per year for poor households and VND 36 million per person per year for near-poor households (OLLD 2019a). With this revised poverty line, as of June 2020, the number of poor households grew almost threefold to 9,672 households (0.39%), while the number of near-poor households shrank slightly to 22,864 (0.93%) (Thanh Vu et al. 2020).

In 2020, HCM again increased its poverty line for the period of 2021–2025 to VND 36 million per person per year for poor households and VND 45 million per person per year for near-poor households (OLLD 2020). In January 2021, HCM had 53,901 poor and near-poor households (2.13%) (Pham 2021). Ten months later, in October 2021, the City had an additional 4,118 poor and near-poor households, with a total of 58,019 poor and near-poor households (accounting for 2.29% of the total population of HCM) (Pham 2021).

2.2.2 A Public Health Crisis since April 2021

With its zero-COVID strategy, Vietnam went through the first three ‘mild’ waves⁵ of the pandemic with a small number of infections (2,852) and an especially small number of deaths (35) (Lam Ngoc 2021). The fourth wave, which started in HCM on April 27, 2021, engulfed the country in its worst medical crisis since the pandemic began. There were close to 800,000 new infections and more than 19,000

4 Since 2014, Vietnam began to separate near-poor households from poor households depending on the level of difficulty. For example, members of poor households are eligible for *free* health insurance cards, while members of near-poor households are subsidized at a rate of 70%.

5 The first wave took place between January 23 and July 24, 2020, resulting in 415 infections (106 domestic cases, 309 at entry points, no deaths); second wave: July 25, 2020–January 27, 2021, with 1,136 infections (554 domestic infections and 582 at entry points); third wave: January 28–April 26, 2021, with 1,301 infections (910 domestic infections and 391 at entry points) and 35 deaths.

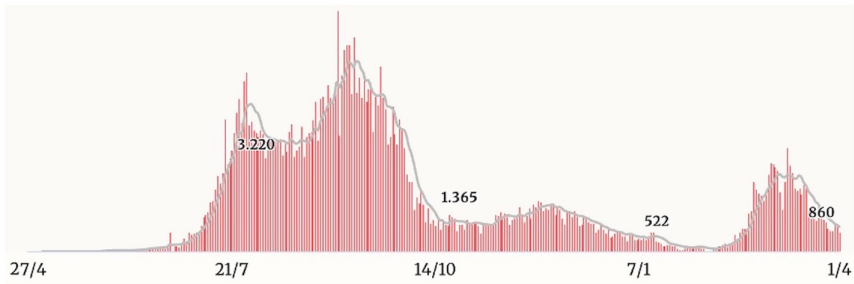


FIGURE 2.1 Daily infections in Ho Chi Minh, April 27, 2021–April 9, 2022, <https://vnexpress.net/covid-19/covid-19-viet-nam>

deaths within six months (from the end of April until the end of September 2021) (Vietnamplus 2021). HCM suffered the most, accounting for half of the total infections (388,659) and three-quarters of total deaths (14,946) as of September 30, 2021 (Huu Cong 2021), giving the city a COVID-19 death rate of 4.95% of identified cases. This was well above the national average and the rates of peer cities in Southeast Asia (Onishi and Li 2021). Despite a range of strict restrictions imposed on the City starting from the end of May 2021, the pandemic did not show any sign of slowing down in the City until mid-September of the same year (Figure 2.1). Starting from October 1, 2021, the City lifted all restrictions. Vietnam shifted from a zero-COVID strategy to a ‘safe adaption to the pandemic, with vaccination being the key to helping the country gradually resume social and economic activities’ (Quang Minh 2021).

During the fourth wave, the central government implemented draconian measures in HCM but allowed other localities to exercise a large margin of autonomy in responding to COVID-19, depending on the seriousness of the situation. The following shows the timeline of restrictions implemented in HCM since May 2021:

- May 31, 2021: The City applied Government Directive 15⁶ for 15 days and extended the application until June 29.

6 Directive 15 asked localities across the country to stop social events at which over 20 people congregated in a single place and cease gatherings of 10 or more people outside workplaces, schools, and hospitals. Directive 10 suspended public transportation including taxis, buses, street markets, and non-essential services; prohibited gatherings of more than three people in public places and suspended all meetings if unnecessary; allowed people to go out only to buy food, medicines, and in cases of emergency; encouraged organizations/offices to request their staff to work from home and only go to the office in cases of necessity. Directive 16 did not allow gatherings of more than two people and asked people to stay at home, only go outside in emergencies, only buy food and medicine, and only work in factories, production facilities, and businesses that involved the trade of ‘essential’ goods and services.

- June 19, 2021: The City issued Directive 10 to supplement Directive 15.
- July 9, 2021: The City applied Directive 16 (Social Quarantine of the entire City) and extended its enforcement four times until September 31.
- August 23, 2021: The government sent soldiers and militia forces into the City.
- September 31, 2021: Directive 16 was lifted.

Vietnam claimed that Directive 16—the strictest restriction—was not a lockdown and applied the Directive only in specific locations where they detected new infections. However, the City came under a lockdown-like state with close to 4,000 locations under the Directive as of July 27, 2021 (Tuoi tre Online 2021). The drastic measures taken by the governments and City had a tremendous impact on the lives of many.

2.2.3 Poverty Exposed

The year 2021 was not the first time Vietnam implemented strict restrictions on its population. In 2020, despite the small number of infections (four infections per day by March 31, 2020 (HCDC 2020)), the Vietnamese government, in order to pre-empt the spread of the infection, implemented a three-week ‘Social Quarantine’ (Cách ly toàn xã hội) across the entire country under the principle: *‘family isolated from family, hamlet isolated from hamlet, village isolated from village, district isolated from district, province isolated from the province’* (MOH 2020). Urban areas, like Ho Chi Minh City and Hanoi, were the hardest hit. The UN reported⁷ that the proportion of income poor in urban areas in December 2019 was 11.2% but jumped to 56% in April 2020, while it rose from 9.7% to 44.5% in rural areas. The situation improved somewhat in May 2020, with the proportion down to 31.7% in urban areas, though this was still much higher than the 18.9% recorded in rural areas (UNV 2020, 34). As one informant living in the Ma Lang neighborhood recalled,

I have never seen anything like this. In the 2008 crisis, it was difficult, but people still could move around to make ends meet. This time, everything was just standing still or even frozen. People couldn’t move. They could not do anything to earn money.

The impacts of the social restrictions in 2021 were far worse for the urban poor. According to the report ‘Impacts of Covid-19 on the Employment Situation in the

7 In April and May 2020, the UNDP and UN Women commissioned a rapid-impact assessment and monitoring exercise (RIM 2020) to collect and analyze information on the socio-economic impact of COVID-19 on 930 households and 935 enterprises (in 58/63 provinces) that were vulnerable to a sudden loss or reduction of income (UNV 2020).

Third Quarter of 2021' (GSO 2021), the total number of unemployed people in Vietnam was 1.7 million (3.98%). This represented a 450,000 increase compared to the same quarter of 2020, making it the highest unemployment rate in Vietnam over the past ten years. The unemployment rate in the City was exceptionally high at 9.93% (four times higher than Hanoi, where the rate was 2.49%). Unemployment rates over the four months under restrictions placed the millions of people in big cities in situations of unprecedented precarity.

There have been no surveys on the number of people affected by COVID-19 in 2021 in HCM. Nonetheless, the city's efforts to 'capture' those affected in its safety net reveal part of the picture. On June 25, 2021, the City's People Committee issued Resolution 9/2020 NQ-HDND to include informal workers that fall into one of six specified groups considered to be legitimate beneficiaries of the city support package.⁸ In July 2021, the HCM Department of Labor, Invalids, and Social Affairs acknowledged that 27,000 informal workers in the city fell outside of the six categories in Resolution 9 (Chi 2021). In early August 2021, the same department made an official request to the City's People's Committee to add five more categories of informal jobs,⁹ with the expected number of people requiring support rising to 465,150 (Minh Quan 2021). In mid-September 2021, the same department submitted another proposal to the City's People's Committee to officially request support for the 7.5 million people—out of a total citywide population of 9 million—experiencing an 'extremely difficult situation' (Tran 2021).

Another more telling piece of evidence of the severe impact of COVID-19 on the lives of the people in the city is the increase in the number of people seeking to exit social insurance schemes to collect the accumulated premiums. According to Mr Nguyen Van Lam, Deputy Director of the City's Department of Labor, Invalids, and Social Affairs, there was an increase in the number of people exiting social insurance. In 2021 alone, almost 100,000 people (out of 2.2 million policyholders) (VnExpress.net 2021) in the city decided to do so at the risk of having no pension when they retire. The conditions for people to withdraw are that they have to have been unemployed for a year and paid social insurance premiums for less than 20 years (Van 2022). The main reason for this massive withdrawal, according to Mr Nguyen, was the loss of jobs, and therefore loss of income, which pushed people to withdraw their premiums to cover their living expenses. The alternative was to find employment in informal sectors (where social insurance is not compulsory).

8 The original six groups of informal workers included street vendors, waste collectors, goods transporters, lottery ticket sellers, service-related businesses, and others (OLLD 2021b).

9 The five additional categories included: 1) babysitters, cleaners, and helpers; 2) security guards and bike/car washers; 3) bike repairers; 4) newspaper sellers and shoe polishers; 5) others with similar characteristics.

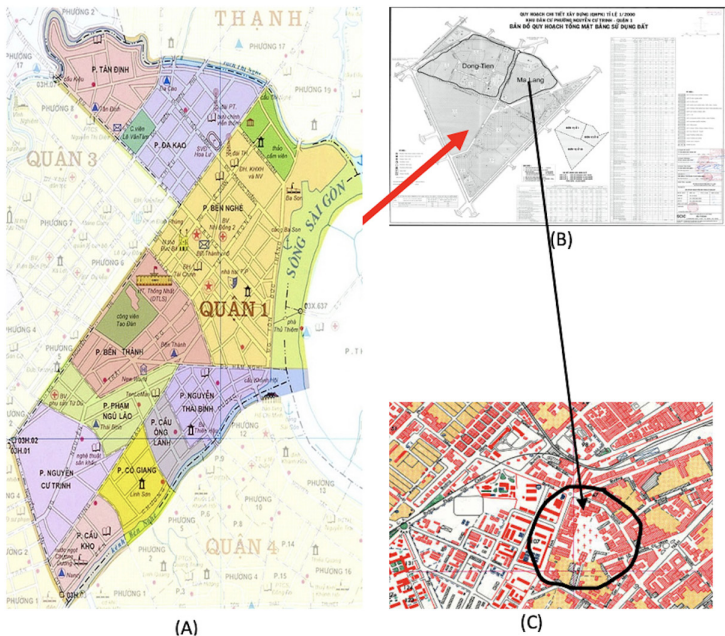


FIGURE 2.2 (A) District 1 of Ho Chi Minh City. Nguyen Cu Trinh ward is shaded in light purple, <https://bandovietnam.com.vn/ban-do-thanh-pho-ho-chi-minh>, (B) Map of Nguyen Cu Trinh ward, with Ma Lang and Dong Tien circled, https://sqhkt-qlqh.tphcm.gov.vn/api/doan/qhpk/760_2019_3140_00/download, (C) Ma Lang area in 1959 with red crosses in the middle. It was then a graveyard for a Catholic church, <https://collections.lib.uwm.edu/digital/collection/agdm/id/10640>

2.3 Poverty as a Way of Living

Ma Lang and Dong Tien are two poor neighborhoods located in Nguyen Cu Trinh Ward (size: 76.23 ha, population: 34,357 as of 2016) (SQHKT n.d.). They are part of District 1 (see Figure 2.2a (A)), the city's busiest and wealthiest district, which accounts for half of the population of the entire ward. The population of Dong Tien is approximately 10,000, while that of Ma Lang¹⁰ is about 7,100 (2016). Ma Lang was once the graveyard of a Catholic church (see Figure 2.2b (B)). After the French departed, it became an abandoned area where the homeless gathered. In 1979, the city moved the graves to a different place and turned Ma Lang as well

¹⁰ Ma Lang is not the official administrative name but is the name used by its residents. There are many explanations for the name 'Ma Lang', most of which point to the origin of the word 'Ma', meaning 'a grave'.

as Dong Tien—the area on the opposite side (see Figure 2.2c (C))—into a ‘temporary settlement’ (khu tạm cư) for the homeless and vagabonds, many of whom were returnees from new economic zones (returnees are referred to as ‘dân kinh tế mới’, or new economy people). After nearly 50 years, Ma Lang-Dong Tien is still known as a ‘temporary settlement’.

2.3.1 Outline of Respondents’ Living Situations

We started preliminary research in October 2020 with four in-depth interviews. Due to the unexpected development of COVID-19 in Vietnam, the research did not resume until November 2021 and lasted until the end of the same month. Altogether, 23 respondents participated in in-depth interviews and 60 in the questionnaire surveys (59 from Ma Lang and 24 from Dong Tien). Most of the respondents are females (65/83). The age groups are 50–59 (27) and 60–69 (21), with 27 under 40, and eight over 70.

2.3.1.1 Education and Housing Conditions

The report, ‘Multidimensional Poverty 2016–2020’ by GSO and UNDP (GSO n.d.), points out that ‘Health insurance, adult education, and living squares are indicators [that can] contribute significantly on multidimensional poverty in [the] urban area’. Apart from health insurance (to be discussed later), adult education and the of these respondents confirm this statement. Their educational attainment is also low (see Table 2.1), with only five having been to/attending college. Seven went to high school, while the rest have not completed junior high school (21) or elementary school (31). Ten of them have never attended school.

Out of the participants, 22 out of the 83 rent their houses, with rental fees taking up the largest portion of their living expenses. Fifty people are free from the cost of renting a house, out of which 36 people say they ‘have a house’. Another 24 out of the 50 people say that the house was provided by or rented from the State (nhà nước). In the 1980s, the City turned Ma Lang and Dong Tien into temporary

TABLE 2.1 Educational attainment

<i>Educational Attainment</i>	<i>Number of Respondents</i>
No schooling	10
Elementary	31
Junior High	21
High School	7
College/University	5
NA	9
Total	83

places for the homeless and provided shelters. Most of them have lived in these shelters (later improved into houses) until now. They have a home and do not need to pay rent, but whether those who do not pay rent have ownership over the place remains unclear. In terms of house size, for 21 respondents (mainly those who own their own homes),¹¹ the average size is 15m². Five are under 7m² for three to four members living together. The average size per member is 2.7 m², much smaller than the 8m² per person, which is the average housing size the City considers poor (GSO n.d.). Others, especially those who rent houses, report the size in terms of the number of rooms or floors.

2.3.1.2 Informal Sector Employment

Most of the participants hold informal employment characterized by wage income but face job instability and a lack of social insurance (Table 2.2). Only seven had formal jobs for which they received a salary, but all lost their jobs during COVID-19. Another characteristic of their informal employment is that one person often holds many jobs simultaneously. Even though they say that they are mainly housewives, they do have some earnings. They engage in ‘small businesses’ (e.g., buying waste materials and selling them) whenever opportunities present themselves.

TABLE 2.2 Study participants by employment type

Housewife	15
Small businesses	29
Labor work (typically for females)	14
Labor work (typically for males)	11
Salary-based work	7
Freelancer	1
Retired/stopped working	5
NA	1
Total	83

Notes about the jobs they do:

- *Small business: buying and selling food, or lottery tickets; buying and selling scrap metals/wasted materials*
- *Labor work typically for females: house helper, babysitter, restaurant waitress; labor work typically for males: motorbike taxi driver, transporter, construction worker*
- *Salary-based work (receiving a monthly salary instead of daily wages): security guard, kindergarten teacher, factory worker, and the local militia*

Those who used the word ‘retired’ have either stopped working or may have lost their jobs even before COVID-19

11 Others, especially those who rent houses, reported the size of residence in terms of the number of rooms or floors.

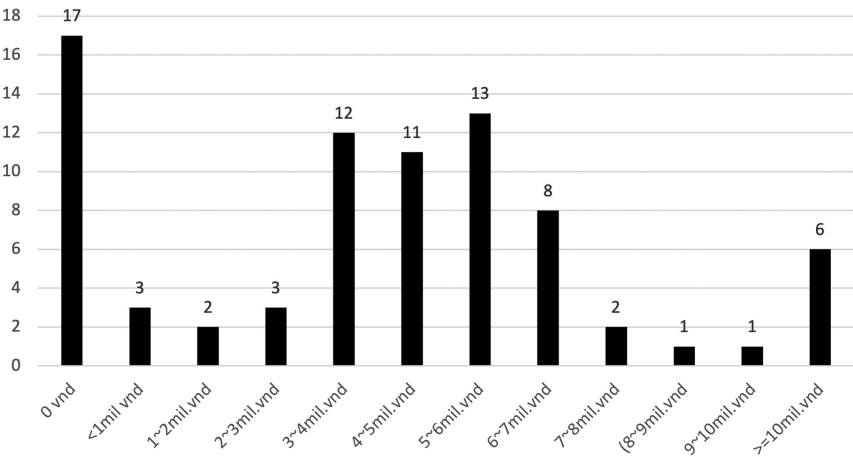


FIGURE 2.3 Self-evaluated monthly income before the fourth COVID-19 wave

2.3.1.3 Income

Most of the neighborhood residents are likely to fall within the middle four income brackets (VND 3–7 million, or USD 150–350 per year) shown in Figure 2.3. Their individual incomes lie between the City poverty lines (less than VND 3 million per month per person) and the estimated minimum income required to support living in the City (at least VND 7.5 million per person) (VnExpress.net 2022). Seventeen people who claim to have no income are mainly housewives or elderly (over 60).

Three out of six whose incomes are VND 10 million or more are male (all lost their jobs during COVID-19) and are the primary wage earners, while the remaining three are female and run small businesses. Because of the nature of informal employment, one important consideration is the wide fluctuations in their incomes. Also, for this reason, there is a likely margin of error in their claimed incomes.

Six people said that they are certified as living in poor or near-poor households. Only three receive monthly financial support of VND 300,000–350,000 (USD 15–17). Others receive occasional presents/cash and other benefits such as subsidized health insurance or subsidized education for their children/grandchildren. Three currently do not have any steady source of income. One is selling lottery tickets for USD 3–4 per day, and two (a sewer worker and food hawker) occasionally earn VND 3–4 million (USD 150–200 per month), which is within the standard range of income for other residents.

2.3.1.4 Debts and Savings

People with savings are rare among the respondents compared to those with debts (32). Only four claim to have savings, and these are exceptions: an 18-year college

student, a college graduate whose income was higher than average before COVID-19 (VND 6–9 million), a 52-year-old single lady who seems to enjoy ‘saving’ everything, including spending little money on food and electricity, and a 54-year-old female (with an income of 3 million VND) who did not provide any details of her savings.

Regarding debt, five specifically blamed their situation on COVID-19. Other than this, debts are normal: They borrow money when they run into difficulty, or they can only make repayments of the interest but not the principal amount.

This means that not having any debt can be considered a success. NTC (F, 52) emphasized it five times in her talk. ‘I don’t owe money to anyone’, and she added, ‘my life is better than others because of two things: I have a house (therefore no rental fees), and I don’t have debts’.

2.3.1.5 Working Elderly (People over 60–80)

There is no retirement age or pension for people in this community. The elderly here are part of the 64.4% of the elderly (those over 60) in Vietnam who do not have any pension or social protection (the number of people over 60 is 13.4 million) (Nhat Linh 2021). Their livelihoods are still heavily contingent on what they can do to generate income or how they contribute to the household economy. Only six had stopped working because of old age or lost their jobs before the COVID-19 pandemic hit, and 23 people over 60 are still engaged in waged employment to support themselves and their families (adult children and grandchildren). Out of the 23, five are housewives. They take on the burden of household chores, preparing three meals for all the members, doing laundry, and carrying out other activities for their extended families.

2.3.2 Political Economy of the Urban Poor

Like a merry-go-round, money—mainly in the form of petty cash—is not allowed to sit idle. Savings are rare, and having debts is a way to keep the flow of money moving. ‘Savings’, to the local people, is an action, not a noun. They frequently use it to describe an act of spending less on one thing to ensure that there is enough money for other things. As stated by TTN (F, 55): ‘I save by spending less on groceries so that I can buy bath soap; I cut down on coffee money to buy medicine’.

Money must be available and ready for use, no matter how small. It is called ‘the capital’ (tiền vốn). This cash is for consumption and other benefit-generating activities, including lending money for interest or spontaneous investments when an opportunity arises:

I don’t have any savings, but I have a little extra up my sleeve—around VND 50–100 thousand (USD 2–3) as my capital (tiền vốn) to buy stuff (usually wasted materials) if somebody calls. People will sell the stuff to others if I don’t have money available.

(TTN, F, 52)

TABLE 2.3 Participants’ self-reported debts and savings

	<i>Savings</i>	<i>Debts</i>
Yes	4	32
No	57	30
N/A	22	21
Total	83	83

The dire need for cash creates the common phenomenon of debts (as seen in Table 2.3). Borrowing money from acquaintances (24 people) is many people’s preferred choice, but they did not specify to whom among their acquaintances they owed their debts. They also borrow money from local lenders. One of the local lenders is Mrs NTU (F, 60), an in-depth interview respondent. The characteristics of their debts are that each is small, and many small debts amount to a sizeable total. ‘I have debts of around VND ten million from 2–3 lenders’ (NTN, F, 60). PTTN (F, 48) answered that she ‘constantly’ resorted to high-interest-rate loans, and her total debts are around VND 50 million (USD 2,500).

For these community residents, decisions related to money-borrowing are among the many they make daily. When they need money, they borrow it from people they know. Loans (especially local lenders) are easy to access. They can have many debts from the same lenders or different lenders. Paying back the debts is a task routinized in their everyday life. Mrs TTV said, ‘I have no idea why I can live like this (having debts) for many years’. That reality makes not having debt a ‘success’ for people like NTC (F, 52), who thinks her life is better than the lives of others because she does not have debts.

For that reason, the relationship between money borrowers and money lenders is one of the backbones of this local and informal economy. The money-lending business had its heyday in the 1980s and 1990s. Around that time, it was impossible for many residents who did not have documents or had lost their documents, like ID or household registrations, to access financial institutions (banks). The local money lenders offered an alternative: borrowing money quickly but at high-interest rates.

Mrs U and her whole family (her mother, siblings, and later husband and children) have been in this business for years. They started the business not because they had abundant ‘extra’ money. They were also among the first generation in Dong Tien-Ma Lang, returning from New Economic Zones (NEZs) (see Section 2.3), sharing a low starting point like the other residents. They invested small extra earnings from the business in *hụi*, the ‘merry-go-round’ group.¹² When it was Mrs

12 ‘Hụi’ in Vietnamese is similar to a ‘merry-go-round’ form of microfinance among the poor women in Kibera, a slum area in Nairobi, Kenya. Hụi began around the 1980s and peaked in the 1990s, but has dwindled in recent years. Depending on the size of the groups, they decide on a

U's turn for the 'pool money' (giật hụi),¹³ she used that money to lend to others. For example, if she had VND 2 million, she would lend it to two to three people at a small daily interest of VND 20–30 thousand (standing loans—*tiền đứng*).¹⁴ The residents call such money 'rotating money' (*tiền xoay*), the money that is in circulation (e.g., being borrowed). She accumulated this extra small interest to undertake other business. She does not want to risk lending a large amount in case people do not return the money. When people blow up (i.e., fail to repay) their debts—her rotating money—she has to resort to her 'capital' money.

The prime condition for borrowers is being an 'acquaintance' or somebody the lender already knows. Mrs U's clients are mostly from the Dong Tien area, where she resides, while her son's clients are from Ma Lang, where he and his family live. Other than that, the lenders rely on their casual judgments of the borrowers' ability to work and generate income, their age, their strength, and the purposes of the loans. The lack of work or family stability is all too evident a prerequisite for this money transaction in a community where most people are informal sector laborers, compelled to take on more than one job to survive.

2.4 Poverty as an Enduring Legacy of War

Mrs U¹⁵ is among the 13 respondents (ten females and three males) in their 40s (1), 50s (5), 60s (4), 70s (2), and 80s (1) who reported having experience of 'New Economic Zones' (NEZs—*kinh te moi*). They were the first residents who moved to Ma Lang/Dong Tien in the 1970s and early 1980s 'after their return' from an

fixed, and usually small, amount of *contributing money* that goes toward the pool (Góp hụi). Then the group members determine who and when a member will receive the pool money—*jackpot money* (Giật hụi).

- 13 The pool money is the total money that members contribute for that round. The group members decide when and who can get the pool money.
- 14 Standing loans (*tiền vay đứng*) are a kind of debt whereby borrowers need to pay only interest on an agreed schedule (on a daily basis for the poor) and pay the loan in full by the end of the term. Although the interest rate is higher than the 'installment loan', the poor prefer 'standing' loans because of the affordability of daily payments and the possibility of renewing the loan at the end of the schedule (they need to continue paying the daily interest fee on a new schedule). People can also opt for installment loans (*tiền vay trả góp*), a kind of debt whereby borrowers divide their payments (interest included) into several installments over a scheduled period. However, in this community, people prefer 'standing loans' over 'installment loans' because it is easier to manage daily repayments.
- 15 Mrs U was born in 1961 in Saigon. Two months after Saigon's liberation (May 1975), her mother signed the whole family up to go to an NEZ, fearing the consequences for her two sons, who had worked for the Southern Army before 1975. Over the next seven to eight years, the family moved to three different NEZs before returning to Saigon in 1982. They felt 'lucky' to find Dong Tien as a temporary resettlement community around 1982 (or 1983). According to her, the temporary shelters were only available on this side of Dong Tien but not yet in Ma Lang. Later, a dozen shelters in Dong Tien collapsed, leading to an exodus of people, including her mother and siblings, moving to the other side, Ma Lang. She was the only family member to stay in Dong Tien.

NEZ. The timing of their arrival also overlaps with many other senior residents (Table 2.4).

The predominant timing (the late 1970s and early 1980s) of the respondents' (29) relocation into this community reveals an important aspect of the historical background in the creation of this community.

Until 1975, Saigon (Ho Chi Minh City) was an 'artificial economy', with an annual 700 million USD in foreign aid, and a significant portion of the active urban population was supported directly and indirectly by the war economy (Desbarats 1987, 48). The end of the war in 1975 terminated that 'artificial economy', pushing around 1.5 million people, including those who earned a living by providing various services to the military, into a state of unemployment (Desbarats 1987, 48).

After 1975, the Provisional Revolutionary Government (PRG) wasted no time starting its population redistribution program 'to facilitate the return of war refugees to their original villages; and to create New Economic Zones on virgin and fallow land and in the green belts planned for development around the major cities' (Desbarats 1987, 51). The three critical periods in this program are the period of the Provisional Revolutionary Government (PRG), marked predominantly by the repatriation of war refugees (1975–1976); the Second Five-Year Plan, dominated by the implementation of the New Economic Zones policy (1976–1980); and the Third Five-Year Plan, characterized by the liberalization of rural development policies (1981–1985).

The de-urbanization of southern cities, especially Saigon (current HCM), was also designed to address internal security issues resulting from the population redistribution efforts. The PRG aimed to reduce the City's population from 4 million to 2 million. The official figure of 1,472,000 settlers given for the Second Plan period could be overestimated—it is unclear whether it includes the settlers 'repatriated' under the PRG (Desbarats 1987, 59). However, due to the harsh conditions in New Economic Zones, many of these new settlers, including those who returned to their home villages, returned to the cities. Data revealed that, out of the initial one million people who departed, almost half secretly moved back into the city. Returnees from the NEZs had to live illegally with relatives and friends or camp in streets, parks, or even cemeteries. They engaged in open-air street markets, smuggling, or any other underground activity that allowed them to survive. The most visible effects of return migration have been a swelling of the vagrant population of NEZ returnees who were ineligible for food rations and a marked increase in robbery and petty crime (Desbarats 1987, 61–62). This episode is still vivid in Mrs U's memory:

Many of these NEZ returnees didn't have ID documents. Therefore, it was hard to find any jobs. The most decent jobs they could do were cyclo-taxis or garbage collection. Other than that, people had no choice but to resort to robbing, stealing, prostitution, [...] or selling their blood in exchange for money for goods.

TABLE 2.4 Timing of participants' relocating to Dong Tien and Ma Lang (among the 44 respondents who specified this in their answers)

	1950s	1960s	1970s	1980–1985	1986–1989	1990s	2000s	2010s	Total
Ma Lang	0	0	4	16	1	3	0	2	26
Dong Tien	0	0		9	1	4	2	2	18
Total	0	0	4	25	2	7	2	4	44

To tackle the homeless and vagabonds filling the City's streets, the former prime minister Vo Van Kien (1991–1997)—a reformist and key figure behind the economic reforms in the late 1980s—decided to move the graves elsewhere and turn Ma Lang into a temporary settlement for the homeless (Dai Chon et al. 2017). Since then, the area has been known as a 'temporary resettlement for new economy people' instead of a graveyard. The impacts of the war did not reach these people until 1975.

2.4.1 The Vicious Circle of Poverty and the Loss of the Second Generation

Mrs U observed that the second generation of children growing up in this neighborhood did not receive an adequate education like the first generation. There are many reasons behind this, such as the loss of their personal documents, which hindered their access to public services. Moreover, some—especially among those who used to work for the Southern government—were suspicious of the education system under the new government. Working to meet the basic needs of the whole family was a priority for all family members, including children, leaving them little time to experience their childhood. Consequently, the second generation ended up living lives almost identical to those of their parents. They were also deeply caught in the struggles of everyday life: ensuring that they had sufficient money, food, and clothes. As Mrs H, a 65-year-old lady, said, 'I never thought that my daughter would follow me in my footsteps like this (working as a house helper)'.

There was another dangerous trap for the second generation who grew up in this community: drugs. The neighborhood was considered a hot spot for drugs in the City in the 1990s, and drugs became an invasive issue for many years. According to Thien, the research assistant for this chapter, who is also a resident in the community, drugs deprived the area, especially Ma Lang, of many young working-age residents. Three of the respondents lost their sons due to drugs. In this way, the lack of education and the early exposure to such a problematic living environment deprived the second generation of their childhood as a basic right. Now the hope of Mrs U's whole (extended) family is vested in the third generation, one of whom is in her third year of nursing studies. The father of this girl, who sells sticky rice as a breakfast dish, has to earn about USD 2,000 to pay for his daughter's tuition each year for four years.

Poverty manifests itself in various ways in this community. It is also embodied in the diverse array of underlying problems, many of which are the legacies of the prolonged war in this region. As a result, poverty poses a significant challenge to the new government in developing policies that will address the underlying issues, especially given the country's limited resources having emerged from a war situation.

2.5 Poverty as Suffering during COVID-19

As the fourth wave of COVID-19 took over the City, Ma Lang was among the first areas to be placed under lockdown after a single infection was detected at the end of May 2021. Together with Dong Tien, the whole neighborhood was ‘frozen’ for almost four months, with restricted mobility until the end of September. At least 47 out of the 83 respondents, together with their family members, were infected during this wave.

The four months of restriction put residents’ lives under extreme conditions. They could not move around, and money ceased to circulate in the community. They relied heavily on external support to survive.

The 50 questionnaire respondents reported receiving more help from government channels (37, 44) and from donors (37, 46) than from their relatives (family members and close relatives) (26, 22) in both 2020 and 2021. The year 2021 saw COVID-19 hit the City particularly hard. Coupled with the four-month lockdown, nearly all respondents said they had received more help from the government and donors (44, 46 respectively) than from relatives (22, compared to 26 the previous year).

Contingencies can be either expected or unexpected disruptions that people or organizations may experience. The questionnaire lists four situations: health problems, no food, no job, and no money. Regardless of age or health conditions, most respondents provided similar answers on what they do when they experience health problems. They go to a nearby drugstore to get medicine for mild health problems. Where health insurance is not applicable, they rely mainly on self-medication or over-the-counter prescriptions, resorting to hospitals only for serious cases. Four respondents mentioned ‘reliance on relatives and family members’ in addition to the answer above. Of the 50 participants, 27 said that they have underlying health conditions (mostly high blood pressure or other heart-related problems). Three are between the ages of ten and 30, while the rest are in their 50s.

Thirty claimed to have experienced a situation of ‘no food’ during the pandemic ‘season’. Thirty-six had experienced having ‘no job’, with 32 losing their jobs during COVID-19, and two claiming to have been unemployed for a ‘long time’. Thirty-four had experienced having ‘no money’, out of whom 24 had experienced this lack of money during COVID-19, while one said ‘always’. Sixteen experienced all four of the contingencies during COVID-19 (with no specific mention of when, but most likely in 2021).

When people do not have a job, they tend to rely more on donors (11) than their relatives (5). Note, however, that when they said they relied on donors after losing their jobs, they likely did not mean that these donors helped them find new employment but rather that they gave them food and other necessities. When it comes to money, access to assistance is scarcer. They only borrow or ask for money from relatives (3) or neighbors (1).

There appears to be a discrepancy between the data about the support channels presented in Table 2.5 and how they received help in specific contingencies (Table 2.6). Table 2.5 shows that they claimed to have received significant help from governments, donors, and relatives throughout 2020 and 2021. In Table 2.6, however, it is clear that outside assistance does figure more prominently in responding to specific circumstances compared to relatives. Although respondents reported receiving a lot of help from different sources, many still reported feeling that the help was insufficient, with 50 answers stating that yes, they had received some help but not frequently enough. When asked about specific situations, the five months under lockdown¹⁶ was the most challenging period, with many recalling harrowing experiences of what these difficulties specifically meant to them. TTN (F, 55) described this period as ‘the months when we were all locked up’. Help from the outside was significant but ‘not often’ and therefore ‘not enough’. Many felt they were on their own in these situations, especially when they ran out of money, with 24 bitterly stating, ‘no one helps’.

2.6 Poverty in an Emerging Country: Healthcare Problems

Among the three indicators that contribute significantly to multidimensional poverty in urban areas (GSO n.d.), the health insurance indicator does not stand out in Ma Lang-Dong Tien. Out of the 83 respondents, 59 (71%) said they have health insurance.

However, a closer look at their answers to the question ‘When did you purchase the health insurance?’ sheds new light on the situation. Having health insurance is not a consistent behavior in the community. Thirty-five respondents said they had purchased health insurance ‘within the recent few years’, and only six said they had purchased it ‘more than ten years ago’. Income is the dominant factor influencing their decision to enroll (or not to enroll) in national health insurance.

We three members of the family all have had it for three consecutive years. Before that, we didn’t have money (TTN, F, 55, housewife).

For the same reason, PVV (M, 49) quit because he did not have sufficient money:

I had it for a while, but then I didn’t have money, so I stopped. Sometimes I want to buy it again, but my income is too limited to afford it.

16 The restrictions ended in late September 2021, a month before they participated in the questionnaire survey.

TABLE 2.5 Sources of support for Ma Lang and Dong Tien from different channels (governments, donors¹⁷, relatives¹⁸) in 2020 and 2021

<i>Channels of Support</i>	<i>Government 2020</i>	<i>Government 2021</i>	<i>Donors 2020</i>	<i>Donors 2021</i>	<i>Relatives 2020</i>	<i>Relatives 2021</i>
Yes	37	44	37	46	26	22
No	13	6	11	3	21	18
N/A	0	0	1	1	3	20

TABLE 2.6 Self-reported responses to difficult situations

<i>Difficult Situations</i>	<i>No Food</i>	<i>No Job</i>	<i>No Money</i>
When	30 During the COVID-19	36 - During COVID-19: 32 - Unemployed for 'a long time': 2	34 - During COVID- 19: 24 - 'Always': 1
Receiving help from relatives	8	5	3
Receiving help from neighbors/ acquaintances	0	0	1
Receiving help from donors	18	11	0
No-one helps	11	5	8

TABLE 2.7 Respondents who have a health insurance plan

	<i>Health Insurance</i>
Yes	59
No	22

When asked the questions 'what do you do when you are sick, and when you are really sick?' most of them answered, as noted in the previous section, that they purchase an over-the-counter medicine from a nearby drug store (where health insurance is not applicable) for the former question, and only go to hospitals (and use health insurance, if any) when they get 'really sick'.

For the respondents and many other Vietnamese, health insurance is not for everyday use but for serious health contingencies (such as severe health conditions or when they reach a high-risk stage, such as old age). Therefore, the decision (to

17 Donors (*mạnh thường quân*) refers to anyone who volunteers to donate money, food, or other necessities either directly to the people in need or via charitable activities initiated by friends or acquaintances.

18 Relatives (*người thân*) usually refers to members of the family or extended family.

enroll in a health insurance policy) is also subject to each individual's perception of their health vulnerability. Many decided to quit health insurance, thinking that they do not get sick easily: 'I used to have it, but I didn't get sick, so I stopped' (HL, M, 67). For this reason, it is most likely that others may follow suit sooner or later, such as BTNT (F, 49), who said, 'we (family members) all have had [health insurance] since 2016, but never got to use it'. The figure of 71% of the respondents with health insurance is a high rate, given that most of these people are informal laborers and that having a health insurance policy is not mandatory for informal workers under Vietnamese law. Joining health insurance through a voluntary scheme is their own decision to make.

Since introducing the national health insurance system in 1993, Vietnam has made remarkable progress in terms of the enrollment rate, from a rate of 5.6% in 1993 to almost 90.85% (out of the population of 87.96 million people) (MOH 2021) by the end of 2020. Dr. Bui Sy Loi (2021), Vice-Chairperson of the National Assembly Committee on Social Affairs, assessed in his *Finance Magazine* article that 'Vietnam basically has fulfilled the goal of universalizing health insurance coverage ahead of time [...] [For other countries to reach a similar goal] it would take between 40–80 years while it took Vietnam only 17 years'.

Figure 2.4 shows the steady increase in enrollees, including those who enroll in the voluntary scheme. However, it is misleading to assume that people will continue with the plan once they decide to enroll. What happens in Ma Lang-Dong Tien reveals what the graph does not show: People constantly move in and out of the health insurance plan. For the poor, buying health insurance is not a one-time decision for long-term consumption but a decision that is highly contingent on their income.

The 'freedom' to move in and out of health insurance plans, resulting in inconsistent behavior regarding the decision to purchase health insurance, is also a 'freedom' that nearly 20 million informal laborers in Vietnam have.

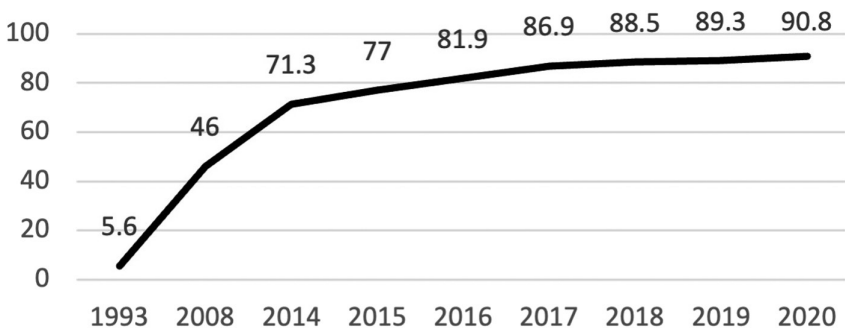


FIGURE 2.4 Enrolment rate in national health insurance from 1993 to 2020 (%), <https://tapchitaichinh.vn/giai-phap-phat-trien-bao-hiem-y-te-ben-vung-tien-toi-bao-hiem-y-te-toan-dan.html>

2.7 Empowering People to Protect the Urban Poor

For the wealthy, protecting their lives and livelihoods is about choosing what is better and what is the best among that which is better. For the poor, backing out, quitting, or not doing anything is also a choice—a very likely one, even when it comes to vital basic needs like health or, for that matter, health insurance. Many know that health is essential, but they struggle with the question: ‘Do I really need health insurance?’

Health is not the only illustration of the predicament of ‘freedom’ that informal laborers such as the people in these communities experience. Education is another area where they struggle with the question: ‘Do I need it?’ ‘Should I quit?’ All of TTV’s children (F, 64) dropped out in the 4th or 5th grade. ‘The hardship was insurmountable. We didn’t have enough to feed them, let alone provide their education’. For many people, engaging in healthcare plans and education may be an obvious course of action. We may consider an investment only when we desire something better than the basic policy. For such people, as the opportunity cost is high, any spending is an investment. If they choose one area for investment, they will likely need to sacrifice other basic needs in their everyday lives.

While pooling all the resources they have for an investment can be a life-changer, they rely on outside help (e.g., charity donors) in their everyday life, a situation that has been routinized for many:

Receiving gifts from donors is just about the only fun. When somebody calls me out to give gifts, I would always be ready on my feet, even if I am sleeping [...]. I am not ashamed of that. I am just glad that people helped. It has been this way for so long that shame is unnecessary.

(NTM, F, 77)

Thien and other local volunteers have played a key role in supporting the poor in this community before and during COVID-19. Thien launches small-scale calls for donations periodically among his friends and people connected to him via Facebook. Together with his family, he creates a list of people and families who require assistance and provides them with essential items, including cash. This provides a form of ‘minimum subsistence’ in case of contingencies to ensure that basic needs are met. Being involved in the money-lending business is an advantage for this kind of support: His family has a good grasp of the conditions of just about everyone in both Ma Lang and Dong Tien. Thien says he wants his charity activities to be focused exclusively on this community, for one thing, because he knows the community well. Moreover, he wants his activities to be more than just a one-time thing.

Donating to charity is one new characteristic of emerging economies. As pointed out by the Mastercard company, ‘emerging markets [are] more likely to donate to charity while developed countries give larger amounts’ (Tan and Yong 2015). Vietnam had the highest rate of charitable giving in the Asia-Pacific

region in 2017, with 78.5% of consumers giving to charities, followed by Thailand (66.3%) and Hong Kong (60.2%) (Inquirer.net 2017). Relying on charity donations from the ‘new money’ groups to address some aspects of urban poverty at the grassroots level should be considered a possible option for two reasons: the ease with which money can be mobilized and the ability to respond to case-by-case needs. This option also helps reduce the burden on the Vietnamese government.

In its response to the crisis and the challenges that came with it, Vietnam exhibits characteristics of many types: a developing economy (i.e., a heavy reliance on the informal sector), a socialist country (committed to expanding its social safety net to cover the disadvantaged as much as possible), and a country that still burdens itself with post-war obligations, such as the responsibility for taking care of millions of ‘national devotees’ (those who contributed to the nation’s unification). Vietnam has been making significant efforts to expand its safety net and welfare policies, e.g., assisting the poor in accessing health insurance or social insurance, which also includes health insurance. The problem is that such protections—like those that protect against the contingencies of life, such as health insurance and social insurance—face many obstacles in fulfilling their roles. One major challenge is the significant portion of the population working in the informal sector, making it difficult for the government to extend formal protection to them. Furthermore, harsh competition from the private sector (e.g., private medical services, over-the-counter pharmacies, private insurance companies) creates disincentives for people to use public services.

To make the best use of the ‘generosity’ of the ‘new money’ groups, local networks of volunteers, like Thien, are in a better position to grasp the conditions of local people, including those who fall outside of the statistical purview of the government. One consideration to be added to charity-based activities is the importance of providing minimum support in cases of contingency, and thus, the provision of *minimum protection* (for future contingencies, e.g., health insurance or old-age security) is just as necessary. While doing the survey, Thien was surprised to learn that many people do not have health insurance. Paying attention to the need for minimum protection of the poor leads one to become aware of the need to reduce the burden of decision-making. In other words, the urgency and immediacy of their daily needs alone can easily consume a family’s limited resources. While people’s ability to survive most contingencies is undeniable, such a jump-only-when-the-water-reaches-the-threshold way of living can plunge the urban poor even deeper into the vicious circles of poverty and debt:

And the poorer you are, the more you have to be responsible for everything about your life [...]. For most of the poor, if they do nothing, they are on the wrong track.¹⁹

19 Esther Duflo (2011, cited in Sunstein 2015).

Living in poverty puts people in a difficult position in which they have to make tough decisions every day. Unfortunately, the limited income of the poor may prevent them from acting rationally in certain situations. Being poor is not the consequence of personal choices but rather the outcome of many external factors, such as those described above. Those who are trapped in poverty in Vietnam are also the very people who support the fast-growing economy. Thus, lifting them out of poverty is a challenging task for themselves and the entire society. Failure to provide such protection will ultimately result in a higher cost for the government. As already demonstrated, in 2014, the government spent VND 3,000 billion to provide a monthly subsidy to 1.5 million people over 80 who do not have a pension (Hong Chieu and Le Tuyet 2021). Moreover, the government still carries the burden of the payment of health insurance for more than half of the population.

A close observation of how the people in Dong Tien-Ma Lang struggled through this pandemic offers a couple of important insights. Firstly, COVID-19 was an extreme contingency, but the challenges faced by the community during the pandemic were merely an extension of people's daily struggles. The urban poor are not prepared for such contingencies as unexpected bad events, let alone COVID-19; secondly, it is not the lack of welfare policies, but the lack of eligibility, caused by many underlying social and historical issues, that prevents the poor from accessing public services and welfare policies provided by the government; and finally, as a result of the factors mentioned above, the urban poor are primarily left to fend for themselves, with little support or protection from the government.

The observation of life's variations, as revealed in this study, can be applied to numerous developing countries, highlighting the heterogeneity of the urban population and the diverse range of issues they face. A human security that focuses on empowerment is not the next stage of human security to follow on from protection of people 'from fear and want'. Instead, the work of empowerment needs to be placed side by side with the task of protection. The work is to protect people from the need to make difficult and even risky decisions regarding the prerequisites (e.g., health or education) by empowering them to make better choices in other aspects of life. The work of providing protection prepares them to manage on their own without leaving them alone or behind. For this goal to be realized—in addition to the improvement of the government's macro policies—local initiatives, local resources, and local volunteers need to play crucial roles in responding to immediate needs in times of contingencies while also seeking out the necessary conditions to facilitate empowerment.

