The ASEAN Coordinating Centre for Humanitarian Assistance on Disaster Management (AHA Centre): Examining Gender-Based Approach in the 2018 Lombok Earthquake

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Abstract

This research aimed to examine the role played by The ASEAN Coordinating Centre for Humanitarian Assistance on Disaster Management (AHA Centre) as the disaster coordination agency in the ASEAN region in addressing gender-based approach in Lombok earthquake disasters in 2018. The research utilized a qualitative descriptive research design. The findings indicate that the activities of the AHA Centre following the Lombok earthquake were predominantly focused on emergency response efforts and lacked significant involvement in gendersensitive initiatives, ultimately yielding a dual impact on women. Through this research, it was ascertained that the suboptimal integration of gender perspectives in disaster management exacerbates the societal marginalization of women. The absence of gender-informed disaster management is evidenced by non-genderdisaggregated victim data, logistic aid provision overlooking gender-specific needs, as well as mitigation efforts and information dissemination disregarding gender dynamics. Thus, it emphasizes the lingering absence of a genderresponsive disaster management framework. This raises questions considering that ASEAN, including the AHA Centre, has already implemented a responsive gender declaration in 2015, whereas the AHA Centre has yet to demonstrate the

establishment and implementation of a gender-based framework, due to inconsistencies in motivations towards universal norms. This study suggests that a masculine approach to disaster management hinders gender-sensitive disaster response efforts. It employs the concepts of gender mainstreaming and gender sensitivity to examine both the AHA Centre's disaster response efforts and the necessary steps to implement gender-sensitive disaster management. This research constructs the notion that disaster management efforts conducted without gender sensitivity, regardless of their quality, will not be optimal or effective.

Keywords: AHA Centre, Lombok Earthquake, Gender Sensitivity, Gender Mainstreaming

Introduction

The article examines the reasons behind the lack of focus by ASEAN, through The ASEAN Coordinating Centre for Humanitarian Assistance on Disaster Management (AHA Centre), on disaster management efforts from a gender perspective. This lack of attention has resulted in inadequate comprehensive assistance to the victims of the 2018 Lombok earthquake, particularly affecting women and other vulnerable groups. Despite having implemented a gender-responsive declaration since 2015, which is also enshrined in the ASEAN Vision 2025, AHA Centre, as an ASEAN regional partner, has yet to fully integrate gender aspects into disaster management efforts (ASEAN, 2021). This is significant given that as of January 2023, the ASEAN population reached 668.61 million, with almost equal numbers of men and women (Annur, 2023). In the case of the Lombok earthquake, the number of displaced females significantly surpassed males, with 229,640 women displaced compared to 187,889 men. Addressing the needs and rights of women in disaster scenarios is essential, given their increased vulnerability because of factors like economic challenges, ethnicity, physical differences, political marginalization, and their reliance on men (Enarson et al., 2017). Besides women, other vulnerable groups such as the elderly, children, and persons with disabilities, particularly women with disabilities are also often neglected during disaster relief efforts. The incorporation of disability into gender studies represents an effort toward enforcing inclusive and just social equity, as it is crucial to acknowledge that disabilities significantly exacerbate gender injustice (Cahaya Inklusi Indonesia, 2021)). Gender analysis has been regarded as a strategic approach to reducing women's vulnerability to disasters, as integrating gender perspectives into all aspects of policy and program design, implementation, monitoring, and evaluation is a means to ensure that the concerns and experiences of both women and men are accounted for in all facets of disaster management (Septanaya & Fortuna, 2023).

The research question, therefore, focuses on the role of the AHA Centre in gendersensitive disaster management in the aftermath of the 2018 Lombok earthquake. The 2018 Lombok earthquake is selected as a case study because the earthquake resulted in the highest fatality rate in the history of Lombok's disasters and displaced a significant number of people, with women making up the majority (Wicaksono, 2018). Moreover, Lombok is an island with a moderate earthquake frequency in Indonesia, suggesting a high risk of future disasters. This condition underscores the need for disaster management strategies that are inclusive, equitable, and sustainable to ensure adequate recovery efforts aimed at reducing disaster risks, strengthening resilience, and enhancing disaster mitigation. These strategies must consider the different impacts of disasters on men and women, making gender-sensitive disaster management crucial. Additionally, the AHA Centre plays a significant role in managing the Lombok earthquake, serving as a facilitator and communicator by coordinating international aid and assisting the National Agency for Disaster Management (BNPB) in assessing disaster victims. They also provide logistical support to BNPB, which is distributed to the affected communities (AHA Centre, 2018a).

In addressing this question, the research first examines literature related to the AHA Centre's involvement in Southeast Asia disaster management. Previous research on AHA Centre's involvement in disaster management is scarce and primarily focuses on providing aid without deeper scrutiny or criticism of the actual disaster management processes. Nonetheless, the previous research provides general insights into AHA Centre's disaster management efforts. Such research include "The Role of AHA Centre in Earthquake Disaster Management in Myanmar in 2012" (Ushamah, 2018), "The Role of AHA Centre in Disaster Management in Southeast Asia through the ASEAN Agreement on Disaster Management and Emergency Response" (Kharisma, 2017), "The Role of AHA Centre in Earthquake Disaster Management in Central Sulawesi" (Heru, 2019), "Interfering Via ASEAN? In the Case of Disaster Management" (Suzuki, 2021), "Gender mainstreaming efforts in disaster management plans: Case study West Nusa Tenggara Province, Indonesia" (Septanaya & Fortuna, 2023), "Implementing the ASEAN Agreement on Disaster Management and Emergency Response for Better Coordination and Simplification Procedures" (Triyana et al., 2022) "Beneficiary Centric Decision Support Framework for Enhanced Resource Coordination in Humanitarian Logistics: A Case Study From Asean" (Giuseppe et al., 2022). These studies indicate that ASEAN's efforts through AHA Centre often remain limited to emergency response and frequently do not extend to comprehensive assistance and recovery, particularly gender-based recovery. This limitation implies that AHA Centre's efforts are mostly reactive and may not adequately consider gender and vulnerable populations during the provision of assistance to the victims of the 2018 Lombok earthquake.

The research also highlights various literature discussing gender approaches to disasters, such as research by Nuriana et al. (2019), which focuses more on pre-disaster mitigation efforts based on sensitive gender. Thus, its focus differs significantly from this research, which concentrates on post-disaster contexts. Another relevant research is by Mustika (2022). The research indicates a different focus that utilizes the perspective of International Governmental Organizations (IGOs) in disaster management involvement. The researcher observes that the exploration of regional organizations, particularly their disaster management agencies' involvement in gender-based disaster management, remains inadequate, resulting in a knowledge gap.

Besides focusing on various literature related to gender approaches in disasters and AHA Centre's role, this research also scrutinizes how intergovernmental organizations (IGOs) like ASEAN act in a masculinist manner by neglecting gender approaches in disaster management. This neglect stems from ASEAN's non-intervention principle, leading member states to believe that domestic issues should be handled domestically, as they are deemed capable of handling them. This shared understanding often leads to individual states not relying on ASEAN institutions and may result in suboptimal responses to non-traditional security threats, such as disasters, which often disproportionately affect women. This contrasts with the positive sovereignty perspective proposed by Ronzoni (2012). Ronzoni (2012) states that sovereignty enables states to secure their citizens' sovereignty and allows politics to determine their destiny. However, this concept overlooks the masculinist aspects reflected in governance by a few individuals who glorify power, as evident in the handling of the Lombok earthquake by the government and the AHA Centre. The lack of adequate facilities such as tents, gender-friendly toilets, gender-disaggregated victim data, and instances of rape and sexual violence due to the absence of disaster facilities, as well as the suboptimal assessment efforts by governments and ASEAN during disaster management, indicate that gender is often overlooked.

