

Salasika

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Inclusive Data for Resilience: A Participatory Action Research (PAR) with perspectives of women, the elderly, and persons with disabilities for Mount Merapi eruption risk areas

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ABSTRACT

This research, conducted by Plan Indonesia, YAKKUM Emergency Unit (YEU), and the Klaten Association of Disabled People (PPDK), with support from ELRHA, UKAid, the Norwegian Ministry of Foreign Affairs, and Plan International, aimed to foster inclusive research by integrating Views from the Frontline (VFL) guidelines with the Feminist Participatory Action Research (FPAR) method. The study involved women, people with disabilities, including youth and children with disabilities, as well as the elderly. The research participants included people with disabilities, the elderly, health cadres, and elderly cadres. The research was conducted from May to December 2023 in the disaster-prone areas of Kemalang and Manisrenggo Districts, Central Java. Data analysis was done through triangulation, utilizing multi-party meetings to verify findings based on various times, places, and participants. The research identified types of threats related to the Merapi volcano eruption and needs based on the Humanitarian Inclusion Standard, focusing on gender, age, and ability. Key recommendations include integrating disaster risk management approaches with community-led action plans, enhancing inclusion, promoting local leadership, and developing a national advocacy strategy to increase community involvement in disaster risk reduction efforts, particularly for women, the elderly, and people with disabilities.

KEYWORDS: *inclusive data, PAR (participatory action research), women, the elderly, persons with disabilities (PwDs), Mount Merapi, disaster risk areas (DRA)*

INTRODUCTION

This paper was developed by Plan Indonesia, YAKKUM Emergency Unit (YEU), Klaten Disability Association (PPDK) with support from Enhancing Learning and Research for Humanitarian Assistance (ELRHA), UKAid, the Norwegian Ministry of Foreign Affairs and Plan International to promote inclusive research involving women, people with disabilities, including young people and children with disabilities, and the elderly (Lansia) through the integration of the Views from the Frontline (VFL) guidelines with the Feminist Participatory Action Research (FPAR) method involving the research process by persons with disabilities, the elderly, health cadres, and elderly cadres.

This guideline was developed from May to December 2023 in Kemalang District and Manisrenggo District, which are areas of Disaster Risk Area 3 and Disaster Prone Area 2. During this development, consultations were carried out involving representatives of the village government, people with disabilities, the elderly, health cadres, elderly cadres, village volunteers, academics and related agencies in the Klaten Regency government such as the Regional Disaster Management Agency (BPBD), the AP3KB Social Service (Women's Empowerment, Child Protection, Population Control, and Family Planning Service), the Population and Civil Registration Service (Dukcapil), the Ministry of Communication and Information (Kominfo), and the Central Statistics Agency (BPS).

Structural gender inequalities mean that disasters affect women,

girls, persons with disabilities, and the elderly in different ways than they affect boys, men, and or so-called 'normal people'. The vulnerability of females increases when they are in a lower socioeconomic group, particularly in the Global South, in this case, risk-area Klaten close to Mount Merapi slopes. This vulnerability impacts preparedness, evacuation, response, number of deaths, and recovery.

The reasons for this vulnerability can often be traced to the roles females hold in society and the existing gender and cultural norms where they live. This can include the duties women and girls carry out, the clothing they wear, the way they are expected to behave, etc. This vulnerability is also part of the intersectional nature of the gendered impact of disasters. For example, women and girls in the disaster prone area tend to have higher rates of poverty, greater challenges accessing health care, and reduced access to disaster mitigation and preparedness. They often live in female-led households and are more likely to be victims of the natural disaster.

Before a disaster, women and girls are primarily responsible for caring for a home and the people in it, including children, older family members, and people with disabilities. Their caregiving responsibilities may prevent their ability to evacuate. After a disaster, women will likely be responsible for caring for the sick and injured while still maintaining their daily chores. And if the main breadwinner is killed during the disaster, women often need to seek outside employment, and, especially in an international context, girls are pulled

from school to take care of the household. In all countries, violence against women and girls is a factor post-disaster. Sexual assaults, physical abuse, and human trafficking increase after a disaster. Stress is exacerbated in crowded shelters or temporary housing, which may lead to aggressive behavior, including sexual aggression.