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3

COVID-19 IMPACT ON THE MOST VULNERABLE COMMUNITIES IN INDONESIA

Jonatan Anderias Lassa

3.1 Introduction

This article aims to understand the devastating effects caused by COVID-19 and its impact on the food security of vulnerable populations in Southeast Asia, particularly Indonesia. This exploratory study examines the protection and empowerment dimension of the COVID-19 response by the government, local governments, and non-state actors in Indonesia. It asks: (1) What are the impacts of COVID-19 on food access, especially for vulnerable groups in disaster-induced displacement communities? (2) How have social protection measures taken by the government helped to avoid hunger and famine during COVID-19 in Indonesia? (3) How do government and NGO interventions to address COVID-19 empower affected communities living in transitional shelters?

This study also looks at the impacts of COVID-19 on displaced and disaster-affected populations, with a geographical focus on Central Sulawesi and East Nusa Tenggara provinces. The former was hit by tsunamigenic earthquakes in 2018, while the latter was hit by tropical cyclone Seroja in 2021. The earthquakes, followed by tsunamis and liquefactions that rocked Central Sulawesi on September 2018, caused 2,081 casualties, with a further 1,075 people missing, about 211,000 displaced, and 68,000 houses damaged (BNPB 2018). The total economic loss was estimated to be USD 910 million (IDR 13.8 trillion) (BNPB 2018), or about 350% of the entire development budget of the province in 2019 (Pemda Sulteng 2019).

Tropical Cyclone Seroja hit East Timor and Indonesia's East Nusa Tenggara (NTT) province. NTT Province experienced a total loss of and damage to about 52,800 houses and monetary losses of USD 243 million (Ama 2021). The cyclone destroyed 88 dams and 11.7 km of water-pipe networks in the Kupang district

alone. NTT is one of Indonesia's poorest provinces and has often historically faced food insecurity and malnutrition. In NTT, this study focuses on the uprooted communities from East Timor that have resided in West Timor since 2000. Some of these communities were still in transitional shelters and living in marginal conditions when they were hit by Cyclone Seroja in 2021.

3.2 Research Framework

3.2.1 *COVID-19 Impact on Human and Food Security*

Pandemics create system-wide risks, leading to cascading and unprecedented effects in many sectors at many levels (Renn 2020). Nevertheless, pandemics—including COVID-19—do not strike society randomly (Whitehead et al. 2021). The impact of COVID-19 on human security can be amplified by pre-existing unequal vulnerabilities and residual risks in low-income food-deficit countries (LIFDCs), including low- to medium-income countries (LMICs). Residual risk can be exemplified by risks originating from past events such as tsunamigenic earthquakes, soil liquefaction, landslides, and long-term partisan conflicts (Triyanti et al. 2022).

COVID-19 has emerged as a worldwide threat to non-traditional food security, such as undernutrition and obesity. Restrictions on mobility are likely to undermine the global fight against obesity. They can increase the risks of obesity as children and parents remain at home more, with fewer opportunities to burn calories (Woertz 2020). Thus, even though changes in global food prices during 2020 remained tolerable in many countries (Devereux et al. 2020), the global climate crisis raises new risks of losses and damage to production and supply chains on top of such residual risks and vulnerabilities originating from ongoing deficits in human development and resilience.

The United Nations General Assembly Plenary 31st Special Session Meeting in December 2020 raised concerns over potential famines in the near future (United Nations 2020). COVID-19 will likely continue to be an ongoing threat to global society for many years. Despite the possibility that the world might contain COVID-19 in the future, the actual cost of COVID-19 on human security, including food security, is likely to be significant.

The COVID-19 virus transmits along social-economic fault lines, namely the social and economic inequalities in many local communities, including those in the developed world (O'Hara and Toussaint 2021; Gundersen et al. 2020). Vulnerable groups include people in risky, low-income, manual jobs in almost all sectors that 'have been more exposed to covid-19 as their face-to-face jobs cannot be done from home' (Whitehead et al. 2021). Impoverished communities with limited access to health services pre-COVID-19 have also been more vulnerable to severe disease once infected because of higher pre-existing illness levels (Whitehead et al. 2021). Such groups are likely to be pushed back into poverty sooner or later.

3.2.2 *Linking the Food System with Human Security Frameworks*

Food security is situated among the seven dimensions of the human security framework (Caballero-Anthony 2016; King and Murray 2002; UNDP 1994). This chapter views food security under COVID-19 through the lens of interdisciplinary human security. While the concept of holistic human security is briefly outlined in the UNDP’s Human Security Report 1994, some scholars have creatively advocated ‘system thinking’ to reinforce ‘integrated security’ as the ‘best model’ of human security (Cook 2021).

Unfortunately, most governments are not operating based on a systems approach. Such scholarship efforts are more of a hypothesis of what should be and are less empirical. Therefore, the author offers an alternative analytical framework that cross-breeds human security, non-traditional security (NTS), and state security approaches to understand the responses to COVID-19 by states and civil society actors (Figure 3.1). This chapter proposes a middle way to solve the tension between human security, non-traditional security (NTS), and the broader state security agenda. Figure 3.1 presents the possibility of interpreting food security as a subset of human security and NTS and state security. Figure 3.1 also suggests a shared space between human security, NTS, and state security.

Figure 3.1 suggests that food security is a triple-helix security phenomenon naturally anchored in all forms of security. The context in China (Project 1, HSSEA) indicates that human security is often part of non-traditional security, including food security issues. One recent empirical study on East Asia maintained the view

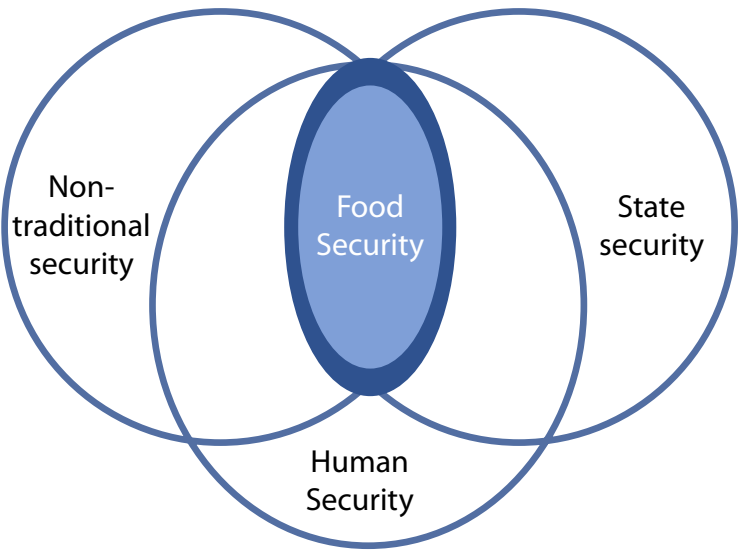


FIGURE 3.1 The framework of food security as a shared human security governance framework (source: author)

that state security contributes to human security. Nevertheless, human security does not equal state security, as people should not be sacrificed to serve state security agendas because human beings are not the means but the ends in themselves (Mine, Gomez, and Muto 2019).

There is a solid justification for such a combination of frameworks because mitigating potential food crises during COVID-19 demands multi-pronged security approaches, while narrow security thinking is unhelpful given the catastrophe. In the previous HSSEA project, there were cases from the Philippines where government respondents believed poverty, lack of food, and lack of education were the root causes of human insecurity (Atienza 2019).

Furthermore, policymakers in East Asia generally cite food security as one of the threats to state security. Some countries have used various pathways to frame food security as a human security variable (Atienza 2019). For example, in Thailand, food security is included in the Human Security Index (HSI) institutionalized by the Thailand Ministry of Social Development and Human Security (Jumnianpol and Nuangjamnong 2019). In contrast, Vietnam ensures that food security is treated as one of the highest national security priorities mandated by Resolution 63/NQ-CP to provide short- and long-term security and development agendas (Pham et al. 2019). Food safety is also related to and is part of Vietnam's food security agenda.

The author is mindful that the various analytical means by which COVID-19 impacts food security should be understood to lie outside the security paradigms above. The long-standing variables are the FAO's four dimensions of food security: availability, affordability, quality, and safety. Sen's entitlements framework helps us to understand how COVID-19 impacts household production, labor, trade, and transfer-based entitlements to food (Sen 1999; Devereux et al. 2020).

Suppose development can be defined as an opportunity to expand human freedoms (Sen 1999). In that case, as argued by Lassa et al. (2022), 'disasters and pandemic events, on the contrary, can be defined as a direct threat to development through compromising human freedoms and human insecurity. Furthermore, deprived freedoms and capabilities can lead to different human insecurities, including food insecurity and hunger'.

The extent to which a person can cope with insecurities triggered by catastrophic events depends on the 'entitlement basket', ranging from producing food (production-based entitlement), buying food (trade-based entitlement), working for food (labor-based entitlement), and receiving food aid (transfer-based entitlement). This suggests that the potential impact of COVID-19 on food security can be explained by classical food entitlement theory (Devereux et al. 2020; Sen 1983).

3.2.3 Cash Transfers Offer Protection against Food and Human Insecurity

COVID-19 and its interplay with existing risks might pose severe consequences for food insecurity, including a potential increase in hunger and undernutrition

due to increased local and global food ‘system’ disruptions. However, food security can be restored by a robust cash-transfer program in light of the food entitlement theory (Sen 1983).

The literature often sees a cash-transfer protection strategy (Slater 2011), paid by either the government or NGOs to poor households (Miller 2011), as a way of offsetting shocks from natural hazards (such as droughts) and pandemics by reducing the risks and vulnerabilities of affected families (Devereux and Sabates-Wheeler 2008; Sabates-Wheeler and Devereux 2010). In many cases, the initial objective of such cash transfers is to enable low-income families to sustain their access to food (Slater 2011) in times of peril, including during droughts and pandemics.

Lack of robust social protection policy, vigorous state-led transfer programs, and limited labor markets compromise food access in many pockets of poverty in Southeast Asia. While necessary, lockdowns and extensive mobility restrictions have led to large-scale declines in labor incomes. As a result, four million migrant workers’ families in Myanmar are at risk of income shocks (Diao and Wang 2020) due to lockdowns in the countries in which they work. The low-income families in Southeast Asia from Indonesia and the Philippines, who often benefit from international remittances, now face prolonged income losses that might last longer than anticipated.

Nevertheless, disaster-response and pandemic cash transfers can protect and empower vulnerable groups to comply with COVID-19 mitigation measures. Conventional post-disaster relief distribution in the form of commodity transfers (e.g., food and non-food items) is grounded in paternalism’s moral imperative, whereby external actors decide what is best for survivors of disasters and conflicts (Lassa et al. 2022). On the other hand, cash assistance—as a form of basic income—can be seen as a more flexible and relatively less-intrusive type of aid rooted in the ideology of libertarian paternalism (Thaler and Sustein 2008). This is because people’s choices in relation to emergency aid are not decided in a top-down manner by central governments or ‘coercively enforced’ but are, rather, creatively embedded in a new practice, whereby people affected by disasters can experience a higher degree of agency and dignity (United Nations 2016).

This chapter argues that cash transfers offer broader spaces for state and non-state actors to exercise protection and empowerment of COVID-19-affected populations.

3.3 Data Collection and Research Methods

This explorative study adopts qualitative research and consists of a two-stage research strategy. The first stage consisted of desk research, during which the author examined governmental and non-governmental responses to the dynamic context of COVID-19 from 2020 to 2022. The content analysis examines the policy documents published between March 2020 and December 2021. The initial result of Stage 1 can be seen in Lassa (2021).

The second stage comprised field data collection completed by a research assistant from Indonesia who received ethical clearance from Atmajaya University (Clearance No. 0030J /III/LPPM-PM.10.05/10/2021) on October 12, 2021. The fieldwork in NTT Province started on November 15, 2021 and was completed on January 14, 2022. The fieldwork in Central Sulawesi commenced on January 14, 2022 and ran until February 6, 2022. Table 3.1 summarizes the stakeholders interviewed in selected districts in both provinces. There were 48 qualitative interviews with members of the affected communities using the COVID-19 protocol, with safe physical distancing, and 20 interviews with aid providers, including local governments and NGOs (Table 3.2). This suggests that plain language statements and interview approval were all recorded instead of signed. The age range of the respondents was between 22 and 65 years old. Out of the 49 members of affected communities, 30 were women. Out of the 20 aid provider respondents, two were women.

The author used NVIVO-12 to process the qualitative data coding and analysis. The policy-related coding is based on the policy information provided in Tables 3.3 and 3.4. Each respondent's transcript is assigned a specific code number, from R1 to R68. The list is provided in Annex 1.

TABLE 3.1 Respondents by administrative area

<i>Province</i>	<i>Administrative Area</i>	<i>Stakeholders</i>	<i>Interviews</i>	<i>Remarks</i>
East Nusa Tenggara	Kupang	Affected community and cash transfer beneficiaries	20	Kupang District (Raknamo—Amabi Oefeto)
	Belu		9	Manusak (Kupang Timur) Fatukbot, Manuaman (Atambua Selatan); Manleten (Tasifeto Timur); Dualaus, Kakuluk Mesak)
	NTT	Aid providers	13	Government and NGOs
Central Sulawesi	Donggala	Affected community and cash-transfer beneficiaries	9	Boya (Banawa), Wani 1 (Tanantovea) & Marana (Sindue)
	Palu City		5	Panau (Tawaeli)
	Sigi		5	Pombewe and Lolu (Biromaru)
	Central Sulawesi	Aid providers	8	Government and NGOs
Total			69	

TABLE 3.2 Respondents by type of cash-transfer beneficiary and gender

[illegible]

TABLE 3.3 Key regulations related to food security in Indonesia, February 2020–March 2021

<i>Date</i>	<i>Issuing agency</i>	<i>Title of regulation</i>	<i>Reference</i>
February 28, 2020	BNPB (National disaster management agency)	Declaration of Special Emergency Situation of the COVID-19 Epidemic Disaster in Indonesia	Directive of BNPB Head 9A/2020
March 13, 2020	President of Indonesia	Task Force for Rapid Response to COVID-19	Presidential Decree (<i>Keppres</i>) 9/2020
March 14, 2020	Ministry of Finance	Distribution of Special Grant Allocation for Infrastructure in the Health Sector and Grants for Health Operation for COVID-19 response	Decision of MoF 6/KM.7/2020
March 16, 2020	Ministry of Finance	Distribution and the use of shared income grant, fiscal allocation, general allocation grant, special allocation grant, and regional incentives for 2020 fiscal response to COVID-19	MoF Regulation 19/PMK.07/2020
March 20, 2020	President of Indonesia	Revision of Presidential Decree on Task Force for Rapid Response to COVID-19	Presidential Decree (<i>Keppres</i>) 9/2020
March 20, 2020	President of Indonesia	Refocusing of activities, fiscal allocation, and procurement of goods and services for the acceleration of COVID-19 response	President Instruction (<i>Inpres</i>) 4/2020
March 21, 2020	Ministry of Finance	Tax incentives for Compulsory Tax Holders affected by COVID-19	MoF Regulation 23/PMK.03/2020
March 23, 2020	Ministry of Communication and Information	Acceleration of socialization of COVID19 Prevention at Provincial and District/ City levels	Circulated letter SE 2/2020
March 24, 2020	Village, Regional Disadvantage, and Transmigration Minister	Village Response for COVID-19 and Cash for work in Villages	Circulated Letter SE 8/2020

(Continued)

TABLE 3.3 (Continued)

<i>Date</i>	<i>Issuing agency</i>	<i>Title of regulation</i>	<i>Reference</i>
March 31, 2020	President of Indonesia	National Budgeting Policy and the Stability of Budgeting System for COVID-19 Pandemic Disaster and/or Managing Threats for National Economy and/or the Stability Budgeting System	Government Regulation in Lieu of Law 1/2020
March 31, 2020	President of Indonesia	Declaration of Community Health Emergency Situation for COVID-19	President Decree 11/2020
March 31, 2020	President of Indonesia	Big Scale Social Restriction for Accelerating COVID-19 Eradication	Government Regulation 21/2020
April 16, 2020	Ministry of Social Affairs (MoSA)	Implementation of Food and Cash Transfer Support for COVID-19 Pandemic	MoSA Decree 54/HUK/2020
July 10, 2020	Ministry of Workforce (Menaker)	Time adjustment for social security protection benefits for pre-posting migrant workers during non-national disasters, i.e., COVID-19	Permenaker 10/2020
July 8, 2020	Ministry of Social Affairs (MoSA)	Implementation of Food and Cash Transfer Support for COVID-19 Pandemic	MoSA Degree 86/HUK/2020
August 11, 2020	Ministry of Social Affairs (MoSA)	2nd Amendment of Implementation of Food and Cash Transfer Support for COVID-19 Pandemic for Fiscal Year 2020	MoSA Decree 100/HUK/2020
August 14, 2020	Ministry of Workforce (Menaker)	Government Assistance Guidelines for Wage/Wage Subsidies for Workers/Workers in handling COVID-19 impact	Permenaker 14/2020
December 30, 2020	Ministry of Social Affairs (MoSA)	Implementation of Cash Transfer Support for COVID-19 Pandemic 2021	MoSA Decree 161/HUK/2020

(Continued)

TABLE 3.3 (Continued)

<i>Date</i>	<i>Issuing agency</i>	<i>Title of regulation</i>	<i>Reference</i>
February 15, 2021	Ministry of Workforce (Menaker)	Implementation of wages in specific labor-intensive industries during COVID-19	Permenaker 2/2021

Source: Author, modified and updated from Djalante et al. (2020).

TABLE 3.4 Social protection via cash transfers as proxy to ensuring food access

<i>Agency</i>	<i>Type of Protection</i>	<i>Amount and Scale</i>	<i>Food Security Dimension</i>
MoSA	PKH Program (Family Hope Program) long-term social assistance for poor family Food aid packages namely BLT Bansos	IDR 600k (USD 42) per month paid for four months IDR 300k (USD 21) per month paid for four months	Access to food; availability at consumers' level
MoLa	Incentives for workers with a salary below USD 350 per month	Rp. 600k (USD 42) per month for four months	Access to food; availability at consumers' level
Ministry of Village and Disadvantaged Regions Development and Transmigration (MoVDRT)	A maximum 40% allocation of Village Fund for cash transfer prioritizes basic needs (incl. food) and health-related spending	IDR 600 (USD 42) per person for three months	Access to food; availability at consumers' level
Ministry of Agriculture (MoA)	Cash-transfer program for 2.7 million vulnerable farmers	IDR 600 (USD 42) per person for three months	Production to ensure availability
Ministry of Maritime and Fisheries	Cash-transfer program for 1.1. million vulnerable fishers	IDR 600 (USD 42) per person for three months	Production to ensure availability

3.4 Findings 1: COVID-19 Impacts on Food Security

This section is based on a literature review combined with results from the qualitative interviews.

3.4.1 *Normalizing the COVID-19 Crisis*

Normalizing suffering is one way to cope with uncertainty during COVID-19. For some of the former refugees in West Timor, life has been hard for almost two decades. Reflecting on her life, R05 said, ‘If some people said that COVID-19 is hard, yeah, certainly. But for us, this is a normal life; our life has already been tough, and COVID-19 makes no difference’. For most respondents in Timor, tenure security and housing access are their primary concerns, not COVID-19 (R11).

R45 lived in a transitional shelter in Boya, Donggala, together with ten other families, for almost three years before receiving her permanent shelter assistance from the government recently. There are 70 new permanent shelters in her new neighborhood, with 30 families already occupying the newly built shelters. By contrast, R47 in Wani remained in her transitional shelter. R60 also said that, out of 287 families that lost their houses in Panau, Palu City, 57 were still waiting for a permanent shelter, which the government had promised would be completed four years ago. Some of the delays were due to land ownership issues and the communities’ decision to wait for a signal from the government to rebuild in the red zone, which is tricky and unlikely (R60).

In West Timor, COVID-19 is not the only risk that affects people’s livelihoods. African swine fever (ASF) killed almost all pigs, first in East Timor and later in West Timor, in early 2020 at the beginning of the COVID-19 pandemic. The former East Timorese refugee respondents in both Kupang and Belu experienced the catastrophic effect of the ASF equally, with many losing all of their pigs (R10, R31). Belu is also known as a 3T region (underdeveloped, poorest, and outermost). As of June 2020, damage from ASF amounted to at least 33 billion Indonesian Rupiah (IDR) (USD 2.4m), equivalent to 3.6% of the district’s annual budget. In the Malacca District of NTT, the total direct losses reached IDR 95 billion, or 11% of the 2020 Malacca APBD (Lassa 2020). In Kupang, a similar story emerged of ASF losses. For example, R03 from Rakanmo in Kupang lost all her five pigs during the ASF epidemic of 2020.

In April 2021, R03 also lost his livestock (goats and chickens) and most of the harvest during Seroja. R03 and her neighbors often suffer from water shortages. She added: ‘All my groundnuts were swept away by the floods; all my corn harvest was damaged and blown away by the storm’. R04 from Manusak in Kupang also suffered as a result of Cyclone Seroja: He lost seven dogs, nine pigs, and all of his chickens, as well as the harvested corn in a small warehouse. R11 lost the roof of her house. R10 lost his livestock and harvests. R8, R10, R13, and R15 all experienced the pain of Seroja.

3.4.2 COVID-19 Impacts on Vulnerable Households

Some families were relying on remittances from family members working as migrant workers in palm oil companies in Papua (R18). R36's husband, who worked as a domestic worker in Bali and often sent her USD 35–45 a month, returned home without a job. R10 relied on remittances from her younger adult daughter, who worked in Bali as an employee of a family business. The daughter had to return home after the tourism sector collapsed in Bali. This created severe shocks to her household income and spending plans.

The impact of COVID-19 on economic access to food has been a growing challenge. In the context of vulnerable groups that live in near-displacement conditions, access to everyday basic needs, such as water, food, and energy, can be the most challenging experience during COVID-19. Some family members need to go out to collect water from public taps, so procedures for social distancing are hard to follow. R16 shared her story in Manusak Village: 'We had to get the water. But we had to observe how many people were there. If there were more than six, we had to wait until some left the place. In 2020, it was pretty strict'.

Not all stories described negative experiences. For example, R57 in Wani, Donggala, Central Sulawesi, shared her story of how her husband got his new job in the solid (metal) renewable business. Before COVID-19, while living in the transitional shelter, her husband could get IDR 100,000 a day (USD 7 a day); this increased to USD 14 per day. One of the reasons is the shortage in labor supply for specific skilled jobs.

Most of the former East Timorese relied on diversified off- and on-farm activities. For example, R17 combined motorbike taxis with cash crops such as cassava leaves, bananas, papaya, and corn. The sales revenue from these crops is often used to procure rice for their children. Some families relied on remittances from family members who worked as migrant workers in palm oil companies in Papua (R18). For example, R36's husband, who worked as a domestic worker in Bali and often sent her USD 35–45 a month, returned home without a job. R10 relied on remittances from her younger adult daughter, who worked in Bali as a worker in a family business in the tourism sector. The daughter had to return home after the tourism sector collapsed in Bali. This created severe shocks to her household spending.

R22 grows some strategic crops, such as green leafy vegetables, and he often benefits from their status as high-value crops. Yet they are also vulnerable to shocks in demand, which can be bad news for cash vegetable producers like R22. Lack of sales due to the disruption of vegetable supply chains caused him to worry about how to feed his children.

R51, who remains in her transitional shelter, said that when COVID-19 hit Central Sulawesi, her food security condition was just fine, despite the disruption to crop markets.

My family is lucky, as when we were displaced into a new place, we were given access to land for growing crops on a landlord's land, based on a shared benefit arrangement of 30:70. We practically grow almost anything, from rice to vegetables such as tomatoes and onions.

Their transition to a temporary subsistent strategy helped them to secure their food needs.

COVID-19 directly affected insecurities in disaster shelters. R49 from Sigi district in Central Sulawesi said that 'COVID-19 was hideous. Here, 5–7 people died every day [2020/2021]. Around these camps [transitional shelters], at least two people died because of COVID-19, while many became affected as well'.

R26 noted that purchasing power has decreased, so many small-holder farmers have switched jobs in West Timor. The local chicken slaughterhouses collapsed—perhaps 20% are still standing. In Tabean, most local industries almost stopped. There were demonstrations at the DPRD (district legislative) office as companies began downsizing and changing their workers' deals. In the fishery sector, the fishers were initially furious with the travel restrictions. When the restrictions were finally relaxed to allow local commuting, problems arose, as even when the fishers were able to catch enough fish, retailers could not guarantee full orders due to the lack of consumers.

R03 argued that COVID-19 impacts the local livestock industry due to a lack of demand and the supply of animal feed, which is often imported from outside the district or the island. Therefore, they had to lay off staff and reduce their businesses by more than 60%.

In Central Sulawesi, large-scale restrictions pushed fishers to stay home. As R46 narrated,

We often sell our fish inter-island from Central Sulawesi to East Kalimantan. Now the destination regions have refused traders from outside. Here, the raw fish price is IDR 12,000/kg and IDR 25,000/kg. Bontang was a red zone, and we couldn't go there for six months.

Meanwhile, there is a flood of fish supplies here due to supplies from nearby fishers. But the price dropped. The capacity of our ships is up to 7 tons. The price went down to IDR 5,000/kg. While we hold onto the fish, then what do we do? We finally buried them. We have 14 workers to pay. It was terrible in 2020. Now [end of 2021] is a bit better because, since there is vaccination, it's a relief because it's free to go here and there after vaccination.

Some of the findings above are consistent with findings in studies on urban settings by Hidayati et al. (2020) and SMERU (2021). Hidayati et al. (2020) found that most respondents change their consumption patterns and menus according to their economic conditions (49%). Other efforts include using savings (34%), continuing

to work even though most of one's salary/wages have been deducted (31%), borrowing money from family/relatives (15%), selling goods (14%), and going into debt at small shops (4%). SMERU (2021) found that the loss of earnings for many households was not the only challenge: Almost a quarter of respondents (24.4%) said their expenses had also risen, with the increased cost of groceries and other essentials being the main contributors. Moreover, a significantly higher proportion of households with children (65%) had been spending more on the internet or mobile telephone charges than those without children (28.9%) (SMERU 2021).

R25, a trader at the local market in Atambua, survived COVID-19 by using his savings from the bank. R35 sold strategic assets such as cattle to buy food. R35 received IDR 600 from JPS Kabupaten once. She sold some savings, such as gold, in April 2021 when her father, who shared a house with them, died.

3.4.3 COVID-19 Impacts on Existing Stunting Eradication Programs

R08 is a 32-year-old. She arrived in West Timor from East Timor when she was ten. For some time, she moved between different camps, but since 2005, she has been settled in Raknamo, Kupang District, West Timor. She had three children, but only one survived. The first one died when she gave birth at the local hospital. The third child was a miscarriage. R11 had four children. The first is now in Year 9. The second is now in Year 3. Her third child died due to miscarriage, and the last child died while still a one-month-old baby.

Raknamo is one of the hotspots of children with stunting (R05). Before COVID-19 in 2020, at least 64 children were registered as experiencing stunting. Unfortunately, due to the readjustment of the district government fiscal structure, the stunting budget has been shifted to invest in COVID-19 responses. For village budget allocations, priority must be given to providing cash assistance, COVID-19 intervention, and other social protection measures. One local pastor also highlighted that the villages host some of the most vulnerable families with stunting among children.

R20 stated that, 'Before COVID, this village hosted stunting-related activities. But during COVID, the activities stopped. The (village government's) focus is now on COVID. The order from Pusat (central) is to refocus the budget to tackle COVID-19'. R30 also articulated that,

Before COVID, stunting was a concern of local government and health ministries. They provided biscuits as supplementary feeding for children with stunting. Village governments could also allocate funds to pay for stunting eradication by recruiting cadres to deliver supplementary feeding to vulnerable communities.

The direct delivery of supplementary feeding is a crucial activity. Experience suggests that low participation in stunting eradication programs by vulnerable

families was partly due to the high cost of local transport to bring their stunted children to supplementary feeding distribution posts.

3.4.4 COVID-19 Impacts on Education

In Kupang, R17 often spent USD 7 weekly on her school children's transport before COVID-19. During COVID-19, the mother argued that they have to spend more money, as the cost of the online streaming of classes outweighs the traditional transportation fee, with three children using the online credit. R11 also mentioned that access to credit for online streaming is the most challenging problem, as online schooling is the only way for children to study. R41 added that,

during normal times, regular spending for the kids includes shoes, uniforms, school fees, books, and pocket money. The face-to-face classroom is sometimes done weekly, so the regular cost remains the same. Now we must add the cost of phone credits for online schooling.

3.5 Findings 2: Protection Measures and Empowerment Dimensions

3.5.1 Macro Protection Policy

COVID-19 was declared a major emergency by Indonesia's National Disaster Management Office on February 28, 2020. The practice of declaring a national disaster is not uncommon in Indonesia's crisis management context, where the President often calls for a disastrous event to be designated a 'national disaster'. Nevertheless, the decision was later backed by Presidential Decree (Kepres 9/2020) on Forming a Task Force for Rapid Response to COVID-19 (13 March 2020). This Presidential Decree provided the basis for sectoral responses from national and local governments.

The government is conflicted about protecting the economy and preventing poverty (in all situations, including non-crisis ones) by saving lives during the COVID-19 emergency. Since the beginning of the pandemic, the government has been reluctant to put robust measures in place to mitigate the impact of COVID-19, including ambiguity in protection. Critical views of the government response have been recorded (e.g., Djalante et al. 2020).

Despite starting late and remaining indecisive in making crisis management decisions compared to many middle-income countries in Asia, Indonesia was 'fortunately' able to implement some 'knee-jerk' social protection measures to anticipate a food crisis and prevent hunger. The bigger picture of the macro-level policy pertinent to food security from March 2020 to March 2021 can be seen in Table 3.3.

The Indonesian President issued Directive 4/2020, specifically instructing ministries and local governments to readjust their fiscal priorities. This included the

TABLE 3.5 Allocation of 40% of Village Funds for the cash-transfer program

<i>Year</i>	<i>BLT DD CTP via Village Funds</i>	<i>Target Villages</i>	<i>Targeted Family Beneficiaries</i>
2020	23.74b	74,593	8m
2021	28.80b	59,169	8m
2022	27.20b	n/a	8m

Source: Various media and <http://sid.kemendes.go.id/dana-desa>

need to reallocate budgets and procure goods and services to deal with COVID-19 (Table 3.5). Ensuring food security budget reallocation, strengthening health responses and services, and creating a national insurance scheme have been the four main agenda items of the Directive (Djalante et al. 2020).

The central government, led by the Ministry of Finance (MoF), adjusted its fiscal allocation. Two critical decisions by MoF in March 2020 included, first, the decision on ‘Distribution of Special Grant Allocations for Infrastructure in the Health Sector and Grants for Health Operations for the COVID-19 Response’, and second, the decision on ‘Distribution and the Use of Shared Income Grants, Fiscal Allocation, General Allocation Grants, Special Allocation Grants and Regional Incentives for the 2020 Fiscal Response to COVID-19’. The former aimed to control COVID-19 using medical and public health measures, while the latter aimed to create incentives that ensure social protection and access to food and other fundamental rights. Also, other notable key regulations aim to protect citizens by ensuring their access to food and other fundamental rights.

3.5.1.1 Ministry of Social Affairs and Social Protection

The Ministry of Social Affairs (MoSA) has been a national champion of social protection programs, including those most pertinent to ensuring food security access for the poor. Various social protection programs have been available to MoSA as part of both regular development and disaster response-related programs. Thus, MoSA remains vital in overall COVID-19-related protection, as it manages 62% of the 2020 adjusted budget: IDR 172.2 of 204.95 trillion (or USD 9.1 of 14.6 billion). Below are some examples of the use of existing programs to help the most vulnerable groups, as informed by MoSA and MOF: 1

- The number of beneficiary families (KPM) of the Family Hope Program (PKH) increased from 9.2 million to 10 million families in 2020. PKH had previously been disbursed every three months, but this was revised to monthly distribution from April to December 2020. From April to June, KPM received PKH twice.

1 See the details at: Policy for the Poor, accessed via www.kemenkeu.go.id/covid19.

- MoSA is responsible for distributing food baskets (Bansos Sembako) to 1.9 million beneficiaries and rice packets to ten million beneficiaries.
- The amount of PKH benefits per year for specific groups are as follows: (1) Pregnant women received IDR 3,750,000 (USD 260); (2) Children aged 0–6, IDR 3,750,000 (USD 90); (3) Elementary school children or equivalent, IDR 1,125,000 (USD 89); (4) Junior high school children or equivalent, IDR 1,875,000 (USD 135); (5) High school children or equivalent, IDR 2,500,000 (USD 178); (6) Severely disabled, IDR 3,000,000 (USD 214); (7) Seniors 70 years and over, IDR 3,000,000. PKH assistance is given to a maximum of four people in a family. The highest amount of assistance received was IDR 10 million per year, and the lowest was IDR 900,000 per year.
- The number of basic food card beneficiaries increased from 15.2 million to 20 million KPM. The primary food card nominal amount was increased from IDR 150,000 to IDR 200,000 per KPM over the nine months until December 2020.
- Village Direct Cash Assistance (BLT) was comprised of IDR 600,000 per KPM per month (April–June 2020) and IDR 300,000 per KPM per month (July–September 2020). BLT Desa is given to poor or underprivileged families in villages who do not receive PKH assistance, basic food cards, or pre-work cards. Data collection for KPM candidates incorporates the Integrated Social Welfare Data (DTKS) of the Ministry of Social Affairs.

3.5.1.2 Ministry of Workforce (MoLa)

As shown in Table 3.4, the government's assistance via MoLa is comprised of subsidized salaries/wages of USD 42 per month for up to four months. The Ministry of Workforce issued Regulation (Permenaker) 14/2020 to implement government assistance through salary/wages subsidies given to workers. The beneficiaries needed to meet the following requirements. They had to a) be Indonesian citizens as evidenced by a population identification number; b) be registered as active participants in the BPJS Ketenagakerjaan, the current workers' social security program, as evidenced by a membership card number; c) be workers or laborers who receive salaries or wages; d) participate until June 2020; e) be an active participant of the social security program for employees who proportionately pay contributions on a salary or wage below IDR 5 million (USD 350), according to the latest salary/wage reported by the employer to BPJS Ketenagakerjaan and recorded in BPJS Ketenagakerjaan; and f) have an active bank account.

In addition, the Ministry of Workforce has also been administering a Pre-Employment Card policy as part of COVID-19 crisis management. The Pre-Employment Card Program is an incentive for laid-off workers, job seekers, and micro and small entrepreneurs who have lost their jobs and/or experienced a decrease in purchasing power due to the COVID-19 pandemic as workers who need increased competence. The pre-employment card program aims to develop

workforce competence, increase workforce productivity and competitiveness, and develop entrepreneurship.²

The government allocated an agreed budget that increased from IDR 10 trillion (USD 714 million) to IDR 20 trillion (USD 1.3 billion) for 5.6 million workers who had been laid off or sent home on unpaid leave, informal workers, and micro and small business actors affected by COVID-19. Beneficiaries receive training fees of IDR 1 million, post-training incentives of IDR 42 USD per month for four months, and job survey incentives of IDR 150,000 for three surveys.

3.5.1.3 Ministry of Villages, Regional Disadvantage Development, and Transmigration

The people in remote and disadvantaged regions comprise some of the most vulnerable groups in Indonesia, living in areas where the health system and access to health services remain limited. In the last five years, the good news is that the central government has created a nationwide incentive for village development through ‘Dana Desa’ or Village Development (DD). As instructed by the President and administered directly by the Ministry of Village Development, Regional Disadvantage, and Transmigration, it allows village governments (c. 80,000) to shift existing funds to cash for work.

Village governments play pivotal roles in COVID-19-affected communities by drawing on existing Village Funds. The Ministry issued regulation 50/2020, setting out the imperatives that each village government should allocate 40% of the annual budget for cash transfers. The BLT DD 2020 allocation is based on PMK 50/2020. The regulation also states that village governments that do not comply by allocating social protection will be subject to sanctions and will not receive any funds for the next quarter. These sanctions will not be imposed if there are no vulnerable families based on village meetings that meet the criteria. Presidential Decree 104 of 2021 reemphasized that Village Cash Assistance (BLT Desa) needed to be included in the budget, comprising at least 40% of the village fund ceiling received by each village in 2022.

3.5.1.4 Multi-level Incentives for Food Production

By financing farmers, the government expects them to remain productive. Through collaboration between the Ministry of Agriculture, the Ministry of Maritime and Fisheries, and the Ministry of Social Affairs (MoSA), the government financed a cash-transfer program for 2.7 million farmers and 1.1 million fishers. The registration system for social protection may have overlapped in many places, as the

2 See the full flagship program at www.prakerja.go.id/.

hypothetically poor communities entitled to cash transfers were also registered as farmers and fishers.³

At the local level, there is a clear pattern of local media interest in Nusa Tenggara Timur and Central Sulawesi in exposing some of the stories in which local governments, along with police forces and local military leaders, send messages of hope in regard to food production at the district level.

COVID-19 exacerbated the suffering of the disaster survivors in Central Sulawesi, including those in rural areas dependent on agriculture. The earthquakes in 2018 claimed lives and caused widespread damage to agricultural infrastructure, such as irrigation channels. For example, in Sigli, a group of farmers in the Gumbasa irrigation area needed to shift to off-farm activities as they waited for their irrigation system to be reconstructed. During COVID-19, most of these farmers-turned-construction workers had to stay home and lost their income-generation activities.

3.5.2 *Mainstream Government Cash Transfers*

COVID-19 has presented a unique opportunity for Indonesia to experiment with one of the most extensive cash-transfer programs (CTP) in its modern history. This is built on the lessons of several post-disaster and emergency cash-transfer programs by both governmental agencies and NGOs. The CTP activities are regulated by the Ministry of Social Affairs (MoSA) Regulation 5/2015 (KEMENSOS 2015). Traditionally, this regulation's intended targets are the MoSA and the local government Department of Social Affairs (DoSA) at both district and provincial levels. In a development context, MoSA has, over the last decade, been implementing several CTP-related programs that seek to alleviate poverty and ensure social development and protection in Indonesia.

The respondents did not indicate systematic exclusion from the social protection services in either province. However, in Central Sulawesi, there have been recent cases where vaccination has been used as a condition to accessing the unconditional cash transfer (UCT).

In Boya, we have IDR 800 million available for cash assistance. However, there was a case of a vicious circle, because to get the cash, one must have proof of vaccination; To get vaccinated, you need to have an ID card. While for you to get your ID issued, you must show proof of vaccination. As an RT (neighborhood chief), I am also confused, and so is my community.

(R48)

3 For example, a farmer returned the farmer cash assistance, as he had also received cash transfer for the poor. See: <https://regional.kompas.com/read/2020/05/29/10315941/cerita-petani-yang-kembalikan-blt-karena-sudah-terima-bantuan-lain>.

MoSA has recently been the leading agency for disaster-response-related cash transfers in Indonesia. It leads and coordinates local, national, and international humanitarian cash transfers through multiple platforms, including government cash-transfer systems and humanitarian cluster systems. With or without the support of other ministries, MoSA, in coordination with the DoSAs, often coordinates and/or facilitates the local-level arrangement of post-disaster-related cash transfers.

The key objectives of disaster-related CTP under MoSA are, first, to ensure that survivors' basic needs are met; second, to ensure well-targeted and efficient stimulus assistance for recovery and social protection; and third, to ensure effective survivors' rehabilitation, recovery, and relocation (KEMENSOS 2015). MoSA's CTP can be used as payment for building materials, living allowances, transitional housing, and death benefit for heirs. It can also be used to empower the economy of survivors, provide economic support for former combatants (in the context of post-conflict response), and support villages that have been displaced and where uprooted people are concentrated (KEMENSOS 2015).

3.5.2.1 PKH Programs

R12 has been on the PKH list since 2017. 'We used the money for school-related expenses such as uniforms. Sometimes we buy food for them if they ask for it. I sometimes received IDR 1.2 to 1.4 million'.

R17 from Raknamo village said: 'Before COVID-19, I received IDR 800,000; and during COVID-19, I received the same, IDR 800,000. The money is used to buy internet credit as my kids attend online school during the lockdowns'. While the cash is supposed to be used for children's education, R40 argued that households must also 'refocus' their plans away from education to survival, meaning that food is a higher priority than education, as her work has been affected by COVID-19.

When R25 was asked about the impact of COVID-19 on her food consumption, she said:

We don't feel it that much because we have received PKH from Dinsos [Department of Social Affairs, or DoSA]. The PKH helps us buy rice (18 kg package), oil, and instant noodles. For sure, it is hard to get money. We have gotten the PKH since 2017. And it helps during COVID-19.

In general, the voucher is for 10 kg of rice plus eggs and other commodities.

The respondents sometimes mixed up their views of cash transfers and other social protection program with PKH only. For example, the PKH beneficiaries, R37 and R44, often received PKH with a food voucher. R44 was once on the PKH beneficiary list and is no longer on the list despite having two children still in school. However, she is still on the list for a food voucher.

3.5.2.2 Food Vouchers (BNPT)

PKH is combined unconditionally with a conditional cash-transfer program, namely BNPT, to help low-income families whose children are in Years 1–12. BNPT is literally translated as ‘non-cash food assistance’ and is basically a food voucher that uses a market mechanism. It is a digital card (some communities call it a ‘rice card’) containing IDR 200,000, but it can only be used to procure rice and eggs at designated traders who can cash out at designated banks. Each household beneficiary is paid IDR 600,000 every three months. The total number of beneficiaries at the national level is 18.8 million families.

R28 is a beneficiary of BNPT and believes that BNPT is issued to mitigate the impact of COVID-19-related lockdowns. In theory, PKH beneficiaries will most likely also receive BNPT assistance (R60).

3.5.2.3 Social Cash Assistance (BST)

BST is an unconditional cash transfer, a long-term social protection program. Every beneficiary is registered in the national database, namely cekbankansos.kemensos.go.id. The list of beneficiaries is updated regularly. Not all members understood the difference between BST and other forms of cash transfer programs. What they understood is the guideline that no one should belong to more than one of the social protection schemes.

According to an RT (head of a neighborhood), not all of the most vulnerable can be covered by a BLT from village funds. In a way, it sounded like a lottery. Since there is a variety of schemes run by central governments, they have to decide which cohort will get BLT, while others receive BST (cash-based social assistance) from ‘Pusat’ (the central government). In Raknamo, 180 families received BST. There are 14 criteria for becoming a BST beneficiary. The beneficiaries must satisfy at least eight out of the 14 criteria. R60:

Yesterday, there was a meeting. We were invited by the RTs to discuss how to target the most vulnerable. Some have been affected by the earthquakes and now COVID-19. BST aims to cover the gap. IDR 300,000 is not enough, but it might help them out.

3.5.3 Re-orienting Village Funds for Cash Transfers

The government allocated a total of IDR 23.74 trillion (USD 5.1 billion), and subsequently 28.8 and 27.2 trillion, in the years 2020, 2021, and 2022, respectively, for the Ministry of Villages, Disadvantaged Regions Development, and Transmigration (MoVDRT) and village governments to target the poorest of the poor affected by COVID-19 that were not covered by existing MoSA social protection programs.

Each village establishes a committee responsible for selecting the most vulnerable households to be the recipients of the cash-transfer program through the Village Fund channel. During the first year of COVID-19, the agencies listed in Table 3.4 were not the only players that provided CTP to the affected communities. Several agencies adopted CTP to target vulnerable communities to cope with income losses and food insecurity. Fiscal readjustment was the key strategy at all levels of government in Indonesia. At district and village levels, the fiscal structure was readjusted to deal with COVID-19 (R26).

The allocation model in 2020 for Village Funds included the disbursement of IDR 600,000 per household per month for the first three months; and IDR 300,000 per household per month for the following months. By 2021, the allocation had shifted to IDR 300,000 per household per month for 12 months.

R26 confirmed that in all sub-districts in Belu (West Timor), the village governments have allocated ‘BLT dana desa—BLT DD’ (cash assistance from the Village Fund). The BLT DD results from annual budget refocusing, an imperative set by the MoVDRT. Each village will first establish the existing MoSA/DoSA’s social protection beneficiaries to exclude them from the list of BLT DD. The village government uses ‘Musyawarah Desa’—a community consensus meeting at which police and military often serve as the witnesses and endorsers. The list of beneficiaries proposed in community meetings is later endorsed by the head of districts and translated into the national database of beneficiaries.

Despite being almost indispensable and (therefore) undisputable to the beneficiaries and its proponents, some officials and NGO activists questioned unconditional cash transfers such as BLT DD. For example, R27 shares his views in a joke: ‘Our people are happy now as they receive their “salary” without working. Just sitting at home, they receive it every three months’.

R48 and R56 are aware of the Village Fund budget’s refocus toward allocating cash transfers (BLT). In Wani, Donggala, only ten people received BLT from the village fund, as others were already recipients of other MoSA/DoSA social protection programs such as PKH.

Due to the legitimacy of exclusion and inclusion consultation processes, most respondents trust their village governments. The BLT DD beneficiaries are not allowed to receive social assistance. R15, a neighborhood leader, said, ‘In this neighborhood, 12 people are PKH beneficiaries, one is BLT DD, and three receive other social assistance. This RW has four RTs, and the total number of BLT beneficiaries is only 12–15’.