Therefore, this research aligns with perspectives suggesting that state actors and intergovernmental organizations tend to overlook other identity attributes, such as gender, as argued by Kantola (2007). Research by Kantola is consistent with studies by John Hofman (2001), Beyen (2020), and Kuokkanen (2019), which criticize states and intergovernmental organizations for prioritizing masculinist actions due to the concentration of power in a few individuals. The neglect of gender attributes resulting from the masculinist nature of IGOs will be examined through gender mainstreaming to delineate various indicators of whether disaster management is gender-based or not. This research also outlines how gender-based disaster management should be conducted to meet practical and strategic needs for implementing gender-sensitive disaster management. The research findings indicate that variables in both concepts are heavily influenced by the masculinist attitudes of ASEAN leaders, leading to suboptimal efforts in mainstreaming gender and sensitivity in disaster management.

This research offers a new perspective on the influence of masculinity on the implementation of IGO policies, such as AHA Centre for disaster management. Moreover, ASEAN as the AHA Centre's coordination partner in disaster management has committed to gender-responsive implementation since 2015. This research is structured into four main sections: an analytical framework encompassing gender mainstreaming (GM) and gender sensitivity (GS); research methodology covering data collection and research methods used; analysis and discussion consisting of two sub-sections, the 2018 Lombok earthquake and AHA Centre's role in gender-based disaster management in 2018. Finally, the conclusion briefly explains the research findings.

Analytical Framework

Gender Mainstreaming

Gender mainstreaming is a strategy devised to integrate gender as an integral dimension of planning, formulation, implementation, monitoring, and evaluation of development policies and programs. Moreover, gender mainstreaming aims to achieve gender justice and equality, which is an effort to uphold the rights of women and men to equal opportunities, equal recognition, and equal respect in nation-building, nationalism, and community (Menteri Negara PPPA, 2014). The implementation of gender mainstreaming in development is a strategy to ensure that women and men have equal access to resources, participate in decision-making processes, have equal opportunities and chances to control, and receive the same benefits from a policy. This is further emphasized by the UNDP's Eight Points Agenda for Women's Empowerment and Gender Equality in Crisis Prevention and Recovery, which includes five gender mainstreaming points that are relevant and can be applied in the context of disaster risk reduction and recovery. Those five points are enhancing women's security in crises, increasing and expanding women's participation and leadership, promoting gender equality in disaster risk reduction, ensuring gender-responsive recovery, and building capacity for social change (Asri et al., 2022).

Thus, gender mainstreaming is a strategy to achieve gender equality and justice through policies and programs that take into account the experiences, aspirations, needs, and issues of women and men in planning, implementing, monitoring, and evaluating of all policies and programs in various areas of life and development (ASEAN, 2021). The goal of gender mainstreaming is to ensure that women and men have equal access to development resources, participate equally in the development process including decision-making processes, have equal control over development resources, and receive equal benefits from development outcomes. By knowing these four aspects, gender gaps can be identified, ultimately aiming to identify gender issues and how to address gender gap issues in various situations. Through these means, efforts can be made to minimize or even eliminate gender gaps by formulating gender-responsive policies, programs, and activities (Martiani, 2011).

Essentially, gender mainstreaming (GM) is about incorporating women into the mainstream of national and societal development as citizens with equal rights and obligations as men, realizing gender justice and equality in the family, society, nation, and state through planning, organizing, implementing, monitoring, and evaluating national development policies and programs (Wiasti, 2017). Moreover, gender mainstreaming creates institutional mechanisms for the advancement of women in all fields of community and governmental activities and life. The emphasis on GM's objectives for the advancement of women is due to the patriarchal culture in Indonesia, especially Lombok, which prioritizes males. So, women bear the brunt of its impact, although gender injustice can also be experienced by men. although men can also experience gender injustice.

The implementation of GM in various development fields, such as post-disaster recovery efforts, aims to ensure whether men and women have truly equal access to development resources and receive equal benefits from development outcomes. In other words, this concept is used to analyze various indicators (access, participation, control over resources, and benefits from policies and programs) to assess whether gender needs are being met for disaster victims in Lombok. The GM indicators used in this study are generally applicable and can be universally applied to the research theme, including disasters, which the National Agency for Disaster Management (BNPB) has also incorporated into its GM efforts for disasters through BNPB Regulation No. 13 of 2014 (BNBP, 2014). This concept also guides BNPB in identifying three disaster management issues from a gender perspective such as gender responsiveness (activities or conditions that support the implementation of gender roles, like women managing disaster relief centers), gender bias (activities or conditions that prevent the execution of gender roles), and gender neutrality (activities or conditions that do not address the roles of men and women, such as disaster risk maps) (UNDP, 2018). Moreover, this concept aims to identify various basic rights in gender mainstreaming or conditions faced by disaster victims, especially women, children, and other vulnerable groups, due to the disaster management actions carried out by the AHA Centre in conjunction with the government.

Gender-Sensitive

A gender-sensitive approach relates to the needs of both men and women. However, it emphasizes meeting the needs of women as they often represent a group with higher vulnerability in disasters. This approach can promote equality, including distributive resources, in the context of disasters. Thus, a gender-sensitive approach means efforts to increase understanding and awareness of the biological and socio-cultural differences between men and women that lead to unequal conditions. It should be promoted to make disaster risk reduction effectively target vulnerable groups, particularly women. Disaster management cannot be done neutrally without considering gender differences. This is based on the differing conditions experienced by men and women influenced by biological and socio-cultural aspects (Ariyabandu, 2009). Ariyabandu (2009) further states that the biological aspect relates to conditions such as menstruation, pregnancy, childbirth, childcare, and breastfeeding, requiring care and protection compared to men who do not have these functions. Based on these conditions, men and women literally differ in reproductive functions, so women's needs require more attention.

Meanwhile, the socio-cultural aspect relates to the gender social construction in a society where unequal relationships are caused by economic, social, political, cultural factors, male domination, and marginalization of women's knowledge and actions that are neither acknowledged nor valued during disasters (Ariyabandu, 2009). Such conditions are gender issues that cause injustice and inequality, making women an excluded group in natural disasters.

Discussions about gender-sensitive disaster management can also be seen from the perspective of Moser (1995), who sees gender-sensitive activities as needing to be based on practical needs and strategic needs of gender. Practical needs aim to improve environmental

conditions to be adequate for survival, while strategic needs relate to the conditions needed to change the subordination position of women to achieve equality. There are several practical needs in disaster management.

First, gender-sensitive data activities involve collecting data related to mapping the potentially affected people and identifying gender-determined roles (Goldin et al., 2019). The need for gender-sensitive data availability contributes to improving disaster response effectively and efficiently. This activity is carried out in disaster mitigation to map vulnerable groups who are likely to be affected by disasters. Vulnerable groups that need to be surveyed include women, the elderly, children, people with mental disorders, and disability survivors. In addition, gender-sensitive data collection also relates to data on deaths and morbidity separated by gender, which can also contribute to a fairer and more efficient disaster management system (Nuriana et al., 2019). This system allows for identifying trends before and after disasters and enables responses tailored to actual needs.

Second, physical infrastructure involves strengthening infrastructure to be more resilient to disasters so that when infrastructure is damaged, it does not threaten human life. Well-designed infrastructure, proper locations, and affordable prices can be powerful tools in pursuing gender equality. In the context of disaster management, particularly emergency response, efforts to strengthen infrastructure resilience to disasters are divided into two categories: housing and shelter. Resilient housing and shelter based on a gender perspective emphasize several aspects such as safe locations from disasters, access to bathrooms and sanitation, access to health services, and protection from potential crimes. Safe housing and shelter locations from potential disasters will prevent additional impacts due to disasters (Goldin et.al, 2019). This is because housing and shelter locations and arrangements can affect the perceived safety of disaster victims. Unsafe access to bathrooms and sanitation areas in shelters is often reported as places where abuse of women occurs. Various studies show factors that influence sexual violence due to unsafe access to bathrooms and sanitation. Safe access means that hygienic areas must be adequate and culturally appropriate. Bathrooms and toilets are best separated by gender; placing women's and men's bathroom areas somewhat apart from each other and having sufficiently bright areas can also enhance privacy. If culturally necessary, women's hygienic areas should also include separate areas for washing and drying clothes or pads during menstruation (Nuriana et al. (2019),.