In cultural communities requiring modest clothing, women and girls may find it harder to run away from danger (i.e., from lava eruption, tsunami, or a collapsed building) because of the barriers their clothing may create. Additionally, modest dress and/or cultural norms may mean females engage in different cultural and recreational activities. This could mean girls may not be taught how to swim or climb trees. This creates barriers that make it difficult for them to take care of themselves when trying to survive a volcanic eruption or flooding. During recovery, women and girls may have to work harder to carry out the functions of daily living for their families. This can include lining up for relief supplies, having to travel farther to access water, or cooking in challenging conditions. These activities often happen during the day, limiting women and girls' access to education or outside employment.

This paper aims to develop a guideline to promote inclusive data involving women, girls, people with disabilities—including young people and children with disabilities—and the elderly (Lansia). The guideline will integrate the Views from the Frontline (VFL) guidelines with the Feminist Participatory Action Research (FPAR) method, which

involves the research process of people with disabilities, the elderly, health cadres, and elderly cadres.

METHOD

The methods applied in this research are FPAR, GEDSI, DDEI, and VFL. First, FPAR (Feminist Participatory Action Research, hereinafter abbreviated as FPAR) is a method consistent with the values and objectives of PLAN. PLAN uses methods that support human rights justice goals to support and develop women's rights movements and advance women's human rights. FPAR creates new forms of collaborative relationships essential to empowering women, strengthening their voices, and promoting agency.

FPAR is a political choice (as is all research) that begins with the belief that knowledge, data, and expertise are gendered, constructed to create privileged authority and that women have expertise that should inform policy decision-making. Our primary goal in developing the FPAR research paper is to change systems and structures to improve the lives of marginalized women. By 'change', we mean 'structural change' or the change in structures and other systems of marginalization that largely eliminate women's agency and role in disaster response. Participants are not the objects of research but rather the subjects of inquiry who set the agenda, participate in data collection and analysis, and control the use of results, including deciding what actions to take or what direction to take in the future.

Second, GEDSI (Gender, Disability, and Social Inclusion) is

also a component at the heart of the intersectionality applied in this paper. This GEDSI analysis will help researchers to observe five domains: an overview of laws, policies, regulations, and institutional practices; cultural norms and beliefs; gender roles, responsibilities, and time use; access to and control over assets and resources; and patterns of power and decision-making related to the lives of women, older people, people with disabilities, young people, sexual minorities, and those marginalized in disaster events.

Third, Data-Driven Approach to Equity and Inclusion (DDEI). DDEI is the approach and method used in this guide to measure, analyze, and improve diversity, equity, and inclusion in data collection. In a data-driven approach, decisions are based on data, not intuition. Following a data-driven approach in this paper offers a measurable method. This is because data-driven strategies use actual facts and information, and not just instincts in disaster situations. This is a diversity strategy, an action-based plan designed to reduce disparities and create a culture of inclusion in research.

Fourth, VFL (Views From the Frontline) is an innovative participatory monitoring method designed to strengthen public accountability in policy implementation in KRB (Disaster-Prone Areas) by reporting on the experiences of the most vulnerable communities for the implementation of disaster risk reduction at the local level. VFL collects various perspectives from communities (women, disabled, elderly), local governments, and civil society organizations most affected

by disasters. VFL is a strategy for stakeholders in strengthening community resilience.

ANALYSIS

Collaboration between communities, disaster-affected people, collectives, universities, policymakers, and others is commonplace in research today (Begun, Berger, Otto-Salaj, & Rose, 2010). This approach produces important information that can be used to address the social issues affecting those involved. As this paper exemplifies, it ensures authenticity, impartiality, and shared ownership of the work.