BLT Village funds are distributed once every three months. Each family receives IDR 900,000 for three months (R08; R15). R27 received her cash from the nearest local bank. R28, R34, and R36 admitted that they also became BLT DD recipients soon after COVID-19. Throughout 2020 and 2021, they sometimes received their payments every three months, but more recently, they received them every two months. Interestingly, most respondents understood BLT as a safety net, a term popularized after the Indonesian crisis in 1999.

The 2021 Village Fund budget was IDR 72 trillion for 74,961 villages. The main focus of using the Village Funds in 2021 was to support Sustainable Development Goals activities in the village, the implementation of the Village Cash Work Unit (PKTD), and the adaptation of new habits after COVID-19. The Village Funds can also be allocated for cash for work. Unfortunately, our data found only one case of cash for work. R28 (Tulakadi, Belu, NTT) stated that they were required to clean up the roads and yards in their neighborhood in her village before receiving the money.

3.5.4 Coordination with the Police and Military

Coordination is multi-level. At the village level, village governments can access information regarding who gets what and when. This allows the village officials to exclude the existing beneficiaries of social protection programs from the Ministry of Social Affairs (MoSA). At the central government level, there are efforts to integrate the two largest social protection systems: the first from MoSA, the database CEKBANSOS—a database accessible to the public.⁴ While the new database is organized and managed by the Ministry of Finance (MoF) and the Ministry of Village Development (MoVDT),⁵ coordination at the village level is more complex. The inclusion of beneficiaries also demands the presence of police (Babinkamtibmas, police officers for security and public order), military officers (non-commissioned military officers at village-level Babinsa), and village facilitators at the registration and distribution stages (see Permendes 7/2021 on Village Fund Implementation Priority 2022).

Interestingly, for the village cash transfers, namely BLT DD, there is a village mechanism whereby decision-making is shared by community members and witnessed by grassroots-level state apparatuses, including police, military officers, and village facilitators (R22). Neighborhood leaders concur with the presence of police and military to ensure that local protests regarding cash transfers and food assistance do not lead to chaos (R15).

3.5.5 Social Capital

Literature has often cited the anti-social behavior of cash-transfer programs. There is an assumption that cash transfer erodes social capital (Pavanello et al. 2016). Interestingly, the context of the former East Timorese during COVID-19 suggests that cash transfers can strengthen and maintain cultural bonding within such groups. Fortunately, social capital and social protection are not mutually exclusive. Their combination can help prevent hunger among the uprooted East Timorese households in West Timor.

4 See: <https://cekbansos.kemensos.go.id/>.

5 See: <https://cekbansos.kemensos.go.id/>.

Social institutions, including religious institutions that rely on the congregation's contributions, also exhausted their cash flows due to the length of the COVID-19 crisis. This caused their operational funding to dry up. Consequently, they could not provide adequate support for their vulnerable members. A pastor from a local church whose members are mainly the ex-Timorese refugees said that he must depend on commodity crops from the wealthier congregation members in the city, and he occasionally shares them with the most vulnerable families (R01).

During the early onset of COVID-19, the local church managed to link up with the more affluent traders from the Catholic Church network. The ex-refugee communities continued to look after each other, as they have been doing since they arrived in West Timor 20 years ago. While their social networks are more complex and layered due to their history with the military-sponsored militia, their livelihoods were already uncertain before COVID-19. Existing social protection combined with COVID-19-related social protection was the key to famine prevention (R01).

R27 viewed cash not as empowering the communities, instead as spoiling them and making them less productive. The respondent argued that cash for work makes more sense than unconditional cash transfers (UCTs). R39 perceived that UCTs would create an easy spending mentality and less investment in productive activities such as farm-based ones. R30 accepted that COVID-19 directly led to a nutritional crisis, including child malnutrition, at the household level but argued that the cash assistant beneficiaries did not necessarily buy the most needed nutrition.

3.6 Final Remarks

The cash transfers were only a tiny fraction of the communities' incomes in displacement contexts. They remained living in the transitional shelters in Central Sulawesi and West Timor. Despite only being equivalent to 10–30% of local minimum wages in both provinces, the cash programs served as a tool for vulnerable households to jump-start their communities' food and livelihood security during the COVID-19 crisis, especially during the lockdowns. This suggests that, generally, communities can utilize cash programs to help them complement their foods and livelihoods. However, this study did not examine the self-mobilization or community-based arrangements among the local communities to secure their food needs.

This research examines the COVID-19-related cash transfer in the context of the overlapping crises of COVID-19 and disasters (earthquakes and cyclones). Displaced farmers in Central Sulawesi who had access to land could produce their own foods while benefiting from the social protection program. Likewise, the uprooted communities in West Timor were able to rely on cash transfers as well as their leftover crops after Cyclone Seroja while dealing with the ASF outbreaks.

Although Indonesian social protection policy is becoming more mature, disaster- and crisis-related social protection remain nascent policy options. Since 2018,

governments and NGOs have implemented various cash-transfer programs that have emerged as solid methods of social protection to ensure access to food and broader human security in disaster response and pandemics. A solid social protection policy demands legitimate village governments as they play significant roles in excluding and including vulnerable groups in various social protection programs.

In principle, a basic feature of the Indonesian social protection policy is equality, not equity. The multi-level and multi-sector cash-transfer design is based on the weak assumption of targeting, whereby everyone categorized as vulnerable can be included as a beneficiary, and such vulnerability is treated as homogenous. It is based on the premature concept of overlapping beneficiary targets. Nevertheless, most respondents were concerned not with overlapping policy but rather with how communities come to believe that no family should be a recipient of any two social protection policies, even in a crisis. Interestingly, this becomes an operational framework for local governments to launch an argument to support their selection of new families considered vulnerable and needing support. Such an approach could not be seen as empowering.

Local governments are more concerned with security (local protest) or conflict issues than actual empowerment. Therefore, the mechanics of cash transfer by the local-level government have been more about the smooth registration and inclusion of new beneficiaries. Therefore, it is no surprise to see the presence of police and military officers at distribution time. Observation from the field suggests that neighborhood leaders use such policy to defend formal social protection policy.

Village funds seem to serve as ‘superfunds’, as they can be adapted to tackle urgent problems at the grassroots level, such as disasters and epidemics. The decision on the allocation is made by involving wider stakeholders, from communities to state representatives. The village funds were also used to subsidize the poorest in Raknamo village (defined by those on the 450 kw Power Scheme).

Whether or not the cash-transfer program from NGOs is successful, these approaches are not straightforward. The empowerment approach to cash-transfer programs is more of an associated program of NGOs than the government. The findings suggest that the empowerment dimension of the government’s cash-transfer programs is partly achieved by default due to the embedded advantage for beneficiaries who exercise their agency but remain hidden. NGOs are more expressive in their empowerment-oriented cash programs. Cash transfers in the hands of humanitarian NGOs can mean benefits beyond financial transactions. Cash transfers provide an incentive for NGOs to deliver their empowerment agenda by opening up participation by the most vulnerable, creating spaces to shape and meet basic needs after disasters while facilitating capacity development on many fronts, such as empowering mothers feeding children under five with nutritional knowledge of how to prevent malnutrition, as well as business development skills for becoming small kiosk owners in camps.

Nevertheless, empowerment is layered at various levels. By itself, the cash program has been inherently pro-empowerment. However, it can be cultivated to expand the empowerment agenda at various levels. In West Timor, the government's stunting eradication program has been compromised by COVID-19. Therefore, undernutrition among children under five is likely to persist. Cash transfers can facilitate greater freedom, as the beneficiaries can use cash to obtain more choices or options. NGOs' protection and empowerment agenda has demanded some interventions regarding education and training of the most vulnerable communities relating to the use cash for improved nutrition in Central Sulawesi. Cash transfers as a protection measure can be engineered to create opportunity or 'an entry point' to ignite conversation around the more profound need for empowerment.

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4

‘LACKING IN CARE’

COVID-19 ‘Shadow Pandemics’ in the Philippines (2020–2021)

Maria Tanyag

4.1 Introduction

Drawing on the case of the Philippines, this chapter demonstrates how gendered insecurities are exacerbated when the pandemic response does not reflect the centrality of care relations and human security more broadly. Gendered insecurities during the COVID-19 pandemic are not exclusively shaped by either pre-existing conditions or the ‘unprecedented’ challenges posed by COVID-19. Rather, they cascade from and are logical outcomes of how the relationship between care and security is understood in crisis settings. Data for this research is drawn from an online survey and key-informant interviews with health workers and women’s rights service providers from the National Capital Region (NCR) of the Philippines. The survey consists of 89 anonymized respondents, with 51 identifying as ‘health workers’ and 38 as ‘women’s rights and service providers’.¹ Online interviews were conducted with ten representatives from organizations of and for health workers, women’s rights, and service providers. NCR is selected for data collection because initial data indicated that it was where approximately 41% of the total number of confirmed cases and 39% of deaths occurred, and it is where densely populated Manila is located.² Manila was reported as having one of the longest lockdowns in the world,³ while the country as a whole has been ranked the ‘worst

1 The survey was administered anonymously via Qualtrics. Participants were recruited purposively through research assistants who approached known organisations of health workers and women’s rights service providers in NCR. These groups then shared our survey link with their members to voluntarily complete. ANU Human Ethics Approval Protocol: 2021/609.

2 WHO Philippines Situation Report 71, February 27, 2021.

3 <https://time.com/5945616/covid-philippines-pandemic-lockdown/>.

place’ to be during the pandemic.⁴ Therefore, NCR constituted a site where acute cases of gendered insecurities could be examined and, particularly, where we could expect health workers and women’s rights service providers to have borne the brunt of the pandemic most severely.⁵ Secondary sources, including COVID-19 monitoring reports and news articles in the country, are used to corroborate the analysis of primary data.

The chapter is structured into three main parts. First, it provides a brief overview of existing scholarship on global health security and why crisis responses must be based on human-centric and holistic approaches to security. Evidence relating to the pandemic response to COVID-19 in the Philippines from 2020 to 2021 is used to substantiate the argument that the local response stratified health issues rather than addressing them holistically. Second, the chapter turns to insights from Filipino health workers and women’s rights service providers to illustrate how the ‘shadow’ or ‘hidden’ pandemics of gender-based violence and insecurities are a direct result of a national pandemic response fundamentally lacking in care. Their perspectives corroborate existing knowledge on human security, particularly from feminist perspectives, which recognize the centrality of care relations in ensuring the sustainability of everyday life. Third and last, the chapter discusses the implications of embedding human security perspectives in pandemic response for durable and inclusive post-crisis recovery. As the Philippine experience underscores, its national response has prioritized ‘rapid’ or ‘short-term’ relief at the expense of resourcing care which is central to human security. Gaps in pandemic responses can be redressed by countermeasures that reflect the centrality of care before, during, and after pandemics.

4.2 The Philippines’ Pandemic Response and Competing Health Needs

The first case of COVID-19 was confirmed in the country on January 20, 2020.⁶ Consequently, the Inter-Agency Task Force on COVID-19 was created to lead the pandemic response, and its membership consisted of retired generals and ex-military personnel, including a man locally dubbed as the ‘vaccine czar’.⁷ The task

4 www.bloomberg.com/graphics/covid-resilience-ranking/. Accessed March 19, 2022.

5 This point is made clear by the case of Mindanao examined in Chapter 9 by Ishikawa. The prevalence of COVID-19 cases was concentrated in NCR. The national-level pandemic response was therefore experienced differently across the country.

6 WHO. 2020. ‘Coronavirus Disease (COVID-19) Situation Report 1 Philippines, March 19, 2020’. www.who.int/docs/default-source/wpro---documents/countries/philippines/emergencies/covid-19/who-phl-sitrep-1-covid-19-9mar2020.pdf?sfvrsn=2553985a_2.

7 Key figures include retired generals Roy Cimatu, Carlito Galvez Jr, and Delfin Lorenzana. See Nikko Dizon. 2020. ‘Duterte and his Generals: A Shock and Awe Response to the Pandemic’. *Rappler*, July 31. www.rappler.com/newsbreak/in-depth/duterte-shock-and-awe-coronavirus-pandemic-response-generals.

force did not involve the direct participation of even one epidemiologist (Hapal 2021). President Rodrigo Duterte justified the composition of the task force on the basis that the military is best placed to lead the pandemic, for it excels in ‘logistics’.⁸ In his many pronouncements, he repeatedly deployed war-related language to frame both the virus and people who disobey COVID regulations (in Tagalog, *pasaway*) as the ‘enemy’.⁹ Consequently, punitive and violent lockdown measures were introduced, with the result that by April 2020, 156,000 individuals had reportedly been apprehended, with around 41,000 of those having been criminally charged (Hapal 2021, 230). Since 2020, there have been approximately 60,000 deaths, with 3.6 million having contracted the virus.

Studies on past pandemics and within the global health security literature more generally indicate that the continued privileging of national and international security over human security is evidenced by the global neglect of everyday health inequalities (Nunes 2014; Vaittinen and Confortini 2019). There is a need to closely examine the relationship between the pandemic crisis response and everyday human insecurities—including the ways in which these are generated. As the experience of the COVID-19 global pandemic showed, the scale of state interventions deployed to address this crisis has been unprecedented, but so are the cases of reported human rights violations, including ‘shadow’ or ‘hidden’ pandemics relating to the gendered impacts of COVID-19 that have emerged in tandem. These hidden or less addressed gendered consequences of the pandemic have been used in relation to the rise in cases of domestic violence and restrictions to access to essential sexual and reproductive health services and supplies. Here I include the well-being of frontline responders themselves as another interrelated shadow pandemic.

4.2.1 Immediate Impacts

Different health needs, from the health of COVID-19 patients to the health of health workers and social welfare providers themselves, were made to compete instead of being addressed interdependently. This is evident in the ways that pandemic responses worldwide generated shadow or hidden pandemics of violence against women, restrictions on access to essential services, particularly for sexual and reproductive health, and the range of harms experienced by health workers and service providers, such as discrimination and vilification (Mehta et al. 2021). Their emergence lays bare the limitations and adverse outcomes of a narrow state-centric security approach in addressing the gendered nature of global health

8 Azer Parrocha. 2021. ‘Ex-Generals Best People to Lead Covid Response, Palace Insists’. *Philippine News Agency*, March 23. www.pna.gov.ph/articles/1134594.

9 Yvonne Su. 2021. ‘How the Philippines’ President Duterte Weaponized a Filipino Custom during COVID-19’. *The Conversation*, December 19. <https://theconversation.com/how-the-philippines-president-duterte-weaponized-a-filipino-custom-during-covid-19-173723>; Hapal 2021.

crises. Human rights and human security were readily sacrificed or relegated as secondary to the overarching pursuit of ‘containing’ the COVID-19 pandemic, such that these gendered shadows or hidden pandemics are rendered ‘collateral damage’, particularly in countries such as the Philippines. As I demonstrate in this chapter, it is not the pandemic itself—but rather the response to it—that has disrupted the availability of other health services and skewed the distribution of resources and attention away from women’s health and well-being.

The UNDP and UN Women’s *COVID-19 Global Gender Response Tracker*¹⁰ serves as the main information hub that monitors policy measures enacted by national governments worldwide to tackle the COVID-19 crisis, as well as highlighting responses that are gender-sensitive. According to the first version of the report from the *Global Gender Response Tracker*, published in September 2020, countries in the Asia-Pacific region had an ‘uneven’ and ‘patchy’ response to the shadow pandemic. Moreover, ‘[s]ix out of 28 countries and territories analyzed in the region register no gender-sensitive measures at all in response to COVID-19’ (UNDP and UN Women 2020a, 4). By the third version of the report from the tracker, published in November 2021, it was found that most countries had stepped up by developing gender-sensitive measures to address violence against women, women’s economic security, and unpaid care. Gender-sensitive measures, however, still comprise a small proportion of total responses (approximately 30%). For instance, measures taken in response to COVID-19 that directly address unpaid care represent only 7.3% of all responses for social protection and the labor market (UNDP and UN Women 2020b).

In the Philippines, COVID-19 intersected with another health crisis in terms of the alarming increase in teenage pregnancies that pre-dated the pandemic. Indeed, teenage pregnancies were declared ‘a national and social emergency’ in 2019 (Abad 2020). In one survey, Filipinos reported it as the most important problem of women in the country at the time. Based on the Population Commission’s estimates, around 70,755 families were headed by minors at the end of 2020, a figure expected to increase to 133,265 by the end of 2021 (Abad 2020). One study found that gaps and challenges in ‘both the supply side (delivery) and the demand side (access) of essential family planning and maternal/newborn health services’ were exacerbated.¹¹ Moreover, it is by now well documented that there has been a global rise in domestic violence as people were forced to stay at home and access to essential services and assistance was constrained—or, in some cases, completely halted.

10 More information available at <https://data.undp.org/gendertracker/>.

11 The study was conducted by UNFPA and the University of the Philippines Population Institute (UPPI). Reference to the findings was presented is mentioned in a news article available at https://philippines.unfpa.org/en/news/significant-rise-maternal-deaths-and-unintended-pregnancies-feared-because-covid-19-unfpa-and?fbclid=IwAR0Z_DrVMRNSrIwwE5DZO6zRdeSvVQvUGCsVcdmFOVyUe9nIJT6zcr-kRWA.

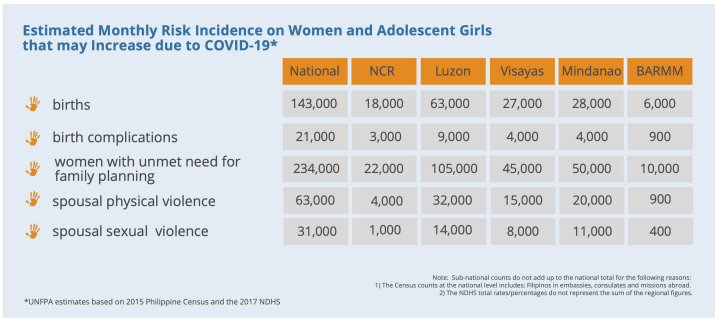


FIGURE 4.1 Data on sexual and gender-based violence (SGBV) exacerbated by COVID-19. <https://shop.un.org/rights-permissions>. Source: UNFPA Philippines (2020)

The Philippines was no exception (see Figure 4.1). Within months of COVID lockdowns being enforced in the country, women’s groups were sounding the alarm in relation to a highly likely pandemic ‘baby boom’. It was estimated that 1.8 million unplanned pregnancies and 751,000 unintended pregnancies would result from pandemic-intensified restrictions to accessing services and supplies (Santos 2020). For a country with already high maternal mortality rates, the baby boom would also likely be tied to increases in maternal deaths and health complications emanating from pandemic-clogged health systems and fractured social welfare mechanisms. Indeed, according to UNFPA Philippines (2020), this is likely to occur ‘[W]hen health service providers are overburdened and preoccupied with handling COVID-19 cases. However, lifesaving care and support to [gender-based violence] (GBV) survivors (i.e., clinical management of rape, mental health and psycho-social support, etc.) may be cut off. Other vulnerabilities that women are facing connected to the lockdown have also been reported’. Yet, the view adopted by the national pandemic response suggests that the COVID-19 pandemic, as a ‘law and order’ or ‘national security’ matter, was separate from ‘everyday’ health inequalities and concerns. This view did not align with the daily concerns of people, especially women, during the pandemic. Research indicates that Filipino girls and young women were worried more about the health of their family (68%), the duration of the quarantine (53%), slim chances of returning to school, and being able to leave their house (both almost 49%), than they were about contracting the virus (40%). They also reported worries about human rights violations and gender-based violence against girls and young women (Plan International Philippines 2020).

4.2.2 Long-term and ‘Shadow’ Impacts

Shadow pandemics as a result of failures in the COVID-19 response cascade into what is predicted to be an ‘impending human capital crisis’ in the Philippines (Cho et al. 2021a, 2021b). The effects of this pandemic will reverberate in the

form of long-term suffering, as well as compounded harm to the health and well-being of millions of Filipinos. These effects are also likely to be borne disproportionately by women and girls, given gender norms around the provision of care. For instance, there is already strong research that early and teenage pregnancies severely undermine the human capabilities of girls and further entrench them in poverty. Research in the Philippines points out that students' learning losses are also expected to be enormous as COVID-19 dramatically disrupts access to quality education (Cho et al. 2021b). While there were already pre-existing challenges in education—especially among the poor—the effects of the COVID-induced 'learning crisis' in the country are likely to be irreversible, prompting calls to prevent a 'lost generation' of youth. This pandemic learning crisis is gendered, based on worldwide data that shows girls are still more likely to never attend school or drop out during the primary level (UNICEF 2020). A pandemic 'baby boom' will likely mean increases in maternal mortality risks and a greater burden of work placed on health professionals who are already overwhelmed by the realities of triaging in a poorly managed pandemic. These examples of long-term effects underscore the urgent need for pandemic responses to be oriented toward a holistic promotion of human security beyond the 'emergency phase'.

Another long-term impact is the further erosion of health systems in the country, which can undermine societal resilience to future pandemics. The Philippines' preparedness for a pandemic was very low due to pre-existing health inequalities and funding gaps in gender-responsive programs, including for sexual and reproductive health. From the initial phase of the COVID-19 health crisis, there were clear shortages in equipment and facilities, endangering the safety of health workers.¹² The strain on health systems and health workers, specifically, is also an example of challenges in a country with multiple ongoing humanitarian crises. Consequently, the Philippines is among the few countries in the Asia-Pacific where COVID-19 is having high negative or constraining impacts on humanitarian access.¹³ Indeed, key informants interviewed for this research all argued that state capacity to respond to sexual and reproductive health needs and gender-based violence was really not available because, even at the height of the pandemic, there were evident shortages in equipment and facilities that endangered the safety of health workers themselves. Driven by global shortages, the Philippines experienced nationwide problems in the availability of personal protective equipment (PPE), ventilators, beds, and diagnostic equipment and supplies.¹⁴ Images of many Filipino health workers improvising their own PPE from

12 See Pham et al. 2020; Cho et al. 2021a, 2021b; UN Women Philippines 2020a, 2020b, 2020c; UNFPA Philippines 2020.

13 See UN OCHA, n.d. 'Philippines: COVID-19 Country Dashboard'. Accessed August 5, 2022. <https://interactive.unocha.org/data/ap-covid19-portal/country-page.html>.

14 World Health Organization. 2020. 'Shortage of Personal Protective Equipment Endangering Health Workers Worldwide'. March 3. www.who.int/news/item/03-03-2020-shortage-of-personal-protective-equipment-endangering-health-workers-worldwide.

different household materials, such as plastic bags and bottles, rapidly spread on social media (see, for example, *The Guardian* (2020)). They have had to make do with available resources, privately procure supplies themselves, or rely on donations. These health shortages are structurally driven and attest to decades of weak resourcing, especially in remote, conflict-affected, and rural areas (Tanyag 2018; see also Chapter 9 by Sachiko Ishikawa).

The already weak health systems in the country were further eroded by the lack of resourcing for health workers during the pandemic. Worse, in August 2021, a routine audit of state expenditures revealed that billions of pesos in COVID-19 funds had either not been used or been misused.¹⁵ The conditions have rapidly worsened for health workers, such that, on multiple occasions, a coalition of medical and healthcare groups protested and threatened to resign from their posts due to government inefficiencies and corruption, which left them underpaid and overworked while on the ‘frontlines’ of the country’s ‘losing battle’ against COVID-19.¹⁶ Based on existing data, almost 20% of all those infected in the country are health workers (The Philippines Humanitarian Country Team 2020). Given that women account for 70% of the total health and social workforce globally (Davies et al. 2019), the intensified erosion of health workers and systems will have long-term gendered effects on women, who disproportionately bear the brunt of workplace harms and face limited employment prospects within the country. It was unsurprising therefore that many Filipino health workers protested the government’s ban on such workers seeking jobs overseas while they continue to receive inadequate support as part of the response to the pandemic (Macaraeg 2020). While the overseas employment ban was eventually lifted, the government introduced a limit, allowing only 5,000 healthcare workers per year to work abroad, significantly less than the typical annual rate of 13,000 workers (Macaraeg 2020).

Last, the pandemic response also contributed to undermining the health of civil society, public deliberation, and democratic decision-making (Atienza et al. 2020). There are already concerning developments relating to how state responses to the pandemic have exacerbated democratic backsliding in several countries (International IDEA, n.d.; Asia Centre and Harm Reduction International, 2021), and made it even more difficult for civil society to ‘fill in gaps’ in humanitarian settings (Auethavornpipat and Tanyag 2021). This was most evident in the sidelining

15 ‘COA: DOH’s Low Utilisation of Crisis Funds Affected Health Services’. *Rappler*, August 19, 2021. www.rappler.com/nation/doh-low-utilization-crisis-funds-affected-health-services-coa-report-2020.

16 See Adrian Portugal. 2021. ‘Philippines Health Workers Protest Neglect as COVID-19 Strains Hospitals’. *Reuters*, September 1, www.reuters.com/world/asia-pacific/philippines-health-workers-protest-neglect-covid-19-strains-hospitals-2021-09-01/; and Neil Jerome Morales. 2020. “‘Losing Battle’: Philippine Doctors, Nurses Urge New COVID-19 Lockdowns as Infections Surge”. *Reuters*, August 1. www.reuters.com/article/us-health-coronavirus-philippines-idUSKCN24X31A.

and at times vilification of public health expertise by the Duterte government two years into the pandemic. For example, Duterte negatively framed Filipinos—especially frontline health workers—who expressed their discontent as ‘enemies’ who did nothing but complain (Ranada 2020). The pandemic response intersected with other tools used by the Duterte government for repression. For example, the Anti-Terrorism Act, which came into effect within months of the disease outbreak in the country, reportedly contributed to further restricting access to humanitarian assistance and the movement of aid workers. The military and police were reportedly perpetrating intimidation and harassment against civil society actors, particularly those implementing the humanitarian response. These include churches, service-oriented groups, and humanitarian organizations.¹⁷ They have also targeted local-level initiatives such as volunteer networks behind ‘community pantries’ and other forms of mutual aid or ‘crowdsourcing’ projects (Tanyag 2022; see also Chapter 9 by Ishikawa).

What explains these negative trade-offs? I argue that they emerged because the pandemic response in the Philippines was not anchored in human-centric or indeed feminist approaches to security. Feminist and human security approaches embody *holistic* approaches and can therefore enrich the way we diagnose sources of crisis and insecurity beyond the immediate or the spectacular. They pay equal attention to what is invisible and to underlying causes that are taken for granted or left unquestioned. They do not treat disease outbreaks as ‘exceptional’ or ‘crisis-specific’. Nor do they *separate* everyday health inequalities from pre-existing unequal gender relations. Issues of sexual and reproductive health and sexual and gender-based violence that have not been accounted for in the initial global and national COVID-19 responses will continue to be neglected and reproduced in future pandemics when global health governance operates through a ‘tyranny of urgency’ (Davies and Bennett 2016; Davies et al. 2019).

By contrast, a human security approach that is also gender-responsive attends to the dynamics of competition and prioritization in times of crisis. It is attentive to interrogating fundamental assumptions regarding what counts as a crisis and assesses which issues need to be taken more seriously. As Ako Muto and Yoichi Mine (2019, 306) point out, unlike ‘surgical’ or ‘invasive’ therapy that targets specific sources of pain or illness, human security resembles ‘internal’ or ‘oriental’ medicine designed to promote the resilience of an organism. In the context of the COVID-19 pandemic, it can be argued that states employed ‘surgical’ interventions that target symptoms rather than root causes. Without human security, pandemic responses are proving inadequate in promoting a continuum of long-term resilience across the security of individuals and communities to states and global society.

17 High-profile examples include the National Council of Churches in the Philippines; Gabriela Women’s Party, and Oxfam sa Pilipinas (Oxfam Philippines). See for example *ReliefWeb* 2020.

From a feminist human security approach, we need to interrogate the potential long-term impacts that result from the prioritization and re-allocation of resources to the pandemic response in terms of the neglect of other hidden crises. As this chapter shows, bringing together feminist global health and human security research in analyzing COVID-19 is essential in making visible the hidden pandemic that has accompanied COVID-19 and in problematizing the gendered biases underpinning what ought to be prioritized. A feminist human security is more responsive to the realities that result in disease outbreaks and global health crises being more broadly rendered as gendered crises (Davies and Bennett 2016). Robinson argues that human security grounded in care ethics is geared to ‘ask questions about who we care for and under what circumstances’ (Robinson 2016, 122). It understands human security in terms of ‘beings-in-relation’ rather than the prevalent assumption that renders individuals as ‘atoms’ situated outside of or beyond ‘webs’ of caring relations. Feminist care ethics emphasizes how mutual dependence is a permanent feature of everyday life (Robinson 2011, 2016). Resourcing care practices and institutions is fundamental to human security and an important indicator of the empowerment and well-being of communities and societies as a whole. The next section turns to the findings drawn from a survey conducted among a purposive sample of health workers and women’s rights service providers, as well as key-informant interviews with representatives of organizations of and for these target groups.

4.3 From *Makatao* to *Tayo-Tayo*: Care Amid the COVID-19 Pandemic

Key informants representing health workers and women’s service providers assessed their pandemic experiences in light of a national government response that was ‘lacking in care’. To them, there was a clear connection between the pandemic response and the adverse impacts they were experiencing. As one informant pointed out, the whole approach was not *makatao*,¹⁸ that is, it did not put people’s needs at the heart of the crisis management and response. They reported an acute awareness that the carers are not being cared for. This is corroborated by several public statements by health workers’ associations, for which they have been vilified by the government, as mentioned above. What this has translated into over the past two years since the start of the pandemic is the expectation that those who have the task or duty of providing care to COVID patients, their own families, and communities—and particularly victims of sexual and gender-based violence—are elastic ‘safety nets’ who can absorb pandemic impacts and gaps in responses at their own expense.

18 A Tagalog word that translates as ‘people-oriented’ or ‘human-centric’. Online interview, February 17, 2022.

In the survey, health workers and women's rights service providers were asked about their level of satisfaction with the support they receive from their 1) employers; 2) local government; 3) national government; and 4) family, friends, and community. They were also asked to reflect on their own capacity to care for themselves and what kind of care and support they require to continue their jobs. Moreover, they were asked to indicate their level of trust or confidence in the ability of their employer, national and local governments, and their own family, friends, and community to be able to provide the care and support they need. For the health workers group, the majority of respondents were satisfied with the support received from employers and local governments. This group was divided in their assessment of the national government, with 35.3% 'somewhat satisfied', 25.5% neutral ('neither satisfied nor dissatisfied'), and 17.7% 'somewhat unsatisfied' or 'completely dissatisfied', respectively. Similar results were reported by survey respondents belonging to the women's rights service providers group. Indeed, while this group reported satisfaction with support from employers and local governments, their views were also divided in terms of the national government. Around 33% reported low satisfaction or complete dissatisfaction, while 28% were satisfied or somewhat satisfied.

Views regarding national and local government responses are likely to differ due to the fact that a number of local governments did step up to mitigate gaps in national government responses. There were local mayors who were seen as more effective and, therefore, more caring or responsive to people's suffering.¹⁹ However, instead of being celebrated and emulated, these local government 'best practices' were castigated by President Duterte, who reiterated, 'it is the national government that should call the shots' (Tomacruz 2020). Local mayors were thus seen as either 'upstaging' the national government or representing another case of *pasaway*. The results show that various forms of local-level implementation contributed to unequal outcomes nationwide—especially demonstrated within NCR—such that some regions had fewer casualties relative to population and had better relief services available (Talabis et al. 2021).

By contrast, both groups of health workers and women's rights service providers overwhelmingly indicated satisfaction with the support they receive from their own family, friends, and community. When asked to assess different sources of care in relation to their ability to provide the care our respondents needed, the level of trust or confidence decreased as the scale or distance involved in caring relationship increased (see Table 4.1). Both groups reported very high levels of trust that their family, friends, and community were able to provide the care and support they needed, while the national government was viewed as the least capable of doing so.

19 Notable examples were Quezon city and Pasig city. See Talabis et al. 2021.

TABLE 4.1 Level of trust in the ability of the following groups to provide the care and support needed³⁰

	<i>Family, Friends, and Community</i>	<i>Employer</i>	<i>Local Government</i>	<i>National Government</i>
Health Workers	87	71	71	62
Women’s Rights Service Providers	92	87	53	50

These survey findings, although focused on specific groups situated in one of the most severely affected areas in the Philippines, do corroborate existing reports and public statements by civil society groups nationwide regarding shortcomings in the government response. The lack of confidence in the ability of the government to provide care for health workers and women’s rights service providers directly results from the exclusion of perspectives from these sectors in crisis decision-making and leadership. A strong example of this is how, from when he came to power in 2016, Duterte prioritized improvements in the salaries and benefits of the military and police (Tanyag 2022). During his term, health workers did not receive the same increase in support. Worse, many of them continue to be denied their COVID-19 hazard pay and benefits—even after two years of the pandemic.

Several key informants stressed that the response at the national level reflected a lack of ‘sensitivity’ or awareness of the differences in access to ‘safety nets’ and coping mechanisms among Filipinos. For example, informants pointed out how the initial imposition of ‘hard’ lockdowns, which strictly confined people inside their homes, completely ignored the issue that many urban poor Filipinos did not have safe and adequate shelter. Those residing in slums often had multiple or extended families living in extremely small makeshift housing, and thus access to safe outdoor spaces was a basic necessity.

Another example is how the sacrifices expected of ‘frontline’ responders were not really appreciated due to delays in proper financial compensation, such as hazard pay, and a lack of workplace protection, including mechanisms to address an initial wave of stigma and discrimination. Because the government’s militarized pandemic response was not *makatao*, they had to resort to ‘self-help’ and rely on themselves to care for each other, an approach that was described as *tayo-tayo*.²⁰ One initiative developed by the Philippine Nurses Association Zone 3 (Marikina and Quezon City districts) was called the ‘Who Cares for the Carers’ program at a time when fears and anxiety among the association’s members were high. The program involved crowdsourcing private donations for nurses, ranging from hygiene kits, PPE, and ‘gifts’ to cheer them up. Reliance on self and immediate

²⁰ *Tayo-tayo* is a Tagalog word that translates as ‘among or between us’—used to describe reliance on internal or collective caring efforts.

social relationships, such as family, friends, and community (including co-workers), appears to have been the backbone of health workers' and women's rights service providers' efforts to survive amid the intensified burdens they faced due to the pandemic and the government response.

Tayo-tayo was also evoked by the spontaneous and rapid spread of 'community pantries', where residents from a neighborhood share food and basic everyday supplies with anyone who needs them. This was first reported in April 2021 when news spread of an initiative by a woman in Quezon City (Metro Manila) who set up a community pantry in her neighborhood—named Maginhawa. Within a matter of days, inspired by the Maginhawa example, community pantries in other neighborhoods began to emerge all over the country. Many celebrated these community pantries as embodying mutual aid and trust among Filipinos. However, it is important to note that this movement—built around community care—emerged precisely because of the militarized pandemic response. As survey respondents and key informants of this research stated, these initiatives emerged because people did not trust or expect the national government to provide them with sufficient care. As in other crisis settings such as disasters, the romanticization of Filipino mutual aid practices feeds into national myths of survival. These myths include the narrative that Filipinos can innately make do or even innovate to survive during times of crisis, despite limited relief assistance from the government (Su and Tanyag 2020).

Interviews with representatives of these groups also yielded many examples of how the private sector 'stepped up' to care for the carers. Many pointed out that the national government itself was struggling to manage the pandemic, and so health workers and women's rights service providers could not afford to simply wait for or expect assistance from the government. Indeed, others pointed out that, under Duterte, the national government was a threat to the human security of these frontline responders, especially those working on women's rights. *Tayo-tayo* became the default coping mechanism among frontline responders and their families and extended social networks. It therefore demonstrates how caring relationships are an important aspect of carving out spaces of resistance to counteract or shift pandemic responses toward more caring approaches. The availability and reliability of care from families and communities empower health workers and women's rights service providers to fulfill their duties in managing the pandemic, as well as in caring for their own well-being.

Paradoxically, despite the lack of care and support received and expected from the national government, survey respondents indicated confidence in their ability to take care of themselves and to continue in their jobs in the context of the pandemic. According to the survey results, most healthcare workers were 'somewhat happy' with their ability to perform their job in the next 12 months (55%). This group was followed by those who 'feel very happy' (32%), 'somewhat unhappy' (9%), and 'neutral' (5%). The majority reported that they were somewhat happy with their ability to take care of their personal health and well-being (68%). Similarly, women's rights

service providers responded that they had also been able to provide for their own needs and take care of themselves from the beginning of the pandemic. Moreover, they also believed that they would be able to continue to look after their personal health and well-being and do their jobs over the following 12 months. What these responses suggest is an even greater reliance on family and community to ensure the survival of both caregivers and care receivers during this pandemic crisis.

Unless there is a drastic change in the security approach espoused at the national level, survey respondents and key informants in this research indicated that care will continue to be the backbone of pandemic survival, despite the lack of resources to sustain caring relations, especially among health workers and women's rights service providers. Of course, this has implications for the sustainability of their capacity to address ongoing consequences from shadow or hidden pandemics, particularly in providing ongoing care for victims of sexual and gender-based violence and timely access to information and services on sexual and reproductive health. These are real concerns given reports of the redirecting or refocusing of personnel and resources toward the pandemic response and away from development and democracy-building programs. A clear example is that activities that were originally slated as training activities have been refocused as relief response efforts (Nixon 2020). Many civil society organizations have reported operating at reduced levels or were forced to suspend operations temporarily (UN Women 2020). COVID-19 is demonstrating that vital services available to women and girls are constrained, as non-governmental organizations (NGOs) themselves struggle to mobilize resources for the work they do and as they too have had to deal with the crisis as it affects them, their families, and communities (Johnston et al. 2021).

Respondents and key informants provided information on what they need to be able to care for their own health and well-being. At the time of the survey, some of them highlighted that they need support for their mental health, as they were already feeling the heavy effect of this pandemic, prolonged lockdowns, and workplace insecurities. They also stressed that they need aid and financial support, and some even expressed a hope that they would have better monetary compensation and insurance coverage. Financial support was a major concern; they wanted to remain economically protected despite fears of job loss or underemployment should they become infected with COVID-19 and, more significantly, end up hospitalized as a consequence. Almost all of them expressed that they need emotional, mental, physical, spiritual, and moral support to be able to continue in their jobs. Some included wanting to have more training or skills development activities so they could enhance their abilities.

Respondents who are medical workers also mentioned that they need a 'real' break from their jobs, as they were already too tired. They also want some services, such as a free shuttle service to and from their jobs, which makes them feel safe and helps them save money because at least they do not have to pay the fare. Differences between the needs of various categories of health workers also

emerged. For instance, a *barangay* or community healthcare worker indicated the need for additional training and support services to relieve anxiety due to job insecurity. A physician in a public health facility, on the other hand, shared the view that their salary is not commensurate with the amount of effort expected from them. While both expressed the need for care in the form of economic support, there are clear differences in the level of economic security given their different status within the country's health systems. It is important to note that the bulk of reported care needs by the respondents was financial in nature and, notably, required economic resourcing by the State.

4.4 Conclusions

This chapter has examined the pandemic situation in the Philippines from 2020 to 2021 by highlighting the connections between the national pandemic response and the prevalence of shadow and hidden pandemics relating to gender-based violence, restrictions on accessing non-COVID and everyday health services—including for sexual and reproductive health—and deterioration in the health and well-being of health workers and women's rights service providers. Drawing on a feminist human security approach, and with a particular focus on care ethics, it argues that the pandemic response did not reflect how care constitutes a permanent background to human life before, during, and after crises. Using the case of the Philippines—and specifically perspectives from the experiences of 'frontline' workers consisting of health workers and women's rights service providers—this chapter has shown crucial 'care gaps', such that those tasked to give care during the pandemic were also egregiously denied care by the State.

Consequently, in the absence of state-level care inflows to sustain the health and well-being of health workers and women's rights groups, they have resorted to harnessing 'self-help' coping mechanisms underpinned by mutual relations of care. Gaps in the pandemic response triggered the emergence of new community-driven, 'self-help' strategies based on the belief that people cannot rely on help from the government and therefore must weather this crisis on their own. These community-driven initiatives can potentially strengthen civil society and repair societal damage caused by the pandemic in the long run but paradoxically may also divert attention from the need to improve national pandemic responses in the future. While these initiatives have proven valuable, they may not necessarily address the structural root causes of what makes 'frontline' responders insecure. Shifting the crisis response toward human-centric and feminist approaches will be critical in ensuring that caring relationships, practices, and institutions are considered a priority and therefore permanently and sustainably resourced.

The findings of this research affirm the longstanding critique by feminist and critical health scholars of the dangers of narrow security approaches, especially regarding gender. This is because crisis responses can create and reinforce

hierarchies among health security issues to the detriment of women and girls, preventing inclusive post-crisis recovery. Indeed, what is evident in the case of the Philippines is that the pandemic response was lacking in care. There are worrying predictions of long-term harms to human security emerging from the compounded impacts of shadow pandemics on gender equality and the empowerment of communities more broadly. Crises can provide windows of opportunity to develop antidotes that can reclaim, secure, and promote a human security approach to intersecting health crises of COVID-19 and rebuilding health systems in the aftermath.

Two years of the COVID-19 pandemic have demonstrated clear lessons that can be applied in strengthening or ‘crisis-proofing’ security approaches. First, gender equality is central to advancing human security. Empowerment—especially for women and girls—is linked to their right to self-determination or the ability to make decisions regarding care for others and for their own well-being. Women’s health and the health of those tasked with responding to the pandemic are indispensable for crisis response and the inclusive long-term recovery of societies. Second, caring for the ‘carers’ must be considered a necessary investment in crisis preparedness. Human security approaches need to attend to demands and challenges at the intersections of crises that recognize women’s and girls’ roles in the production and reproduction of daily life. The path of re-orienting toward a human security approach in the Philippines will be long and difficult—but necessary. An indispensable step in this direction is to recognize and urgently respond to the hidden pandemic by ensuring gender perspectives are part of any crisis response. It is also essential to create spaces for civil society to be able to shape decisions over post-COVID pandemic recovery and reconstruction plans.

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5

FINDING EMPOWERMENT AMIDST DISPLACEMENT AND IMMOBILITY DURING DISASTERS

Lisette R. Robles

5.1 Introduction

Mobility is a significant part of our current global experience. People move for complex, interconnected reasons, such as the need to adapt to changes in their surroundings or to escape from existing or anticipated threats to their lives and well-being. Climate change and other natural hazards, in particular, comprise longstanding threats to people's security, prompting voluntary or forced movement. Despite the decline in fatalities from climate and natural hazard-induced disasters, the number of those forcibly displaced continues to grow.

The year 2020 saw the largest rise in the number of new displacements in a decade (reaching 40.5 million internally displaced people). Of these, 30.7 million were displaced as a result of disasters, primarily water-related hazards, with most occurring in Asia and the Pacific (Internal Displacement Monitoring Centre 2021). During displacement, people's safety cannot be totally guaranteed, as evidenced by the prevalence of gender-based violence associated with the inequitable distribution of relief items and other economic challenges. Insecurity can also be seen in the deterioration of the health and social well-being of evacuees resulting from protracted displacement (International Federation of Red Cross and Red Crescent Societies 2016; Yonetani 2016; Bris and Bendito 2019). Hence, regardless of the extent and length of their displacement, people experience precarious conditions, highlighting displacement as a critical human security issue with direct and genuine consequences for people's lives, livelihoods, and dignity.

The goal of confronting critical and pervasive threats through a people-centered response is a feature of the human security approach, one that re-centers attention away from the security threats to focus on those who are made vulnerable and marginalized by such insecure conditions (Elliott 2012). A people-centered

perspective draws attention to the forcibly displaced and the possibilities for the creation of comprehensive solutions to the root causes and cascading consequences of problems. It does this through the implementation of protection instruments and the development of empowerment opportunities. The human security approach features a dual policy framework, resting on the mutually reinforcing pillars of top-down protection and bottom-up empowerment (Office for the Coordination of Humanitarian Affairs 2009, 9–10). In disaster displacement, the combined implementation of top-down and bottom-up approaches situates the displaced at the core of protection, enabling them to tackle their current insecurities and avoid the recurrence of catastrophes.

The increasing attention being paid to the impacts of disasters has prompted the development of protection initiatives that integrate displacement into the larger institutional instruments related to climate change and disaster risk reduction. International agreements like the United Nations Framework Convention on Climate Change (UNFCCC)¹ and the Sendai Framework for Action² recognize the need to mainstream responses to displacement. Likewise, specific plans for disaster-induced cross-border displacement, such as the Nansen Initiative, include critical aspects of the protection agenda across all relevant phases of displacement.³ Moreover, with the growing occurrence of disasters from natural hazards, including extreme weather events, many countries have established national action plans for disaster response. For Japan, the specific measures for disaster response and recovery, including comprehensive disaster risk management (DRM) and adaptive social protection (ASP), are articulated in the Disaster Countermeasures Basic Act (Art. No. 223 of 15 Nov. 1961; Rev. June 1997).⁴ These instruments are intended as a means of providing comprehensive protection, including curtailing the spread of infectious diseases among people experiencing disaster displacement.

Equally, bottom-up empowerment has been observed and described by community members in different stages of recovery from disasters, such as the strengthening of ‘self-reliance’ in New Orleans as a post-Hurricane Katrina recovery

1 UNFCCC established the Task Force on Displacement to develop recommendations for integrated approaches to avert, minimize, and address displacement related to the adverse impacts of climate change (Decision 1/CP.21) (UN Framework Convention on Climate Change 2016).