Third, human development involves physical strength and health conditions that can affect individuals' resilience to disasters. The level of strength depends not only on certain biological factors, such as gender, but also on general physical conditions, nutrition, and health. In poor households that sometimes experience a lack of nutritional resources for a long time, there is often a hierarchy that determines household members' access to food. In this context, the need for adequate living conditions, such as health care and access to clean water and sanitation, is required. Post-disaster environmental health problems often occur due to a lack of clean water sources and adequate sanitation. Ashraf and Azad (2015) state that good sanitation and clean water will reduce the prevalence of diseases, increase productivity, and reduce pollution from water sources. Furthermore, two factors that influence community efforts to obtain clean water are water availability and the ability to obtain water. Water availability is supported by the existence and abundance of clean water sources that meet quality standards and good environmental conditions that can maintain water conditions and availability (Ashraf & Azad, 2015). There are three factors that influence the community's ability to obtain water: water collection locations, water allocation, and community capacity.

Fourth, knowledge dissemination related to disaster awareness is an important aspect in reducing disaster risk. Knowledge dissemination means recognizing signs of impending disasters and the best ways to act, which are prerequisites for effective disaster response. In this context, men and women need knowledge of the signs and responses to possible disasters. It means that men and women have equal capacity to deal with disasters. In planning knowledge dissemination, gender should be considered when choosing methods based on literacy levels, mobility, access to public places, work schedules, and general preferences for participation facilities (Nuriana et al., 2019).

After looking at the practical gender needs in disaster mitigation, the next step is strategic gender needs. Strategic needs relate to the conditions needed to change the subordination position of women to achieve equality. Disaster management includes strengthening women's decision-making power, increasing favoritism toward leadership positions, and protecting them from violence. The purpose of activities that encourage the fulfillment of strategic gender needs is to solve gender inequality issues in disasters. First is negative labeling or stereotypes. Women are often labeled with gentle qualities, while men are considered strong. This labeling makes women always placed in weak, powerless, and unable to be leader conditions. Meanwhile, men are considered able to help themselves and be leaders. Second is ranking or subordination, which means there is an assumption that one gender is more important than the other. Since ancient times, women have been viewed as lower than men (Murtakhamah, 2013). In disaster situations, women are disadvantaged because their needs as women are often overlooked. Specific women's needs, such as sanitary pads, underwear, and other reproductive health tools, are often unavailable. This way seems to strengthen the view that women's task is to cook. Third is economic marginalization. The marginalization process results in one gender being neglected in resource access. In disaster situations, women often cannot access assistance because they are considered not the main breadwinner or head of the household. This situation is very disadvantageous, especially for women who have to be the head of the household either before or after the disaster occurs. Fourth is the double burden. One gender often must perform multiple tasks at once. In disaster situations, women often experience a double burden. Women almost do 80% of household chores starting from providing food, taking care of children, and caring for sick and elderly people. However, on the other hand, women are also burdened with collecting firewood, clean water, and seeking help.

Thus, several approaches must be implemented by various parties involved in disaster management. These include involving women in training and increasing the participation of both men and women in decision-making and empowerment processes, providing equal access and control over goods, services, information, and productive resources across gender gaps, ensuring the involvement of all gender groups in decision-making and empowerment processes by addressing their specific needs and perceptions related to disaster risk reduction, systematically applying a gender perspective to enhance gender sensitivity in disaster risk reduction, and introducing policies aimed at addressing gender mainstreaming issues in society. Additionally, women must be empowered to enhance their adaptability to disaster risks. If all parties adopt these steps to increase gender sensitivity within society, the country will significantly improve disaster risk mitigation and management (Zeeshan, et al., 2019). Therefore, efforts can be maximized to meet strategic needs, such as increasing women's strength in decision-making, favoritism toward leadership positions, equal access to work, equal legal rights, protection from violence, reproductive rights, and increasing mobility for women.

Gender sensitivity in this research is used to analyze whether disaster management based on gender sensitivity has been implemented by the AHA Centre based on Moser's approach regarding the fulfillment of practical needs (gender-sensitive data, legal infrastructure, physical infrastructure, human development, and knowledge dissemination) and the fulfillment of strategic needs (increasing women's strength in decision-making, increasing favoritism towards leadership positions, equal access to work, equal legal rights, protection from violence, reproductive rights, and increasing mobility for women) (Moser, 1995).

Methodology

This research adopts a qualitative approach, applying an interpretative framework to understand or interpret phenomena based on the meanings attributed to them by individuals. Qualitative research involves the collection and utilization of various empirical materials, which may stem from case studies, personal experiences, interviews, observations, history, interactions, and texts that depict both routine and problematic moments, as well as meanings in an individual's life (Guba & Lincoln, 2005). Document analysis is conducted by gathering literature, news, and official documents from the government related to the handling of the 2018 Lombok earthquake. Regarding official documents, several disaster management reports are obtained directly from the AHA Centre website and official reports from the Indonesian National Agency for Disaster Management (BNPB) website regarding the lessons learned from the 2018 Lombok earthquake. Furthermore, this research also searches various websites to obtain information regarding the ASEAN regional framework on gender in disaster management to ascertain whether this framework has been applied to handling the Lombok earthquake disaster. Additionally, the researcher uses news reports from official websites of national and local news agencies to delve deeper into information regarding the handling of the Lombok earthquake disaster, particularly concerning the aid provided, the disaster management process, the parties involved, and the impact of the disaster management efforts. This stage helps uncover strategic narratives in the formation stage and projecting arguments. Thus, for the initial research design, the researcher conducts pre-research by reviewing the literature on gender approaches in disaster management or recovery. Regarding the research location, as this research is related to the post-disaster period of the 2018 Lombok earthquake, the research location is in several areas severely affected by the disaster, such as North Lombok Regency, East Lombok, and West Lombok (BNPB, 2018).

After determining the areas for field data collection, the researcher selects methods for collecting field data through interviews, observations, and documentation. The interview method is done by gathering data through direct interviews with victims (women), various stakeholders from government agencies and non-governmental organizations (Regional Disaster Management Agency, Provincial Social Service Agency, District Social Service and Women and Children Protection Agency, Koslata NTB, and other relevant parties. Then, voice recorders and notes are used to record all the information. Subsequently, the observation method is done by observing the damage and conditions of disaster victims. This research also explores the perspectives of Intergovernmental Organizations (IGOs), specifically the AHA Centre, through various official reports related to the handling of the 2018 Lombok earthquake, as well as literature studies related to gender issues from the perspective of state sovereignty and international organizations on disaster studies. It is used to deepen the gender perspective on disasters and how ASEAN masculinity can limit the fulfillment of fundamental needs that are often overlooked even in emergencies.

Following the selection of documents and informants, the research proceeds with analysing various sources to determine the gender responsiveness of disaster assistance provided by the AHA Centre. The initial step involved employing content analysis to assess whether gender mainstreaming strategies were integrated into the handling of the 2018 Lombok earthquake disaster. Content analysis, a research tool used to identify specific words, themes, or concepts within qualitative data, measures and analyzes the presence, meaning, and relationships of these elements in the collected text data, including interviews, focus groups, documents, and participant observations. Additionally, gender mainstreaming is applied to identify fundamental rights or challenges faced by disaster victims, especially women, focusing on access, participation, control, and benefits. The gender sensitivity concept, based on Moser's (1995) approach, was also employed to evaluate whether gendersensitive disaster management had been implemented by the AHA Centre, considering practical needs such as gender-sensitive data, legal infrastructure, and knowledge dissemination.

