Proceeding

GO SOUTH 2020

ANNUAL CONVENTION ON THE GLOBAL SOUTH

ISSN: 2720-9288

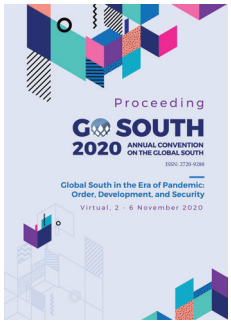
Global South in the Era of Pandemic: Order, Development, and Security

Virtual, 2 - 6 November 2020

Proceeding

GO SOUTH
Annual Convention on the Global South:

Global South in the Era of Pandemic: Order, Development, and Security



Foreword

Institute of International Studies (IIS), Department of International Relations, Universitas Gadjah Mada will host its annual conference aiming to respond to the current problem: how pandemic Covid-19 is seen and analyzed through the lens of international relations of the Global South. IIS is the only think-tank in Indonesia that focuses on the international affairs specifically from South perspective – that are often undermined and overlooked.

The conference will be held virtually through ZOOM on November 2 – 6, 2020. We expect 200 participants to join us as representatives from universities, governmental organizations, non-governmental organization, and/or as professionals. The invited speakers come from both academic and non-academic fields renowned for their direct involvement and dedication on the issue being discussed. As the convener, we also intend to build and enhance our international as well as national research network with all the guests. We hope this conference will produce new findings and ignite a challenging discourse to current study.

We realize that this conference would not be as successful without all the support from our partners. All positive forms of support, donation, and sponsorship will be appreciated sincerely. We are beyond proud to collaborate with you to hold this conference.

Director
Institute of International Studies

Dr. Riza Noer Arfani, MA

GO SOUTH 2020 ANNUAL CONVENTION ON THE GLOBAL SOUTH

Table of Contents

An Island Made of Cork: An Analysis of Cuba's Response to the Covid-19 Pandemic

Cornelia Laras Gigih Kineta[1] *, Ni Made Diah Apsari Dewi*[2] *, Refina Anjani Puspita*[3]
Department of International Relations Universitas Gadjah Mada
[1]kinetagigih@gmail.com, [2]diahapsari5@gmail.com, [3]refinaapuspita@gmail.com

Abstract

The Global South faces heavy repercussions as the pandemic sweeps through the globe, the Latin America region is no exception. However, one country in particular stands out as the forefront towards the fight against COVID-19; Cuba. Albeit constantly being undermined within the international affairs talk whilst facing the same challenges as the other global south countries –lack of resources, economic meltdown, and political turmoil– Cuba displayed an exceptional capacity in handling a large-scale health crisis. Having a strong health infrastructure, implementing clear government policies, and creating a strong bond between the government and the society results in swift responses towards the pandemic, with minimal political intrigues. Alas, this paper would like to deconstruct what goes underneath the sound implementation of Cuba's response. The analysis that will be given will use Holsti's (1970) theory of national role conception which takes a closer look at a nation's perceived identity and role both domestically and internationally. There are two layers that will be explored. First, the government image as a "health-forward" state, how it is rooted in their history, and how it affects Cuba's policy decision making process and implementation. Second, how the collective value of the citizen on the medical and state apparatus affects the effectiveness of the pandemic response. Lastly, we are going to use both qualitative and quantitative methods such as desk studies and secondary observational methods (press releases and government statements) as well as COVID-19 case numbers data that we find adequate to support the arguments we are proposing.

Keywords: Cuba, Health Diplomacy, COVID-19, National and Societal Conception

Introduction

Back in late 2019, the world had heard only small whispers about a disease caused by a contagious virus spreading locally in the city of Wuhan, China. It was only a few news updates among many other hot topics kickstarting the year 2020 across spectrums –US President Trump's impeachment, the Australian bushfire, a World War III threat, even the death of an NBA megastar. Only within the count of months, none would think that said local virus has quite literally flipped the whole world upside down. Life as we know it has gone out of the window as the outside world is practically forbidden. Very select view governments prevailed during this hardship while most struggle for even the slightest sip of stability. New Zealand and South Korea among a few named champions in suppressing the virus' spread within their own domestic domain, an 'in your face' statement emphasizing once again the distinction and gap between developed and developing countries, northern and southern global hemisphere only with a few exceptions.

The Latin America – Caribbean region is one of the most hard-hit regions across the global sphere, with Brazil's roughly five million Covid-19 cases following closely at the third-place tailing behind the United States and India (World Health Organization, 2020). As of October 9th, in total, the region has registered more than 9.8 million diagnosed patients, as well as a growing number of fatal COVID-19 cases (Statista & Rios, 2020). A combination of several factors had been proven to create devastating results for most countries in the Latin America – Caribbean region in the event of a health crisis. Corrupt and generally problematic, unstable governments and weak social security systems among several other things resulted in, for lack of better words, chaos. Most countries of the region have weak and fragmented health systems, which do not guarantee the universal access needed to address the COVID-19 health crisis (United Nations ECLAC, 2020) The region's already overwhelmed even in normal, non-global health crisis healthcare systems have to stretch what they have to handle the surging cases of Covid-19 –packed ICUs, ventilator shortages, fallen healthcare workers, burial complications, you name it.

Briefly judging from the gloomy results on how most of Latin America - Caribbean governments' actions in handling the pandemic outbreak in each nation, one would expect Cuba to fumble down the same path. However, Cuba showcased a seemingly against all odds result compared to other countries in the region facing similar struggles such as lack of resources, economic meltdown, and constant political turmoil. From here, this paper would like to deconstruct what goes underneath the sound implementation of Cuba's pandemic responses and what factors contribute the most.

We posit that Cuba's success in thriving in the middle of the pandemic can be explained by two key factors. First, we argue that Cuba's success is in part due to its long history of being a "health-forward" state. We will look at Cuba's track record on conducting medical diplomacy from the 1960s until now through direct words from Cuba's leaders which reflects Cuba's values, its health care system, as well as its foreign policy action. This experience in occupying the role of a health forward state proves valuable not only in allowing Cuba's citizen safety from the pandemic but also in allowing the Cuba government to perform an active international role in conducting South-South diplomacy. If we analyze the government's part in creating a successful response against the Covid-19 in the first argument, in the second argument we will see how the citizen also plays a crucial role. We argue that because of Cuba's long history in internalizing the value of prioritizing health and science, during the pandemic the citizens of Cuba are generally more responsive and obedient in regard to the covid-19 health protocol. The relationship between the much-needed physicians, health care workers, and mass organizations such as Committees for the Defense of the Revolution--one of the bedrock foundation of public health communication for COVID has helped strengthen public trust towards the government and healthcare provider apparatus. Overall, we aim to analyze how Cuba managed to build trust on both vertical –being from the public trust to the government, and horizontal, one that relies on mass organizations and agencies.

Theoretical Framework

1. National Role Conception Theory (K.J Holsti)

The aforementioned research question will be explored using several theories. The first one

would be with K.J Holsti's national role conception theory (1970). Through this theory, Holsti posits that states have a role either assigned to them or created by them which limits and allows certain state behavior, attitude, as well as foreign policy choices. Holsti summarizes seventeen roles commonly adopted by states. However, he believes that states can have multiple roles in dealing with different states. Therefore, though Holsti only categorizes Cuba into one role which is the bastion of revolution, this analysis would like to use Holsti's framework to examine Cuba's more unique role which is as a health forward state.

In elaborating the analysis further, it will be useful to use several key concepts related to this theory; role performance, national role conception, as well as role prescription. We will be delving more into the national role conception of Cuba which relates to how leaders of Cuba view their state's roles and obligations. To do this we will inspect Cuba's history and its status quo to see how a leader's ideology and vision affects the role conception. However, we do realize that we can't rely entirely on Cuba's leaders' history since, quoting Hollis and Smith, roles and the decision-making process is a 'two-way process between structure and actor' (Aras & Gorener, 2010). Therefore, we would also highlight the aspect of role prescription which has to do with how a state is viewed by other states and ultimately categorized into a certain role. We will do this by briefly viewing the current Covid-19 pandemic and Cuba's relation with other states. The sum of national role conception and role prescription will then be translated into Cuba's role performance which will be seen through Cuba's policy on handling the covid-19 pandemic domestically, regionally, and internationally.

2. Collective Consciousness (Emile Durkheim)

Designing a model to fight an epidemic involves identifying the basic components of that fight and how to implement them. There are three essential principles: the scientific data that determines how to eliminate epidemics; political (governmental) support, and mass participation in the epidemic resolvent program. In this second layer of framework, the mass participation support attained by the Cuban Government would be explained through collective psychology coined by Emile Durkheim.

Various forms of what might be termed "collective consciousness" in modern societies have been identified by sociologists, going from solidarity attitudes and memes to extreme behaviors like group-think, herd behavior, or collectively shared experiences during collective rituals. Collective consciousness became the bedrock foundation of a society –including a nation-building effort of a country named Cuba. Whether under colonial rule or under a dictatorship, Cubans have been defined by others, forcing them to conform or be punished for it. Under Castro, the island's dream of independence from Spanish colonial rule and American imperialism finally came true, but at a price. Many argue that there are two Cubas: the one that Castro would have us see, a romantic, idealized view of the Revolution, and the other side of Cuba that he and his followers deny. Sixty years embargo from its superpower neighbor, the United States, Cuba has developed a sense of identity in which they can only rely on themselves, hence its swift responses to crisis could be attributed to its independence, both on its people and government.

What is it that holds Cuban society together? By considering the correlation between

documented habits, customs, beliefs of the societies and government's healthcare system, then comparing those to what other CELAC countries, we believe Cuba's social mapping is strikingly different. Cuba's collectivism is able to be explained through Durkheim's theory that society exists because unique individuals feel a sense of solidarity with each other. The collective consciousness of the importance of collective health is the source of this solidarity. The nation put every individual as the helper, creating a larger sense of belonging, of giving the people the feeling that they're part of something more valuable than their personal health--it is the health of Cubans as a whole. In elaborating the analysis further, we will delve into Cuba's history and its current socio-political situation in regard to its collective-identity characteristic. Collective consciousness and solidarity will then be used as an explanation to Cuba's role performance and how Cuba enacts its role during the pandemic through its policies and actions, both domestically and internationally.

Research Methods

The research in this paper uses secondary observational and desk studies under qualitative methods to collect data aside from quantitative data on COVID 19 numbers and health workers for supporting analysis purposes. Under this research, the type of data that would be obtained is in the form of qualitative and quantitative data, which includes description and narration from a number of different sources, which would later be analyzed through the techniques of data reduction, data presentation, and verification. Meanwhile the source of data is taken from newspaper articles, documents available online, press releases and academic journals for the writer to later analyze and use in their research. Case study research can be understood as qualitative approach in which the investigator explores a bounded system (a case) or multiple bounded systems (cases) over time, through detailed, in-depth data collection involving multiple sources of information (e.g., observations, interviews, audiovisual material, and documents and reports), and reports a case description and case-based themes (Creswell, 2007).

Using qualitative methods, the data collected will be used to analyze the linkages between phenomena that are bound to Cuba's good governance in the middle of a pandemic and how it is being achieved.

Analysis and Study

1. Cuba's "World Medical Power" Role Conception

To understand how Cuba became the medical powerhouse as it is today, the most important thing that needs to be analyzed is how the leaders envision, construct, and implement Cuba's role as a 'world medical power'. It is fitting then to see Fidel Castro, one of the founding fathers of Cuba, whose words and ideals, like any other founding fathers, are considered to be the foundation on which the nation is built upon.

Even since the nascent stages of Cuba's nation building, Fidel Castro already sets his eyes upon creating a medical powerhouse out of his country. His vision is first shown through classic-communistic rhetoric of common ownership and free access to basic rights. He envisioned that doctors are similar to soldiers fighting against diseases for the common good (Brotherton, 2008,

p.262); that health right is human right; and most importantly that the state's health or efficacy is reflected in the people's health (Feinsilver, 2010, p.87). His ideals then take on a more internationalistic aspect by saying in a speech he gave in Argentina (2003) that;

> *"Our country does not drop bombs on other countries or send thousands of planes to bomb cities; our country has neither nuclear weapons, nor chemical weapons, nor biological weapons. The tens of thousands of scientists and doctors in our country have been educated in the philosophy of saving lives."*

Advancing the medical might of Cuba is then seen not only as a way to make the people prosperous, but also as an extension of Cuba's role as a bastion of revolution.

This rhetoric is born in part because of a pragmatic reason which is to keep Cuba's revolution alive amidst an international system that shuns it. Cuba saw how a world can be cruel to a communistic revolution in the years since Cuba was born which is the 1960 until after the fall of the USSR as its biggest ally in the 1990s. Not only did Cuba have to face a devastating economic embargo from the US and the breakdown of its ally, Cuba also faced other challenges like having several Latin American countries turn its back on them, a wave of medical brain drains to the US, and an often-unsuccessful economic readjustment. In the face of this exclusion, Fidel Castro saw that medical diplomacy can be used as an asset to gain trust and allies from neighboring countries to help Cuba's anti-colonial and anti-neoliberal movement. Furthermore, Castro believes that medical diplomacy can be one of the ways to repay countries that have helped Cuba during the revolution while strengthening South-South relations along the way (Feinsilver, 2010, p.87).

So, the journey of creating an integrated and modern medical system begins. The 1961 saw Cuba's first construction of an integrated national medical health care in the provincial level. In the year after that, the health care system is increasingly more decentralized shown by how in 1965, regional health care systems started to be built. In the 1990s, these regional health care systems functioned both as a curative health care system and a preventive one as the Ministry of Public Health shifted its strategy to disease prevention and epidemiological surveillance (Feinsilver, 2010, p.222), a system that will prove valuable in handling health crises in the future. Alongside free health care, Cuba also trains physicians in free medical schools. Soon after, trained physicians flooded the country and in 1963 Cuba began to be able to send free medical professionals to countries like Algeria, Guinea Bissau, and West Africa.

Under Fidel Castro, medical diplomacy was used to create relations between countries with the same ideological fervor as Cuba. Cuba steered clear from medical relations with neo-liberal and democratic countries like Mexico, Uruguay, and Peru. On the other hand, Cuba openly and warmly tied a quid pro quo with countries like Venezuela under the rule of Chávez through the doctors-for-oil program which significantly helped Cuba's economy. Under the rule of Raúl Castro beginning in 2008, medical diplomacy takes an even more internationalistic character. Raúl seems to focus more on increasing economic gains rather than focusing on the revolutionary spirit of the early days (Erikson & Wander, 2008, p.391), therefore ditching previous constraints on which nation can be made partner or given help to. This is shown through him choosing to lend a hand to Latin American countries who Fidel previously held animosity against like Brazil and Mexico. Despite the differences between Fidel

and Raúl, Cuba's medical diplomacy grows and thrives rapidly in both rules. Cuba started to have even more doctors. In 2005, Cuba had a record breaking ratio of 67 doctors per 10,000 population (Kaiser Foundation, 2010) making them able to send doctors to more places for disaster relief or basic health programs, and in exchange not only gaining material benefits but also immaterial ones such as prestige, goodwill, and influence. Cuba starts to get international accolades from partner countries as well as from international organizations. Since the 1960s, Cuba has sent up to 400.000 doctors abroad for medical diplomacy purposes (Petkova, 2020) and held ties with over 107 countries because of that (Feinsilver, 2010). The numbers continue to climb up until now. The Castro brothers successfully brought a once exiled and small country like Cuba to international spotlight.

True to the national role conception theory, the early efforts of the Castro brothers in establishing Cuba's role as a medical forward country sets the tone for what the country should and should not do in the international system in the future. This happens because according to the theory, leaders and founding fathers are people who shape a nation's role the most (Aras & Gorener, 2010). This is especially true in Cuba considering its centralized political system where presidents and the Cuba Communist Party have a bigger say in what trajectory the nation should thread upon. Additionally, Cuba is founded by a personalistic and idealistic leader like Fidel Castro who, seen from history, can successfully use the power of symbolism and narrative in Cuba's nation building. All of this contributes to an unchallenged role of a medical forward state that continues even until the covid-19 pandemic strikes.

Cuba's health care system and role as a medical forward country faces one of its biggest challenges in the Covid-19 pandemic. Internationally, Cuba saw how the pandemic can take down big countries like China and the USA. Regionally, the Latin American and Carribean region have seen up to 8 million cases and over 300,000 deaths as of September (Horton, 2020). The region is even projected to be the new epicentral of the pandemic. Cuba also saw a change of leader in the midst of the pandemic. Now Cuba is no longer ruled by the charismatic Castro brothers but instead by Miguel Díaz-Canel, an unexpected successor that was born after the revolution and the first president outside the Castro family to rule. Will President Díaz-Canel understand and continue the vision of making a medical powerhouse out of Cuba, a vision that isn't as embedded in him as it does the Castro brothers? It turns out that the new president is just as idealistic as the founding fathers. In a speech made to the UN General Assembly, President Díaz-Canel promised 'over 3,700 cooperation workers as well as 46 medical brigades' to countries suffering from the Covid-19 pandemic. A pandemic, he adds, that is worsened by the overly exploitative and unjust neoliberalist world system (UN Affairs, 2020). Through this speech, we can see how President Díaz-Canel is still intent on performing Cuba's role in being a health forward country while asserting Cuba's personal triumph in the pandemic as a way to gain even more prestige.

President Díaz-Canel's promise in his speech to the UN General Assembly is not just lip service. The president shows astonishing role performance domestically and internationally throughout the covid-19 pandemic. Since the news that there was a new pandemic in Wuhan, Cuba has already started on building a medical contingency plan for the region. That is why since the very first recorded case in Cuba on March 11, Cuba could quickly apply the plan to put the infected people

in quarantine. This measure was then followed by a preventive approach to the pandemic shown by how more than 28,000 medical students visited homes across the country for early pandemic detection of over 9 million Cubans (World Politics Review, 2020). Not only that, the Cuba government also applies air travel restriction and strict fines to citizens who break the quarantine rules. Because of these swift measures, Cuba only reported 108 deaths and 4,684 cases which amounts to only a tenth of the global average per capita (Marsh & Zodzi, 2020). Cuba has even become the object of jealousy by other countries because of how it starts to gradually ease restrictions and get back to normal life as of September. Not long after starting its own medical plan domestically, Cuba also starts to enact its role internationally. Cuba is amongst the first countries to send doctors to Wuhan, China. Cuba then continues to send help to countries that are devastated by the pandemic like Italy and Andorra. So far, Cuba has sent medical help to 40 countries and sent more than 4,000 doctors abroad for pandemic relief plans (Marsh & Zodzi, 2020). In return, just like the medical diplomacy that has been done before, Cuba received both material and immaterial gains. For example, Cuba who suffers from a lack of medical equipment and testing kit is now able to do 500 covid-19 testing per day because of a generous donation from China. Additionally, Cuba also receives praises from countries such as Caribbean and Jamaica, calling Cuban doctors' "lifesavers" and even having the government eager to learn a thing or two from Cuba's medical diplomacy (Marsh & Zodzi, 2020).

The success of the role performance of Cuba not only rests in its quantity but also in its quality. Compared to other countries, Cuba's help in times of need are seen as warmer and hence more welcomed because it incorporates human-centered approaches whereas other countries usually only offer financial help that often time does not comprehensively address the issue. Take the case of the USA for example, Cuba's biggest critic until now. According to an analysis made by Think Global Health (2020) on Cuba's and USA's response to Haiti's 2010 earthquake, Cuba's approach is more successful in building lasting relationships between donor and host countries. Other than sending 6,000 medical brigades, Cuba also trained Haitian physicians and taught literacy to over 150,000 Haitians all the while conducting free health check-ups to Haitians. USA on the other hand only sent $50 million dollars. This is not to say that financial aid has no use whatsoever for a disaster-stricken country or that every country needs to copy Cuba's step in establishing medical power as a nation's forte. What can be noted however is that Cuba's success in handling the pandemic internationally has a lot to do with how they are willing to go above and beyond in their aid. They are proven to choose to champion and implement global solidarity in a world where states are increasingly more individualistic in nature.

2. Collective Consciousness built by Mass Organization and Person-to-Physician trust

"It's a violation of my freedom, I think, and then also I just don't think they work," Amy, a Californian said. "A lot of stuff says it does, but then some doesn't." The United States of America is one of the many countries in which wearing masks have become an extremely heated point of contention during the Covid-19 outbreak (Stewart, 2020). The mask debate is seemingly more complex than it already is, as much as it's about health, science and risk—it's also about empathy. Does one person's right to ignore public health advice really trump someone else's right to live?

As our previous arguments detailed more on how the government of Cuba built their conception as a nation and how they wanted to be perceived by the international's eyes, along with elaborations as to how their charismatic leaders plays a major part in said identity building, we now would like to move slightly to the other side of the story. The government's responses and policies indeed played one role, but how its citizens perceive and how they actually behaved in response to the government's instructions will eventually be the definer of the success of measurements taken in response to COVID-19 pandemic. The execution of Cuban policies had its plus on some side already as they are supported by their health and medical forward culture, but the further analysis shall dig deeper into what contributed to Cubans sense of collectivism which shaped a more united response to the government when it comes to a health crisis.

According to Durkheim's collective consciousness theory, the set of shared beliefs, ideas, and moral attitudes that serve as a unifying force within a society is important if one is going to analyze how the fabric of society is being upheld. The collective conscience is the total social conscience, be it in the forms of judicial, governmental, scientific, industrial, in short, all special functions are of a psychic nature, since they consist in systems of representations and actions (Durkheim, 2012, pp. 172). The system of actions in Cuba carried a value in which primary care and prevention would be the forefront of the public health agenda. This belief of community-based healthcare systems has been embedded in the fabric of society since the law being put in 1967. The Constitution adopted in 1976 obligates the State to assure that there shall be "no sick person who does not receive medical attention.". It also articulates specific obligations of the State to provide a full range of universally accessible health services free of charge, as well as to guarantee the promotion and protection of the health of individuals. Thus, as early as 1976, Cuban law established a constitutional framework for the development of a comprehensive and universal program of health services (Evenson, 2005).

The first argument will be focused on dissecting Cuba's upstream preparedness with two mass organizations such as Committees for the Defense of the Revolution and The Federation of Cuban Women as the government's agency to spread awareness and warnings to the tiniest society unit, Cuban families and downstream readiness being performed by three-tiered Cuban community health system consists of Family Physicians Units, Polyclinics, and hospitals as the bedrock foundation of creating intimate, effective, and trustful relations between each individuals to health practitioners.

In its unique trail of history, mass organizations played quite the role in Cuban politics. Majority of Cubans perceive the conception of mass organization into a whole new level, borderline to the point of a national identity. Combined with the collective notion of identity majorly confined by self-reliance from being bullied by the countries in popular table and thus excluded even by the normies in regular tables of the international politics cafeteria, the Cuban government had to pave an easy way that is efficient in keeping its citizen on check, aligned, and faithful to the government. In their young age of revolution, Cuba made major decisions in order to build unity among its citizens as the mission executions to their visions. Aside from their unifying of three revolutionary organizations (the 26th of July Movement, Popular Socialist Party, and 13th of March Revolutionary Directorate) into a single national party (Communist Party of Cuba) officially designated in 1965 (Knight, 2020). They also

established mass organizations to support the policies implemented under the name of chasing dreamed government. One ubiquitous organization that is dominating the politics powerplay, even making it down to the minutest forms of social groups –neighborhoods, even families in homes– is the Committee for the Defense of the Revolution or commonly known as the CDR.

In the earlier days, CDR was indeed meant to assist the Cuban government in the sense of its name, to defend the revolution, proposed to maintain vigilance against 'ideological enemies' and intimidate dissenters (Knight, 2020). Albeit it has a questionable history and its story of mass accumulation may or may not include dubious measures, CDR's scope of influence across Cubans are most definitely not questionable and in no dubious manner whatsoever. However, in today's practices, the presence of CDR in society is now ubiquitous. Another example of how mass organizations became the bedrock of citizens united responses is the Federation of Cuban Women (Federación de Mujeres Cubanas or FMC), founded in 1960 by Vilma Espin (a feminist and revolutionary leader) and none other than Fidel Castro himself, with the main goals to incorporate women into the workforce and promote their participation in social and economic processes. A few of their milestones of success are the adoption of Cuba's Family Code back in 1975 which codified a societal norm and has become a tool for education and changes, followed by the higher involvement of women in higher educations (Evenson, 1986). Around 53% percent employees in the science work realm are women and women made up more than three quarters of directors in Cuban science institutes (UNFPA, 2018). Today, the FMC is recognized as both an official mechanism for the incorporation of women's issues into national politics as its membership includes the vast majority of Cuban women (85.2% of all eligible women over 14) (Cuba Platform, 2018).

In the public health dynamics in Cuban history, mass organizations like CDR and FMC had proven themselves crucial, jumping straight into societies acting like a field director holding a megaphone. The CDR brings the neighbors on a city block together almost every month to analyze legislation and government policies, discuss neighborhood problems and shortages, and plan how best to use collective resources. It became their duty to share information, including news on personal and public health issues (Spiegel et al., 2003). When the HIV outbreak hit back in the 1980s, the government's policy was to quarantine all seropositive persons in controlled areas. CDR played significant roles in the execution of quarantine policies as surveillance functions in neighborhood watch. CDR also had its share of roles in immunization and hygiene campaigns (Perez-Stable, 1991). With this level of penetration in smaller groups of society and taking into account the percentage of its citizens involved in mass organizations at the national level, this explains further how Cubans' responses towards the nation's policies are rarely divided as they generally have similar information sources and circulations. For example, after Cuban officials announced a 7 p.m.-to-5 a.m. curfew, it is stated that the curfew will be enforced through increased police presence and members of government-controlled organizations such as the CDR and the FMC (Torres, 2020). According to the FMC's Secretary General, Teresa Amarelle Boué, Cuban women have been crucial in the island's fight against COVID-19. Women make up 61 percent of the staff of the Henry Reeve brigades that have provided assistance in nearly 40 countries around the world. A big part of the country's team in charge of creating the Cuban COVID-19 vaccine are also women (Cuba: Raul Castro Greets

Women's Federation on Their Anniversary, 2020). Boué also reported that community leaders and health brigades have visited more than 642,560 families to ensure they have the support needed to confront the health emergency.

The second deliberation of how Cuban's consciousness and awareness of health protocols served the country a good deal comes from the person-to-physician relations in Cuba. The Cuban healthcare system is notable for its community-based practice. There are three types of healthcare institutes where residents can access medical treatment. First, residents can go to their Family Physicians Units located within their neighborhoods to receive primary diagnosis and emergency treatments. Then, if needed, patients will be required to go to the Polyclinic in their neighborhood to receive further physical examination and diagnosis. If the situation is too severe or complicated for the Polyclinic to deal with it, patients will be referred to a hospital.

This three-tiered integrated approach of primary healthcare is driven by community initiatives. The communities are taking active participation in the diagnosis of their health issues and are able to identify their health priorities. Aside from the community, the country also has well-trained capable doctors—to serve its population of 11 million, the country has 90,000 doctors. That's eight for every 1,000 citizens—more than double the rate in OECD countries such as the United States or the United Kingdom with 3 doctors per 1,000 population) (Hill, 2015). The combination of proactive patients and abundance of doctors have created strong trust between the two, both people's trust in the health system institution, and the institution's trust to ordinary people—to always put health solidarity in place. But why is the trust in doctors becoming this high? What is the best-kept secret?

It's again—the intimate bond of the doctors and their patients. The first tier of Cuban healthcare system, the Family Physicians Unit, put family doctors in clinics to care for everyone in their assigned neighborhood. At least once a year, the doctor knocks on the front door (or elsewhere, if the patient prefers) for a check-up. More than the standard ritual of listening to the heart and lungs and asking if the patients have noticed any blood coming out abnormally, these check-ups involve extensive questions about jobs and social lives and environment—information that's aided by being right there in a person's home (Hamblin, 2016). Aside from doing the normal procedure of taking blood pressure and checking hearts, the doctors will also take a careful note of the state of the home, checking anything that could affect the health of the individual and the family. This proactive approach to healthcare yields one of the most fundamental results that has been proven beneficial in times of crisis such as the COVID-19 pandemic because the Cubans are already familiar (hence, have faith in it) with the concept of health procedure, measures, and protocols since it has been introduced all through their livelihood. These doctors monitor closely the health and wellbeing of every single Cubans—and when the health danger strikes, it is easy for the Cubans to obey these health practitioners that have been with them their entire life. The doctors and nurses know where everyone lives, there is no getting out of the regular checkups. If they're healthy, the annual check-up is enough. But if they're showing signs of ill-health, if they drink too much, smoke or have a continuing health condition, they're seen much more regularly. It's an integrated, whole-person approach to healthcare, perhaps too intrusive for some, but widely accepted within Cuba (Hill, 2015). On top of that, their principle to prevent instead of medicating health issues further strengthens the

commitment of a healthy lifestyle. It makes sense for Cubans to go upstream, to catch the problem before it begins—because they simply don't have the money to treat complex illnesses and their neighborhood doctors might get them in trouble if they are not following the health protocols.

How does this community-based prevention healthcare translate into the COVID-19 context? Now, these neighborhood doctors participate in a full-blown campaign against the COVID-19 pandemic. One doctor, Dr. Caballero, knocked on a door and asked if anyone in the house had a fever or other COVID 19 symptoms (Elrich, 2020). The health workers are assisted by two mass organizations such as the CDR and the Women's Federation to watch and continuously warn the Cubans to wear face masks. Their investment to run their health sector—from medical school to local clinics are finally paid off by the low number of COVID-19 cases. The island of 11 million people has reported slightly more than 4,000 confirmed coronavirus cases, with fewer than 100 deaths, one of the lowest rates in the CELAC region during the pandemic (Aljazeera, 2020).

As for past examples, Cuba's vaccination program implemented in 1962 has left the country with some of the world's lowest rates of vaccine-preventable infectious disease. The vaccines and primary check-ups are always made mandatory (Hill, 2015). If the system is going to take care of people in dire situations, people must also let the system take care of them before those dire situations occur. The community-based healthcare system again has a strong commitment to take good care of the people, and the people also let the system take care of them because they know they are always in good hands.

Conclusion

With the world in uncertainties, the fact that Latin America, that the global southern hemisphere, especially Latin America - Caribbean region are the most hard-hit by the pandemic is most definitely a certainty. However, one name stood out in particular as it triumphed over its fellow CELAC countries as they managed to avoid a total healthcare system breakdown –Cuba.

In the case of governing a fresh off the –very rocky– boat nation, the Castros had to make crucial decision as to how their government wanted to be perceived which then would be significant to determine the dynamics of governing-governed relations, and they made the right decision to include making Cuba a health-forward country in their vision. Castro's conception is translated through programs strengthening their healthcare accessibility, ranging from free healthcare, subsidized medical education, to their one and only medical diplomacy. These later served as crucial pillars to their COVID-19 pandemic responses, not only did they manage to suppress their number of cases and mortality rate, they also managed to use the opportunity to employ diplomatic missions by sending their health 'army' to countries in need.

The centralized structure of the Cuban medical system allows for rapid mobilization of human resources both within and outside of its borders (Sims & K, 2002, pp. 389-400). The system is structured for preparedness and readiness in times of crisis, which includes relying on volunteerism from a well-educated and socially cohesive society. Taken together, Cuba's preparedness approach to health care allows for manageable responses in times of crisis. It invests deeply in upstream preparedness and downstream readiness. Alas, its people faith in their assigned family doctors,

whilst also having mass organizations to keep the information about COVID-19 in check is proven to be useful during the global pandemic situation. Again, the system is keen on taking care of the people, hence the trust that has been built is strong enough, so the people do not mind being taken care of by it.

All in all, Cuba shows that approaching health emergencies with compassion rather than fear and isolation is not an impossibility. Albeit its small size, economic instability, and decades long embargo from global powers, this tiny hamlet chooses to build and implement one of the most advanced health systems in the world, and in the process have made that very quality as their distinct mark. Both within the country with the help of sincere doctors and communities, and outside with their undying commitment to do medical internationalism based on solidarity, Cuba demonstrates that cooperation and compassion will do much more than fear and division. The island is made of cork, it may be unstable on some parts, but it is also unsinkable. As for now, the ship still sails on and strong, obviously thousand miles ahead of any other ships, including the bigger ones.

Bibliography

Aljazeera. (2020, September 1). Cuba imposes Havana lockdown as coronavirus spreads. Aljazeera. Retrieved October, 2020, from https://www.aljazeera.com/news/2020/9/1/cuba-imposes-havana-lockdown-as-coronavirus-spreads

Aras, B., & Gorener, A. (2010, February 18). National role conceptions and foreign policy orientation: the ideational bases of the Justice and Development Party's foreign policy activism in the Middle East. Journal of Balkan and Near Eastern Studies, 12(01), 73-92. https://doi.org/10.1080/19448950903507453

Brotherton, P. S. (2008, May). "We have to think like capitalists but continue being socialists": Medicalized subjectivities, emergent capital, and socialist entrepreneurs in postSoviet Cuba. Journal of the American Ethnological Society, 25(2), 259-274. AntroSource. https://doi.org/10.1111/j.1548-1425.2008.00033.x

Cuba Platform. (2018, September 14). The Federation of Cuban Women. Cuba Platform. Retrieved October 28, 2020, from https://cubaplatform.org/federation-cuban-women

Creswell, J., (2007). QUALITATIVE INQUIRY & RESEARCH DESIGN: Choosing Among Five Approaches. 2nd ed. SAGE Publications, p.73.

Cuba: Raul Castro Greets Women's Federation on Their Anniversary. (2020, August 23). Telesur English. Retrieved October 25, 2020, from https://www.telesurenglish.net/news/cuban-women-celebrate-60-years-of-their-organization--20200823-0003.html

Durkheim, E. (2012). The Division of Labor in Society. Martino Fine Books.

The Economist. (2020, March 11). New trade barriers could hamper the supply of masks and medicines. The Economist. Retrieved October 24, 2020, from https://www.economist.com/finance-and-economics/2020/03/11/new-trade-barriers-could-hamper-the-supply-of-masks-and-medicines

Elrich, R. (2020, May 28). How Cuba is succeeding in the fight against COVID. 48hills. Retrieved October, 2020, from https://48hills.org/2020/05/how-cuba-is-succeeding-in-the-

fight-against-covid/

Erikson, D. P., & Wander, P. (2008). Raúl Castro and Cuba's Global Diplomacy. Cuba in Transition, 18, 390-401. The Dialogue. Retrieved October 23, 2020, from http://archive.thedialogue.org/PublicationFiles/eriksonwander_ASCE18.pdf

Evenson, D. (1986). Women's Equality in Cuba: What Difference Does a Revolution Make. A Journal of Theory and Practice, 4(2), 295. -. -

Evenson, D. (2005, Nov/Dec). The Right to Health Care and the Law. MEDICC Review : Health and Medical News of Cuba. Retrieved October 25, 2020, from https://www.medicc.org/publications/medicc_review/0905/mr-features1.html

Feinsilver, J. (2010). Cuban health politics at home and abroad. Morbid Symptoms: health under capitalism, 46, 216-239. Socialist Register. Retrieved October 20, 2020, from https://socialistregister.com/index.php/srv/article/view/6772

Feinsilver, J. M. (2010). Fifty Years of Cuba's Medical Diplomacy: From Idealism to Pragmatism. Cuban Studies, 41, 85-104. Jstor. https://www.jstor.org/stable/24487229

Google News. (2020, October 23). Coronavirus (COVID-19) - Cuba. Google News. Retrieved October 24, 2020, from https://news.google.com/covid19/map?hl=en-ID&mid=%2Fm%2F0d04z6&gl=ID&ceid=ID%3Aen

Hamblin, J. (2016, November 29). How Cubans Live as Long as Americans at a Tenth of the Cost. The Atlantic. Retrieved October, 2020, from https://www.theatlantic.com/health/archive/2016/11/cuba-health/508859/

Hill, F. (2015, December 13). Prevention is better than cure in Cuban healthcare system. BBC News. Retrieved October, 2020, from https://www.bbc.com/news/health-35073966

Holsti, K.J. (1970, September). National Role Conceptions in the Study of Foreign Policy. International Studies Quarterly, 14(3), 233-309. 10.2307/3013584

Horton, J. (2020, September 23). Coronavirus: What are the numbers out of Latin America? BBC. https://www.bbc.com/news/world-latin-america-52711458

Huish, R. (2020, July 296-301). Solidarity Trumps Fear: Cuba is a Model for Global Health in the 21st Century. Journal of Latin American Geography, 19(3). DOI: https://doi.org/10.1353/lag.2020.0052

Knight, F. (2020, March 17). Cuba. Encyclopaedia Britannica. Retrieved October, 2020, from https://www.britannica.com/place/Cuba/Political-process#ref515658

Marsh, S., & Zodzi, J. (2020, September 14). Cuba punches above weight with 'white coat army' during pandemic. Reuters. https://www.reuters.com/article/us-health-coronavirus-cuba-doctors-idUSKBN2651NK

Petkova, M. (2020, April 1). Cuba has a history of sending medical teams to nations in crisis. Aljazeera. https://www.aljazeera.com/features/2020/4/1/cuba-has-a-history-of-sending-medical-teams-to-nations-in-crisis

Sims, H., & K, V. (2002). Popular mobilization and disaster management in Cuba. Public Administration and Development: The International Journal of Management Research and Practice, 22(5), 389-400. DOI : 10.1002/pad.236

Spiegel, J., Bonet, M., Yassi, A., Tate, R. B., Concepción, M., & Canizares, M. (2007). Evaluating the Effectiveness of a Multi-component Intervention to Improve Health in an Inner-city Havana Community. International Journal of Occupational and Environmental Health, 13(2), 188-194. https://www.tandfonline.com/doi/citedby/10.1179/oeh.2003.9.2.118?scroll=top&needAccess=true

Statista & Rios, A. M. (2020, October 9). Latin America: COVID-19 cases 2020, by country. Statista. Retrieved October 23, 2020, from https://www.statista.com/statistics/1101643/latin-america-caribbean-coronavirus-cases/

Stewart, E. (2020, August 7). Anti-maskers explain themselves. Vox. Retrieved October, 2020, from https://www.vox.com/the-goods/2020/8/7/21357400/anti-mask-protest-rallies-donald-trump-covid-19

Todd, H. (2020, June 15). Medical Diplomacy -- Lessons from Cuba. Think Global Health. https://www.thinkglobalhealth.org/article/medical-diplomacy-lessons-cuba

Torres, N. G. (2020, August 28). Government orders a curfew in Havana and other strict measures to fight coronavirus spread. Bradenton. Retrieved October 27, 2020, from https://www.bradenton.com/news/nation-world/world/article245329520.html

UN Affairs. (2020, September 22). Unlike neoliberalism, coronavirus does not favour the 'richest one per cent', Cuban President tells world leaders. UN News. Retrieved October 24, 2020, from https://news.un.org/en/story/2020/09/1073032

UNFPA. (2018, September 14). Mujeres Cubanas: Estadísticas y Realidades 1958-2008. Oficina Nacional de Estadísticas de Cuba. Retrieved October, 2020, from http://www.one.cu/50aniversariomujer.html

United Nations ECLAC. (2020, April 3). Latin America and the Caribbean and the COVID-19 pandemic Economic and social effects. Special Report COVID-19, 1(1), 1-14.