2 The Sendai Framework for Disaster Risk Reduction (SFDRR) provides multiple hooks for policy and action to address displacement as a major human consequence and driver of disaster risk, whereby progress toward the SFDRR targets will play a part in preventing, minimizing and addressing displacement and its impacts (Yonetani 2017).

3 The Nansen Initiative is a state-led consultative process designed to build consensus on a protection agenda to address the needs of people displaced across borders in the context of disasters and the effects of climate change (source: www.unhcr.org/5448c7939.pdf).

4 This comprehensive law is supported by the Disaster Relief Act (response phase) and the Act Concerning Support for Reconstructing the Livelihoods of Disaster Victims (recovery phase), with the engagement of all levels of government, as well as non-profit organizations (NPOs) and community-based organizations (CBOs) (World Bank 2019, 3).

strategy (Chamlee-Wright and Storr 2011). It also can be seen in the collective action of residents in temporary resettlement sites in Tacloban after Typhoon Haiyan hit the Philippines in late 2013 (Robles 2021). Similarly, local cultural initiatives after the 2011 Great East Japan Earthquake (GEJE) embodied the empowerment of the affected local population residing in shelters and temporary housing (Fukushima 2014). These examples of empowerment have been observed and identified across different contexts and crises, through the demonstration of collective action among affected and displaced communities—and those who support them. Over the years, combined protection and empowerment strategies have been used to address wide-ranging human insecurities in the face of natural hazards and climatic changes. The success or failure of responses and recovery from these disasters can be attributed to both top-down protective instruments and bottom-up empowerment initiatives put into place.

Our collective experiences from 2020 have proved that crises do not wait for the effects of other disasters to end. While we navigate our response to the pandemic, disasters induced by natural hazards persist. Several studies have examined the occurrence of dual disasters (Hyndman 2014) and even multi-hazard scenarios (Bacon and Hobson 2014). Common multi-hazard disaster settings include combinations of natural hazards, with one being the consequence of the other (i.e., extreme weather conditions resulting in devastating floods and landslides, seismic activities followed by volcanic eruptions, and even a tsunami). But what distinguishes the current crises involving COVID-19 compounded by disasters from previous crises is the extent of the threats and the need for modified ways of responding and creating contextually suitable solutions.

The leading UN agency on disaster risk reduction acknowledges the need to combat the dual challenges of COVID-19 and climate-related disasters, as well as the need to re-assess disaster risk governance during the pandemic (United Nations Office of Disaster Risk Reduction 2020b, 2020a). Likewise, regional cooperation by ASEAN Plus Three recognized the importance of mental health as a critical public health issue that has been exacerbated by disasters and public health emergencies and other emerging and unprecedented crises, including the COVID-19 pandemic ('Chairman's Statement of the 22nd ASEAN Plus Three Foreign Ministers' Meeting' 2021). Countries have also begun to reconsider their disaster management plans, highlighting the need to review and modify their national disaster risk reduction strategies to incorporate COVID-19 lessons, including building multi-hazard risk scenarios (United Nations Office of Disaster Risk Reduction 2020a, 8). The pervasive spread of COVID-19 has demonstrated that institutionalized protection mechanisms do not adequately cover and respond to widely varying needs. At the local level, the current pandemic has widened the social gaps between groups and communities. Although mitigation efforts are ostensibly directed toward protecting society as a whole, they often end up marginalizing or even excluding certain populations from the support they need to survive (Slater 2020, 3). Thus, it is important to re-assess whether these previously

established protection measures are sufficient to protect people confronting the combined threats of disasters and a pandemic.

This intersection of disasters and infectious diseases raises questions regarding the role of empowerment for people displaced by disasters during a pandemic. For people in such circumstances, human security derives from the protection from all the insecurities accompanying their forced move, resulting from combined pre-disaster insecurities and the pandemic. The need for protection is therefore indispensable for people in vulnerable situations who are navigating their responses to disaster displacement. However, in such situations, the agency of disaster-displaced people and their participation in addressing their displacement are equally required.

Empowerment can happen and develop at any stage of displacement, from transit to reaching more durable solutions following return, integration, or resettlement. In this chapter, I attempt to explore what characterizes empowerment for people experiencing disaster displacement. By using temporary housing as a spatial reference for a specific stage of displacement, I will attempt to identify how empowerment manifests itself among displaced people in the context of institutional constraints and the actors that enable their empowerment. This chapter is dedicated to understanding the underpinnings of empowerment for people in situations of disaster displacement during a global pandemic.

This extended introduction to the chapter is followed by a brief description of the research methods and an overview of the conceptual framework of empowerment as interpreted within the context of displacement. I then present the case of the displaced Kuma Village residents in Kumamoto, who were affected by the South Japan floods of July 2020. Through an exploratory analysis of the combined crises of the COVID-19 pandemic and disaster displacement, the study will look at how empowerment has developed for the displaced people of Kuma Village while they remain in temporary housing and consider the prospects for their planned relocation.

5.2 Examining Empowerment during a Pandemic

Research into human security highlights how individuals and communities are not merely reference points for thinking about insecurity and its remedies: They should be active subjects and not merely passive objects of attempts to re-establish security (Martin and Kostovicova 2014, 302). In this manner, exploring the empowerment of displaced communities can help to elucidate the bottom-up approach in human security research. This study aligns with other research on environmental migration and displacement through a combination of descriptive and analytical techniques. It looks beyond the reasons for people's migration to explore more complex questions, including human security.⁵ This chapter therefore presents

5 See: 'Qualitative Research Techniques: It's a Case-studies World' (Gemenne 2018).

a unique empowerment narrative through inputs from those facing insecurities and their support network, addressing the critical concern: the security of whom, security from what, and security by what means.

This study is based on the use of a combination of descriptive research instruments, including (1) a literature review, (2) a questionnaire, (3) field visits, and (4) in-depth interviews with the displaced population and local actors. This exploration of empowerment began with the collection of academic publications on the combined themes of human security and disaster displacement, together with local documents from Kuma Village. A structured questionnaire was distributed to the residents living in temporary housing to inquire about their individual situations before and at the beginning of the pandemic, during the 2020 South Japan floods, and their life in the temporary housing.⁶ This was supplemented by an in-depth interview with a resident living in temporary housing in Nishiki and a group interview with six Sakura Dome temporary housing residents. To account for the voices of the other local actors in the village, additional in-depth interviews were collected from five local resource persons (LRPs). This included a retired professor who has been supporting the revitalization of Kuma Village for 14 years (LRP 1), a Kuma Village resident managing the village revitalization association (LRP 2), a staff member from the Social Welfare Council Support Center (LRP 3), and two members of staff from the local government (LRP 4, LRP 5). All data were collected between September and December 2021 through the support of a local research assistant based in Kumamoto. These inputs were utilized to piece together the insecurities and protection methods of those living in temporary housing, and the support available for them.

The flood-related displacement in Kuma Village is not an uncommon experience in Japan. The challenges accompanying the stay in temporary housing after a disaster mirror those associated with the displacement after the 2011 Great East Japan Earthquake (GEJE). Hence, it is important to understand and reflect on the issues and changes brought about by the GEJE in displacement. To complement the data collected from Kuma Village, I sought insights from experts working on the GEJE from various fields of expertise, conducted two online interviews, and engaged in correspondence. The three Tohoku Disaster Experts (TDEs) include an expert on post-disaster housing reconstruction and community-based recovery planning (TDE 1), a cultural anthropologist engaged in disaster research since 2015 (TDE 2), and an expert in the sociology of disaster, local community, and regional industry (TDE 3). All of these respondents are affiliated with different universities in Japan.

6 Ethical approval for the use of the 'Questionnaire/Guide Questions' was obtained from JICA Ogata Research Institute on October 8, 2021. It was carefully prepared through the combined Interview Guide Questions on Empowerment from the Project, and Ethical Considerations for People in Situations of Forced Migration (Clark-Kazak 2017), and the Ethical Standards for Research during Public Health Emergencies, distilling existing guidance to support COVID-19 R&D (WHO 2020).

While the experience of COVID-19 can enrich our understanding of the characteristics of empowerment in complex crises, it has constrained how the research was carried out. I was able to collect data directly from Kuma Village through two field visits, but the developing COVID-19 situation limited access to the residents of the temporary housing sites. The opportunity to directly capture ‘local voices’ was limited, as the safety of the research subjects and the researcher was prioritized. Nonetheless, the data collected from the combined research instruments is sufficient for an exploration of the development of empowerment for people in the context of displacement from flooding during the COVID-19 pandemic.

5.3 Defining Empowerment in Disaster Displacement

Before diving into the analysis of empowerment in disaster displacement, I will begin by providing an explanation of the empowerment concept that will underpin this study. As explained by Des Gasper, any ‘complex general concept needs to be explored as part of the discourse, or indeed as a part of a family of discourses since there are multiple different contexts of use in which it is taken up and related to or confronted with diverse other concepts, users, and concerns’ (2014, 28). Although Gasper was applying this approach to human security, it parallels how empowerment can be described and explored; that is, within a specific social context and intended use.

Empowerment has been adapted and interpreted in different discourses. The early 1960s empowerment rhetoric advocated the development of a ‘critical consciousness’ utilized by social service providers in research and interventions concerning marginalized groups such as African Americans, women, gays and lesbians, and people with disabilities (Calvès 2009).⁷ The income disparity between the Global North and South demanded an alternative model to address this gap. John Friedmann’s (1992) ‘alternative development’ highlighted the importance of starting empowerment at the local level, centered on the household—the basic unit of life and livelihood, where social, political, and psychological powers are present. Since the late 1990s, several international organizations have focused on eradicating poverty, and the World Bank’s ‘World Development Report 2000/2001: Attacking Poverty’ has institutionalized the term ‘empowerment’ within this new poverty-alleviation discourse (Calvès 2009, 16). However, one misconception of empowerment, used by international development organizations, sees empowerment not as a long-term bottom-up process of transformation that is difficult to measure, but as a predetermined state or result to be achieved (28). Despite the earnest intentions to engage people in addressing their insecurities, the imposition of top-down initiatives without sufficient consideration of the people’s strengths and capacities defeats the central purpose of empowerment.

7 See: Paulo Freire’s *Pedagogy of the Oppressed* (originally published in 1968)

Hence, the empowerment process cannot be reduced to standards and measured by a yardstick from above. It is inherent in empowerment that change transpires from the bottom up, when people participate and gain control of their circumstances. This notion of empowerment is explicitly described in the interpretation of human security.

The 2003 publication *Human Security Now* comprehensively describes empowerment as situated side by side with protection as the keys to human security. It defines empowerment as ‘strategies that enable people to develop their resilience to difficult situations’ (Commission on Human Security 2003, 10). These strategies are built upon the capacities of the affected community(ies) to cope with the identified threats and to strengthen their resilience and ability to act on their own behalf and on behalf of others (Office for the Coordination of Humanitarian Affairs 2009, 18). Alsop, Bertelsen, and Holland’s analytical framing of empowerment provides a similar definition and further elaborates on empowerment’s occurrence between people’s capacity to act and make free choices (agency) and the institutions that govern and compel their actions (structure). That is to say, people’s agency does not necessarily translate into empowerment, as there are specific rules and social forces through which it is negotiated. So, even though people may have the ability to make purposeful choices rooted in their own agency, specific institutional contexts may limit or influence the transformation of their agency into action (Alsop, Bertelsen, and Holland 2006b; Luttrell and Quiroz 2009). Thus, empowerment manifests between this relation of agency and (operational) structure.

In his discussion of human mobility and development, De Haas (2009) referred to Amartya Sen’s (1999) conceptualization of human capability, which relates to the ability of human beings to lead lives they have reason to value and enhance the substantive choices they have. This conception can also be applied to our understanding of human mobility. Within the literature on migration, the aspiration-capabilities model is among the migrant-centered models that explore people’s migration behaviors. Adapting the capabilities framework reorients human mobility as a means of enhancing people’s capabilities and, therefore, well-being for (1) instrumental (a means to an end) and (2) intrinsic (directly well-being-enhancing) reasons (de Haas, Castles, and Miller 2020, 62). This implies that we need to treat migration as a resource that enables people to access better opportunities and creates awareness of the freedoms related to their mobility. Whether on a permanent or temporary basis, migration has always been one of the most important survival strategies adopted by people in the face of natural or human-caused disasters (Hugo 1996, 105). Hence, migration is treated as a crisis strategy that empowers people and the community to cope with and adapt to challenges, such as natural-hazard-induced disasters.

In exploring the human security issue of displacement (forced migration), empowerment can be understood in relation to mobility. Migration can be perceived as a resource that enables people to access better opportunities and creates awareness of their freedom related to their mobility. However, not

all movements are voluntary, and not everyone has the capacity to move, thus reducing migration's value as a source of capabilities and aspirations. Zetter and Morrissey (2014, 344) emphasized that, in understanding the relationship between environmental stress and human (im)mobility, it is crucial to answer the question of what structural features cause some people to respond to environmental stress by migrating while others do not or cannot. This line of questioning can be viewed from a displaced-population-centered perspective, seeking to understand people's capacities and how they are negotiated in relation to certain structural factors. In the context of displacement, where people have limited mobility, they are unable to use migration as a resource to cope and build resilience.

Immobility, especially in the environmental context, was initially explored in the Foresight Report (Government Office for Science, London 2011), which examined how residual populations can become trapped in places where they are vulnerable to environmental change. The report elaborated on how populations that are more vulnerable to climate change are less able to move away from the situation. Certain geometries of the displaced population, including older people and those with disabilities, are often challenged to secure themselves. They comprise the trapped population who not only aspire to move, while also needing to move for their own protection—but who nevertheless lack the ability (Zickgraf 2018, 74). This chapter provides an overview of the immobility of the village residents (mainly people of advanced age) who have already been moved forcibly (due to the flooding) but are currently in another phase of displacement. And while they are now residing in temporary housing, their ability to move to more permanent settlements remains quite constrained. Given the existing insecurities from the combined displacement and immobility of the residents in temporary housing, a key question is whether it is still possible to find empowerment amidst these constraints. To begin, let us understand the crisis and the accompanying challenges.

5.4 Crisis in Focus: Displaced by the 2020 South Japan Floods

5.4.1 *The Village's Pre-disaster Context*

'Kuma Village has too many handicaps' (LRP 1, September 21, 2021). This is how a local expert concisely described the pre-pandemic/pre-flooding conditions in Kuma Village. In most rural areas in Japan, farming is a common livelihood; however, the limited leveled ground in the village restricts the available space for intensive agricultural use. In the past, the most significant sector in Kuma Village was forestry, but this is no longer profitable. The two interlocked concerns for the village are its aging population and depopulation. The village has experienced rapid outmigration since the 1950s, from about 13,000 residents to only about

3,000 in 2020.⁸ A critical need in the village is to ensure the well-being of the older population and make the village attractive to families with small children. Like in other rural areas of Japan, there have been efforts to invite and encourage people to move to the village, with little success.

Despite these conditions, the village had previously experienced few major problems (LRP 2, September 21, 2021). The village contained shops and a combined postal/banking service. The lack of certain services was offset by the fact that the village was fairly accessible to the adjacent bigger city. Whenever residents needed to attend the hospital or other facilities, they would travel to nearby Hitoyoshi City, which is better equipped than the village. The village had community buses and a JR train line, as well as taxi services that could take people to Hitoyoshi City. This overall situation was considered challenging but manageable.

Notwithstanding the difficulties of their everyday situation, they learned to deal with insecurities adapt to the changes, and remain resilient. These constraints and adaptive responses are not new in Japan. Across the country, several prefectures are facing the consequences of outmigration and are finding ways to cope and revitalize the areas by attracting people to stay or move to them.

5.5 Flooding during a Pandemic

In the early part of summer, Japan is frequented by rain, referred to as the ‘Tsuyu’ season. The country’s response to disasters resulting from natural hazards and extreme weather events has improved, building on past experiences of similar crises. Annual rain and flooding are characteristic of the major challenges that Kumamoto Prefecture faces (Takasu and JICA 2020). Kuma River is prone to flooding and it floods almost every time there is heavy rainfall in the region—this is part of life in the village (Das et al. 2021). However, the heavy precipitation on July 4, 2020, seriously affected some southern prefectures, and resulted in devastating floods and landslides.⁹ Kumamoto Prefecture suffered a combined 114 deaths and injuries, and 7,359 homes were damaged.¹⁰ Within the jurisdiction of Hitoyoshi City, Kuma Village was directly affected by an excessive concentration of heavy rain, and the Kuma River overflowed (see Figure 5.1). The July 2020 floods are considered to have been the most devastating in decades. The water level of Kuma River rose to 4.2 meters, compared to the last severe flooding in 1965, when the water reached a level of 2.1 meters (Suzuki 2021). Coincidentally, the three main flooded districts were also the village’s most populated settlements.

8 See: ‘Kuma-mura jinkō bishon 2015’, p. 1, www.pref.kumamoto.jp/uploaded/attachment/22738.pdf.

9 See: ‘Reiwa 2-nen 7 gatsuki gō ni yoru higai oyobi shōbō kikan-tō no taiō jōkyō (dai 56-pō)’ [Situation of Damage from 2020 Kyushu Floods and Responses by Firefighting Agencies] (www.fdma.go.jp/disaster/info/items/210226_ooame56.pdf).

10 Total recorded human damages: 166 persons and 16,548 houses. (www.fdma.go.jp/disaster/info/items/210226_ooame56.pdf).

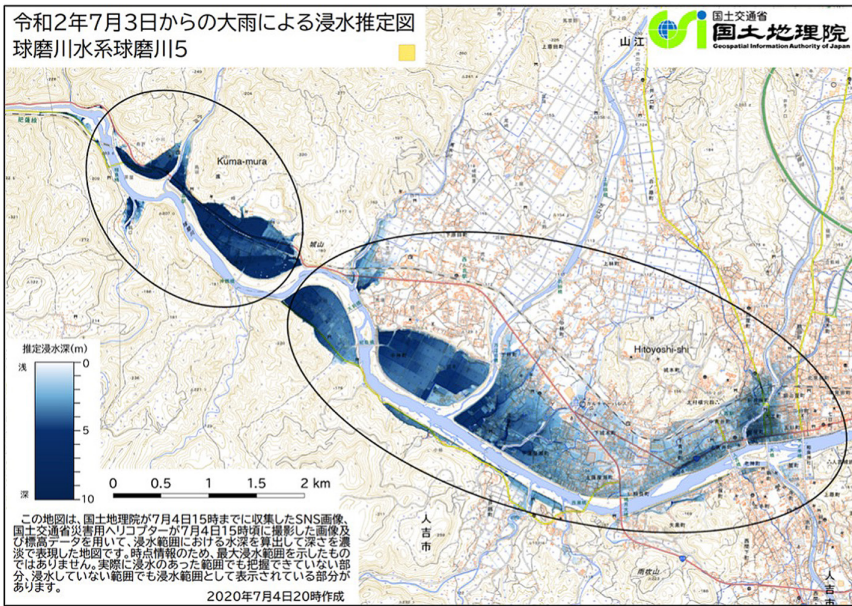


FIGURE 5.1 Map of Kuma River on July 4, 2020, at 8pm. (Geospatial Information Authority of Japan, 2020)

In Watari District, the flooded area included houses and farmland; the main roads to Hitoyoshi were flooded and the train tracks destroyed. Issochi District experienced similar flooding of its main river, with the water reaching the train station. At the same time, Konose District experienced several landslides and two settlements next to the Sendai River were completely buried (112–116). The flooding forced people to move to safety, leaving behind homes that were submerged, destroyed, or washed away by the floodwaters. As this disaster occurred during the COVID-19 pandemic, the evacuation and responses were much more complex than they would have otherwise been.

COVID-19 had not been seen as a problem in the village before the flooding. Before July 2020, there were no reported COVID-19 cases in the village. The first case was reported on April 21, 2021,¹¹ and as of October 5, 2021, there had only been seven cases, with no reported deaths or hospitalizations.¹² The occurrence

11 See: 'Kuma-mura ni okeru shingata koronairusu kansen-sha hassei jōkyō' [Situation of the Number of People Infected with COVID-19 in Kuma Village] (www.kumamura.com/gyousei/2021/08/13215/)

12 See: 'Shingata koronairusu dēta de mieru Kumamoto ken'nai kansen jōkyō' [Data Visualization of the Number of People Infected with COVID-19 in Kumamoto Prefecture] (<https://kumanichi.com/news/core/1574300/>, accessed October 8, 2021).

of the flooding at the height of the pandemic raised two important concerns: (a) It compromised the responses to the flooding, and (b) it highlighted the longstanding insecurities of the residents in Kuma Village related to depopulation and the aging population. Immediate protection comprised evacuation to safety, with people moving to emergency shelters. However, the pandemic was another cause of concern that led to confusion about the evacuation. Evacuation centers were set up in ten locations, with provisions for social support for the elderly and people with disabilities. The capacity of the designated evacuation shelters was reduced to around a quarter of their usual capacity to ensure social distancing among the evacuees (Das et al. 2021). Hence, some people opted not to evacuate due to the fear that they would be lodged in crowded spaces, while others were turned down because of limited space. Affected residents stayed in shelters (including school buildings and other evacuation facilities) for about two and a half months from July 2020. The pandemic compelled the development of new guidelines for operationalizing shelter management, including the distribution of food, clothes, and everyday items, and the need to ensure cleanliness and hygiene to avoid an outbreak of COVID-19 in the shelters. The pandemic posed limitations on the presence of volunteers and health professionals to support the affected residents, including limiting the support available from the Kumamoto Prefectural Government, related national organizations, and the Self-Defense Forces. The post-flood clean-up was among the critical tasks that required volunteer support. One interviewee, LRP 1, noted that, due to restrictions on the entry of volunteers into the village and the limited number of people from Hitoyoshi and Kuma Village available to do volunteer work, the victims of the disasters also had to become the helpers.¹³ This account concurs with a report prepared by Das and colleagues (2021).

The difficulties in responding to the disaster during the pandemic revealed the consequences of the limited and decreasing number of people in Kuma Village. The restrictions on the provision of support from people outside the village further delayed the response and recovery process. Moreover, some young couples with families whose homes were destroyed by the flooding opted to rebuild in Hitoyoshi, the nearby city. The situation also became entangled with the disruptions to or the reductions in some vital infrastructure. As some settlements had lost almost all of their inhabitants, it was not seen as profitable to rebuild some local services. For example, the JR train line that traverses the village was suspended.¹⁴ Before the 2020 flooding and the COVID-19 pandemic, the daily challenges were said to be manageable for the residents. But with most houses destroyed and people in a state of displacement during the pandemic, people were exposed to further insecurities.

13 See: 'Kumamoto's Flooding and the Changing Face of Disaster Response' (www.nippon.com/en/japan-topics/g00902/).

14 Based on the field visit in December 2021, JR Watari station is being rebuilt, but the extent of the line is not yet clear.

In March 2021, Kuma Village released its recovery plan covering the nine years from 2020 to 2028. The first four years (2020–2023) are aimed at recovery, to be followed by a five-year plan (2023–2028) for the revival and development of the village. One of the key priorities in the village’s recovery plan is reconstructing the lives of the affected residents. Adapting to the Disaster Relief Act, the Kuma Village recovery plan included the provision of 210 wooden-type and 68 moving-type temporary housing units to be located in three housing complexes in Kuma Village and one in Nishiki-machi for those whose homes were partially or completely damaged. Additional private rental housing units were made available. The local government plans to secure all residential land, and construct disaster public housing, to support the residents’ return to the area in which they are accustomed to living and to create an environment in which they can live with peace of mind (Kuma Village 2021, 21). While these plans sound promising, at the time of the publication of this research, people were still waiting for them to be fully realized, and life for the displaced revolves around temporary housing.

5.6 Finding Empowerment in Temporary Housing

Protection is more visible in the security narrative, as it resonates with our trust in institutions to keep us safe from threats. But as Gasper (2014, 35) emphasizes, focusing solely on protection reduces both felt security and objective security because people’s capabilities wane or are never developed and confidence remains low. While protection is essential at the onset of a crisis or disaster, people must gradually feel and experience greater control over their circumstances. The question is whether empowerment can take place for people who remain in a state of displacement.

Displacement is a matter of being uprooted from one’s habitual place of residence, accompanied by the uncertainty of return or finding a new home. Adger and his colleagues highlighted the importance of ‘place’—aside from its value as a site for change and for investment in natural and built capital—as a social construct that imbues lives with meaning and security (Adger, de Campos, and Mortreux 2018, 29–30). Especially during a crisis, people continuously search for a place where insecurities are reduced. Below is a summary of an older woman’s moves during the flooding until she was given temporary housing in Nishiki:

On the day of the flooding, her neighbors urged her to leave her house and go up to the nearby temple because of the rising water level in their area. She moved to the shelter the next day and stayed there for four days before moving to a friend’s house in Kumamoto City. She was lonely at her friend’s house, and when she received a notice that there were units available in the temporary housing complex in Oogawa, she moved there.¹⁵ She said everyone at the

15 This TH Complex was used for the 2015 Kumamoto earthquake.

temporary housing site had the comfort of sharing the same experiences, and it was a better place for her mentally. Eventually, on Oct. 24, 2020, she moved into temporary housing in Nishiki.¹⁶

THR 1 is not the only resident to have escaped the floodwaters in her home, to have found immediate refuge in the shelter, and to eventually have been assigned to stay in a temporary housing complex. As the floodwaters receded, many people found themselves without homes to return to. Of the 30% of Kuma Village's residents whose homes were destroyed, most moved to and stayed in temporary housing.¹⁷ For those displaced by the flooding, temporary housing constituted a significant spatial reference to their current condition and future recovery, marking their escape from dislocation caused by the flooding (displacement), and, likewise, it offers the prospect of future relocation (mobility). It should be reiterated that staying in temporary housing is only a provisional solution to the residents' displacement. People still need protection, but their gradual move toward recovery opens up various possibilities for empowerment. Hence, finding empowerment while in temporary housing requires an understanding of their capacities and engagements as they navigate their displacement through structural constraints.

5.7 Addressing Displacement and Life in Temporary Housing

A key question to consider is the value of housing in people's recovery. A Total Quality Management (TQM)-based assessment workshop introduced a seven-element model of life recovery following the 1995 Kobe earthquake. The study identified seven critical elements necessary for the affected people's recovery: housing, social ties, the townscape, physical/mental health, preparedness, the economic/financial situation, and their relation to government (Tatsuki and Hayashi 2002). While all of the components are equally important in attaining recovery, housing is an important preliminary element that anchors all other needs, especially for the displaced. A housing expert rationalized the significance of housing in the community's need to rebuild after a disaster:

I think I might be biased as a housing person, but I always think [housing] is one of the most important things. Maybe not everyone will agree with me, but I think losing your house and being displaced from your house, just by itself, is already a huge disruption and a huge loss. Not only the emotional aspect or family aspect and belonging, but it can also be your livelihood and your work. Also, there is the loss of livelihood. People have lost their houses and they lost

16 Summarized based on the interview with THR 1, October 13, 2021.

17 Flood-displaced residents residing in the temporary housing around Sakura Dome are mainly those from Watari who lost their homes. Residents from Konose and others who cannot return to their homes yet remain in temporary housing in Nishiki-machi.

their jobs. Those are the things that need to be built back. People will tell you that themselves. Experts also know that. During the time people are living in temporary housing, these are the biggest issues.

(TDE 1, February 8, 2022)

The importance of housing as a key concern expressed by TDE 1 can be seen in the government's prioritizing of securing housing, initially temporary and eventually permanent homes, for those who have been displaced. However, another Tohoku/GEJE 2011 expert (TDE 2) observed a tendency for the local government to equate people's recovery with moving into permanent housing. The emphasis on housing as the only element required for recovery is very limiting. There is clearly a need for a multidimensional recovery, creating and developing a transitional space for those who have been displaced. A key action after the flooding was to move the displaced residents into temporary housing. The construction of temporary homes in Kuma Village and the nearby town of Nishiki provided the space for all other protection initiatives to take place. The potential to secure a shelter (initially temporary and eventually permanent) is a critical priority in protecting people experiencing displacement. But, to reiterate, the physical infrastructure should not comprise the entire approach to achieving recovery. There is a need for complementary soft infrastructure to encourage people to recover and rebuild.

Past large-scale disasters reveal opportunities for empowering people through support initiatives while experiencing displacement. For example, isolated deaths during displacement were a critical concern evident in both the 1995 Hanshin-Awaji earthquake and the 2011 Tohoku earthquake and tsunami. This was especially the case for older people who had moved into temporary housing—they felt disconnected and experienced health concerns. The high mortality rate of older people living in temporary housing can be partially attributed to the physical and mental stress of being forced to move and stay for long periods in collective shelters or temporary accommodation, the lack of care resulting from reduced or disrupted hospital services, and suicide (Yonetani 2016, 7). The inability to meet set timeframes for recovery from the GEJE resulted in many displaced people feeling a sense of hopelessness and uncertainty. To address this issue during the Kobe earthquake, the Life Support Advisors (LSAs) system and programs to revitalize the community through the creation of social networks were implemented. LSAs provided support through regular visits to residents in temporary housing, while volunteers and non-governmental organizations (NGOs) contributed to networking by organizing community meetings or events and establishing small businesses to support people living in temporary housing (Sakamoto 2014, 96). The lessons from these past crises are reflected in subsequent disasters, including the support for displaced residents in Kuma Village. This included additional considerations to address the insecurities accompanying the pandemic.

The move to temporary housing also presented new concerns regarding adapting to the daily life of the displaced residents of Kuma Village. First, purchasing

daily supplies became more challenging, as these were not readily available and were not as easily accessible from the village after the train lines were damaged and the bus route was suspended. The Kumamura Sanson Kasseika Kyokai (KSKK), a local non-profit organization in the village, initiated a mobile shop that began selling and delivering supplies to some residents, including those in the temporary housing complexes. The organization commenced its activities in 2019 to support the revitalization of the village for future tourism. Following the 2020 floods, they expanded their work, collaborating with the village government to document the damage and help with daily shopping for the affected residents.

Another concern is the challenge of getting used to the new living environment. While each housing unit is livable, some household appliances are unfamiliar (e.g., induction heating stoves) and there have been changes to their daily activities (e.g., tending their garden). The village's local government has formed an ad hoc support center (*Sasae senta*) and taken on a similar role as the LSAs, tasked with checking on the temporary housing residents' well-being. The residents tend not to let others know about their problems and would rather solve matters within the family instead of relying on the people from the support center. However, with most temporary residents living in single- or two-person households, family support networks are quite limited. While the support center cannot tell people what to do or make personal suggestions, they can listen to problems and provide residents with information on where they can find help (LRP 3, December 14, 2021). The support center also organizes visits to the elderly or sick people more often, if needed.

A symbolic structure of empowerment in the temporary housing is the *Minna no Ie*. This is a community space built inside every housing complex. This project started in 2011 after the Great East Japan Earthquake through the establishment of community spaces at the temporary housing sites of Sendai city in Miyagi prefecture (Das et al. 2021, 35). These spaces have played a critical role in the recovery of the affected communities, rooted in opportunities to gather together and connect with other residents of the temporary housing sites. However, large gatherings were now being discouraged as a preventive measure in the context of the pandemic. Since November 2021, as COVID-19 cases began to gradually decrease nationwide, the *Minna no Ie* has been used for social activities, including ikebana classes, yoga sessions, gymnastics, and hula dancing for the residents of temporary housing and the rest of the village. These social activities in the village have been reactivated and are now held in the temporary housing complexes. Ground golf and other outdoor activities have also been restarted, with more people willing to get together and COVID-19 cases remaining consistently low. Additionally, a mobile library from Kumamoto City visits the housing complexes.

Residents who have been displaced are primarily in need of protection, and the provisions for temporary housing are critical for their recovery. The current conditions of the displaced people show that individual-level empowerment translates into coping and adapting to their stay in temporary housing. Empowerment

manifests itself in the ways that specific support mechanisms enable people to develop resilience during difficult situations. The residents are presented with options for assistance, including supply pick-up, support in engaging with relevant offices, and the provision of space to engage with others in navigating their new living environment. The presence of non-profit groups and the ad hoc support center introduces some level of opportunities for making decisions and enacting solutions related to their everyday concerns while residing in temporary housing.

5.8 The Prospects of Moving When There Is Limited Mobility

The displaced residents are empowered to survive every day while in temporary housing. Yet, the continuing impermanence of their stay in these housing complexes needs to be addressed by obtaining a permanent residence. The temporary housing was built with a deadline for its use. Despite being aware of this condition, there is a disconnect in relation to the residents' intentions to move to a permanent home. Eight of the ten residents of Sakura Dome and Nishiki who were asked during the October 2021 field visit expressed a desire not to move out of the temporary housing any time soon. One resident explained that she is satisfied with the idea of residing in temporary housing because people from the same settlement also live there, and thus she knows everyone there. While this may be the case, she is also open to the prospect of moving to the disaster public housing (DPH) but is aware that it will take a while for the public housing to be completed and wonders if she will still be alive when it is (THR 1, October 13, 2021). During the group interview, the residents shared concerns that they do not know what living in an apartment (referring to disaster public housing) would be like since they have lived in houses all of their lives (THR 2 (Group), October 12, 2021). Despite the plan to move temporary residents into public housing being presented as a viable option, key questions remain insufficiently unanswered. These uncertainties about moving into disaster public housing are rooted in answers to the questions 'who qualifies to move into the public housing?' and 'how much is the rent?'

The local government's plan for the temporary housing residents has been integrated into the village's recovery plan blueprint. However, a local resource person and resident of the village confirmed that a gap remains between the actual relocation plan and the information that reaches the displaced residents, including the future of those who are currently residing in temporary housing (LRP 2, December 15, 2021b). The excerpt below captures how limited information is entangled with the problem of public housing affordability:

The biggest problem is the big group of people who can't afford to rebuild. They will have to move into public disaster housing, but they will have to pay rent there. And the rent is expensive. They will have to pay with their pensions. Most people have a relatively modest pension, especially farmers. And it is questionable whether people will be able to afford the rent. It's impossible to

pay rent with just their pension. Most of the older people affected by the floods are facing this problem.¹⁸

(LRP 1, October 12, 2021c)

The lack of mobility of those in temporary housing is rooted in the combined need for financial resources and access to sufficient information to make concrete decisions and plans for the future. These factors highlight the interrelated issues of not having a sufficient pension for most of those experiencing displacement, as well as relocation opportunities and the overall future of the village. This is rooted in the issues of the aging population and the depopulation faced by the village.

The move from temporary housing to more permanent homes will require continuous government interventions involving the provision of adequate information and flexibility in relation to relocation options. Local efforts are being made to communicate more details about the plans to the affected residents. For example, while it is not their direct responsibility, some KSSK members have served as ‘informal’ intermediaries between those affected by the flooding in the village and the local office by relaying additional information to the displaced residents regarding housing requirements. Despite these efforts, information remains insufficient. These constraints contribute to the inability of the residents to make informed choices regarding their displacement and future.

At this point, it is better to ask how the displaced can be empowered to escape their immobility resulting from their extended stay in temporary housing. To do so, displaced residents need to be empowered through access to more *understandable*, *flexible*, and *sustainable* options. First, those experiencing displacement need to clearly comprehend the options available to them, if any. While several choices are available, they should be properly explained so people can make sound and suitable decisions for themselves. Two local resource persons recognized the need for people in temporary housing to have experts/consultants who can provide counselling assistance regarding their rebuilding plans and options, especially in terms of transparency in applying for loans.

Second, not everyone fits into a single recovery plan. The temporary housing residents may come from diverse pre-disaster contexts that may not match the options for recovery. Two Tohoku disaster experts shared a similar point about the rigidity of the recovery system. One of the experts opined that the government’s program only offers a two-track program for the displaced: either moving to the disaster public housing or building their own home (TDE 1, 2022). These options are based on the supposition that all of the displaced residents have the capacity to choose one of the two options, which is not necessarily the case, and they exclude many of those who fall in between.

18 The average pension is about 40,000–50,000 yen (about USD 310–400, based on early 2022 exchange rates).

Lastly, the recovery plan vis-à-vis the options for the displaced demands the consideration of the future population of the village. Rather than focusing only on its reconstruction for future inhabitants, it should take place within the context of and in balance with the long-term sustainability of the region (Maly 2014, 188). The sustainable solutions aspired to by the displaced residents will be of importance in defining the direction of the village and perhaps the region in the future. The best way to plan the village's future is to engage those who were displaced and enable them to take ownership of any solutions. However, while institutionalized programs provide permanent housing, the same plan limits the displaced residents' options. Hence, the empowerment of displaced residents to find permanent homes after the disaster is not necessarily missing, but, in view of the present structural concerns, may be hard to perceive.

5.9 Conclusions

This chapter closes by confirming whether or not empowerment has been observed for those still experiencing displacement. While this question can be easily answered with a 'yes, it has', this answer still needs to be qualified: Empowerment can be observed in small details. Temporary housing has provided a spatial reference in finding empowerment in disaster displacement. The residents found ways to make life in their temporary homes livable. The presence of diverse actors of varying degrees of influence and power contributed to how they navigated life while adapting to their new temporary homes. Hence, if the goal is to minimize insecurities while in temporary housing, the residents have found ways to be more resilient, empowered by the assistance provided by the local support staff, local NGOs, and lesser-affected residents.

On the other hand, temporary housing also symbolizes the experiences of displacement and immobility of those affected by the 2020 South Japan floods. The experience of being displaced from their homes due to the flooding and then moving into temporary housing at the height of the pandemic exposed residents to new insecurities. Empowerment can be seen through their engagements with different groups that support them while residing in temporary housing. Despite the approaching deadline that will end their stay in temporary housing, it remains unclear where these people will move to next. This uncertainty reinforces their immobility, constrained by the very recovery plan that was supposed to facilitate their transition to a more permanent home. Thus, this phase needs the presence of non-state actors (empowerment enablers) who can support the displaced in accessing the resources required to make suitable decisions during the crisis.

Michio Umegaki (2009) explains that individuals and communities play the most critical and immediate role in determining what needs to be done, which in turn makes them the best agents for protecting and improving their own lives. This is something that the people in Kuma Village and the people supporting them are aware of (THR 2 (Group), October 12, 2021; LRP 3, December 14, 2021). One of

the residents affirmed that, while they appreciate that they are provided with food (and other supplies), it is also important that they can be independent again, not just by no longer receiving bento (lunchboxes) but by obtaining the things required to prepare food themselves. For people of advanced age—a significant proportion of the temporary housing residents—displacement brought their vulnerabilities to the forefront. But looking beyond these deficits, older persons have strengths (rooted in their accumulated memories, values, and culture) that can contribute to the lived experiences of displacement and the recovery of their communities. This contributes to the desire to gain ownership of the crisis and control their future, which is the seed of their empowerment.

In most scenarios, we recognize ‘empowerment’ when it is revealed in accomplishing the desired change, through either short-term or long-term goals. Each disaster is unique, as are the empowerment narratives created. People’s agency may vary, but the presence of opportunity structures, enabling actors, and an end goal completes the picture of empowerment. For people who have been forcibly displaced, their human security derives from their gradual emancipation from displacement and immobility. Protection strategies in temporary displacement are imperative, and such people’s capacity to reach a durable solution beyond this temporary displacement actualizes their empowerment.

The complexities of responding to disaster displacement under the conditions of a global pandemic challenged the effective implementation of well-established protection measures. Likewise, it tested the development of empowerment among these affected communities. A human-centered approach to disaster displacement situates the displaced communities at the core of protection measures and empowerment initiatives to rebuild their resilience in the face of the insecurities resulting from extreme weather conditions and natural-hazard-induced disasters. This chapter demonstrated how short-term goals can be provided for and displaced communities can be empowered to make their lived experiences of displacement more meaningful. But the end goal of finding more durable solutions for themselves and others remains in limbo. This is the reality in most cases of displacement, a concern that needs to be more thoroughly addressed and supported.

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6

COVID-19 AND PLASTIC POLLUTION IN THE CITARUM RIVER, INDONESIA

Arisman

6.1 Introduction

One of the new policies that emerged during COVID-19 was the restriction of activities outside the home, such as the closures of educational institutions and changes in the work system to enable employees to Work from Home (WfH). These new policies not only had a profound impact on human life, they also impacted the environment. One of the obvious impacts in this area is the increase in the amount of consumption in the community because of these stay-at-home policies. The high consumption rate in the community is positively correlated with an increase in the amount of waste, especially single-use plastic waste.

From the earliest times, waste has been a difficult problem. This is especially the case with inorganic waste that does not decompose easily, including many types of plastic. The increasing population produces larger amounts of waste, and the problems that this causes cannot be separated from the community. Based on data from the Ministry of Environment and Forestry (KLHK), in 2020, Indonesia produced 185,753 tons of waste per day, equivalent to 64.8 million tons per year (Indonesia.go.id 2021). Of this waste, only about 7% was recycled, while the rest was added to landfills (Astriani 2020). Moreover, non-recyclable plastic waste is more likely to be transported into the ocean through rivers. Thus, the increasing amount of plastic waste every year is a serious threat to humans as well as marine ecosystems, especially during the current COVID-19 period.

In Indonesia, the policy on large-scale social restrictions (PSBB) to reduce COVID-19 infections was a major cause of the increase in household waste resulting from the need to meet daily needs, such as the higher consumption of food and other necessities. Ruth Stringer, a waste policy expert from *Health Care Without*

Harm, argued that there has been a significant trend toward increasing amounts of waste (especially single-use plastics) during COVID-19 (Putra 2020).

The types of single-use plastic waste that are widely found during the current COVID-19 pandemic include what is referred to as hazardous and toxic waste, such as disposable personal protective equipment (PPE), medical and non-medical masks, disposable gloves, used bandages, used wipes, plastic from food packaging and beverages of COVID-19 positive patients, and other sources of waste resulting from service activities in the emergency department (ER), isolation rooms, and other service rooms of hospitals. This hazardous waste from COVID-19 treatment is currently dispersed across almost every country worldwide.

The amount of hazardous waste generated in Indonesia during this pandemic is estimated to be 8,589 tons per day, but this does not include the additional waste generated in households with suspected or confirmed COVID-19 cases (Astuti 2020). The increasing amount of plastic waste, especially medical waste, is a new challenge for the government and society because medical waste cannot be treated in the same way as household waste. This waste must be burned using a high-temperature incinerator. Due to the limited facilities in most communities, a lot of this garbage ends up being dumped in open spaces or burned in ineffective low-temperature open fires. While most single-use plastic waste is disposed of in landfills, some is thrown into streams or ends up in other spaces in local or nearby areas and is transported to the sea by rivers. Although this is not a new problem, the COVID-19 pandemic has made it worse, so it still needs to be a concern for the government and the community because the pollution of rivers has many negative impacts on human life and other living things that live in the areas surrounding river systems.

The Citarum River, the focus of this study, is one of the rivers in Indonesia that has been most heavily polluted with plastic. The Citarum River is the main river in the province of West Java and is about 300 kilometers long. The location of the Citarum River is strategic—the river basin covers a total area of 12,000 km², with as many as ten million people living along the river (Resmiani 2020). The river basin stretches from Bandung Regency, West Bandung, Bandung City, Cianjur, Purwakarta, Karawang, to Bekasi. The Citarum watershed (DAS) is also a producer of 1,400 MW of power from three reservoirs, namely Saguling Reservoir, Cirata, and Jatiluhur, for the Java-Bali electricity interconnection system (Resmiani 2020).

The upstream part of this river has an area of approximately 1,721 km², with Mount Wayang to the north. It contains five administrative areas, namely Bandung Regency, Bandung City, and parts of Sumedang Regency, and borders Subang Regency in the north, Garut Regency in the south and east, and parts of Sumedang Regency in the east (Resmiani 2020). Downstream, the Citarum watershed flows into Karawang, an area also covered by five administrative areas, namely Cianjur Regency, Purwakarta Regency, Bogor Regency, Karawang Regency, and Bekasi Regency (Resmiani 2020).

Waste management systems in the Citarum River are known to be ineffective. It was declared the dirtiest river in the world by the World Bank more than a decade ago. With the awarding of this status, the government and residents of the Citarum Basin were required to complete activities related to combatting pollution. One of the contributors to the high pollution rate in the river is household waste. Many residents who live around the river already understand how to manage waste properly, but the local authorities are still unable to implement the correct waste management procedures because of limited resources, both in terms of costs and land. Instead, inhabitants are asked to manage their own waste.

As noted earlier, during the current COVID-19 pandemic, the problem of plastic waste arises not only from increased household waste due to the higher level of community consumption but also from ‘disposable’ waste from the medical sector. Single-use medical plastic waste can end up being dumped into the world’s environment and oceans, especially in the case of waste that cannot be recycled, such as PPE (Scaraboto, Joubert, and Gonzalez-Arcos 2020). This is a new challenge, causing deep concern—especially for people who live in the vicinity of river systems such as the Citarum River. If household and medical waste is allowed to be discharged directly into rivers, it will threaten the health of residents living around them, followed by marine organisms and the global oceans.

A study conducted by Garg et al. (2018) shows that a leading cause of death in developing countries is waterborne diseases, usually from river pollution (fresh water). Furthermore, the use of upstream rivers for bathing and sanitation causes as many as 7.5% of deaths from diarrhea each year. With the increasing use of plastic waste during the current COVID-19 pandemic, this study documents three things that have happened to the Citarum River. First, it assesses the impacts that COVID-19 has had on vulnerable people living along the river due to the increase in plastic pollution. Second, it explores the programs that have been carried out by local governments in anticipation of the negative impact of plastic pollution in the river due to COVID-19. Finally, it examines the readiness of vulnerable citizens to overcome the negative impact of increased plastic pollution in the Citarum from COVID-19.