Discussion and Analysis

The 2018 Lombok Earthquake

Historically, Indonesia is prone to natural disasters such as volcanic eruptions, earthquakes, tsunamis, floods, cyclones, and landslides. This susceptibility is attributed to Indonesia's geographical location, situated at the convergence of the Eurasian, Indo-Australian, and Pacific tectonic plates. These disasters can result in the loss of human lives, environmental damage, property loss, and psychological impacts that, under certain circumstances, can hinder national development. One significant disaster was the earthquake that struck Lombok Island, West Nusa Tenggara Province (NTB), in 2018. The earthquakes on

Lombok Island occurred several times in close succession. First, on July 29, 2018, at 06:47 WITA (Central Indonesia Time) the earthquake struck with a magnitude of 6.4 Richter Scale (SR). Second, on August 5, 2018, at 18:46 WITA, the magnitude reached 7.0 SR. Third, on August 9, 2018, at 12:25 WITA, an aftershock struck with a magnitude of 6.2 SR. Fourth, the earthquake with a magnitude of 6.9 SR occurred on Sunday, August 19, 2018, at 22:56:27 WITA (BNBP, 2018).

This earthquake has caused 564 fatalities, 6,774 injuries, and 417,529 displaced individuals. Additionally, the earthquake caused significant damage to at least 75,138 heavily damaged houses, 33,075 moderately damaged houses, and 108,306 lightly damaged houses. Public and social facilities affected by this earthquake included 855 schools, 12 markets, 61 hospitals and health centers, and 389 places of worship. BNPB data indicated total losses amounting to IDR 12.15 trillion. This number encompasses building damages totaling IDR 10.15 trillion and economic losses amounting to IDR 2 trillion (Bakti & Nurmandi, 2020). Given the massive impact of the Lombok earthquake in 2018, immediate and holistic disaster mitigation efforts are required. In Indonesia, disaster mitigation efforts are conducted through three stages: pre-disaster, emergency response, and post-disaster. The pre-disaster stage aims to reduce disaster risks and implement various preventive measures. During the emergency response stage, activities include assessment, determination of disaster emergency status, rescue and evacuation of communities, provision of basic needs, protection of vulnerable groups, and immediate recovery of vital infrastructure and facilities. Meanwhile, in the postdisaster stage, disaster mitigation efforts are carried out through rehabilitation and reconstruction (BNBP, 2018).

During the emergency response stage, earthquake survivors require significant logistical assistance, such as tarpaulins, tents, food, clean water, clothing, blankets, diapers, and nutritious food for infants and toddlers. Unfortunately, during the initial phase of the earthquake, aid distribution is uneven due to the difficulty of accessing disaster displacement people locations, often inland. Moreover, damaged roads and bridges caused by the earthquake impeded transportation access for aid distribution (Wardah, 2018). Additionally, inadequate coordination in aid distribution leaves the community needing clarification. It is important to note that many independent parties provide logistical assistance to disaster displacement people without cordinating with the Regional Disaster Management Agency (BPBD) and the National Agency for Disaster Management (BNPB) through existing clusters to regulate logistical assistance distribution (Badan Nasional Penanggulangan Bencana, 2018). Apart from the lack of established coordination, suboptimal distribution of logistical assistance is influenced by limited human resources (HR) involved in emergency response efforts, especially competent HR in their respective fields. This is attributed to the lack of comprehensive training to develop managerial skills and abilities. The training is ensuring that HR involved not only understands existing policies and regulations but can also plan and manage resources assigned to support emergency disaster operations. The scarcity of trained personnel in warehouse operations, loading, and logistics distribution in the field affects the speed of logistical distribution and aid to the community. It is not surprising that there are delays and disparities in aid distribution after a disaster, prompting the government to continue collaborating with other institutions such as community organizations, businesses,

and international organizations like the AHA Centre. The involvement of various parties is regulated in Law Number 24 of 2007 of the Republic of Indonesia. It concerns the three pillars of disaster management actors highlighting the crucial need for interagency cooperation in disaster mitigation efforts with massive impacts such as the 2018 Lombok earthquake (BNBP, 2018).

The Role of the AHA Centre in Gender-Based Disaster Response to the 2018 Lombok Earthquake

As a disaster coordination agency in the ASEAN region, the AHA Centre has longstanding disaster cooperation with Indonesia since its establishment on November 17, 2011. Indonesia and nine other ASEAN member states agree to form the AHA Centre to assist in disaster management in the ASEAN region. In operationalizing its mandate, the AHA Centre primarily collaborates with the National Disaster Management Organizations (NDMOs) of ASEAN member countries. Additionally, the AHA Centre partners with international organizations, the private sector, and civil society organizations, such as the Red Cross and Red Crescent Movement, the United Nations (UN), and the AADMER partnership group. Moreover, the AHA Centre engages in multilateral cooperation with ASEAN Dialogue/Development/Sectoral Partners, including Australia, China, the European Union, Germany, Japan, New Zealand, Switzerland, and the United States. With the extensive cooperation facilitated by the AHA Centre, the institution can mobilize more resources through coordination with ASEAN leaders and global partners (AHA Centre, 2019). This coordination represents the implementation of the ASEAN Community pillar in the form of the ASEAN Socio-Cultural Community, which focuses on the environment as well as disaster response and management (Velasco, 2023).

In the case of the Lombok earthquake, the AHA Centre initiated contact with the leadership of BNPB on August 5, 2018, by sending a letter of condolence and offering assistance. The Indonesian government responded positively, allowing the AHA Centre to assist in the disaster response on Lombok Island (AHA Centre, 2018b). Immediately after the Lombok earthquake, the AHA Center acted swiftly by disseminating initial information about the situation and conditions through the ASEAN Disaster Information Network (ADINET), obtained from coordination between the AHA Centre and BNPB. In this regard, the AHA Centre deployed staff from BNPB's Data and Information Center (Pusdatin) to support the dissemination of official information to international stakeholders. The action by the AHA Centre represented the initial phase of disaster response, focusing on mitigation, which allows for an excellent regional risk assessment and early warning activities, emphasizing crossborder issues that require international cooperation, thereby benefiting the region, planning for more inclusive disaster recovery, and targeted mitigation and response efforts (AHA Centre, 2018b).

In fulfilling its mandate, the AHA Centre was assisted by an In-Country Liaison Team (ICLT) deployed by the AHA Centre to Lombok Island on August 6, 2018, to support coordination in the field. Subsequently, the AHA Centre continued its role by deploying the

ASEAN-Emergency Response and Assessment Team (ASEAN-ERAT) to Lombok Island as part of the emergency response (AHA Centre, 2018b). Simultaneously, the ICLT assisted ASEAN-ERAT in facilitating the receipt of ASEAN logistical aid items. Furthermore, the AHA Centre, through ASEAN-ERAT and ICLT, supported the establishment of a Mobile Storage Unit (MSU) at Lombok International Airport as the main entry point for domestic aid items from various locations in Indonesia. ASEAN-ERAT and ICLT, along with BNPB and BPBD, completed the establishment of the MSU for storing aid items at the airport, considering that the airport is one of the main entry points for domestic aid. The coordination between ASEAN-ERAT, BNPB, and ICLT represents the next step in the disaster response phase, focusing on recovery by conducting damage and loss assessments within one month after the disaster, mobilizing resources from local, regional, and international communities to support recovery efforts (AHA Centre, 2018b).

All ASEAN-ERAT members began their deployment between August 8 and 9, 2018, and completed their deployment on August 15, 2018. Meanwhile, BNPB welcomed ASEAN-ERAT to learn from Indonesia's experiences in managing disasters and receive briefings on ongoing emergency operations. Furthermore, ASEAN-ERAT also conducted damage assessments at 17 locations in the Gunung Sari and Batu Layar sub-districts (West Lombok Regency) together with local BPBD and BNPB teams. Additionally, ASEAN-ERAT provided evacuation plans to the West Lombok Regency BPBD and BNPB for evacuation sites in the regency. All data and recommendations from ASEAN-ERAT were conveyed to the Disaster Emergency Post (PDB) in West Lombok Regency and the national coordinating post (Pospenas) as part of efforts to provide a comprehensive understanding of damage, impacts, and humanitarian needs (AHA Centre, 2018b).