World Health Organization. (2020, October 24). WHO Coronavirus Disease (COVID-19) Dashboard. https://covid19.who.int/. Retrieved October 22, 2020, from https://covid19.who.int/?gclid=Cj0KCQjwuL_8BRCXARIsAGiC51ACFt7yUk3wqZ3MDKSVjN57N6kMj4Mme5ls814Wqz8une9TyZBXEdYaAlvzEALw_wcB

World Politics Review. (2020, April 9). How the COVID-19 Pandemic Is Revitalizing Cuba's Medical Diplomacy. World Politics Review. How the COVID-19 Pandemic Is Revitalizing Cuba's Medical Diplomacy

Increasing Effectiveness of Digital Tax through Addressing Digital Divide

Sheila Alifia Wahyuni and M. Hafizh Caesaro

Abstract

Since the Covid-19 pandemic, the Indonesian government has experienced difficulty in collecting revenue, illustrated by the decreasing tax income for 10.8% year-on-year (yoy) per May 2020. In June 2020, Indonesia's Ministry of Finance (MoF) established a digital taxation policy aimed towards streaming services, which is specifically stated to be the government's strategy to capitalize in the flourishing industry in midst of the pandemic. This taxation strategy relies on a high number of users and traffic for it to be effective. Thus, the amount of revenue that the government will receive is parallel to the number of customers of digital services. While the Indonesian government does work on a separate policy to increase digital literacy and narrow digital divide through the Ministry of Communications and Informatics, it becomes apparent that the acceleration of these policies should be prioritized. This paper argues about the importance of digital tax in Indonesia's economy as one possible solution of economic sustenance during the pandemic. More importantly, this paper aims to investigate the digital divide and the level of awareness of its population regarding digital services. We utilize the spatial analysis theory from Sujarwoto (2016) in order to understand the information gap in digital media consumption between people from inside and outside Java. Overall, this paper addresses the market gap in the utilization of digital services, as well as the factors that influence it.

Introduction

Since the Covid19 pandemic hit, Indonesia's government has been facing difficulty in collecting revenue, shown with the decreasing tax income for 10.8% year-on-year (yoy) per May 2020 (The Jakarta Post, 16 June 2020). In June 2020, Indonesia's Ministry of Finance (MoF) established a digital taxation policy aimed at streaming services, which is specifically stated to be the government's strategy to capitalize on the flourishing industry in midst of the pandemic (ibid). As established in the Financial Minister's Regulation, Indonesia's digital taxation will not be applied to all digital-based businesses. Rather, it specifies the tax to be applied to digital services in certain industries, most of which happen to be based from other countries as for now. This means, companies such as Netflix and Zoom will have to pay digital tax in Indonesia. Indonesia's digital taxation mandates those kinds of companies to pay for 10% VAT.

Digital taxation is not a new idea, the Organization for Economic Cooperation and Development (OECD) has been discussing the framework for global digital taxation (Bloomberg, 28 July 2020). However, the discussion is being stalled as there is a push and pull between the United States and G4 countries (UK, France, Italy, and Spain). The US has been opposing digital tax, citing that it is "ring fencing" the digital economy. Therefore, there also have been countries other than Indonesia which have been formulating and designing ways to implement it within their sovereignties in order to speed up ahead the OECD's discussion. France has been pushing for digital taxation to the European Union recently (Gadgets360, 11 September 2020). Indonesia's neighboring

country, Malaysia, has also regulated for 6% VAT on foreign digital services that are valued above RM 500,000 in 12 months (Quaderno, 22 October 2020). Other Southeast Asian countries, namely Vietnam and Thailand, are set to implement the digital taxation policy soon too. This comes as no surprise with the fact that Southeast Asia as a region has a high number of consumption of digital products especially in the pandemic era (The ASEAN Post, 10 June 2020). However, as a whole, the OECD is still studying and negotiating about the framework of such taxation, by collecting tax data (Magalhaes and Christians, 2020, Rethinking Tax for the Digital Economy after Covid-19), which makes emerging markets such as Indonesia take the quicker resolve than most developed nations.

Digital taxation has buzzed Indonesia's economic discourse with the growth of online streaming services such as Netflix and Spotify (The Jakarta Post, 27 July 2020). It briefly appears that there are two policy options that could be taken to dig deeper the economic potential of online streaming services. First, the Indonesian government could attract foreign investment and businesses that are interested to grow the online streaming services in Indonesia. Second, the Indonesian government could tax existing online streaming services to gain capital. With the inequality of digital infrastructure access in Indonesia, the answer should be neither, and the government should prioritize building the essential infrastructures first rather than taking downstream policy too early. With equal access to basic digital infrastructures, investment will come more naturally since there should be more economic activities happening on digital platforms.

It is apparent that the idea of digital taxation as a remedy for states to sustain their economies in the middle of the pandemic deems to be appealing for some countries, including Indonesia. However, this also begs the effectiveness of the regulation itself. Indonesia's digital taxation stipulates the tax collection with the number of users and traffic. This means that the larger the users of such services are in Indonesia, the greater the revenue Indonesia will receive. While Indonesian government does work on a separate policy to increase digital literacy and narrow digital divide through the Ministry of Communications and Informatics, it becomes more apparent that accelerating those policies should be put in the priority of the government too. This paper argues about the importance of digital tax in Indonesia's economy as one of the solutions to sustain the economy during the pandemic. But most importantly, this paper aims to investigate the digital divide in Indonesia and level of awareness about the digital services. This paper analyzes the case using spatial analysis theory from Sujarwoto (2016) to understand the gap of information in digital media consumption between people from Java and people from outside of Java. Thus, the goal of this paper is to explore the ways that can be utilized by Indonesian government to increase digital services consumption. Increasing digital services consumption will have both direct benefit and indirect benefit. The direct benefit will be the increase of tax collection revenue from digital services, and the indirect benefit will be boosting market competition among digital services providers in Indonesia which invigorates the economy. This should help to alleviate minimizing the economic downturn affected by the pandemic and give the government the revenue they need to fund other policies such as the social welfare policies for the lower-economic class people affected from the pandemic.

Research Question

This paper seeks to deepen the discourse of the importance of digital tax in the digital economy, which is getting more important in the light of the global pandemic. Therefore, it aims to answer one research question, which is:

1. Why is addressing the digital divide important for digital taxation policy in Indonesia?

Literature Review

Digital Divide

Digital divide explores the existence of inequality that comes with digitalization, which makes it a regular topic of debate in digital studies (Onitsuka et. al, 2018). In 2001, DiMaggio et. all understood digital divide through three tenets regarding access, which are: (1) The ability to use the Internet anywhere, (2) The ability to use the Internet at one's residence, (3) The ability to use the Internet at high-speed connection. They also proposed five aspects of digital inequality, which are (1) Equipment, (2) Autonomy of usage, (3) Skill, (4) Social support, and (5) Purpose of technology utilization. Van Djik (2006) suggested that digital divide should be concerned with types of access. There is material access, skills access, motivation access, and usage access. Wilantika et. al (2018) concerns digital divide with ownership of mobile phone and access to internet. As Van Djik, DiMaggio, and Wilantika have a similar stance in regarding digital divide as a concept that concerns with access which is more compatible with the status quo of Indonesia's digitalization, this paper will use their respective frameworks to approach the factors of digital divide that could affect digital taxation implementation in Indonesia

One of the most common arguments for supporting the digitalization of society is due to the internet's capability to act as a multiplier. It amplifies the business capability of everyday merchants, streamline communications, and improve the adaptability of the market. All of these advantages are closely related to the elimination of distance as a cost factor (Grimes, 2000). In all of the nations in the world, we can argue that Indonesia is one of the nations that can get the most advantage out of the internet's capability to eliminate distances. As the biggest archipelago in the world, communication and transportation is a logistical nightmare, and it's reflected with the unequal development that takes effect between Java and outside of Java. The Internet is hoped to be able to bridge this gap in development, thus reducing the gap of income opportunities and wealth overtime (Compaine, 2001). However, studies show that the amplifying potential of the internet goes both ways - it can also amplify inequality. This inequality of access to Information and Communication technology is called digital divide, defined as "differences between individuals, households, companies, or regions regarding their access to and usage of ICT (Chen and Wellman, 2004; Vehovar et al., 2006).

Spatial Inequality

Sujarwoto suggested that there are three factors which contribute to the disparity of digital divide: economic capital, human capital, and telecommunication infrastructure (2016). In the context of Indonesia, internet increases the inequality between Java and outside Java, as the lack of access outside of Java disincentivizes markets and governments to develop access to the internet

there, widening the digital divide in the process. This inequality is further exacerbated by the ever-increasing internet penetration in Indonesia, which reached 28% of the population (around 60 million people) in 2013. Indonesia is also one of the biggest users of Facebook and Twitter in the world. With the unequal access to higher education and the regional disparity that depends on regional natural resources, developing Indonesia's innate digital potential remains a difficult challenge that the government needs to tackle.

Puspitasari and Ishii (2016) conducted a similar study with an added focus on mobile internet and smartphone usage hypothesizing three factors of internet divide: economic status, educational status, and age of adopter (2015). The factors used are similar to Sujarowoto's except for the latter as they argue that younger people have higher propensity to own smartphones and thus adopt mobile internet (Puspitasari and Ishii, 2015). Most of the younger generations fall under the category of 'digital native', growing up in an era with ubiquitous technology forcing them to be acquainted with digital devices as well as the internet from infancy. Their older counterparts are not all as lucky and therefore have a comparatively lower adoption rate.

Sujarwoto's approach, one which incorporates the variable of telecommunication infrastructure, is considered more appropriate for this paper. Focusing on the availability of telecommunication infrastructure is more relevant to the status quo of Indonesia's digitalization, since it is the critical foundation that enables the digital economy in which digital taxation benefits from. The existence of the development gap between regions in Indonesia in digital infrastructures also implies an untapped potential for growth. If the government of Indonesia wishes to increase its revenue through increase of digital taxation, the government also needs to make significant effort to narrow the digital gap between different regions of Indonesia.

Digital Economy

Digital economy has roots in technological innovation (Bukht and Heeks, 2017). Bukht and Heeks define "digital economy" as an economic output aspect which is enabled mainly or solely from digital technologies. Tapscott (1996) suggested that digital economy covers two kinds of economic activity, which consists of sharing information on the internet and having exchanges on the internet. Magherio (1999) noted that The Emerging Digital Economy report from the US Commerce Department put businesses which utilized IT to be the definition of digital economy. This is similar to the understanding of the digital economy from European Commission (2014) which said that it is a "result of transformational effects of new General Purpose Technologies". Although digital economy is not the main concept that is discussed in this paper, understanding the digital economy is important because it illustrates the target of activity that the Ministry of Finance targets in the digital taxation policy. It essentially underpins digital-based companies as emerging tax subjects that come together with the growth of the digital economy.

Mechanism for the Indonesia's digital taxation

In June 2020, the Ministry of Finance released a new regulation which demands several kinds of digital-based businesses to pay taxes. The regulation is realized through Finance Minister's

Regulation Number 48 Year 2020 (Peraturan Menteri Keuangan No. 48/PMK.03/2020). This regulation enacts that online streaming services, which have been operating and providing services in Indonesia for a while now, are to be categorized as value added tax (VAT). VAT in itself is a type of tax that is levied on the price of a product or service, that is burdened to the customers (Online Pajak, 14 August 2018). In Indonesia now VAT includes those provided by foreign online streaming services and some other foreign-based services, in the so-called "digital taxation". VAT has a significant contribution to Indonesia's yearly revenue. It makes up for 29% of Indonesian government's revenue according to data from OECD in 2018, which can be seen in Table 1.

Unit	IDR, billion	Contribution to total tax revenue (in percentage)
Tax	2018	
Total tax revenue	1765590	
1000 Taxes on income, profits and capital gains	749977	42%
1100 Of individuals	156428	9%
1110 On income and profits	156419	9%
1120 On capital gains	10	0%
1200 Corporate	593549	34%
1210 On profits	578121	1%
1220 On capital gains	15428	1%
1300 Unallocable between 1100 and 1200	0	0%
2000 Social security contributions	61993	4%
2100 Employees	2496	0%
2200 Employers	5323	0%
2400 Unallocable between 2100, 2200 and 2300	54174	3%
3000 Taxes on payroll and workforce	0	0%
4000 Taxes on property	24901	1%
4100 Recurrent taxes on immovable property	19445	1%
4200 Recurrent taxes on net wealth	0	0%
4300 Estate, inheritance and gift taxes	0	102%
4400 Taxes on financial and capital transactions	5456	0%
Tax on Acquisition of Land and Buildings	0	0%
4500 Nonrecurrent taxes	0	0%
4600 Other recurrent taxes on property	0	0%

5000 Taxes on goods and services	743395	42%
5100 Taxes on production, sale, transfer, etc	743395	42%
5110 General taxes	537924	30%
5111 Value added taxes	520390	29%
5112 Sales tax	17534	1%
5113 Other	0	0%
5120 Taxes on specific goods and services	205470	12%
5121 Excises	159589	9%
5122 Profits of fiscal monopolies	0	0%
5123 Customs and import duties	39117	2%
5124 Taxes on exports	6765	0%
5125 Taxes on investment goods	0	0%
5126 Taxes on specific services	0	0%
5127 Other taxes on international trade and transactions	0	0%
5128 Other taxes	0	0%
5130 Unallocable between 5110 and 5120	0	0%
5200 Taxes on use of goods and perform activities	0	0%
5300 Unallocable between 5100 and 5200	0	0%
6000 Other taxes	185325	10%
6100 Paid solely by business	0	0%
6200 Other	185325	10%
Other local level	184807	10%
Other non local level	517	0%

(Table 1: Indonesia's Yearly Revenue, source: OECD 2018)

This means that VAT makes up for more than a quarter of the Indonesian government's yearly public revenue, which is a significant amount. The categories of those obligated to pay digital taxes, according to the Peraturan Menteri Keuangan No. 48/PMK.03/2020 are those which:

a. Use or have the right to use copyrights in literature, arts, scientific work, patent, design or model, plans or secret process, trademark, or other forms of intellectual property or industrial rights;
b. Use or have the right to use industrial or commercial or scientific equipment;
c. Use or have the right to use knowledge or information in scientific, technical, industrial, or commercial sector;

d. Use or have the right to use additional support or complementary related to usage or rights to use the rights above in letter (a), usage or right to use those equipment rights in letter (b), or grant of knowledge or information in letter (c) in a form of:
   1. Acceptance or right of acceptance of visual recording or audio recording or audio-visual recording, which is channeled through satellite, cable, fibre optic, or similar technologies
   2. Usage or right to use visual recording or audio recording or audio-visual recording, for television streaming orz
      radio streamed through satellite, cable, fibre optic, or similar technologies, and;
   3. Usage or right to use part or full spectrum of communication radio;

e. Use or have the right to use motion picture films, film, or video band for television streaming, or radio band for radio streaming, or;

f. Full or partial gains of right which is related to usage or grant of intellectual property or industrial rights or other rights as mentioned above.

This proposition by the Ministry of Finance is a reasonable one, considering that most of these companies are not from Indonesia and also not registered as a permanent establishment in the country, thereby liberating them from any tax payments in Indonesia. With this regulation, businesses will have to pay taxes for 10% of their profits. Netflix and Spotify have effectively been authorized to pay their taxes by October 2020, as the regulation only gives them transition time of three months before having to submit their tax to the Indonesian government. So far, Indonesia-based unicorn-level startups such as Tokopedia are not included in the obligation to pay digital tax. Therefore, such policy designation inevitably created different responses from business players. This aspect will be explored further in the Discussion part, as it also begs the question about effectiveness of digital taxation.

Research Method

This is aimed as an exploratory research to scrutinize possible factors that could affect Indonesia's digital tax collection. This paper will conduct data collection from secondary sources to see the significance of digital taxation and level of digital consumption penetration in Indonesia. It seeks to use a mixed method approach, utilizing quantitative and qualitative method. The quantitative method will be used to gather data, investigating the awareness about digital services and consumption in provinces. We will differentiate this data based on regions. This differentiation is essential to determine whether spatial inequality plays a factor to the level of digital consumption penetration among Indonesians. We also seek to investigate the usage of mobile phones and level of awareness using the survey, as a means to see the extent of digital divide in Indonesia and role of asymmetric information. In addition to that, we will use data about growth of streaming services in Indonesia. We will also use qualitative methods to conduct desk research about the significance of digital taxation and the regulation about it, by collecting media statements about why online streaming service is becoming an attractive industry to reap growth from. We will gather statements

from major media outlets and conduct a discourse analysis about how online video streaming service is viewed in Indonesia.

Research Limitations

This paper will explore the discussions around digital taxation policy and the way unequal Internet access can affect it. We will use secondary data about internet penetration in Indonesia and we will conduct differentiation based on regions to enable the usage of spatial inequality analysis framework. To specify about the political economy argument in this paper, we will focus the discussion on online streaming services. We will also add media responses regarding digital taxation policy. However, we will not be able to provide data regarding the consumption of online streaming services per regions in Indonesia, due to the lack of availability of such data and the lack of time needed to gather a proper amount of samples if we were to conduct primary data collection.

Findings and Discussions

Internet Penetration in Indonesian Society

We argue that there is an unequal internet penetration in Indonesia which could affect maximization of digital taxation. To prove this argument, we use the data from Wilantika et. al who used Digital Divide Index (DDIX) developed by Housing and Selhofer (2002), which have three indicators that have been adapted to Indonesia's condition (2006). Here is the comparison of Husing and Selhofer's indicators vis-a-vis Wilantika et.

	Before Adjustment	**After Adjustment**
Indicator:	a. Computer Ownership	a. Mobile Phones Ownership
	b.Internet use	b.Internet use
	c. Internet Usage at Home	c. Internet Usage at Home Sub Population
Sub Population:	d.Female gender	d. Female gender
	e. Age: 50 years and over	e. Age: 50 years and over
	f. Education: finished education at age 15 or earlier	f. Education: the highest certificate owned is SMP / MTs / Paket B or less
	g.Income: low-income group (the lowest quartile of the survey respondents)	g. Revenue: per capita expenditure is in the lowest quartile (Q1)

(Table 2: Adjusted Indicators of Digital Divide Index,
Source: Wilantika et. al from Husing and Selhofer)

Wilantika et. al used Mobile Phones Ownership instead of Computer Ownership because of consideration regarding data availability and technological relevance. We decided to use the result of the Digital Divide Index from Wilantika et. Al (2018) which can be found below in Table 3:

No	Province	DDIX
1	2	3
Low Level Digital Divide Group		
	DKI Jakarta	25,49
Medium Level Digital Divide Group		
	West Kalimantan	23,84
	North Sulawesi	23,82
	Central Java	23,73
	South Sulawesi	23,34
	North Kalimantan	23,07
	West Java	23,07
	Bangka Belitung	23,01
	West Sulawesi	22,94
	South Kalimantan	22,83
	Riau	22,71
	Gorontalo	22,65
	Lampung	22,57
	East Java	22,56
	South Sumatera	22,55
	West Sumatera	22,52
	West Nusa Tenggara	22,3
	East Nusa Tenggara	22,2
	East Kalimantan	22,17
High Level Digital Divide Group		
	Banten	22,03
	Southeast Sulawesi	21,87

	Central Sulawesi	21,74
	Jambi	21,67
	North Sumatera	21,13
	Bengkulu	21,09
	Yogyakarta	21,08
	Riau Islands	20,78
	Bali	20,62
	Aceh	20,14
	Papua	20,02
	Maluku	19,85
	North Maluku	19,81
	West Papua	19,39

(Table 3: DDIX Groupings based on Provinces, Source: Wilantika et. al)

Internet penetration has become more pervasive throughout Indonesia although it comes in varying degrees. As proposed by Sujarwoto's spatial inequality, Indonesia's development can be reflected in the distance between its regions to the capital city. Such development also includes the development of digital infrastructure in this context, which means that regions that are far away from Jakarta (the capital city) is more likely to have lower internet penetration. We calculate the index and categorize them based on regional groupings, which result in this data (Table 4):

Region	Province	DDIX	Average Regional DDIX
1	2	3	
Sumatera	Bangka Belitung	23,01	21,817
	Riau	22,71	
	Lampung	22,57	
	South Sumatera	22,55	
	West Sumatera	22,52	
	Jambi	21,67	
	North Sumatera	21,13	
	Bengkulu	21,09	
	Riau Islands	20,78	
	Aceh	20,14	

Java	DKI Jakarta	25,49	22,99333333
	Central Java	23,73	
	West Java	23,07	
	East Java	22,56	
	Banten	22,03	
	Yogyakarta	21,08	
Kalimantan	West Kalimantan	23,84	22,9775
	North Kalimantan	23,07	
	South Kalimantan	22,83	
	East Kalimantan	22,17	
Bali and Nusa Tenggara	West Nusa Tenggara	22,3	21,70666667
	East Nusa Tenggara	22,2	
	Bali	20,62	
Sulawesi	North Sulawesi	23,82	22,72666667
	South Sulawesi	23,34	
	West Sulawesi	22,94	
	Gorontalo	22,65	
	Southeast Sulawesi	21,87	
	Central Sulawesi	21,74	
Maluku	Maluku	19,85	19,83
	North Maluku	19,81	
Papua	Papua	20,02	19,705
	West Papua	19,39	

(Table 4: Wilantika et. al's DDIX Groupings adjusted to Regional Differentiation)

Table 4 makes it clear that as a region, Java has the lowest digital divide index, scoring high in its digital infrastructure aspects compared to other regions. Kalimantan follows in close second. This data also re-emphasize Papua being the region with lowest digital infrastructures, which is most likely to be influenced by the distance of the region to the capital. It means Sujarwoto's argument about spatial inequality being influenced by regional difference does have weight in reality.

The notion of internet penetration being influenced by regional differences is also confirmed by the data collected by the Central Bureau of Statistics (Badan Pusat Statistik / BPS) in 2018, which shows how there is a significant difference of internet usage in Indonesia in different regions. The data can be found below in Table 5:

Region	Province	Percentage by household	Average Percentage per Region
Sumatera (1)	Aceh	56,89	63,525
	North Sumatera	60,7	
	West Sumatera	64	
	Jambi	62,43	
	Bengkulu	58,49	
	South Sumatera	59,41	
	Bangka Belitung	65,78	
	Riau	68,73	
	Riau Islands	78,41	
	Lampung	60,41	
	Total Percentage	635,25	
Java (2)	Banten	75,39	74,3133333
	DKI Jakarta	89,04	
	West Java	70,61	
	Central Java	66,73	
	DI Yogyakarta	79,1	
	East Java	65,01	
	Total Percentage	445,88	
Kalimantan (3)	North Kalimantan	75,71	67,332
	West Kalimantan	54,99	
	Central Kalimantan	60,31	
	East Kalimantan	78,98	
	South Kalimantan	66,67	
	Total Percentage	336,66	
Bali and Nusa Tenggara (4)	Bali	74,15	56,4633333
	West Nusa Tenggara	53,03	
	East Nusa Tenggara	42,21	
	Total Percentage	169,39	
Sulawesi (5)	North Sulawesi	67,6	60,3983333
	Gorontalo	63,76	
	West Sulawesi	50,44	
	Central Sulawesi	53,42	
	South Sulawesi	65,22	
	Southeast Sulawesi	61,95	
	Total Percentage	362,39	

Maluku Islands (6)	Maluku	55,16	52,11
	North Maluku	49,06	
	Total Percentage	104,22	
Papua (7)	Papua	29,5	45,725
	West Papua	61,95	
	Total Percentage	91,45	

(Table 5: Central Bureau of Statistics, Statistik Telekomunikasi Indonesia 2018)

As we can see here, as a region, Java has the highest percentage of internet usage compared to other regions. On the contrary, Papua has the lowest percentage of internet usage in Indonesia. Owing to Sujarwoto's spatial inequality analysis tenets, it can be deduced that the reason for this significant disparity is caused by the access to capital that disproportionately benefits Java and puts farther regions such as Papua at disadvantage. What is more jarring is that DKI Jakarta dominates digital access even when compared to its in-island neighbors, such as compared to East Java which has the lowest internet access among all Java provinces, a province which also happens to be the farthest Javanese capital city from the nation's capital city Jakarta. However, East Java still has higher internet penetration compared to faraway provinces such as Papua. There is a common theme that is present in these different datasets: Internet access is highly influenced by the regional distances.

Questioning the Economic Appeal of Online Streaming Services in Indonesia during the Covid-19 Pandemic

Online streaming service is growing, it is predicted to achieve revenue around USD 140 million 2020 in Indonesia (Statista, 2020). And ever since the Covid-19 pandemic which forced many people to do activities at home, 92% of Indonesian online streaming services users increase their consumption of steaming content, according to a report from Integral Ad Science (Exchangewire, 8 September 2020). There are several ways of how streaming services companies usually differentiate themselves (Dailysocial, 9 December 2019). First is based on the content they have, such as Netflix with its Hollywood collection and slightly more premium pricing, iFlix with its Korean and Japanese collection and relatively affordable cost, and Viu with its Korean and Indonesian collection and its flexible payment method. Second, they differentiate themselves with pricing or payment methods. Netflix has slightly more premium pricing, iFlix has a flexible payment option which allows customers to pay using debit card instead of credit card, and Viu has competitive pricing compared to its predecessors. With this market condition, customers have plenty of service options to choose from.

However, online streaming services are touted to contribute in the momentary decline of television consumption as Netflix and Spotify have entered Indonesia ever since 2016. In the same year where they entered, Netflix's operations met opposition from some local businesses, leading to a temporary ban by PT Telekomunikasi Indonesia or Telkom, which is a major telecommunications company in Indonesia (CNBC Indonesia, 28 December 2019). There are some news outlets which speculate that the reason is because Netflix was seen as a threat to the television companies in Indonesia. Netflix's prohibition issue was then mitigated by its partnership with the Ministry of Education which followed soon after the ban. It seems that Netflix and its competitors' emergence

in disrupting the traditional media business model in Indonesia, enough to garner attention in how to capitalize them by the Ministry of Finance.

Yet, from the news outlet, it seems that most Netflix and Spotify audiences are people who live in urban areas, rather than people from outside of Java. There is a notion that currently Indonesian audience prefer to find their source of entertainment by subscribing to platforms, where even before the pandemic, the Jakarta Post made an article about how people now seem to prefer to watch movies on streaming services such as Netflix rather than going to the theatre because it is cheaper and provides a diverse collection (The Jakarta Post, 8 August 2017). However, considering that the news came from The Jakarta Post, a newspaper which largely focuses on urban perspective, it might be assumed that online streaming services consumption is still largely centered in urban areas.

Responses about Digital Taxation

The Ministry of Finance justified that digital taxation was created as a response to the Covid-19 pandemic (The Jakarta Post, June 2020, Indonesia defends digital tax policy despite US scrutiny). This policy so far affects a total of 28 companies which have been obligated by the Ministry to pay the tax (Kumparan, 10 September 2020). These 28 companies happen to be foreign-based. These companies have different "batches" of periods in which they are obligated to start paying their taxes. Here is the list of the companies that have been asked to pay digital taxes, which are:

Batch 1 (VAT per 1 August 2020)	Batch 2 (VAT per 1 September 2020)	Batch 3 (VAT per 1 October 2020)
Netflix International B.V	Facebook Ireland Ltd.	LinkedIn Singapore Pte. Ltd.
Spotify AB.	Facebook Payments International Ltd	Zoom Video Communications, Inc.
Amazon Web Services Inc	Facebook Technologies International Ltd	PT Shopee International Indonesia
Google Asia Pacific Pte. Ltd	Amazon.com Services LLC	PT Jingdong Indonesia Pertama
Google Ireland Ltd	Audible, Inc	Twitter International Company
Google LLC	Alexa Internet	Twitter Asia Pacific Pte. Ltd.
	Audible Ltd	Skype Communications SARL
	Apple Distribution International Ltd	PCCW Vuclip (Singapore) Pte. Ltd.
	Tiktok Pte Ltd	Novi Digital Entertainment Pte. Ltd.
	The Walt Disney Company (Southeast Asia) Pte Ltd	Mojang AB

		McAfee Ireland Ltd.
		Microsoft Ireland Operations Ltd.

(Source: Kumparan, 10 September 2020)

When being asked about why there are no Indonesian-origin companies in those lists, a representative from the Ministry of Finance said that the list will be added as time goes on, which means they do not disclose the possibility of adding Indonesian digital-enabled companies. Interestingly, the Ministry also created tax incentives to 18 sectors almost at the same time (Tirto, 2020). According to Tirto, these 18 sectors include agriculture, forestry and fisheries (100 KBLI); mining and excavation sector (27 KBLI); processing industry (127 KBLI); procurement of electricity, gas, steam, hot water and cold air (3 KBLI); Water management, wastewater, waste recycling, and remediation activities (1 KBLI). The contradictory approach taken in taxing those 18 sectors and the foreign online streaming services companies implies there might be something more to digital taxation than a mere economic response to the Covid-19 pandemic.

After the introduction of digital taxation, some Indonesian major companies reacted positively to the regulation. PT Telekomunikasi Indonesia's Vice President of Corporate Communication said that the policy is a good initiative from the government to ensure healthy competition among Video-on-Demand providers (Bisnis, July 2020). This seems to be a jab at the presence of foreign online streaming services in Indonesia, which is reflected in the statement from Vice Executive Director of Hutchison III who said that American companies should be obligated to pay tax to even the level playing field.

Negative response about the digital taxation policy came from the United States, where its Trade Representative expressed US' plan to investigate digital tax have been adopted or considered by some countries, including Indonesia (Deloitte tax@hand, 6 June 2020). In response to that, Indonesia said that it is open for dialogues to create a global digital tax regime that is "fair, non-discriminative, and consistent" (Bisnis, 21 July 2020). The adjective choice might sound ironic considering that Indonesian digital tax has yet to apply to its own unicorns such as Tokopedia, although the Ministry of Finance made no indication of impossibility of its application to the Indonesian-origin companies. It is not known yet if the US government has replied to Indonesian government's response above. Since the introduction of the policy, Netflix has shifted the burden of paying the tax by increasing its subscription price for its customers (The Jakarta Post, 1 August 2020), which is normal considering it is the common practice businesses take with VAT. However, this is not followed by Spotify or other streaming services, interestingly.

Why digital divide and spatial inequality could affect purpose of digital tax policy

The disparity of access to the Internet that most regions still face inevitably affects the full realization of digital economy potential in Indonesia. Not everyone in Maluku might not be familiar

with online streaming services such as Netflix since not all of them possess access to the necessary digital infrastructures, compared to people in West Java. Or imagine, a province as quite populous as North Sumatera, whose people might not be as interested as people in DKI Jakarta to watch Netflix because they do not have stable internet access, as hinted by its medium level of digital divide. Equal access to sufficient internet should be the priority to speed up digital economy implementation, that will inevitably boost online activities through streaming from services such as Netflix. With the wide digital divide among different regions in Indonesia, the government cannot yet to maximize the benefits of the digital economy through taxation either.

The skepticism towards digital taxation's ability to relieve Indonesia's economy is echoed with a statement from an economist, Pieter Abdullah, who said that "revenue from digital tax will not be enough to cover the decrease of state's revenue during Covid-19 pandemic" (Pajakku, July 2020). This statement is somewhat "proven" with the announcement from the Ministry of Finance which said that Indonesia received about 97 billion IDR from six online streaming services companies (Warta Ekonomi, 10 October 2020). This amount of revenue is considerably small compared to the total revenue from VAT gained in 2018 (see table 1). David Arif Winarko from a media company called Sindo also echoed a similar judgment, saying that such tax collection from digital taxation has not yielded satisfactory results (Sindo, September 2020). Although the digital taxation policy can be considered as an admirable effort of the government to decrease the fiscal impact from the Covid-19 pandemic, there is a lot to be done to maximize that policy. The most important step is to narrow the digital divide among regions in Indonesia, by creating equal access to digital infrastructures that is needed to increase digital economic activities, which will increase state's revenue in turn.

Bearing in mind the condition of spatial inequality that Indonesia still faces, it should come as no surprise that the tax revenue from the digital companies do not give significant contribution to the VAT. It is because accessing basic internet infrastructure is still difficult in many parts of Indonesia. Now that Covid-19 pandemic has shifted many activities into online, not just movie watching, the government should prioritize creating policy that gives quick access to the internet for Indonesian people all over the regions rather than making economic policies that center on the urban society's economy.

The hope of Indonesian government that the digital taxation policy could give some relief to the government's fiscal burden during the Covid19 pandemic might need some more evaluation. In addition to that, the current coverage of digital taxation policy is not taken utilized to the fullest, as it only targets selective companies. Although these industries are projected to grow, the policy should have considered the lack of digital infrastructures in Indonesia, which renders the policy itself rather ineffective in fulfilling its initial purpose. Indonesia should focus more on ensuring the fulfillment of internet access to all regions rather than sweating on a yet-to-be effective digital taxation. Thus, it is safe to say that digital taxation policy alone will not be enough to alleviate Indonesia's fiscal burden with how lacking in equal internet access among Indonesian regions.

Conclusion

The apparent rise of online streaming services in Indonesia is unfortunately not yet matched with the readiness of basic digital infrastructure that is the equal access to the internet. The lack of equal digital infrastructure makes it difficult for many other Indonesians to access the Internet, let alone accessing online paid streaming services such as Netflix. Instead of fully reaping the benefits of these paid streaming services, whose fees are the basis for the newly proposed digital tax, Indonesia creates yet another tax opportunity loss with how inaccessible these services are to Indonesian consumers. This condition makes it difficult to fully realize the digital economy in Indonesia and relying on digital tax to add revenue during the pandemic era.

That being said, digital tax has a myriad of opportunities and challenges that present with itself. On one hand, digital divide and spatial inequality analysis show that access to digital infrastructures is still hampered by regional limitations which demand more cost, which rather dilutes the hypothetical potential of digital tax in contributing to the state revenue. This is not to say that digital taxation does not give its own contribution, but rather that it should not be the sole framework Indonesian government uses to add its revenue.