6.2 Methodology

The approach used in this study is qualitative descriptive, which is a method that aims to understand and describe the phenomena being experienced by the research subject (Moleong 2010). This study focuses on the phenomenon of plastic pollution in the Citarum River during the COVID-19 pandemic. Therefore, the method chosen for this study is a qualitative approach using phenomenology.

The data in this study has been obtained from primary data sources through observations and in-depth interviews conducted with 15 informants (residents along the Citarum, local authorities, non-governmental organizations (NGOs), and local leaders). In addition, to understand the latest research on plastic pollution in

rivers due to the COVID-19 pandemic, the researchers also used secondary data. A combination of keywords such as ‘plastic pollution’, ‘pandemic’, and ‘Citarum River’—terms that the researcher considers to be related to the topics raised—was included to define the parameters of the literature review.

The informants selected in this study are residents whose activities are directly related to the Citarum River and who are responsible for cleanliness in the area around the river, such as the Chairman of the Bandung City Hygiene Agency, the owner of the Resik Waste Bank, the staff of the Bandung City Environmental Agency, the Chairman of RW. 07 Cibunut Kebon Pisang (local leader in the community), and residents along the river.

6.3 COVID-19, Plastic Pollution, and Empowerment Issues

The pollution level of the Citarum watershed (DAS) has dropped from severe to mild since 1990, even though the initial target was for it to be moderately polluted (Ramadhan 2021). At the beginning of the implementation of the Citarum Watershed Pollution and Damage Control Acceleration Program that began in 2019, the status of the watershed was still severely polluted at 33.43 points. But after the program’s implementation, the watershed’s status began to change. The final target of the program is to return the river to ‘swimmable’ status, which means that fish can survive and reproduce in it and that humans can also use it as a swimming place.

The implications of the change in pollution in the Citarum River were also conveyed by the head of the Waste Bank of Resik in Bandung City, Firman Maulana:

Now there is also a Citarum Harum program, The previous program is not there anymore; it’s almost nothing.

(Interview with Firman, Head of Affairs of The Waste Bank of Resik, August 25, 2020)

This means the garbage that had previously accumulated in the river area is now almost invisible because of a new government program, Citarum Harum. This program is a West Java Provincial Government empowerment program consisting of 12 action plans to restore the Citarum River in accordance with community expectations (Citarum Harum 2019). Although the discharge of waste into landfills has not changed significantly, the running of government programs such as Citarum Harum and its counterpart Kangpisman is having positive side effects for the community related to the problems of processing and handling waste.

Due to the large-scale social restrictions that have accompanied the COVID-19 virus (PSBB), there has been a slowdown in the pace of the economy in many fields, meaning that many activities, including industrial activities, were also temporarily restricted. The decline in the operation of industry, including textile factories, led to improvements in environmental quality, such as reduced air

emissions from transportation facilities and a decrease in the burden of industry wastewater pollution. Citarum watershed (DAS) also benefited from this situation during the pandemic, with the water quality of the Citarum River improving in comparison to previous years.

However, the water quality in the Citarum watershed improved not only because of restrictions on activities outside the home but also because of government-run programs such as Citarum Harum, which is a substantial program designed to produce better water quality in the river. While the COVID-19 pandemic has led to some improved conditions in the river, this does not mean that the watershed is without problems. The Governor of West Java recently said that a decrease in household waste did not occur even though the amount of industrial waste deposited in the river had declined significantly (Abdussalam 2020). In response to communities that throw their plastic waste into rivers, local governments have appealed to their citizens to adopt better waste management practices. In addition, other efforts have been made through innovations in the Citarum Harum program. One such innovation promoted by Citarum Harum was the building of domestic waste processing plants, so that plastic waste belonging to residents around the river can be directly burned at higher temperatures, thus reducing the amount of waste sent to the main landfill.

To further examine some of the conditions related to the river during the COVID-19 pandemic, this study divides the discussion into the following three sections, namely, the impact of the COVID-19 pandemic on local communities, the programs created by local governments, and the readiness of citizens to engage in overcoming the problem of plastic pollution.

6.3.1 The Impact of COVID-19 on Vulnerable People Living around the Citarum River Due to Increased Plastic Pollution

Before the COVID-19 pandemic, management of plastic waste was a major problem. With the emergence of the pandemic, the plastic problem became worse because of the need to maintain greater cleanliness than before, thereby increasing dependence on single-use plastics. Because of its non-biodegradable nature, plastic waste often accumulates in various settings, ranging from land and water to the atmosphere, often in the form of microplastics. For example, during the pandemic, global use of face masks increased, and consequently 1.56 billion face masks ended up in the oceans in 2020 (Bondaroff and Cooke 2020). Thus, face mask waste has directly contributed 5,159–6,878 tons to the world's plastic pollution problem.

Common methods used for plastic waste management worldwide are recycling, burning, and depositing in landfills. But there has been a sharp decrease in plastic recycling worldwide due to the COVID-19 pandemic (Parashar and Hait 2021). Inadequate recycling, poor waste management, and improper burning will make the virus spread more quickly, so these methods should be prohibited. The

consequence of such a ban is, however, an increasing amount of plastic waste that has to be processed in another way, whether by being disposed of in landfills or by leaching into the sea. For example, in the case of Los Angeles in the United States, the volume of plastic waste was found to be 70% greater during the pandemic, and illegal disposal increased by nearly 19% (Hernandez 2020).

The impact of plastic pollution on people living in the area around waterways is that the water they use for daily needs will likely be polluted by microplastics. A recent study showed that the plastic waste that ends up in the sea can eventually end up in fresh water and terrestrial environments (Fendal and Sewell 2009; Lechner and Ramler 2015). Of the waste in the ocean, as much as 80% comes from rivers, where the impact of the waste is the emergence of microplastics (Saraswati 2022). Microplastics are very small pieces of plastic with a diameter of less than 5 mm. Microplastics come from plastic polymer microbeads found in everyday products such as packaging, detergents, face washes, and toothpaste tubes. The waste plastic, over many years, has been broken down through chemical, mechanical, and biological processes, frequently ending up in wastewater. The number and size of micro- and nanoplastics make it possible for them to pass through the filtration systems used by wastewater treatment plants (IPALs) (Carr, Liu, and Tesoro 2016; Murphy et al. 2016) with the result that, in this process, they are released into fresh water along with the larger IPAL waste (Fendall and Sewell 2009; Leslie, Van Velzen, and Vethaak 2013). It is estimated that about 8 trillion micro pieces of plastic per day enter surface water through IPALs (Rochman et al. 2015). While much of this waste will enter an IPAL, it can also end up on the surface in a landfill or leach into a river or the sea directly because there are few high-temperature waste management plants available to burn it effectively (Fendall and Sewell 2009; Lechner and Ramler 2015).

Micro- and nanoplastics that are released into fresh water may, at a later stage, end up in drinking water treatment plants because surface water is one of the primary sources for drinking water installations. Of course, this will have a detrimental impact on human health if allowed to continue. In research conducted by Mary Kosuth et al. (2017), it was revealed that the presence of microplastics has been found in tap water samples from several major cities around the world and in eleven world-famous brands of bottled water (Kosuth et al. 2017). Important conclusions from some of the above studies are that the impact of plastic is very harmful to the environment and the health of the human communities that drink it.

According to data from the Indonesian Ministry of Environment and Forestry (KLHK), almost 59% of rivers in Indonesia are heavily polluted (Saraswati 2022). The main reason that rivers in Indonesia experience severe pollution is because the people still treat the rivers as garbage dumps. Communities that are not provided with landfill facilities by the government will choose to throw garbage into the river as the easiest way of disposing of it. This attitude is ignored by the government, especially by those who live around the watershed.

In the case of the Citarum River itself, according to data from the Directorate of Water Pollution Control of the Directorate General of Pollution and Environmental

Damage of the Ministry of Environment and Forestry (MOEF) in Indonesia, it was noted that 70.13% of the water pollution that occurred in the river is caused by domestic waste (Pamungkas 2021).

This can certainly increase the number of microplastics that reach fresh and inland watersheds. In addition, the direct impact of pollution in the river is the destruction of its ecosystem. For example, since 2008, the number of fish living in the Citarum River has decreased to about 60% of its former level, and rice crops and plantations whose water sources derive from the river have been contaminated by industrial and domestic waste. This can also have impacts on health. It is known that the residents around the river experience various diseases caused by pollution, including influenza, skin diseases, tuberculosis, digestive problems, bronchitis, and kidney failure (Saraswati 2022).

During the COVID-19 pandemic, the direct impact felt by vulnerable people living around the Citarum River was the difficulty in accessing waste centers, or 'waste banks', to recycle their waste due to temporary operation stoppages. In addition, some waste banks collapsed during the pandemic due to insufficient funds. As further conveyed by a staff member from DLHK Bandung City,

One of the main waste banks (Hijau Lestari) in the city of Bandung collapsed during the pandemic. The waste bank could not survive the pandemic as the funds available were only enough to pay operational costs.

*(Interview with Mrs Detty, Kasie Kerja Dinas
Lingkungan and Hygiene, Bandung City, August
27, 2020)*

The influence of COVID-19 led to the collapse of waste banks in Bandung City because people could not go to the waste bank due to the stay-at-home policies. Moreover, the main purpose of waste banks only emphasizes the *value* of waste rather than the benefits of recycling. During the pandemic, people could not manage their own plastic waste. The community's garbage was therefore left to accumulate at collection points and in warehouses.

In addition to the difficulty accessing waste banks, another impact of COVID-19 on the communities around the Citarum River was the cessation of plastic waste and organic waste sorting programs run within the scope of the neighborhood community (RW). Herman explains that:

Yesterday I was given the same budget as the Mayor to buy buckets. We bought a bucket for each house, that is, one bucket for organic waste only. This stopped with COVID-19 and with local authorities (PD), as transportation also stopped. Hopefully, in the future, we want to restart the system so that it runs again.

*(Interview with Herman, Chairman of RW. 07
Cibunut Kebon Pisang, August 26, 2020)*

The program was temporarily halted due to the lack of transportation from waste banks. But it is expected that the program will begin to run again soon once things improve. Eight villages are already running the program again and have become pilot models in terms of waste sorting. For now, based on the results of the interviews conducted, there has been no negative impact in terms of health for the people around the Citarum River. This is due to the government's efforts to improve the quality of river water, which began long before the COVID-19 pandemic occurred.

The use of single-use plastics is increasing significantly on a global scale due to lockdowns and hyper-hygienic new lifestyles. With the new policies and lifestyles, there have been changes in consumer behaviors, such as panic buying and hoarding, resulting in a soaring demand for plastic-based packaging materials (Jribi et al. 2020). With the current priority being prevention of the spread of the virus, there are few alternatives to the use of single-use plastics. The increase in plastic pollution is certainly the final impact resulting from this new phenomenon. There was a prediction in 2020 that the demand for single-use plastics would increase by 57% before the pandemic was over, which includes almost all types of plastics, such as packaging, medical equipment, and other needs (Prata et al. 2020). PPE waste was one area where plastic waste increased rapidly during the pandemic.

Before the COVID-19 pandemic, Southeast Asia alone produced more than 50% of the eight million tons of plastic waste that ends up in the world's oceans every year (Dewi 2020). This waste is primarily from Indonesia, the Philippines, Vietnam, and Thailand. In the case of the Citarum River, the COVID-19 pandemic did not show a significant change in the readiness of residents to overcome the problem of plastic pollution around the river.

In addition, the data collected from 15 informants and analyzed using NVIVO software shows that there have been several efforts to manage plastic waste. Figure 6.1 shows efforts to manage plastic waste.

Efforts or empowerment programs that can be selected to be carried out in the community include the 3Rs (Reduce, Reuse, and Recycle) approach, the separation of organic and inorganic waste, the separation of dry and wet waste, making fertilizers from cans, bottle plastics, and used vegetables, making crafts from used materials, and the use of shopping bags as an alternative to plastic bags.

6.3.2 Local Government Empowerment Program to Address the Negative Impact of Plastic Pollution in the Citarum River Due to COVID-19

As one of the largest waste-producing countries in Southeast Asia, the Indonesian government is obliged to undertake extra efforts in its waste management activities. This is done to avoid increasing the negative impacts caused by the accumulation of waste. As this chapter has shown, some of the negative impacts of

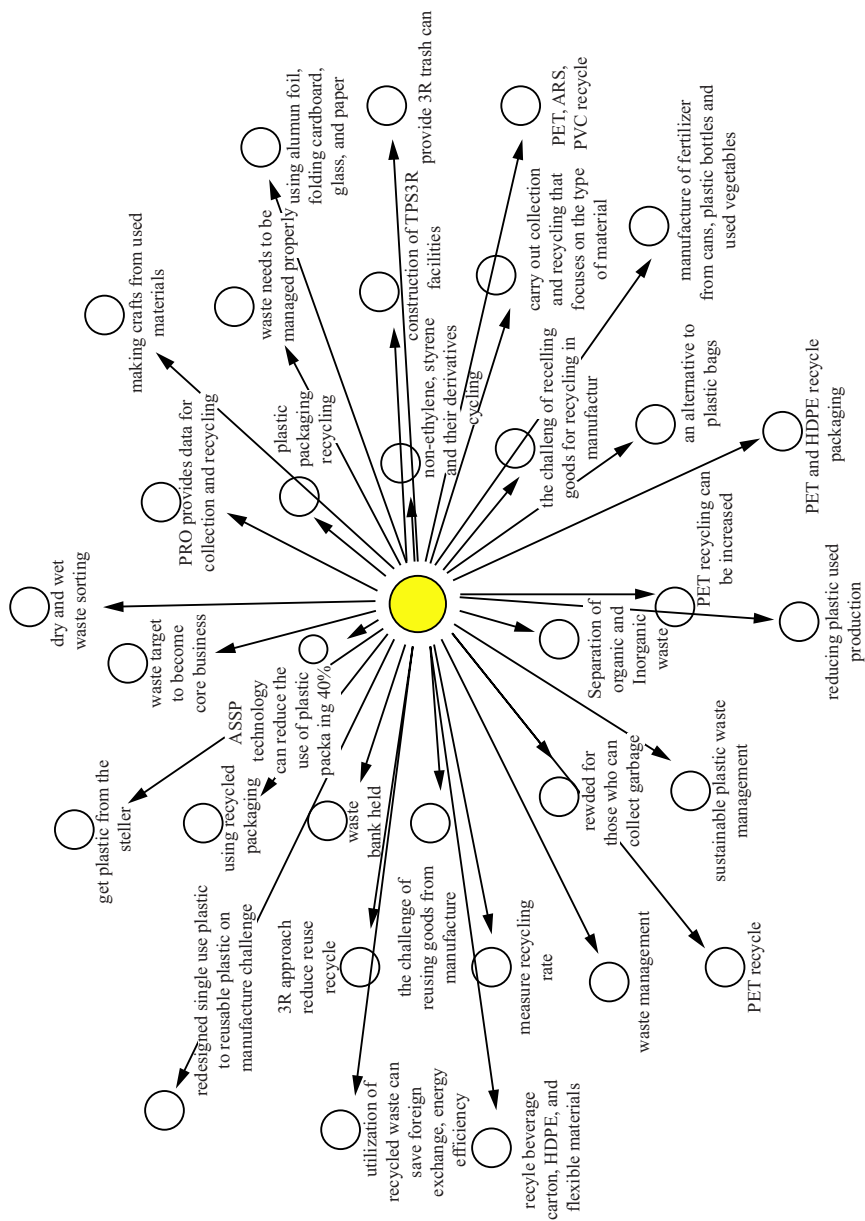


FIGURE 6.1 Efforts to manage plastic waste

plastic waste in rivers include the emergence of various diseases from pathogenic microbes and endangering the fish that live in it.

Waste management is a challenge for local governments in Indonesia. Because the Citarum River is located in West Java province, the government program that will be discussed here concerns the regulations and rules issued by that province. In this regard, one regulation has been in place since before the COVID-19 pandemic first appeared in 2020. This is West Java Provincial Regulation No. 23 of 2012 concerning *The Management of Hazardous and Toxic Material Waste in West Java* (Sitompul 2021). Plastic waste must be handed over to the authorities and not left to be processed by residents because, due to the pandemic, plastic waste is mostly comprised of B3 (hazardous) waste that is harmful to health.

Policies are not only programs in the form of regional regulations. Governments and local environmental agencies also have other empowerment programs to address the plastic pollution that occurs in the Citarum River region. The first program is Kangpisman, which means reduce, reduce, and recycle. Kangpisman is a movement and collaboration between the government, citizens, the private sector, and others that began in 2018 with a view to building a new program of more advanced waste management (Kangpisman 2018). This program is carried out to change the trend of conventional waste disposal into a culture of reducing waste at the source (zero waste lifestyle and the 3Rs). Kangpisman was promulgated by the Bandung City Government before the COVID-19 pandemic so that when the pandemic arose, the surrounding residents only needed to run this program more assertively to reduce the negative impacts caused by plastic pollution in the river.

Kangpisman activities are based around three main approaches. First, *Kang* shows how to reduce waste every day by reusing items that can still be used and bringing shopping bags and places to eat and drink when traveling. Second is *Pis* or Reuse; that is, residents are required to divide trash into three different types. The three types are food waste, placed in a sealed bucket, paper or plastic bottles, placed in cardboard boxes, and other garbage, such as electronic waste, placed in the garbage (Kangpisman 2018). Third, *Man* or Recycle, takes advantage of waste that has been separated as recommended. Type 1 waste containing organic waste is processed in bioporous plants using composters and *Steinernema feltiae* (SF) maggots, thereby turning it into livestock food. Meanwhile, type 2 waste, namely paper or plastic, can be disposed of or given to waste banks. And finally, type 3, the remainder, can be taken to the polling station to be transported to landfills by the Hygiene Agency (Kangpisman 2018).

The impact of the Kangpisman program has meant that the increase in waste deposits dumped into landfills each year has tended to decline from year to year, as noted above, with overall deposits of between 5% and 20% per year. However, in 2019, the increase still occurred but only reached 4%. Thus, the volume of waste is still rising, but the rate of increase has declined. The President Director of 'Pd Kebersihan' Kota Bandung, Gun Gun Hidayat, stated that:

Usually, the increase in waste deposits is 5% to 20% per year. The garbage that is thrown into the landfill tends to go up year after year. The population went up steadily, a 5–20% increase. Well, in 2019, when Kangpisman started its activities, the increase was fixed, but was only 4%. This happened in the last year when Kangpisman had already started its activities.

*(Interview with Gun Gun, President Director of
Hygiene and Waste Management Bandung City,
August 26, 2020)*

Furthermore, specifically to deal with problems in the Citarum River itself, both the West Java Government and the central government developed several programs, namely Citarum Bergetar, Citarum Bestari, and finally, Citarum Harum. However, the program that has become best known today is Citarum Harum. This ongoing program is run by the local government with the goal of overcoming the plastic pollution problem in the river. This program was officially launched in 2018, along with the issuance of Presidential Regulation No. 15 of 2018 concerning the acceleration of pollution control and damage to the Citarum watershed.

While Citarum Harum is the main program, it has been further divided into 12 sub-programs, each led by a working group. The divisions include Critical Land Handling, Industrial Waste Handling, Livestock Waste Handling, Domestic Wastewater Handling, Waste Management, Floating Net Cage Arrangement, Space Utilization Control, Law Enforcement, Water Quality Monitoring, Water Resource Management, Public Relations, and Education (Resmiani 2020). One of these programs is Water Quality Monitoring, a sub-program designed to monitor the development of river water quality at specific time intervals and at several river monitoring points. Some of these points are selected as areas representative of the conditions around the watershed, considering various activities that have the potential to produce pollution discharges into the river (Resmiani 2020).

Through programs such as Kangpisman and Citarum Harum, vulnerable residents who live around the Citarum watershed area are greatly supported in their efforts to address the problem of waste pollution that they experience. As stated by Herman, Chairman of RW. 07 Cibunut:

If you look at it, it is a bit good, it is somewhat improved because the Kangpisman program is already in place in around 153 waste-free areas formed by the DLHK. Because in the city of Bandung—especially West Java—with the Citarum Harum program, it also helped that education is directly near the riverbank, yes. Helped by seeing the garbage that goes into the river is somewhat reduced, yes, because the heaviest factor is indeed education—especially on the banks of the river. People do still throw a lot of garbage into the river.

*(Interview with Herman, Chairman of RW. 07
Cibunut Kebon Pisang, August 26, 2020)*

In addition to the Kangpisman and Citarum Harum programs, the Bandung City regional government has other programs to overcome the negative impact of plastic pollution in the Citarum River. One such program is 'Waste to Food', which focuses on separating organic and non-organic waste, and then the organic waste is processed by maggots to become a *casgot* that is used as fertilizer. Gun Gun further explained that:

The garbage is processed by the maggot. From this maggot comes *casgot*. This *casgot* is used as fertilizer. This is urban farming. Make the maggot high in protein. This maggot is used for feed. Fish feed or animal feed.

*(Interview with Gun Gun, President Director of
Pd Hygiene Plastic Waste Management, Bandung
City, August 26, 2020)*

Apart from the waste processing and handling programs of the Citarum River run by the government to overcome the unending plastic waste problem, the government also has the power to impose sanctions. These sanctions are made to strengthen the enforcement of regulations. In the central government, for example, sanctions are divided into two, namely moral sanctions and fines. However, these sanctions have still not been effectively implemented.

From various programs to the sanctions enforced by local governments, there have been significant changes to the problem of plastic pollution in the Citarum watershed. Sorting organic waste and non-organic waste will certainly help to reduce the flow of plastic pollution into the river. Plastic waste that has been cleaned to remove leftovers or the remnants of drinks can more easily be sent to the waste bank to proceed through the recycling process. As we know, the main reason residents throw plastic waste into the river when they know that plastic is slow to decompose is because they are too lazy to sort organic and non-organic waste after it has been deposited in one pile. But with programs like Kangpisman, garbage containers have been classified first so that, in the end, residents do not have to bother sorting garbage anymore.

The Waste to Food program is not very different from Kangpisman, whereby organic waste is separated from plastic waste so that not as much plastic waste is thrown into landfills. In addition, Citarum Harum is an important program because the government can check and control the water quality of the Citarum River directly, so that any negative impact of plastic pollution can be prevented. Polluted rivers will have a negative impact on the residents living around them, so Citarum Harum is also an important program for overcoming the negative impacts of plastic pollution, although it does not directly involve residents in sorting out their household waste.

6.3.3 *The Readiness of Citizens to Overcome the Problem of Plastic Pollution in the Citarum River Due to COVID-19*

In overcoming the problem of plastic pollution around the Citarum watershed area, residents were already equipped with suitable programs by the government before the COVID-19 pandemic. Citizens have been educated through campaigns conducted through various channels either directly—namely through the government taking to the field—or comprehensively through social media. Residents are educated to be ready to support the realization of a decrease in the use of plastic waste, especially single-use plastic. At the same time, the goal is to make people aware that the excessive use of plastic waste can harm them and the environment.

Some aspects of the education of residents were mentioned by the Head of the Sub Directorate of Goods and Packaging of the Directorate of Waste Management of the Ministry of Environment and Forestry (KHLK), as follows:

Education was provided through various channels both directly and in the field, through movements in the field, inviting various elements to do this. But the most massive so far seems to be quite significant results indeed through social media, it turns out through channels such as Whatsapp, YouTube, and Instagram. [These platforms are] effective enough to deliver or send a message as to how the community must be responsible.

(Interview with Ujang Solihin, Head of Sub Directorate of Goods and Packaging Directorate of Waste Management Directorate of the Ministry of Environment and Forestry (KHLK) RI, August 12, 2020)

Due to the development of technology, the government no longer needs to rely solely on working directly in the field but can convey messages related to protecting the environment through social media. This is even more effective for the younger generation because much of their time is currently spent on the internet.

Following efforts made by the central and local governments to revive the community or consumers in general, residents have begun to realize the environmental cost of single-use plastic bags. In this case, residents who live in vulnerable areas, such the Citarum River area, also know what efforts need to be made to reduce waste in the environment, especially plastic waste. Based on the results of in-depth interviews conducted for this study, the readiness of residents to deal with plastic pollution in the Citarum River area is discernible in their being encouraged to send their recycled waste to waste banks or to the scavengers. The manager of the Bandung City Waste Management and Hygiene Agency conveyed that this preparation is carried out so that residents only collect organic waste, while plastic waste can be reprocessed and does not accumulate in landfills or get washed into

the river. This effort is an initiative of his institution and several neighborhood communities (RW) in the Citarum River area.

Waste management involving sending plastic waste to waste banks is one of the readiness models that residents have in relation to the Citarum River. In Bandung itself, the popularity of waste banks has mushroomed. This is because waste banks have benefits in the form of incentives whereby the waste will be exchanged for money. In addition, waste banks are also one of the outputs of the Bandung City Government program 'Kangpisman' (Reduce, Reuse, Recycle).

Besides efforts to reduce plastic waste, the most important thing to do is to educate and disseminate information. The readiness of residents around the Citarum River is increased because they have been educated in relation to waste management. For example, in one neighborhood community (RW. 07), the education session was carried out for residents of the Cibunut Kebon Pisang by Herman Sukmana as Chairman of RW. He stated that

The people have been educated. My plan is to reach 100%, especially regarding the sorting. Most people have been diligent in sorting but they don't have to go to the waste bank only.

*(Interview with Herman, Chairman of RW. 07
Cibunut Kebon Pisang, August 26, 2020)*

Waste management carried out by residents involves sorting waste according to its type. Mr Herman made few changes to his education of citizens during the COVID-19 pandemic. He stated that:

During this COVID, I educated people on becoming more willing to give up their waste. Whether to our garbage officers or to the scavengers.

*(Interview with Herman, Chairman of RW. 07
Cibunut Kebon Pisang, August 26, 2020)*

That is, when it became difficult to send waste to waste banks during the pandemic, the residents were encouraged to give their waste to scavengers. Because if waste is given to scavengers or garbage officers, it means that residents must be sincere since there is no reciprocity in the form of money. This must be done to prevent the careless disposal of plastic waste on the riverbanks.

It took about a year to socialize the Citarum River community regarding waste sorting. Socialization was carried out through neighborhood community (RT/RW) meetings, as well as several academic studies that can be shared. Herman argued that socialization can be achieved, for example, through study:

Religious leaders helped issue an MUI fatwa related to sorting and processing waste so that it would be more effective in the community than information from scholars.

*(Interview with Herman, Chairman of RW.
07 Cibunut Kebon Pisang, August 26, 2020)*

The current readiness of residents cannot be obtained in just one night but comes about through various processes supported by multiple parties, ranging from local government to the chairperson of the neighborhood community (RW/RT). The readiness of citizens is enhanced by stakeholders in the surrounding environment who strengthen rules and regulations related to waste and then integrate these into villages and sub-districts to cover a wider area. Citizens who violate the regulations, such as by not wanting to clean their yards or sort their garbage, will likely be sanctioned. For example, one sanction that has been used by Herman as the Chairman of RW. 07 is not issuing any recommendation letters to citizens who violate the rules.

With the gradual creation of a beautiful and comfortable environment, residents will get used to maintaining the environment and no longer throw plastic waste into the river. Education is the right choice for preparing residents to overcome the problem of plastic pollution in the Citarum River during the current COVID-19 pandemic. This can be delivered through collaboration between the government, NGOs, such as the Bandung Champion of Waste Free (BJBS), and the chairperson of the neighborhood community.

The actions of the public and private sectors have at least proven the extent of the efforts to restore the Citarum River. Clearly, support should not be limited to developing infrastructure—other matters, such as waste management, should be addressed comprehensively by involving the wider public. The participation of all members of society, whoever they may be, is critical to maintaining the Citarum River. More important, however, is the effort to educate the younger generation to cherish the Citarum. Rehabilitation of the river will not happen overnight, and the Citarum will be needed for future generations. The government cannot enforce the law without educating people on how to deal with their problems, especially the pollution around Citarum. Education is the key to empowering society along the Citarum River.

The community service program run by universities near the Citarum River is an example of an initiative by educational institutions. They utilize various applications that can help in data collection. Meanwhile, to ensure the sustainability of the empowerment program for the Healthy Living Community Behavior (PHBS) in the Citarum watershed area, university students can be engaged through their community service activities. Today, social media has become an interesting new interface in society. It has transformed the way that people lead their daily lives and engage in communication. Social media provides tremendous opportunities to encourage environmental activism. The most rewarding thing about social media is that, next to direct word-of-mouth communication, it is one of the most environmentally friendly marketing tools available. Citizens' behavior in dealing with the environment is an important factor in reducing environmental hazards, particularly river pollution.

6.4 Conclusion

The COVID-19 pandemic has not only had an impact on human activity but also impacted the environment. The surge in single-use plastic waste is a serious problem that must be addressed by the government and the community working together. Although the impact of the increase in plastic waste rates in the Citarum River during the pandemic has not been felt directly, the public must be prepared to deal with a surge in the amount of waste. In addition, the government must also participate by creating programs to overcome the impact of the pandemic on plastic pollution.

Education about the dangers of plastic waste has been carried out, initially by the central government. Approaches have ranged from going directly to the field to conveying short messages through various channels on social media, such as Facebook, Instagram, and YouTube. The Ministry of Environment and Forestry (MOEF) stated that the education programs that have achieved the most significant impact were those delivered widely through social media, including meeting the goal of successfully contacting the target audience—namely the younger generation. Education is one program that can lead to empowerment, especially if the target group is the young generation. By empowering youth as the agent of change, it will help to reduce plastic pollution in Citarum River. Besides empowering youth, it is also important to empower society along the Citarum River by continuing to provide education and to disseminate knowledge through social media.

Meanwhile, in West Java itself, education carried out through collaboration between local governments, NGOs, such as Bandung Champion of Waste Free (BJBS), and the chairpersons of the neighborhood communities has helped to develop the readiness of residents around the Citarum River, and has contributed to addressing plastic pollution during the pandemic. The programs for sorting waste launched by the local government for its citizens are called Kangpisman (Reduce, Reuse, and Recycle) and Waste to Food. In addition, there are other programs run by the government to improve and maintain cleanliness in the Citarum watershed, namely Citarum Harum.

Although some waste banks have been forced to close due to the pandemic, residents still sort their plastic waste and organic waste in accordance with their socialization by the chairperson of the community in each region. Additionally, programs implemented by local governments, such as the regulations made long before the pandemic, have helped in dealing with problems related to plastic pollution. The government is not limited to developing programs but can also apply sanctions in the form of fines and moral sanctions for citizens who do not comply with the regulations.

This study found that one impact of the pandemic directly felt by the Citarum watershed community was the difficulty of sending recycled waste to waste banks on account of some waste banks in Bandung City having experienced temporary stoppages or collapsed. In addition, the process of sorting organic waste and

plastic that were accumulating in the community stopped. This meant that plastic waste could not be sent directly to the waste bank as usual.

This study has many shortcomings, partly due to the timing of the study, as the research was carried out in 2020, at the beginning of the pandemic. At that time, there had been little change around the Citarum River, and there were only marginal impacts experienced by local residents. Therefore, further research needs to be carried out to better understand whether and how much plastic waste increased in the Citarum River during the COVID-19 pandemic and what other impacts were experienced by residents during the pandemic.

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7

FROM VERTICAL TO HORIZONTAL EMPOWERMENT OF WOMEN (IN) PEACE AND SECURITY

Toward a Feminist Perspective of Human Security

Ma Lourdes Veneracion

7.1 Introduction: WPS from an International to a National Context

Women, Peace, and Security (WPS), as a global agenda, advocates women's participation in peacebuilding and conflict resolution, the protection of their human rights, and the prevention of violence against women and girls. This agenda was embodied in United Nations Security Council Resolution (UNSCR) 1325, a pioneering resolution emanating from the UN Security Council (UNSC) in October 2000. The Resolution finally recognized that the differential impact of armed conflict on women was a matter of significance for international peace and security. The Resolution has been advanced by civil society as it continues to fight to advance the agenda opposing all forms of violence against women (VAW) at women's and human rights conferences, such as those held in Nairobi, Copenhagen, Vienna, and Beijing. Discursively, WPS mainstreams gender in peace and security.

Substantively, WPS has two trajectories: (1) promoting agency and participation, and (2) preventing vulnerability and victimization. The first trajectory is the focus of UNSCR 1325—the foundational resolution of WPS (2000)—followed by UNSCRs 1889 (2009), 2122 (2013), and 2493 (2019); the second trajectory is the primary goal of UNSCRs 1820 (2008), 1888 (2009), 1960 (2010), 2106 (2013), 2242 (2015), and 2467 (2019). In practice, more attention has been paid to women's vulnerability than women as change agents (O'Reilly 2019, 195).

In the Philippines, WPS was a momentous event. In 2010, through collaborative work by the State and civil society organizations (CSOs), the Philippines launched its National Action Plan on Women, Peace, and Security (NAP WPS) 2010–2016, becoming the very first Asian country to do so. Four years later, largely through the work of national government agencies (NGAs), the NAP WPS was amended to

streamline its action points and indicators. In March 2017, a new NAP WPS was adopted for 2017–2022, known as the third iteration of NAP.

Parallel to these State initiatives were efforts made by civil society. The first was the establishment of a loose network of human rights and atrocity prevention, peace, and women's groups from all over the country, known as 'Women Engaged in Action on United Nations Security Council Resolution 1325' (WE Act 1325). These groups were from grassroots, local, and national spaces involved in 'advocacy work, education and training, community-based involvement, networking, lobbying for legislation, research, and multi-sectoral/actor dialogues' (Veneracion 2013, 76–77). Apart from localizing NAP WPS at the municipal and *barangay* levels (i.e., local action plans or LAP WPS), they also designated a role for themselves in monitoring the implementation of the NAP WPS at the national, regional, and provincial levels. For the most part, WE Act 1325 has played the role of domestic norm entrepreneur for WPS:

Particularly, as [a] domestic norm entrepreneur, the network is trying to transcend the usual top-down strategy of grounding an international norm and is now shifting gears toward the value of bottom-up approaches in order to achieve desired results at the grassroots level.

(Veneracion 2013, 67)

Based on this conception of CSOs' role as domestic norm entrepreneurs, this chapter explores the following questions: How did the CSOs fare in pursuing their WPS work during the COVID-19 pandemic? What strategies did they use to continue empowering local/grassroots women partners? Using Naila Kabeer's concept of empowerment, comprised of agency, resources, and achievement, this chapter teases out the shift from the CSOs' vertical empowerment to that of local partners' horizontal empowerment in the context of advancing gender through the WPS agenda during a crisis situation.

7.2 WPS Re-oriented toward COVID-19 Response

Despite being initially characterized as collaborative politics between the State and CSOs (Veneracion 2013), this partnership has since become less active. In fact, the State and CSOs seem to have gone their separate ways in terms of implementing the NAP WPS. The Office of the Presidential Adviser on the Peace Process (OPAPP)—the Chair of the NSC WPS and main implementer of the NAP WPS—was transformed into a pandemic response agency, the National Task Force on COVID-19. The head of OPAPP, Presidential Peace Adviser Secretary Carlito G. Calvez, Jr, was designated as the 'vaccine czar' by President Rodrigo Roa Duterte. According to one of the CSO interviewees for this chapter, 'Working with government on WPS became difficult as they had a change in focus' (Resource Person 1).

By 2021, however, OPAPP had resumed its role leading WPS by conducting focused group discussions (FGDs) in several conflict-affected/vulnerable areas. For example, in partnership with the Bangsamoro Women's Commission (BWC), it held an assessment of the situations of the Moro Islamic Liberation Front (MILF) and the Moro National Liberation Front (MNLF) for women and girls and their families. It also conducted a situational analysis of the condition of women and girls in South Upi, Maguindanao, in Marawi and Lanao areas, and in the SPMS Box (Shariff Aguak, Pagatin now Datu Saudi Ampatuan, Mamasapano, and Datu Salibo). In addition, several initiatives were undertaken to mainstream WPS in the transitional justice roadmap of the Philippine government.

On the other hand, prior to the pandemic, CSOs had continued to deepen their partnerships with local women's groups in operationalizing WPS. There were capacity development programs, FGDs on gender, peace, and security, the concretization of women's meaningful participation, and other activities based on similar issues. When the COVID-19 pandemic hit, these positive developments were jeopardized. The mobility of women from conflict areas, as well as their access to essential services, were profoundly affected. The mobility of national CSOs was also impacted, and they were now unable to visit communities as they had previously done. Virtual meetings did not prove to be an effective alternative in the short term because of connectivity challenges, as well as a lack of equipment. However, the local women's groups were still present in the communities, and they were able to connect the community women with the national CSOs. WPS work then picked up, with the national CSOs catering to the needs of local women by providing food packs, masks, and other material support through the intercession of local partners. Mainstreaming gender in their COVID-19 responses to conflict-affected communities became a core role of national WPS CSOs.

7.3 WPS and Human Security: Agency

The concept of human security moves security away 'from state security to threats of security that affect people, for example, threats emerging from famine, epidemics, economic, decline, environmental degradation, migration and other such crises' (Tripp 2013, 3). It pertains to 'people-centred, comprehensive, context-specific and prevention-oriented responses that strengthen the protection and empowerment of all people and all communities' and is interlinked with 'peace, development and human rights' (UNGA 2013).

Gender is a human security concern primarily because people, particularly women, are rendered vulnerable and are victimized on the basis of gender. In armed conflict situations, women suffer more from sexual and gender-based violence (SGBV), such as rape, sexual slavery, etc.

According to Tripp, human security from a feminist perspective pays attention to the agency of the people. This notion is already present in the understanding that 'all individuals, especially vulnerable people, are entitled to freedom from

fear and freedom from want, with an equal opportunity to enjoy all their rights and fully develop their human potential' (UNGA 2013). In the case of women, vulnerability is not perpetual, and they are actors in their own right: 'not enough attention is paid to the ways in which women contribute to their families, communities, and nations in such circumstances, mainly because of the focus on the high politics of men, statist solutions to the crises and international interventions' (Tripp 2013, 18). The process of creating WPS relied on discourses and civil society work on human security, leading to a framework for the UN Security Council to accept (Hudson 2010). As the WPS agenda highlights, women, through their agency, contribute to peacebuilding, conflict resolution, and post-conflict reconstruction. Integral to this process is the empowerment of women.

The Philippine NAP WPS 2017–2022 has four pillars: (1) empowerment and participation, (2) protection and prevention, (3) promotion and mainstreaming, and (4) monitoring and evaluation. In comparison with the first and second generations of the NAP WPS, the current version claims to highlight women's various roles in different peace spaces, as follows:

In this regard, it highlights women's agency—both as leaders and participants—in the peace process of the country. It seeks to continue the best practice of women's presence in formal peace tables as well as in other informal spaces (i.e. civil society and grassroots participation). It also aims to support various initiatives where women empower other women, recognize the intersectionality of gender, ethnicity, and religion, and build a stronger constituency for peace and conflict transformation where women are involved in the front, back, and centre of the process. Additionally, it also pays attention to women's empowerment in light of their economic rights.

(Philippine NAP WPS 2017, 9)

The empowerment pillar seeks to demonstrate that 'Women and girls, through meaningful participation and leadership, are active change agents in conflict transformation and post-conflict development' (Philippine NAP WPS 2017, 12). In terms of links to gender in human security, it aims to advance the role and contribution of women and girls in attaining and sustaining peace. It also reflects the goal of strengthening women and girls' capabilities, access, and control in relation to decision-making spaces and resources.

7.4 Empowerment

7.4.1 Defining Empowerment

Empowerment, like most terms, is contested. It can be seen as a technical term (when linked to management, project development, or other output- and outcome-oriented endeavors) or emancipatory (when related to changes in the conditions or

situations of the people involved). However, what is usually agreed on is that it is a process. On the one hand, it is connected with the idea of power—not so much power over but rather power to (i.e., the ability to act), power with (i.e., collective action), and power within (i.e., sense of self-worth) (Coburn and Gormally 2017). On the other hand, it exists in the context of an absence or a lack of something: the absence of control, a lack of access, or the deprivation of space in which to be seen or heard.

In light of these factors, at the macro-level, empowerment challenges power relations, alters the conditions that perpetuate an undesirable status quo, and transforms situations that affect people's lives. For Sen (1993), empowerment involves an alteration in power relations, while for Batliwala (2007), empowerment was borne out as having a strong political meaning, centering on social change, social justice, and equality. As such, there is a distinctive consciousness about the pervading power dynamics, and empowerment helps people to develop the 'capacity to make effective choices [...] and then transform those choices into desired actions and outcomes' (Alsop, Berstelen, and Holland 2006, 10).

At the micro level, empowerment is a process in which people are enabled to participate in decision-making, gain access to resources that can transform their lives, and become actively engaged in shaping the functioning of their community. For Bennett (2002), empowerment is 'the enhancement of assets and capabilities of diverse individuals and groups to engage, influence and hold accountable the institutions which affect them'. Kabeer (2001) defines it as 'the expansion in people's ability to make strategic life choices in a context where this ability was previously denied to them'.

7.4.2 *Women's Empowerment in Development Discourse: Kabeer's Agency, Resources, and Achievement*

Women's empowerment can be seen when women themselves mobilize and take on leadership positions in their respective communities (Caiman 1992; Bystydzenski 1992) or increase their power through grassroots movements and activism (Moser 1993; Kabeer 1994). In other words, women are acting on their own and for themselves as a group.

According to Kabeer (2005), empowerment pertains to the process whereby those who have been denied the ability to make choices are enabled to make them (13). Thus, empowerment presupposes change—from not having to having something. It has three dimensions: agency, resources, and achievement, each of which is explored below.

Agency is the act of making choices and doing so in order to challenge embedded power relations. It is power within that intersects with meaning, motivation, and goals. When linked to women's empowerment, it is akin to women's self-worth and how society values this actuation. In the presence of gender discrimination, agency can be actuated when this very discrimination is interrogated. And

through this challenge to embedded power, concrete steps can be taken toward gender equality—thus fulfilling the meaning of agency.

Resources are the essential means through which an individual exercises agency. These resources can be obtained from both institutional settings and relationships formed within a collective. For example, a woman can be a member of a family (an institution), while her situation is that of being a dependent (a relation), thereby limiting her access to resources. Consequently, the scope of her agency is constrained by her very limited resources.

And lastly, achievement for women pertains to the achievement of their full potential: being able to be part of decision-making circles, having voices in shaping the conditions that affect their lives, and advancing gender equality in institutions and relationships. Achievements are therefore the tangible outcomes of agency, reflecting the women's ability to exercise their power and create positive change.

7.4.3 Women's Empowerment in WPS: From Macro- to Micro-Empowerment

Women's empowerment in peace and security involves their full inclusion and participation in all matters of peace and security. According to Klugman, Nagel, and Viollaz (2021), empowering women not only advances human rights but also leads to sustainable peace. For O'Reilly (2015, 4), women's participation serves as a predictor of peace.

Empowerment of women in WPS can be inferred to mean increasing women's participation in peacebuilding efforts in general. For Barnes (2011), this is indicative of women contributing to peace. As women become more involved in peace processes, it has been asserted that peace is more likely to be sustainable compared to when women are excluded from participation (O'Reilly, Suilleabháin, and Paffenholz 2015; Krause, Krause, and Bräfors 2018).

UNSC 1325, as the foundational resolution on WPS, recognizes the various roles that women play in conflict resolution and peacebuilding. In this regard, it sees women's empowerment as inclusion and participation in decision-making spaces. These spaces, particularly those in institutions and peacebuilding infrastructures, must guarantee women's participation. In the case of UNSC 1889, the focus is on women's empowerment in peacebuilding amidst the underrepresentation of women in all stages of the peace process. Strategically, this must be operationalized through needs assessment, planning, and budgeting for programs, activities, and projects. Integral to this process is the advancement of gender equality and the improvement of conditions for women and girls, specifically in the context of post-conflict reconstruction. For Resolution 2122, women's leadership plays an essential role in women's empowerment and their inclusion in all levels of decision-making. For the first time, in USCR 1325, there was a specific mention of women's economic empowerment in transitioning societies. And

finally, as regards Resolution 2493, the reiteration of institutional arrangements and processes has been identified as the key to women being empowered to fully, equally, and meaningfully participate in conflict transformation, as follows:

Globally, as well as in ASEAN, women's contributions to prevention and resolution of conflicts, and to post-conflict recovery, have tended to be in the informal realm (e.g., Tracks 1.5 or 2, in terms of peace processes) or have been at the community level, often led by community-based organizations. More recently, there has been a tendency of national NGOs or even international NGOs to enter into this space, but the bulk of women's contributions to stop violence, provide mitigation solutions, and heal/rebuild after the conflict has been at this informal, community-based level.

(ASEAN 2021, 15)

7.5 Civil Society, Empowerment, and WPS during the Pandemic Crisis

Civil society has been integral and invaluable in the development of WPS:

Locally and nationally, women's civil society organizations are key spaces for women's social and political engagement with the power to end wars and build peace. CSOs demonstrate that women's agency, voice, and capacities are critical to local dialogues, better policies, and more equitable peace deals, which established a solid foundation for the new postwar order.

(Björkdahl and Selimovic 2019, 428)

In the evolution of WPS, CSOs were present in setting the agenda and institutionalization, as well as implementation and practice. According to Anderlini (2019), the adoption of UNSCR 1325 was largely led by civil society:

We had the vision, the strategy, the tools, the tactics, and not to mention the relentless hard work and singular pursuit that drove our efforts. It was and is an achievement in terms of advocacy because we succeeded in getting governments to embrace our own vision and agenda. As civil society alone, we could not have secured a resolution in the Security Council. That remains an area for state action, so we needed those states to join in.