The second handover of aid items from the AHA Centre was conducted on August 15, 2018, with additional family tents totaling 178, family kits totaling 192, and personal hygiene kits totaling 420 as shown in Figure 1. The logistical aid items were shipped after the first shipment on August 13, 2018, consisting of 172 family tents. The third phase of aid shipment to deliver the remaining items was carried out from August 20 to 22, 2018, providing health and hygiene kits totaling 380 and family kits totaling 108. The distribution of aid items was based on releases from BNPB and agencies at the post on August 12, 2018, or a day before the first shipment of logistical aid items. The most urgent humanitarian needs were logistical assistance for 419,424 disaster displacement people, as follows: tents, blankets, mattresses, ready-to-eat food, WASH (clean water, sanitation tools), telecommunications, medicine, clothing, trucks for aid distribution, and electric generators for lighting (AHA Centre, 2018b).

These aid items are then coordinated by the AHA Centre to ASEAN member states. The AHA Centre facilitates the mobilization of aid items from ASEAN member states through the ASEAN Emergency Disaster Logistics System (DELSA) from Subang to Kuala Lumpur International Airport. A total of 30 tons of aid items are divided into three sorties and sent to Lombok. Through this method, the AHA Centre can prepare aid that can be offered to disaster-affected countries before being requested. It aligns with the AHA Centre's function of operating and facilitating regional coordination mechanisms for disaster preparedness and emergency response. The AHA Centre establishes a regional stockpile (DELSA) that serves as

a storage facility for items typically needed during natural disasters so that when needed, logistical aid can be immediately mobilized (AHA Centre, 2018b). Thus, the system used by the AHA Centre currently supports sudden and unforeseen disasters such as earthquakes, tsunamis, and volcanic eruptions, even though the DELSA network structure in ASEAN leads to high operational costs, which threaten its long-term sustainability (Giuseppe, 2022). In the case of handling the Lombok earthquake, especially in terms of emergency response mechanisms, the AHA Centre is acknowledged to have good readiness. This can be seen from the AHA Centre's promptness in producing disaster situation reports, deploying ASEAN-ERAT teams to assist BNPB in assessing post-disaster damage and losses and providing logistical aid relatively quickly after the disaster.



Figure 1. Distribution of ASEAN Aid Items in Lombok

Source: AHA Centre Situation Update No. 8 (2018b)

In the Lombok earthquake disaster, the AHA Centre also became a facilitator and communicator, whereby its mechanism acted to inform and coordinate offers of international aid to be accepted by Indonesia. This stems from the case of the 2004 Aceh tsunami, where the unrestricted acceptance of international aid led to uncontrolled aid inflows, triggering risks to ongoing emergency response. This condition is because of the absence of an institution like the AHA Centre that can coordinate potential aid providers. Consequently, Indonesia faces issues of piled-up aid and uneven distribution to disaster victims. Therefore, in the case of handling the Lombok earthquake, the AHA Centre, through its collaboration with BNPB and BPBD, coordinates various incoming external aids, thus mitigating concerns about uncontrolled aid influx.

In its implementation, the AHA Center has several shortcomings in assisting the handling of the Lombok earthquake, especially regarding gender mainstreaming efforts, considering that the AHA Centre implemented a gender-responsive declaration in 2015.

ASEAN also agreed upon a 10-year vision (ASEAN Vision 2025) where gender became a key agenda for regional development (ASEAN, 2021). Hence, the handling of the Lombok earthquake in 2018 should have taken into gender mainstreaming and sensitivity aspects. In this regard, the concepts of gender mainstreaming and gender sensitivity are crucial to determine whether various gender needs indicators have been met. These indicators include access, participation, control over resources, and the benefits of programs and policies. Moreover, various gender mainstreaming indicators will be juxtaposed with gender sensitivity to delineate disaster management that is sensitive to gender needs. This is because the expected changes from gender mainstreaming include transforming individuals, communities, or institutions from being initially gender-blind and biased to becoming gender-responsive and ultimately gender-sensitive.

1. Access

Access refers to fair or equal conditions for women and men, including children, the elderly, youth, persons with disabilities, and other vulnerable groups, to access information and humanitarian aid following a disaster. This emphasizes the ease of obtaining information and aid from various parties to the community fairly and equally. Access to information can include disaster preparedness activities conducted by the government or related agencies to provide information on disaster preparedness. Meanwhile, access to humanitarian aid means that women also have the right to access aid equal to men (BNPB, 2014). In the case of the Lombok earthquake, the strong patriarchal culture limited women's access. For example, various stakeholders conducted disaster preparedness efforts post-Lombok earthquake due to predictions of aftershocks.

Mitigation efforts in disaster-prone areas are carried out by disseminating information through counseling and cadres on disaster preparedness. Once again, gender inequality occurs because women's roles in Lombok regarding disaster preparedness were very limited due to gender structure inequalities in society. Due to their predominantly public roles, adult men have the greatest opportunity to access information, including disaster-related information. Through neighborhood meetings, village hall meetings, and invitations to training or special socialization for disaster dissemination, men were often the main participants. At the same time, women, especially housewives, have limited opportunities to access disaster information due to their domestic roles – taking care of children, cleaning the house, serving their husbands, and maintaining household security often limited women's involvement in activities in public spaces (Wiasti, 2017).

The difference in access to information is acknowledged by many parties, although some consider it not a significant issue. The reason is that knowledge transfer models can be used to reach other community components that do not have direct access to information. Unfortunately, in practice, this transfer process does not always work well. Women should also have an equal share in accessing information directly because women are expected to transfer information to their children. Women lack access to disaster preparedness, mitigation, and rehabilitation due to their unique roles and social constructions (Hidayati, 2018). However, as household managers, women often interact with nature, for example, in water use activities, natural resource management, and utilization for food needs. This makes women more sensitive to their environment, not only because most women have traditional wisdom passed down through generations. The limitation of access to information from a gender-sensitive perspective can be explained through knowledge dissemination where unfavorable situations affecting women make it difficult for them to access information, which can be prevented by choosing appropriate information dissemination methods based on literacy levels, mobility, access to public places, and general preferences for participation means (Nuriana et al., 2019).

During the evacuation period, not only women have minimal access to information but also, they often face challenges and difficulties in distributing emergency aid. In the case of Lombok Island, most aid tends to be distributed to men, usually as heads of households, thus neglecting women who are also heads of households. However, in the Lombok earthquake case, the number of disaster displaced women is much larger than that of men, making access to aid for women with gender sensitivity crucial. This is crucial because there is a perception that one gender is more important than the other. Historically, women have been viewed as inferior to men (Taqiuddin et al., 2021). In disaster situations, women are disadvantaged because their needs as women are often overlooked. For example, in distributing special aid for women, the aid received is usually related to domestic activities such as cooking. Women's needs, such as sanitary napkins, underwear, and other reproductive health supplies, are often overlooked. This approach reinforces the perception that women's roles are limited to cooking. For vulnerable groups such as elderly women, long sarongs and traditional underwear are often not included in the aid list because it is considered replaceable by bras.

During the early stages of the disaster, disaster displacement people, especially pregnant women and children, do not receive special attention to their needs. However, babies and children fall into the vulnerable group along with pregnant women, the elderly, and people with disabilities. This group should receive special treatment. Special aid packages for women, such as those equipped with sanitary pads and underwear, are only sometimes available. The same goes for food and baby formula. Most children eat the same food as their parents, dominated by instant noodles. They also live together in emergency tents. This situation is because the concentration of aid is still on the most basic needs, such as staple food, water, and shelter. This condition causes the needs of women and children to not receive special attention after the earthquake in Lombok (Nur, 2018).

2. Participation

Participation provides opportunities for both men and women to convey aspirations, support, objections, or judgments in the policy or activity processes, especially in this case related to disaster management for victims. Regarding participation indicators, they can be seen during the disaster victim assessment process. This assessment is a consultation that involves all relevant community groups in policies and programs to apply the rights, views, knowledge, and experiences of each group to the situation they

are facing. However, in the case of the 2018 Lombok earthquake, consultation and feedback processes tended to be conducted by male groups and tended not to involve women's decisions. Inadequate assessment efforts from various parties, including the Indonesian government and the AHA Centre through the ASEAN-ERAT team, regarding the needs of the victims of the 2018 Lombok earthquake are mainly due to the strong patriarchal system on Lombok Island, which is known to uphold patriarchal cultural values firmly. As a result, women do not have economic, social, political, psychological, and personal rights that they should decide for themselves.