However, there were challenges in conducting and writing this paper. One challenge was providing a platform for community partners—also referred to as co-researchers (Walmsley & Mannan, 2009)—to accurately share the data they contributed to the collaborative paper. In other words, they can struggle to critically inform the stories they share about the issues they feel are most important. This paper addresses this by giving pen and paper directly to people (especially women, disabled, and older people) to write about their experiences. The perspectives of marginalized groups (including many of the fellow researchers in this paper) are often devalued, ignored, and marginalized in society and even intentionally by the state. Their voices are routinely silenced and ignored when they try to raise their concerns. Gibson and Hughes-Hassell (2017) discuss how the marginalization of marginalized groups is a control mechanism used to distort public opinion. Another

form of silencing is the practice of reproducing hegemonic discourses and positivist views. This problem occurs within academia, as Gibson & Hughes-Hassell (2017) allude to. Burns, Hyde, Killett, Poland, and Gray (2014) have revealed how this silencing also occurs within research organizations.

Researchers then choose to conduct Participatory Research or other derivative forms such as Participatory Action Research (PAR) or participatory organizational research, as one way to alleviate the problem of the erasure of fellow researchers' voices (Burns et al., 2014). This approach is reaffirmed when this paper uses PAR and Feminist Participatory Action Research (FPAR) principles in a paper-writing project to address the issue of unheard and unseen voices of fellow researchers (such as those affected by the Central Java volcanic eruption of Mount Merapi).

This paper project was a Community-Based Participatory Action Research (CBPAR) project, which included focus groups centered on "What was the disaster response experience?" from women living in the volcanic eruption risk area. The focus groups obtained information about the challenges faced by women due to the eruption. The PLAN team was aware of this issue and ensured it was emphasized when presenting the paper.

Tremblay (2009) and Curnow (2017) have provided perspectives on some potential benefits and challenges of community-government/university/organization partnerships in community-based research. Tremblay (2009) writes about the empowerment aspect of

community-based participatory research. He notes how this collaborative approach involves each partner throughout the research process. Also noted is how the research "increases community capacity, broader stakeholder participation in decision-making, and promotes social justice" (p. 1). More specifically, Tremblay (2009) asserts that empowerment through research occurs when all researchers take control of the development of the paper and when they gain social influence through confidence in their abilities. This paper discusses the value of inclusive data relationships by elevating the voices of co-researchers (community members/affected residents). It provides suggestions on how to support their participation and enhance the knowledge they share. In addition, it discusses the various aspects and stages of participatory research. It then provides a detailed explanation of the experiences of women, disabilities, and older people, especially in relation to Sexual and Reproductive Health and Rights (SRHR), followed by information on the methods and concepts that enable this inclusive data to achieve amplification and authenticity of the voices of co-researchers that are published and broadcast publicly. The paper then explores the idea of power relations and how this form of power enables the research team to create a balanced relationship that values each contribution to the process of writing this paper. The paper uncovers the voices of affected residents, written by them, by revealing some of the challenges and limitations of their disaster response actions.

This paper is a catalyst for advocacy for inclusive, equitable, and participatory data. It proves how powerful and positive the impact of our voices can be on the weeks we experience. This also confirms that our approach in this paper helps preserve the stories shared by our co-researchers, the residents affected by the Merapi volcanic eruption.

Tett (2005) states that the meaning of power-with is finding ways to share power that allow it to develop and grow within a group. VeneKlasen, Miller, and Ruthraff (2004) describe power-with as a form of power that helps build strength among a group and encompasses common interests. Power-with also increases individual knowledge and skills. Power-with builds relationships between different groups, which helps them facilitate social change. Advocacy groups, such as PLAN Indonesia, YEU, PPKD (Perkumpulan Penyandang Disabilitas Klaten), and other teams, tend to use power-with to build allies and gain support for their goals (Vene Klasen et al., 2004). Terez (2010) explains that those who use this form of power prioritize commitment and co-creation, value experiential knowledge, and believe that everyone learns from each other. This paper was made possible thanks to social cohesion coordinated by, among others, PLAN Indonesia.

One of the principles of FPAR is the validity of all knowledge because everyone teaches and learns from each other and has knowledge to share and gain. Power-with indicates participation, another important principle of FPAR. The "with" in power-with emphasizes collaboration and inclusion.

Participation allows input from all members of the research team to contribute in a meaningful way. No research can be successful without equal participation. In doing so, this research paper creates a comfortable climate with co-researchers to facilitate dialogue. This paper seeks to ensure that co-researchers' concerns and inputs are conveyed in an authentic manner. This is primarily to fulfill the primary purpose of this paper, which is to convey the voices of the co-researchers who wrote this paper without compromise. Authenticity, originality, and feminist and inclusive partisanship have been the driving forces behind the writing of this paper. Research Stage being applied in this research is as follows.