(49)

The CSOs' involvement in developing the first NAP WPS in the Philippines followed a process of collaborative politics. First, in 2007, a group of women from different CSOs came together to talk about UNSCR 1325. That conversation eventually led to the development of a CSO for convening activities to unravel what WPS meant for Filipino women (i.e., agenda-setting). Three years later,

the CSO-led NAP WPS 2010–2016 was launched. Second, during the various regional consultations, government actors—through the Philippine Commission on Women (PCW) and OPAPP—joined in. For their part, the government issued Executive Order 865, which created the National Steering Committee on Women, Peace and Security (NSCWPS) as the strategic entity in charge of the implementation of the NAP WPS (i.e., institutionalization). And third, over the following six years, capacity-building for implementing NGAs, policy guidance, amendments to the NAP WPS, and a range of different activities were conducted. In 2017, a new NAP WPS was adopted by the Philippine government. As for the CSOs, they focused on localization of the NAP WPS, bridging grassroots women's groups with international CSOs, and networking with local partner CSOs (i.e., implementation and practice).

With the onset of the pandemic, adjustments to the ways that CSOs did their work were needed. These changes shall be discussed in the case studies below.

7.6 Case Studies

The three organizations chosen for this study, in one way or another, have all been involved in advancing WPS around the country. Each organization has collaborated with a range of local partners for several years in implementing WPS projects. These local partners, in turn, are the ones that organize the activities on the ground, by securing participants and coordinating logistics. Previously, the national CSOs had, to a certain degree, flown in, facilitated activities with local partners, and assisted in moving forward the plans of the participants—all with the help of the local partners. However, the COVID-19 pandemic changed that. The three CSOs were chosen for the study because they have been at the forefront of WPS work since the NAP WPS was first launched in 2010, and each has a strong gender program.

First, Gaston Z. Ortigas Peace Institute (GZOPI) is a non-governmental organization (NGO) that works for 'just and lasting peace' in the Philippines. It has been involved in lobbying and advocacy, networking, and capacity building and training. Its areas of interest are gender, human security, dialogue and mediation, as well as peace education. The goals of the Institute are as follows:

- ***Provide effective training and capability-building*** for groups and communities to pursue peaceful approaches to conflict;
- ***Support citizen peacemakers and sectoral formations*** challenging and engaging government and other relevant parties in dialogues and negotiations to advance the people's peace agenda;
- ***Undertake research, documentation, and model-building*** on replicable Filipino conflict resolution processes;
- ***Build linkages and networks*** with local and international groups that are working for peace and conflict transformation. (GZOPI, n.d.a.)

Since 1994, GZOPI has undertaken training, consultations, and studies on women and peace. It has also been active internationally through affiliations with the Harvard Kennedy School of Government's Women Waging Peace and Southeast Asia Peace Women. More recently, it became involved in a UNSCR 1325 capacity-building project based on the recognition that 'women themselves must be primary agents for conflict prevention and peacebuilding' (GZOPI, n.d.b.).

Second, founded in 2006, Sulong CARHRIHL is an NGO that has emerged from the peace process between the Government of the Philippines (GPH) and the Communist Party of the Philippines-New People's Army-National Democratic Front of the Philippines (CPP-NPA-NDFP). Part of the organization's mission was to monitor the Comprehensive Agreement on the Respect for Human Rights and International Humanitarian Law (CARHRIHL) between the GPH and CPP-NPA-NDFP. Through the years, it has grown its network to 147 partner organizations representing 'women, indigenous people, youth, workers, farmers, academic institutions, duty bearers, and the church' (Sulong Peace 2023a). It is 'an organization that empowers citizens and communities affected by armed conflict through human rights, peace and development' (Sulong Peace 2023b). Later, it became more involved in governance and peacebuilding work using a gender perspective. In 2021, Sulong CARHRIHL was renamed Sulong Peace to capture the expanding work of the organization.

The third organization is WE Act 1325, launched in 2010 after the first iteration of the NAP WPS. WE Act 1325 is a national network of civil society organizations with 35 member organizations nationwide (WE Act 1325, n.d.). It was established to help with the implementation of UNSCR 1325 and 1820. In recent years, the focus of their work has been on 'policy review, capacity building and training of various stakeholders; engaging the peace process through its dialogue with panel members; advocating for women's participation in peacebuilding; advocating for peace education and; raising media awareness'. It also aims to 'strengthen the justice system, campaigns against small arms, monitors and documents the effects of armed conflict on women, involves grassroots women in peacebuilding projects, promotes civil society involvement in the implementation of the NAP, and monitors the implementation of the Plan' (We Act 2010, 28). Through its local partners, the network connects with grassroots women in relation to their role in local peacebuilding. Localization of the NAP WPS at the municipal and city levels has also featured in its work, such as the localization undertaken in Cuyapo, Nueva Ecija; Tabuk, Kalinga; Calbiga, Marabut, Basey, and Villareal in Samar; Sultan Mastura in Cotabato City; Marawi City; Butuan, Cabadbaran, Buenavista, and Magallanes in Agusan del Norte; and Real and Nakar in Quezon (Women Engaged in Action on UNSCR 1325 n.d.) for local government units (LGUs) to implement the salient points of WPS, particularly women's participation.

For this chapter, online interviews were conducted with resource persons from GZOPI, Sulong Peace, and WE Act 1325 during the early part of 2021. The researcher then engaged in email correspondence with the local partners of

GZOPI, Sulong Peace, and WE Act to gather insights from their perspectives. Finally, the researcher reviewed the activity reports from the three CSOs to gain a deeper understanding of the activities they have undertaken on the ground. Collected data were organized according to themes based on Kabeer's conception of empowerment.

7.6.1 GZOPI

GZOPI was involved in several projects before the pandemic lockdown. The first was a project on women and normalization in the Bangsamoro that involved advocacy and training, while the second was a consultation on the Bangsamoro transition linked to the work of the Third Party Monitoring Team (TPMT). The third project was to establish, through the Global Partnership on the Prevention of Armed Conflict (GPPAC), a working group for the peace process in collaboration with the Government of the Philippines (GPH) and the National Democratic Front of the Philippines (NDFP).

In the early stages of the pandemic, GZOPI added relief and responses for grassroots women to its work through local women's partner organizations that had already been working with them: the Women's Organization of Rajah Mamalu Descendants (WORMD) in Maguindanao, Al Mujadilah Development Foundation/Al Mujadillah Women's Association in Lanao, Nisa Ul Haqq Fi Bangsamoro in Zamboanga, Basilan, Sulu, and Tawi-Tawi. Consultations with women on peacebuilding continued, and relief packs were given to those who participated. In Maguindanao, GZOPI supported a special project on women's mask-making and distributed the masks to conflict-affected communities.

Since GZOPI was unable to travel to Mindanao due to the lockdown in Metro Manila, it relied heavily on its local partners—such as WORMD, Al Mujadilah Development Foundation/Al Mujadillah Women's Association, and Nisa Ul Haqq Fi Bangsamoro—to conduct grassroots consultations. In the middle of the year, consultations continued, but these were conducted by local partners. In this regard, these local partners shaped the substance and approach of workshops and consultation activities; it was also the local partners who distributed relief packs to the women attendees.

In assessing the situation of conflict-affected areas in which it works, GZOPI has ensured the participation of local women as partners. Other partners of GZOPI include UN Women and the United Nations Office on Drugs and Crime (UNODC); it also continued to engage with NGAs such as the National Commission on Indigenous Peoples (NCIP), albeit to a limited degree. Based on the assessment of GZOPI, the situation in the Bangsamoro worsened during the ongoing pandemic: *rido* (or clan wars) continued, and there were more incidents in which Indigenous peoples (IPs) were killed.

With regard to advancing the goals of WPS, GZOPI said that it continued to contribute to the protection and prevention pillar through advocacy and

participation in consultations on peace and normalization. However, all of these activities relied heavily on local partners that had a direct hand in implementing GZOPI projects and in re-shaping the running of workshops in which grassroots women participated.

For example, in the project ‘Deepening Women’s Peace Tables—Philippines (Strengthening Women’s Participation in Transitional Justice in the Bangsamoro)’, women who organized and participated in learning sessions on transitional justice wanted to expand these workshops to other women’s groups. In this regard, ‘they therefore designed, planned and implemented these Women’s Peace Tables (WPT) with more variation on specific needs, unlike in previous years when GZOPI managed these WPTs with their support’ (Deepening Women’s Peace Tables Report, January 2020 to June 2021).

For GZOPI, seeking stronger networking and maximizing existing resources has been the key strategy in trying to survive and advance its work in the middle of the pandemic. Its local partners have been instrumental in its survival. It was also more difficult to advance WPS during the pandemic, as both CSOs’ and the government’s attention were divided. It has been more difficult to advocate for the protection and prevention aspects of WPS. Nonetheless, according to the GZOPI resource person, creative approaches—such as workshops/consultations combined with relief operations due to the COVID-19 situation—were necessary. Additionally, maximizing the connections between existing local partners, grassroots women’s groups, and community women was a key part of the strategy.

7.6.1.1 Agency

Prior to the pandemic, the physical presence of GZOPI on the ground was the norm. It had local partner women’s organizations that assisted in the implementation of projects and activities. These women’s groups were integral in gathering the community women—their constituency—to participate in focus group discussions, trainings, and workshops. These activities had to do with women’s participation in peacebuilding. In the context of the Bangsamoro Autonomous Region in Muslim Mindanao (BARMM), women’s participation is related to governance and politics.

When the pandemic hit, GZOPI could no longer travel and relied heavily on its local partner women’s organizations. The activities and projects were implemented by the local partner women’s organizations themselves. According to GZOPI, ‘in a way, it was good, because they have more leeway in shaping the activities’ (Resource Person 1). In other words, the local partner women’s organizations were not only project implementers but became decision-makers themselves in setting the trajectory of the trainings and workshops. Specifically, they were quick to decide on the needs of women participants. For example, when the women said they needed relief food packs, local partner women’s organizations immediately responded to these needs. In the context of the pandemic, they knew

what the women needed because they were their constituency. And, as such, they were able to make recommendations to GZOPI concerning the situation on the ground.

In the case of the WORMD, it said that its relationship with GZOPI deepened. They had several online meetings about what WORMD should do during the pandemic and mapped out the needs of women, men, and children. This gave WORMD much-needed information on the pandemic situation and any appropriate actions they could take in response. It also strengthened the view that GZOPI was still taking care of the organization, recommending that it make its own decisions regarding the situation of Indigenous women in the midst of the pandemic (Resource Person 4). Awareness-raising was key in this engagement, as well as highlighting their capacity to decide on situations that would impact them.

By 2021, in the case of the WPT project, most engagements were still being carried out by local partners, even though GZOPI staff were now able return to fieldwork. By this time, the local women CSOs were already thoroughly engaged with the grassroots women. For example, UNYPhil-Women held four WPTs in Maguindanao for ‘women community builders who are members or partners of UNYPhil’ (GZOPI 2021). The same was done by Al Mujadillah Development Foundation/Al Mujadillah Women’s Association for their WPT undertaken in Lanao del Sur and Marawi City on women’s experiences and transitional justice, including in the context of the Marawi Siege. In the same manner, the WPT on transitional justice conducted in Basilan, Sulu, and Tawi-Tawi was led by NISA Ul Haqq Fi Bangsamoro. Furthermore, local women’s organizations were invited by GZOPI ‘to propose advocacy activities [...] designed and implemented in response to ongoing situations and also anticipating future work on women’s agenda’ (GZOPI 2021).

7.6.1.2 *Resources*

During the pandemic, many regular activities of GZOPI were close to being shut down. According to GZOPI, there were a lot of shifts and changes in relation to sources of funding, as most of these were being diverted to the COVID-19 response. The work of GZOPI was no different. For example, FGDs on peacebuilding and participation included food relief packs for the participants. Resources were also allotted to the making of masks by women for their community’s use. Unfortunately, women’s multiple burdens, worsened by uncertainties resulting from the pandemic, were not addressed in the activities. However, it was the women themselves who spoke out about their situation and their needs. GZOPI responded accordingly by shifting part of their allotment of resources to meeting the needs of their women (Resource Person 1). For local WPTs, ‘GZOPI relayed the project funds to partner organizations based on contracts’ (GZOPI 2021).

7.6.1.3 *Achievements*

In the case of WORMD, the organization emerged out of the capacity development programs of GZOPI, among others. Women assisting with WORMD had training on women's human rights, WPS, preventing and countering violent extremism (PCVE), transitional justice, etc. During the pandemic, it has been noted that GZOPI continued working with local groups on community policing. According to the report of GZOPI, 'community-oriented policing would be more effective in the delivery of police services if they were sensitive to issues and perspectives of both women and men' and 'would also be enhanced by increased participation of women in the various components of the system' (Developing a Gender-Sensitive Community Policing Framework in BARMM 2021, 4). They also had several FGDs with different sectors co-organized by WORMD, at which community policing doubled as an information drive on COVID-19. For GZOPI, its reliance on and realization of the role of local partners became bigger and broader. According to WORMD,

From our experience and observation, we can say that we are more empowered now than before. Our communities recognized our advocacies and, thus, expanded our membership from South Upi and Datu Blah Sinsuat municipalities.

For UNYPhil-Women, Al Mujadillah Development Foundation/Al Mujadillah Women's Association, and Nisa Ul Haqq Fi Bangsamoro, their WPTs yielded the following:

- Through discussions, women were able to share and contribute their stories and insights;
- Such deeper understanding leads to more appropriate and specific plans and responses by women's organizations to engaging transitional justice and peace process efforts; and
- Local women's organizations gained more experience of designing and implementing trainings on transitional justice and WPTs (GZOPI 2021).

7.6.2 *Sulong CARHRIHL/Peace*

Prior to the pandemic lockdown, Sulong was actively implementing a project with Indigenous women (IW) in the provinces of Quezon (Grupo ng Kababaihang Umuugnay sa Pamayanan ng mga Agta/Dumagat na Nagtatanggol sa Lupaing Ninuno, or GUPAD-LN), North Cotabato (Nagkahiusang Lumadnong Kababayen-an sa Tinanan, or NALKATI), Agusan del Sur (Panaghiusa Alang sa Kaugalingnon ug Kalingkawasan, or PASAKK), Bukidnon (Kamalitanan te Matigsalog, Manobo, Kulamanen ne Migsabeka, or KMMKM), Rizal (Samahan ng

Kababaihan sa Puray, or SKP), and Oriental Mindoro (Nagkakaisang Kababaihang Mangyan ng Gloria para sa Kaunlaran at Kapayapaan, or NKMGKK).

Sulong was involved in a capacity-building program on governance and peace from a gender and human rights perspective aimed at strengthening IW's participation in the political, economic, social, and cultural spheres. Specifically, IWs were trained in local advocacy, the conduct of dialogues with local leaders, and the development of livelihood endeavors. They were about to commence the same kind of engagement with IW from Rizal and Davao Region when the COVID-19 lockdown was announced.

During the lockdown, sufficient communication continued with local IW partner organizations for Sulong to feel that the project was proceeding as planned. Continuing the project amidst the pandemic lockdown also enabled Sulong to carry out activities (i.e., data gathering) despite the fact that the organization, based in Metro Manila, was not there with them. At the same time, previous mechanisms, such as the Monitoring and Action Response (MAR) team in various areas, continued with local monitoring and documentation of human rights violations alongside COVID-19 incidents and verification. Sulong relied on these reports to craft its assessment and subsequent actions.

Armed conflict continued in the places where Sulong worked. Incidents of human rights violations increased, the recruitment of children for armed groups persisted, and red-tagging continued unabated. In practice, red tagging is where (mainly) government actors maliciously tag individuals or groups that are critical of the current regime as either communists or terrorists, regardless of their true affiliation (Torres 2019). According to the Republic Act 98551, red-tagging or red-baiting 'may be considered as a crime of persecution against any identifiable group or collectivity on political, racial, national, ethnic, cultural, religious, gender, sexual orientation or other grounds'. This is the result of Sulong's assessment, with input from the IW.

Throughout 2020, Sulong maintained its engagement with Indigenous women's organizations (IWOs) in a project titled 'Expanding the Support to Indigenous Women for Influencing Dutybearers on Peace, Human Rights, and Development'. For all of its local partners—GUPAD-LN, NALKATI, PASAKK, KMMKM, SKP, and NKMGKK—additional training, mentoring, and coaching were provided. In the middle of the pandemic, Sulong conducted a study on the six IWOs about how COVID-19 had impacted their political, economic, social, and cultural rights (Sulong Peace 2022).

Apart from working with partner IWs, Sulong strengthened its relationship with the Commission on Human Rights (CHR), the Human Rights Office of the Armed Forces of the Philippines (HRO AFP), and the Human Rights Office of the Philippine National Police (HRO PNP). Engagement with the CHR took the form of coordinating with the regional offices of the Commission. Building a relationship with security forces was a strategy to establish a bridge with the forces on the ground. In light of WPS, protection ensuring the security of women on the ground is key to working with government institutions.

For Sulong, coordination with various stakeholders, particularly the government, contributes to advancing the protection and prevention of violence against IW. Sulong's leadership capacity-building programs also include provisions for early warning, early response, psychosocial support, and paralegal training. IW women directly participate in the monitoring and validation of human rights cases as well as in the control of armed conflict situations in their respective areas. According to Sulong, it is able to do its work because of reliable local partners and engagement with various stakeholders.

7.6.2.1 Agency

Before the pandemic, Sulong was very much present on the ground. It was active in the capacity building of its local partners, conducting surveys and FGDs, building its constituency, and strengthening partnerships. When the pandemic hit, it needed to ensure that the women felt that their project could continue so that they could continue activities that needed to be carried out. These local partners were able to do things—such as data gathering, monitoring and documentation of international humanitarian law violations, and COVID-19 monitoring in partner areas—on their own.

Sulong conducted a study on how its local partners were faring amid the pandemic through the lens of political, economic, social, and cultural rights. Because all these IWOs had prior capacity development training from Sulong, they were able to respond to the questions in the study. According to the results of 'Women's Rights through a Pandemic', for example, it is clear that NALKATI women believe that their political rights have something to do with leadership and empowerment. In regard to empowerment, the women understand that this means the ability to carry out projects that would benefit their community. In the case of KMMKM, political rights entail political empowerment or the duty to educate other women to be leaders. For PASAKK, political rights pertain to non-discrimination based on gender and Indigenous identity while for GUPAD-LN, it meant the right to become leaders in the community. In the case of SKP and NKMGGK, political rights mean those that ensure the right to participation and engagement in community life. For these IWOs, political rights are paramount since they push them to participate meaningfully in their collective. They also create the opportunity to be leaders and show other IW that they can be leaders too. Advancing governance structures to include women was also one of the things that Sulong included in its training and mentoring.

7.6.2.2 Resources

Before the pandemic, Sulong had several projects that were supported by various funding organizations. One was on Enabling Women's Participation in Economic, Political, and Social Life, and another concerned the promotion of peacebuilding processes and how civil society can contribute to peace. Needless to say, Sulong

closely coordinated with their funding agencies in mapping out the continuation of such projects. Later on in the pandemic, leadership training programs for women were conducted in new areas: Rizal, Montalban; New Bataan, Davao de Oro; and Magpet, North Cotabato. These groups also learned about organizational development and strengthening for peacebuilding and conflict resolution.

7.6.2.3 Achievements

Sulong believes that women's participation is a right. Women's organizations trained by Sulong were capacitated on human rights, peace, governance, and gender. The trained IW continued with their own advocacy, engaging with tribal leadership through dialogue and local government units (LGUs) through grass-roots participation. In the case of KMMKM, it was able to manage its livelihood program on its own. It was also able to re-apply the capacity-building training that it had undertaken, as well as carry out humanitarian assistance activities as the need arose. All other IWOs called for more training and mentoring in order for them to internalize the value of IW leadership. For IWOs, empowerment means meaningful participation in the political, economic, and socio-cultural aspects of IW's lives (Resource Person 2).

For Sulong, the self-recognition of IWOs was an outcome of its work with its local partners. This is its contribution to WPS: IWOs in conflict-affected areas are able to realize their rights and capability to be leaders. For example, for NALKATI, IW leadership means the 'ability to participate in the important occasions in the community' and being able to 're-echo to the community what they learned from trainings' (Sulong Peace 2022, 14). In the case of KMMKM, IW leadership means 'opportunities to engage, participate, contribute to the affairs of the community in which they belong' (Sulong Peace 2022, 20), while for PASAKK, the leadership of IW relates to 'enhancing their capacities and contributing to the growth of the community' (Sulong Peace 2022, 26). In the same vein, for GUPAD-LN, SKP, and NKMGKK, IW leadership cannot be separated from community life.

7.6.3 WE Act 1325

Before the pandemic lockdown, WE Act 1325 was busy with several projects and activities. It was involved in talks with peace-table actors such as the NDFP in an effort to return to peace negotiations; it engaged in legislative advocacy concerning the Bangsamoro Organic Law (BOL) and campaigns for the plebiscite; and it conducted humanitarian assistance in evacuation camps during the Marawi Siege.

During the pandemic lockdown, WE Act 1325 realized that it needed to recast and realign its funds to assist conflict-affected women who were also impacted by the pandemic: 'It was in this context that WE Act and Oxfam Women's Empowerment for Leadership in Development and Peace (WELD-Peace) agreed on a set of re-designed activities that would respond to Moro women's practical needs for immediate humanitarian relief in light of the crisis caused by the pandemic and

Ramadhan' (Report on Moro Women's Experiences under COVID-19 2021). The activities had the following objectives: '(1) to undertake women-led humanitarian assistance to poor and marginalized Moro women affected by the extended community quarantine/lockdown during the season of Ramadhan'; and '(2) to enhance the Bangsamoro Women's Agenda by gathering Moro women's lived experiences in dealing with the COVID-19 crisis as well as their aspirations for the post-COVID recovery intervention programs' (Report on Moro Women's Experiences under COVID-19 2021). One of these activities was the delivery of *iftar* during Ramadan, as well as the delivery of food packs to women FGD participants from North Upi, North Cotabato, Lanao del Sur, and Zamboanga. WE Act 1325 also did the same for armed conflict widows who needed immediate relief assistance. In other words, their actions were consultation and humanitarian assistance rolled into one. As for the expected output, the activities were designed to ensure that WE Act partners would be mobilized to provide assistance to poor and marginalized women. For the grassroots women, the expected output was to gather 'women's lived experiences in dealing with COVID-19 crisis as well as their aspirations for post-COVID recovery intervention programs summarized and incorporated into the Women's agenda' (Report on Moro Women's Experiences under COVID-19 2021).

As regards the assessment of conflict in the areas in which it was working, the WE Act 1325 relies on local partners and their partnerships with various conflict-affected communities. To a large extent, the physical presence of WE Act 1325 is represented by their local partners. Through them, WE Act 1325 can touch base with grassroots women who also have insights into their situation. Apart from local partners and grassroots women, WE Act 1325 also engaged with BARMM government entities such as the BWC. Unfortunately, when the pandemic hit, WE Act 1325 could no longer engage with NGAs such as OPAPP as it had previously. However, it continued to network with other CSOs.

The niche of WE Act 1325 is women's participation and representation. It has a positive track record in policy advocacy and networking and has also been strong in preparing women leaders for political and economic participation, as in the case of Bangsamoro women. Because of this, WE Act 1325 is optimistic that Bangsamoro women will play a significant role in the Bangsamoro transition process. It has been hearing about possibilities from local partners: women's political parties, IW parties, and/or IP parties with women representatives. Despite the pandemic, no matter how challenging things have been, WE Act 1325 believes that it can still achieve its goals. Learning from experience, WE Act 1325 trusts the 'bottom-up' approach, as well as relying on local partners to see their advocacy through.

7.6.3.1 Agency

WE Act, as a network of partner organizations nationwide, has wide coverage in terms of its work. It has been fully supportive of the governance infrastructure and

processes in the Bangsamoro, particularly in terms of legislative advocacy. It also engaged in humanitarian assistance in collaboration with its local partners during the Marawi Siege. Many of its activities were onsite and physical.

With the lockdown, it had to respond to the needs of marginalized and vulnerable women, particularly food, which the women stated was their greatest need. Through its local partners, it was able to provide this. At the same time, it assisted local partners in the production of psychosocial materials about COVID-19.

One of its activities was a survey of the impact of COVID-19 on women from conflict-affected/vulnerable communities. The survey was conducted in collaboration with its local partners, namely the Group of Women Advocating for Peace in the Archdiocese (GWAPA) and PilumBayan, in two areas—Cagayan de Oro and Cotabato City—both chosen due to the presence of local partners.

According to the survey results on the impact of COVID-19, conflict-affected/vulnerable women mostly had difficulties in terms of their mobility, loss of income and livelihood, inability to spend time with other people, fear of being infected with COVID-19, and lack of access to basic essentials. In Cotabato City, the main impact was the loss of income and livelihood (WE Act 1325 2021).

From the survey results, WE Act and the local partners developed recommendations for the national and BARMM governments. These are:

- Continue to provide appropriate responses to the needs and rights of poor and marginalized women affected by the COVID-19 crisis, including equal access to humanitarian relief services and goods. This includes access to emergency subsidy funds, of which a significant number of women had been deprived;
- Provide seed capital funds for women and their families who were forced to close down their small businesses because of community quarantine/lockdown restrictions; and
- Upgrade basic health services at the *barangay* level and in public hospitals.

In this engagement, WE Act provided local partners with the opportunity to do their work more on their own. In planning such activities, they had more input since they were the ones that had connections on the ground. They would also be the ones to follow through and implement other data collection strategies to deepen the responses of the women respondents.

7.6.3.2 Resources

Resource realignment because of shifts in activities had to be carried out in the context of changed needs during the pandemic. At the onset of the COVID-19 pandemic, the FGDs added the dimension of food pack assistance for women and their families. This was done based on the understanding that affected people needed basic goods:

Food packs were the immediate need that was expressed. At the start of the lockdown, it was foreseen that informal workers' and daily wage earners' survival would be affected, as they lead a hand-to-mouth existence. [This group also included] widows, divorced women, single women, and senior women.

(Resource Person 3)

For WE Act, along with Oxfam WELD-Peace, an important facet of humanitarian and peacebuilding assistance is to address the needs of women in communities affected by conflict and complicated by the situation of COVID-19. For example, WE Act, along with GZOPI, also supported a special project of women making masks for distribution to their communities. Unfortunately, this assistance, which resulted in the women being able to generate some income from their products, was provided only during the beginning of the lockdown. As the COVID-19 situation worsened, such activities were discontinued.

7.6.3.3 *Achievements*

Local partners like WORMD, GWAPA, and Pilumbayan have deepened relations with WE Act. They have been capacitated and given the freedom to organize and mobilize constituents on their own. WORMD undertook many online meetings with WE Act that indirectly capacitated them on the use of technology and social media. According to WORMD, the pandemic did not serve as an obstacle in conducting activities in Indigenous communities. The organization itself tried to assess the situation of women, men, and children during the pandemic. According to WE Act 1325, in the survey undertaken by GWAPA and Pilumbayan,

The immediate impact of the crisis on the women, personally and their families, was the limited mobility, especially for those who had to leave home for work. Some experienced separation of families, lamenting that they could no longer visit relatives even if they were living in the same city. During Ramadhan, family gatherings to pray and break their fast together, at the end of the day, is an important ritual. A number also missed going to their mosque to worship. Not being able to observe this age-old ritual could make one lose their sense of balance.

(WE Act 1325 2021)

In a survey conducted through local partners, women respondents from Cagayan de Oro and Cotabato expressed the hope that NGAs could provide jobs and capital to offset the livelihoods that they lost. They also hope that the 'government will apply equality in access to basic services and the social amelioration program' (WE Act 1325 2021). From the perspective of WPS, the engagement of both local partners and grassroots community women in addressing the impact of COVID-19 on their lives exemplified participation. According to WE Act 1325:

In terms of the role of grassroots women, we try as much as possible to involve community-based organizations that are mainly partners of our local partners. For example, WORMD physically mobilized women for the Bangsamoro Women's Commission's 18-days Campaign on Violence Against Women. Physical presence is important, but since we ourselves are unable to do so, our local partners like WORMD and Pilumbayan do that themselves. In a way it is more positive because you can see the grassroots presence, the face of empowerment by WE Act 1325 are the local partners that mobilized them.

(Resource Person 3)

7.6.4 From Vertical to Horizontal Women's Empowerment in the Context of WPS: Women's Agency as Central to Human Security

First and foremost, all of the CSOs examined here maximized the resources that already existed. To a large extent, this has been a gain achieved through networking. During the pandemic lockdown, CSOs banded together and worked with one another. Second, there was a heavy reliance on local partners who were also members of a national network of CSOs. In this respect, prior working relationships, as well as being integrated into the network itself, made it easier for the national-level organizations to connect with grassroots organizations. At the same time, local partners were given greater decision-making roles in administering work in the field. The multi-level (global, regional, national, local) interactions taking place result in a web of connective action. In the case of national networks, engaging the State—both collaboratively and critically—involves interactions between agents. While the pandemic may have complicated the situation, CSOs did not give up and used various means to continue their work. For example,

the COVID-19 pandemic comes on top of existing challenges facing the implementation of the WPS agenda, including a global pushback against multilateral cooperation. But at the same time, the pandemic has demonstrated the prescience of this agenda, revealing the importance of gender analysis and gender-sensitive responses and the value of women's leadership, including that of local women peacebuilders, in times of crisis.

(Rahmaty and Jaghag 2020, 2)

And third, listening to realities on the ground has been an essential facet of the work of the CSOs. It is no longer about parachuting in and flying out but now includes the relationship between the national level and the local and grassroots levels. This has proven to be an important aspect of women's meaningful participation, and we are likely to see more of this before the pandemic ends.

Prior to the pandemic, GZOPI, Sulong, and WE Act engaged in the vertical empowerment of local partner organizations and their constituencies. This essentially means that empowerment was a top-down process, from the national CSOs

to local groups, with agency being passed down to the partner. This was done largely through capacity development and training. Local partners were also part of a network in which they engaged their constituents in various activities such as FGDs and consultations. As regards resources, these came from GZOPI and Sulong themselves. These efforts were deemed successful when the local partner and its constituencies were more capacitated and enabled to participate in the informal spaces of peacebuilding.

During the pandemic, there was a shift to horizontal empowerment. GZOPI, WE Act, and Sulong have remained in the picture, but the agency is now more focused on their local partners. For example, in the case of WORMD, it was able to organize and mobilize its constituencies to engage in peacebuilding on its own, while KMMKM was able to advance its livelihood programs as a group. Resources are passed down to local partners by GZOPI, WE Act, and Sulong. Achievement takes the form of the direct participation of local partners and their constituencies (See Figure 7.1).Figure

In the context of WPS, the micro-empowerment of women involves considering their participation. As seen in the case studies, the CSOs developed relationships with local partners prior to the pandemic. In this sense, GZOPI, WE Act, and Sulong have capacitated these women's groups through their various activities and engagements. By the time the pandemic hit, the local partners had sufficient agency of their own to carry on with their work. Their empowerment continues to grow as the national CSOs are now the ones relying on them. They have also been more active in decision-making, for example, in relation to how to shape consultation sessions and workshops. Additionally, they are able to respond immediately to the needs of their constituencies since they are the ones on the ground, and they are very much present in informal spaces of peacebuilding in the context of the pandemic. This is their experience of horizontal empowerment: They form a chain of decisions and actions despite the impartial presence of national CSOs.

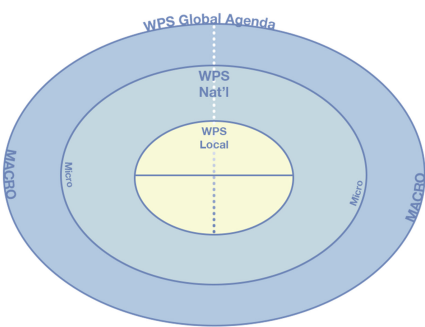


FIGURE 7.1 Macro to micro and vertical to horizontal empowerment. Source: author

7.7 Conclusion: Toward a Feminist Perspective of Human Security

WPS is a global agenda that seeks to advance women's human rights in peace and security. It is a macro-empowerment discourse because it links gender equality to peacebuilding and conflict transformation; it also pushes for the protection of women's human rights and the prevention of violence against women. This agenda is operationalized at the national and local levels. NAP WPS and even local action plans (LAP) on WPS have provided guidance for the micro-empowerment of women. In the case of the Philippines, its major pillars are participation and empowerment, protection and prevention, mainstreaming, and monitoring and evaluation.

This chapter investigated CSOs and the operationalization of WPS during a pandemic. It argued that the older practice of top-down empowerment—the national CSOs empowering local partners through capacity development—was no longer apt in pandemic circumstances. It then explained the occurrence of horizontal empowerment, whereby local partners were empowered to decide on their own how to mobilize, organize, and empower their grassroots women partners. The strategies employed involved training and reinforcing learning with communities, providing consultations coupled with humanitarian assistance, and paying attention to while also responding to the needs of the women. Without undermining the realities of women's vulnerability on the ground, it is also crucial to recognize their agency. In terms of the human security concept, this means realizing women's full potential as agents for peace. Empowerment is integral to this process as an opportunity for women to empower other women. This is the feminist idea of human security.

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8

AGING SOCIETY IN THAILAND DURING THE COVID-19 PANDEMIC

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8.1 Introduction

In 2001, when the proportion of elderly people reached 10% of the total population, Thailand officially became an aging society (see National Committee on the Elderly 2020). In 2022, the proportion of elderly people in the population increased to 20%, meaning that Thailand joined the ranks of aged societies (TGRI 2022).¹ Moreover, the country will likely become a super-aged society in 2031. Becoming an aging society threatens human security in terms of the risks of economic deterioration at the macro level. The growing financial burden and decreasing national competitiveness due to the aging of society have been critical concerns since the Eleventh National Economic and Development Plan (2012–2016) (NESDB 2011). Concerns over the aging of society have become increasingly significant in more recent development plans, including the 20-year National Strategy.² At the micro level, in terms of human security, older people are more vulnerable, especially in regard to their physical decline and increased economic and social insecurity. Additionally, COVID-19 and the need for rigorous epidemic control from the government in the first phase of the pandemic (in 2020) have amplified the socio-economic impacts on the country.

1 Although the statistic shows that Thailand became ‘aged society’ in 2022, in general, ‘aging society’ is still a key reference. Therefore, the chapter uses ‘aging society’ as a general term when referring aging society in Thailand.

2 Currently, Thailand is in the last period of its Twelfth National Economic and Social Development Plan (2017–2021) and is in the process of endorsing its Thirteenth Plan. After the 2017 coup d’état, the Prayuth government also began to draft and use the 20-year National Strategy as its national master plan.

Seen in this way, COVID-19 is not only a risk in itself. Government policies have become unintentional downside risks for the most vulnerable people, especially the poor, the disabled, and the elderly. The national lockdown and the declaration of a partial lockdown in 2021–2022 were significant hardships for more vulnerable people due to the decrease in income and reduced access to public services, especially public health services (see Jumnianpol et al. 2021).

Although there was significant financial support from Royal Thai Government (RTG), most support schemes were run on digital platforms that tended to exaggerate the digital divide between who could and could not access such services. After being criticized for digital inequality, the RTG acknowledged the issue and set up complementary channels for people who lacked digital access, particularly the aged, people with disabilities, and those without smart mobile phones. Instead of having to registering themselves on the official portal, the RTG organized mobile assistance to help them register at home. This took place during the second phase of financial assistance, titled *Rao Chana* or ‘We Win’ in 2021 (We Win Project 2021).

This chapter focuses on the impacts of COVID-19 on the aging society in Thailand. Apart from top-down protection and the unintentional downside risks arising from government measures, it is important to consider alternative ways of supporting bottom-up empowerment for Thailand’s aging society. This chapter bases its approach on the assumption that empowering the community to support elderly people can provide an alternative way of enhancing the elderly’s ability to mobilize their own and others’ security, which, in turn, indirectly empowers them. Consequently, the aging society is a key unit of analysis for this study. The community—especially in the villages and the neighborhoods—is the focal point for empowerment.

The second section of this chapter provides an analysis of the current situation of Thailand’s aging society: the policies and governance for the elderly as a form of top-down protection, especially during the COVID-19 period. The third section then reveals the human insecurity situation of older people during the COVID-19 period. Although many surveys were conducted during this period, the CUSRI-2021 survey, which had 2,106 ‘poor’ older participants aged 55 and above in June 2021, constitutes a valuable source of information (Jumnianpol et al. 2021). Box 8.1 provides an overview of the methodology and the basic findings of the study. The fourth section of this chapter discusses social innovation to support the aging society in dealing with the difficulties of COVID-19. The practices and lessons learned from the analysis provide an example of bottom-up empowerment, supporting this volume’s central theme. The final section offers a discussion of the key findings and the conclusions: The main question for consideration is how to implement bottom-up empowerment as a means of filling the top-down protection policy gaps.

BOX 8.1: METHODOLOGY AND PRIMARY FINDINGS FROM THE 2021-CUSRI SURVEY

The CUSRI survey used a proportionate quota sampling method based on the 2017 National Survey of the Situation of the Thai Older Persons (National Statistical Office, Ministry of Digital Economy and Society 2017). The selection criteria were designed by those aged 55 and above. Two qualities were used to set the income-selection criteria: people who were considered officially poor and had a state welfare card; and people without a state welfare card whose income was below the poverty line (THB 40,000 annually; equivalent to USD 1,117). The data was collected from samples in eight provinces representing each region's characteristics, both from the major and the secondary cities of each region (as shown in Table 8.1).

Besides assessing the impact of COVID-19 on the Thai older poor people in this report, it is worth noting that their character was very poor and vulnerable. Although all of the participants were poor by definition, the study also found that the average monthly income of the elderly poor was below the poverty line—THB 2160.45 (equivalent to USD 60.33). Among the poor, 72.3% had a monthly income below the poverty line, while 29.4% did not have a state welfare card. Interestingly, the proportion of older poor people whose income was lower than the poverty line in urban areas and Bangkok was higher than the proportion of such people in rural areas. In terms of work, two-thirds of the older poor (66%) were not working.

Regarding living arrangements, two-thirds (66.52%) were living with their children and/or family members who were still working. In comparison, one-third (33.48%) lived alone, lived only with a spouse, or lived with a dependent person, such as a child, an older person, or a patient (12.01, 16.10, and 5.37%, respectively). In the Thai context, it can be assumed that, although the elderly may live alone, if any children are living nearby, they are able to take care of their parents. However, the data showed that older people who did not have children living in the house or nearby comprised 22.22%. In conclusion, the survey outlined the human insecurity of the Thai elderly poor people across at least two dimensions—economic and social.

8.2 The Current Situation of Thailand's Aging Society

8.2.1 Thai Governance for Elderly Care

As mentioned in the previous section, the Royal Thai Government has recognized the implications of and been preparing for an aging society for some time. In fact,

TABLE 8.1 Data sampling from each area

	<i>Metropolitan</i>	<i>North</i>	<i>Central</i>	<i>Northeast</i>	<i>South</i>
Major City	Bangkok	Chiang Rai	Ayutthaya	Ubon Ratchathani	Songkhla
Secondary City		Lampang	Nakhon Sawan	Maha Sarakham	Pattani
Total Samplings	498	497	377	486	248

Source: Jumnianpol et al. (2021)

the first National Board on Elderly Persons drafted its first National Elderly Plan in 1982 (Limsakul 2009), and the subsequent Elderly Persons' Act was enacted in 2003.³ According to the law, the National Board of Elderly Persons designated the prime minister as the chairman, and it remains the principal governance body for elderly policies. In this body, the Department of Older Persons, under the Ministry of Social Development and Human Security, acts as a secretariat office. Besides the Elderly Persons' Act, there are several national plans that include a focus on the elderly, including Thailand's 20-Year National Strategy (2018–2037), the Twelfth National Economic and Social Development Plan, and the Second National Elderly Development Plan (2002–2021). While the law provides a legal framework for assuring the rights of older people, the other aforementioned plans include designated milestones and achievements in their areas of practice. One key concept in these plans is the promotion of 'active aging', both in the economic and social spheres (National Committee on the Elderly 2020). The policy direction appears to be beneficial, but it has not yet been fully realized in terms of its intended results.

The act guarantees older people's rights to protection, promotion, and support in terms of health, economic, and social services. The second revision in 2010 conformed to the 2010 constitution: Older persons with insufficient income would receive an Old Age Allowance (OAA) monthly, ranging from THB 600 to 800. In 2020, while 80.5% of the elderly received a small amount of OAA, about 10% were receiving a larger pension from the social security program (4.98%) and civil servants' retirement pension⁴ (6.74%) (TGRI 2021). In terms of medical and public health services, all Thai elderly can access free medical services under the

3 The Elderly Persons' Act B.E. 2546 (2003); the current version is the third revision, passed in 2017.

4 The pension amount received from the social security program is calculated based on the average salary of the insured and the length of time they are in the program. The insured can start receiving a pension at age 55, and generally, the minimum monthly amount is THB 760. For the civil servants' retirement pension, using a similar calculation, the pensioner can receive a pension from the age of 60 or after 25 years of work; from 2019, the minimum monthly amount starts at THB 10,000.

Universal Health Coverage Scheme, which started in 2001.⁵ In addition, a Long-term Care System (LTC) was started in 2006 under the National Health Security Office (NHSO). A community-based long-term care system provides necessary services through a multidisciplinary team, LTC manager, and caregivers⁶ for people requiring health support.

By design, the community-based LTC is an integrated system of primary health services, social services (the legal responsibility of the Ministry of Social Development and Human Security, MSDHS), and local administrative organizations. The LTC also oversees the Center for Quality of Life Development for the Elderly under the LTC as a coordinating unit. Unfortunately, the current service of LTC covers only 55.04% of applicants (NHSO 2022). Additionally, it is worth noting here the significant function of village health volunteers,⁷ with their role in health prevention and promotion in the community and the critical mechanism of community-based LTCs.

Besides health services, there are 2,049 Centers for Quality of Life Development and Occupational Promotion for the Elderly, supported by the National Elderly Fund and managed by the MSDHS along with the Local Administration Organizations. The centers were first established in 2014 to promote activities for the elderly, such as recreation and occupations, as well as to provide support for elderly clubs and volunteers for elderly care (Chiang Mai University and DOP 2015). In 2018, there were 14,490 volunteers for the elderly. However, based on the 2018 evaluation, Kumhom et al. (2018) found that, as the centers in some areas were designated solely by MSDHS offices without community participation, they were unable to provide appropriate services for the diverse conditions of the areas or deliver efficient services for the elderly.

Furthermore, it is worth noting that, in the Thai community, the government authorities commonly utilize volunteers to provide local implementation mechanisms, with many existing structures available for use by the community volunteers. Among other volunteers in the community, the village health volunteers are the only group that has been continually supported by the National Health

5 The current Thai health system is comprised of three sub-systems: civil servant welfare for government officers and pensioners, social security for the insured, and universal health coverage for ordinary people.

6 The LTC started in 2016 as a pilot project. The target groups are dependent older people and those with disabilities. In the pilot period, LTC funds provided an additional budget of THB 600 million to support 100,000 cases. Funds were allocated in two parts: In the first part, THB 5,000 was allocated for each case, managed by a 'ready' local health security fund. The second part was allocated to 1,000 PCUs, with THB 100,000 provided for each. This budget was used to provide additional services by a multidisciplinary team, LTC manager, and caregivers (Srithamrongsawat et al. 2018).

7 The village health volunteers are the villagers who work voluntarily for health prevention and promotion in return for only a small amount of compensation. Generally, the remuneration is THB 1,000 monthly per head, but in COVID times, the village health volunteers received an additional THB 500 as compensation for the higher risks involved in their work.

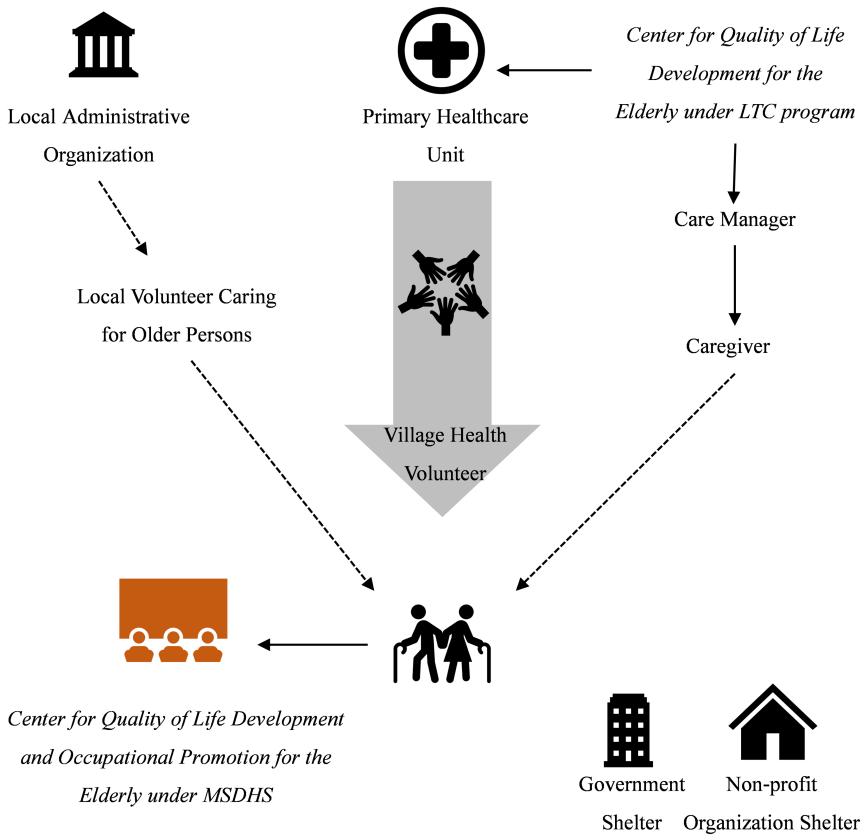


FIGURE 8.1 The current local mechanism for providing support to the elderly. Source: adapted from NHSO (2022)

Security Office (with compensation). With regular routine missions in health promotion, they are the strongest group, while some also function as volunteers for elderly care. Figure 8.1 shows the current structure of elderly care at the community level. However, this is only available in some communities.