In addition to that, the digital taxation also can seem unattractive to foreign investors and businesses that want to do business in Indonesia. Although this is rather debatable since digital taxation has been an emerging topic among the global economies, so it is more of a question of "when" rather than "why". It is also interesting to note that there is more to digital taxation than a mere fiscal burden alleviation strategy during Covid-19 pandemic, as Indonesian businesses embrace the way that digital taxation could enable a level playing field for online streaming services in Indonesia. There is a political aspect to the digital taxation policy which is worthy for a discussion for another day.

Nevertheless, although the effectiveness of Indonesia's digital taxation still needs to be questioned, it did manage to give some amount of revenue, although considered small, which could contribute to Indonesia's fiscal income. And it is important to emphasize that digital taxation policy needs to come together with equal digital infrastructures readiness throughout Indonesia's regions, the latter being the enabler of the former. It is the critical step towards achieving a promising digital economy in Indonesia. It is also worthy to consider that the digital taxation should expand its list of companies that are obligated to pay to include Indonesian-origin digital-enabled companies too, if we were to assume that they could reach to the regions of Indonesia better than the foreign-based online streaming services.

Bibliography

Badan Pusat Statistik Indonesia. (2019). Statistik Telekomunikasi Indonesia 2018. https://www.bps.go.id/publication/2019/12/02/6799f23db22e9bdcf52c8e03/statistik-telekomunikasi-indonesia-2018.html

Bisnis. (2020). Polemik Pajak Digital, Indonesia Buka Pintu Dialog dengan AS. https://ekonomi.bisnis.com/read/20200721/9/1269250/polemik-pajak-digital-indonesia-buka-pintu-dialog-dengan-as

Bisnis. (2020). PPh Digital, Pelaku Bisnis Sambut Positif. https://teknologi.bisnis.com/read/20200721/84/1269383/pph-digital-pelaku-bisnis-sambut-positif

Bukht, R., & Heeks, R. (2018). Defining, conceptualising and measuring the digital economy. International Organisations Research Journal, 13(2), 143–172. https://doi.org/10.17323/1996-7845-2018-02-07

Chen, W., & Wellman, B. (2004). The Global Digital Divide - Within and Between Countries. IT & Society, 1(2003), 39–45. http://citeseerx.ist.psu.edu/viewdoc/summary?doi=10.1.1.207.1713

CNBC Indonesia. (2020). Telkom Group Blokir Netflix 3 Tahun, Ternyata Ini Alasannya! https://www.cnbcindonesia.com/tech/20191228204813-37-126272/telkom-group-blokir-netflix-3-tahun-ternyata-ini-alasannya

Compaine, B. (2001). Re-Examining the Digital Divide Benjamin Compaine Research Affiliate, Internet and Telecoms Convergence Consortium, MIT Based on research for the forthcoming book: Communications.

Deloitte. (2020). USTR opens new investigations into digital services taxes. https://www.taxathand.com/article/13725/Indonesia/2020/USTR-opens-new-investigations-into-digital-services-taxes

Dimaggio, P., Hargittai, E., Celeste, C., & Shafer, S. (2004). From Unequal Access to Differentiated Use: A Literature Review and Agenda for Research on Digital Inequality*. Digitalinclusion. Typepad.Com. https://sci-hub.si/https://digitalinclusion.typepad.com/digital_inclusion/documentos/revdimaggio.pdf

Diniz Magalhaes, T., & Christians, A. (2020). Rethinking Tax for the Digital Economy After COVID-19. SSRN Electronic Journal. https://doi.org/10.2139/ssrn.3635907

Direktorat Jenderal Pajak. (2020). Peraturan Menteri Keuangan Nomor 48/PMK.03/2020. https://pajak.go.id/id/peraturan-menteri-keuangan-nomor-48pmk032020

ExchangeWire. (2020). 84% of Consumers in Indonesia and 76% in Australia Willing to See Ads in Exchange for Free Streaming. https://www.exchangewire.com/blog/2020/09/08/84-of-consumers-in-indonesia-and-76-in-australia-willing-to-see-ads-in-exchange-for-free-streaming/

Fictor. (2020). Pengenaan Pajak Digital Tidak Mampu Menutupi Penerimaan Karena Pandemi COVID-19. https://www.pajakku.com/read/5ee0802673d3a80b56c1afa3/Pengenaan-Pajak-Digital-Tidak-Mampu-Menutupi-Penerimaan-Karena-Pandemi-COVID-19

Heeks, R. (2018). Defining, conceptualising and measuring the digital economy. Article in International Organisations Research Journal. https://doi.org/10.17323/1996-7845-2018-02-07

Kumparan. (2020). Daftar 28 Perusahaan Digital Kena Pajak, Tak Ada Bukalapak dan Tokopedia. https://kumparan.com/kumparanbisnis/daftar-28-perusahaan-digital-kena-pajak-tak-ada-bukalapak-dan-tokopedia-1uAcbxDlKly

On, E. G., Of, T., & Digital, T. H. E. (2014). Working Paper : Digital Economy - Facts & Figures. March,

1–22.

Online Pajak. (2018). PPN: Pengertian, Tarif dan Jenis Barang yang Dikenakan Pajak Pertambahan Nilai. https://www.online-pajak.com/pengertian-ppn-adalah

Oxford Business Group. (2020). Can digital taxes help fund the Covid-19 recovery in emerging markets? https://oxfordbusinessgroup.com/news/can-digital-taxes-help-fund-covid-19-recovery-emerging-markets

Puspitasari, L., & Ishii, K. (2016). Digital divides and mobile Internet in Indonesia: Impact of smartphones. Telematics and Informatics, 33(2), 472–483. https://doi.org/10.1016/j.tele.2015.11.001

Sindonews. (2020). Penerimaan Pajak Digital Belum Menunjukkan Hasil Signifikan. https://infografis.sindonews.com/photo/1916/penerimaan-pajak-digital-belum-menunjukkan-hasil-signifikan-1600989557

Statista. (2020). Video Streaming (SVoD) - Indonesia. https://www.statista.com/outlook/206/120/video-streaming--svod-/indonesia

The Jakarta Post. (2020). After Spotify and Netflix, Indonesia eyes VAT collection from other tech firms. https://www.thejakartapost.com/news/2020/07/24/after-spotify-and-netflix-indonesia-eyes-vat-collection-from-other-tech-firms.html

The Jakarta Post. (2020). Netflix raises subscription prices for Indonesians - Science & Tech. https://www.thejakartapost.com/life/2020/08/01/netflix-raises-subscription-prices-for-indonesians.html

The Jakarta Post. (2017). Video on demand: An emerging industry - Entertainment. https://www.thejakartapost.com/life/2017/08/08/video-on-demand-an-emerging-industry.html

The Jakarta Post. (2020). Indonesia defends digital tax policy despite US scrutiny - Business. https://www.thejakartapost.com/news/2020/06/16/indonesia-defends-digital-tax-policy-despite-us-scrutiny.html

van Dijk, J. A. G. M. (2006). Digital divide research, achievements and shortcomings. Poetics, 34(4–5), 221–235. https://doi.org/10.1016/j.poetic.2006.05.004

Vehovar, V., Sicherl, P., Hüsing, T., & Dolnicar, V. (2006). Methodological challenges of digital divide measurements. In Information Society (Vol. 22, Issue 5, pp. 279–290). Taylor & Francis Group . https://doi.org/10.1080/01972240600904076

Warta Ekonomi. (2020). Hampir 3 bulan, Netflix, Spotify, dkk Baru Setor Pajak Rp97 Miliar. https://www.wartaekonomi.co.id/read308333/hampir-3-bulan-netflix-spotify-dkk-baru-setor-pajak-rp97-miliar

Wilantika, N., Sensuse, D. I., Wibisono, S. B., Putro, P. L., & Damanik, A. (2018). Grouping of provinces in Indonesia according to digital divide index. 2018 6th International Conference on Information and Communication Technology, ICoICT 2018, 380–388. https://doi.org/10.1109/ICoICT.2018.8528753

Yusra, Y. (2019). Indonesia's Battle of Video Streaming Platforms. https://dailysocial.id/post/indonesias-battle-of-video-streaming-platforms

Instruments of National Power for Indonesia in Fighting Covid-19: Lesson to Learn from China

Mega Mulianisa
Alumni of Sociology Universitas Negeri Jakarta
Megamulianisa@gmail.com

Abstract

COVID19 has changed daily lives from all aspects and humans are forced to survive. The government, as an institution with authorities to protect its people, is obliged to implement a set of political strategies to save many people's lives. This paper explains the national power instrument implemented by China in handling the coronavirus. As we know, the coronavirus originated from China, but China managed to recover faster. National power instruments, according to Stacie E. Goddard and Daniel H. Nexon in Dynamics of Global Power Politics: A Framework Analysis published by Journal of Global Security Studies, consist of five. They are the military, economy, diplomacy, culture, and symbolic instruments. These five indicators are used to analyze strategies employed by China in handling the coronavirus. This study aimed to reveal the COVID 19 cases in Indonesia as a global south country. The study pattern used was descriptive, by data explanation or description. Secondary data were sought by data search from various sources such as books, the internet, theses, and journals as the study reference. It is expected that this paper adds to scientific repertoire in handling the coronavirus as a recommendation material for decision-makers.

Keywords: Coronavirus, Instruments, National Power.

Introduction

In 2020, the world was surprised by the coronavirus emerging worldwide. All life segments on the earth are disrupted. The virus that is suspected to have its origin from a seafood market in Wuhan caused many big-scale events to be cancelled or postponed. The World Health Organization (WHO) declared the coronavirus as a global pandemic on 11 March 2020. The status assignment was caused by the rapid and extensive spread of the coronavirus (WHO Tetapkan Wabah Virus Corona sebagai Pandemi Global, 2020). As per 30 September 2020, 33.5 million people are infected by the coronavirus and 1.01 million are dead. Several countries listed to the Global South also demonstrated no decline in coronavirus cases. For instance, Indonesia, India, Bangladesh, and Myanmar, in which per 30 September 2020 remain high. Global South is identified with "third world countries" and remains in the developing state economically. However, it does not necessarily mean that Global South cannot handle the COVID-19. China and Vietnam are the Global South's success evidence in reducing the coronavirus case number.

In Indonesia, the first COVID-19 case was found in 2 March 2020, although the Epidemiology Expert of Universitas Indonesia Pandu Riono stated that the coronavirus was estimated to enter Indonesia since the beginning of January (Diumumkan Awal Maret Ahli Virus Corona Masuk Indonesia

dari Januari, 2020). The government issued the emergency disaster status from 29 February 2020 until 29 May 2020 regarding this virus. Large-Scale Social Restriction is implemented to prevent the virus spread. This regulation forces people to keep a safe distance from other individuals, avoid direct contact with others, and avoid crowds. In Jakarta, for instance, the first stage of PSBB was implemented on 10 April 2020 and extended to 3 June 2020. Besides Jakarta, 16 other regencies and cities also implemented PSBB. Some of them are Bogor City, Bogor Regency, Bekasi City, Bekasi Regency, Depok City, Bandung City, Cimahi City, Bandung Regency, West Bandung, Sumedang, Tegal City, Tangerang City, South Tangerang, Pekanbaru City, Makassar City, and Sumedang (Daftar 18 Daerah yang Terapkan PSBB dari Jakarta hingga Makassar, 2020). After PSBB, the government established the new normal stage, a concept to implement new habits in running the health protocol to prevent the virus from spreading. However, during the development, there is no substantial COVID-19 case reduction until today. The government of DKI Jakarta even implemented the second phase of PSBB in the mid-September 2020.

Besides the Large-Scale Social Restriction, the government also provided several aids such as groceries in March 2020, electricity bill exemption or electricity discount, pre-employment (prakerja) card, grant funds for small medium entrepreneurs, and employee salary subsidies. These aids provided by the government were not effective to eliminate the virus because the government was not strict in implementing its regulation. Therefore, many people are not taking it seriously. Many people violate the rules of wearing masks, not conducting social distancing, and performing events with crowds. On 2 October 2020, Indonesia reached 291,182 confirmed cases where 10,856 were declared dead due to the COVID-19 virus. The case number details are (25.8%) in Jakarta, (15.1%) in East Java, (7.8%) in West Java, (7.8%) in Central Java, (5.4%) South Sulawesi, (3.6%) North Sulawesi, (3.6%) South Kalimantan, (3.1%) in Bali, (3%) in East Kalimantan, (2.7%) in Riau, (2.2%) in West Sumatera, (2.2%) in South Sumatera, (2%) in Banten, (1.6%) in Aceh, (1.5%) in North Sulawesi, (1.3%) in Central Kalimantan, (1.1%) in West Nusa Tenggara, (1%) in Southeast Sulawesi, (1%) in Maluku, (0.9%) in Gorontalo, (0.9%) in Special Region of Yogyakarta, (0.8%) in Riau Islands, (0.7%) in West Papua, (0.7%) in North Maluku, (0.3%) in West Kalimantan, (0.3%) in Lampung, (0.3%) in West Sulawesi, (0.2%) in Bengkulu, (0.2%) in North Kalimantan, (0.2%) in Jambi, (0.2%) in Central Sulawesi, (0.1%) in East Nusa Tenggara, and (0.1%) in Bangka Belitung Islands (Peta Sebaran Covid-19, 2020).

Several critics toward the Indonesian government in social media and mass media are often asserted by the public who want the government to take a more serious and extra action to respond to this pandemic. Although some regulations and policies have been taken, the government is perceived to not handle the COVID-19 case seriously in Indonesia. Sectoral ego and irrational actions of politicians contribute to the government's failure. Had the government been strict with the rules established since the beginning, the result would not be this severe. Several impacts if this condition is extended are: First, social disorganization and dysfunction. Activity restriction, including working, causes thousands of people to lose their jobs or most of their incomes. Second, the public's concern regarding the future associated with health, family, and job. Third, increasing criminality against declining economic conditions. Fourth, increasing poverty and unemployment. The United Nations Development Program, UNDP, predicts that more than 55% of the world's population will not have

access to social protection; hence, the loss of this pandemic will affect all society. This pandemic also affects the education and human rights sectors, and in a more severe case, to the basic food security and nutrition (The Sustainable Development Goals, 2019).

The government is perceived to rule out the health sector and only focuses on the economy sector. Whereas, economic affairs are challenging to recover if the public is sick. The coronavirus in Indonesia, which was predicted to last only until June, missed far from the prediction and soared up until today. Indonesia has even become the critical target of foreign media. CNN Indonesia in its Foreign Media Critics to Jokowi in Handling Corona collected several media that wrote news regarding the COVID-19 in Indonesia.

Method

This study describes completely and systematically for the national power analysis instrument in handling the coronavirus in China. The study method used was qualitative descriptive because this method can illustrate a condition and identify the study problems. According to Jalaluddin Rakhmat, the descriptive study method is a problem-solving procedure by describing the study subject or object's condition of an institution, society, and others. Secondary data were collected through data search from various sources such as books, the internet, theses, and journals as references for the study. The data analysis technique is a process to obtain and systematically arrange data obtained from interviews, documentation, and field observations, which is then described in a particular category by determining which data is crucial and drawing a conclusion to be understood by readers (Sugiyono, 2010).

Critics on the COVID-19 Countermeasure in Indonesia

The continuously increasing COVID-19 number in Indonesia has not been handled seriously by the government. When other countries focus on the prevention and countermeasure of the coronavirus, the Indonesian government created blunder policies and jokes that underestimated the coronavirus. Whereas, the public expected an assertive and directed policy from the government. Here are some blunder policies during the countermeasure and prevention of the coronavirus.

First, false public communication. The government wanted to build a public opinion that the situation is under control and safe. However, this way of communication tended to underestimate the COVID-19 virus. Institute for Research, Education, Economic and Social Information (LP3ES) published research regarding political communication of President Joko Widodo's cabinet during the COVID-19 pandemic. At least there were 37 false statements from 1 January to 5 April 2020 (Ini Daftar 37 Pernyataan Blunder Pemerintah Soal Corona Versi LP3ES, 2020). 13 false statements pre COVID-19 or before the case was found, four false statements at the beginning of the crisis, and 20 false statements during the crisis. Some of them were the "just enjoy" statement, denial upon Harvard's research, jokes regarding corona that would not enter Indonesia due to its tough permissions, jokes regarding the wild horse milk that may expel the coronavirus, hot weather in Indonesia so that the virus could not stand, and other bizarre statements.

Second, the government avoided implementing lockdown. Lockdown, according to the Law

No. 6 of 2018, is called the Regional Quarantine. The Law commanded the public to implement lockdown during outbreak situations. Ideally, the public needs should be guaranteed for a 3-week period. In a situation where the outbreak has been determined as a pandemic by WHO, lockdown should be the choice. However, to save the economy, the government chose to conduct PSBB (Large-Scale Social Restrictions). This rule regulated social activity restrictions, mobility control, controlled isolation plan, basic need fulfilment, and sanction enforcement.

Third, the pre-employment (prakerja) card initiated by the government reaped abundant criticism. This program was perceived to not be appropriate to be launched during this pandemic. The public is more likely to need cash aids to promote their purchasing power. The pre-employment card selection system should also be tidier and more systematic. Those who are eligible to be elected are those who are affected by work (layoffs, unpaid leave or not being paid at all during the pandemic) not randomly selected. Public policy researchers from Universitas Indonesia Defny Holidin stated that this program is only appropriate during normal situations. Currently, when the outbreak haunts everybody, "the survival challenge is no longer about getting a job, but fulfilling subsistence needs (Program Kartu Prakerja Jalan Terus Meski Dikritik Habis-Habisan, 2020).

Fourth, promoting tourism using influencers. When other countries implemented travel bans, Indonesia opened tourism opportunities when the coronavirus cases were increasing. The government even expended 72 billion Rupiahs to find influencers in a tourism incentive package to repel the negative effect of the coronavirus spread. This budget aimed to enhance tourism promotions. Providing such a huge amount of money for influencers during this pandemic is certainly not an excellent choice.

Fifth, the anti-corona necklace claimed by the Ministry of Agriculture to kill 80- 100 percent of the virus. Indeed, this also reaped many critics. The anti-corona necklace was considered not to have a strong research foundation. Dean of the Faculty of Medicine, Universitas Indonesia, Ari Fahrial Syam, expressed a similar criticism. According to him, it was too much to consider the Ministry of Agriculture's findings to be a corona antivirus product.

Some of the things mentioned above are only part of the criticisms of regulations made by the government when handling the COVID-19. The people fully expect the
government to be more serious, alert, and assertive. Indeed, there are always imperfections and risks in a decision. However, trying to minimize the risks that might occur is the right step. After all, COVID-19 cases involving human lives cannot only be seen as numbers.

China's National Power Instruments in Handling COVID-19

In an international relationship, each country has its way to achieve its national goals. Thomas W. Robinson, quoting Hans Morgenthau, categorized national interests into six: 1. Primary interest, the national interest aiming to protect the nation's security defense, political system, and national identity. 2. Secondary interest, the national interest to protect its citizens in foreign countries. 3. Permanent interest, the national interest aiming to achieve national interests in a particular period. 4. Variable interest, the national interest based on public opinions and political situations in the country. 5. General interest, the national interest associated with positive behavior based on geographical

area and location, total population, and several aspects such as economy, trade, diplomacy, and international law. 6. Specific interest, meaning that the national interest is related to a particular time and issue.

Based on these national interest types, Indonesian interest in handling the COVID-19 pandemic refers to the specific and general interests. The specific interest means that the COVID-19 countermeasure is a problem of a particular time and issue. Meanwhile, the general interest refers to Indonesia's geographical area and location as an archipelago, which relates to the economic, diplomacy, and law aspects. The resource limitation by each country forces a country to determine its strategy. The Indonesian government limitation in handling COVID-19 should be minimized by optimizing existing resources. Here is where the national power instrument should present.

National power instruments, according to Stacie E Goddard and Daniel H. Nexon in Dynamics of Global Power Politics: A Framework Analysis published by Journal of Global Security Studies, consist of five instruments. They are military, economy, diplomacy, cultural, and symbolic instruments. In the analysis, they stated that military instruments encompass arms sales, defense pacts, access agreements, or other influences. The second instrument, i.e., economic instruments, are financial assistance, trad relations, economic sanctions, and others. Efforts in economic instruments are conducted by coercing, persuading, providing rewards, reducing or increasing economic dependence, and utilizing economic capital to obtain influences. The third instrument is diplomacy.

Stacie E Goddard and Daniel H. Nexon referred to Adler-Nissen, using the "diplomatic capital" term, which means that this concept is not only referring to diplomacy in regards to country representatives, but also the diplomacy created by actors representing companies, movements, or institutions related to international powers. Next is cultural instruments that utilize assets that provide membership status or signals in a group, such as music or movies. The cultural instrument is a part of "soft power". The last instrument is symbolic instruments that focus on representational politics, propagandas, persuasion, and other elements.

The COVID-19 pandemic emerged for the first time in China around December 2019. China conducted investigations and reported to WHO and other countries. This phase is called the Swift Response to the Public Health Emergency. Then, China conducted the Initial Progress in Containing the Virus phase from 20 January – 20 February 2020. The CPC Central Committee set up a leading group for novel coronavirus prevention and control and sent the Central Steering Group to Hubei. A joint epidemic prevention and control mechanism and in due course a mechanism to facilitate resumption of work were set up under the State Council. The third phase occurred from 21 February – 17 March 2020 where China managed to reduce the coronavirus case number. The fourth phase on 18 March – 18 April 20220, China won the critical battle in defending Wuhan and Hubei against COVID-19, which was a huge step in the national virus containment effort. The fifth phase is sustainable prevention and handling that was implemented since 29 April 2020 (China Daily, 2020). The authors tried to identify the strategies adopted by China in preventing and handling the coronavirus spread. The identification of strategies carried out by China was analyzed using national power instruments from the perspective of Stacie E. Goddard and Daniel H. Nexon that was previously mentioned.

Military instruments

Talking about the military is actually divided into two dynamics. First, external military dynamics including arms competitions, the development of weapons of mass destruction, and the intensity of open conflicts between countries. Second, internal military dynamics encompass all state strategies to maintain domestic stability, the regularity of the life of civil society, the continued stability of government from various sub-state threats, such as criminal acts, separatist groups, militias, mafia, and various other sub-state groups that undermine internal stability (Barry Buzan, Ole Waever dan Jaap de Wilde). In this case, we try to borrow the concept of internal military dynamics as the regularity of the life order of civil society by being involved in handling COVID-19.

First, the military was treating patients in Hubei province. On January 24, 2020 the Army, Navy, Air Force, Rocket Army, Strategic Support Force, Joint Logistics Support Force, and Armed Police Force selected more than 4,000 medical professionals to support Hubei in three parts. They performed duties at Huoshenshan Hospital, Taikang Tongji (Wuhan) Hospital, Maternal and Child Healthcare Hospital (Optical Valley Branch). The military has served more than 7,000 patients. This statement was said by Chen Jingyuan as general director of the Medical Service Bureau of the Logistic Support Department of the Central Military Commission (CMC). The conference on March 2, 2020 in Beijing was also attended by Zhao Haifei, deputy director general of the General Planning Bureau of the Logistic Support Department of the CMC, Zhang Tianxiang, deputy director general of the Transportation and Mobility Bureau of the Logistic Support Department of the CMC, Wu Qian, director general and spokesperson for the Information Office of the Ministry of National Defense, and Hu Kaihong, spokesperson of the State Council Information Office.

Second, the military took control by allocating medical masks, protective clothing, headgears, and other tools for the benefit of medical treatment in Wuhan. The air force dispatched 30 transport aircraft to dispatch professionals and medical personnel. Furthermore, 200,000 militias were dispatched from 28 provincial-level areas to assist local governments in completing tasks such as managing outsiders, site disinfection, transport of materials, and raising awareness of epidemic prevention (What Roles Did the Chinese Military Play in Fighting Covid-19? ,2020).

Third, the military was involved in scientific research funded by the Ministry of Science and Technology of the PLA and sent medical experts from the military to Wuhan to guide the research (PLA Rushes to the Rescue in Wuhan, 2020). This research sought to trace the origin of the virus and seek antivirus. These activities also involved companies, universities, and research institutions and had been approved by National Medical Products. In the end, the context of the military instruments discussed in handling COVID-19 in China is a threat that is included in the non-military category because it relates to the safety of the entire nation.

Economic Instruments

The economic sector is the next part that is also affected by the coronavirus outbreak. Reporting from PricewaterhouseCoopers research entitled Macroeconomic Impact of the COVID-19 in China and Policy Suggestions, there were at least three impacts of the coronavirus outbreak on the Chinese economy. First, the contribution of consumption to GDP was considered to have

decreased quite significantly. Second, investment decreased because developed businesses could not continue their production activities. Third, imports and exports also experienced a decline8. The following are the strategies in economic instruments carried out by China (China's Stop Leaders Pledge Bigger Role for Markets As Virus Hits, 2020):

a. Land
   - Provide flexibility in land use and national systems for land registration.
   - Reform land acquisition systems in rural areas and allow more rural land to be sold for commercial purposes.
   - Improve taxation on idle construction land.

b. Labor
   - Remove and implement flexibility barriers to household registration, except in big cities.
   - Run a trial run to allow household registration in the city of residence. • Allocate educational, employment and medical care resources to places appropriate to the population.

c. Finance
   - Continue to encourage future integration of benchmark lending and deposit rates with market rates.
   - Repeat the flexibility increment of the Yuan exchange rate.
   - Establish a mechanism to match civil servants' salaries to those of private sectors.

d. Capital Market
   - Improve the basic infrastructure for the stock market including listing, trading, and delisting.
   - Accelerate bond market development by expanding product sizes and types and push the connection program forward.
   - Actively expanding the opening of the financial sector in an orderly manner, including the opening of the futures market.
   - Gradually ease the market entry requirements for foreign financial institutions.
   - Continue to encourage future integration of benchmark lending and deposit rates with market rates.

e. Technology
   - Improve the market for data exchange
   - Promote standardization in data collection within AI, wearable device, and Internet of Things
   - Promote global cooperation in the development of antiviral drugs and vaccines.

Diplomatic instruments

The concept of diplomacy refers to political activities carried out by actors to achieve goals and maintain their interests. Stacie Goddard and Daniel tried to borrow Bordieu's idea of capital in this diplomatic instrument involving social and political aspects. In the book Bowling Alone (1983), Putnam stated that social capital is a part of social life, networks, norms, and beliefs that encourage participants to act together more effectively to achieve common goals. Therefore, solidarity is needed in a pandemic situation like this. China performed solidarity with other countries. One of them is Indonesia, which received assistance from China in the form of 50 portable ventilators, 150,008

Polymerase Chain Reaction (PCR) test kits, 80,000 medical masks, 1.4 million surgical masks, and 80,000 PPE shirts with a value of IDR 7.8 billion (Indonesia dapat Bantuan Bantuan Penanganan Covid-19 Ubah Kebiasaan Makan di Tiongkok, 2020). China has also committed to assisting Africa with the distribution of vaccines and the debt of relevant African countries in the form of interest-free government loans maturing until the end of 2020 within the FOCAC framework (FMPRC, 2020).

Cultural Instruments

The cultural instrument refers to the use of the power of values because factors outside of material reality are also important in dealing with a problem. Head of the Presidential Work Unit for the Development of Pancasila Ideology, Yudi Latif, explained the success of a number of countries in overcoming the crisis due to the COVID-19 pandemic because of their strong cultural resilience, such as Taiwan, South Korea, and Japan. China has also been trained to deal with the SARS pandemic long before Covid 19. One of the challenges of the values of life in China is for example "gongkuai" or "gongshao", meaning shared chopsticks. The concept of this culture is to serve food communally. Each family member will hold their own bowl containing rice. While the side dishes are placed on the table so they can be eaten together. They take side dishes using chopsticks which are also used to feed food into their own mouths. This activity has the impact of the spread of the coronavirus, so the Chinese government is trying to change this habit (Pandemi Covid-19 Ubah Kebiasaan Makan di Tiongkok Sumpit dan Sendok Disediakan Khusus, 2020). China has also prohibited the consumption of wild animals due to the coronavirus outbreak. Although this situation is considered difficult because wild animals have become the root of Chinese culture, which uses wild animals as food, traditional medicine, ornament clothing, or pets (China Ilegalkan Konsumsi Hewan Liar Setelah Wabah Covid-19, 2020).

Symbolic Instruments

This symbolic instrument refers to the use of propaganda or conducting a political framing to achieve a goal. Maybe we still remember about the feud that adorned our social cyberspace about the United States' allegation that the spread of the corona virus originated from the Wuhan laboratory. Although the WHO has stated that there is no evidence that shows the virus was made in a laboratory, of course China is trying to respond to this accusation. China began to actively carry out diplomacy through social media when it was impossible to do traditional paths of diplomacy. China was actively carrying out digital diplomacy via its twitter account. The account is MFA_China, which delivered more than 200 original tweets regarding the pandemic issue and retweeted the accounts of other Chinese diplomats. Until now, at least the account already has 208,000 followers from 21,000 followers at the end of January 2020. No wonder China finally uses social media in its diplomatic activities.

On Twitter's social media, China responded to US accusations by inviting the public to continue to believe in the experts and in accordance with scientific methods where data is rational and can be accounted for. In some of its tweets, China also framed its country as the country responsible for the coronavirus pandemic.

Conclusion

Besides its success in handling the coronavirus, the authors need to convey the criticism aimed at China at that time. China was thought to be hiding its existence, reach, and severity at an early stage. China only reported this at the end of December 2019. China's assistance to other countries was also not considered global altruism. Australian National University (ANU) with a concentration of expertise in China, Graeme Smith, asserted that it is used by the regime to reverse the narration of China being the source and cause of outbreaks to China being the controller and savior of the world during this pandemic.

The Indonesian government efforts to tackle the coronavirus pandemic are still ineffective. This is evident from the high death rate from this virus. The public continues to question the government's commitment. There needs to be a response in the form of new policies to fight this global virus. Handling COVID-19 requires the assistance and coordination of all parties. Maybe Indonesia cannot fully imitate China because the government, social and cultural systems are also different. However, these steps can be used as a reference in making regulations for the prevention and handling of COVID-19. China is one of the Global South countries that has been able to recover from the corona virus disaster. They have applied military, economic, diplomatic, cultural and symbolic instruments. Despite the many criticisms of China, they have proven their success. Before ending this paper, the authors must also express appreciation to several parties who have struggled in handling COVID-19 in Indonesia. Private companies, NGOs, governments and all individuals involved. All constructive criticism must still be present to find the best treatment.

The solutions that the authors offered first, formulating scientific-based policies, building partnerships between local governments and local civil society, flexibility in the division of roles in government, peaceful news, facts, and narratives through the mass media. These five things must be carried out consistently by the government.

Bibliography

News

https://covid19.chinadaily.com.cn/a/202006/08/WS5edd8bd6a3108348172515ec.html, accessed 29 September 2020.

China Ilegalkan Konsumsi Hewan Liar Setelah Wabah Covid-19, https://www.liputan6.com/health/read/4196146/china-ilegalkan-konsumsi-hewan-liar-setelah wabah-covid-19, accessed 30 September 2020.

China's Stop Leaders Pledge Bigger Role for Markets As Virus Hits, https://www.bloombergquint.com/china/china-s-top-leaders-pledge-bigger-role-for-markets-as virus-hits, accessed 2 Oktober 2020.

Daftar 18 Daerah yang Terapkan PSBB dari Jakarta hingga Makassar, https://nasional.kompas.com/read/2020/04/20/05534481/daftar-18-daerah-yang-terapkan psbb-dari-jakarta-hingga-makassar?page=3, accessed 2 Oktober 2020.

Diumumkan Awal Maret Ahli Virus Corona Masuk Indonesia dari Januari, https://www.kompas.tv/article/70893/who-tetapkan-wabah-virus-corona-sebagai-pandemi global, accessed 2 Oktober 2020.

Ini Daftar 37 Pernyataan Blunder Pemerintah Soal Corona Versi LP3ES,https://news.detik.com/berita/d-4967416/ini-daftar-37-pernyataan-blunder-pemerintah-soal corona-versi-lp3es?single=1 , accessed 3 Oktober 2020.

Indonesia dapat bantuan Bantuan Penanganan Covid-19 Ubah Kebiasaan Makan di Tiongkok, https://republika.co.id/berita/qbgtic354/indonesia-dapat-bantuan-penanganan covid19-dari-china, accessed 3 Oktober 2020.

Peta Persebaran Covid, https://covid19.go.id/peta-sebaran

PLA Rushes to the Rescue in Wuhan, https://www.bignewsnetwork.com/news/263929200/pla rushes-to-the-rescue-in-wuhan, accessed 30 September 2020.

Program Kartu Prakerja Jalan Terus Meski Dikritik Habis-Habisan, https://tirto.id/program-kartu-prakerja-jalan-terus-meski-dikritik-habis-habisan-ePZa, accessed 30 September 2020.

SCIO Briefing On the Efforts of China's Armed Forces in Fighting Covid-19, http://m.china.org.cn/orgdoc/doc_1_29302_1542904.html, accessed 30 September 2020

WHO Tetapkan Wabah Virus Corona sebagai Pandemi Global, https://www.kompas.com/sains/read/2020/05/11/130600623/diumumkan-awal-maret-ahli-- virus-corona-masuk-indonesia-dari-januari, accessed 1 October 2020

Book

Barry Buzan, Ole Waever dan Jaap de Wilde.(1998). Security: A New Framework for Analysis, Colorado.Lynne Rienner Publisher.

Sugiyono. (2010). Metode Penelitian Kuantitatif Kualitatif dan R&D. Bandung: CV Alfabeta Bandung.

Onuf, N.G. (1989). World of our making: rules and rule in social theory and international relations. London: Routledge.

Thosmas W. Robinson, (1969). The cultural revolution in China, Asian Security. Berkeley : University of California Press.

Article

Armstrong M. The Coronavirus Crisis and Leader Approval Ratings. (2020). Available online at: https://www.statista.com/chart/21437/coronavirus-and-leader-approval-ratings/. Bal, R. , de Graaff, B. , van de Bovenkamp, H. , & Wallenburg, I. (2020). Practicing Corona – towards a research agenda of health policies. Health Policy , 124 , 671–673. https://doi.org/10.1016/j.healthpol.2020.05.010

Intawan, C, Nicholson, SP (2018) My Trust in Government Is Implicit: Automatic Trust in Government and System Support. The Journal of Politics 80 (2): 601–614.

Stacie E Goddard, Daniel H. Nexon. (2016). The Dynamics of Global Power Politics: A Framework for Analysis. Journal of Global Security Studies, Volume 1, Issue 1, February 2016, Pages 4–18. https://doi.org/10.1093/jogss/ogv007

Translating Lessons from Covid-19: A Comparative Case Study of Malaysia, Vietnam, and Singapore

Muhammad Iqbal Hafizon[1], Fabian Nur Farizan[2], Joshua[3]

[1]Department of International Relations, Faculty of Social and Political Sciences, Universitas Padjadjaran; email: muhammad16142@mail.unpad.ac.id

[2]Department of International Relations, Faculty of Social and Political Sciences, Universitas Padjadjaran; email: fabian16001@mail.umpad.ac.id

[3]Department of International Relations, Faculty of Social and Political Sciences, Universitas Padjadjaran; email: joshua16001@mail.unpad.ac.id

Abstract

Presently, the security discourse in the Global South is still dominated by traditional security issues that focus on the interstate level as the origin of security threats. However, Covid-19 pandemic brought the non-traditional threat into the Global South as its ramification has caused a multidimensional crisis, especially in the health sector. This condition creates an urgency for the Global South to be adaptive in facing health security threats. This research aims to address the importance of developing a discourse on health security in the Global South as "lessons learned" from the Covid-19 pandemic using the analytical framework of human security and health security. Authors use the comparative case study method by Robert. K. Yin, which compares three case studies of Malaysia, Vietnam, and Singapore in applying the health security preparedness variables before and during Covid-19. The findings of this research include: (1) a comparison of the problems and challenges faced by the three case study countries during the Covid-19 health crisis; (2) the responses of the three case study countries in the face of the Covid-19 health crisis; and (3) projections of the readiness of the three case study countries for future health crises.

Keywords: Health Security, Human Security, Covid-19, Global South, Southeast Asia

Introduction

"The unknown-unknown" is the perfect term to reflect the phenomenon of the Covid-19 pandemic. Its presence has created a multi-dimensional crisis that forces the state, academics, private sector, and individuals to immediately adapt to it. The Covid-19 pandemic has triggered the emergence of new problems and unveils marginal issues of social, economic, environmental, and security. Meanwhile, one of the most relevant issues to discuss is non- traditional security issues, considering the emergence of the Covid-19 pandemic, which has become a wake-up call for countries around the world. The discourse of the non- traditional security has been developed after the end of the cold war, marked by the introduction of the term human security in the document Human Development Report issued by UNDP in 1994. UNDP defines human security as a "people-centered security framework" that guarantees individual freedom from want and fear by implementing four principles: people-centered, multi-dimensional, interconnected, and universality. UNDP divides the

concept of human security into seven dimensions, including economy, health, personal, politics, food, environmental, and community. Since then, the discourse about non-traditional security continued to evolve, especially among academics.