The failure to fulfill the services received by women's rights is caused by the assessment process conducted by the AHA Centre and the government regarding damages, losses, and needs, mostly relying on information and feedback from men only. The patriarchal culture that positions women in inferior situations, focusing women on domestic roles, often makes women's voices unimportant in the public domain. Even in many cases of decision-making, men's voices are considered to represent all family members. The assessment efforts by the government and ASEAN in this matter are not optimal in touching sensitive and crucial matters during disaster handling, which is a gender approach for all victims. Various ASEAN and government aid also have not been optimal in paying attention to the needs of vulnerable groups, such as special breastfeeding tents for women. Moreover, the scarcity of logistical availability, such as special women's tents, emergency toilets, and bathrooms, makes it difficult for women to move freely. In some cases, women have experienced harassment and sexual violence after the Lombok disaster. Not only in the assessment process but efforts during the emergency disaster preparedness period, namely three to seven days after the earthquake, most women in Lombok also play a minimal role in managing evacuation sites, such as organizing the layout of evacuation sites, creating separation barriers between men and women or family units, such as partitions in hospital rooms, or separation of facilities (public shared facilities for bathing, washing, and waste disposal) for men and women.

The implementation of gender-blind assessments is also because assessments related to the victims were not segregated by gender. The National Disaster Management Agency (BNPB), along with the ASEAN Coordinating Centre for Humanitarian Assistance on Disaster Management (AHA Centre), only provide information that the number of fatalities was 564, and once again, the categorization of disaster victims was not based on gender. In this regard, BNPB and the AHA Centre assess disaster displaced people numbers based on gender. However, they do not try to focus on other victims who might need attention, especially vulnerable groups. The vulnerable groups that need to be documented include the elderly, children, people with mental disorders, and survivors with disabilities, which unfortunately were not carried out by the government and the AHA Centre as shown in Table 1. Furthermore, based on gender-sensitive strategies, such as the collection of gender-sensitive data and gender-based death and morbidity data, can contribute to a fairer and more efficient disaster management system. This allows for the identification of trends before and after disasters, enabling responses tailored to actual needs (Nuriana et al., 2019).

Location Parameter	East LombokRegency	North LombokRegency	West LombokRegency	Central LombokRegency	Mataram City
Affected population (exposed to earthquake intensity V-VIII MMI) Population displaced	1,192,110 104,060	218,533 178,122	685,161 116,453	939,409 N/A	477.476 18,894
(% of affected) (BNPB)	104,000	170,122	110,455	1 1/1	10,094
Families displaced (BNPB)	35,329	47,048	29,166	N/A	4,275
Fatalities	31	466	44	2	9
Serious injuries	122	829	399	3	63
Light injuries	95	392	189	18	89
Damaged buildings:					
- Heavy damage	2,938	12,546	11,925	9	110
- Moderate damage	0	0	0	722	25
- Light damage	2,853	5,328	11,701	4,036	619
Initial estimation of economic damage and loss <u>(BNPB)</u>	IDR 417.3 billion/USD 284.5 thousands	IDR 2.7 trillion /USD 184 million	IDR 1.5 trillion/USD 102 million	IDR 174.4 billion/USD 118.9 thousands	IDR 242.1 billion/ USD 165 thousands

Table 1. Casualties in Lombok Island following the 2018 Lombok Earthquake, Indonesia (maximum recorded number*)

Note: * Consolidated from most recent release from BNPB and Lombok Earthquake Command Post Source: AHA Centre Situation Update No. 8 (AHA Centre, 2018b)

3. Control

Control refers to the mastery of resources, whether technological, informational, or knowledge based. Control relates to the roles of individuals, whether they are dominated by a certain gender or sex, in decision-making and policy. In disaster management, control means how both women and men can possess a mastery of technology, information, and knowledge and how decision-making related to disaster management, such as emergency response and recovery efforts, can be dominated by both genders. Regarding information mastery, women tend to have less access related to preparedness, mitigation, and disaster rehabilitation. This is because women's access to information and mobility is more limited, making them more vulnerable in disaster situations. This condition also relates to gender-sensitive strategies such as knowledge dissemination (Nuriana et al., 2019). In the case of Lombok Island, regarding literacy rates and education based on gender, the highest illiteracy rate is found in women at 16.58 percent. Meanwhile, men are at 8.14 percent. The highest female illiteracy rates is in Central Lombok at 23.52 percent, West Lombok at 22.02 percent, and North Lombok at 21.32 percent (BPS NTB, 2017). Literacy rates can also be an indicator to see the development of the population's education. The higher the literacy rate or literacy skills, the higher the quality of human resources. People who can read and write are assumed to have abilities and skills because they can absorb information, orally or in writing.

Besides illiteracy, indicators of information and knowledge mastery can also be seen in school participation. This is because one indicator to assess education access is school participation. School participation indicators provide an overview of the equitable

access and expansion of education services to the population (Hartono, 2021). Based on school participation, the population is grouped into three categories: never or not yet enrolled school, still in school, and no longer in school. Based on data from the Central Bureau of Statistics (BPS) of West Nusa Tenggara province, the percentage of males who have never/not yet enrolled school is 6.98, while females are 11.41. The percentage of males still in school is 26.62, while females are 24.89. The percentage of males no longer in school is 66.40, while females are 63.70 (BPS NTB, 2021). Based on this data, the percentage of female populations who have never attended school is higher than male populations. Conversely, the percentage of male populations.

Regarding gender in knowledge dissemination, some approaches need to be adjusted to the differences in knowledge dissemination for men and women in disaster management, especially illiteracy. Women, as the most affected by illiteracy, would be better served if information is provided through outreach officers or discussions related to disaster management. Unlike men, who tend to get disaster information through electronic devices such as televisions, radios, or smartphones, women are less able to schedule time to listen to various disaster information through these electronic devices because they have many responsibilities, from working as farmers as well as domestic roles at home. Additionally, women prefer an environment where disaster-related questions can be addressed promptly and discussions can evolve (Nuriana et al., 2019). So, in this case, it is important to plan knowledge dissemination considering the differences in roles and time for women and men so that knowledge can be effectively disseminated. In this case, the AHA Centre is more active in providing information online with the aim of disseminating information widely to the international community regarding the handling of the Lombok earthquake. However, various information from the AHA Centre will be difficult for the people of Lombok to access, especially those who are illiterate and do not understand English. Disaster education by BNPB and the AHA Centre is mainly done through online media, where direct disaster education activities are not as active as disaster education through online media. This is because disaster education through online media is considered more efficient and often overlooks other victims who also need information but are hindered by illiteracy.

Women's limited control over disaster management is also influenced by significant differences in the Human Development Index (HDI) between women and men. HDI measures human development achievements based on several basic components of quality of life. As a measure of quality of life, HDI is built through three basic dimensions. These dimensions include a long and healthy life, knowledge, and decent living standards. The HDI between men and women is equally important and should be considered to contribute to achieving full human development, including efforts in post-disaster recovery. However, there is a significant gap between the HDI of men and women when the 2018 Lombok earthquake occurred. The HDI for men reaches 71.68, while women reach 64.78 (BPS NTB, 2018). Even in the years after, the percentage of HDI for men is much higher than for women. It shows that the level of women's HDI is

not experiencing significant improvement. The limited HDI of women limits their involvement in access, participation, and control over disaster recovery efforts.

In addition to looking at gender development conditions through the Gender Development Index (GDI), which can illustrate gender inequality by comparing (ratios) achievements between women's and men's HDI, gender development conditions can also be seen through the lens of the Gender Empowerment Index (GEI). The GEI is an indicator to measure the realization of gender justice and equality based on political participation, economic participation and decision-making seen from two indicators, namely the proportion of men and women as legislators, senior officials, and managers, as well as the percentage of men in professional and technical positions and economic resources measured by estimated income for men and women. The GEI of West Nusa Tenggara in 2018 was 67.3 percent, which marked an increase from the HDI of West Nusa Tenggara in 2014, which stood at 64.31 percent. This figure was below the national HDI average (Bappeda, 2018).