Lastly, after the national lockdown for epidemic control from April to June 2020, Thailand suffered from a range of negative socio-economic impacts (see Jumnianpol et al. 2021). The Department of Local Administration, as part of the Ministry of Interior, set up two additional Local Volunteers Caring for Older Persons in every local administrative organization, regardless of the level of responsibility. The Department of Local Administration provided two reasons justifying the use of the National Loan for Socio-economic Impact Mitigation from COVID-19: economic stimulus and preparation for the aged society. Each local

administrative organization hired two local volunteers with a monthly stipend of THB 5,000 for one year for this project. The volunteers had to receive 70 hours of training in the caregiver curriculum and were assigned to care for four dependent older people in the area. Although the two additional volunteers would be unable to deliver efficient services to all of the dependent elderly, the project aimed at ensuring they could work as permanent caregivers in the long run (RTG 2021).

This section provided an overview of the government's efforts to protect and support older persons in terms of economic, health, and social support. In conclusion, the governmental approaches to providing support for the elderly demonstrate the government's reliance on top-down protection. These approaches remain insufficient in terms of providing adequate coverage for those who are in need. The approach to financial support seems to have relied on coverage, but whether this is adequate to ensure sufficiency might be questioned. Although health services are available universally, the LTC remains insufficiently covered. Finally, social support is less efficient when compared with other forms of support.

8.2.2 The Situation of the Thai Elderly

As of 2022, there are 12,116,199 people aged 60 and above in Thailand, representing 18.3% of the total population (DOP 2022b). In terms of the economic dimension, about half of seniors aged 60–69 are still productive (TGR 2021). However, the latest survey by CUSRI estimated that 44.38% of people aged above 55, or 7.25 million, are considered to have poor status and receive less than USD 100 in monthly income. Moreover, 49.4%, or 3.6 million, are experiencing extreme economic insecurity, receiving less than USD 1.90 in daily income. Even though the government has provided a State Welfare Card as a targeted cash-transfer system for the poor, 29.4% of the elderly poor have not accessed it. The survey also found that the average monthly income of the elderly poor is THB 2,160.45 monthly. About 21% of them have only a single income source, primarily from government support schemes (Jumnianpol et al. 2021) (see key survey results in Table 8.2).

Regarding health status, about 3% of the elderly are considered to have poor health status and are stuck at home or bedridden (NSO 2021). Among the elderly poor, at least 800,000 people are dependent. Interestingly, considering the pattern of living arrangements, only about 3% of the elderly have no reliable assistance in the household or nearby. Some live alone, with other elderly people, or with dependents. Jumnianpol et al. (2021) also found that 4.89% of the elderly poor faced difficulties in daily living due to their physical impairments (i.e., being dependent and bedridden) because they lived alone or with other elderly or dependent people or without any employed people in their households. Specifically, for the dependent group, only 45% of the bedridden were accessing home health care, i.e., health rehabilitation or physical therapy at home. Among the elderly poor, 83.62% identified the need for a caregiver, transportation for medical services, as well as food and goods delivery, as critical requirements.

TABLE 8.2 Percentage of the poor elderly, disseminated by the level of annual income

<i>Level of Poverty</i>	<i>%</i>
<i>Definition of the State Welfare Card Scheme (THB 40,000 annually)</i>	
< THB 40,000	88.9
THB 40,000 and above	11.1
<i>Extreme poverty by the World Bank definition (2021) (USD 1 daily, or THB 1,900 monthly)</i>	
Extreme poverty < USD 1.90 daily or THB 1,900 monthly	49.4
Poor > THB 1,900 monthly	50.6
<i>The Poverty Line by NESDC (2018) averages THB 2,710 monthly</i>	
Under poverty line	72.3
Above poverty line	27.2

Source: Jumnianpol et al. (2021)

In summary, using the lens of human security, the approach employed by Thai governance for elderly care is comprised of top-down protection for older persons as a vulnerable group. Although the RTG has invested enormous resources in elderly care, it cannot provide coverage for most older persons in need through state-led schemes.

8.3 Human Insecurity of Older People in the COVID-19 Period

As mentioned in the earlier report, COVID-19 has been a threat to Thai society since early 2020 (Jumnianpol et al. 2021). In the first year after the national lockdown in 2020, Thailand seemed to be succeeding in its pandemic control measures. After the lockdown was lifted in June 2020, the situation became dramatically worse. The second wave of infections exploded again in late 2020. This wave started from a cluster of migrant workers in the seafood market at Samut Sakhon in December and spread nationwide, with large clusters of cases emerging. The RTG decided on a partial lockdown in many areas, e.g., Samut Sakhon Province, from December 2020 to January 2021, with later zoning and lockdowns in the epidemic areas employing the highest level of control.

Figure 8.2 shows all waves of the COVID-19 epidemic in Thailand from 2020 to the present. The Delta wave in 2021 (the fourth wave) spread widely, with the highest number of newly infected. The peak occurred in August 2021, with more than 20,000 cases and 312 deaths daily (DDC 2022b).

The Center for COVID-19 Situation Administration (CCSA) and medical experts determined that all COVID-19 cases were strictly required to be treated in the hospital. Consequently, the large wave of Delta cases resulted in a collapse of the public health system. Many severely infected cases could not be hospitalized because of the lack of capacity within public health services, especially in Bangkok and other economic centers. The hospitals were reserved exclusively for the most vulnerable groups, including older persons and persons with chronic

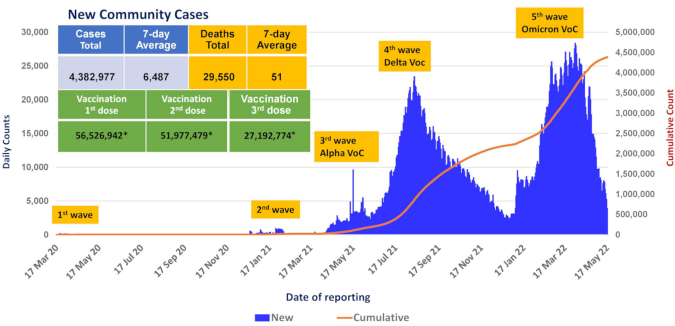


FIGURE 8.2 Thailand COVID-19 cases, deaths, and vaccination: chart showing cases per day as of May 18, 2022
Source: World Health Organization Thailand (2022)

diseases. The situation continued to deteriorate. Of the total 6,879 cases of infections at the end of 2020, 7.9% or 543 cases were older persons. The cumulative number of infected cases, most with the Delta variant, increased to 1,591,829 by the end of August 2021 (Worldometers 2022). The field hospitals set up by the government and an initiative introduced by the network of civil society organizations—home and community isolation (HI/CI)—were established in all areas to provide medical care and support.

Parallel to the speeding up of vaccinations by the RTG, in late 2021, another wave of COVID-19, the Omicron variant, arrived. Fortunately, although Omicron transmission was faster and more widespread than former waves, it was less severe or even asymptomatic. However, in the latest wave of Omicron, the number of new infections repeatedly exceeded the public health system’s capacity. With minor disease symptoms, the RTG has changed its policy on COVID-19 medication: Asymptomatic cases are encouraged to self-isolate at home. All hospital beds are reserved for vulnerable groups, including older people. The newly infected patients were not officially reported from February 2022 because the RTG is preparing to declare COVID-19 ‘endemic’ in the near future.

8.3.1 COVID-19 as a Direct and Indirect Threat to Health Security

8.3.1.1 COVID-19 as a Direct Threat to the Elderly

From the first infection in January 2020, the total cumulative cases as of May 23, 2022, exceeded 4.4 million cases (DDC 2022b), of which 3.86%, or 170,861 cases, were among people above the age of 60 (DOP 2022a). Among the 29,775 deaths, it was noted that more than 70%, or 21,237 cases, were older people (DDC 2022a).

These data demonstrate that COVID-19 threatened the physical health and lives of older people.

8.3.1.2 *The Prevention of COVID-19 Epidemic as an Indirect Obstacle to the Public Health Services*

Besides the health insecurity resulting from COVID-19, policies related to COVID-19 treatment have created obstacles for older people when accessing health services. During each wave of the epidemic, it became difficult for patients to access medical services. Hospitals tried to prevent unnecessary visitors and assist patients by delivering medication to their homes. In emergency and critical cases—especially older persons—when they were admitted to the hospital, most had to endure their treatment alone, without visits from family members. When older people or family members became infected with COVID-19, each had to be isolated for 14 days in a hospital, *hospital*,⁸ or field hospital. After admission, the only way to communicate with family members was by phone or video call, which was not comfortable or sufficient to meet the needs of the elderly patients. In this sense, COVID-19 prevention unintentionally became another threat to the elderly.

8.3.2 *Socio-Economic Impacts of COVID-19 on the Elderly Poor: Results from the 2021 Survey*

In 2021, Jumnianpol et al. (2021) showed the significant socio-economic impacts of COVID-19 on Thailand's society based on six initial reports, including four studies on the economic impacts. The World Bank (2020) and Oxford Policy Management and United Nations Thailand (2020) revealed the macroeconomic impact. Lekfuangfu et al. (2020) predicted a micro impact on labor in the supply chain. Furthermore, the Senate Standing Committee on Labour and CU COLLAR (2021) reported the effects on different types of labor: formal workers, informal workers, migrant workers, and vulnerable labor (aged and disabled labor).

Regarding food security, the Research Unit on Contemporary Peasant Studies et al. (2020) explored the differences between rural and urban areas during the national lockdown. Lertnitas and Jitsuchon (2020) identified the most vulnerable groups: households with children, the elderly, the disabled, and people with chronic diseases. Specifically, with older people as a focal point of the chapter, UNFPA and CPS (2020) focused on the impacts on the elderly in terms of lower

8 The *hospital* was a temporary measure designed to enhance the capacity of the public health system in coping with the number of COVID-19 cases. This policy allowed the hospital to increase the space for more COVID-19 patients by reserving a hotel room for non-critical cases. In the *hospital*, the patient had to be quarantined for 14 days under the control of medical staff. During the Delta wave, *hospitals* also proved insufficient, and following this, field hospitals were set up in every area.

income, physical/mental health, and social insecurity due to social distancing for COVID-19 prevention.

Most of these reports were based on 2020 data. However, in 2021, another survey was conducted by CUSRI on the elderly poor as one of the most vulnerable groups (Jumnianpol et al. 2021). The survey demonstrated the one-year impact following the fourth wave of the COVID-19 epidemic. There have been three significant dimensions of COVID-19's impacts on the elderly: economic, social, and health insecurity.

8.3.2.1 *Economic Insecurity*

Regarding economic insecurity, 42% of aged workers have suffered from a decrease in their income because they faced greater limitations on working during the partial lockdown. Additional effects resulted from lower family remittances. For the poorest among the elderly (i.e., those who depended solely on the government welfare scheme), COVID-19 did not significantly affect their income; on the contrary, they benefited from the additional financial support provided by the government.⁹

It must be noted again that, to apply for the first scheme of government financial aid, *Rao Mai Ting Gan* ['No One Left Behind'] of THB 15,000 per head in 2020, as noted above, people had to register and apply via electronic devices. Therefore, accessing these schemes was more difficult for the (poor) elderly. After a lengthy period of criticism, the second round of financial aid—the *Rao Chana* ('We Win') scheme offering THB 7,000 per head in 2021—was adjusted to reduce the digital divide.

8.3.2.2 *Social Insecurity*

Regarding the *social impacts*, social distancing resulted in reduced family contact; 24.2% of the elderly poor reported a lower frequency of family visits, and 17% had less communication with their family outside the household. The study showed that after one year of living with COVID-19, 36.47% of the elderly poor expressed lower life satisfaction. This psychological issue was higher in the Bangkok Metropolitan area (44.8%) and urban areas (39.84%) than in other areas

9 During the COVID-19 period, the RTG spent most of a national loan (THB 1.5 trillion) on economic remedies and stimulus. For the first THB 1 billion loan especially, 70% of the budget, or THB 700 billion, was used to provide compensation to various population groups, while another 14.5% was used for economic stimulus in the *Go Half* and tourist promotion scheme (Royal Thai Government 2021a). Of this amount, THB 61,018 million was targeted at the people who relied on the state welfare card: THB 500 in the first half of 2021 and THB 200 in the second half of 2021. In 2021, the Ministry of Public Finance concluded that state welfare cardholders should receive additional support of more than THB 11,600/11,800 per head (RTG 2021b). Besides this amount, the elderly poor also received additional money through the OAA.

of the country, a finding that was also consistent with the 2020 survey by UNFPA and CPS (2020). This result confirmed that the impact of COVID-19 in urban areas was worse than in rural areas. Among the various social and economic reasons, the higher levels of solitude in Bangkok and urban areas could explain this lower feeling of life satisfaction. The data showed that 72.69% of the elderly poor in Bangkok did not participate in any social groups, while non-participation in social groups in other urban and rural areas was significantly lower. Moreover, in terms of economic status, 33.94% of the Bangkok elderly poor had an income of less than THB 1000 monthly, while this was 28.86% and 27.01% in urban and rural areas. Of the respondents in Bangkok and in urban areas, respectively, 38.15% and 38.15% also reported having insufficient income during 2020–2021.

8.3.2.3 Failure of Public Health Services

Besides these quantitative data, which were collected during the peak of the Delta epidemic, difficulties in accessing medical services were a critical problem for those who were infected. Another hardship resulted from the fear of being stigmatized by others.

At that time, the mass media frequently reported that some of those infected had been abandoned at home and some even died on the streets in the center of Bangkok (Online Reporters 2021). The Rural Doctor Society (RDS)¹⁰ intervention to provide active mobile screening for the Bangkok community in July and August 2021 (Bangprapa and Wipatayotin 2021) can be seen as evidence of the city's health system failure.

If poor, lonely, elderly people became infected with COVID-19, surviving without neighbors or community support could be much more challenging. For the elderly poor who live with their family members in tiny houses, it is impossible to quarantine at home when one family member is infected. Consequently, the elderly poor person would most likely be unable to protect themselves from other infected family members.

In conclusion, COVID-19 threatened human security across multiple dimensions and challenged the ability of the aging country to cope with catastrophes. For Thai society, the two-year experience of COVID-19 was a consequence of the weak and insufficient preparedness of the country to become a super-aged society. It also demonstrated the failure of ineffective state-centric and top-down protection policies, which intensified hardship for the people. Satha-Anand (2020) argued that the COVID-19 crisis revealed the *authoritarian moment* in state and

10 The Rural Doctor Society is an association of medical staff who work or previously worked in rural or remote areas. Apart from their routine responsibilities, they have often criticized MoPH policies. For example, the latest critique related to unreported new infected cases in terms of controlling case numbers rather than disease control.

society governance. In light of this, the RTG claimed that COVID-19 was a crisis and utilized the Emergency Decree¹¹ to centralize its power.

With the military and medical professionals as dominant policymakers (Jumnianpol et al. 2021), the RTG administration could be seen as fulfilling the role of a *military and medical authoritarian*. For example, during the Delta wave, when a cluster of new infections was found, the government authorities ordered state officers to lock down the area, especially the markets and temporary camps of construction workers. In that period, many infected cases could not be admitted to the hospital because COVID-19 had to be confirmed by RT-PCR (Real-Time Polymerase Chain Reaction) before being admitted to the hospital, but there were insufficient numbers of RT-PCR kits available.

This style of governance has provided few opportunities for other stakeholders to have a voice in policy decisions. Thus, beyond the aforementioned negative impacts, there were many conflicts in every part of policy and action—from the choice of vaccines,¹² the antigen test kits (ATK),¹³ and the medical approach to coping with COVID-19 patients. The following section will discuss the alternatives and initiatives from civil society that later resulted in policy adjustments.

8.4 Social Initiative Supporting the Aging Society in Dealing with COVID-19

As the above sections have shown, state policy on COVID-19 unintentionally threatened human security, and top-down protection was insufficient to cope with the COVID-19 situation. However, there was also bottom-up protection to support society in its efforts to survive the pandemic. To elaborate on the social initiatives undertaken during the COVID-19 period, the authors present two significant initiatives: an initiative at the community and cross-community level on the one

11 The RTG used the Emergency Decree to control both the epidemic and political movements (see Jumnianpol et al. 2021). At the time of writing, two years after the decree was issued in March 2020, the RTG has still not removed it. This is despite a movement by many actors, including medical staff, calling for a return to ordinary laws, such as the Communicable Disease Act, instead.

12 The type of vaccine became problematic because the RTG, through the CCSA, insisted on using a vaccine from China before it had been certified by the WHO. Later, the RTG accepted mRNA as an alternative vaccine to be distributed by private hospitals. There was also a problem of delays in the processing of vaccine imports and the dissemination of the vaccine.

13 From the beginning of the epidemic, the MoPH determined that RT-PCR would be the only method used for COVID-19 screening. When the Delta variant spread rapidly, causing severe illness, many people could not access the screening and treatment because of the limited resources available. Demand for the use of ATKs as a basic screening method grew, but the CCSA did not accept their use until it was clear that the public health system was failing to keep up. The MoPH accepted the ATK as an initial test from July 2021 (Prachachat Thurakit Online 2021). Following this decision, Thai people could purchase lower-priced ATKs from general pharmacies and convenience stores.

hand, and the Home and Community Isolation organized by the civil society network on the other.

8.4.1 Initiatives at the Community and Cross-community Level

At the *community level*, the ‘pantry of sharing’ in the neighborhood (as mentioned in Jumnianpol et al. 2021) helped the most vulnerable members of the community to access food and other necessary goods during the lockdowns. At the *cross-community level*, the food exchanges between Karen Hill Tribes and the Moken from the south are a strong example of bottom-up protection among people. *Khao Laeg Pla* (exchange rice for fish) was a project initiated by the ChumchonThai Foundation in April 2020 after the national lockdown began. There was a collaboration between civil society organizations with Indigenous communities: the Karen from Chiang Mai, the Moken from Phuket, and the Northeastern Peasant Network. The project focused on mitigating the economic impact of losing community employment in tourist cities like Phuket due to the lockdowns. While peasants from other areas collected and sent the rice, the Phuket fishermen and other groups processed and sent their seafood products in return. Without a profit orientation, the project was able to provide food and economic security for the Indigenous and marginalized communities in Phuket and surrounding areas (Krungthep Thurakit Online 2020). These two initiatives supported food security for the people and strengthened social relationships within and across the region.

8.4.2 The Home and Community Isolation as an Initiative beyond Community

During the Delta wave, there was another initiative in the civil society network undertaken to organize community and home isolation as an alternative means of delivering medical support. Before the Delta wave became widespread, the CCSA and the Ministry of Public Health (MoPH) insisted that the hospitals, *hospitals*, and field hospitals under the control of the medical staff were the only way to manage COVID-19. However, the number of infected cases at that time exceeded the capacity of the public health system. Moreover, many patients could not be admitted for other reasons, as in the case of a single parent who needs to take care of their child or a young adult who has to take care of an elderly family member at home.

To address this problem, the Com COVID-19 (Community-led COVID-19 Support Workforce) proposed ‘home and community isolation’ (HI/CI) as an alternative model. This civil society network is comprised of the Institute of HIV Research and Innovation (IHRI), non-profit organizations, HIV/AIDS groups, the urban poor, and the Health Insurance Lovers network. The proposed model focused on home- and community-based healthcare. Once infected with COVID, a non-critical patient could be quarantined at home and wait for medical supplies

from the hospital to be delivered to their home address. Community isolation (CI) in the same neighborhood became a solution for those who could not be quarantined at home. CI was organized so that isolation sites were located inside the community, for example, at a temple, mosque, or school. When a patient was admitted to CI, they could distance themselves from others in their home while remaining in a nearby area. Throughout quarantine, the patient was under online monitoring by medical staff and received everything necessary to remain healthy, including meals from the hospital or community. Besides medical coordination, a factor in the success of HI/CI was the cooperation of the volunteers in the community.

Initially, Com-COVID-19 organized the home/community isolation by coordinating with private hospitals and organized communities (IHRI 2022; Aramnet 2021). Once NHSO, as the health insurance manager, accepted HI/CI as a model under the Universal Health Coverage Scheme, it could change the national pattern of COVID-19 treatment and enhance the capacity of the public health service system of the country.

After 23 pilot communities with 1,200 patients demonstrated that the model could be used successfully in coping with COVID-19 (Bangprapa 2021), the model was promoted by the MoPH and the CCSA nationwide. The Ministry of Interior ordered all provinces and districts, including local administrative organizations, to set up CI operations in all areas. The NHSO also provided a budget for CI, resulting in medical support from the hospital. Later, during the Omicron wave, CI/HI became the central model for home- and community-based medical care for non-critical and asymptomatic cases.

Besides NHSO support in the final stage, the successful conditions for implementing the HI/CI model were the strength and cooperation of the community and CSOs. CI would not succeed without vital community volunteers, including the village health volunteers. The community volunteers had a significant role in primary screening, follow-up, patient assessment, primary care, and three meals daily.

The lessons learned from the Delta wave and HI/CI model demonstrate the failures of the top-down and centralized model for COVID-19 on the one hand. On the other, these lessons show that, when the community is sufficiently empowered, it has the ability to take care of its members. In other words, they indicate new ways of synchronizing top-down and bottom-up forces to survive COVID-19.

As of August 2022, the COVID-19 crisis is not over. With most people only experiencing mild symptoms of Omicron, people are becoming better adjusted to living with it. The MoPH has also begun preparations to classify COVID-19 as an endemic disease from July 2022; the RTG is re-normalizing the country, even while it remains under Emergency Decree. Nobody knows what will happen next. Whether or not there will be a new wave of a mutated virus, the COVID-19 experience could help society to navigate and cope with the future risks associated with becoming a super-aged society. The next part of this chapter will discuss

the framing of the bottom-up empowerment in an aging society, who should be empowered, and how empowerment can be carried out.

8.5 Bottom-up Empowerment in an Aged Society

In this final section, the authors will synthesize Thailand's aging society within the context of COVID-19 and the human security concept. The central question concerns what a bottom-up empowerment approach would do to strengthen the human security of an aging society, for whom, and how?

8.5.1 *COVID-19 as a Downside Risk and the Gap of Top-Down Protection*

Human security is defined as a state in which humans are free from want and fear and can live with dignity. From the COVID-19 crisis, it can be concluded that both COVID-19 and its side effects have threatened human security across multiple dimensions, especially in an aging society such as Thailand. Aging societies are particularly vulnerable because of the ever-increasing proportion of the aged population. In terms of physical limitations, the elderly's health is gradually declining, increasing the risk of illness and dependence. Economically, even though some elderly people still work, their incomes are lower because they cannot participate fully in the labor market. Some have no income and rely on their children or require financial support from the government. Regarding social security, the urban elderly, especially the elderly poor, do not receive enough social support from family members or neighbors. They tend to feel lonelier than those residing in rural areas.

At the national level, with lower productivity, the financial burdens of an aging society are growing rapidly. The RTG has been preparing for an aged society for more than a decade, and consequently, the health service seems better and more advanced than other services. In terms of social services, however, even though there have been attempts to set up a large number of elderly service centers, elderly clubs, elderly schools, and elderly volunteers in the community,¹⁴ the results seem to have been less effective because of the lower levels of investment. A major proportion of the budget was allocated to OAA, with support provided on an individual basis. In addition, the overall budget for the elderly appears as a small budget item in the Department of Older Persons and the Elderly Fund.¹⁵

14 In the report, the Situation of the Thai Elderly, TGRI (2021) noted that there were 1,589 Centers for Quality of Life Development and Occupational Promotion for the Elderly under MSDHS, 2,049 elderly schools, and 29,276 elderly clubs in 2020.

15 The Elderly Fund was established in 2007. According to the Regulations of the National Committee on the Elderly (RTG 2005), the objectives of the fund are for the protection, promotion, and support of the elderly. The funds were designated for (1) supporting programs and

According to the Regulations of the National Committee on the Elderly (RTG 2005), between 2007 and 2021, the fund spent THB 2,858 million (DOP 2021), or an average of THB 190 million annually, while the fund received less than THB 100 million annually from the government budget. The lower investment has resulted in a discontinuity of financial and technical (knowledge) support, both for the centers and volunteers for elderly care. An imbalance between income and expenditure is an indicator of the fund's future instability. Under the pressure of an aged society, if the RTG is unable to find other sources of funds to support the elderly, it is likely to become a problem in the near future. Moreover, it should be pointed out that most government support schemes are designed to 'assist' individually, not to empower the group of the elderly collectively, both in everyday life and in COVID-19 situations.

8.5.2 *The Community-based Supportive Services as Dual Track of Bottom-up Empowerment*

Although the COVID-19 crisis has become a trigger, amplifying the vulnerability of an aging society, some successful experiences of and strengths associated with COVID-19 management could be applied to the aged society in Thailand. In the example cases provided here, the experience of CI and the decisive role of volunteers, especially village health volunteers, are meaningful. During the crisis, with sufficient support, the community was able to set up ad hoc CIs to take care of its members. Therefore, if the community—especially volunteers in the village—is well supported and sufficiently organized, it should be able to deliver social services for independent and dependent older people in the area in the long run.

Conceptually, 'bottom-up empowerment' means strengthening a community's *ability to act on its behalf and on behalf of others* (Commission on Human Security 2003, 11). In this sense, the authors argued that empowering communities to organize *community-based supportive services for the elderly* is an alternative way of strengthening the aging society at the local level. This term refers to the village or the people living in the same neighborhood. In this case, *community-based supportive services for the elderly* could contribute to filling the gaps in elderly support at the local level.

Although there is the Center for Quality of Life Development and Occupational Promotion for the Elderly under the MSDHS and the Center for Quality of Life Development for the Elderly under LTC in some areas, their coverage is insufficient

projects for the self-development of the elderly, (2) subsidizing the elderly who are in danger, being abused, or in need, (3) loans for the elderly for employment promotion, (4) subsidizing organizations who provide legal consultations for the elderly, and (5) fund management expenses. However, based on the report by DOP (2021), from 2007 to 2021, the highest portion of the fund was allocated to elderly loans (91.30%): 91.06% for individuals and 0.24% for groups. Support for projects to promote the self-development of the elderly comprised only 8.70% of the total funds.

and requires significantly more participation by the elderly themselves. The existing elderly clubs should be incorporated into community-based services, and activities other than recreation should be promoted; employment promotion for older people should also be highlighted. Though there were some existing social services for the older people in the community, these were not supported continuously and did not provide sufficient coverage. Moreover, the model required greater integration between health and social service missions and the significant participation of the elderly and community volunteers. Apart from being beneficiaries, older people should participate in the organizing committees or become a voice for themselves and their peers. In this case, the Local Volunteers Caring for Older Persons, supported by national loans, could function as the focal staff in collaborating with the village health volunteers and other volunteers who undertake support activities for older persons.

The positive experience of the empowered community in managing community isolation during COVID-19 signified the community's capacity to take care of its members. However, the community had limited resources. If the government had provided sufficient financial support and empowerment, the community could have developed and delivered additional types of elderly services, such as occupational promotion, recreational activities, daycare centers, food and goods delivery for dependents, and personal care for the bedridden at home. Considering bottom-up empowerment, this approach comprises dual-track empowerment for an aging society at the community level, empowering the elderly as well as developing the community's capacity to protect its senior people. It can directly lead to a greater ability among older people to act on their own behalf and better their quality of life. In the same vein, it also strengthens the community's capacity for self-administration. Hence, organizing community elderly services can provide an alternative way of empowering the community and the elderly, freeing them from physical want, reducing psychological fear, and promoting lives of (increased) dignity.

8.5.3 Human Security by Coordinating Top-down Protection and Bottom-up Empowerment

Throughout this chapter, the main argument has been that the COVID-19 situation in Thailand's aging society revealed the inadequacy of protection-oriented policies, leading to downside risks for vulnerable people—especially the elderly. Simultaneously, initiated by civil society, the empowered community played a significant role in working toward a resolution, particularly through initiatives such as community isolation. Subsequently, the government accepted the CI approach as an ad hoc national model during COVID-19. The authors have proposed that, instead of temporary community empowerment for COVID-19, the lessons learned could be promoted as a permanent community-based service model for the elderly. In this way, top-down protection policies could be adjusted to include

additional strengthening and empowerment approaches for the community. The broader community could better protect older people with greater empowerment in terms of financial support, capacity building, and institutionalization by the government. The elderly could also increase their abilities and their freedom to act on their own behalf. In these ways, human security can be achieved by synchronizing protection and empowerment (United Nations Trust Fund for Human Security 2018) and articulating top-down power and bottom-up capability.

Acknowledgments

This chapter benefited from a research project supported by the National Research Council of Thailand (NRCT), the spearheaded plan for the aging society. TGRl managed the program. The authors would like to express our sincere gratitude to both organizations.

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9

COVID-19 AND BARMM

The Nested Process of Protection and Empowerment

Sachiko Ishikawa

9.1 The COVID-19 Pandemic as a Challenge and Opportunity for BARMM

The conflict in Mindanao was a protracted struggle over self-determination and ancestral domains, which began in the late 1960s and continued for more than four decades. The Moro Islamic Liberation Front (MILF), a splinter group from the Moro National Liberation Front (MNLF), continued its resistance against the Philippine government, trying to pursue independence as a ‘Bangsamoro quest’ (Mastura 2012). Having outlasted six presidential administrations, which applied different policies and strategies in relation to the Moro rebel group, in March 2014, the MILF finally concluded a peace agreement, called the Comprehensive Agreement on Bangsamoro (CAB), with the administration of Benigno Aquino Jr. Since then, a new struggle has begun to establish a Bangsamoro Autonomous Region in Muslim Mindanao (BARMM). The Bangsamoro Organic Law (BOL), legally establishing the BARMM, was finally signed by President Duterte on July 27, 2018. In February 2019, the territory of BARMM was confirmed by two rounds of plebiscites and the Bangsamoro Transition Authority (BTA) was formed. The BTA holds executive and legislative authority over the region until the official Bangsamoro government takes power, which is scheduled to take place in 2025.¹ As shown in Figure 9.1, the BARMM originally consisted of five provinces and three cities.²

1 Although Bangsamoro parliamentary elections were originally scheduled for 2022, they were postponed until 2025 due to the COVID-19 pandemic.

2 The five provinces of the BARMM are Lanao del Sur, Maguindanao, Basilan (except for Isabela City), Sulu, and Tawi-Tawi. The three cities are Cotabato, Lamitan, and Marawi. Following

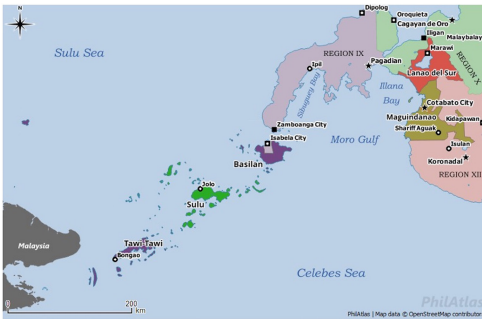


FIGURE 9.1 Bangsamoro Region in Mindanao, www.philatlas.com/mindanao/barmm.html

The COVID-19 pandemic—with its joint medical and economic burdens—added to the challenges that the BTA faced as it searched for a way to establish a parliamentary system in the Philippines. However, it has gradually become apparent that in 2020–2021, the pandemic also compelled the BTA, local government units (LGUs),³ and civil society organizations (CSOs)⁴ to work together closely to develop a response to the pandemic in the BARMM.

As of January 10, 2022, there were 3,026,473 confirmed cases of COVID-19 in the Philippines, with 52,511 deaths (National Disaster Risk Reduction and Management Council 2022). Across the country, approximately 2.6% of the entire population had been infected. The national statistics indicate that the number of confirmed cases of COVID-19 in the BARMM was fairly minimal, at 25,827 cases (Department of Health 2022), or just 0.5 % of the total population in the territory. It seems clear from the provided statistics that the rate of infection as a proportion of the total population is much lower in the BARMM areas compared to the rest of the country. It seems likely that this is partly due to the location of the BARMM—away from populated urban areas—and partly because of the strict quarantine measures, which had a negative impact on the region.

Although the rate of infection among the total population was lower in the BARMM, all residents were affected by the pandemic regardless of their profession. More precisely, the impacts were due to the Enhanced Community

a plebiscite on September 18, 2022, however, Maguindanao was split into two provinces: Maguindanao del Norte and Maguindanao del Sur (Mindanews 2022).

3 LGUs refer to provincial, municipal, and *barangay* levels of political units belonging to the national government.

4 CSOs can be defined, according to UN Guiding Principles, as non-state, not-for-profit, voluntary entities formed by people in the social sphere that are separate from the State and the market.

Quarantine (ECQ),⁵ which was equivalent to a ‘total lockdown’ (Bajo 2020). The ECQ was implemented during the initial stage of the pandemic in 2020 (JICA and Ministry of the Interior and Local Government of BARMM 2020). According to a survey conducted by the Japan International Cooperation Agency (JICA) together with the Ministry of Interior and Local Government of BARMM, 90% of interviewees claimed that they had experienced limited mobility due to the suspension of public transport, while 88% observed a surge in the price of items necessary to meet basic needs due to the insufficient supply of goods. The suspension of public transport made it difficult for people to bring their goods and services to markets. Overall, 81% claimed that their household income at the time was insufficient to cover their needs, while this was true of 51% of interviewees prior to the pandemic (JICA and MILG-BARMM 2020). It has been confirmed from the results of interviews conducted in the BARMM between March and April 2022 that, for local residents, the resulting economic depression brought greater downside risks than the pandemic in a medical sense.

This chapter aims to illustrate the empowerment strategy in the BARMM, which enabled the local population to empower themselves through their responses to the COVID-19 pandemic during the special period of power transition between the Duterte Administration and the BTA. The chapter focuses on the middle phase of the pandemic period—from March 2020 to March 2022. A nested model of conflict (Dugan 1996), depicted in Figure 9.2 (A), helped to build an understanding of the processes and conditions for Bangsamoro people’s empowerment in regard to the COVID-19 pandemic within the context of Philippine governance. This can be further developed into the nested model shown in Figure 9.2 (B). The concept of the nested model of responses to the COVID-19 pandemic will be further articulated in the following section.

This chapter, in accordance with the nested model of responses to the COVID-19 pandemic depicted in Figure 9.2(B), examines the following four questions to illustrate the empowerment strategy in the BARMM in relation to the COVID-19 pandemic.

- (1) Vertical institutional relations: How did the empowerment strategy work between the system level (governance of the Philippines) and the sub-system level (political regimes and civil society organizations under the central government), especially the BTA?

5 ECQ was the strictest measure of community quarantine and included the following measures: 1) strict home quarantine; 2) limitations on movement when accessing basic necessities; 3) regulations on the provision for food and essential health services; 4) prohibition of mass gatherings; and 5) suspension of public transport.

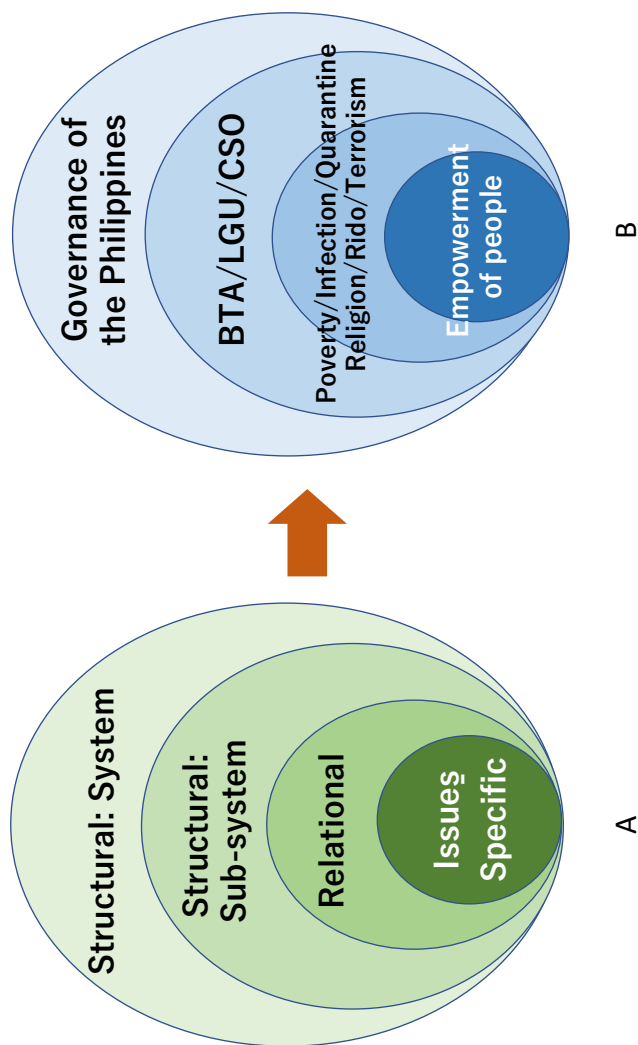


FIGURE 9.2 (A) A nested model of conflict (B) A nested model of responses to the COVID-19 pandemic

- (2) Horizontal institutional relations: What was the working relationship among the sub-system actors, such as the BTA, LGUs, and CSOs, and to what extent did it enhance or diminish the empowerment strategy at this level?
- (3) Impact in the field: How has the sub-system contributed to addressing empowerment of people by dealing with relational problems?
- (4) Have people in the BARMM empowered themselves with local ownership?

The primary method used to conduct this research was interviews to collect the perspectives of local people in the BARMM. Because strict travel restrictions were imposed during the research period for this chapter due to the COVID-19 pandemic, the author was unable to conduct local surveys by herself. Instead, the author mobilized two research assistants, who were Moro field coordinators working for a JICA expert, the advisor to the Chief Minister of the BTA. Using questionnaires provided by the author, they interviewed a total of 41 local actors, including ten BTA officials (BTA sources), 14 LGU workers (LGU sources), nine international organizations (OI sources), four civil society organizations (CSO sources), two donor agencies (DA sources), one local resident (LR source), and one police officer (PO source) in the BARMM. The author convened regular online meetings with the research assistants to cross-check the data that they collected.

Section 9.1 has already provided an introduction, illustrating the general impact of COVID-19 on the BARMM, followed by an overview of the objectives of this chapter and the methods used. Section 9.2 articulates the analytical framework for the chapter. Upon clarification of the nested model of responses to the COVID-19 pandemic, the conditions for the empowerment strategy for sub-system actors (BTA, LGUs, and CSOs) within the system (governance of the Philippines) to promote the empowerment of local people will be illustrated. Section 9.3 examines actual working relationships between the system and the sub-system, especially with regard to the Duterte Administration and the BTA, in the midst of the COVID-19 pandemic. Section 9.4 looks at the institutional relationships in the BARMM between the BTA and LGUs and the characteristics of CSOs. These relationships are prerequisites for collaboration among the sub-system actors. Section 9.5 examines the empowerment strategy of the sub-system in dealing with problems resulting from contributory or influencing issues. The final section provides some conclusions and discusses the limitations of this research.

9.2 Empowerment and a Nested Model for Responses: Analytical Framework

9.2.1 Definitions of Empowerment

In general, human security is deliberately protective (Commission on Human Security 2003). Protection strategies, set up by states and other external actors, shield people from threats that they are unable to overcome on their own. At the

other end of the human security continuum, empowerment refers broadly to the expansion of freedom of choice and action to shape one's life and implies control over resources and decisions (Narayan 2002). Citizen empowerment reflects the agency of everyday people to ensure their own security (Wall, Aulin, and Vogelaar 2014). More precisely, empowerment denotes people's ability to act on their own behalf and on behalf of others, enabling people to develop resilience to difficult conditions (Commission on Human Security 2003). Kabeer points out that empowerment entails a process of change (Kabeer 1999). It is inescapably bound up with the condition of disempowerment and refers to the processes by which those who have been denied the ability to make choices have acquired such an ability (Kabeer 1999).

Case studies (Hernandez et al. 2018, 280) have demonstrated that, when a crisis emerges, emergent protection measures are necessary for vulnerable and disempowered communities. Before protection reaches its high point, however, the process of empowerment based on local ownership is expected to become resurgent, and protective agencies should not hinder but try to promote the process. In the case of the BARMM, immediate protection measures were taken by the Philippine government, the BTA, and LGUs when the COVID-19 pandemic hit the autonomous region in 2020. After a long period of community quarantine—and even during the community quarantine—it was expected that this would lead to the germination of empowerment of people through local ownership. This chapter thus aims to clarify an empowerment strategy in the BARMM to provide people with an environment that could be a prerequisite for empowerment, even if it is difficult to assess the empowerment of people themselves due to the lack of field surveys.

9.2.2 *A Nested Model for Responses to the COVID-19 Pandemic*

The various levels of responses to the COVID-19 pandemic in the BARMM can be illustrated by employing the nested model of conflict of Marie Dugan (Dugan 1996). The idea of Dugan's original nested model (Figure 9.2 (A)) was to help understand both the narrower and broader aspects of conflict resolution and peacebuilding. Lederach (Lederach 1999) further conceptualized the nested model as a set of lenses with which to focus on the structural components of an analytical framework for conflict transformation.

The following central ideas of the original nested model of conflict can be adapted for use in the case of responding to the COVID-19 pandemic in the BARMM. Firstly, an *issue* in Dugan's original model can be modified to be a goal (empowerment of people) and its achievement should be considered within relationships (local people vs BTA, LGUs, and CSOs). In a conflict setting, Dugan (Dugan 1996) argues that the issues themselves are not the source of conflict, but relational problems are. This indicates that issues or goals in this case cannot be achieved without considering relational problems. The case of empowerment of people in regard to the COVID-19 pandemic as an issue is embedded with

relational problems, along with other issues such as poverty, COVID-19 infection, strict quarantine measures imposed by the Duterte Administration, the Islamic religion, *rido* (clan feuds), and the fear of terrorism. Secondly, Dugan (Dugan 1996) added a third intermediate level called a sub-system to address both the systemic concerns and the problematic issues and relationships. As the sub-system is a middle-range locus of activity that connects the other levels in the system (Lederach 1999), it is the most important level in the nested model to mitigate or resolve key issues. In the context of governance of the Philippines as the overarching system, BTA, LGUs, and CSOs can fall into the category of a sub-system. Although LGUs in the bureaucratic system in the Philippines belong to the national government and not directly to the BTA, the BTA and LGUs reached out to each other during the pandemic (CSO Source #1). The BTA, in particular, plays a role in connecting with the Duterte Administration as part of the system that decides overall policies and guidelines for combatting the pandemic. It also helps in connecting to other actors within the sub-system level by designing adaptable approaches to the policies and guidelines. This chapter, therefore, employs the nested model of responses to the COVID-19 pandemic (Figure 9.2(B)) as its main analytical framework.

9.2.3 *Creating Conditions for the Empowerment of People*

To discuss the empowerment of local people as the main issue in the nested model for responses to the COVID-19 pandemic (Figure 9.2(B)), it is imperative to see how the system and the sub-system actors can create an environment for people's empowerment. Empowering people requires the removal of formal and informal institutional barriers that prevent them from taking action to improve their well-being (Narayan 2002). For this reason, improving the governance capacity of state and local governments is essential for enabling people to make their own choices.

Although there is no single institutional model for empowerment, the World Bank suggests that, according to its own experiences on the ground, institutional reform must be underpinned by four key elements to realize empowerment (Narayan 2002). They are 1) access to information; 2) inclusion/participation; 3) accountability; and 4) local organizational capacity. The elements act in synergy and strengthen the demand side of governance (Narayan 2002). Strengthening a demand-side approach results in greater public effectiveness. This approach focuses on creating laws, rules, and procedures that enable citizens and people's organizations to interact effectively with their government. Such an approach requires investment in educating and informing citizens, creating institutional mechanisms for their sustained inclusion and participation, and enabling the emergence of strong people's organizations and citizen's groups (Narayan 2002). When a government provides basic services such as health care and education,

among other public assistance, the World Bank emphasizes co-production strategies reflecting the four key elements of empowerment. These are: 1) putting information about government services and performance in the public domain; 2) designing mechanisms for inclusion and participation; and 3) promoting social accountability and local organizational capacity by giving community groups authority and control over key decisions (Narayan 2002).

Improvement of local governance is imperative for delivering these basic services to local people and communities. Empowered local governments with authority and resources need to empower local communities through mechanisms that increase the accountability of governments to citizens and invest in local organizational capacity (Narayan 2002). The four key elements of empowerment can be applied as gauges to judge whether the demand-side approaches have worked effectively between the system and the sub-system actors, and among the sub-system actors in the BARMM.

9.3 Empowerment Strategy between the System and Sub-System Levels

9.3.1 *System Level: The Governance of the Philippines in Responding to the COVID-19 Pandemic*

Philippine laws granted President Duterte broad authority to combat the COVID-19 pandemic. The Duterte Administration securitized the pandemic on March 8, 2020, by declaring a national public health emergency. This was followed by the Bayanihan (communal work) to Heal as One Act,⁶ known as the Bayanihan Act, on March 25, granting President Duterte additional authority to tackle the COVID-19 pandemic across the country. The Bayanihan to Recover as One Act,⁷ known as Bayanihan 2, was put in place on September 15, 2020, giving the President the ultimate authority to continue combatting the pandemic. Aside from the two versions of the Bayanihan Act, the Duterte Administration cited the Republic Act 10212, known as the Philippine Disaster Risk Reduction and Management Act of 2010, as the basis of the country's measures to deal with the pandemic (Ishikawa 2021).