Importantly, Barry Buzan and Ole Weaver in Security: A New Framework for Analysis, introduced the individual as the unit of analysis - by entering the dimensions of political, economic, social, and ecological – in the development of security studies. (Barry Buzan, 1998) But, for Buzan and Weaver, the emergence of individuals as a unit of analysis does not necessarily replace the inter-state level as the main unit. Meanwhile, Ken Booth (1999), in his article entitled Security and Emancipation, explained the importance of the human emancipation aspect as the basis for developing security studies. According to Booth, the primary referent object should be assigned to individuals, not the states. Instead of being the aim of security, the state itself should be an entity that must create a sense of security. (Booth, 1999)

The development of non-traditional security does not necessarily crystallize in the vacuum of theory, but also in policy practices that can be observed and studied. One of the most visible phenomena was when the SARS pandemic overwhelmed most countries in Asia. Using Singapore as a case study, Ray Junhao Lin, in his research entitled from SARS to Covid-19, presents an important finding regarding Singapore's efforts to build their resilience against the SARS crisis. In his research, Junhao considered that Singapore's success in managing SARS was not only achieved through responsive (short-term) interventions but also by developing a capacity building that oriented towards increasing Singapore's resilience to pandemics as a source of threat.

This capacity building can be seen through the establishment of the National Center for Infectious Diseases (NCID), which is tasked to develop disease outbreak response system framework. In addition to NCID's establishment, the Singapore Ministry of Health has also increased programs that encourage promotional efforts such as health promotion, health screening, and nutritional advice to the broader community. Ray Junhao Lin's findings regarding the successful response to SARS by Singapore implicitly reflect the Global South's efforts in encouraging the development of non-traditional security discourses through policy practices. This finding also strengthens Amitav Acharya's argument in his research entitled The Making of Global International Relations, which explains the Global South's role in encouraging the development of non-traditional security discourses. According to Acharya, the Global South's significance is inseparable from the process of forming the perception of threats, which is oriented towards internal threats, in which these threats have the potential to affect the security regime and political stability of a country. Although, Acharya (1995) also states that the discourse on non-traditional security in the Global South remains an alternative to traditional security discourse.

This research aims to address the importance of developing non-traditional security discourses, especially health security by the Global South, as lessons learned from the Covid-19 pandemic. Authors used the comparative case study method by Robert K. Yin by comparing three case studies, including Malaysia, Vietnam, and Singapore, in applying health security preparedness variables before and during Covid-19. The selection of three case studies was based on Authors motivation to look for similarities in the application of health security preparedness variables

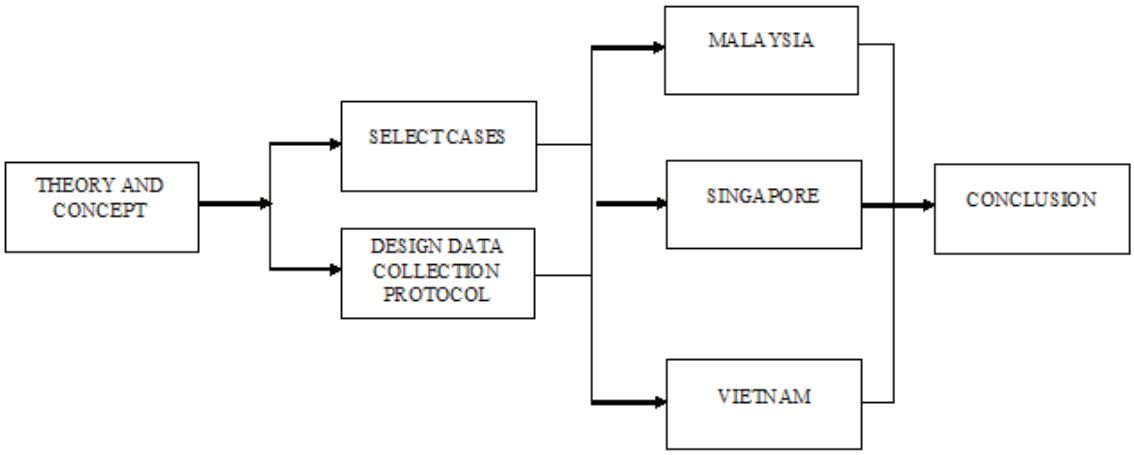
regardless of characteristics differences. Authors also used health security preparedness variables issued by the Colorado School of Public Health as a framework of analysis. The findings in this research consist of (1) Comparison of the problems and challenges faced by the three case study countries during the Covid-19 health crisis, (2) Comparison of the responses of the three case study countries in facing the Covid-19 health crisis, and (3) Projections readiness of each case study country to face future health crises.

Research Design and Method

A case study is an empirical method that investigates a contemporary phenomenon in depth and within its real-world context, especially when the boundaries between phenomenon and context may not be clearly evident. (Yin, 2018) Thus, the aim of this research is to explain a phenomenon with an assumption that the explanation involved important contextual conditions to the case. The quality of case study research design could be examined by tests below: (Yin, 2018)

1. Construct validity
2. External validity
3. Reliability

In this research, a holistic multiple-case method is conducted. Authors select 3 cases, Malaysia, Singapore and Vietnam. The research design can be seen on Figure 1 below:



Conceptual Framework

Human Security

As noted in General Assembly resolution 66/290, "human security is an approach to assist Member States in identifying and addressing widespread and cross-cutting challenges to the survival, livelihood and dignity of their people." (UNTFHS, 2016). The approach itself was first introduced in 1994 by the Human Development Report (HDR) by the United Nations Development Programme (UNDP). The report highlighted two of four major components of human security which were first proposed by President Franklin D. Roosevelt during his speech in 1941. The freedom to live in dignity

was then added to the report along with the two components, "freedom from fear" and "freedom from want". The 1994 HDR listed seven essential dimensions of human security: economic, health, personal, political, food, environmental, and community. (UNTFHS, 2016) The approach has five fundamental principles, people-centered, comprehensive, context-specific, prevention-oriented, protection and empowerment. (UNTFHS, 2016) However, the concept of human security that is defined by UNDP is open-ended. Hence it is important to narrow the concept before implementing it for academic purposes. Roland Paris construct a matrix of the security studies field as illustrated below: (Paris, 2001)

Security for whom?	Military	Military, nonmilitary, or both
States	Cell 1 National Security (Conventional realist approach to security studies)	Cell 2 Redefined Security (E.g., environmental and economic security)
Societies, groups, and individuals	Cell 3 Intrastate Security (E.g., civil war, ethnic conflict, and democide)	Cell 4 Human Security (E.g., environmental and economic threats to the survival of societies, groups, and individuals)

While cell 1 and cell 2 concern national security threats, cell 3 and cell 4 focus on threats to actors other than states, namely societies, groups, and individuals. This matrix helps to differentiate the principal nontraditional approaches to security studies from one another. (Paris, 2001) However, the boundaries between cells are not absolute since one phenomenon could simultaneously pose a threat to national security and non-state security. This research is focusing on health security, which will be discussed further in the next section.

Health Security

The concept of health security has gained significant interest among academics and policymakers. The nature of health security, which tends to pose a threat to stability, security, and public health, provides awareness on the importance of understanding non-traditional issues. The concept of health security was first described in the UNDP Human Development Report in 1994, which states that health security aims to ensure protection from diseases and an unhealthy lifestyle. Even though there is no universal definition of health security, we can still get a holistic understanding of the concept of health security through a fundamental question, namely "Security from What?" and "Security for Whom?".

To answer the "Security from What?" The Authors will use Simon Rushton's (2011) arguments.

According to Simon Rushton (2011), there are three arguments for the question, namely the issue of the mass spread of infectious diseases that threaten individuals and society, the open use of pathogenic microorganisms as biological weapons, and the fact that certain diseases can have social, political, economic, and military implications on the stability and security of a country and region (Rushton, 2011). To answer the "Security for Whom?", the Authors use the concept of human security, namely people-centered. From this foundation, health security is directed for the well-being of the people. This is also in line with Buzan's arguments that the vulnerability of individuals capable of impacting countries. Thus it's necessary for health security to provide an answer for all kinds of threats that could undermine people's health.

Through the understanding of health security, the Authors used the concept of the National Health Security Preparedness Index. The Authors recognize that the National Health Security Preparedness Index can provide answers to two basic questions regarding health security, such as security provided for the public (people-centered) in dealing with exigent threats, namely a pandemic. This index provides an overview of the country's state in preparing for, responding to, and recovering the consequences of a major health problem from disasters, disease outbreaks, and other large-scale emergencies. The index consist of six variables, which include: (Jacobson, Inglesby, Khan, Rajotte, & Burhans, 2014)

Health security surveillance	Detecting and monitoring health threats and identifying where hazards start and spread so that they can be contained rapidly
Community planning and engagement	Maintaining supportive relationships among government agencies, community organizations, and individual households; and developing shared plans for responding to hazards;
Information and incident management	deploying people, supplies, money, and information to the locations where they are most effective in protecting health and safety;
Healthcare delivery	ensuring access to high-quality medical services across the continuum of care during and after emergencies
Countermeasure management	storing and deploying medical and pharmaceutical products that protect against diseases and toxic agents, including vaccines, prescription drugs, masks, gloves, and medical equipment
Environmental and occupational health	maintaining the security and safety of water and food supplies, testing for hazards and contaminants in the environment, and protecting workers and emergency responders from hazards while on the job

NHSPI is able to provide an in-depth understanding of how Malaysia, Vietnam and Singapore in carrying out their health security, especially during the preparation period (pre-Covid19) and when the Covid-19 pandemic spreads.

Global South

With the end of the Cold War, the terms "Global North" and "Global South" received widespread academic attention. The term "Global South" itself broadly refers to the regions of Latin America, Asia, Africa, and Oceania and is a term that has evolved from the concepts of "Third World" and "periphery." The dimming of the third world concept and the rapid phase of globalization gives the term North-South as an alternative to the concept of "globalization," which questions the argument in the growing homogenization of cultures and societies (Dados & Connell, 2012). According to Dados and Connell (2012), the term Global South serves more than just a metaphor for underdevelopment (Dados & Connell, 2012).

This term refers to the entire history of colonialism, neo-imperialism, and the economic differences and social changes through which massive inequalities in living standards, life expectancy, and access to resources were maintained. The term global south itself does not imply that all global south countries are the same and can be put together in one category. However, the global south countries have a broad range of economic, social, and political attributes, but they share similar challenges and vulnerabilities (UNDP, 2014). This is also why UNDP includes Singapore into the global south because Singapore has similar vulnerability as other Southeast Asian countries, especially regarding the Covid-19 issue.

Observation

At the end of 2019, the world was shocked by the Covid-19 outbreak in Wuhan, which was later announced as a pandemic by WHO in March 2020. As a result, a multidimensional crisis hit almost all countries globally, given the status of Covid-19 as The unknown-unknown. Hence, what are Malaysia, Singapore, and Vietnam's challenges and responses to the emergence of the Covid-19 pandemic? How are mitigation carried out by Malaysia, Singapore, and Vietnam to manage the Covid-19 pandemic? In order to understand these two fundamental questions, Authors will present data related to the capabilities of public healthcare services from the three case studies before the pandemic took place, as well as policies during the pandemic. It is expected that these data could answer our research question regarding the health security preparedness of Malaysia, Singapore, and Vietnam in the face of the Covid-19 pandemic.

Malaysia

Pre Covid-19

Asia is a region that continues to be a centre of emergence of various infectious diseases and viruses. Starting from SARS, H5N1 and most recently Covid-19. Malaysia, as a country that is part of the cross-section of the Asian region, is also impacted by it. Malaysia itself has faced a quite severe outbreak in Malaysia like the 1999 Nipah virus outbreak. With this outbreak, it forces policymakers to cope with new strategies in case of a further pandemic. This is what underlines Malaysia to create a "National Influenza Pandemic Preparedness Plan" (NIIP). NIIP serves as a new plan for preparedness and response to face an influenza pandemic. The NIIP, created in 2006, provides a strategic framework for a multisectoral response and contains specific recommendations and actions to be

taken by the Ministry of Health at various levels, departments and other government agencies and non-governmental organizations to ensure that resources can be mobilized and used efficiently (Ministry of Health Malaysia, 2006). This was supported by the creation of a Crisis Preparedness and Response Center (CPRC) in 2007 under the supervision of the Malaysian Ministry of Health to become a focal point or the management of health-related crises and disasters.

Drawing from NIIP, Malaysia then developed the Malaysian Strategy for Emerging Diseases (MySED) Workplan (2012-2015) and further enhanced its strategy by issuing the Malaysian Strategy for Emerging Diseases and Public Health Emergency Work Plan II (2017-2018). MYSED II aims to provide a high-level framework that can provide the direction and approach to detail hazard specific strategies (Ministry of Health Malaysia , 2017). MYSED II also identifies and develops threats and hazards for public health emergency preparedness PHEP (Ministry of Health Malaysia , 2017). In addition, Malaysia with MYSED II also uses risk mapping in determining direct first responders, identifying human resources and facilities needed, and identifying deficiencies.

Malaysia also prepares for the pandemic by conducting several training sessions that involve numerous sectors. For example, it was conducting a multi-hazard Simulation / Exercise SOP for PHEP (Ministry of Health Malaysia , 2017). These activities include other non-health agencies and departments, security authorities, public and private sector organizations, and civil society (Ministry of Health Malaysia , 2017).Malaysia itself allocated as much as 29 billion RM for the health sub-sector in 2019, the budget was an increase of 7.8 percent compared to the 2018 budget. In addition to increasing capabilities, Malaysia also increased laboratory performance by strengthening the current diagnostic testing infrastructure and service delivery in General Laboratories (Ministry of Health Malaysia , 2017). In fact, since 2017, Malaysia has prioritized laboratory testing for examining human diseases since 2017, including Polymerase Chain Reaction (PCR) testing for the Influenza virus and MERS CoV (Ministry of Health Malaysia , 2017). Malaysia is also improving its National Laboratory Interagency Biosafety and Biosafety Committee. This also goes hand in hand with an increase in the number of trained laboratory workers.

During Covid-19

Malaysia's planning and strategy then received the real test when the Covid-19 pandemic hit. Malaysia itself started ahead of time in its plans to prepare for the pandemic. Prior to the first case, on January 20, 2020, the Malaysian Minister of Health announced that the ministry is now in the process of collecting data on previously 'non-notifiable' cases of influenza following the emergence of the virus in Wuhan. Even so, many Malaysians are not prepared to face the pandemic, primarily because of the political crisis that occurred at the same time. However, the Malaysian government continues to issue various rapid responses to protect its citizens from COVID-19.

The Ministry of Health plays a vital role in ensuring maximum preparedness to contain the spread of the virus (Shaha, et al., 2020). Among the earliest efforts made by the Ministry of Health to prevent disease transmission was the enforcement of health checks at all entry points to Malaysia (Shaha, et al., 2020). The preparedness and response adopted by CPRC Malaysia also succeeded in detecting and controlling the first cluster of local transmission of COVID-19 in Malaysia (Ahmad, et al., 2020).

Aggressive action was also conducted and coordinated with the police to further identify, testing and enforce 14 days self-quarantine for suspected carriers.

To increase efforts to control the spread of the virus, Malaysia implemented a Movement Control Order (MCO) on March 18, 2020. MCO itself was a restriction on the movement of people into or out of an area (Ministry of Health Malaysia , 2017). After that, the Malaysian government appointed a referral hospital to treat patients, the provision of PCR tests was distributed to several government hospitals and medical laboratories, and a management protocol was developed. Public halls and indoor stadiums will also be used if cases reach 1000 cases per day (Tang, 2020). To support this, the Malaysian government spent RM1 billion to meet medical needs, such as purchasing equipment and services for COVID-19 response. The health worker also provided an allowance of RM 600 (Shaha, et al., 2020).

Cooperation with various parties was also carried out. With regard to funding, the Ministry of Health and Tenaga Nasional Berhad (TNB) formed an action coalition to get financial assistance from corporate companies, government-linked companies (GLC), and other organizations in Malaysia in an effort to combat the outbreak (Shaha, et al., 2020). The funds raised were used by the Ministry of Health to replenish medical supplies and health care items needed to deal with COVID-19.

The Malaysian government has also developed the Sejahtera application to assist with the COVID-19 outbreak. MySejahtera allows the Ministry of Health (MOH) to monitor the health condition of users and take immediate action to provide the necessary care. The Ministry of Health is also trying to be transparent in dealing with the pandemic by providing adequate and up-to-date information to the public on various platforms (Shaha, et al., 2020). The protection of health workers is also carried out by assessing the need for PPE (personal protective equipment) in all health facilities to ensure the adequacy of the number, type and quality of PPE (Nienhaus & Hod, 2020).

Singapore

Pre Covid-19

Singapore is one of the countries in the Global South that pays special attention to health security issues. The SARS crisis in 2003 was the main trigger of Singapore's massive reforms in the health service sector, as an effort to increase Singapore's capacity to face health threat categories such as infectious diseases, epidemics, and pandemics. Singapore realized that the deaths of 33 residents during the SARS period had shown weaknesses in Singapore's epidemiological surveillance and health care system management for emerging infectious diseases. (Goh KT, 2006) From this situation, Singapore then introduced several strategies to improve their pandemic management capabilities. First, Singapore revised Infectious Diseases ACT as an effort to increase Singapore's policy capacity, both in the context of preventive and responsive.

In a preventive context, this revision allows the Singapore government to increase curative and promotional budgets through policies such as conducting professional personnel and training health care workers in outbreak responses to holding 4-yearly scenario-based simulation exercises at all public hospitals to evaluate and provide feedback. on their pandemic response plans. (Badaruddin H, 2016) In a responsive context, this revision allows the Singapore government to run

a quarantine scenario that focuses on: (1) Eliminating nosocomial transmission through substantially enhanced infection-control practices in health care institutions; (2) Preventing additional importations of infections through temperature screening, health declaration cards, and travel advisories at the airport and seaport; (3) Stopping transmission through education, contact tracing, and home quarantine measures. (M. Deurenberg-Yap, 2005)

Second, in order to increase organizational and bureaucratic capacity, the Singapore government established the National Center for Infectious Diseases (NCID) as an agency that has a significant role in managing mitigation, including health screening and supporting information during the epidemic/pandemic. NCID has also developed a disease outbreak response matrix, which serves as a reference for the government to issue a containment policy based on pandemic categories. Efforts to strengthen Singapore's capacity to infectious diseases as a threat category through an organizational approach have enabled Singapore to implement the Disease Outbreak Response System Condition Framework, which is intended as a basis for the country's response to various infectious diseases outbreaks that may hit Singapore.

During Covid-19

Given the SARS crisis experience led Singapore as one of the countries that were quite sensitive to the Covid-19 outbreak in Wuhan. This condition can be seen from some of Singapore's responsive policies in the following timeline, including: (1) On 3 January, 2020, the Singapore government has issued a health screening policy for Wuhan arrival; (2) On 29 January, the Singapore government began operating the NCID Screening Center to optimize screening and contact tracing operations, and (3) On 5 February 2020 the Singapore government succeeded in providing SARS-CoV 2 testing in all public hospitals in Singapore. (Lin, 2020) To prevent the potential spread of the Covid-19 virus, the Singapore government issued several strategies consisting of several approaches, including: surveillance and containment, border control measures, community and social measures, curative health care delivery, and managing sick health care workers.

First, in the surveillance and containment approach, the Singapore Government responds quickly by first defining suspect cases based on clinical and epidemiological criteria as of 2 January 2020. This was done by Singapore to simplify the screening and tracing process. NCID then classified the suspected cases into two categories, low and high-risk suspected cases. High-risk suspect cases will be isolated using public facilities, while low-risk suspect cases are recommended to isolate themselves at home. Patients exposed to Covid-19 will then be asked for information by the NCID Screening Center in an effort to carry out contact tracing and cluster investigation.

Singaporean government released the TraceTogether application to identify close contacts between individuals and patients with Covid-19. In order to increase tracing capacity, the Singapore government issued a policy as of 5 February 2020 to expand the stakeholders allowed to carry out laboratory tests, from initially being limited to the National Public Health Laboratory to all public health hospitals in Singapore. (Lin, 2020) This makes Singapore's test capacity increased to 8000 tests per day. On 1 June 2020, the test capacity was increased from 8,000 tests per day to 40,000 tests per day, as an implication of the involvement of a significant private laboratory to conduct

laboratory tests and 800 Public Health Preparedness Clinics, which are responsible for screening and referring suspect cases through the Swab and Send Home program. (SASH). (Chua, 2020)

Second, on the border control measures approach, the Singapore Government implements mandatory 14 days of self-isolation for every individual entering Singapore. In addition, the Singaporean government has also implemented a travel ban on flights originating from Mainland China, South Korea, Italy, France, Spain, and Germany. (Lin, 2020) Third, on the approach of community and social measures, the Singapore government focuses on community engagement as an effort to increase public knowledge and awareness of the Covid-19 pandemic. The Singapore government also announced daily report cases as a public communication led by the ministry of health and epidemiologists as a form of government transparency to the public. The Singapore government also uses the collective memory narrative of the SARS crisis as an effort to improve public discipline in implementing the Disease Outbreak Response System during the Covid-19 pandemic. In addition, to prevent the emergence of public anxiety, the Singapore Government appointed a Public Health Preparedness Clinic to provide consultation facilities, both related to clinical and psychological issues, to Singaporeans. As of 7 April 2020, Singapore has implemented circuit-breaker measures which have implications for the closure of public spaces such as offices, tourist attractions, schools, shopping centers as an effort to encourage the home-based activity movement.

Fourth, in the healthcare delivery service approach, the Government of Singapore implements policies previously made to increase their capacity against pandemics, such as ensuring the availability of PPE and essential medicines within six months. (Lin, 2020)

To support this step, the Singapore Government issued import permit relief to fulfil the availability of domestic PPE. In addition, the Singapore Government through the ministry of health has also increased the capacity and quality of PCR Test services through the implementation of real-time PCR developed by epidemiologists and local scientists, which the results can be shown in just three hours. (Chua, 2020) Fifth, in the approach of protecting healthcare workers, the Singapore Government prioritizes well-being and health of health workers, considering their role as the front guard in handling Covid-19. The government provides quarantine facilities, five days of medical leave, distribution of PPE, and incentives to conduct PCR tests. It is expected that these incentives can increase satisfaction from health workers to continue to contribute to dealing with the Covid-19 pandemic.

Vietnam

Pre Covid-19

As one of the Global South countries, Vietnam has experience with infectious diseases. In 2003, Vietnam was named the first SARS-free country in the world by WHO. Vietnam then made several efforts and steps to overcome the health crisis and increase healthcare capacity. This can be seen from health expenditure which has increased every year until 2016 reached VND 125.6 trillion or 5.9% of Vietnam's GDP. The increase in health expenditure is in line with the increasing number of Vietnam's population. In 2019, it was calculated that 87.7% or around 83.6 million of Vietnam's population have health insurance, and 97% of Vietnamese children have received immunizations.

(Reinhardt, 2019) The immunizations given include 10 different vaccines with 3 of them only given to the people living in high-risk areas. Until 2013, Vietnam had a total of 285,565 hospital beds out of 13,680 private and public health facilities. (WHO, 2016) Vietnam's public health facilities are divided into four levels, Central Level, Provincial Level, District Level, and Commune level. Meanwhile, based on data from WHO, Vietnam has 0.76 doctors per 1000 population. (WHO, 2016) In order to strengthen the capabilities of health facilities at the lower level while reducing the capacity burden at the Central Level, Vietnam has implemented the Ch đo tuyn or Direction of Healthcare Activities (DOHA).

DOHA which involved various stakeholders focused on technology transfer and training of medical personnel. In 2009 DOHA succeeded in reducing overcrowding public facilities at a higher level by 30%, and in 2020 it is targeted to be able to reduce the bed occupancy rate of the central hospitals in Hanoi and Ho Chi Minh City (which exceeded 120%) was set at 100% or less; and districts and provincial hospitals were expected to achieve occupancy rates of 80%. (Takashima, Wada, Tra, & Smith, 2017) In addition to increasing health expenditure, Vietnam is also collaborating with various stakeholders to increase their capacity and healthcare readiness. Vietnam's national emergency operations center, which was initiated in 2015 and an event-based surveillance program launched in 2016 are examples of the results of Vietnam's collaboration with external actors.

During Covid-19

When the Coronavirus broke out, the emergency operations center was activated to prevent and control the spread of the virus. The emergency operations center then takes several steps such as detecting, isolation, tracing cases, and the surveillance of suspected cases and close contact groups. Vietnam's response to Covid-19 has also been quick. On January 30, the National Steering Committee on Covid-19 prevention and control was formed with 24 members from 14 ministries. The committee is led by Deputy Prime Minister Vu Duc Dam. Some of the initial steps taken by the committee include to suspend flight authorization for all flights from Chinese and other epidemic areas to Vietnam and vice versa; to limit crowds of people, especially at festivals; to suspend festivals which have not yet been opened, and to reduce the scale of the festivals held; to ask people to wear masks in public places; and to limit spring travel and participation in festivals. (Ha, et al., 2020) In terms of detecting and surveillance, Vietnam implements third-degree contact tracing, F0, F1, and F2. F0 is code for patients that are infected with Covid-19. All close contacts of F0 are coded F1. Meanwhile, F2 is the code for people having close contact with F1. (Ha, et al., 2020)

To optimize virus detection, Vietnam has also developed its own test kit which was launched on April 28. According to Resolution 60/NQ-CP dated 29 April 2020 and Document 3255/VPCP-KGVX dated 24 April 2020, the Ministry of Health was assigned to instruct enterprises manufacturing medical masks and medical equipment to enhance management and ensure quality of masks, medical equipment and test kits to respond to Covid-19 domestically and for export. (Vietnam Times, 2020) Meanwhile, to ease the burden on medical personnel, Vietnam involved medical students to mitigate Covid-19. This strategy was implemented to prevent a shortage of healthcare workers. In the economic sector, Vietnam gave social security support of VND 62 trillion and an assistance

package of VND 180 trillion ($ 7.78 billion) to assist companies struggling amid the coronavirus outbreak with tax breaks. (Vit Nam News, 2020) Vietnam also shares the information about the virus through various platforms, such as television, pamphlet, radio, application, etc., positioning the virus as Vietnam main's enemy and narrating the Covid-19 pandemic as a 'national war'. To overcome the capacity of health facilities, Vietnam converted several public facilities into quarantine facilities. This succeeded in adding at least 20,000 beds to mitigate the pandemic. People who are quarantined will be given three meals for free. Patients who contract Covid-19 will also not be charged.

Translating Lessons from Covid-19: A Comparative Case Study of Malaysia, Vietnam, and Singapore

From the results of these observations, the Authors will conduct an analysis by grouping each data into the Health security preparedness variable. The three case study countries have their ways of preparing, responding, mitigating, and handling Covid-19. To draw a common thread from the three case studies, the authors will use cross-case analysis. Authors then applied the six variables of health security preparedness into the cross case analysis from each individual case report. The cross-case analysis provides an overview of the similarities of the three countries in mobilizing resources to make preparations, responses and handling health problems caused by the Covid-19 pandemic.

Individual Case Report I: Malaysia Healthcare Preparedness

Health Security Surveillance

- MYSED Work-plan II identifying and developing hazard risk mapping for Public Health Emergency Preparedness (PHEP)
- Risk mapping in determining direct first responders, identifying human resources and facilities needed
- Creation of Crisis Preparedness and Response Center (CPRC)
- Developing MySejahtera application to assist Covid-19 outbreak. MySejahtera allows the Ministry of Health (MOH) to monitor the health condition of users and take immediate action to provide the necessary care.
- Among the earliest efforts made by the Ministry of Health to prevent disease transmission was the enforcement of health checks at all entry points
- Aggressive action was conducted and coordinated with the police to further identified, carry out testing and enforce 14 day self-quarantine for suspected

Community planning and engagement

- Include other non-health agencies and departments, security authorities, public and private sector organizations, and civil society for multi-hazard SOPs for PHEP.
- With regard to funding, the Ministry of Health and Tenaga Nasional Berhad (TNB) formed an action coalition to get financial assistance from corporate companies, government-linked companies (GLC), and other organizations in Malaysia in an effort to combat the outbreak.

The funds raised were used by the Ministry of Health to replenish medical supplies and health care items needed to deal with COVID-19.

Information and incident management

- Increase the number of Infection Prevention and Control Personnel.
- The Ministry of Health also seeks to be transparent in dealing with the pandemic by providing adequate and up-to-date information to the public through multiple platforms

Healthcare delivery

- Multi-hazard SOP training for Public Health Emergency Preparedness (PHEP).
- Strengthen the current diagnostic testing infrastructure and service delivery in General Laboratories.
- A key step taken by the Ministry of Health with the government to overcome the spread of COVID-19 is to increase the number of hospitals that can handle COVID-19 cases.
- Public halls and indoor stadiums will also be used if cases reach 1000 cases per day.
- RM1 billion to meet medical needs, such as the purchase of COVID-19 response equipment and services.

Countermeasure management

- Malaysia increased laboratory performance testing to detect human diseases has been a priority since 2017 (Polymerase Chain Reaction (PCR) testing for Influenza viruses and MERS CoV)
- Hospitals were identified to treat patients, with the provision PCR rapid tests on patients and contacts were developed, deployed, and distributed to multiple government hospitals and medical laboratories, and management protocols were developed.

Environmental and occupational health

- Strengthen the National Laboratory Interagency Biosafety and Biosafety Committee.
- RM 600 allowance for health workers
- Among the strategies for protecting Health Workers, the Ministry of Health carries out a need assessment and stockpiling of Personal Protective Equipment (PPE) in all health facilities to ensure adequate amount, type, and quality of PPE (Nienhaus, 2020).

Individual Case Report II: Singapore Healthcare Preparedness

Health Security Surveillance

- In 2003, Singapore revised Infectious Diseases ACT as an effort to increase Singapore's policy capacity, both in the context of preventive and responsive
    - o In a preventive context, this revision allows the Singapore government to increase curative and promotional budgets through policies such as conducting professional personnel and

training health care workers in outbreak responses to holding 4-yearly scenario-based simulation exercises at all public hospitals to evaluate and provide feedback. on their pandemic response plans. (Badaruddin H, 2016)

- In a responsive context, this revision allows the Singapore government to run a quarantine scenario based on Disease Outbreak Response System Condition Framework.

- In order to increase organizational and bureaucratic capacity, the Singapore government established the National Center for Infectious Diseases (NCID) as an agency that has a significant role in managing mitigation, including health screening and supporting information during the epidemic/pandemic.
- On 29 January, the Singapore government began operating the NCID Screening Center to optimize screening and contact tracing operations
- NCID classifies the suspected cases into two categories, low and high risk suspected cases
- On 5 February 2020 the Singapore government succeeded in providing SARS-CoV 2 testing in all public hospitals in Singapore
- Singapore has imposed travel restrictions to and from Mainland China as of 1 February 2020
- Singaporean government released the TraceTogether application to identify close contacts between individuals and patients with Covid-19
- Singapore's PCR test capacity as of 5 February 2020 was 8,000 cases per day, which then as of 1 June 2020, the test capacity was increased from 8,000 tests per day to 40,000 tests per day through the Swab and Send Home (SASH) program.

Community planning and engagement

- The Singapore government focuses on community engagement as an effort to increase public knowledge and awareness of the Covid-19 pandemic
- As of 7 April 2020, Singapore has implemented circuit-breaker measures which have implications for the closure of public spaces such as offices, tourist attractions, schools, shopping centers, as an effort to encourage the home-based activity movement

Information and incident management

- The Singapore government also announced daily report cases as a public communication led by the ministry of health and epidemiologists as a form of government transparency to the public.
- The Singapore government also uses the collective memory narrative of the SARS crisis as an effort to improve public discipline in implementing the Disease Outbreak Response System during the Covid-19 pandemic.
- The Singapore government has developed a real time online platform that makes it easier for the public and stakeholders to monitor developments in the handling of Covid-19 in Singapore.

Healthcare delivery

- The Singapore government implements policies previously made to increase their capacity

against pandemics, such as ensuring the availability of PPE and essential medicines within six months (Lin, 2020)

- The Singapore Government issued import permit relief to fulfil the availability of domestic PPE
- In addition, to prevent the emergence of public anxiety, the Singapore Government appointed a Public Health Preparedness Clinic to provide consultation facilities, both related to clinical and psychological issues, for all Singaporeans.
- Singapore has increased supporting facilities, such as increasing the number of bed spaces for community health care facilities, from the previous 10,000 beds to 20,000 beds
- The Singapore government increased the number of bed spaces in the community recovery facilities, which previously had 2000 beds to 10,000 beds by the end of June 2020.

Countermeasure management

- The revision of the Infectious Disease ACT in 2003 allowed The Singapore Government to apply the Public Health Decision Making Process with outputs in the form of policies related to contact tracing and quarantine.
- Implement circuit breaker-measures with the aim of preventing the local transmission of Covid-19 in Singapore
- The Singapore government implements real-time PCR developed by local epidemiologists and scientists.

Environmental and occupational health

- The Singapore government prioritizes well-being from healthcare workers in an effort to improve their satisfaction through:
    - o Five-star hotel quarantine facilities
    - o Medical leave for five days per two weeks
    - o Free distribution of PPE
    - o Providing incentives for conducting free PCR tests

Individual Case Report III: Vietnam Healthcare Preparedness

Health Security Surveillance

- As of 2010, Vietnam has 15 sentinel surveillance sites and has one of the most advanced laboratory systems in the world which operate 24 hours a day. (The New Humanitarian, 2010)
- Cooperating with CDC, in 2016 Vietnam developed an event-based surveillance. The goal of this program is to detect unusual events that might signal an outbreak, even before it is known what kind of disease is responsible.
- During Covid-19. Vietnam developed a third degree contact tracing, F0, F1, and F2. F0 is code for patients that are infected with COVID-19. All close contacts of F0 are coded F1. Meanwhile F2 is the code for people having close contact with F1. Vietnam also developed its own test kit, which launched on 28 April 2020.
- Government developed a notification health application named NCOVI to detect the health

status of Vietnamese people.

Community Planning and Engagement

- Since 1997 Vietnam has already implement a framework called DOHA, which has two major missions (Ministry of Health Malaysia , 2017):
    - o To build a sound collaboration network and support system among health facilities, particularly those at higher and lower levels, to help ensure equity of health and deliver quality healthcare services to all Vietnamese people.
    - o To address the burden of too many patients in higher level centers. This means supporting improvements in the quality of healthcare services provided at lower levels, particularly training and technical skills transfer activities to improve trust and respond to social demands.
- Vietnam has a commune health station, which is responsible to deliver healthcare at the commune level.
- During the outbreak, the relationship among government agencies maintained harmoniously through the establishment of National Steering Committee which led by Deputy Prime Minister
- Collaborating with the local community, Vietnam's Centre for Sustainable Rural Development provides food packs and loans to families struggling amid the pandemic in Central Vietnam. (Ravelo, 2020)
- Numerous solidarity campaigns, which involved various stakeholders such as the private sector, also initiated by communities to provide basic needs for the people. (Ivic, 2020)

Information and Incident Management

- Before Vietnam became the first country to be removed from WHO's SARS list, several actions were taken properly by the authorities. Vietnam have conscientiously implemented detection and protection measures including (WHO, 2003):
    - o Prompt identification of persons with SARS, their movements and contacts;
    - o Effective isolation of SARS patients in hospitals;
    - o Appropriate protection of medical staff treating these patients;
    - o Comprehensive identification and isolation of suspected SARS cases;
    - o Exit screening of international travelers;
    - o Timely and accurate reporting and sharing of information with other authorities and/or governments.
- Vietnam shares information about the virus with numerous platforms. Authorities in Vietnam also upload a video about COVID-19 prevention, which later went viral.
- Compared to previous pandemic, Saigon Co.op also developed a better products distribution for each locality and region. In effect, logistic transmission could enter the most vulnerable community through a cooperative system.