Research Code of Ethics. The Research Team must receive an explanation and training on PSEAH (Protection from Sexual Abuse and Harassment) at the beginning of the activity stage. The Research Team will sign a statement of agreement on PSEAH during the activity. Components that are part of the code of ethics include:

- a. Respecting and adapting to local cultural culture, dressing appropriately and politely, smiling, greeting, and greeting in a friendly manner
- b. Being tolerant of participants and informants who will carry out their worship
- c. Not committing sexual harassment or physical or verbal violence
- d. Disciplined and punctual
- e. Maintaining privacy/personal matters and the rights of others

- f. Understanding duties, functions, and work procedures
 - g. Being open to criticism and suggestions
 - h. Communicating with Plan Indonesia, YEU, and PPK staff, between members of the Research Team, and participants and informants of the researcher/limited discussion using Indonesian or other appropriate language of instruction
 - i. Separating personal relationships with participants and informants in terms of job responsibilities
 - j. Not influencing the opinions and answers of participants and informants
 - k. Not falsifying data
 - l. Maintaining the confidentiality of participant and informant data and information provided by participants and informants only for the benefit of the RESEARCH TEAM in collaboration with Plan Indonesia, YEU, and PPK
 - m. Ensuring that the RESEARCH TEAM process is carried out transparently, accountably, efficiently, and effectively
 - n. Never doing things that are SARA-sensitive (*Suku, Agama, Ras dan Antar Golongan*, or Ethnicity, Religion, Race, and Inter-Group, namely views or actions based on sentimental thoughts regarding self-identity concerning descent, religion, nationality, or ethnicity and group)
 - o. Not being gender biased or having prejudices against certain genders, ages, and disabilities that result in injustice or gender-based violence
 - p. Not intimidating and promising anything to participants and informants
 - q. Being neutral and providing equal treatment to participants and informants, taking into account their special needs
 - r. Not expecting any reward or receiving any compensation from participants and informants in any form
 - s. Implementing health protocols to prevent the transmission of COVID-19 or the risk of certain diseases in accordance with announcements or regulations from the government wherever they are
- Second, *obligations of the Research Team*, which include
- a. Being willing to participate in research team briefings and other activities according to the activity schedule in the direction of the research coordinator team
 - b. Receiving capacity building related to PSEAH, Disaster Risk Reduction (DRR), Humanitarian Inclusion Standards and Feminist Participatory Action Research Approach (FPAR) from the research coordinator team
 - c. Conducting research activities based on the specified targets, namely women and men with disabilities and the elderly, their companions, female heads of families, and/or women who are pregnant, are breastfeeding, or have children and toddlers and heads of families who have wives who are pregnant, breastfeeding

or have children and toddlers in the agreed area

- d. Being committed to coordinating with the team coordinator, government, and organizers through community companions from supporting institutions
- e. Being willing to comply with the code of ethics in data collection, signing a statement of having received information and willingness (informed consent), as well as a statement letter to be involved as a research team and committed to following the process in full.
- f. Being able to explain the background, objectives, and description of the survey process to participants and informants.

Third, the result is *Community Socialization and Consultation*. Based on the FPAR/PTPF method, all PTPF activities must begin with community socialization and consultation before the research is designed and started. This research requires a series of socializations and consultations with various stakeholders. At this stage, PTPF will only consult with women to ensure a discussion on power relations and gender issues that may not be easy to discuss in front of men so that they can be explored in depth. The objectives of pre-research community socialization and consultation should include:

- a. Gaining support, collaboration, and ownership of the community/stakeholders.
- b. Forming a research team with the research community. The selection of the research team is based on a consultation process

with the community and village government with the following criteria:

1. Having knowledge of the profile of the research location, in this case, the village in the research location.
 2. Women, the elderly, and the disabled who are willing to be involved in the research are strongly encouraged to be involved.
 3. Being actively involved in community groups, especially women, such as PKK members, elderly or health *Posyandu* cadres, disability groups, village disaster preparedness volunteers, people with disabilities or their companions, and the elderly from the research location.
 4. Having been involved in data collection or surveys will provide added value to the research team.
 5. Often being involved in activities with the elderly and/or disabled.
 6. Being able to communicate well in the language used at the research location, in this case, Javanese and Indonesian.
 7. Having disaster experience in this context, the eruption of Mount Merapi.
- c. Having disaster experience in this context that has occurred and experienced themselves while living in the village where the research is located.