Among Duterte's top-down operations in regard to the pandemic, a whole-of-government approach with cross-departmental management proved highly effective (IATF-MEID 2020). There were three tiers of task forces in the government. At the policymaking level, the Inter-Agency Task Force (IATF) for the Management of Emerging Infectious Disease (IATF-MEID 2020), which consisted of executive departments, was tasked with orchestrating government responses. The

6 Bayanihan to Heal as One Act is officially designated the Republic Act No.11469.

7 Bayanihan to Recover as One Act is officially designated Republic Act No. 11494.

Inter-Agency Task Force—Management of Emerging Infectious Diseases (IATF-MEID) is a National Task Force led by the Secretary of Defense at the operational level. At the bottom of this mechanism—at the technical level—there are Regional Disaster Risk Reduction Management Committees (RDRRMCs) together with Regional Task Forces. This mechanism endorsed and supported Duterte’s idea of robust social control by including the security cluster in the task forces (Ishikawa 2021). Duterte’s initial strict community quarantine measures were criticized as less competent, without testing, contact tracing, or a strategy to balance health risks and reopening the economy (Pesek 2020).

9.3.2 Devolution of Authority from the System Level to the Sub-System Level: The Duterte Administration and the BTA

Intergovernmental relations between the Philippine government and the Bangsamoro government⁸ are set out in Article 6 of the BOL. Article 6, Section 1 stipulates that the President has the power to exercise general supervision over the Bangsamoro government to ensure that laws are faithfully executed. Securitized responses to the virus through the strict policies and guidelines of the national Inter-Agency Task Force (IATF) were conveyed vertically down to the BTA or Bangsamoro Inter-Agency Task Force (BIATF).

The BTA faced a huge challenge in developing its response to the pandemic under the transition to a parliamentary government system, while still being reliant on the national government (Mallari et al. 2020). Based on the BOL, the Duterte Administration organized a special arrangement for the BTA to easily access the national government’s support (BTA Source #1). While the strict measures of the Duterte Administration received negative reactions from the media and academics (Bajo 2020; Pesek 2020), the BTA showed great respect for the President and regarded him as its guardian, since he had signed the BOL to establish the BARMM (DA Source #1). President Duterte also paid a lot of attention to the BTA, as he valued his political, as well as his personal, connection to Mindanao (DA Source #1). A BTA official claimed that the working relationship between the Duterte Administration and the BTA improved significantly while combatting the pandemic, which made their swift response possible (BTA Source #2). Another BTA official echoed the claim, noting that the BTA could pass resolutions and bills regarding COVID-19 responses with constant guidance from the national government, which undoubtedly enhanced the relationship during a tough time (BTA Source #3).

The empowerment strategy, including all of the four elements, employed by the Duterte Administration and the BTA was recognized by the BTA—especially

⁸ From a long-term perspective, the Bangsamoro government refers to the government that will be formally established after elections, but it can also be interpreted as including the current BTA.

in terms of access to information and participation. President Duterte invited Mr. Murad Ebrahim, Chief Minister of the BTA, representing the Bangsamoro Inter-Agency Task Force (BIATF), to participate in the national IATF-MEID meetings and issued orders to all relevant national government agencies to assist the BTA (BTA Source #1). In this way, the accountability of the Administration was also appreciated by the BTA.

The BTA, in accordance with Article 5, Section 2 of the BOL (Powers of the Bangsamoro Government),⁹ operates semi-independent policies and protocols without violating the national IATF policies (CSO Source #1). Details will be examined in the following section.

9.4 Prerequisites for Collaboration among Sub-System Actors

In the nested model of responses to the COVID-19 pandemic (Figure 9.2(B)), the sub-system-level actors (BTA, LGUs, and CSOs) are expected to play the most important roles in addressing the issue (empowerment of people) because they are able to connect the system (the governance of the Philippines) and the issue (empowerment of people) through the medium of relational problems. Prior to examining its empowerment strategy, an institutional relationship between the BTA and LGUs and the characteristics of CSOs in the BARMM should be articulated as a prerequisite of collaboration between the three actors.

9.4.1 Relationship between the BTA and LGUs

The institutional relationship between the BTA and LGUs in the BARMM is stipulated in Section 10, Article 6 of the BOL (Congress of the Philippines 2018):

The authority of the Bangsamoro Government to regulate the affairs of its constituent local government units shall be guaranteed in accordance with this Organic law and a Bangsamoro local government code to be enacted by the Parliament. The privileges already enjoyed by local government units under Republic Act No. 7160, otherwise known as the ‘Local Government code of 1991’, as amended, and other existing laws shall not be diminished.

The relationship between the BTA and LGUs in the BARMM before the COVID-19 pandemic was rather sensitive due to the political fact that LGUs belonged to the national government, not directly to the BTA, and a Bangsamoro local government code had not been enacted as of September 2022 (DA Source #2). As such,

⁹ Article 5, Section 2 of the BOL sets out the power of the Bangsamoro Government with 55 specific measures, over which the Bangsamoro Government shall exercise its authority.

*barangays*¹⁰ received a one-month Interval Revenue Allotment from the relevant provincial authorities for part of their COVID-19 assistance (LGU Source #1). On the other hand, the BTA tried to grasp this opportunity presented by the pandemic to clarify the responsibilities of LGUs in the BARMM territory. A BTA official (BTA Source #4) described the adjustment of the working relationship between the BTA and LGUs as follows:

Especially, the BARMM is a relatively new autonomous government adopting parliamentary systems, which created a lack of clear delineation of functions between the BTA and provincial governments in handling the pandemic. Issues of overlapping functions have, however, been addressed by the BTA parliament together with the Department of Interior and Local Government (DILG). Eventually, the establishment of BIATF eventually provided clear coordination between the BTA and provincial governments.

One of the significant actions taken by the BTA for LGUs was cash delivery. In order to ease the ambiguous working relationship with LGUs, partly with the intention of solidifying the electoral ground for the forthcoming Bangsamoro parliament election in 2025 (DA Source #2), the BTA decided to allocate 1.9 billion pesos to LGUs and referral hospitals for COVID-19 responses during the early stage of the pandemic (Baraguir 2020). The funds came from the annual block grant given by the national government as part of the BARMM's Quick Response Fund (BTA Source #1). One million pesos per *barangay* were granted as emergency cash aid from the BTA in 2020 (LGU Source #1), with a total of 63 *barangays* benefitting from this cash aid, set aside from the Internal Revenue Allotment from the provincial government.

Once the working relationship between the BTA and LGUs had been improved, an empowerment strategy was employed for combatting the COVID-19 pandemic. Regarding access to information, the BTA issued guidelines to the LGUs on how to respond to COVID-19, including LGU adaptation of the policies during the ECQ (JICA and MILG-BARMM 2020). This was not only an effective application of the supervisory functions of the BTA over the LGUs in the territory but also allowed the LGUs to access sources of reliable information on how to deal with the pandemic at the local level. In terms of inclusion/participation, BTA officials tended to listen to and respect LGU officials' opinions on how to deal with COVID-19, as LGU officials knew the local people and situation better (LGU Source #2).

Between the BTA and LGUs, the four key elements for the conditions of empowerment, namely access to information, inclusion/participation, accountability, and

10 A *barangay* is the smallest administrative division in the Philippines and is the native Filipino term for a village, district, or ward. There are 63 *barangays* in the BARMM.

local organizational capacity, have been recognized in responding to the pandemic, although clear delineation of functions in other areas is still a sensitive issue between them.

While CSOs might be the last of the three actors in the sub-system, they are indispensable for the empowerment strategy because they are the closest to people on the ground. CSOs in the BARMM have special characteristics, which enabled them to function uniquely in responding to the COVID-19 pandemic. In the following section, the characteristics of CSOs in the BARMM will be examined.

9.4.2 Characteristics of CSOs in the BARMM

Characteristics of CSOs in the BARMM are rooted in the history of the protracted conflict between the Philippine government and MNLF/MILF. Due to the long-term conflict in Mindanao, people needed to consolidate their voices and actions when engaging in peace-related activities so that the magnitude of their efforts would be more effective than individual actions. Local peacebuilders in Mindanao proved to be outstanding, with many organizations and multiple coalitions and networks formed to undertake peacebuilding activities during the conflict (Lee 2019). The current form of peacebuilding agencies was developed after the GPH-MNLF Peace Agreement in 1996 (Coronel-Ferrer 2002).

Since the middle of the 1990s, peacebuilding agencies in Mindanao have developed varied networks, such as Peace Weavers, the Consortium of Bangsamoro Civil Society (CBCS), and the Mindanao People's Caucus, to improve their activities (Coronel-Ferrer 2002). For example, CBCS has 29 member organizations, and it continues to expand, involving additional areas in Mindanao, where there is a significant Bangsamoro population. As a consortium and a key stakeholder in the peace and development dynamics in BARMM, the CBCS remains mindful of the inherent challenge of achieving a cohesive voice (Askandar 2021). The Kadtuntaya Foundation, Inc. played an important role in facilitating the network and consortium of CSOs in Muslim society (Lee 2019). Due to the foundation's unique background, with existing community-based peace activities in the BARMM, it was easy for it to reach out to people and communities by mobilizing its local networks (CSO Source #1, CSO Source #2). Following the outbreak of COVID-19, an assembly titled the 'CBCS-CSO Kutawato Clustered Provinces Assembly' was convened (CBCS 2020). This assembly was attended by 44 CSO leaders on June 17, 2020, with the theme of promoting peace and good governance in the BARMM (CBCS 2020). Among the topics discussed at the assembly was the impact of COVID-19 and the new normal in the socio-economic life of the Bangsamoro. This advocacy gathering reconfirmed the direction for the participating CSOs in carrying out concerted activities. The assembly even issued a statement/declaration detailing urgent matters in their coverage areas to be submitted for action by appropriate agencies of the BTA (CBCS 2020).

CSOs in Moro areas usually work closely with religious leaders and Islamic institutions (Lee 2019). It is also worth mentioning that CSOs in the BARMM were well connected with the BTA in terms of resources, including funds and information for their activities. For example, CBCS concluded several Memorandum of Agreements (MOAs) with four respective BTA ministries, namely the Ministry of Public Order and Safety (MPOS-BARMM), the Ministry of Bangsamoro Human Right Commission (BHRC-BARMM), the Ministry of Agriculture, the Fishery and Agrarian Reform (MAFAR-BARMM), and the Ministry of Indigenous Peoples Affairs (MIPA-BARMM) (CSO Source #1). The MOAs allowed CBCS to access information about the BTA and to join activities when invited by the ministries. Since CBCS had developed its organizational capacity with 29 organizations, the Consortium enjoyed its ability to make choices to equip people and community with the necessary tools, skills, knowledge, materials, or technical capacity to enhance their ability to respond to or address potential risks, vulnerabilities, and needs (CSO Source #1).

9.5 Collaboration among Sub-System Actors toward People's Empowerment

The sub-system actors are able to address the empowerment of people as the specific issue in the nested model of responses to the COVID-19 pandemic by dealing with relational problems such as poverty, infection, quarantine, religion, *rido*, and terrorism, which disempowered people in the early stages of the pandemic. In this section, the activities of the sub-system actors in dealing with the relational problems during the COVID-19 pandemic will be examined.

9.5.1 Poverty and Quarantine

Poverty was evident across the territory of Bangsamoro during the conflict. Although the incidence of poverty in the BARMM decreased to 39.4% in the first half of 2021, from 55.9% in the same period in 2018, this was still higher than the average national level (Philippine Statistics Authority 2021). Already stricken by poverty, the strict quarantine measures of the Duterte Administration added another blow. ECQ and other quarantine orders, along with the deployment of the Philippine National Army and the police to monitor the movements of people, halted economic activities. Poverty rates in island regions such as Sulu and Tawi-Tawi, in particular, increased during the pandemic.¹¹ It was claimed by several local residents in the BARMM that the economic depression was a much more

11 According to the Official Poverty Statistics of the Philippines – First Semester (2021), Sulu had a 71.9% incidence of poverty in 2021, while the incidence in Tawi-Tawi was 39.5% in the same period.

serious problem than the fear of infection in a medical sense (Ishikawa 2021). Aggravated by quarantine measures, poverty disempowered local people and is thus recognized as one of the most serious relational issues.

Together with emergency assistance such as food package supplies and medical aid (BTA Source #5), the BTA swiftly decided to provide cash assistance to LGUs. Food packages were provided to all *barangays* in the BARMM and even to those outside the autonomous region by the BTA (Local Resident Source #1). Aside from these protection measures, which were necessary to mitigate the initial situation, MAFAR-BARMM also focused on building the resilience of residents by offering seeds and seedlings for them to resume small-scale farming in their backyards for their own consumption, as well as for commercial sale (LGU Source #3; LGU Source #4; LGU Source #5). The LGUs provided some farming guidelines to help farmers and advice on how to avoid becoming infected with the virus (LGU Source #5). LGU officials often observed that BTA officials could reach out to local people, teaching them how to carry out backyard gardening to grow root crops and vegetables (LGU Source #3).

As for material assistance to local people and communities, for example, the League of Bangsamoro Organizations (LBO) formed a specific group called Kadtag Bangsamoro (Help Bangsamoro), with volunteers and parliamentary staff involved in fundraising (CSO Source #2). The group made full use of SNS for communication during the quarantine periods and managed to raise more than three million pesos. For delivering essential items to vulnerable families, CSOs specializing in humanitarian assistance took advantage of their mandates by increasing the mobility of staff members while complying with COVID-19 travel restrictions (CSO Source #3).

9.5.2 Infection

Although the rate of infection in the BARMM was lower than in other populated urban areas in the country, fear of infection, as well as negative perceptions of vaccination, have disempowered people. MOH-BARMM provided municipalities with medical supplies (LGU Source #3) and shelters for returning overseas Filipinos (ROFs) and locally stranded individuals (LSIs) who were returning to the region (JICA and MILG-BARMM 2020). As mentioned in the previous section, the swift and timely aid from the BTA helped transform the sensitive relationship between the BTA and LGUs into a more comfortable and confident relationship (LGU Source #1, #2, #3, #4, #5, #7, and #8).

Based on the cash aid and information provided by the BTA, LGUs at the *barangay* level created a network among the 34 *barangays* for information dissemination and education to support responses to COVID-19 (LGU Source #3). Officials in the network had a regular, weekly meeting with the purpose of protecting people in their *barangays* (LGU Source #4). Their network coordinated activities such as: 1) developing rotational monitoring programs for people; 2) identifying the poorest people, especially the elderly persons and those who were

suffering from illness; and 3) helping distribute information on COVID-19 and encouraging people to get vaccinated (LGU Source #3; LGU Source #4).

Through education and information activities, CSOs promoted inclusion, solidarity, hope, fair, transparent distribution of resources, and access to services (Legro 2020). Their education and information activities on health protocols in relation to COVID-19 were a source of people's empowerment. In the initial stage of the pandemic, CSOs made special efforts to disseminate correct information about the virus and ways of achieving self-protection at home (CSO Source #4). CBCS launched an information drive over the radio on health protocols as well (CSO Source #1).

9.5.3 Religion

Religion is seen by many as necessary for spiritual salvation, but it can be a double-edged sword in times of emergency. It was natural for many in the community to turn to religious remedies when the COVID-19 pandemic started. However, reliance on religion had two adverse consequences in the BARMM, and, thus, religion was considered to be a relational issue for people's empowerment. First, when the pandemic hit, religious facilities could become hubs for infection. The BTA thus exercised its power to suspend Friday prayers and prohibit mass gatherings during the holy month of Ramadan (Baraguir 2020). Second, the BTA faced a low vaccination rate in the territory, partly because of prevailing incorrect information about the physical risks of vaccinations and partly due to people's religious belief that vaccination was *haram* (prohibited) (BTA Source #6). According to National Task Force to End COVID-19, the vaccination rate in the BARMM as of February 12, 2022, was 20.02%—the lowest of any region in the country—while the rate in Metro Manila was 80.74% (Philstar Global 2022).

Although the BTA launched a *halal* vaccination campaign and encouraged people to receive shots as a preventive measure, it was not easy to change people's beliefs. The Ministry of Health-BARMM (MOH-BARMM) disseminated religious guidance provided by a mufti¹² on *halal* vaccinations (BTA Source #6). The BTA needed to rely on more mobile LGUs and CSOs on this matter. In fact, local education campaigns at the municipality and *barangay* levels, with the assistance of the MOH-BARMM, became an important tool for convincing residents to get vaccinated (LGU Source #1; LGU Source #6). To complement the efforts of the BTA and LGUs to raise the vaccination rate, CSOs utilized their long working relationship with religious leaders and institutions (CSO Source #1; CSO Source #2; CSO Source #4). The United Indigenous Peoples Heritage of the Philippines-Women (UNIPHIL-WOMEN) collaborated with Hay-atul Ulama (an Islamic scholars group) on *halal* vaccination advocacy (CSO Source #4). The spiritual development committee of LBO made effective use of its network with religious

12 A mufti is an Islamic jurist qualified to issue a nonbinding opinion (*fatwa*) on a point of Islamic law (*sharia*).

organizations and individual Islamic scholars to create an online program to discuss the COVID-19 pandemic in the context of religion, including the low rate of vaccination (CSO Source #2).

As of June 3, 2022, the vaccination rate in the BARMM had reached 31.7% (Crisostomo 2022b), 11.5% higher than the rate on February 12, 2022 (Philstar Global 2022). Although the vaccination rate in the BARMM was still lagging behind compared to the national rate of 69.4% on the same date, it was meaningful that an additional 11.5% of the population had chosen to get vaccinated within a four-month period in 2022.

9.5.4 *Rido and Terrorism*

The resurgence of terrorist activities and unceasing *ridos* (clan feuds) has continued to be one of the main concerns for people in the BARMM, leading to feelings of disempowerment. This is why *ridos* and terrorism are considered to be relational issues. The risk of conflict resurgence caused by COVID-19 in post-conflict and fragile areas was forewarned by such complex elements as: 1) elevated anxieties over health and the economy (Mustasilta 2020); 2) the strengthened system of national surveillance (Youngs and Panchulidze 2020); 3) the resurgence of terrorist activities (TRT World 2000); and 4) slowdown or even deterioration of the reconciliation process (IDEA 2020). Extremism remained a threat, and rebel groups like the New People's Army (NPA) were active. Other groups, such as Abu Sayyaf, Bangsamoro Islamic Freedom Fighters (BIFF), as well as Islamic State-inspired groups, were waiting to attack communities and government troops (LR Source #1). It was initially anticipated that the Bangsamoro youth might be vulnerable to recruitment or exploitation by terrorist groups such as Abu Sayyaf in various ways (IO Source #1).

In the initial stage of the pandemic in 2020, some staff members of the LGUs expressed their concerns over the issues of peace and order due to the insufficient services provided by the BTA and LGUs (JICA and MILG-BARMM 2020). A BTA official elaborated that there were times when support items could not be delivered to remote areas, including island territories, because of the quarantine measures (BTA Source #7). Eventually, this concern gradually dissipated as people in the BARMM came to recognize the dedicated work of the BTA and LGUs in response to the pandemic (CSO Source #1). Although the level of their service was not always satisfactory, the presence of the BTA, LGUs, and CSOs working for people in the community eased their anxiety.

Although a couple of incidents in the island provinces were reported, numbers were lower than those before the outbreak of the pandemic. A high-ranking police officer claimed that the crime rate in the BARMM decreased by 20% in 2020–2021, mainly due to the restricted movement of individuals under quarantine measures (PO Source #1). Some also claimed that the numbers of *ridos* were lower than usual during the pandemic for the same reason (LGU Source #7; LGU

Source #8). Although the sub-system actors did not directly address people's fears about terrorist activities and *ridos*, it was deemed ironic that the COVID-19 pandemic itself reduced security difficulties because of limited movement and quarantine rules (IO Source #2).

The sub-system implemented its empowerment strategy by making use of vertical and horizontal working relations among the actors and by addressing relational problems, which had disempowered people at the beginning of the pandemic. For the vertical collaboration, the BTA and LGUs overcame their ambiguous legal relationship to respond to the pandemic. CSOs with high mobility were useful for implementing the policy orders from the BTA and LGUs in the communities. Horizontal collaboration was observed among LGUs and CSOs. Both the vertical and horizontal collaboration modes addressed all the relational problems except for *rido* and terrorism. Security difficulties were reduced as a result of the restricted movement of people during the quarantine.

9.6 Conclusions

There are three major findings that can be gleaned from this research using the nested model of responses to the COVID-19 pandemic (shown in Figure 9.2(B)) as the analytical framework. First, although the protection measures of the Duterte Administration prevailed at the beginning of the pandemic, the working relationship between the Duterte Administration and the BTA left room for the sub-system level to adopt empowerment strategies by enhancing access to information, inclusive measures, accountability, and local organizational capacity. Second, the sub-level actors in the BARMM made vertical as well as horizontal collaborations to enhance the empowerment strategies. They played an essential role in addressing people's empowerment by dealing with relational problems, such as poverty, infection, and quarantine, which had disempowered people at the beginning of the pandemic. Religion-related issues were carefully addressed even though the sub-system could not exercise any direct control over *rido* and terrorism. The BTA, LGUs, and CSOs complemented each other's capacities and made efforts to create a firm base for autonomy in the BARMM. Third, the Autonomous Region was surprisingly well prepared to promote people's empowerment, with efficient collaboration between the actors at the sub-system level. Although this research was unable to verify the situation of people's empowerment on the ground without a proper field survey, these results can be expected under the conditions provided by the sub-system actors in the BARMM.

In terms of the lessons learned from the findings, the empowerment of people, as the goal of the Mindanao peace process, has gradually been prepared by the sub-system actors in the BARMM. Although the COVID-19 pandemic was an uninvited intruder in the midst of a struggle to consolidate the foundation of the BARMM, it played an unexpected role in improving the governance in the

BARM by enhancing working relationships among the sub-system actors. This case study suggests the important roles for the sub-system in governance in providing local people with the right environment for their empowerment.

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10

CONCLUSION

In Quest of Empowerment

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10.1. Introduction

In its 1994 Human Development Report, the United Nations Development Programme (UNDP) identified seven areas crucial to the development of human security: economic, food, health, environmental, personal, community, and political security (UNDP 1994). The report highlighted the interconnections between the issues associated with these security components. Since then, the international community has advanced several principles in its response to human security threats. A resolution on the common understanding of human security, adopted by the UN General Assembly in 2012, calls for people-centered, comprehensive, context-specific, and prevention-oriented responses that strengthen the protection and empowerment of all people and all communities (UNGA 2012). The outbreak of COVID-19 comprised a significant new threat to human security, and efforts to ensure people-centered security in each area by containing the pandemic were undertaken at various levels of the national, regional, and international community. As discussed in the introduction chapter and the case studies, while protection, primarily by governments, was essential in the pandemic's early stages, the lockdown measures intensified human insecurities in multiple ways. Under these unprecedented circumstances, the central question this volume examines concerns how people can empower themselves to strengthen their own human security rather than relying solely on protection provided by the State.

The author of each chapter has focused on several human security challenges in specific country contexts. They examined how human security has evolved through the challenges presented by the spread and process of containment of COVID-19, exploring some critical implications related to the empowerment of

people and communities. This concluding chapter attempts to draw essential lessons from each of the eight case studies.

10.2. Protection and Empowerment vis-à-vis COVID-19

When exploring the meaning and practice of empowerment, the importance of protection—likely to be introduced even before empowerment when addressing human security crises—should not be ignored. When a crisis hits, many people feel insecure, vulnerable, overwhelmed, and disempowered. In developing an emergency response, various protective measures can be taken by a wide array of local, national, regional, and international security providers (Hernandez et al. 2019, 280). Table 10.1 illustrates the relationships between protection and empowerment discussed in the case studies. As the pandemic spread, most national governments took on the responsibility for protection, primarily through the adoption of lockdown measures. These policies were seen across Southeast Asian countries. Although lockdown measures were the first choice for governments to protect people's health, they led to restrictions on citizens' freedom of movement and consequently deprived them of economic opportunities that would otherwise have been available (Chapters 2, 4, 6, 7, 8, and 9).

In response to these challenges, various policies other than lockdowns to protect the lives of vulnerable people were progressively implemented (Chapters 2, 3, 6, 8, and 9). In Indonesia, aside from medical and public health measures, an emergency cash-transfer program was introduced, allowing people to determine how to spend this money themselves. Indonesia's previous experience with frequent natural disasters has led to advances in government protection policies. As was the case with this program, cash transfers are offered in times of natural disaster, with the aim of meeting the needs of disaster survivors and ensuring adequate and effective assistance for their recovery, rehabilitation, and relocation (Chapter 3). In another case study from Indonesia—which dealt with the problem of plastic waste pollution in the Citarum River—a different protection approach was observed. The government's public health measures, including the lockdown, led to an increase in the inappropriate disposal of masks, various kinds of medical waste, and plastics, which in turn exacerbated environmental problems in the river. In such negative circumstances, environmental education raised the awareness of residents regarding how the pollution would affect their daily lives and how they should sort their garbage when they could not leave home due to the restrictions on movement (Chapter 6). Moreover, in Thailand, which is experienced the effects of a rapidly aging society, cash support was provided in the form of digital money transfers, leaving behind many of the elderly, who know little about information technology (Chapter 8).

In the Philippines case studies, the diverse agendas and positions of the recipients of government protection are reflected in different evaluations of government policies (Chapters 4, 7, and 9). The case study of women's empowerment based on the National Action Plan on Women, Peace, and Security (NAP WPS)

TABLE 10.1 Protection and empowerment (source: authors)

Theme/Country	Protection		Empowerment		Achievement/ Consequence
	From What	Measures	Consequence	Resource	
Poverty (Vietnam)	Gov. donors, NGOs	Lockdown cash and material aid	Not eligible for gov. health insurance Ad hoc-based aid	Whatever they have in their hands (scarce resource)	Vicious poverty
Food (Indonesia)	Gov., local gov., NGOs	Medical & public health measures, food and cash-transfer program	Efficient but coordination and beneficiary issues remain as challenges	Transferred cash	Freedom to choose what people want to meet their needs An entry point for empowerment
Health (Philippines)	Gov., local gov.	Securitized, total lockdown Mitigated gaps	Not enough, lack of responsive measures, hidden pandemic	Support from family, friends, communities	Self-help, mutual help No choice, barely empowered?
Displacement (Japan)	Gov., local gov.	Temporary shelters among others	Emancipation for empowerment	Temporary shelters	Short-term empowerment but protection is still required for long-term recovery

(Continued)

TABLE 10.1 (Continued)

<i>Theme/Country</i>	<i>Protection</i>		<i>Empowerment</i>		
	<i>From What</i>	<i>Measures</i>	<i>Consequence</i>	<i>Resource</i>	<i>Agency/Consequence</i>
Environment (Indonesia)	Gov., local gov.	Lockdown environmental education	Lockdown aggravated waste plastic pollution, but education raised people's awareness	Environmental education (especially through social media)	Understanding the danger of waste plastic pollution A change in residents' behavior in relation to waste management has gradually been observed
Gender (Philippines)	Gov., national CSOs	Lockdown capacity building of local SCOs	Not enough Contributed to vertical empowerment	Capacitated local women SCOs, project funds	Horizontal empowerment among local CSOs and women in Mindanao
Elderly (Thailand)	Gov.	Total and partial lockdowns Digital transfer of money support among others	Not enough Aggravated downside risks	Community isolation	Not clear. Community-based service could enhance the ability of elders to achieve empowerment
Conflict (Philippines)	Gov./BTA/LGUs/CSOs	Total lockdown, cash & material aid, information sharing	Devolution of top-down strategies	Cash, material aid, and shared information	Networking and information dissemination Not clear but measured by increasing vaccination rate and other self-help actions

showed how the Office of the Presidential Advisor on the Peace Process (OPAPP), as the main implementer of NAP WPS, was transformed into a pandemic response agency, with a focus different from that of the original one. Therefore, nationwide civil society organizations (CSOs) were unable to continue their previous working relationship with the OPAPP (Chapter 7), but nonetheless, they were able to develop new opportunities to help communities that needed additional protection. In another case study (Chapter 4), it was noted that the government responded to the pandemic through a national security framework. The government sided with the military and police, neglecting its responsibility to provide vital support to health workers and women's rights service providers. The chapter argued that the government's strict lockdown policy not only deprived them of freedom of movement but also caused 'hidden pandemics', such as domestic violence (Chapter 4).

On the other hand, people in Bangsamoro that struck a peace deal with the Philippine government tended to give a positive assessment of the region's cooperation with the government in responding to the pandemic. Despite the previous history of conflict, this may have been due in part to the special consideration given to Bangsamoro by the Duterte Administration. The Administration transferred power to the Bangsamoro Transition Authority (BTA) and local government units (LGUs), which respected the policies of the national government in return (Chapter 9).

In Japan, the only case-study country where the lockdown policy was not implemented, elderly people who had been displaced by the floods appreciated the temporary shelters that the government provided. The government's policy of prioritizing the provision of temporary housing was valued as a step toward empowering the evacuees (Chapter 5). The Vietnamese case exposed the double burden of the urban poor, who were situated outside health insurance coverage or repeatedly joined and quit due to poverty. They were also unable to benefit from government protection schemes during the COVID-19 pandemic (Chapter 2).

As shown on the left side of Table 10.1, Southeast Asian countries took various measures to protect people and compensate for the lockdowns that resulted in restricted economic activities. In some cases, the policies contributed to facilitating people's empowerment, while in others, people's insecurities were aggravated due to the institutional bottlenecks of the countries. The widely diverse experiences of people and communities across the Southeast Asian region in dealing with the COVID-19 pandemic raise the question of how these empowerment processes played out. The next section will focus on the evaluation of empowerment.

10.3. Measuring Empowerment

As discussed in the introduction chapter, the question of how to measure empowerment is a major challenge taken up in this book. Each chapter examined empowerment approaches and outcomes within a specific context using Naila Kabeer's three parameters—namely, resources (the conditions under which choices are made), agency (the process by which choices are made), and achievement (the

outcomes of choices) (Kabeer 1999, 437). The right side of Table 10.1 summarizes the main findings of this analysis.

The case studies reveal that there is no single model for empowerment, a conclusion shared by the World Bank report on this topic (Narayan 2002, 17). Each human society is not a homogeneous entity but is rather marked by differences in terms of class, ethnicity, caste, religion, and gender. Institutional strategies to empower (poor) people will therefore vary (Narayan 2002, 17). The case studies presented here demonstrate the unique political, institutional, cultural, and social contexts in which empowerment plays out. The World Bank report also pointed out the significance of the time factor, which could change the empowerment strategies in any given context. As time passes, there tends to be a shift from reliance on informal mechanisms toward formal mechanisms, and from direct and more time-intensive forms of participation toward indirect forms of participation (Narayan 2002, 18).

As the case studies show, there are different dynamics and stages of empowerment. One reason empowerment remained a potentiality in most case studies was that solid protection was first and foremost required to contain the pandemic. However, as mentioned in Chapter 1, efforts to promote empowerment must be embedded even in the practice of top-down emergency protection. As a complement to the perspectives proposed by Kabeer to measure the extent of empowerment, it is useful to examine the conditions for empowerment in providing protection.

10.4. Conditions of Empowerment

Here, we introduce four common elements that the World Bank research formulated (Narayan 2002, 18–22) and examine whether some aspects of institutional conditions for empowerment can be found in the case studies. The four institutional elements of empowerment identified by the World Bank research are 1) access to information, 2) inclusion and participation, 3) accountability, and 4) local organizational capacity—all of which are intertwined and expected to act in synergy (Narayan 2002, 18). The first and most important element is access to information: This must be a two-way flow, from the government to the people and from people to the government, rather than one-way information sharing from the government to the people. It is easy to understand that people with access to information will be able to make their own choices based on that information. The second is inclusion and participation, which refers to those who are included in decision-making and how people participate in certain events. Participation means that people are not only subject to government decisions but are also able to have control over decisions and resources.

Third, as defined by the research, accountability refers to the ability to hold public officials, private employers, or service providers accountable so that they are answerable for their policies, actions, and use of funds. The research also

introduces three types of accountability mechanisms: political, administrative, and public. While political accountability is ensured through elections, in our case studies, administrative and public accountability is more important in relation to compliance at the time of COVID-19 emergencies. Administrative accountability of government agencies is realized through internal accountability mechanisms, both horizontal and vertical, within and between agencies. Public or social accountability mechanisms hold government agencies accountable to citizens. Social accountability can reinforce political and administrative accountability mechanisms. Finally, local organizational capacity is referred to as the fourth element of empowerment and defined as the ability of people to work together, organize themselves, and mobilize resources to solve problems of common interests (Narayan 2002, 21). As argued in one of the Japan. International Cooperation Agency's (JICA) previous studies on human security, before protection reaches its zenith, the process of empowerment based on local ownership is expected to resurge, and protective agencies should not hinder but rather try to promote this process (Hernandez et al. 2019, 280). Even outside the reach of formal systems, vulnerable people tend to turn to each other to solve their everyday problems (Narayan 2002, 21). Table 10.2 shows the summaries of conditions of empowerment in the case studies.

If the government does not clearly and effectively communicate information on COVID-19, or if people face difficulties accessing such information, they cannot make reasoned choices. In such cases, where governments are not accountable, people try to share information among themselves, help each other, and solve problems by themselves (Chapters 2, 4, and 8). The case of urban poverty in Ho Chi Minh City shows that the poor who lost their jobs due to the lockdown received lump-sum payments by canceling social security to support their livelihoods. Workers in the informal sector fared worse, as they had no social security. People were forced to rely on self-help efforts, borrowing money from friends or money-lenders to make ends meet (Chapter 2). In the Philippines, securitized government measures against COVID-19 did not reach essential workers or care workers, and as a result, in responding to the pandemic, people had to craft mutual assistance strategies by relying on their relatives and community networks (Chapter 4). The case of Thailand is similar. The government organized digitized cash transfers, but the elderly—who lacked sufficient IT knowledge—did not receive information about the cash transfers and were thus excluded from the scheme. It was the network of CSOs that filled the void (Chapter 8).

While these three cases reveal the lack of empowering institutions, several other cases show that potentially empowering elements can be seen in protective measures. In Indonesia, information on the recipients of cash transfers and other details were widely shared at the community level. The identification of those eligible for cash transfers by the village offices was essential in order to ensure inclusiveness. The government and the village offices are accountable in terms of cash transfers. While the involvement of the police and the military may

TABLE 10.2 Conditions for empowerment (source: authors)

<i>Theme/Country</i>	<i>Access to Information</i>	<i>Inclusion and Participation</i>	<i>Accountability</i>	<i>Local Organization Capacity</i>
Poverty (Vietnam)	No	Urban poor people in informal sectors are excluded from social safety net	Government is not accountable	Debt from friends and lenders creates 'money rotation'
Food (Indonesia)	Information on cash transfer, including identified beneficiaries and other details, is shared at all levels, including community members, village facilitators, police and military	Identification of eligible residents by village authorities for cash transfer is critical	Government and village authorities are accountable	While local governments focus on smooth registration and inclusion of new beneficiaries, NGOs provide capacity building for beneficiaries
Health (Philippines)	No	Health workers and women's right service providers are excluded	Government is not accountable	Emergence of community-driven 'self-help' strategies
Displacement (Japan)	Kuma Village Recovery Plan 2020-2028 is widely disseminated, but limited information for long-term recovery on the ground	Those who are displaced by a flood are included in the recovery plan	Government, village authorities, and NGOs are accountable	With assistance from local support staff, NGOs, and lesser affected residents, displaced residents make their temporary homes livable

(Continued)

TABLE 10.2 (Continued)

<i>Theme/County</i>	<i>Access to Information</i>	<i>Inclusion and Participation</i>	<i>Accountability</i>	<i>Local Organization Capacity</i>
Environment (Indonesia)	Dissemination of environmental information and environmental education through social media	Social media is effective for involving wider public, including younger generation, in relation to environmental awareness and activities	Government and local authorities are accountable	NGOs and a university encourage locals to take actions
Gender (Philippines)	Training on human rights and humanitarian aid by nationwide CSOs	Participation of local CSOs	Vertical and horizontal accountability among CSOs	Horizontal cooperation among local CSOs and women groups
Elderly (Thailand)	No	Digital cash-transfer aid excluded elderly people	Government is not accountable	Community isolation by a network of CSOs
Conflict (Philippines)	Smooth information flow as forms of devolution of authority from government to BTA, LGUs and down to local CSOs	Devolution of authority at each level enhances inclusion and participation	Government, BTA, LGUs, and CSOs are all accountable	In the BARM, vertical and horizontal cooperation enhances people's choices

have militated against bottom-up empowerment, non-governmental organizations (NGOs) also conducted activities such as the capacity building of the beneficiaries on the ground, which would certainly contribute to people's empowerment (Chapter 3). In the other Indonesian case study on environmental protection during COVID-19, the government organized environmental education, and this was done primarily through social media platforms such as WhatsApp, YouTube, and Instagram. When people's mobility was restricted due to the pandemic, social media became a powerful information dissemination tool, particularly for the younger generation. At the local level, NGOs and universities encouraged those with knowledge of waste management to take action. These factors also contributed to the empowerment of citizens (Chapter 6).

The residents of Kuma Village in Japan who were displaced by the massive floods had only limited access to information about long-term plans to address their issues, even though they were included in the formulation of the Kuma Village Recovery Plan 2020–2028. However, they seem to have been empowered with a wider range of choices to improve their lives in temporary housing with the help of village support staff, NGOs, and less affected residents (Chapter 5). In Mindanao, women's groups were equipped with information and skills relating to human rights and humanitarian aid through the training provided by nationwide CSOs before the pandemic hit the country. During COVID-19, the lack of mobility of large-scale national CSOs led to the development of horizontal cooperation between local CSOs and women's groups. This provided an excellent opportunity to promote the subsequent empowerment of women (Chapter 7). In the Bangsamoro Autonomous Region in Muslim Mindanao (BARMM) in the Philippines, the multiple relationships between the government, the BTA, LGUs, and CSOs were better than initially anticipated due to the smooth transfer of authority and information sharing that took place when all stakeholders worked together to fight COVID-19. Vertical and horizontal cooperation within the BARMM led to additional options for people (Chapter 9).

Ultimately, as Kabeer (1999) argued, empowerment must be measured based on whether individuals have the power to choose, as well as whether they are actually exercising their right to choose. From this perspective, the citizens of Southeast Asian countries under the threat of COVID-19 remained largely disempowered, even though they received some top-down, sometimes coercive protection. As we have seen in this section, however, nascent hope can be sustained if we focus on the functioning of empowering institutions, which correspond primarily to the 'resources' element outlined by Kabeer. It is encouraging to see various forms of institutional stepping stones toward further empowerment across Southeast Asia. Still, Table 10.2, a mapping of case studies based on the World Bank research, shows that empowerment practices during the pandemic were patchy, with people's voluntary care functioning as a substitute where the government did not consider itself responsible. Active grassroots care reflected people's agency but should not be confused with empowerment, as there was no other option for people.

10.5. Empowerment and Resilience

Empowering people is a worthy process in itself. In times of pandemics and other anthropogenic crises, empowered people are better positioned to cope with and overcome the serious and pervasive threats surrounding them. The process of empowering people can thus lead to the reinforcement of people's resilience to risks. As the Commission on Human Security (CHS) report prepared by Ogata Sadako and Amartya Sen describes,

Protection strategies, set up by states, international agencies, NGOs and the private sector, shield people from menaces. Empowerment strategies enable people to develop their resilience to difficult conditions. Both are required in nearly all situations of human insecurity, though their form and balance will vary tremendously.

(CHS 2003, 10; emphasis in original)

Empowered people are resilient in the face of external adversity.

In the introduction chapter, we discussed the points featured in the UNDP Special Report on Human Security, such as solidarity (UNDP 2022). In this concluding chapter, let us present another report that tried to elaborate on the potential of the concept of human security. In 2022, JICA Ogata Research Institute released a report, *Human Security Today*, in which human security is defined succinctly as the idea of 'protecting people's lives, livelihoods, and dignity by creating a resilient society against various threats' (Makino 2022). The report consists of several articles exploring the dynamics of people's resilience to the health crisis. For instance, Kunii argued that, in responding to COVID-19, it was necessary not only for the government to provide protection but also for individuals to take on responsibility and duty in relation to their own security. By wearing masks and maintaining social distance, people protected themselves, their families, and their communities (Kunii 2022, 69). Such voluntary actions of citizens are based on their capacity to make choices: Empowered people do not just rely on protection but act on their own.

By combining protection and empowerment, people can better cope with downside risks. The failure of the international health system to prevent the global outbreak of COVID-19 necessitated additional efforts to set up a resilient framework for the international health system. The COVID-19 Global Risk Communication and Community Engagement (RCCE) strategy was designed to foster and strengthen community empowerment and promote behavioral change through a community-centered approach. On the initiative of the World Health Organization (WHO), the governments of 13 African countries tried to promote community engagement activities involving local stakeholders, such as religious leaders and grassroots organizations. Incorporating community empowerment into national protection strategies offers a promising opportunity for building

resilient international health systems (WHO et al. 2020; Komasaawa et al. 2022, 122–123).

The approach of combining protection and empowerment is not new. The Primary Health Care (PHC) approach was advocated nearly 20 years before the concept of human security was proposed by the UNDP. PHC aimed to ensure not only that individuals should have access to quality health services when they need them but also that local people and communities should actively participate in the health system (Komasaawa et al. 2022, 124). Even though such inclusive approaches were pursued in the past, the case studies in this book indicate that many people felt that they were not protected sufficiently from the menace of COVID-19 and found making appropriate decisions difficult (Chapters 2, 4, and 8).

In addition to resilience, JICA (Ogata Research Institute's) *Human Security Today* pays attention to the objective set out in the third value of human security, which is the freedom to live in dignity. Inappropriate and insufficient protection strategies can lead to situations in which people are deprived of dignity. Through an adequate combination of protection and empowerment, people can restore and sustain their dignity (Muto et al. 2022). This begs the question of what level of protection is appropriate for people to live dignified lives with confidence and mutual respect. If a resilient society emerges through people's empowerment, how does it contribute to ensuring people's dignity? In the introduction chapter, we confirmed the significance of cultural contexts, which have much to do with dignity. Exploring these aspects is a challenge for future research.

10.6. Advancing Human Security for the Association of Southeast Asian Nations (ASEAN) and Beyond

Almost 30 years have passed since UNDP's *Human Development Report 1994* introduced the concept of human security (UNDP 1994). During this period, while the discussion of the concept has evolved in the United Nations arena, efforts have also been made at the national, regional, and international levels to diffuse the practice of human security. In the course of implementing these practices, many lessons have been learned and efforts to create a more secure world have continued. In East Asia, the human security challenges we face are diverse, ranging from climate change, cross-border haze, disaster risk reduction, pandemic control, and food insecurity to the need for infrastructure development, financial stability, and peacebuilding (Hernandez et al. 2019). Since 2015, the issues that the Sustainable Development Goals seek to address have been added to the existing human security agenda. Subsequently, COVID-19, first reported in December 2019, quickly spread around the world, making the idea of human security relevant to the global community. The eight case studies in this book all deal with the prospect of empowerment during the pandemic as one of the most severe and pervasive downside risks we have faced in the recent past.

In one of our previous research outcomes, *Human Security and Cross-Border Cooperation in East Asia* (Hernandez et al. 2019, 284), we envisaged launching projects of regional cooperation based around specific themes by mobilizing scientific knowledge and networks, rather than engaging in debate over abstract ideas concerning Asian commonalities (Hernandez et al. 2019, 283). This transition from discussion to practice can be seen in the noticeable developments that have occurred on the policy front. By March 2020, many Asian countries had started to close their borders and were scrambling to implement pandemic containment policies. In addition, national governments began to assume protectionist stances, eager to procure vaccines in competition with other countries. Meanwhile, ASEAN as a regional organization, at the 26th ASEAN Economic Ministerial Meeting on March 10, 2020, called for collective action to mitigate the impact of COVID-19 with a particular focus on leveraging technology and digital trade, as well as trade facilitation platforms, to foster supply-chain connectivity and sustainability. The following Special ASEAN Summit on COVID-19, held on April 14, 2020, called for a post-pandemic recovery plan and proposed the establishment of the COVID-19 ASEAN Response Fund (OECD 2020). The Fund was supported by contributions from the ASEAN Development Fund, the ASEAN Plus Three Cooperation Fund, and other bilateral funds for procuring much-needed medical supplies and equipment (Septiari 2020). The crisis thus gave rise to regionwide unity and coordinated action.

The chance of COVID-19-like pandemics occurring and recurring in the future is very high, and national and local governments across the region need to be prepared, even in normal times, to protect their people against hazards. In emergencies, it should be ensured that genuine support will reach the most vulnerable, the poor, the elderly, and destitute women. When protecting people, the government needs to take into account the necessity of information sharing, inclusiveness, and accountability, bearing in mind that all of these aspects will become essential resources for people's empowerment. While the concept of human security has been linked to practice at various levels in the past three decades, we still face situations in which people's lives and dignity are threatened. The experiences that people faced during the pandemic must be remembered, and our efforts to promote human security through the combination of empowerment and protection should continue in the post-COVID-19 era.

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