Healthcare Delivery

- Public health facilities in Vietnam are divided into four levels, Central Level, Provincial Level, District Level, Commune Level.
- As of 2016, Vietnam has 285,565 beds and 13,860 health facilities in total (WHO, 2016).
- As of 2019, 87.7 percent of Vietnam's population are covered by health insurance and 97 percent of Vietnamese children have received standard immunisations.
- All COVID-19 patients are hospitalized at no cost in Vietnam, regardless of symptoms. The government also converted various public facilities, namely Danang's Tien Son Sports Palace, into a quarantine facility.
- In March, Vietnam successfully added as many as 20,000 beds to mitigate the pandemic. (Chau & Nguyen, 2020)
- People who are quarantined will be given three meals for free. Patients who contract COVID-19 will also not be charged.

Countermeasure Management

- In 2019, Vietnam gave ten different vaccines nationwide through its immunization program, with three of them provided for people living in high risk areas. (Nguyen, Grappasonni, Scuri, Nguyen, & Nguyen, 2019)
- Vietnam ensures the stock of medical and essential goods. The Ministry of Health was assigned to instruct enterprises manufacturing medical masks and medical equipment to enhance management and ensure quality of masks, medical equipment and test kits to respond to COVID-19 domestically and for export. (Vietnam Times, 2020)
- Essential goods will be guaranteed with reserves at a safe level. The products delivered to supermarkets across the country. Supermarkets receive medical products on a daily basis.

Environmental and Occupational Health

- As of 2015, 98% of the total population in Vietnam had access to improved water. (WHO, 2015)
- In 2019, Air pollution was becoming a real threat in Vietnam, especially in urban areas. This is seen by the fact that Hanoi had only eight days with PM 2.5 lower than the national standard of 50 micrograms per cubic meter. (Do, 2020)
- Vietnam involving medical students to mitigate COVID-19.
- This strategy was implemented to prevent the shortage of healthcare workers.
- Vietnam gave social security support of VND 62 trillion and an assistance package of VND 180 trillion ($ 7.78 billion) to assist companies struggling amid the coronavirus outbreak with tax breaks. (Vit Nam News, 2020)

	Health security surveillance	Community planning and engagement	Healthcare delivery	Information and incident management	Countermeasure management	Environmental and occupational health

Malaysia	MYSED Workplan II identifying and developing hazard risk mapping for Public Health Emergency Preparedness (PHEP) In 2007, Malaysia established of Crisis Preparedness and Responses Center Aggressive action by working closely with police to find possible carriers of the virus, identify them, carry out testing and enforce 14 day self-quarantine.	The Ministry of Health and Tenaga Nasional Berhad (TNB) formed an action coalition to get financial assistance from corporate companies, government-linked companies (GLC), and other organizations in Malaysia in an effort to combat the outbreak.	Increase the number of hospitals that can handle COVID-19 cases. RM1 billion to meet medical needs, such as the purchase of COVID-19 response equipment and services.	Increase the number of Infection Prevention and Control Personnel. The Ministry of Health also seeks to be transparent in dealing with the pandemic by providing adequate and up-to-date information to the public through multiple platforms	Malaysia increased laboratory performance testing to detect human diseases has been a priority since 2017 (PCR testing for influenza viruses and MERS CoV) Hospitals were identified to treat patients, with the provision PCR rapid tests on patients and contacts were developed, deployed, and distributed to multiple government hospitals and medical laboratories, and management protocols were developed.	Strengthen the National Laboratory Interagency Biosafety and Biosafety Committee. RM 600 allowance for health workers Among the strategies for protecting Health Workers, the Ministry of Health carries out a need assessment and stockpiling of Personal Protective Equipment (PPE) in all health facilities to ensure adequate amount, type, and quality of PPE (Nienhaus, 2020).

Singapore	Singapore revised Infectious Diseases ACT as an effort to increase Singapore's policy capacity, both in the context of preventive and responsive. On 3 January, 2020, the Singapore government has issued a health screening policy for Wuhan arrival On 29 January, the Singapore government began operating the NCID Screening Center to optimize screening and contact tracing operations On 5 February 2020 the Singapore government succeeded in providing SARS-CoV 2 testing in all public hospitals in Singapore Singapore has imposed travel restrictions to and from Mainland China as of 1 February 2020 Singapore's PCR test capacity as of 5 February 2020 was 8,000 cases per day, which then as of 1 June 2020, the test capacity was increased from 8,000 tests per day to 40,000 tests per day through the Swab and Send Home (SASH) program.	The Singapore government focuses on community engagement as an effort to increase public knowledge and awareness of the Covid-19 pandemic As of 7 April 2020, Singapore has implemented circuit-breaker measures which have implications for the closure of public spaces such as offices, tourist attractions, schools, shopping centers, as an effort to encourage the home-based activity movement	The Singapore government implements policies previously made to increase their capacity against pandemics, such as ensuring the availability of PPE and essential medicines within six months. (Lin, 2020) The Singapore Government issued import permit relief to fulfil the availability of domestic PPE In addition, to prevent the emergence of public anxiety, the Singapore Government appointed a Public Health Preparedness Clinic to provide consultation facilities, both related to clinical and psychological issues, for all Singaporean Singapore has increased supporting facilities, such as increasing the number of bed spaces for community health care facilities, from the previous 10,000 beds to 20,000 beds The Singapore government increased the number of bed spaces in the community recovery facilities, which previously had 2000 beds to 10,000 beds by the end of June 2020. per akhir juni 2020	Singapore established a 4-yearly scenario-based simulation exercises at all public hospitals to evaluate and provide feedback on their pandemic response plans. The Singapore government also announced daily report cases as a public communication led by the ministry of health and epidemiologists as a form of government transparency to the public The Singapore government also uses the collective memory narrative of the SARS crisis as an effort to improve public discipline in implementing the Disease Outbreak Response System during the Covid-19 pandemic. The Singapore government has developed a real-time Covid-19 that makes it easier for the public and stakeholders to monitor developments in the handling of Covid-19 in Singapore	The revision of the Infectious Disease ACT in 2003 allowed The Singapore Government to apply the Public Health Decision Making Process with outputs in the form of policies related to contact tracing and quarantine. Implement circuit breaker-measures with the aim of preventing the local transmission of Covid-19 in Singapore The Singapore government implements real-time PCR developed by local epidemiologists and scientists.	The Singapore government prioritizes well-being from healthcare workers in an effort to improve their satisfaction through: Five-star hotel quarantine facilities Medical leave for five days per two weeks Free distribution of PPE Providing incentives for conducting free PCR tests

Vietnam	Since 2016, Vietnam has developed an event-based surveillance to detect unusual events that might signal an outbreak. During COVID-19 outbreak, Vietnam developed a third-degree contact tracing and massive PCR testing.	Vietnam has a DOHA program to ensure that people at the community level can have access to the best healthcare. During the outbreak, Vietnam formed a National Steering Committee which involved numerous sectors and agencies.	As of 2019, Vietnam has already covered 87.7 percent of its people with health insurance. To ensure the healthcare delivery and prevent overload during a pandemic, Vietnam converted its public facilities into quarantine facilities. COVID-19 treatment and quarantine will not be charged.	Learning from the previous outbreak, Vietnam gave response to the COVID-19 quickly. Vietnam was one of the first countries that take action, precautionary measures were implemented a month before WHO announced COVID-19 as global pandemic Vietnam also sharing the information about the virus through various platforms, positioning the virus as Vietnam main's enemy and narrating the Covid-19 pandemic as a 'national war' The medicine and essential goods delivered safely through a cooperative system.	Vietnam gives up to 10 different vaccines for its people through the immunization program. During COVID-19 pandemic, Vietnam developed its own test kit. The MoH also instructs enterprises to produce medical equipment to ensure the availability and fulfill the domestic and international demands for the equipment.	With a limited number of physicians and healthcare workers, Vietnam involves medical students to mitigate the outbreak. In the economic sector, Vietnam gave social security support of VND 62 trillion and an assistance package of VND 180 trillion ($ 7.78 billion) for domestic companies.

The cross-case analysis above shows that the three countries have implemented the variables of health security preparedness. However, there are different approaches to the implementation carried out by the case studies. For example, in the information management variable, the three countries prioritize community engagement through different approaches. In Vietnam, the government uses a national war narrative by perceiving the Covid-19 as a common enemy to increase public awareness of the Covid-19 pandemic. Meanwhile, Malaysia prioritizes accountability and transparency to increase public confidence in the government's pandemic management. Unlike Vietnam and Malaysia, Singapore uses the collective memory of the SARS crisis to improve public discipline in implementing the Disease Outbreak Response System during the Covid-19 pandemic.

Next, in the Health Security Surveillance variable, the three countries have plans of actions to deal with health threats such as epidemics, pandemics, and infectious diseases. Singapore revised Infectious Disease ACT in 2003, which increased Singapore's health capacity in a promotional, preventive, and curative approach. In addition, Singapore formed the National Center for Infectious Diseases, which serves as a committee that develops the Singapore Disease Outbreak Response System. Meanwhile, Malaysia established a Crisis Preparedness and Response Center in 2007 before developing MYSED Work-plan II to identify and develop hazard risk mapping for Public Health Emergency Preparedness (PHEP). On the other hand, Vietnam has developed an event-based surveillance to detect unusual events that might signal an outbreak in 2016 with the U.S Center for Diseases Control and Prevention.

Finally, this cross-case analysis demonstrates similarities among three different case studies, in which all of them have willingness and are very concerned to guarantee freedom from fear, freedom from want, and freedom to live in dignity for its people, especially in the health sector amid the Covid-19 pandemic.

Conclusion

This research showed that the Global South, represented by the three case studies, has an awareness of non-traditional security discourses, particularly health security. This can be seen from the six health security preparedness variables' fulfilment in the three case studies. The research also shows the Global south's contribution to encouraging the discourse of health security, which is reflected in the policies of the three case studies to face health threats, both preventive, promotive, and responsive approaches. Furthermore, if the non-traditional security discourse, especially health security, is to be developed pro-actively in the Global South, then academia's role in observing, researching, and synthesizing state policies related to health security issues in the Global South is vital. Moreover, the role of policymakers needs to be changed from reactive to proactive mindset as an effort to avoid "the unknown-unknown" threats.

Bibliography

Ahmad, N. A., Lin, C. Z., Rahman, S. A., Ghazali, H. M., Nadzari, E. E., Zakiman, Z., . . . Mohamed Noor, W. W. (2020). First Local Transmission Cluster of COVID-19 in Malaysia: Public Health Response. International Journal of Travel medicine and Global Health, 124-130.

Badaruddin H, S. S. (2016). Pandemic preparedness: Nationally-led simulation to test hospital systems. Acad Med Singapore, 332-337.

Barry Buzan, O. W. (1998). Security: A New Framework for Analysis. London: Lynne Rienner Publishers.

Booth, K. (1999). Security and Emancipation. Review of International Studies, vol. 17, no. 4, 313–326.

Chau, M. N., & Nguyen, X. Q. (2020, March 19). Vietnam Military Increasing Isolation Housing to 60,000 Beds. Diambil kembali dari Bloomberg: https://www.bloomberg.com/news/articles/2020-03-19/vietnam-is-increasing-quarantine-capacity-to-house-60-000-people

Chua, A. Q. (2020). Health system resilience in managing the COVID-19 pandemic: lessons from Singapore. BMJ Global Health 2020, 1-8.

Dados, N., & Connell, R. (2012). The Global South. American Sociological Association, 12-13.

Do, T. N. (2020, March 30). Vietnam's Big Air Pollution Challenge. Diambil kembali dari The Diplomat: https://thediplomat.com/2020/03/vietnams-big-air-pollution-challenge/

Goh KT, C. J. (2006). Epidemiology and control of SARS in Singapore. Ann Acad Med Singapore, 301-316.

Ha, B. T., Quang, L. N., Mirzoev, T., Tai, N. T., Thai, P. Q., & Dinh, P. C. (2020). Combating the COVID-19 Epidemic: Experiences from Vietnam. International Journal of Environmental Research and Public Health, 1-7.

Ivic, S. (2020). Vietnam's Response to the COVID-19 Outbreak. Asian Bioethics Review, 341-347.

Jacobson, E. U., Inglesby, T., Khan, S. A., Rajotte, C. J., & Burhans, R. L. (2014). Design of the National Health Security Preparedness Index. Biosecurity and Bioterrorism: Biodefense Strategy, Practice, and Science, 122-131.

Lin, R. J. (2020). From SARS to COVID-19: the Singapore journey. MJA 212 (11) 15 June 2020, 497-502.

M. Deurenberg-Yap, L. M. (2005). The Singaporean response to the SARS outbreak: knowledge sufficiency versus public trust. Health Promotion International, Vol. 20 No. 4, 320-328.

Ministry of Health Malaysia . (2017). Malaysia Strategy for Emerging Diseases and Public Health Emergencies II Work Plan (2017-2021). Kuala Lumpur: Ministry of Health Malaysia .

Ministry of Health Malaysia . (2017). Malaysia Strategy for Emerging Diseases and Public Health Emergencies II Work Plan (2017-2021). Kuala Lumpur: Ministry of Health Malaysia .

Ministry of Health Malaysia. (2006). National Influenza Pandemic Preparedness Plan. Kuala Lumpur: Minis.

Nguyen, C. T., Grappasonni, I., Scuri, S., Nguyen, B. T., & Nguyen, T. T. (2019). Immunization in Vietnam. Ann Ig, 291-305.

Nienhaus, A., & Hod, R. (2020). COVID-19 among HealthWorkers in Germany and Malaysia. International Journal of Environmental Research and Public Health, 1-10.

Paris, R. (2001). Human Security: Paradigm Shift or Hot Air? International Security, 87-102.

Ravelo, J. L. (2020, October 9). Behind Vietnam's COVID-19 Success Story. Diambil kembali dari devex.com: devex.com/news/behind-vietnam-s-covid-19-success-story-98257

Reinhardt, J. (2019, June 25). Vietnam's impressive health care strategy. Diambil kembali dari The ASEAN Post: https://theaseanpost.com/article/vietnams-impressive-health-care-strategy

Shaha, A. U., Safria, S. N., Thevadas, R., Noordinc, N., Rahmand, A., Sekawie, Z., . . . Sultana, M. T.

(2020). COVID-19 outbreak in Malaysia: Actions taken by the Malaysian government. International Journal of Infectious Diseases, 108-116.

Takashima, K., Wada, K., Tra, T. T., & Smith, D. R. (2017). A review of Vietnam's healthcare reform through the Direction of Healthcare Activities (DOHA). Environmental Health and Preventive Medicine, 1-7.

Tang, A. (2020, March 29). Health Ministry prepared to use training institutes for Covid-19 patients. Diambil kembali dari The Star: https://www.thestar.com.my/news/nation/2020/03/29/health-ministry-prepared-to-use-training-institutes-for-covid-19-patients

The New Humanitarian. (2010, April 22). Lessons learned from SARS, bird flu, H1N1. Diambil kembali dari The New Humanitarian: https://www.thenewhumanitarian.org/report/88890/vietnam-lessons-learned-sars-bird-flu-h1n

UNDP. (2014). Forging A Global South: United Nations Day For South-South Cooperation. New York: United Nations Development Programme.

UNTFHS. (2016). Human Security Handbook. New York: United Nations.

Vit Nam News. (2020, August 18). Vit Nam to have support packages to cover all affected by COVID-19: MPI. Diambil kembali dari Vit Nam News: https://vietnamnews.vn/economy/771211/viet-nam-to-have-support-packages-to-cover-all-affected-by-covid-19-mpi.html

Vietnam Times. (2020, June 7). COVID-19: Vietnam to enhance PPE's quality, production capacity and export. Diambil kembali dari Vietnam Times: https://vietnamtimes.org.vn/covid-19-vietnam-to-enhance-ppes-quality-production-capacity-and-export-21131.html

WHO. (2003, April 28). Viet Nam SARS-Free. Diambil kembali dari World Health Organization: https://www.who.int/mediacentre/news/releases/2003/pr_sars/en/

WHO. (2015, July). Viet Nam: Closer to bringing drinking water and sanitation to all. Diambil kembali dari World Health Organization: https://www.who.int/features/2015/viet-nam-water-sanitation/en/

WHO. (2016). Human Resources for Health Country Profile: Vietnam. Geneva: WHO.

Yin, R. K. (2018). Case Study Research and Applications. London: Sage Publications.

An Unprecedented Threat during the Pandemic: The Emerging Trends of Illicit Drug Trafficking in Southeast Asia

Monica Bening Maeria Anggani; Syifa Khairunnisa
Graduate of Faculty of Social and Political Sciences, Universitas Gadjah Mada
Student of Faculty of Law, Universitas Gadjah Mada
beninganggani@gmail.com; syifa.khairunnisa.16@mail.ugm.ac.id

Abstract

The world is currently facing a global outbreak of Covid-19, posing as a great threat to both states and individuals across the world mainly in the economic and health sector. However, the pandemic is also causing impacts to other sectors which does not seem as urgent at this moment, but in fact is also a matter of security for states. This paper will particularly focus on drug trafficking as an issue of non-traditional security in Southeast Asia. Drug trafficking is not newly discovered in Southeast Asia, as it has always been an ongoing problem with a high number of cases. During the Covid-19 outbreak, it appears to be largely unaffected and instead becomes another source of threat aside from the pandemic itself. This article analyses how the conditions caused by and the measures taken for the pandemic can affect the illicit drug markets in Southeast Asia. The data that will be taken from secondary sources such as literatures about reported drug trafficking cases in Southeast Asia from related stakeholders before and during the pandemic, emerging trends in drug production and consumption as a consequence of the measures taken for the pandemic, and how Southeast Asia countries are handling drug trafficking are utilized to explain how the pandemic has been expanding the drug markets and will potentially continue to do so. By viewing drug trafficking as an intertwined non-traditional security threat towards states along with the pandemic, this paper argues that the Covid-19 pandemic is expanding and diversifying the cases of drug trafficking in Southeast Asia and therefore, can challenge the regions' effort to combat this issue in the future.

Keyword: COVID-19 pandemic, illicit drug trafficking, Southeast Asia, non-traditional security, transnational organized crime

Introduction

The Covid-19 pandemic is driving the world into a crisis which does not only hamper the health sector as the most affected, but also shakes the societies and economies of countries all over the world. Amidst the uncertainty about the duration of the pandemic, governments have to deal with the double burden of containing the number of Covid-19 cases as their priority without neglecting the other affected sectors. It is about creating balanced health and socioeconomic policies with the objective to press the pandemic curve on the one side, and flattening the recession curve on the other (United Nations Office on Drugs and Crime, 2020). According to the World Bank, for countries in East Asia and the Pacific (EAP) region, the Covid-19 pandemic has delivered a triple

shock for them, consisted of the pandemic itself, the economic impact of containment measures, and reverberations from the global recession. In the economic sector, the EAP region as a whole is expected to grow by only 0.9 percent in 2020, the lowest rate since 1967 (World Bank Group, 2020). This fall in the economy will naturally destabilize the social sector as well, with the possibility of increasing conditions such as poverty and inequalities.

Although the impacts of the pandemic vary for different countries, according to the Managing Director of International Monetary Fund (IMF), the developing countries will have a disproportionate impact mainly because they have less resources to protect themself against this dual crisis (Lee, 2020). Containment measures such as lockdowns and physical distancing might be harder in implementation because of its potential of hurting vulnerable members of the society. Most people in this particular section of the society are depending on informal economy sectors, which provide them no income security or sufficient social protection when the pandemic strikes. They will be disempowered further because of worse access to healthcare, education, jobs, and finance (World Bank Group, 2020).

This impact of the pandemic has been shown in Southeast Asia, a region with mostly developing countries. Without a doubt, the Covid-19 pandemic has produced negative impact on ASEAN countries' economy since their key sectors have been affected particularly travel and tourism; retail and other services sectors; then business operations hence supply chains disrupted; employment and livelihood put at risk; while consumer confidence has declined (ASEAN, 2020). Southeast Asia also has 218 million of informal workers, who might be forced into poverty if they do not have alternative income, formal social protection systems, or saving to cope with the economic change (United Nations, 2020). In addition, the number of unemployment in several countries are expected to rise, putting even more people in instability.

Containment measures for the pandemic such as citywide lockdowns and shuttered borders are affecting the illicit drug markets and in some regions, a shortage of drug supply might seem to happen. However, during the financial crisis of 2008, there were signs that economic downturn led to a lasting transformation of the illicit drug markets and the aggravation of illicit drug economies worldwide instead (United Nations Office on Drugs and Crime, 2020). This phenomenon might be taking place again during this time of economic downturn caused by Covid-19 pandemic, especially in Southeast Asia as one of the major regions for illicit drug production and trafficking. For instance, from an estimated US$61.4 billion methamphetamine trade per year across the Asia Pacific, Southeast Asia takes up an overwhelming value of US$25.7 billion of it (Lindsay, 2019). Illicit drug trafficking in Southeast Asia also benefited from the Golden Triangle, an area surrounded by overlapping mountains where the borders of Thailand, Laos, and Myanmar meet. It is widely known as a leading area in illicit drug production and trade. The United Nations Office on Drugs and Crime (UNODC) warned that the drug market in the region has grown protracted and uncontrolled even during the pandemic.

Following this background case, this article will analyse how the changing illicit drug market amidst the pandemic is becoming an unprecedented non-traditional security threat apart from the pandemic itself. Illicit drug trafficking has always been a major threat for Southeast Asia, but the

pandemic might facilitate its diversification in the long term. The article will also point out the linkages across security issues—how the Covid-19 pandemic as a security threat in one sector can affect the others. This article will use data taken from secondary sources to explain how the pandemic has been expanding the drug markets and creating new challenges for the handling of this issue in the future.

Southeast Asia as a Hotspot for Illicit Drug Trafficking

One of the key issues to address in the current international security sphere is the growing number of transnational crimes with sophisticated and organized methods. Globalization and the benefits that it brought such as easier and faster communication, movement of finances and cross border travel, have facilitated their expansion and diversification (United Nations Office on Drugs and Crime, n.d.). These criminal activities can pose a threat to the states themselves as well as the society. Illicit drug trafficking can be said as one of the most alarming transnational organized crime currently. Drug trafficking poses a substantial threat both to the state and human security because in general, it hinders the health, safety and well-being of people, undermines state development, and raises the socioeconomic cost for the government (Muna, 2016).

As one of the main regions of illicit drug trafficking, Southeast Asia recorded 357,443 cases in 2017, with the five major substances being produced and trafficked are cannabis, heroin, opium, and both tablet and crystalline methamphetamine (ASEAN Narcotics Cooperation Center, 2018). Several Southeast Asian countries are major producers of illicit drugs and a place of transit for exports to North America, Europe and other parts of Asia. During the 1990s, approximately two-thirds of the world's opium was cultivated in Southeast Asia, with Myanmar and Laos being its biggest cultivators (United Nations Office on Drugs and Crime, 2007). The major illicit substance being trafficked in Southeast Asia used to be opiates as well; it has shifted for the last decade, however, to methamphetamine which has been consistently taking up more than 60% of the market. This change mainly took place because the Golden Triangle states decided to eradicate opium cultivation, pushing the Golden Triangle economy to find an alternative. In 2018, the number of methamphetamine seized in East and Southeast Asia significantly increased to 120 tons from 82 tons in 2017 (United Nations Office on Drugs and Crime, 2019). The retail price of methamphetamine in several countries, including Cambodia, Malaysia, and Indonesia, has decreased in the recent years, showing a sign of oversupply and followed by the increase of its users—as reported by the same countries.

The steady supply of illicit drugs in Southeast Asia is a consequence from the unstoppable large scale of manufacturing in the Golden Triangle. It is stated by UNODC that Myanmar becomes an important supply source of methamphetamine now that production in China decreases due to their stricter law enforcement. This was proven when operations conducted by Myanmar authorities in 2018 managed to dismantle six large scale drug manufacture facilities in Kutkai, Northern Shan State—only in the span of two months. At that time, 1.2 million methamphetamine tablets and 259 kg of crystalline methamphetamine was seized, among other synthetic drugs and precursor chemicals used in the production (United Nations Office on Drugs and Crime, 2019). Shan State indeed has a strategic location near the borders with several countries such as China, which ease them in trade

and logistics; Thailand, a key regional market; and Laos, an ideal location for transit. Its proximity to the Indian Ocean coastline also provides easy access to Bangladesh, which is another giant market, as well as markets in more distant regions (Horsey & Douglas, 2020).

Overall, Southeast Asia is a region with vast expanse of sea and busy waterways, which makes it difficult for enforcement authorities to track and police each of the carefully planned transfer of illicit drugs (Salleh, 2020). Besides the strategic causes, Southeast Asia has a comparative advantage of methamphetamine production because it is a synthetic drug, which requires precursor chemicals in its production. Apparently, Southeast Asia also accounts for a significant share of chemical and pharmaceutical production at the global level (United Nations Office on Drugs and Crime, 2019). Another reason why more transnational crime groups are attracted to supply their drug from the region is the competitive price of the products being manufactured there compared to other countries such as China. These advantages facilitate the illicit drug market in the Golden Triangle to grow rapidly and endlessly.

The difficulty to cope with transnational crime in Southeast Asia also results from a series of domestic factors, including state instability, the role of corruption, vested interests, and lack of resources. The links between domestic instability, poverty and transnational crime need to be stressed. For instance, the insurgency and oppression taking place in Rakhine State involves non-state armed groups taking control of autonomous territories in Myanmar such as Kutkai. These territories' economies rely on illicit activities including drug production, which is why the Golden Triangle's manufacturing laboratories are well-protected by the non-state armed groups and many of them go undetected (Salleh, 2020). The majority of other Southeast Asian countries also remained weak states that suffer from fragile domestic institutions and socio-economic problems. Corruption as well as poorly financed law enforcement agencies have undermined domestic attempts to combat organized criminal groups. The poverty and economic disparities that persist in the region also diminish its ability to tackle other forms of transnational crime, particularly the issues of illicit drug trafficking.

Illicit Drug Trafficking as a Non-Traditional Security Threat for Southeast Asia

The discussion of non-traditional security gained more attention in International Relations when Barry Buzan pointed out that the security of human collectives is affected by factors in five major sectors: military, environment, economic, societal, and political. Buzan in his later book then discussed how these five major security sectors have various weights based on the level of analysis, whether it is in the global, regional, national, or local sphere. For the regional level, however, Buzan stated that these security complexes are not always identical in each sector because there are different dynamics between one region and another (Buzan, Wæver, & Wilde, 1998). In addition, it also depends on how the involved actors are perceiving the threat—the actors must make up their minds as to how the security threat of different values adds up. In this context, illicit drug trafficking has been perceived as a threat by The Association of Southeast Asian Nation (ASEAN) as Southeast Asia's regional intergovernmental organization, as well as its member countries, because illicit drug trafficking in the region has been consistently growing throughout the years.

Illicit drug trafficking clearly threatens different facets of issues with both the state and human as its referent object. Firstly, illicit drug trafficking as a transnational organised crime is often associated with other crime such as human trafficking, arms trafficking, and child labour. Moreover, these illegal activities are oftentimes used as a reliable source of profit for transnational organised crime groups to finance their major agenda. In Rakhine State, Myanmar, for example, illicit drug trafficking is used by the non-state armed groups to finance their political causes (Salleh, 2020). In this case, illicit drug trafficking can trap a state in a cycle of political instability which is difficult to resolve. Not only in states with political conflicts, drug consumption increases the likelihood of different kinds of criminal activity in general, especially in the form of trafficking-related activity such as violent dispute among competing trafficking groups (United Nations Office on Drugs and Crime, 1998).

Secondly, illicit drug trafficking can be placing a heavy burden on the national economy because it requires the state to expense their budget on handling the issue. A report written by UNODC mentioned that in several countries, they have to spend around 0.4 of their GDP to finance drug related issues such as law enforcement (legal costs, prison costs, prevention), health care (emergency room visits, higher incidence of illness), and crime costs (stolen property losses, other crimes) (United Nations Office on Drugs and Crime, 1998). This statement clearly indicates the risk that illicit drug trafficking and drug consumption brings to society through different facets. In the health sector, drug addiction is associated with needle-sharing, prostitution, AIDS and other diseases which are clearly harmful for the society as a whole. It is certainly also a danger for the person directly involved, as showcased by a study in Malaysia, for example—30.6% emergency department visits were determined to be adverse drug events (Jatau, Aung, Kamauzaman, & Rahman, 2015). In the workforce sector, consumption of illicit drugs limits the chances of entering or remaining in it. Vice versa, many drug users in Asia are driven to involve in the illicit drug market because of their social disadvantages, including joblessness, financial instability, or poverty. In fact, sustained drug abuse often makes them more vulnerable to these forces—therefore pushing people into a vicious cycle of lower social mobility, financial difficulties, and even family problems (Salleh, 2020).

Since transnational organized crime is a concern beyond state borders, international cooperation is oftentimes needed to tackle the problem. To combat transnational crimes that represent a threat to national sovereignty and endanger the survival of governments, sometimes yielding a part of state sovereignty is even needed for it to be protected more effectively (Emmers, 2003). ASEAN have declared drug trafficking as a threat to its regional security and have been showing their effort in tackling this issue regionally ever since, firstly seen from their Joint Declaration for Drug-Free ASEAN—a commitment to eradicate illicit drug trafficking in the region by 2015 (which was then extended to 2025). ASEAN member states have also been showing their effort in the war against illicit drug trafficking in line with the joint declaration, as seen in the consistent drug seizure operations by the state authorities throughout the years. Although the legal systems among ASEAN member states are very different, most of the countries share a commitment to the current international drug law regime. This is based on three major United Nations (UN) conventions: the UN Single Convention on Narcotic Drugs, 1961 (as amended by the Protocol of 1972); the UN Convention on Psychotropic Substances, 1971; and the UN Convention against the Illicit Traffic in Narcotic Drugs

and Psychotropic Substances, 1988 (United Nations Office on Drugs and Crime, n.d.).

In the meantime, the ASEAN Senior Officials on Drug Matters (ASOD) has been the main ASEAN body responsible for handling drug-related matters. It is the main body to monitor the implementation of the ASEAN Work plan on Securing Communities Against Illicit Drugs 2016-2025, and is supported by five working groups, namely, Preventive Education, Treatment and Rehabilitation, Law Enforcement, Research, and Alternative Development. The Work Plan details the components and the proposed activities for its effective implementation to achieve realization of a Drug-Free ASEAN to successfully and effectively address illicit drug activities and mitigate its negative consequences to society. To further provide political impetus and to take a more focused and combined effort the ASEAN Ministerial Meeting on Drugs Matters (AMMD) has been institutionalized. The ASOD will report the progress of implementation of the Work Plan to the AMMD which will meet once every two years beginning in 2016 (ASEAN, 2017). In regards to the enforcement action throughout ASEAN region, ASEAN Chiefs of Police forum, known as ASEANAPOL, meets regularly to discuss regional matters. ASEANAPOL is administered by the ASEAN Secretariat in Jakarta. Under the Chief's meeting is a Senior Officers' Meeting on Transnational Crime (SOM-TC). The Chiefs report to the ASEAN Ministerial Meeting on Transnational Crime (AMM-TC). The plan of action to Combat Transnational Crime was facilitated by the SOM-TC (McFarlane, 2005).

The Trends of Illicit Drug Trafficking in Southeast Asia Amidst the Covid-19 Pandemic

UNODC stated that strict containment measures during the Covid-19 pandemic such as citywide lockdowns and shuttered borders imposed by governments have inevitably affected all aspects of the illicit drug markets, from production and trafficking of drugs to their consumption (United Nations Office on Drugs and Crime, 2020). It can be said that the impact of those measures varies both in terms of the different business models used in the distribution of each type of drug and the approaches used by different countries to address the pandemic. In addition, the impact on actual drug production may vary greatly depending on the substance and the geographical location of its production. The UNODC warned that based on the data from the first half of 2020, organized crime groups in Southeast Asia have managed to expand their drug market even amidst the pandemic. In line with Buzan's statement that security complexes for each region could be different based on its dynamic, it is not surprising that illicit drug trafficking remains a major threat for Southeast Asia amidst the pandemic, considering the market size of illicit drugs in the region.

Several countries in Southeast Asia have reported drug seizures in quite a large amount throughout 2020. In Thailand for example, authorities in Bangkok confiscated 1,200 kg of crystal methamphetamine smuggled under stacks of cow dung in a six-wheel lorry in July 2020 (Asia News Agency, 2020). Two months prior in north-east Shan state of Myanmar, 23 people were arrested during an operation which discovered more than 193 million methamphetamine tablets, 500 kg of crystal methamphetamine, and 290 kg of heroin (BBC News, 2020). In the meantime, a 120% increase of drug cases was recorded in Indonesia in April 2020 compared to the previous month (Marhaenjati, 2020). It was the exact time when the government started to impose large scale social distancing in the country. A couple of months later, in the span of two months, Indonesian National

Narcotics Board (BNN) revealed six different drug cases all over Indonesia with a total of 60.63 kg tetrahydrocannabinol, and 1 million tablets found as evidence (National Narcotics Board, 2020). The large amounts of illicit drugs being confiscated suggests that there is an uninterrupted supply of drugs even during the pandemic. The reason behind this stable drug market is that such organized criminal groups of illicit drug trafficking react adaptively to market changes, as stated by the UNODC. This statement is supported by the past experience that has demonstrated the capacity of such groups to rapidly adapt their modus operandi or switch market in response to shocks or new opportunities.

The COVID-19 pandemic also triggers organized crime groups to modify their tactic and shift trafficking routes and modes. UNODC observed the increasing use of maritime routes instead of air and land since the latter two routes are more strictly controlled and disrupted by entry restrictions. In addition, the waterways are much harder to monitor considering the Southeast Asia geographical condition. The pattern of drug trade on the consumer level can also be seen moving to online social media platforms as the COVID-19 pandemic measures imposed by the governments limit's people movement. For instance, Thailand's Deputy Secretary-General of the Narcotics Control Board, Paisith Sungkahapong, reported that there is the increase in the online drug through Twitter, Instagram, and Facebook (Nortajuddin, 2020). Apart from social media, illicit drug transactions through the dark web have been around for a while and it might prosper due to the pandemic. Furthermore, it is also found that a lot of drugs are being concealed and delivered to the buyers or consumers by mail.

Meanwhile, in the health sector, the pandemic worsens the risk of illicit drug consumption and vice versa. Some users might change their modes of obtaining illicit drugs when their usual transaction is disrupted by producing their own low-quality and high-risk alternative drug, as reported by Heru Winarko, the head of Indonesian BNN (Iswara, 2020). Similarly, the UNODC also warned that heroin users have turned to more harmful substances such as fentanyl which is 50 times more powerful than opioid (The New Indian Express, 2020). This change can undeniably become more dangerous if it keeps growing because these substances are said to have higher risk for health. UNODC also stated that another harmful pattern resulting from the pandemic is the increase in injecting drug use and the sharing of injecting equipment. This issue carries the risk of spreading diseases like HIV/AIDS, hepatitis C, and COVID-19 itself. The risk of drug overdose may also increase among those injecting drugs and who are infected with COVID-19 (United Nations Office on Drugs and Crime, 2020).

Due to the pandemic, government priorities may shift and the capacity of law enforcement to monitor and intercept drug shipments and to disrupt organized crime networks may be reduced. In such a scenario, COVID-19 measures may create a conducive environment for illegal activities and drug trafficking groups may try to seize the opportunity to increase their activities and to expand their influence in the drug markets. On the contrary, an increase in controls to enforce lockdown measures, such as street patrols and an increased border controls, may increase the efficiency of law enforcement efforts and increase the probability of drug shipments being intercepted. The seizures of illicit drugs throughout the pandemic indicates that the authorities are doing the most to handle the issue of drug trafficking in each of their countries. However, the real challenge is how to balance law enforcement with the endless supply of drugs as well as dealing with the emerging

change in the illicit drug market which has expanded and diversified itself due to the pandemic.

The Change of Illicit Drug Trafficking as an Unprecedented Threat in Southeast Asia Caused by the Covid-19 Pandemic

The Covid-19 pandemic undoubtedly poses a severe threat for the global world. States are exposed to a threat towards health security as the first and most important one. The fact that safe vaccines have not yet to be found to combat the spread of the virus has compelled people to accept the disease as the new reality (Sengupta, 2020). Another major aspect highlighted by the pandemic is the economic sector. It is expected that the global economy will shrink by 4.9 percent in 2020, and an economic devastation worse than the 2008 financial crisis can possibly happen over the next two years (Lee, 2020). Amidst this issue, it can be noted that apart from being a security threat itself, the pandemic is also bringing about threats in other sectors.

Although Barry Buzan stated that there are five major sectors in security, Buzan also explained that even though this classification makes analytical sense because it sets apart different agenda, values, and discourses, these sectors not always disaggregated—each sector could be intertwined between one another since they are lenses focusing on the same world (Buzan, Wæver, & Wilde, 1998). For instance, issues that seem to be an economic concern may turn out to be rooted in societal problems on closer observation. In the context of our current world, apart from the fact that the outbreak of Covid-19 pandemic is a security threat in itself, it also triggers or exacerbates threats in other sectors. By transforming the illicit drug market, the pandemic causes another issue to be aware of during the pandemic, as well as generating new challenges for drug control in the long term. The next paragraphs will explain how these two threats intertwined.