- d. Identifying the problems that are the focus of the research project.
- e. Designing research methods, questions, and objectives.
- f. Develop an advocacy plan for long-term change (sustainable during the research process).

Fourth is the *Research Process*. At this stage, the research team collects data based on the set of questions and activities carried out including:

1. Ensuring that the data collection process is in accordance with the research target through coordination and approval with the local Village Government. Management of activities at the research location, including official notification to the village, hamlet, RT/RW, which is the research location, must be carried out before the activity takes place, including activities to ensure the place and time of the discussion, accommodation needs, and transportation of elderly or disabled participants and their companions, consumption needs and stationery supplies for the discussion, especially considering the needs of women's groups.
2. Preparing additional support needs or assistive devices needed by the research team or informants (people being recorded) in the research area, especially those at risk or not easily accessible for the disabled or elderly, to ensure that all data represents local conditions and nothing is left behind as a manifestation of the VFL spirit.
3. Conducting consultations with target informants based on data collection management through

the choice of agreed data collection methods through Focus Group Discussions (FGD) and Interviews. Target Informants are people who know the daily situation and are willing and able to communicate with the research team. This method is carried out through the following divisions:

4. Checking the documentation of information from the interview/interview process and FGD, ensuring that all processes and information are managed properly, and paying attention to aspects of information confidentiality. Each research team activity consists of a Research Team or interviewer, discussion note taker, and officers for administration and logistics.

Fifth, *analysis of research results* shows the following. The analysis stage is carried out by triangulating data through multi-party meetings to check the information provided by research participants and informants based on time, space, and different people. The analysis components include:

1. Threats in the context of developing this guideline are in accordance with the identification of information on the types of threats known and agreed upon with village stakeholders and the research team and participation related to disaster risk reduction based on the profiles of researchers and informants from the local location.
2. Identification of needs based on Humanitarian Inclusion Standards (HIS) associated with

data on gender, age, and ability (disability, children, and the elderly, especially women). The components of HIS are (1) Protection Inclusion Standard, (2) Drinking Water and Environmental Sanitation Inclusion Standard, (3) Food Security and Livelihood Inclusion Standard, (4) Nutrition Inclusion Standard, (5) Temporary Shelter, Settlement, and Household Equipment Inclusion Standard, (6) Health Inclusion Standard, and (7) Education Inclusion Standard,

3. Accommodating recommended actions to meet needs, including the nine key HIS and other needs for children, youth, elderly, and disabled people, especially women in Disaster Management.

The results of the analysis show that strengthening community inclusion is a vital factor in data inclusion. In the interviews conducted in this paper, in communities most at risk of disasters, this data was openly available and disaggregated by community, age, gender, disability, and rural location. This data is now being used to inform development decisions and plans. The FPAR, GEDSI, DDEI, and VFL processes have strengthened the inclusion and collaboration of communities, local government, and civil society organizations in decision-making in the KRB. For example, communities have worked with local civil society organizations to form community engagement alliances to advocate for and take collective action to reduce disaster risk.

The results also show local community-led action planning (women, older people, and persons with disabilities) is important in data inclusion. The development of local action plans in communities means that the needs of communities at risk of disaster are now being met. To date, local action plans have been developed and implemented. These plans address threats to lives and incomes, such as poverty, water insecurity, conflict, and barriers to risk reduction, such as exclusion of communities by local government. Each plan identifies key activities, by whom, and the resources needed. For example, food security in disaster situations. This paper will be able to encourage the achievement of local community-led planning in disaster-prone areas.