The HDI and GEI conditions between women and men, before and after the earthquake, can also be seen from a gender-sensitive concept called human development. This means that various factors of HDI and GEI owned by men and women affect their resilience in post-disaster situations. Those with unhealthy conditions, low education, and inadequate living conditions will find it difficult to recover from disasters, making them the vulnerable group that needs attention. These three factors are basic approaches in measuring HDI indicators by the Indonesian Central Bureau of Statistics (BPS).

4. Benefits

Gender equality focuses not only on equal access, participation, and control but also on how the results of disaster management activities have fair and equal impacts on both men and women. The report from the Ministry of Women's Empowerment and Child Protection explains that the mastery of benefits must impact the treatment and fulfillment of rights from a gender perspective. However, based on aspects of equal access, participation, and control in disaster management, the benefits received by women are much fewer than those received by men. This is evidenced by the vulnerability experienced by women due to the minimum equality of benefits received by them. As a result of non-sensitive gender aid access and minimal participation by women, their needs at the onset of the disaster were overlooked. In the case of Lombok earthquake, disaster displaced women became victims of harassment and sexual violence due to the lack of sensitive gender logistics such as women's specific tents and toilets for women (Saputra, 2018).

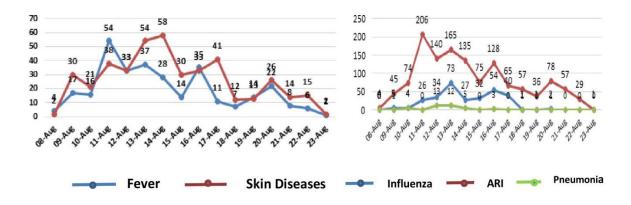


Figure 2. Diseases recorded in Lombok Earthquake: Fever and Skin Diseases (left) and Influenza, Acute Respiratory Infections (ARI), and Pneumonia Diseases (right)

Source: AHA Centre Situation Update No. 8 (AHA Centre, 2018b)

Moreover, displaced women have reported experiencing itching in intimate areas due to their reluctance to change underwear because of the lack of designated places for changing clothes. This has led many of them to contract skin diseases. This can be seen in Figure 2, which details the condition of post-disaster displaced persons released by the AHA Center during the period of August 2018. It was recorded that from August 9 to 23, the number of skin disease cases fluctuated, with the highest number occurring on August 14, with 58 cases, caused by the limited availability of toilets and tents for women. They also fear changing clothes because it often gives mischievous men the chance to peep at them. In addition to skin diseases, according to Figure 2, the displaced persons also experienced fevers due to the lack of logistical facilities, such as tents and medical aid, with fluctuating numbers of cases, and the highest number of 54 cases occurring on August 11. However, the most common disease reported was influenza, with the highest number of cases -206 – occurring on August 11, as a result of poor living conditions and sanitation in the camps, as well as the limited availability of tents. Other diseases, such as acute respiratory infections (ARI) and pneumonia, also occurred for the same reasons as influenza, with more cases than fever and skin diseases. This graph indicates that the overall diseases suffered by the displaced persons were caused by the same issues, namely the lack of tents and inadequate sanitation facilities. This also affected the availability of gender-sensitive logistics, such as tents and toilets specifically for women, which contributed to cases of sexual harassment and skin diseases among displaced women after the disaster in Lombok.

Aside from the lack of a place to change clothes, breastfeeding moms also really need a special area so that they can breastfeed their babies safely and comfortably. In the case of the Lombok earthquake, the Ministry of Women's Empowerment and Child Protection (Kemen PPA) stated that breastfeeding mothers experienced stress and depression. Their condition impacts their breast milk production, which undoubtedly adversely affects their babies' health. Such situations are heavily influenced by the limited availability of logistical support such as tents, toilets, and bathrooms, which are

essential for them to endure difficult conditions. Consequently, many of these disaster displaced women subsequently experience psychological pressure and trauma (Komnas Perempuan, 2021). Besides the psychological impact, this condition also adversely affects the physical health of disaster victims, especially women, children, and other vulnerable groups.

However, in line with the sensitive gender strategy in the form of physical structures, resilient living spaces, and shelters viewed from a gender perspective, attention should be given to several aspects such as secure locations safe from disasters and crime, access to bathrooms and sanitation facilities, and access to healthcare services to prevent post-disaster suffering (Nuriana et al., 2019). Upon examination, this issue arises not only from the uneven distribution of logistical aid at some evacuation points but also because of the minimal participation of women in determining safe tent locations, as tent setup in various evacuation points is mainly done by men. Another contributing factor is that women often do not realize they can play a crucial role in disaster management due to the lack of gender-sensitive mitigation efforts in society and the social constructs that hinder women from maximizing their potential (Few et al., 2021).

Thus, it can be concluded that gender mainstreaming efforts have yet to address the needs of disaster victims adequately. This is because assessing the impact of a network of organizations on an agenda involves several network influences that determine the success of an agenda, such as issue creation and agenda setting, the influence and discursive position of the state and regional organizations, institutional influence and procedures, the influence and policies of actors, targets which may include states, international or regional organizations, or private actors such as multinational corporations, and the influence of state behavior (Dewi, 2023). Unfortunately, masculinity aspects still dominate the implementation of the Lombok earthquake response, resulting in the unmet maximal needs of women, children, and other vulnerable groups. Based on these observations, gender aspects in disaster management cannot be ignored. However, looking at the activities of the AHA Centre during disaster response, it is evident that the AHA Centre does not base its assistance efforts on gender considerations. Therefore, this research elucidates various factors that cause the AHA Centre not to integrate gender into its aid provision.

First, although ASEAN has made various commitments in gender mainstreaming efforts and established various institutions focusing on women's rights and needs, the commitments and institutions outlined previously have been criticized for their poor implementation and lack of real impact. More than two decades since ASEAN's first involvement with gender, the advancement and protection of rights have only been superficially addressed and have not become the region's main agenda. Moreover, there is still no ASEAN instrument explicitly supporting or striving to implement the core aspects of the Women, Peace, and Security (WPS) agenda related to ensuring that women are essential in all aspects of peace and security policy, which requires strong commitment among member states to realize a gender-based regional community (Davies, 2016). Therefore, one of the reasons for the weak implementation of the gender agenda is ASEAN's reluctance towards

overly strong commitments, especially if such commitments may strain the relationships between ASEAN and its member states.

The current cooperation mechanisms suffer from fundamental structural imbalances. Moreover, the coordination among existing ASEAN bodies is convoluted and impractical. In global meetings and in contributing to global initiatives, the ASEAN Secretariat and AHA Centre have collaborated with other entities and adopted many terminologies and frameworks. Such collaboration is necessary in a multiparty environment but needs to be carefully calibrated with the constituencies of each party. In disaster management, this means efforts need to be focused on the local level. Over the past two decades, the ASEAN disaster management community has made significant progress in setting policy priorities within the regional organization. ASEAN provides strong capacity-building programs to help its member states advance disaster management as an important policy agenda, but its local impact remains stagnant. It is increasingly clear that there is an inverse trend in the regional disaster management landscape regarding achieving measurable goals. Regional meetings also face similar criticisms to those in other ASEAN sectors, where these meetings are seen as end goals, and the implementation of their outcomes is done sporadically.

Secondly, the conservative and traditional attitudes of ASEAN's elite leaders regarding the view that men are better political leaders than women indicate that this traditional understanding is deeply rooted. In ASEAN, the percentage of female leaders stands at 35%, much lower than the positions held by men in strategic positions of political power in ASEAN. The same situation occurs at the AHA Centre, where all leaders occupying strategic positions are men. These strategic positions within the AHA Centre, such as the executive director, deputy executive director, director of cooperation affairs, and director of operations, are all held by men (Huyen, 2020). This condition indicates that achieving gender equality in political leadership is not easy. However, women's involvement in politics is crucial because it can create women-friendly policies. Often, in emergencies, women's needs are overlooked, which can have highly destructive effects on them. For example, in the context of the Lombok disaster response, various aids provided by the AHA Centre and the government have not considered gender sensitivity. Thus, disproportionately affecting women. To attract more women into politics, cultural biases and stereotypes against women must be broken and a change in mentality is needed. Sexism and focus on the appearance of female politicians are deterrents. There are several ways to drive this change, such as raising awareness and our biases to critically observe these differences at the social, cultural, and educational levels. The next step is active promotion to encourage equal opportunities to achieve leadership status. Society should not ask themselves whether women are ready to occupy important positions but whether they are ready to trust women.