In the economic sector, the pandemic is tightening the financial use of states because they have to, first and foremost, devote it towards the prevention and treatment of Covid-19. This is especially difficult for developing countries because as previously mentioned, they have less resources to protect themselves from the multi-layered shock. The World Bank President, David Malpass, even warned that the global recession can set back decades of progress in developing countries (Lee, 2020). This implies that it may take a while for developing countries to economically recover from the pandemic. Meanwhile, the UNODC report mentioned that the reordering of governments' resources towards the pandemic may jeopardize drug demand reduction efforts and render those at the margins of society even more vulnerable (United Nations Office on Drugs and Crime, 2020). It suggests that attention of the government, both in financial and political agenda, is shifted towards the pandemic for the time being, thus providing an opportunity for the illicit drug market to diversify. At the same time, containment measures such as mobility restrictions and shelter-in-place orders themselves can lead to a reduction in staff available for intelligence work (working-from home and a reduction in personnel to avoid infection) and may also make domestic and international law enforcement operations more challenging. Furthermore, if the illicit drug market transforms into a more sophisticated and vigilant one after the pandemic, it means the handling of this issue in the future is going to be more difficult as well—moreover without sufficient resources.

Social conditions caused by the pandemic are another reason that drives the spike of illicit

drugs activities during the pandemic. Factors such as the loss of economic opportunities and the growing number of unemployment can trigger the participation of more people in illegal activities in order to make a living. They may be involved in drug production, transport, and/or being recruited into drug trafficking organizations. At the same time, the social distancing policy which possibly forces a certain segment of the society to stay at home without a secure job, might lead to further drug abuse. A study conducted in Myanmar Kachin State found that drug abuse is one of the main concerns of displaced people as a result of the high levels of stress from a lack of future prospects and depression (Salleh, 2020). This can be applied to the current economic devastation of the vulnerable segment of the society, because they might get stressed due to the economic insecurities. Conversely, as also mentioned before, sustained drug abuse can make them more vulnerable to these forces of economic and social insecurity. This issue indicates that the governments must also solve the social issues caused by the pandemic in order to take control of the illicit drug problem. Although solving social issues does not solve the entirety of illicit drug trafficking, it will at least suppress the additional conditions that push people to be involved. This situation once again hints at the cycle between these security sectors, how the pandemic results in societal problems which then amplifies illicit drug trafficking. As Buzan said, to grasp political dynamics, actors need to focus on the interactions, the loops, the vicious circles—regardless of whether these stay within the same sector.

The current situation also describes the perception of involved actors towards the different issues. Buzan mentioned that the linkages across security sectors is also influenced by the perception of actors connected to the issue—how they judge which threat is the most serious cross sectors (Buzan, Wæver, & Wilde, 1998). When the pandemic started, states all over the world—including those in Southeast Asia—directed their primary attention towards the pandemic. Besides handling it internally, ASEAN member countries also try to deal with the issue regionally, such as establishing Covid-19 Response Fund. This shows that Southeast Asian countries perceive the pandemic as a very crucial threat, altering their interpretations towards illicit drug trafficking as a security problem for the time being. Therefore, when the transformation in the illicit drug market happened, no state was prepared enough to handle it immediately.

Considering the current condition of the pandemic and the impacts it has demonstrated throughout the year, it should become a common priority for any state indeed. However, since Southeast Asia already has a long history of illicit drug trafficking problem, it will be best to note that this issue is also a threat—possibly unprecedented during and after the pandemic. Therefore, actions need to be taken so that the illicit drug market will not continue to grow and strain the means of eliminating it in the region.

In the past few months, ASEAN and its member countries seem to be back on track regarding the effort to eradicate illicit drug trafficking in the region. For instance, a video conference held on August 27 by the ASEANAPOL Secretariat and law enforcement agencies of its member countries also discussed how new tricks in drug production, transportation, and trade will become new challenges to the region in drug prevention and control. The UNODC in its report last year expressed that the biggest challenge for Southeast Asian countries are the lack of a regional precursor control strategy and the national capacities to consistently enforce existing laws (United Nations Office on

Drugs and Crime, 2019). Now, as discussed in their virtual meeting, doubled with the challenge of a changing market due to the pandemic, ASEAN and its member countries will have to find a more comprehensive and a firmer enforcement to tackle the issue entirely.

Southeast Asian countries might also have to step up their regional coordination. In some cases, non-traditional security framework re-negotiates state sovereignty and non-interference principle by suggesting that the most appropriate response to the non-traditional security issues is a coordinated or joint response mechanism (Wibisono, 2017). Unlike traditional security that is mostly competitive in nature, relations between ASEAN member states in addressing these non-traditional security issues should be cooperative, manifesting in information exchange and co-enhancement in states' capability to combat the issues to fulfil their responsibility as states to protect their citizens from upcoming dangers, in this case for both the Covid-19 virus and the illicit drug trafficking. Moreover, illicit drug trafficking is eventually a transnational organized crime that goes beyond the state border and requires a transnational solution as well.

Conclusions

Apart from being a threat towards the health sector, the current Covid-19 pandemic is affecting the world in various ways, displaying that the different issues of security are in fact intertwined in the cycle of political dynamic. One of the major concerns in Southeast Asia because of this linkage is how the pandemic transforms illicit drug markets, which has been a serious issue for the region previously, to be potentially more expanded and diversified. While showing that the pandemic does not hinder the steady supply and demand of illicit drugs in the region, there have also been signs of change in the market, such as the introduction of novel substances, the continuous finding of new trade methods, and the disclosure of alternative routes throughout Southeast Asia region. The impacts of the pandemic—in the health, political, economic, and social sectors—are in fact linked across one another and led up to these trends in the illicit drug market. Eventually, the fundamental motivation of illicit drug trafficking remains unchanged. Transnational organized crime groups will continue to attempt to secure great profits by adjusting themselves to the changing global dynamics. The pandemic should naturally be the current priority of states considering the impacts; however, the issue of illicit drug trafficking should not be left behind in the process. Only by recognizing the dangerous threats and damages resulting from both the Covid-19 and illicit drug trafficking, is it reasonable enough to create a comprehensive and multifaceted response. The channels of public health, criminal justice and accountability in governance must be combined to create a complete picture of the illicit drug trafficking and its effects, and thus provide a united effort to achieve the integrated and indivisible goal of creating a Drug-Free ASEAN. After all, these different security issues are concealed as one constellation and concern in an integrated field.

Bibliography

ASEAN. (2017). The Asean Work Plan On Securing Communities Against Illicit Drugs 2016-2025. Jakarta: The ASEAN Secretariat.

ASEAN. (2020). April Policy Brief: Economic Impact of COVID-19 Outbreak on ASEAN. Jakarta: The

ASEAN Secretariat.

ASEAN Narcotics Cooperation Center. (2018). ASEAN DRUG MONITORING REPORT 2017. (M. Kanato, C. Choomwattana, R. Sarasiri, & P. Leyatikul, Eds.) Bangkok: ASEAN Narcotics Cooperation Center.

Asia News Agency. (2020, July 7). Drug trafficking growing as crackdown and COVID-19 restrictions ease. Retrieved from Asia News: http://www.asianews.it/news-en/Drug-trafficking-growing-as-crackdown-and-COVID-19-restrictions-ease-50584.html

BBC News. (2020, May 19). Myanmar police seize largest haul of synthetic drugs. Retrieved from BBC News: https://www.bbc.com/news/world-asia-52712014

Buzan, B., Wæver, O., & Wilde, J. d. (1998). Security: A New Framework for Analysis. Boulder: Lynne Rienner Publishers.

Emmers, R. (2003). The threat of transnational crime in Southeast Asia: drug trafficking, human smuggling and. UNISCI Discussion Papers(2), 1-11.

Horsey, R., & Douglas, J. (2020, August 16). Southeast Asia must unite to tackle its drug problem. Retrieved from Nikkei Asia: https://asia.nikkei.com/Opinion/Southeast-Asia-must-unite-to-tackle-its-drug-problem

Iswara, M. A. (2020, June 26). Pandemic could put people at greater risks from illicit drug trade: UNODC. Retrieved from The Jakarta Post: https://www.thejakartapost.com/news/2020/06/26/pandemic-could-put-people-at-greater-risks-from-illicit-drug-trade-unodc.html

Jatau, A. I., Aung, M. M., Kamauzaman, T. H., & Rahman, A. F. (2015, December). Prevalence of Drug-Related Emergency Department Visits at a Teaching Hospital in Malaysia. Drugs Real World Outcomes, 2(4), 387–395.

Lee, S. (2020, September 14). COVID-19 Brief: Impact on the Economies of Developing Countries. Retrieved from U.S.Global Leadership Coalition: https://www.usglc.org/coronavirus/economies-of-developing-countries/

Lindsay, S. (2019, August 1). ASEAN's drug trade rakes in profits despite strict laws. Retrieved from ASEAN Today: https://www.aseantoday.com/2019/08/aseans-drug-trade-rakes-in-profits-despite-strict-laws/

Marhaenjati, B. (2020, May 1). Kasus Narkoba Naik, Bandar Memanfaatkan Wabah Covid-19. Retrieved from Berita Satu: https://www.beritasatu.com/edi-hardum/nasional/627561/kasus-narkoba-naik-bandar-memanfaatkan-wabah-covid19

McFarlane, J. (2005). Regional and international cooperation in tackling transnational crime, terrorism and the problems of disrupted states. Journal of Financial Crime, 12(4), 301-309. doi:https://doi.org/10.1108/13590790510624774

Muna, R. (2016). Securitizing Small Arms and Drug. In M. Caballero-Anthony, R. Emmers, & A. Acharya, Non-Traditional Security in Asia: Dilemmas in Securitisation (pp. 93-111). New York: Routledge.

National Narcotics Board. (2020, July 30). Narkoba Marak Saat Pandemi, BNN Gencar Lakukan Operasi. Retrieved from Badan Narkotika Nasional Republik Indonesia: https://bnn.go.id/narkoba-marak-saat-pandemi-bnn-gencar-lakukan-operasi/

Nortajuddin, A. (2020, June 26). Drug Trade Thriving Amid Pandemic. Retrieved from The ASEAN Post: https://theaseanpost.com/article/drug-trade-thriving-amid-pandemic

Salleh, A. (2020, September 30). The Drug Epidemic in Asia. Retrieved from Kontinentalist: https://kontinentalist.com/stories/meth-yaba-syabu-drug-trafficking-in-asia-golden-triangle

Sengupta, A. (2020, June 10). COVID-19: A non-traditional security threat and its impact on global politics today. Retrieved from The Kootneti: https://thekootneeti.in/2020/06/10/a-non-traditional-security-threat-and-its-impact/

The New Indian Express. (2020, June 25). Pandemic alters drug trafficking methods, routes: UN. Retrieved from The New Indian Express: https://www.newindianexpress.com/world/2020/jun/25/pandemic-alters-drug-trafficking-methods-routes-un-2161252.html

United Nations. (2020). July Policy Brief: The Impact of COVID-19 on South-East Asia. New York: United Nations.

United Nations Office on Drugs and Crime. (1998). Economic and Social Consequences of Drug Abuse and Illicit Trafficking.

United Nations Office on Drugs and Crime. (2007). 2007 World Drug Report. Slovakia: United Nations Publication.

United Nations Office on Drugs and Crime. (2019). Synthetic Drugs in East and South-East Asia: Trends and Patterns of Amphetamine-type Stimulants and New Psychoactive Substances. Division for Policy Analysis and Public Affairs. Bangkok: Global SMART Programme (East Asia).

United Nations Office on Drugs and Crime. (2019). Transnational Organized Crime in Southeast Asia: Evolution, Growth and Impact. Bangkok: Regional Office for Southeast Asia and the Pacific.

United Nations Office on Drugs and Crime. (2020). COVID-19 and the drug supply chain: from production and trafficking to use. Vienna: UNODC Research and Trend Analysis Branch.

United Nations Office on Drugs and Crime. (2020, May 7). COVID-19 is changing the route of illicit drug flows, says UNODC report. Retrieved from United Nations Office on Drugs and Crime: https://www.unodc.org/unodc/en/press/releases/2020/May/covid-19-is-changing-the-route-of-illicit-drug-flows--says-unodc-report.html

United Nations Office on Drugs and Crime. (2020). Synthetic Drugs in East and Southeast Asia: Latest developments and challenges May 2020. Bangkok: United Nations Office on Drugs and Crime.

United Nations Office on Drugs and Crime. (n.d.). Legal Framework for Drug Trafficking. Retrieved from United Nations Office on Drugs and Crime: https://www.unodc.org/unodc/en/drug-trafficking/legal-framework.html

United Nations Office on Drugs and Crime. (n.d.). Organized Crime. Retrieved from United Nations: https://www.unodc.org/unodc/en/organized-crime/intro.html

Wibisono, A. A. (2017). ASEAN-China Non-Traditional Security Cooperation and the Inescapability of the Politics of Security. Global & Strategis, 11(1), 39-54.

World Bank Group. (2020). From Containment to Recovery: Economic Update for East Asia and the Pacific. Washington, DC: The World Bank

Digital Diplomacy and Global Solidarity: The Case of Indonesia's Digital Diplomacy

Albert Triwibowo
Universität Rostock and Parahyangan Catholic University
albert.triwibowo@uni-rostock.de, albert.triwibowo@unpar.ac.id

Abstract

In wake of the Covid-19 pandemic, digital diplomacy has emerged as the best possible solution to deal with current challenges. It offers possibilities to conduct tasks central to diplomacy, namely communication, negotiation and pursuing national interest. Digital diplomacy completes the duties that are normally impossible with traditional face-to-face diplomacy. However, the main question still remains: Can digital diplomacy be harnessed to initiate global solidarity in order to solve international crises as is typically done through traditional diplomacy? Using the case study of Indonesia and based on the understanding of digital diplomacy offered by Bjola and Holmes, this paper argues that digital diplomacy is used at most for citizen protection issues. Concerning Indonesia, digital diplomacy is the primary tool for the purposes of information dissemination and protection of its citizens. Nonetheless, it has the potential to be used as a tool for raising global awareness to achieve solidarity. The findings presented in this paper highlights how the Indonesian MOFA actively uses digital diplomacy to show its solidarity in the global fight against Covid-19. Meanwhile, the Indonesian Mission in Germany is active in terms of citizen protection matters. This paper is a qualitative study and focuses on the digital activity of the Indonesian Ministry of Foreign Affairs (MOFA) and the Indonesia Missions in Germany in responding to the Covid-19 pandemic. The study also uses primary and secondary data from the Indonesian MOFA as well as interviews with key diplomats from Indonesia Mission in Germany.

Keywords: Digital Diplomacy, Indonesia, Global Solidarity, Covid-19

Introduction

"We seem to be situated in an 'in-between era', where international politics – and with it diplomacy – needs fresh ideas and new initiatives of diplomatic engagement to interact with a changing world"
(Bjola and Kornprobst, 2013, p.3)

Bjola and Kornprobst (2013, pp. 3-5) stated in their book about why and how to study diplomacy. They stipulated that today is the perfect time to study diplomacy as there are many important events in international politics that need to be managed through diplomacy. They continue in explaining that the forces of globalization have put us in the 'in-between era' during which new issues have emerged as a result of a more globalized world. Among the issues the

authors referenced were environmental protection, health safety, and migration control. In this context, diplomacy is expected to play an important role in communicating different interests and the importance of global public goods between actors in international relations. As history has witnessed, diplomacy has successfully adapted towards the advent of new technologies throughout the decades. The adaptation of diplomacy started with the use of the telegraph followed by the telephone, wireless radio and then now with the digitization of the world wide web. Nowadays, the adoption of technology into diplomacy has paved the way for the coined term 'digital diplomacy.' As digital diplomacy became increasingly popular in international relations, people began examining how digital diplomacy has contributed to the greater good of international affairs. For example, it is used to create a genuine dialogue between public and government via digital instruments (Amiri, 2020). Sharp (2009, p. 1) once mentioned that international relations require diplomacy when a difficult situation emerges and when there is room for general improvement. The questions from this assessment are whether the Covid-19 pandemic can be considered as a difficult situation and whether diplomacy can contribute in the manner described by Bjola and Kornprobst? The author argues that the coronavirus pandemic can be considered as a difficult situation with which diplomacy must react. More precisely, digital diplomacy is expected to contribute to global efforts in handling the Covid-19 pandemic given how traditional diplomacy seems to face difficulties in solving the challenges related to the virus outbreak.

In wake of the pandemic, digital diplomacy is arguably the best possible solution to deal with current challenges. It offers possibilities to conduct tasks central to diplomacy, namely communication, negotiation and pursuing national interest. Digital diplomacy completes the duties that are normally impossible with traditional face-to-face diplomacy. In their article, Bjola and Manor (2020) provided ways on what contributions digital diplomacy can make during the pandemic noting three important roles: providing consular diplomacy, image-building, and combating disinformation. However, the conduct of digital diplomacy is not without hurdles. While some countries, such as Germany (Federal Foreign Office, 2020), smoothly transition into digital diplomacy to replace traditional face-to-face meetings, other countries still face a problem of basic access to the internet (Kurbalija, 2020). Another issue is the digital gap between countries and societies (UNCTAD, 2020). Hence, the main question still remains: Can digital diplomacy be harnessed to initiate global solidarity in order to solve international crises as is typically done through traditional diplomacy?

This paper will highlight how Indonesia has adapted its approach to diplomacy during the Covid-19 pandemic and as the case study of the research. Based on data from DiplomacyLive, Indonesia ranked 37th in 2016 (Triwibowo and Martha, 2017) and then 38th in 2017 (Prabandari and Rahyaputra, 2018) in terms of digital diplomacy. In addition, Indonesia has gained popularity on social media and ranks in the top-10 virtually (Gloria, 2017). The Indonesian Ministry of Foreign Affairs' (MoFA) Twitter account itself took the fourth position as the most reliable government account (Madu, 2018, p. 14; Andika, Pamungkas, Badaruddin, Suharyanti, 2019, p. 4). Using the case study of Indonesia and based on the understanding of digital diplomacy offered by Bjola and Holmes,

this paper argues that digital diplomacy is used at most for citizen protection issues. Concerning Indonesia, digital diplomacy is the primary tool for the purposes of information dissemination and protection of its citizens. Nonetheless, it has the potential to be used as a tool for raising global awareness to achieve solidarity. The findings presented in this paper highlights how the Indonesian MoFA actively uses digital diplomacy to show its solidarity in the global fight against Covid-19.

This paper is a qualitative study and focuses on the digital activity of the Indonesian Ministry of Foreign Affairs (MOFA) and the Indonesia Mission in Germany in responding to the Covid-19 pandemic. The Indonesia Missions in Germany actively inform Indonesian citizens living in Germany. As it is said by the Indonesian Ambassador in Berlin that, "we continue to provide information and announcements on things that must be obeyed according to German regulations, for example the steps that must be taken if there is a suspicion of infected by the coronavirus." (Ferida, 2020). This paper also uses primary and secondary data from the Indonesian MOFA as well as interviews with key diplomats from the Indonesia Mission in Germany. Moreover, this paper analyses Twitter activities from the Indonesian MoFA and three Indonesia Missions in Germany (Indonesian Embassy in Berlin, Indonesian Consulate General in Hamburg and Frankfurt). The selection of analyzing Twitter accounts is due to the finding that it is the most popular platform for governments to reach a wider audience (Twiplomacy, 2018). In responding to Covid-19, Twitter has regularly been used by many governments to reach the public online (Twiplomacy, 2020).

In order to explain the arguments, this paper will be divided into five parts. The first part will briefly discuss the concept of digital diplomacy. Then, the second section of this paper discusses the impact of the coronavirus on diplomacy while also providing a brief description of how the pandemic created new challenges in the field of diplomacy. The third part of the paper will attempt to discuss how Indonesia utilises digital diplomacy during the pandemic. The fourth part of the paper will present arguments to answer the question of whether digital diplomacy can be used to initiate and achieve global solidarity from the perspectives of Indonesian diplomacy. After the assessments of Indonesia's digital diplomacy during the pandemic are presented, the conclusion will be presented as the final part of the paper.

Digital Diplomacy: A Brief Introduction

Communication is an integral part of diplomacy as exemplified by the many definitions of diplomacy by scholars and practitioners that incorporate the role of communication in its explanation. Bjola and Kornprobst (2013) define diplomacy as "the institutionalized communication among internationally recognized representatives of internationally recognized entities through which these representatives produce, manage and distribute public goods" (p. 4). Meanwhile, Jönsson and Hall (2005, p. 37) listed three important dimensions of diplomacy, which are communication, representation, and reproduction of international society. They further assert that communication is an integral part of diplomacy stating that "without communication there can be no diplomacy" (p. 37). The role of communication continues to play an important role in digital diplomacy. According

to Bjola (2015), digital diplomacy is "the use of social media for diplomatic purposes, could change practices of how diplomats engage in information management, public diplomacy, strategy planning, international negotiations or even crisis management" (p. 4). Similarly, Holmes (2015) defines digital diplomacy as "a strategy of managing change through digital tools and virtual collaboration" (p. 15). From these definitions, it is evident that communication maintains its integral role in digital diplomacy that relies on digital tools as an instrument. This paper will define digital diplomacy as communication using digital instruments, especially social media, for managing changes related to diplomatic purposes.

It must be underlined that digital diplomacy remains a highly debated concept. Nowadays, there are many terms that refer to the use of digital instruments in the conduct of diplomacy. Terms like e-diplomacy, digital diplomacy, cyber diplomacy, and 'twiplomacy' have been used interchangeably by scholars and practitioners to discuss the use of digital instruments for diplomatic purposes (Hocking and Melissen, 2015; Adessina, 2017). Digital diplomacy has also been defined differently in terms of policy implementation by individual states' ministry of foreign affairs. It is called the 21st Century Statecraft by the US State Department, whereas the Canadian Ministry of Foreign Affairs refers to it as Open Policy and the UK's Foreign and Commonwealth Office (FCO) calls it Digital Diplomacy (Hanson, 2012, p. 2).

The debate about digital diplomacy is not only about the definition, but also about the effect of digitalization on the practice of diplomacy and whether it creates a new form of diplomacy or not. Scholars like Melissen (2013) believe that digital instruments like social media serve as a tool of public diplomacy. As such, digital tools helped in shaping the new public diplomacy. Nevertheless, others believe that digitalization creates something significantly new in diplomacy, especially in how communication in diplomacy is conducted. In this regard, the use of social media creates the possibility for diplomacy to engage in two-way communication with the public by opening up the possibility of dialogue between diplomats as well as diplomats with members of society. In the words of Duncombe (2017), this phenomenon means that "social media are changing the space within which diplomacy unfolds" (p. 546). While the debate about digital diplomacy is typically about its definition and its effect, it is worth pointing out that the use of digital instruments in diplomacy is a rather new phenomenon in the conduct of diplomacy. Numerous possibilities are opened up with the availability of digital tools, including the opportunity to communicate with a bigger and more diverse audience on diplomacy-related matters.

Diplomacy and Change Brought by Covid-19

In diplomacy, communication is used to manage changes in international affairs. When something crucial happens between internationally recognized entities, communication plays an important role in managing the situation. Change according to Ernst Hass (1958) is "the process whereby political actors in several distinct national settings are persuaded to shift their loyalties towards a new center, whose institution possesses or demands jurisdiction over the pre-existing

national states" (p. 16). Based on that definition, Sinha (2018) explains that change creates shifts in three dimensions: "power or interests, ideas, and institutions" (p. 197). From these two understandings, it can be understood that change in international affairs is related to an event that triggers a shift in an actor's behavior in international relations thereby affecting the existing situation. Taking this context, the author assesses that the Covid-19 pandemic can be considered as a factor of change in international affairs, in which it influences how states behave in relation to the current event. For Holmes (2015, p. 22) this type of change will have an effect on how states reflect current discourse and practice. This paper will not go any further in discussing the type of change as explained by Holmes in his article. However, the impact of Covid-19 towards the state's interest, idea and diplomacy as an institution has clearly suggested that it has sparked a change in international affairs.

As a factor of change in international affairs, the pandemic presents at least three challenges to diplomacy. First, it affects how diplomacy is conducted. Traditionally, hosting face-to-face meetings has been customary in the field of diplomacy for negotiation purposes and to address important issues such as conflict, war, or trade negotiation. The Covid-19 pandemic has restricted face-to-face diplomatic meetings due to social distancing requirements and restrictions on movements (Liechtenstein, 2020). Moreover, diplomacy is accustomed to a physical threat, whereas the coronavirus outbreak is something entirely different. Time is still of the essence, but the location of the threat, what it looks like and what timeframes are available cannot be physically seen (Triwibowo, 2020). The second challenge is the importance of global health issues in diplomacy which, up to now, is still not considered as part of national interest or is a topic of discussion in multilateral dialogues. In fact, global health issues are still not considered as a priority among the world's major powers (Bayaa, 2020). The last challenge brought about by the pandemic is it created a nationalistic diplomacy instead of global solidarity during a crisis. The initial response to the coronavirus outbreak witnessed countries responding differently and in their own way. There were only nationalistic sentiment and no solidarity in the effort to fight the virus when the outbreak began to spread (Woods and Batniji, 2020). States began closing their borders (Herszenhorn, 2020), competed for the invention of a Covid-19 vaccine ("Coronavirus: anger in Germany at report Trump seeking exclusive vaccine deal," 2020) and even harbored suspicions about certain countries concerning the source of the virus (Miller, 2020). These situations illustrate how diplomacy faced serious threats as a result of the virus outbreak. However, digital diplomacy became one possibility for an exit strategy.

Indonesian Diplomacy Goes Digital Amid the Pandemic

Before elaborating on what being digital is for Indonesia's diplomacy amid the pandemic, it is important to understand the background of Indonesia's interests concerning digital diplomacy. The introduction of information and communication technology (ICT) in Indonesia's diplomacy is fairly recent. The Government of Indonesia introduced the use of websites in 1996, then further developed it in 2008 (Madu, 2018, p. 14). It was not until the Joko Widodo (Jokowi) administration came to power

that digital diplomacy received more government attention. During the Jokowi presidency, the Indonesian MOFA's attention became more focused on implementing digital diplomacy. Minister of Foreign Affairs, Retno Marsudi, has repeatedly stated the importance of digital diplomacy in today's international affairs. During an event in Jakarta in 2016, Minister Retno Marsudi stated that,

> "If Indonesian diplomats can provide real-time reports [on urgent matters such as natural disasters and hostage situations], we [in Jakarta] can immediately analyse what is going on. In performing their duties, the speed of information is a must for every diplomat." (Halim, 2016)

In 2017, the Indonesian MOFA established a Digital Command Center (DCC) to support the conduct of Indonesia's digital diplomacy. It would later be supported by the Regulation of the Ministry of Foreign Affairs Number 10 Year 2018 which changed Indonesia's strategic plan regarding its diplomacy. The Indonesian MOFA sought to benefit from the incurred developments, particularly with regard to how the use of digital instruments, in particular social media, can support Indonesian foreign policy and diplomacy.

Indonesia's initiatives in digital diplomacy became increasingly apparent in 2018 and 2019. It held the International Seminar on Digital Diplomacy in 2018 (Diplo, 2018) and then followed with the Regional Conference on Digital Diplomacy (RCDD) in 2019. The RCDD is considered as the first conference related to the field of digital diplomacy in the region (Arisandy and Kurmala 2019). During the RCDD, Minister Retno Marsudi stressed the importance of digital diplomacy stating that "our inability to keep up with technological leaps will make us left behind. It is the same with diplomacy. If we cannot adjust to the rapid transformation, diplomacy will no longer be relevant." (Widiarini, 2019)

There are two important aspects of the conduct of digital diplomacy in the context of Indonesia that stand out the most. First is the function of digital diplomacy in disseminating information. The second aspect is how the Indonesian government has made use of digital diplomacy for citizen protection purposes particularly during the coronavirus pandemic. The result of the researcher's analyses based on interviews, public documents and the Indonesian government's social media finds that digital diplomacy, mostly through social media, helped Indonesian diplomats to mitigate the Covid-19 crisis and to protect Indonesian citizens living abroad in wake of the pandemic. For example, an Indonesian diplomat in Germany said that,

> "... it is about real-time diplomacy, in which it can disseminate information as soon as possible and it is also expected that the information can be a good campaign for Indonesia as well. In this regard, it is about knowing that Indonesia is actively doing something related to certain issues. But it will depend on our interest at that specific moment. One of the examples is our duty concerning citizen protection and services. It is important to inform our citizens about the current situation of Covid-19 in Germany, to make people aware of that, and to be updated of local regulations. We help to inform Indonesian people here, because not everyone is reading the newspaper daily, but they do have social media. Through our information, our citizens will receive first-hand information, and secondly, we are also becoming an actor of information dissemination."

(Personal communication, September 2, 2020)

The text illustrates that citizen protection has become a top priority of Indonesia's digital diplomacy. The importance of digital diplomacy was mentioned in the Annual Press Statement in 2017, which underlined the establishment of a digital command centre to support Indonesia's digital diplomacy (Pernyataan Pers Tahunan Menteri Luar Negeri Tahun 2017). Although the press statement didn't explicitly mention the use of digital diplomacy for citizen protection, it does specifically mention the use of technology (mobile applications) in the protection of Indonesian citizens. In 2019, during the Regional Conference on Digital Diplomacy, Minister Retno Marsudi made an assertive statement saying that "Digital diplomacy is a tool for the protection of our citizens. I believe that when it is used effectively, the internet can be an excellent tool for protecting our citizens and national interests abroad" (Sinaga, 2019).

Later in 2020, the Foreign Minister's Annual Press Statement (Pernyataan Pers Tahunan Menteri Luar Negeri Tahun 2020) underlined that Indonesia's diplomacy will be directed by 4+1 priority. These priorities are the strengthening of economic diplomacy; protection diplomacy; sovereignty and national diplomacy; and Indonesia's role in the region and globally. Another priority is the strengthening of the diplomatic infrastructure. In research conducted by Dharossa and Rezasyah (2020, p. 113), it was found out that one of the successful implementations of digital diplomacy by the government of Indonesia is citizen protection matters. Therefore, it can be concluded that for Indonesia, digital diplomacy is used mainly to protect Indonesian citizens abroad during urgent and crisis situations such as the Covid-19 pandemic.

The use of digital diplomacy for citizen protection and other purposes can be seen from the content of Indonesia's overseas missions (Table 1). In Germany, there are three Indonesian Missions: Indonesian Embassy in Berlin, and the Indonesian Consulate in Hamburg and Frankfurt. Each of the Mission manages its own social media platforms ranging from Twitter to Instagram. To easily engage with the public, Indonesia's Missions abroad and also in Germany use hashtag features linked to the issue. As stated by one Indonesian diplomat, "...we use hashtags so that it is easily identified by people and for digital records purposes." (Personal communication, September 2, 2020). There are five hashtags that are frequently used: #IniDiplomasi used in nearly all tweets in which the hashtag covers general issues on Indonesian diplomacy; #NegaraMelindungi for citizen protection matters; #IndonesiaUntukDunia for Indonesia's role in the international fore; #DemiNKRI for the issue of sovereignty; and #RintisKemajuan for economic diplomacy. Meanwhile, for Indonesia's overseas Missions, they supplement their posts by using #IndonesiaWay to show Indonesia's diplomatic initiatives (Kurniawati, Rachmawati and Dewi, 2020, p. 89). On citizen protection matters, the hashtag #NegaraMelindungi is added to symbolize the state's presence in protecting all Indonesian citizens (Madu, 2018, p. 14).

The content from the Twitter accounts of the Indonesian MOFA, the Indonesian Embassy in Berlin, and the Indonesian Consulate General in Hamburg and Frankfurt reveals that the issue of citizen protection, through the hashtag #NegaraMelindungi, ranks first in aggregate

numbers for the February to September 2020 period. The second most frequently used hashtag is #IndonesiaUntukDunia which reflects Indonesia's role in the international fore. The hashtags #RintisKemajuan and #DemiNKRI rank third and fourth, respectively.

Table 1. Twitter Activities of the Indonesian MOFA and Missions in Germany (Data from February-September 2020). Data compiled by the author from Twitter.

	Twitter Account	#NegaraMelindungi	#IndonesiaUntukDunia	#DemiNKRI	#RintisKemajuan	Tweet Related to Covid-19 Issues
Indonesian Ministry of Foreign Affairs	MOFA Indonesia @Kemlu_RI	176	69	8	30	81
Indonesian Embassy Berlin	KBRI Berlin @BerlinKBRI	1	-	-	-	17
Indonesian Consulate Hamburg	Indonesia in Hamburg @KJRI_Hamburg	4	-	1	21	10
Indonesian Consulate Frankfurt	Indonesian Consulate General Frankfurt @kjrifrankfurt	20	3	1	16	29
Total Number		201	72	10	67	137

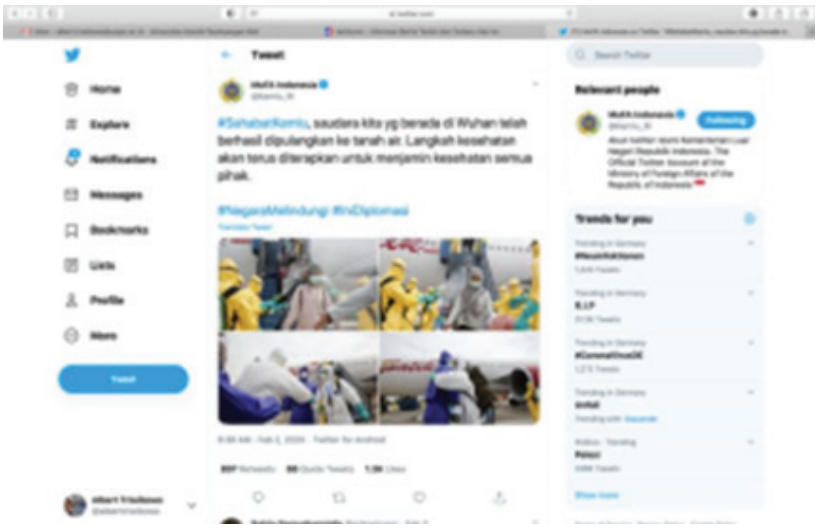


Figure 1. Indonesian MOFA's tweet about the repatriation of citizens from Wuhan, China (MoFA Indonesia, 2020, February 2)

The research process found that the Indonesian MOFA released a tweet 176 times using the hashtag #NegaraMelindungi to show the presence of the state. This is a stark comparison to

the efforts conducted by Indonesian Consulate General in Frankfurt that tweeted using the same hashtag 20 times, the Indonesian Consulate General in Hamburg did so four times while the Indonesian Embassy in Berlin used the hashtag only once.

The Indonesian MOFA generates the most number of tweets because it regularly updates the public on many situations, such as when the Indonesian Government repatriated its citizens from various cities across the world. One of the Ministry's most popular social media posts was the repatriation of Indonesian citizens from Wuhan, China–ground zero for the Covid-19 outbreak (MOFA Indonesia, 2020, February 2). Moreover, the Indonesian MOFA's Twitter account provides daily statistics on the number of Indonesian citizens infected with the Covid-19 virus based on data from all of Indonesia's overseas Missions (Figure 2). The Indonesian Mission in Germany's approach to citizen protection matters is to provide regular updates on current situations in the local area in addition to providing Indonesian citizens the hotline number for emergency situations. Tweets related to the repatriation of Indonesian workers from Germany (Figure 3-5) have also been issued. Indonesian diplomats view digital activities such as information dissemination and citizen protection issues as useful due to the trend of Indonesians being more familiar with social media than traditional forms of communication. One diplomat emphasized that,

> "The event (pandemic) is timely and it is related to our citizens. For the protection of our citizens, it makes it easier for us to use digital diplomacy. During the pandemic, having digital platforms have been really helpful for issuing announcements that we can share with our friends and citizens here. We can also inform citizens about Covid-related protocols and others..."
>
> (Personal communication, July 28, 2020)

The statement sheds light on how Indonesia's Missions in Germany utilize digital diplomacy to execute information dissemination and for citizen protection purposes which are in keeping with Bjola and Manor's argument that (Bjola and Manor, 2020) digital diplomacy is related to consular assistance during a crisis situation. The provision of such forms of assistance in an accurate and timely manner is expected by the Indonesian Ministry of Foreign Affairs and its representatives. Providing consular assistance during a crisis reflect statement is an effort on the part of the Indonesian government and its representatives to remain transparent and responsive as well as to protect and assist its citizens. Social media platforms have been found to be particularly useful in disseminating information for Indonesian citizens during a crisis. Research by Dharossa and Rezasyah (2020, p. 113) found that, in Indonesia, social media is the best way to disseminate information since Indonesian citizens are more familiar with one-way information that is readable and easy to understand. While there are plenty of tweets related to citizen protection using #NegaraMelindungi, some are also issued using other hashtags. Tweets regarding the repatriation of Indonesian citizens and updates on local regulations are not complemented with the hashtag #NegaraMelindungi or use different hashtags (in Table 1 such posts are listed under the "Tweets Related to Covid-19 Issues" category). For example, the Indonesian Embassy in Berlin more often uses the hashtags #indonesiaingermany, #indonesichebotschaftberlin, #kbriberlin or just a simple #covid19. Meanwhile, the Indonesian Consulate General in Frankfurt posts pictures of citizen repatriation (Indonesian Consulate General Frankfurt, 2020).