Championing community leadership (women, elderly, disabled) had been promoted during the field research. Around the world, Plan Indonesia and its partners are building a movement by fostering community leadership so communities at risk of disaster have the resources and strength to make real changes. For example, communities have taken the initiative to address water shortages in disaster-prone areas. With the support and collaboration of local governments, this research paper will be an intervention in producing local leaders in disaster-prone situations as part of disaster risk mitigation and reduction.

Advocating for national-level participation is also a must agenda to be foreseen to make data inclusion successful. A national advocacy plan can be developed through the research results of this paper, with multi-stakeholder consultations at

the country level. These plans can guide national campaigns and initiatives to build systematic community involvement in development plans, decisions, and actions, especially disaster risk reduction. In the Merapi volcanic eruption area, for example, several community organizations have voiced the voices of communities affected by the eruption and have sought to strengthen disaster risk reduction policies through advocacy and dialogue with various stakeholders.

CONCLUSION

This research paper combines multiple perspectives, insights, and methods to strengthen policymaking. This integrated research approach to disaster risk management will bridge the gap between the urgent needs of affected people, science, policymaking, and implementation. Therefore, this paper outlines a series of recommendations for strengthening

the capacity of all stakeholders in Disaster Risk Reduction.

Understanding disaster risk is a challenge not only for affected people but for all relevant DRR stakeholders. It requires a comprehensive understanding of the complex interconnections and interdependencies between different hazards and the complex dimensions of vulnerability and exposure – encompassing the root causes and drivers of disaster risk. This paper can help understand disaster risk more inclusively than previous disaster research guides that were only quantitative and exclusive and often left out the voices of the most vulnerable people in disaster-affected areas. This paper is a step towards investing in disaster risk reduction for community resilience by enhancing disaster preparedness for effective response and post-disaster recovery, rehabilitation, and reconstruction.

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ABOUT

SALASIKA etymologically derived from Javanese language meaning 'brave woman'. SALASIKA JOURNAL (SJ) is founded in July 2019 as an international open access, scholarly, peer-reviewed, interdisciplinary journal publishing theoretically innovative and methodologically diverse research in the fields of gender studies, sexualities and feminism. Our conception of both theory and method is broad and encompassing, and we welcome contributions from scholars around the world.

SJ is inspired by the need to put into visibility the Indonesian and South East Asian women to ensure a dissemination of knowledge to a wider general audience.

SJ selects at least several outstanding articles by scholars in the early stages of a career in academic research for each issue, thereby providing support for new voices and emerging scholarship.

AUDIENCE

SJ aims to provide academic literature which is accessible across disciplines, but also to a wider 'non-academic' audience interested and engaged with social justice, ecofeminism, human rights, policy/advocacy, gender, sexualities, concepts of equality, social change, migration and social mobilisation, inter-religious and international relations and development.

There are other journals which address those topics, but SJ approaches the broad areas of gender, sexuality and feminism in an integrated fashion. It further addresses the issue of international collaboration and inclusion as existing gaps in the area of academic publishing by (a) crossing language boundaries and creating a space for publishing and (b) providing an opportunity for innovative emerging scholars to engage in the academic dialogue with established researchers.

STRUCTURE OF THE JOURNAL

All articles will be preceded by an abstract (150-200 words), keywords, main text introduction, materials and methods, results, discussion; acknowledgments; declaration of interest statement; references; appendices (as appropriate); table(s) with caption(s) (on individual pages); figures; figure captions (as a list); and a contributor biography (150 words). Word length is 4,000-10,000 words, including all previous elements.

TIMELINE AND SCHEDULE

Twice a year: February and July.

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All articles must not have been published or be under consideration elsewhere. We are unable to pay for permissions to publish pieces whose copyright is not held by the author. Contributors will be responsible for clearing all copyright permissions before submitting translations, illustrations or long quotes. The views expressed in papers are those of the authors and not necessarily those of the journal or its editors.

CONTENT ASSESSMENT

All articles will be peer-reviewed double-blind and will be submitted electronically to the journal (journal@salasika.org). The editors ensure that all submissions are refereed anonymously by two readers in the relevant field. In the event of widely divergent opinion during this process a third referee will be asked to comment, and the decision to publish taken on that recommendation. We expect that the editorial process will take up to four months. We will allow up to four weeks for contributors to send in revised manuscripts with corrections.



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