Thirdly, the structure and communication network of the AHA Centre still needs improvement. AHA Centre's disaster management cooperation involves many partners, both from ASEAN and international non-governmental organizations (INGOs). The AHA Centre must be acknowledged for having excellent intergovernmental cooperation networks. Unfortunately, cooperation with non-governmental actors, such as the private sector and civil society organizations like non-governmental organizations (NGOs), is still not as effective as cooperation with governments. However, the private sector and civil society can also provide material assistance and resources needed. This has prompted criticism that there needs to be an initiative for AHA Centre to expand its network to society, not just Government-to-Government (G2G) approach. The objective of expanding the AHA Centre's coverage from predominantly Government to Government (G2G) to Business to Business (B2B) and People to People (P2P) is to mobilize resources more effectively.

Fourthly, various gender-related agreements made are merely paper agreements because non-traditional security threats, such as natural disasters, are often hampered by the principle of non-intervention, where there is a belief that the respective countries should resolve domestic issues. This belief encourages the ASEAN view that countries can be trusted to solve their problems. Therefore, the author sees that the assistance from the AHA Centre, which is not based on gender approaches, is due to the AHA Centre's belief that countries will ensure gender fulfillment in their societies. This is because ASEAN positions itself as a "hub that bridges various networks" together. By entrusting countries to resolve their internal issues, ASEAN can leverage these networks to advance its interests. These networks are manifested through various meetings where ASEAN drives its agenda within a regional multilateral platform. By setting the agenda, ASEAN can maintain its centrality, strengthening its capacity to shape the regional order. This influence leads to a leadership role inherent in ASEAN's position in this structural network (Indraswari, 2022).

However, the Indonesian government has not maximized its efforts to fulfill gender needs during the Lombok earthquake response. Additionally, the AHA Centre has not comprehensively implemented gender-based assistance due to its lack of substantial experience, given that it had only been operating for seven years when the Lombok earthquake occurred. This is evidenced by the AHA Centre's report stating that their main objective was not only to deliver aid but also to serve as a learning platform for the earthquake response process conducted by the National Disaster Management Agency (BNPB). The AHA Centre began to focus more on gender-based emergency response activities in 2021, as evidenced by adopting the AADMER 2021-2025 work program framework.

These factors contributed to the AHA Centre's gender-insensitive response to the 2018 Lombok earthquake disaster, resulting in an imbalance in post-disaster development roots and tending to be disadvantaged women. Women have a more challenging time recovering because since the mitigation and emergency response efforts they tend to receive less attention, are consistently sidelined in many aspects, and are restricted from continuing to develop and explore their capabilities. These conditions maintain women's lower position, which impacts future development. The economic impact shows that post-disaster, there has been an increase in early marriages in Lombok. One of the motives is economic problems where families of the female party tend to marry off their children to gain better economic access. This is supported by data from the NTB Province Population and Family Planning Agency (DP3AP2KB), which confirms that in 2017, there were 229 marriages involving children aged 17-19 years. This number increased to 283 cases in 2018 due to the economic downturn in the community due to the disaster (Ariany, 2019).

Moreover, socially, many schools have not yet been repaired due to budget constraints. This condition causes children, especially girls, to be at risk of dropping out of school. The children face economic difficulties due to the earthquake's impact, pushing them to quit school, with a tendency for families to prefer girls not to attend school compared to boys. This is in line with research conducted by the Community and Service Collaboration for Welfare (KOMPAK) with the Australian Government, which shows that one of the reasons children survivors of the Lombok earthquake drop out of school is due to damage to school buildings and economic difficulties, where the government, along with all stakeholders involved, focuses less on allocating funds for education assistance and facilities (Raya, 2021).

Thus, this research ultimately provides a thought construct that during non-sensitive gender disaster management, no matter how good and extensive the aid provided, it can be said to be less than maximal and effective. This is because humans, both men and women, as the primary focus of disaster management, play a role in development, where involving gender sensitivity is crucial in the development process. If gender sensitivity is implemented, it will create gender relational support in development. This will strengthen disaster resilience if gender sensitivity is applied. In the case of the Lombok earthquake, various aids provided by the AHA Centre have not addressed gender issues. So, it has not fully considered a gender need, which ultimately makes women and vulnerable groups more likely to be disadvantaged in disaster situations.

Conclusion

Based on the four gender mainstreaming indicators with gender sensitivity as a solution in striving for gender fulfillment in the Lombok earthquake disaster, this research finds that gender sensitivity directed towards the needs of women and vulnerable groups is still not maximally implemented by the AHA Centre. This is reflected in assessment efforts where the samples have not touched the voices of women, data collection on disaster victims, especially for persons with disabilities, breastfeeding mothers, separating tents between women and men, and other assessment efforts still do not touch on gender-sensitive data. The dissemination of information by the AHA Centre, which is not comprehensive, does not reach illiterate individuals, and does not consider different conditions between women and men, have not touched on knowledge dissemination. Various other areas, such as human development to support the health of disaster-displaced people, have been carried out by the AHA Centre by providing personal health kits. However, this aid distribution is not simultaneous in the Lombok area.

Various efforts by the AHA Centre to fulfill gender have not been maximally implemented due to various factors. First, the advancement and protection of gender have not become the main agenda. There is still no ASEAN instrument explicitly supporting or striving to implement the core aspects of the Women, Peace, and Security (WPS) agenda, which ensures that women are essential in all aspects of peace and security policy. Regional meetings also face similar criticisms to those in other ASEAN sectors, where these meetings are seen as end goals, and the implementation of their outcomes is done sporadically. Second, the conservative and traditional attitudes of ASEAN's elite leaders, especially regarding the view that men are better political leaders than women, indicate that this traditional understanding has taken root firmly. Thus, it minimizes the process of creating women-friendly policies. Third, the AHA Centre's cooperation network focuses more on governments and is less maximal in building business-to-business (B2B) and people-to-people (P2P) cooperation to mobilize resources more centrally. Fourth, various gender-related agreements are merely paper agreements because non-traditional security threats, such as natural disaster management, are often hindered by the principle of non-intervention. Additionally, during the Lombok earthquake, one of the AHA Centre's focuses is to learn from the National Disaster Management Agency (BNPB) regarding disaster management, so the AHA Centre has not yet made more prepared and comprehensive efforts.

Thus, from a theoretical implication perspective, this research can fill the knowledge gap regarding the role of regional international organizations in disaster management efforts and how the masculinity of the AHA Centre and other involved parties can influence the absence of gender-based disasters towards the victims. This research emphasizes that analysis through gender sensitivity and gender mainstreaming towards the situations of men and women can help develop interventions that better fulfill their different roles and needs and reinforce each other in improving household and overall community safety and resilience. Ultimately, no matter how many parties are involved and how much aid is provided, if disaster management is not gender-sensitive, then disaster management efforts will not be effective.

In this regard, this research recommends that the AHA Centre autonomously adopt its gender-based disaster guidelines as an initial commitment towards fostering a more inclusive, fair, and sustainable gender-based disaster management. Regarding empirical contributions, this research could serve as a reference concerning regional organizational studies, particularly regarding disaster management institutions, to engage in gender-based disaster management. Given the relatively underexplored nature of this study, it is hoped that this research can fill the knowledge gap. Future research efforts may broaden their scope by analyzing ASEAN's commitments to disaster management through the ASEAN Regional Framework on Protection, Gender, and Inclusion in Disaster Management 2021-2025, as well as the AHA Centre's commitments to gender studies in future disaster management.

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