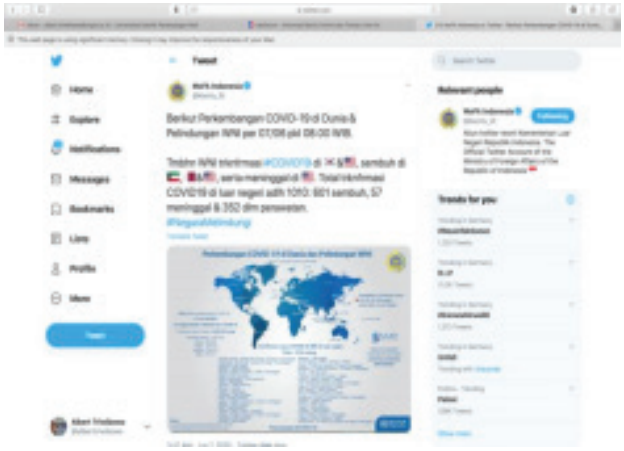


Figure 2. Indonesian MoFA update about the development of Covid-19 and citizen protection (MoFA Indonesia, 2020, June 7)

Figure 3. Indonesian Consulate General in Hamburg update information of Covid-19 for citizen protection (Indonesia in Hamburg, 2020, July 29)

Figure 4. Indonesian Embassy in Berlin pdates information and hotline about Covid-19 for citizens
(KBRI Berlin, 2020, April 17)

Figure 5. Indonesian Consulate General Frankfurt updates about citizen repatriation (Indonesian Consulate General Frankfurt, 2020, June 10)

Indonesia's Digital Diplomacy: Opportunity for Global Solidarity?

One of Indonesia's core objectives in foreign policy is for the country to have an active role in international affairs, especially to support the ideals of peace through international organizations. This goal is in line with Indonesia's most important foreign policy principle of bebas-aktif (independent and active). Indonesia's active role in international affairs and in preserving peace is related to the notion of 'aktif' (active) in the bebas-aktif principle. Indonesia's first Vice President Mohammad Hatta (1953) explained that "active refers to the effort of working energetically for the preservation of peace and the loosening of tension generated by two blocs, …" (p. 444). Although the background of the 'active' notion first emerged during the Cold War era, Indonesia has remained consistent in its advocacy towards ideals of peace over the years. The principle of bebas-aktif is known to be "the right doctrine for Indonesia to follow for all time" (Anwar, 2003, p. 2). Thus, the principle of active continues to be a suitable option for Indonesian diplomacy, even during crises like Covid-19. Indonesia's core foreign policy principle also explains why the country became a proponent of global solidarity in responding to the pandemic and its multi-layered effects. One question which emerges is whether demanding global solidarity is also expected in Indonesia's digital diplomacy.

As explained in the previous section, Indonesia's digital diplomacy is concentrated on information dissemination and citizen protection matters. However, the Twitter activities of the Indonesian MoFA suggest that Indonesia utilizes its digital diplomacy to encourage global solidarity, especially in international forums and organizations such as the UN General Assembly, APEC, the Indian Ocean Rim Association (IORA), ASEAN, ASEAN+3, and Foreign Policy and Global Health. To advocate for global solidarity, the Indonesian MoFA disseminates information about the importance of cooperation and multilateralism in dealing with the Covid-19 crisis. The Indonesian Missions in Germany occasionally retweet information supporting global solidarity from Jakarta.

An example of Indonesia calling for global solidarity during the pandemic happened during the Foreign Policy and Global Health 2020 event, in which Indonesia and seven other countries issued a joint statement about measures to mitigate the spread of the Covid-19 virus (MoFA Indonesia, 2020, February 6). Indonesia stressed the importance of international cooperation in mitigating the virus outbreak in keeping with the International Health Regulation (IHR) 2005.

Figure 6. Indonesia's initiative in FPGH 2020 (MoFA Indonesia, 2020, February 6)

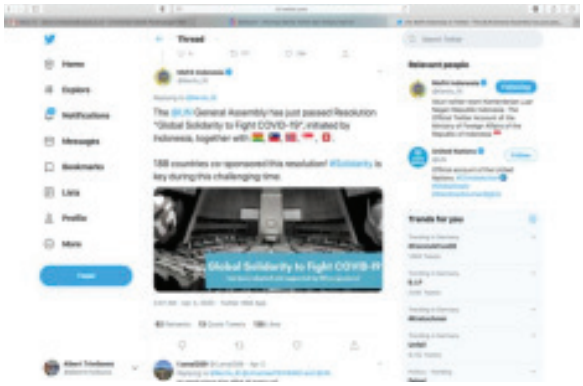


Figure 7. Indonesia's initiative in the UN General Assembly (MoFA Indonesia, 2020, April 3)

Figure 8. Foreign Minister Retno Marsudi's statement (MoFA Indonesia, 2020, April 18)

Figure 9. Indonesia's initiative in IORA related to Covid-19 response (MoFA Indonesia, 2020, May 22)

Indonesia also encouraged international cooperation to tackle issues regarding the impact of the coronavirus crisis. On another occasion, Indonesia, together with five other countries in the UN General Assembly, initiated and successfully passed the Resolution on "Global Solidarity to Fight COVID-19" (MOFA Indonesia, 2020, April 3). The resolution was the first resolution from the UN concerning the pandemic in which the countries emphasized the call for a global response and cooperation to handle the crisis; the efforts range from information exchange to research cooperation and good governance (Pinandita, 2020). On April 18, during the Ministerial Coordinating Group on Covid-19, Minister Retno Marsudi reasserted the significance of global solidarity in overcoming the multitude of challenges linked to Covid-19 (MOFA Indonesia, 2020, April 18). In IORA, Indonesia initiated a virtual dialogue about "Partner Engagement on Covid-19: Responses, Cooperation and Partnership" (MOFA Indonesia, 2020, May 22).

An integral issue arisen from the Covid-19 mitigation efforts was vaccine development. Triwibowo in his article (2020, pp. 104-107) stated that the pandemic posed a serious challenge to diplomacy by creating a more nationalistic approach to diplomacy in certain ways. The rise of this trend marks the relevance of Indonesia's free and active foreign policy principle in managing the shift. As one diplomat from the Indonesia Mission in Germany stated,

> "The free and active principle remains as relevant today as it did in the past, but even more so now. In the past, they were told to choose between the Western or Eastern bloc whereas now we are told to choose between the U.S. and China. It is the same and implies the same strategy. So, it is still relevant as it is our identity as a nation."
>
> (Personal communication, July 28, 2020)

In addressing the nationalistic approach to vaccine patents and distribution, Minister Retno Marsudi called for equal access to a vaccine during the Foreign Policy and Global Health Ministers' Virtual Meeting (FPGH MVM) event on the 3rd of September 2020 (MoFA Indonesia, 2020, September 4). Her demand was important during a time when the competition was high over which country should have initial access to the Covid-19 vaccine. This immense level of competition led Minister Retno Marsudi to remind members at a UN High-Level Meeting on the significance of multilateralism. Otherwise, she said, the mighty take all will prevail. This statement was retweeted by the Indonesian Mission in Germany (Indonesian Consulate General Frankfurt, 2020, September 22).

Figure 10. Indonesia's statement about th importance of equal access to a vaccine (MOFA Indonesia, September 4)

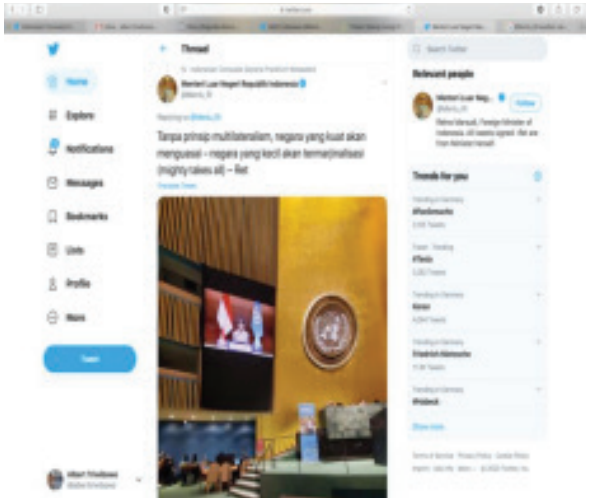


Figure 11. Foreign Minister Retno Marsudi's statement at UN High-Level Meeting (Indonesian Consulate General Frankfurt, September 22)

In total, there are 97 tweets from the Indonesian MOFA about global solidarity amid the Covid-19 pandemic. Usually Indonesian MoFA uses #IndonesiaUntukDunia to signify Indonesia's role and initiative in international forums. It also uses other tweets in regard to the global solidarity of Covid-19 pandemic, such as #IniDiplomasi or #Solidarity.

By assessing the measures that have been carried out by the Indonesian MOFA and its overseas Missions, it can be gathered that digital diplomacy has the potential to encourage global solidarity. History has shown that diplomacy can adapt to the emergence of new technologies, particularly if there are digital instruments available. The unprecedented timing of the Covid-19 pandemic has accelerated the adoption of new digital tools in the field of diplomacy. On this matter, an Indonesian diplomat in Germany shared that,

> "In practice, we have also used digital diplomacy in the context of fostering relations between countries, both bilaterally, regionally and multilaterally, and it becomes very crucial when we are in a pandemic like now ... we use it for raising public awareness in the world, both in our country and in partner countries ... likewise if we look at global developments, many countries, including Indonesia, use digital diplomacy to reach agreements at the regional and multilateral levels. So, in essence, we are very aware that digital diplomacy is very important to improve the performance of Indonesia's diplomacy which we hone in to advocate for our national interest and to fight for our national interests."
>
> (Personal communication, September 15, 2020).

One important point is that digital instruments are still considered by many scholars and practitioners as a compliment towards traditional diplomacy, and only serves as one tool to achieve national interest. In the words of Clarke (2015, p. 125), the use of digital diplomacy does not change anything, it is merely 'business as usual.' Thus, no matter how much digital diplomacy is used, it seems that physical meetings are still needed to reach an understanding and agreement. However, the ability of social media to disseminate information and raise public awareness cannot be ignored, especially to encourage people to stand in support of global solidarity during the current pandemic. As explained by an Indonesian diplomat in Germany, "Digital diplomacy is only a tool. But we have to know what the core is, what is the end game. The end game is to create peace." (Personal

communication, July 28, 2020).

Conclusion

Communication is an integral part of diplomacy and digital diplomacy has provided governments with a wide range of communication platforms during a crisis particularly when traditional face-to-face meetings are impossible to be hosted. Digital diplomacy enables states to respond to changes in international affairs whilst managing shifts in diplomatic purposes such as conducting consular services. As a factor of change in international affairs, the Covid-19 pandemic has created numerous challenges to diplomacy. Although global solidarity was not a common message across many countries during the initial response to the pandemic, Indonesia's advocacy for global unity provides one evidence on the effectiveness of digital diplomacy during the Covid-19 crisis.

The findings of this research suggest that the Indonesian MOFA and Indonesian Missions in Germany implement digital diplomacy to continue supporting Indonesia's foreign policy amid the pandemic. The versatility of digital diplomacy allows the Indonesian MOFA and Indonesian Missions in Germany to communicate with Indonesian citizens and to regularly inform them of the changes triggered by the virus outbreak. Matters regarding citizen protection and information dissemination were particularly boosted during the pandemic and is reflected in the hashtag #NegaraMelindungi that the Ministry and Missions add to their tweets.

The research findings further reveal how Indonesia uses digital diplomacy to support calls for global solidarity. The Indonesian MOFA actively vouched for global unity as a response to the Covid-19 crisis in which it mainly retweets posts issued by Indonesia's central government. The presented data demonstrate how Indonesia plays an active role in advocating global solidarity to tackle the pandemic in addition to its focus on protecting its citizens during the crisis. The Indonesian MOFA additionally makes use of international forums such as IORA, APEC, ASEAN or UN General Assembly to campaign for issues on global cooperation, equal access to a vaccine, or the importance of multilateralism. As such, it can be gathered that Indonesia's digital diplomacy efforts include promoting global solidarity which is in line with Indonesia's foreign policy principle of bebas-aktif. What the research has shown is that digital diplomacy accomplishes the three points that Bjola and Manor highlighted: providing consular diplomacy, image-building, and combating disinformation. The assessment also highlights supplementary benefits of digital diplomacy, namely in promoting global solidarity. What remains unclear is whether digital diplomacy generated a significant impact on how a state communicates with a foreign government and society. However, the answer will be left for future research.

Bibliography

Adesina, O. S. (2017). Foreign policy in an era of digital diplomacy. Cogent Social Sciences 3 (1297175), 1-13. http://dx.doi.org/10.1080/23311886.2017.1297175

Amiri, S. (2020, April 2). How COVID-19 Makes International Affairs More Humanly Decent. CPD Blog. Retrieved from https://www.uscpublicdiplomacy.org/blog/ how covid-19-makes-international-affairs- more-humanly-decent

Andika, M. T., Pamungkas, B., Badaruddin, M., & Suharyanti (2019). Has Indonesia's Diplomacy Really Gone Digital? Proceedings of the 1st International Symposium on Indonesian Politics, 1-9. DOI: 10.4108/eai.25-6-2019.2288007.

Anwar, D. F. (2003). Key Aspects Of Indonesia's Foreign Policy. In D. F. Anwar & H. Crouch, Indonesia: Foreign Policy and Domestic Politics (pp. 2-10). Singapore, Singapore: ISEAS.

Arisandy, Y. & Kurmala, A. (2019, September 10). Foreign minister opens regional conference on digital diplomacy. Antaranews.com. Retrieved from https://en.antaranews.com/news/132520/foreign-minister-opens-regional conference-on-digital-diplomacy

Bayaa, A. A. (2020, May 22). Global Health Diplomacy and the Security of Nations Beyond COVID-19. E-International Relations. Retrieved from https://www.e ir.info/2020/05/22/global-health-diplomacy-and-the-security-of-nations-beyond covid-19/

Bjola, C. (2015). Introduction. Making sense of digital diplomacy. C. Bjola & M. Holmes (Eds.), Digital Diplomacy. Theory and Practice (pp.1-9). New York, United States: Routledge.

Bjola, C. & Kornprobst, M. (2013). Understanding International Diplomacy. Theory, Practice and Ethics. New York: Routledge.

Bjola, C. & Manor, I. (2020, March 31). Digital Diplomacy In The Time Of The Coronavirus Pandemic. CPD Blog. Retrieved from https://www.uscpublicdiplomacy.org/blog/digital-diplomacy-time-coronavirus pandemic

Coronavirus: anger in Germany at report Trump seeking exclusive vaccine deal. (2020, March 16). The Guardian. Retrieved from https://www.theguardian.com/world/2020/mar/16/not-for-sale-anger-in-germany-at-report-trump-seeking-exclusive-coronavirus-vaccine-deal.

Clarke, A. (2015). Business As Usual? An evaluation of British and Canadian digital diplomacy as policy change. In C. Bjola & M. Holmes (Eds.), Digital Diplomacy. Theory and Practice (pp.111-126). New York, United States: Routledge.

Dharossa, T and Rezasyah, T. (2020). Upaya Perlindungan WNI oleh Pemerintah Indonesia melalui Pendekatan Diplomasi Digital (2014-2019). Padjadjaran Journal of International Relations, 2 (1), 105-118. doi: 10.24198/padjir.v2i1.26055

Diplo. (2018). International seminar on digital diplomacy - Beyond social media. Retrieved October 15, 2020, https://www.diplomacy.edu/calendar/international-seminar-digital diplomacy-beyond-social-media

Duncombe, C. (2017). Twitter and transformative diplomacy: social media and Iran–US relations. International Affairs, 93 (3), 545–562. doi: 10.1093/ia/iix048

Federal Foreign Office. (2020, April 8). Video conference instead of government aircraft: diplomacy in the time of coronavirus. Retrieved from https://www.auswaertiges amt.de/en/aussenpolitik/europa/digitale-aussenpolitik- corona/2332720

Ferida, K. (2020, April 2). Dubes Havas: 21.000 WNI di Jerman aman dari Covid-19. Alinea.id. Retrieved from https://www.alinea.id/dunia/dubes-havas-21-000-wni-di jerman-aman-dari-covid-19-b1ZLi9sXW

Gloria. (2017, December 14). Popularitas Indonesia di Media Sosial Meningkat. Universitas Gadjah Mada. Retrieved from https://ugm.ac.id/id/berita/15365-popularitas indonesia-di-

media-sosial-meningkat

Haas, E. (1958). The Uniting of Europe: Political, Social and Economic Forces, 1950–1957. Notre Dame, United States: University of Notre Dame Press.

Halim, D. (2016, October, 9). Digital Diplomacy a New Way to Solve Problems: Foreign Minister. Jakarta Globe. Retrieved from https://jakartaglobe.id/news/digital diplomacy-new-way-solve-problems-foreign-minister/

Hanson, F. (2012). Baked in and wired: eDiplomacy@State. Washington, United States: Brookings Institution.

Hatta, M. (1953). Indonesia's Foreign Policy. Foreign Affairs, 31 (3), 441-452.

Herszenhorn, D. M. (2020, March 16). Coronavirus border controls imperil EU freedoms. Politico. Retrieved from https://www.politico.eu/article/coronavirus-border- controls imperil-eu-freedoms/

Hocking, B & Melissen, J. (2015). Diplomacy in the Digital Age. Clingendael Report. Retrieved October 16, 2020, from https://www.clingendael.org/sites/default/files/pdfs/Digital_Diplomacy_in_the_Di gital%20Age_Clingendael_July2015.pdf.

Holmes, M. (2015). Digital Diplomacy And International Change Management. In C. Bjola & M. Holmes (Eds.), Digital Diplomacy. Theory and Practice (pp.13-32). New York, United States: Routledge.

Indonesia in Hamburg. (2020, July 29). Mengingat naiknya kasus COVID di Jerman dan negara Eropa lainnya, kami menghimbau WNI dan diaspora di Hamburg, Bremen, Niedersachsen, & Schleswig-Holstein agar selalu waspada, menjaga kesehatan, dan mematuhi protokol kesehatan yg berlaku #staysafe #stayhealthy #inidiplomasi [Tweet]. Retrieved from https://twitter.com/KJRI_Hamburg/status/1288507980636446720

Indonesian Consulate General Frankfurt. (2020, June 10). KJRI Frankfurt fasilitasi repatriasi 13 org ABK WNI Kapal Ikan Koryo Maru di Bandara Frankfurt. Penerbangan dr Johannesburg-Jkt via Frankfurt & Doha. Selama masa Pandemi COVID19, KJRI Frankfurt telah fasilitasi kepulangan 1.042 org WNI, ABK & PMI kembali ke tanah air, 10.06.20. [Tweet]. Retrievedfrom https://twitter.com/kjrifrankfurt/status/1270788720543891464

Indonesian Consulate General Frankfurt. (2020, September 22). Tanpa prinsip multilateralism, negara yang kuat akan menguasai – negara yang kecil akan termarjinalisasi (mighty takes all) – Ret [Tweet]. Retrieved from https://twitter.com/Menlu_RI/status/1308209173478293505

Jönsson, C. & Hall, M (2005). The Essence of Diplomacy. (New York, United States: Palgrave Macmillan.

KBRI Berlin. (2020, April 17). Jika mengalami gejala Corona, ikuti juga informasi berikut [Down pointing backhand index]. Hubungi dinas kesehatan setempat [Hospital] atau segera menghubungi video call lewat hotline pada laman yang tersedia diatas. #inidiplomasi #kementerianluarnegeri #IndonesiaBerlin #kementeriankesehatan #ppijerman [Tweet]. Retrieved from https://twitter.com/BerlinKBRI/status/1251095785376227328

Kementerian Luar Negeri Republik Indonesia. (2017). Pernyataan Pers Tahunan Menteri Luar Negeri RI Tahun 2017. Retrieved from https://kemlu.go.id/portal/id/read/757/pidato/pernyataan-pers-tahunan-menteri luar-negeri-ri-tahun-2017

Kementerian Luar Negeri Republik Indonesia. (2020). Pernyataan Pers Tahunan Menteri Luar Negeri RI Tahun 2020. Retrieved from https://kemlu.go.id/portal/id/read/946/pidato/pernyataan-pers-tahunan-menteri luar-negeri-ri-tahun-2020

Kurbalija, J. (2020, March 6). Diplomacy goes virtual as the coronavirus goes viral. Diplo. Retrieved from https://www.diplomacy.edu/blog/diplomacy-goes-virtual coronavirus-goes-viral

Kurniawati, E., Rachmawati, I., & Dewi, M. A. (2020). @KemluRI :Diplomasi Publik Digital? Andalas Journal of International Studies, 9 (1), 83-99. https://doi.org/10.25077/ajis.9.1.83-99.2020

Liechtenstein, S. (2020, June 1). How COVID-19 Has Transformed Multilateral Diplomacy. World Politics Review. Retrieved from https://www.worldpoliticsreview.com/articles/28801/how-covid-19-has transformed-multilateral-diplomacy

Madu, L. (2018). Indonesia's Digital Diplomacy: Problems and Challenges. Jurnal Hubungan Internasional, 7 (1), 11-18. https://doi.org/10.18196/hi.71121

Melissen, J. (2013). Public diplomacy. In A. Cooper, J. Heine, R. Thakur (Eds.), The Oxford Handbook Of Modern Diplomacy (pp. 436–452). Oxford, United Kingdom: Oxford University Press.

Miller, P. D. (2020, March 25). Yes, Blame China for the Virus. Foreign Policy. Retrieved from https://foreignpolicy.com/2020/03/25/blame-china-and-xi- jinping-for-coronavirus pandemic/

MoFA Indonesia. (2020, February 2). #SahabatKemlu, saudara kita yg berada di Wuhan telah berhasil dipulangkan ke tanah air. Langkah kesehatan akan terus diterapkan untuk menjamin kesehatan semua pihak. #NegaraMelindungi #IniDiplomasi [Tweet]. Retrieved from https://twitter.com/Kemlu_RI/status/1223843117599576065

MoFA Indonesia. (2020, February 6). 1.Dlm kapasitas sbg Ketua Foreign Policy and Global Health (FPGH) 2020, Indonesia telah sampaikan joint statement atas nama 7 negara anggota FPGH ttg penanggulangan Novel Coronavirus dlm Sidang WHO Executive Board, 6 Februari 2020. #FPGH2020Indonesia @Kemlu_RI @KemenkesRI [Tweet]. Retrieved from https://twitter.com/Kemlu_RI/status/1225403888146108418

MoFA Indonesia. (2020, April 3). The @UN General Assembly has just passed Resolution "Global Solidarity to Fight COVID-19", initiated by Indonesia, together with [Flag of Ghana], [Flag of Liechtenstein], [Flag of Norway], [Flag of Singapore], [Flag of Switzerland]. 188 countries co-sponsored this resolution! #Solidarity is key during this

challenging time. [Tweet]. Retrieved from https://twitter.com/Kemlu_RI/status/1245880476348207106

MoFA Indonesia. (2020, April 18). #FMMarsudi @Menlu_RI on Ministerial Coordination Group on Covid-19 (ICG) [Tweet]. Retrieved from https://twitter.com/Kemlu_RI/status/1251367376966152192

MoFA Indonesia. (2020, May 22). 1. Atas inisiatif Indonesia, IORA selenggarakan Virtual Meeting Committee of Senior Officials (CSO)-Dialogue Partner Engagement on #COVID19: Responses, Cooperation & Partnerships, 21/5/2020. Delri dipimpin Dirjen Aspasaf didampingi wkl @KemenkesRI & @BNPB_Indonesia #IniDiplomasi [Tweet]. Retrieved

from https://twitter.com/Kemlu_RI/status/1263669082034851840

MoFA Indonesia. (2020, June 7). Berikut Perkembangan COVID-19 di Dunia & Pelindungan WNI per 07/06 pkl 08.00 WIB. Tmbhn WNI trknfrmasi #COVID19 di di & , sembuh di ,& , serta meninggal di . Total trknfrmasi COVID19 di luar negeri adlh 1010: 601 sembuh, 57 meninggal & 352 dlm perawatan. #NegaraMelindungi [Tweet]. Retrieved from https://twitter.com/Kemlu_RI/status/1269445740457156615

MoFA Indonesia. (2020, September 4). [Flag of Indonesia] tegaskan pentingnya kerja sama global pastikan akses setara & berkeadilan thdp vaksin saat Foreign Policy & Global Health Ministers' Virtual Meeting (03/09). [Flag of Indonesia] tekankan pentingnya sistem kesehatan global jg nasional yg kuat. Selengkapnya http://kem.lu/17c #IniDiplomasi [Tweet]. Retrieved from https://twitter.com/Kemlu_RI/status/1301778541655195648

Pinandita, A. (2020, April 4). Indonesia calls for 'collective response' as UN passes COVID 19 resolution. The Jakarta Post. Retrieved from https://www.thejakartapost.com/news/2020/04/04/indonesia-calls-for-collective response-as-un-passes-covid-19-resolution.html

Prabandari, A. and Rahyaputra, V. (2018, January 16). What is digital diplomacy and why Indonesia should embrace it? The Conversation. Retrieved from https://theconversation.com/what-is-digital-diplomacy-and-why-indonesia-should embrace-it-89327

Sharp, P. (2009). Diplomatic Theory of International Relations. Cambridge: Cambridge University Press.

Sinha, A. (2018). Building a Theory of Change in International Relations: Pathways of Disruptive and Incremental Change in World Politics. International Studies Review 20, 195-203.

Sinaga, Y. A. (2019, September 10). Menlu: diplomasi digital alat untuk perlindungan warga. Antaranews.com. Retrieved from https://www.antaranews.com/berita/1054096/menlu-diplomasi-digital-alat-untuk perlindungan-warga

Triwibowo, A. (2020). Diplomacy and Covid-19: A Reflection. Jurnal Ilmiah Hubungan Internasional, 103-112.

Triwibowo, A. & Martha, J. (2017, August 25). Digital diplomacy: Learn from neighbors. The Jakarta Post, Retrieved from https://www.thejakartapost.com/academia/2017/08/25/digital-diplomacy-learn from-neighbors.html

Twiplomacy. (2018). Twiplomacy Study 2018. Retrieved from https://twiplomacy.com/blog/twiplomacy-study-2018/

Twiplomacy. (2020). Twiplomacy Study 2020. Retrieved from https://twiplomacy.com/blog/twiplomacy-study-2020/

Widiarini, A. D. (2019, September 11). Menlu Retno: Ini Manfaat Diplomasi Digital bagi Indonesia. Kompas.com. Retrieved from https://internasional.kompas.com/read/2019/09/11/17591231/menlu-retno-ini manfaat-diplomasi-digital-bagi-indonesia

Woods, N. & Batniji, R. (2020, April 11). There's only one option for a global coronavirus exit strategy. World Economic Forum. Retrieved from https://www.weforum.org/agenda/2020/04/there-s-only-one-option-for-a-global coronavirus-exit-strategy/

UNCTAD. (2020, April 6). Coronavirus reveals need to bridge the digital divide. Retrieved from https://unctad.org/news/coronavirus-reveals-need-bridge-digital-divide

Qatar and COVID-19: Navigating the Global Solidarity to Combat Pandemic Through Global Health Policy

Hree Dharma Santhi Putri Samudra[1], Ichlasul Amal[2], Muhammad Nauval El Ghifari[3]
Department of International Relations, Universitas Padjadjaran
[1]hds18001@mail.unpad.ac.id, [2]ichlasul18001@mail.unpad.ac.id, 3muhammad18422@mail.unpad.ac.id

Abstract

WHO declaration of COVID-19 as a global pandemic indicates that the impact of this pandemic is so widespread throughout the world. Nine months after discovering the first case of this pandemic, the world continues to focus on the health aspect while maximizing each country's domestic segment. However, there are countries still mired in difficulties in the domestic realm, even more chronically than how it was before. Criticisms of the need for global solidarity by scholars and various international organizations in dealing with these pandemic problems mount. It is highly expected that global solidarity can help the North and South countries to cooperate in order to combat the pandemic effectively. Authors argue that Qatar, which has succeeded in overcoming the problem of the COVID-19 pandemic domestically and playing a significant role and contribution in the WHO or other global forum, is one of the possibilities to take the leading position. By using three possible approaches, namely the practical global solidarity, global health policy and global health governance, this article is intended to identify Qatar's feasibility as the main actor that can initiate and navigate global solidarity to combat COVID-19. Through these three approaches, the authors found out that Qatar deserves to be the main actor in initiating global solidarity in this pandemic. This article will also be supported by the literature/document study methods, using secondary data such as books, journal articles and newspapers related to Qatar's leadership in the health sector, as well as its relations with North-South countries.

Keywords: COVID-19, Global Health Policy, Global Solidarity, Global North Governance, Qatar

Introduction

After 100 years of the end of the Spanish flu outbreak, the world faced another new challenge in December 2019, which was reported from Wuhan, China, when a group of patients suffering from pneumonia known as a new coronavirus type SARS-CoV-2 or preferably called as COVID-19. As the World Health Organization (WHO) says, the world today has been challenged by the virus. This proves that humans in their experience have historically been hit by several pandemic diseases, which have caused the death of hundreds or even millions of people in the world. Regarding the emergence of COVID-19, initially, this virus' cause allegedly originated from animal transmission to humans, namely after a group of people spent their time visiting one of the wild animal markets in Wuhan, China. This condition is getting worse when the spread occurs so massively in Wuhan and even throughout China.

As a country with such a fast level of mobilization, the potential for a wider spread of this virus is remarkable. After the WHO office in China received the symptom report on December 31, 2019, the virus had moved from its home region to places like the United States and Europe in less

than a month. Just like other infectious diseases phenomena but in a different version, COVID-19 is a vicious virus. According to the data the authors obtained, until October 13, 2020, at least more than 38.1 million cases had been recorded along with 1.8 million total deaths worldwide (John Hopkins Coronavirus Center, 2020). After the crisis hit, which coincided with the rapid spread of the virus, the Chinese authorities swiftly made rigorous policies, including closing all mobilization taps in Wuhan and other major cities in the country. China has also made it mandatory to use face masks and a quarantine process. However, the virus that has spread to the United States, Europe and Asian countries persists as the next cause of concern because its massive spread has finally reached the Middle East region.

Right now, every country is affected by the COVID-19 pandemic which attacks every aspect. If not handled effectively, the impact of a pandemic will be a big problem. Various countries (either global North or South) also have advantages and disadvantages in having the capacity of handling a pandemic, starting from the lack of health infrastructure, socio-economic inequality and even a stagnant response in a country's situation. For example, the net approval rating data published by Statista illustrates that Spain has the worst response rate, which is -4%. Meanwhile, France -9%, United States -12%, Mexico -15% and finally the United Kingdom has a -15% response rate (Armstrong, 2020). As a phenomenon, this pandemic can be seen as a "game-changer", which means it affects every aspect of human life. This also affects countries in carrying out their activities and behavior, as well as being a challenge for countries in facing a pandemic.

In the book Man, the State, and War, Waltz (1959) argued that the world was characterized by anarchy, in which there was no comprehensive world government. Therefore, countries must fight alone against threats, including in combating the COVID-19. However, as stated by Keohane & Nye (1977), several threats can create strength, thus the demand for cooperation is born because a threat and problem cannot be solved by the state alone. The interdependence between trade and travel creates mutual vulnerability to coronavirus and intensifies the need for cooperation between countries. In such an event, cooperation between countries and strategic decisions are needed, quickly and precisely, to be made possible through global health governance.

Reflecting on global health inequalities in handling the pandemic and considering the growing problems, we believe this calls for an effective global health governance that not only accommodates global cooperation, but also global solidarity. The urgency to collaborate and increase global solidarity has often been raised by academics and officials from international organizations, such as Charlotte Petri Gornitzka (Assistant Secretary General and Deputy Executive Director of UNICEF), Robert Piper (Assistant Secretary General and Director of the Office for Development Coordination at the United Nations) and Ulrika Modéer (Assistant Administrator for UNDP) who jointly stated in the opinion column on the IPSNews media, that with strong solidarity and effective cooperation, the international community will not only tackle COVID-19 but also raise a warning alarm to rebuild a better global health system, a more inclusive economy and sustainable (Gornitzka, C.,Piper, R.,& U, Modéer, 2020).

The global voice of the need for global solidarity in response to the pandemic has actually been confirmed by previous studies. Tosam et al. (2017), in their research Global health inequalities

and the need for solidarity: a view from the Global South, emphasized that in principle, the global solidarity approach is an alternative approach to respond to the pandemic and other global health issues, because in this case, the global health injustice approach has been proven inadequate in addressing current global health inequalities. Therefore, global solidarity is needed because it is a value that recognizes weakness, self-sufficiency and interdependence between states (Tosam, et al., 2017). However, to actualize a more effective global health management, it requires the formulation and implementation of a good and comprehensive global health policy. Martin and Stuckler (2008) argued that defining a global health policy is not easy, because in principle, it can be metaphorized into five things.

In line with the explanation above, Qatar, as one of Middle East countries, was also hit by the COVID-19 pandemic. An epidemic like this is not Qatar's first experience. Qatar also experienced the Middle East Respiratory Syndrome (MERS) or the MERS coronavirus (MERS-Cov) in 2012. In response to this, the authors assume that Qatar did many evaluations related to its policies in overcoming MERS-Cov. Therefore, with the comparison of other countries in the region, the authors found that Qatar can become a leading actor in its region and beyond, even being the world-leading actor in the pandemic. One proof is its investment in health realized in the Qatar National Preparedness and Response Plan for Communicable Diseases (RPCD) initiated by the country's Ministry of Health. In this response plan, the government seeks to create systems, arrangements and schemes to help Qatar solve this problem. This is evident when compared to other countries. That way, this can also be the example of Qatar's existence in building global solidarity for common multilateral interest.
Looking at the need for leading actors in crafting global solidarity to combat the pandemic, through the explanation above, the authors argue that Qatar can become a leading actor capable of navigating the efforts to build global solidarity in handling COVID-19. As for actualizing these arguments, the authors use Harmon's principle of solidarity to identify and realize the values of global solidarity into practical forms in the context of global health policy (Harmon, 2011), as well as Stucker & Mckee's (2008) view in the metaphor of global health policy and global health governance to revitalize Qatar's position in today's global health world.

Methods

This research is based on case studies using qualitative research methods. Furthermore, this research is interpretive, hence the authors use secondary data collection techniques from indirect sources. Accordingly, in the data collection process, the authors use internet-based research techniques that focus on similar books or journals, as well as articles on leading news sites. Secondary data collection via the internet aims to test the validity of the data and match the contents with the facts found.

Literature Review

Defining and Actualizing Global Solidarity

The concept of solidarity in scientific discourse is a concept that tends to be debated. Fundamentally, it is rooted in many cultural and religious values. Harmon (2011), himself, explains

that the religious tradition views solidarity as: (1) brotherhood, group, solidarity and linkages; (2) mutual respect/love and reciprocity; (3) kind, caring and fair to others. In the political discourse, solidarity is considered a concept in which a person carries out responsibility in proportion to the rights received. In the context of international relations, solidarity is within the framework of a social approach which is more likely to be studied in the English School and neo-Gramscian IR/IPE (Weber, 2007). The English School sees solidarity as generated and mediated by the state and articulated to the extent that common ideals enable the political system to be institutionalized outside the logic of self-help in anarchist circumstances. Meanwhile, neo-Gramscian considers solidarity as a condition that arises from the upheaval of a group's social-political level.

However, the definitions above do not explain in detail how solidarity in a global context can be practiced. The bioethics literature offers an alternative view that can provide an overview of the practical form of global solidarity. In the context of global health, according to Prainsack and Buyx (2012) in Johnson (2020) writing, solidarity is normatively seen as an effort to provide assistance to poor countries. However, Gostin et al (2012) opposes and argues that solidarity is built on a sense of responsibility and duty. In this regard, Harmon (2006) postulates a practical framework of global solidarity in the form of shared duties, which are divided into five: (1) duty to research; (2) duty to capacity-build; (3) duty to share; (4) duty to account; (5) duty to participate. The framework is used to realize (new) solidarity ethics in the formation of global health policies. Therefore, reflecting on the need for global solidarity to combat the COVID-19 pandemic, the authors will use Harmon's practical solidarity approach (2006) to analyze Qatar's global health policy in navigating global solidarity.

Global Health Policy

In this article, the authors emphasize the existence of the global health policy concept as part of a comprehensive writing in this article. Brown (2012) provides a definition of global health policy as a concept in which fundamental questions such as 'how, when and where' occur to ensure that the global health policy can be distributed fairly and equitably. Based on the definition presented by Brown (2012), Brown, et al. (2014) also say that global health policy refers more to statements related to various achievements, objectives and intentions that can create a framework for various activities that refer to global health. Furthermore, Brown, et al. (2014) mentioned which actors can be involved in this concept. They said that these actors can come from individuals, organizations and networks related to these two actors. Thus, the authors can conclude that global health policy is so political and complex because to make such policies, it is very important for policy makers to involve the positions, interests and goals of the related actors as described by Brown (2012).

In this article, the authors refer to the ideas put forward by David Stucker & Martin McKee (2008) regarding 5 (five) metaphors in global health policy. Among these are: (1) global health as a foreign policy; (2) global health as security; (3) global health as a charity; (4) global health as an investment; and finally (5) global health as public health. Meanwhile, the authors choose 2 (two) of these metaphors as references in writing this article, namely in the fields of foreign policy and public health. This reason is based on the capabilities of Qatar, which has been previously described as a leading actor. Thus, Qatar needs a global health outlook for its international mission. Meanwhile, the

second metaphor that describes public health has been carried out in such a way by the country in the case of the COVID-19 pandemic which will then be discussed in the next discussion.

Global Health Governance

According to Kickbusch (2006), global health refers to a health problem that transcends national and governmental boundaries and calls for action upon global forces that determine public health. In this definition, he explains that health-related problems can transcend transnational boundaries, even globally. Countries must prepare and address the problem collectively and effectively. Thus, the initiatives of various countries in overcoming this global health problem can be channeled and resolved into a comprehensive and effective governance as well, through global health governance. Fidler (2010) defines global health governance as the use of formal and informal institutions, rules and processes by states, intergovernmental organizations and non-state actors. He added that addressing global health challenges requires collective action across borders to deal with them effectively. In relation to the case of the COVID-19 pandemic, the global health system approach can be a platform and solution for countries to deal with the pandemic collectively. Then, if the global health system has worked effectively, every country will get the benefits of protecting the right to health for its people.

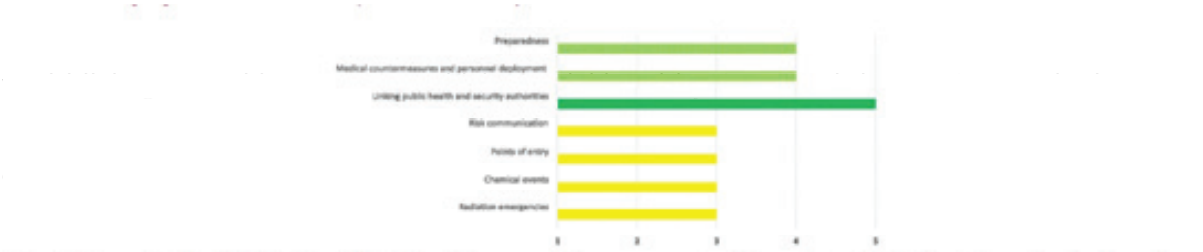
Looking at the Past: Qatar Response to MERS and Resilience Building to COVID-19

Before the COVID-19 pandemic spread globally, Qatar had faced an epidemic called MERS (Middle East Respiratory Syndrome Coronavirus). The emergence of the MERS-CoV virus in 2012 raised concerns about the spread of the infection globally. The news of this virus spread until May 2013, the Director-General of the World Health Organization (WHO) Margaret Chan warned that the virus could be a potential threat (WHO, 2013). It was known that this case had been directly or indirectly linked to the Arabian Peninsula countries from September 2012 until the time the case report was finalized in October 2017. WHO has received notifications of 2090 laboratory-confirmed cases of MERS-CoV from 27 countries, including 730 deaths. Between 2012 and 2017, Qatar reported 19 cases of MERS-CoV, including 7 deaths. A health crisis, such as the MERS-CoV that Qatar has experienced, reflected what should be developed for health governance to build resilience. Therefore, the authors use the Harmon (2011) approach, which outlines the aspects needed to build solidarity in global health policy in response to COVID-19.

In this part, the authors will analyze Harmon's (2011) solidarity principle, especially regarding the duty to research and duty to capacity-build. Harmon (2011) also explains that the duty to research is to pursue scientific-medical research and knowledge to advance humankind. The realization of this duty to research refers to solidarity, which leads to health research orientation. Meanwhile, the duty to capacity-build refers to the real conditions that reveal the inequality and deficit in the health sector between developed-developing countries (e.g. North-South) that have the potential to harm humanity. Therefore, Harmon (2011) emphasizes the duty to capacity-build as building quality and capacity in reviewing research implementation. In practice, capacity-building will focus on collaboration between capable and emerging countries so that in the next scheme, a country will

be weighed by the benefits or risks for the regional or the international community.

In the context of the MERS-CoV epidemic, Raj et al. (2014) stated that epidemic transmission resulted from infection in camels transmitted to humans. When dealing with this outbreak, Qatar made decisions on public health actions to take in emergencies based on the National Preparedness and Response Preparedness (EPR) plan, guided by the International Health Regulations and the One Health Road Map approach (IHR, 2005). Various health crises, such as the MERS-Cov epidemic that Qatar has been through, seem to have both impact and experience to reflect more effective health governance. Referring to Qatar's experience of health governance in responding to MERS-Cov, International Health Regulations and assessments by WHO regarding Qatar's response performance is the foundation for building Qatar's capacity to face another pandemic. The joint assessment conducted by the WHO and Qatar consultation team called the Joint External Evaluation (JEE) was also carried out using IHR parameters. JEE is a data collection instrument covering 19 technical areas categorized into three main components. The three components consist of prevention, detection and response. In JEE, each technical area has many questions that will help assessors determine an appropriate score (WHO, 2016). According to Jonas (2013), JEE was developed under the Global Health Security Agenda (GHSA), which represents the international health community's reaction to an increased incidence of emerging diseases and viruses that can potentially re-emerge.



Score of Qatar against the IHR Joint External Evaluation: Response and others components 1 = No capacity, 2 = Limited capacity, 3 = Developed capacity, 4 = Demonstrated capacity, 5 = Sustainable capacity Data reproducible from JEE report (http://apps.who.int/iris/bitstream/10665/254509/1/WHO-WHE-CPI-2017.6-eng.pdf?ua=1)

Source: (WHO, 2017) , from (http://apps.who.int/iris/bitstream/10665/254509/1/WHO-WHE-CPI-2017.6-eng.pdf?ua=1)

Regarding handling within the JEE work scope, the data describes preparedness, emergency response operations, linking public health and safety, the public, medical precautions and personnel deployment and risk communication. Overall, the data illustrates that Qatar has performed well in emergency preparedness and response, where the scores generally range between 4 and 5. Considering Qatar's remarkable response to MERS-CoV which has been carried out by various Qatari government agencies and WHO as an assessor, the application of duty to capacity-build to Qatar's global health policy has led Qatar to be more resilient in facing the challenges of the next epidemic.

The COVID-19 pandemic, a global shock, will be a challenge for Qatar's resilience-building to global health issues. Reflecting on past events, Qatar has been more prepared to face the next pandemic. This could be shown by the realization of the Harmon's solidarity principle in duty to

research and duty to capacity-build in the formulation of Qatar's global health policy to combat the pandemic through COVID-19 Qatar National Response Plan. Qatar's massive and measured scheme in dealing with the COVID-19 pandemic has shown resilience, especially in implementing the various tasks, functions and priorities that have been distributed in various Qatari government agencies or institutions. This preparedness and institutional capacity-building are also supported by Qatar's efforts to prepare some new facilities, such as field hospitals, isolation areas and quarantine. Not only that, the expansion of testing facilities, distribution sites for sanitizers and masks for the public and Personal Protection Equipment (PPE) for medical and paramedical personnel have been carried out for several months.

These efforts have led Qatar to successfully handle COVID-19. Evidence shows that Qatar has attracted International Development Partners (IDPs) and country leaders after COVID-19, which attacks worldwide economic and health aspects (Rahaman et al., 2020). According to a special report written by Rahaman et al. (2020), Qatar is praised by the world for its comprehensive efforts to control COVID-19. What has caught the eye is that Qatar's death rate so far is only 190, which accounts for only 0.17% of the total positive cases. This is one of the lowest ratios in the world. Qatar has become one of the leading countries in providing excellent medical care to COVID-19 patients, with its cure rate (97.09%) capturing worldwide attention, as has its low mortality rate. Of course, this success explicitly shows Qatar's increased resilience in the context of handling the COVID-19 pandemic. However, reflecting on the unequal conditions of handling global health (COVID-19) worldwide, especially in the global south countries, of course, the application of the principle of solidarity in global health policy stated by Harmon (2006) is not only about duty to research and duty to capacity-build, but also it must cover aspects of cooperation and the need for a reciprocal response from the international community to COVID-19, which will be further explained in the next discussion.

Solidarity in the Making: Qatar's Openness in Governance and Global Health Policy

Looking at the previous part, to this day, all countries in the world are still facing a critical situation caused by COVID-19. The spread of the virus to 5 continents, such as Asia, Europe, America, Oceania, and Africa, has caused various countries to slump in overcoming their domestic problems. As in the previous discussion, where the authors tried to examine Qatar's domestic conditions when the MERS and COVID-19 viruses spread, it shows that it has been busy with domestic challenges to overcome these 2 significant crises. Reflecting the subtitle in this discussion, thus the authors will try to overview the two viruses through another shared duty proposed by Harmon (2011), which is duty to share. The principle of duty to share is defined as a form of contextual sharing of knowledge, biomedical progress, and finance to address global health problems. In this context, Qatar has shown implementation of this principle, both in response to MERS and COVID-19 which will be explained further below.

The MERS caused by the camel plague is presumably deadly. However, this virus did not transform into a more virulent virus because the only massive spread occurred in the Middle East. In contrast, COVID-19, which is very dangerous and still continues to mutate until today, is claimed by the World Health Organization (WHO) as a pandemic. As a country that is also facing these problems,

Qatar is quite overwhelmed. However, Qatar, as a small and visionary country, is able to take lessons from the previous epidemic. Qatar managed to perform well by executing its maximum duty to share. This is evidenced by a study written by Farag et al. (2019), in which Qatar, when compared to other countries in the Middle East region, tends to be more prepared because of the presence of the Roadmap of One Health, which is so comprehensive that it can help the country improve leadership and good coordination through the transfer of knowledge in local and regional levels. Not only that, Farag et al. (2019) also explained that this roadmap contained investigation and surveillance in handling epidemics so that its presence is genuinely mature and can prevent new diseases such as COVID-19 because of its visionary scheme. This is a real execution of what Harmon (2006) said, namely, duty to share.

With Qatar's ability to carry out these principles, this is what the authors call the real execution of the application of the principle of solidarity (duty to share) in its global health policy. In the context of handling COVID-19 itself, from the domestic link, it was stated that Qatar had also carried out donor activities to tackle COVID-19 globally. Based on the facts by Relief Web (2020), the country has assisted more than 78 countries and international organizations such as WHO, GAVI, UNICEF, and UNHCR in the form of financing and implementation of research knowledge related to COVID-19. Furthermore, Qatar's state-owned airline, Qatar Airways, has also contributed to transporting residents affected by the pandemic to safer regions and countries, in addition to its role as an agent for sending financial aid. The country is also very active in designing vaccines, shown by being part of the COVID-19 Vaccine Global Access Facility (COVAX) (Qatar MoFA, 2020). Qatar's seriousness in living up to these principles is what the authors' review as a manifestation of global solidarity as an inseparable part of a crisis. Using Harmon's approach of solidarity (2011), the implementation of Qatar's duty to share has made a considerable contribution to these countries and also initiated a solidarity movement, especially in handling the COVID-19 pandemic.

Moreover, it has been explained in detail regarding the humanitarian donation for this pandemic crisis by the Ministry of Foreign Affairs of Qatar (2020) that the 78 countries included in the list include countries in the Middle East such as Jordan, Lebanon, Palestine, Iran, Iraq, and Syria. Apart from countries in those regions, Qatar is also seen to focus its attention on other global south regions such as Africa through Somalia, Tunisia, and South Sudan, by either official government assistance or NGOs related to Qatar (e.g., QRCS). Qatar has also assisted countries in Europe, such as France and Italy. Referring to the statement by Brown (2012) regarding the global health policy, which is aimed at making the health policy distributed so fairly and equitably, this implies Qatar's effort in making a comprehensive health policy that does not only apply to its country, but also to other countries. Not only the duty to share, Qatar's formulation of global health policy to combat the pandemic also applies the principle of duty to account. According to Harmon (2011), the duty to account is essentially a principle of solidarity instilled in a country's global health policy that prioritizes the values of openness in handling a health problem. In this context, the application of these principles can be seen in Qatar's involvement in the WHO Solidarity Trial, which aims to exchange rigorous information on handling COVID-19 and accountable COVID-19 data collection protocols (Qatar MoFA, 2020). Furthermore, seen from Global Health Policy as Foreign Policy through

David Stucker & Martin Mckee (2008), the application of GHP as FP in Qatar is intended to build and enhance global solidarity.

In international relations, the essence of global solidarity, which is formed by the presence of this global health policy, is part of a state actor's soft power. In this case, Joseph Nye (2009), in his article entitled Soft Power: The Means to Success in World Politics, defines soft power as an ability that is used by an actor to influence others without coercion. Boateng (2013) explains that Qatar's soft power is, of course, foreign aid, as the authors have explained, namely foreign aid related to the COVID-19 crisis. This is also reinforced by the Charities Aid Foundation (2013) data which showed Qatar in the top 20 when calculated based on the percentage of donations in the Middle East and Arab countries.

With Qatar being so excellent in accelerating its ability to share and to account from Harmon's approach (2011), the authors can conclude that this is what is called the country's soft power. Thus, this indicates that Qatar's presence to undergo soft power in donations to various countries has a high possibility of joining into one camp in the future. Even so, this is what makes the authors strongly believe that Qatar has high potential to become a leading actor in promoting global solidarity, as the country's global health policy in responding to COVID-19 has been formulated in such a way that it could take advantage of its strong inner and outer potential which can influence other state actors based on the principle of duty to share postulated by Harmon (2011). Nevertheless, of course, the application of the principles of solidarity to share and to account are not only limited to sharing information and openness but further, it can maximize the application of the fifth principle of solidarity in actualizing and navigating global solidarity in handling COVID-19, namely the duty to participate, which will be explained in the next discussion.

Engaging Stakeholders and Navigating Solidarity: Qatar and Global Health Governance

In the previous explanation, we can see that Qatar has implemented solidarity practices in handling COVID-19 globally through the application of the principle of duty to share and to account in its global health policy. Of course, Qatar's policy practices have initiated the building of global solidarity in handling COVID-19. However, efforts to actualize global solidarity will not run swiftly without other actors' support and equal actions. So, the next step for a country to actualize the practice of global solidarity is through navigating and leading the initiative by applying another principle of solidarity, which is the duty to participate in its global health policy. The essence of a sense to participate (duty to participate) is applying actions that can increase the individual's sense of contributing to the search for knowledge that will and can be used for oneself and others (Harmon, 2011). However, it should be noted that the value of solidarity does not negate individual rights or personal interests. Instead, it acknowledges that individual freedom requires reciprocal cooperation to others to enjoy the freedom, or in another sense, acts of solidarity are our way of encouraging, motivating others to pursue common interests that intersect with personal interest (Harmon, 2011). This means that the application of the duty to participate also requires a platform that can encourage other actors to implement similar policies.

In this context, global health governance, in this case, can become a platform for Qatar to

encourage other countries to formulate global health policies (both in terms of Public Health and Foreign Policy), which Qatar has applied to prevent the spread of COVID-19, both in the domestic and international environment. As part of global south countries, reflecting on the conditions in the majority of south countries as well as the reality of global health inequality in handling COVID-19 (Lapidor, 2020; Al-Ali, 2020), Qatar in the General Assembly held by the UN on September, through his emir, Tamim Bin Hamad Al-Thani, said that the emergence of the COVID-19 pandemic was a wake-up call or a reminder for countries to increase multilateral cooperation in responding to the impact of the epidemic, climate change and poverty (UN GA, 2020). He also stated that his government has actively taken preventive measures to protect its citizens and has provided assistance to more than 60 countries and 5 international organizations (UNGA, 2020). More than that, Qatar's existence in implementing the principle of solidarity duty to participate in global health governance can be reflected in its involvement in the 13th Ministerial Meeting of the Global Governance Group (3G), which links dialogue with the Tripartite G20 Committee State to discuss handling of COVID-19. In the forum, the Deputy Prime Minister and Minister of Foreign Affairs of Qatar, Sheikh Mohamed bin Abdulrahman al-Thani, stated that global governance required an ongoing commitment to the principles of international law and requirements related to the development of friendly relations between countries based on the principles of equal sovereignty, peaceful coexistence, pluralism and international-regional cooperation (MENA FN, 2020). He also emphasized that cooperation between the United Nations, the G20 group and other global governance groups was crucial and fundamental in the search for practical cooperation in dealing with challenges in the world today (reg. COV-19). Seeing the narrative built in the UN General Assembly related to "None of us Safe Unless Everyone is Safe," Sheikh Mohammed emphasized that the impact of the COVID-19 pandemic itself can only be handled by increasing response and coordination of multilateral cooperation at an unprecedented level (MENA FN, 2020). Therefore, he also emphasized that this called for an increase in international duty to prevent, detect and respond to infectious diseases such as COVID-19

The application of the principle of solidarity to participate in Qatar's global health policy to global health governance is not limited to speeches and encouragement in certain forums. It is also manifested by establishing the Group of Friends of Solidarity for Global Health Security. Reflecting on the world conditions affected by COVID-19, handling it requires an unprecedented level of global solidarity. The United Nations, through given mandates to several countries that have responded well to the COVID-19 pandemic, which are Canada, Denmark, Korea, Sierra Leone, and Qatar, established the Friends of Solidarity for Global Health Security (UNGA, 2020). It aims to provide a platform for UN members interested in sharing their views regarding the effective handling and response to COVID-19 and other challenges that are threatened by global health security. Due to the highlight that COVID-19 poses social and economic problems, this initiative will be implemented through various forms of multilateral cooperation (UN GA, 2020; WGOQATAR, 2020). Furthermore, the work of this group also focuses on the main threats posed by the epidemic to international peace and security and calls upon the UN to become a major player in stimulating and coordinating a strong global response to the pandemic while emphasizing the urgency of international cooperation with action-oriented to global health policies for all UN members (WGOQATAR, 2020). As one of the

founders, Qatar has committed to making this platform the main place for sharing views regarding implementing an effective response to COVID-19 and declaring Qatar's involvement in the initiative to increase collective response and solidarity regarding handling COVID-19. 19 (WGOQATAR, 2020; Qatar MoFa, 2020). Therefore, Qatar can participate and act as a bridge between the Global North and South countries to find solutions for more effective handling of COVID-19.

However, Qatar also faces obstacles in its efforts to build regional cooperation. As a country that is currently experiencing a blockade from its neighboring countries (the result of the diplomatic crisis that occurred in 2017), this does not neglect Qatar's efforts to participate in providing an international response to the COVID-19 pandemic. This can be seen in the article by Rossi and Kabbani (2020), which confirms that Qatar, together with other GCC countries, has established a COVID-19 response network to maintain food supplies in the region. This collaboration illustrates that the conflicting countries have not closed themselves off and decided for a while to set aside their countries' interests for the sake of more significant common interests (Qatar MoFA, 2020; Rossi & Kabbani, 2020).

Conclusion

By the explanation above, it can be concluded that the narration of global solidarity proclaimed by Qatar is not only a political practice. Qatar's global policy formulation, which is analyzed through the Harmon approach, actually (in handling COVID-19) implements the values of solidarity. The practical account of solidarity that Harmon postulates lies in the implementation of the shared duty, which are duty to research, duty to capacity-build, duty to share, duty to account and duty to participate. Therefore, Qatar's efforts to provide the best response in handling COVID-19 globally place the country in a capable position to navigate-lead the global solidarity that is being voiced by various world leaders today. This can be reflected in Qatar's various efforts in conducting research and capacity-building to be more prepared for the pandemic, as well as efforts to reduce inequality in handling COVID-19 through disclosure of information and donations and Qatar's participation to encourage other parties to adopt a similar policy in global health governance forums. However, the authors do not deny that Qatar's current regional political conditions can, one day, hinder Qatar's efforts to combat COVID-19 through global solidarity. However, the most important thing right now is to put aside individual interest and compromise for each stakeholder in North-South to pursue common interest, which is combating COVID-19 globally.

Bibliography

Books

Brown, G. W., Yamey, G., & Wamala, S. (2014). The handbook of global health policy. New Jersey: John Wiley & Sons.

Corrigan, O. (2004). Genetic databases. London: Routledge.

Keohane, R. O., & Nye, J. S. (1977). Power and interdependence: World politics in transition. Boston: Little, Brown.

Nye Jr, J. S. (2009). Soft Power: The Means To Success In World Politics. Hachette UK.

Waltz, K. (1959). Man, the state and war. New York: Columbia University Press.

Electronic Journals Articles

Al-Ali, N. (2020). Covid-19 and feminism in the Global South: Challenges, initiatives and dilemmas. European Journal of Women's Studies, 27(4), 333-347. doi: 10.1177%2F1350506820943617

Bala, M. O., Chehab, M. A., & Selim, N. A. A. (2017). Qatar steps up to Global Health security: a reflection on the joint external evaluation, 2016. Global health research and policy, 2(1), 1-5. doi: 10.5339/qfarc.2018.HBPD554

Brown, G. (2012). Distributing who gets what and why: four normative approaches to global health governance. Global Policy 3(3), 292–302. doi:10.1111/j.1758-5899.2012.00180.x

Farag, E., Nour, M., Islam, M. M., Mustafa, A., Khalid, M., Sikkema, R. S., & Elkholy, A. (2019). Qatar experience on One Health approach for middle-east respiratory syndrome coronavirus, 2012–2017: A viewpoint. One Health, 7. doi: 10.1016/j.onehlt.2019.100090

Gostin, L. O., Heywood, M., Ooms, G., Grover, A., Røttingen, J. A., & Chenguang, W. (2010). National and global responsibilities for health. Bulletin of the World Health Organization, 88, 719-719a. doi:10.2471/BLT.10.082636

Harmon, S. H. (2006). Solidarity: a (new) ethic for global health policy. Health Care Analysis, 14(4), 215-236. doi:10.1007/s10728-006-0030-8

Johnson, S. B. (2020). Advancing Global Health Equity in the COVID-19 Response: Beyond Solidarity. Journal of Bioethical Inquiry, 1-5. doi:10.1007/s11673-020-10008-9

Kickbusch, I. (2006). The need for a European Strategy on Global Health. Scandinavian Journal of Public Health, 34(6), 561-565. doi: 10.1080/14034940600973059

Prainsack, B., & Buyx, A. (2012). Solidarity in contemporary bioethics–towards a new approach. Bioethics, 26(7), 343-350. doi: 10.1111/j.1467-8519.2012.01987.x

Raj, V. S., Farag, E. A., Reusken, C. B., Lamers, M. M., Pas, S. D., Voermans, J., Smits, S. L., Osterhaus, A. D., Al-Mawlawi, N., Al-Romaihi, H. E., AlHajri, M. M., El-Sayed, A. M., Mohran, K. A., Ghobashy, H., Alhajri, F., Al-Thani, M., Al-Marri, S. A., El-Maghraby, M. M., Koopmans, M. P., & Haagmans, B. L. (2014). Isolation of MERS coronavirus from a dromedary camel, Qatar, 2014. Emerging infectious diseases, 20(8), 1339–1342 doi: 10.3201/eid2008.140663

Stuckler, D., & McKee, M. (2008). Five metaphors about global-health policy. The Lancet, 372(9633), 95-97. doi:10.1016/S0140-6736(08)61013-2

Tosam, M. J., Chi, P. C., Munung, N. S., OukemBoyer, O. O. M., & Tangwa, G. B. (2018). Global health inequalities and the need for solidarity: A view from the Global South. Developing world bioethics, 18(3), 241-249. doi: 10.1111/dewb.12182

Weber, M. (2007). The concept of solidarity in the study of world politics: towards a critical theoretic understanding. Review of International Studies, 693-713. doi: 10.1017/S0260210507007735

Online Articles

Armstrong, M. (2020). Infographic: The Best and Worst Rated National COVID-19 Responses. Retrieved from https://www.statista.com/chart/21928/approval-ratings-national-

covid-19-responses/

Lapidor, E. (2020, July 23). Out of the Spotlight: COVID-19 and Global South. Just Security. Retrieved from https://www.justsecurity.org/71570/out-of-the-spotlight-covid-19-and-the-global-south/

Fidler, D. (2010). The Challenges of Global Health Governance. Retrieved 19 October 2020, from https://www.cfr.org/report/challenges-global-health-governance

Gornitzka, C., Piper, R., & U, Modéer. (2020). Global Solidarity & Effective Cooperation in The Face Of COVID-19 | Inter Press Service. [online] Ipsnews.net. Retrieved from <http://www.ipsnews.net/2020/06/global-solidarity-effective-cooperation-face-covid-19/>

Online Newspapers

CGTN. (2020). Global think tanks call for scientific and economic cooperation in COVID-19 fight. Retrieved 17 October 2020, from https://news.cgtn.com/news/2020-06-11/Global-think-tanks-call-for-cooperation-in-COVID-19-fight-ReCezjAIKY/index.html

China Daily. (2020). Experts: Global solidarity needed to fight COVID-19, economic slowdown. Retrieved 17 October 2020, from https://global.chinadaily.com.cn/a/202007/30/WS5f2264f4a31083481725d25e_2.html

MENA FN. (2020, September 23). Qatar- Global governance needs continuous commitment to international law: FM. Foreign News. Retrieved from https://menafn.com/1100848233/Qatar-Global-governance-needs-continuous-commitment-to-international-law-FM

Rossi, T., & Kabbani, N. (2020, April 30). How Gulf states can lead the global COVID-19 response. Brookings: OP-ED. Retrieved from https://www.brookings.edu/opinions/how-gulf-states-can-lead-the-global-covid-19-response/

Web Report

Jonas, OB. (2013). Pandemic Risk. World Bank, Washington, DC. https://openknowledge.worldbank.org/handle/10986/16343 License: CC BY 3.0 IGO.

UN GA. (2020, May 12). Deputy Secretary-General's remarks at online launch of the Group of Friends of Solidarity for Global Health Security [as prepared for delivery]. Retrieved from https://www.un.org/sg/en/content/dsg/statement/2020-05-12/deputy-secretary-generals-remarks-online-launch-of-the-group-of-friends-of-solidarity-for-global-health-security-prepared-for-delivery

UN GA. (2020, September 23). Describing COVID-19 pandemic as wake-up call, dress rehearsal for future challenges, Secretary-General opens annual General Assembly debate with vision for solidarity. Relief web: News and Press Release. Retrieved from https://reliefweb.int/report/world/describing-covid-19-pandemic-wake-call-dress-rehearsal-future-challenges-secretary

Relief Web. (2020). Qatar Increases its Contribution to the Global Fund Fivefold - World. Retrieved from https://reliefweb.int/report/world/qatar-increases-its-contribution-global-fund-fivefold

WHOa. (2010). About WHO. Retrieved from http://www.who.int/about/en

WHOb. (2013). Sixty-Sixth World Health Assembly Closes with Concern over New Global Health Threat. Retrieved from http://www.who.int/mediacentre/news/releases/2013/world_health_assembly_20130527/en/

WHOc. (2019). Middle East Respiratory Syndrome Coronavirus (MERS-CoV). Retrieved from http://who.int/emergencies/mers-cov/en/

WHOd. (2016). IHR (2005) Monitoring and Evaluation framework. Retrieved from https://www.who.int/ihr/publications/WHO_HSE_GCR_2016_2/en/

Qatar MoFaa. (2020, September 17). Qatar Adopts Foreign Policy Based on Strengthening International Cooperation for Effective Response to COVID-19 Pandemic. News. Retrieved from https://mofa.gov.qa/en/all-mofa-news/details/1442/01/29/qatar-adopts-foreign-policy-based-on-strengthening-international-cooperation-for-effective-response-to-covid-19-pandemic

Qatar MoFab. (2020). Qatar Sends Urgent Medical Aid to Four Countries to Support Efforts to Combat Coronavirus Pandemic. Retrieved from https://mofa.gov.qa/en/all-mofa-news/details/1441/09/06/ atar-sends-urgent-medical-aid-to-four-countries-to-support-efforts-to-combat-coronavirus-pandemic

National Documents

WGOQATAR. (2020, May 13). Qatar Launches 'Group of Friends of Solidarity for Global Health Security' to combat coronavirus pandemic. What's Going on Qatar. Retrieved from https://www.wgoqatar.com/2020/05/qatar-launches-group-of-friends-of-solidarity-for-global-health-security-to-combat-coronavirus-pandemic/

China and the Global South: An Outlook of the BRI implementation in a post-Pandemic World

Kirana Endiani & Putri Budiaty

Abstract

It is generally agreed that the Global South cooperation landscape has been fundamentally altered since the 2008 global financial crisis when the power slowly shifted from the North to the South. This has presented an opportunity for emerging economies like China to take the lead in igniting economic development and put forward the South-South cooperation on the global stage. As a result, this has configured China's position and relations with the Global South countries, especially with the introduction of the Belt Road Initiative. In a nutshell, this project offers a very optimistic outlook for the future South-South cooperation. However, with the recent development of COVID-19, it has vastly disrupted the implementation of the project and derailed it from the previous trajectory. This paper aims to analyse how this pandemic has affected China and its relations to the Global North and South in terms of the BRI implementation by considering China's position as COVID-19's place of origin and its recompensation to the post-pandemic world. The arguments will then highlight the outlook of the BRI implementation in two perspectives, first is the degradation of China's reputation, coinciding with its disrupted project, and second, an opportunity for China to elevate itself both with the reinvention of the BRI project and COVID-19 related 'foreign assistance'.

Keywords: Belt Road Initiative, Global South, COVID-19, Opportunity

Introduction

In light of the emerging notion 'Global South', the concept itself entails the identification of newly developing and industrialised states spread across the regions of Africa, Asia, and Latin America. Often associated with conceptualisations of the first and third world or core and periphery, the term Global South marks a shift in global governance and development. Forging paths for arising nations to cooperate and take command, thus proceeding as the engine of today's economic climate. Driven by the lack of international participation, global south nations came up with the framework of South-South cooperation as an effort to close the widening economic, social and political gap between the South and the North.[1] Despite its implication on being divided into two polar sides, the term does not inherently refer to the geographical placement as most Global South nations lie in the northern hemisphere.

Countries such as but not limited to China have proven its accelerating growth as a global south nation not only through its contributions to global trade but too in ascending the global value chain. In the course of the 1997 Asian Financial Crisis and the 2008 Global Financial Crisis, China, as a developing country, was able to sustain its economy. Even more, China provided 4 billion U.S. dollars

[1] Stronger South-South Cooperation Key to Tackling Climate Change, Rising Inequality, Global Leaders Stress as High-Level Conference Begins in Buenos Aires. (2019). Retrieved from https://www.un.org/press/en/2019/dev3388.doc.htm

in aid to Thailand and several Asian Countries.[2] It is recorded that China has exponentially increased its outward foreign direct investment (OFDI) over the past two decades, which accounted for a 73% increase from 2002 to 2016 where a large portion of this investment was given to developing countries.[3] Under the circumstances, China, as an acknowledged Global South nation, can enhance and contest its soft power in the international arena. Resulting in a struggle of economic and political power between the Global North hegemon and the rising Global South nation.

By looking into this, China has proven its worth as a significant contributor to the advancement of South-South cooperation. With its current status as the largest developing country, thus its fast-track economic growth, the opportunity for China to further its global prominence has intensified its leading role in South-South cooperation.[4] When China announced its mega-project of the Belt Road Initiative (BRI) in 2013, the project was highly consistent with the traditional philosophies of South-South Cooperation. It is set to revitalise the traditional modality of mutual assistance, technical cooperation, and political dialogue, to a variety of fields, from trade and investment, finance, industrialisation, security, to global governance.[5] By looking into the project's trajectory then, the BRI offers a promising outlook that may change how the global economy is governed and put forward South-South cooperation as a significant component of its realisation while at the same time establishing a new equilibrium with the North-South cooperation.[6]

After all, this initiative has been dubbed as the most ambitious project of the century with the aim to re-enact the famed ancient Silk Road from the Chinese perspective.[7] It consists of a series of infrastructure projects with five approaches of unimpeded trade, financial integration, policy coordination, facilities connectivity, and people-to-people exchanges.[8] Comprising land routes with the name of the Silk Road Economic Belt and its sea counterpart with the name of 21st Century Maritime Silk Road, the project is set to open six economic corridors. All in all, it is estimated to become the most prominent economic platform in the world that will increase 2.9% of global income and drive up the overall global trade by 6.2%, while for participating economies, the number is projected to be higher at 9.7%.[9] It has now covered 70 countries, spread out in three continents, and encompassed 60% of the global population, with a total participating GDP to 40%.[10] If prospects are to be believed, this project will not only deepen the cooperation among the global south countries,

[2] Pro-Active Policies by China in Response to Asian Financial Crisis. (2020, October). Retrieved from https://www.fmprc.gov.cn/mfa_eng/ziliao_665539/3602_665543/3604_665547/t18037.shtml

[3] Taidong, Z., & Haibing, Z. (2018). China's Belt and Road Initiative: An Opportunity to Re-energize South-South Cooperation. China Quarterly Of International Strategic Studies, 4(4), 561. doi: 10.1142/s2377740018500264

[4] Hung, H. (2018). The tapestry of Chinese capital in the Global South. Palgrave Communications, 4(1). doi: 10.1057/s41599-018-0123-7

[5] Taidong, Z., & Haibing, Z. (2018). China's Belt and Road Initiative: An Opportunity to Re-energize South-South Cooperation. China Quarterly Of International Strategic Studies, 4(4), 569. doi: 10.1142/s237774001850026

[6] Chun, Z. (2017). The Belt and Road Initiative and Global Governance in Transition. China Quarterly Of International Strategic Studies, 3(2), 175-191. doi: 10.1142/s2377740017500166

[7] Qinhua, X. (2019). Opinion: BRI is the most ambitious infrastructure project ever. Retrieved from https://news.cgtn.com/news/3d3d514e77496a4d32457a6333566d54/index.html

[8] Jinping, X. (2017). Full text of President Xi's speech at the opening of the Belt and Road forum. Retrieved from https://www.fmprc.gov.cn/mfa_eng/zxxx_662805/t1465819.shtml

[9] Yucheng, L. (2019). China: a Source of Certainty and Stability in a Changing World. Retrieved from https://www.fmprc.gov.cn/mfa_eng/wjdt_665385/zyjh_665391/t1709807.shtml

[10] Sarker, M. N. I., Hossin, M. A., Yin, X., & Sarkar, M. K. (2018). One Belt One Road initiative of China: Implication for future of global development. Modern Economy, 9(4), 623-638.

but it would also propel their significance to a level that has never been seen before.

Degradation of China's reputation among BRI member

The Belt Road Initiative, however, came to an abrupt halt when the coronavirus or widely known as COVID-19 started to spread from China onto the rest of the world, leaving a trail of destruction in its wake. Despite its place of origin still occurring as a topic of debate, the notion that Wuhan's wet market in China as the primary source of the virus, has been widely accepted by the international community. Consequently, China's international presence comes under the scrutiny of

many that have negatively impacted China's relations with other countries, from the restriction of Chinese nationals entry, the rise of anti-China sentiment, the decline of China's trades, to the delay and cancellation of its overseas projects. China's reputation was undoubtedly hit hard as the virus cases soared globally. Consequently, this has brought an unfortunate derailment to BRI's trajectory, resulting in unrealised prospects that many countries, especially the developing ones, have been counting on.

To further analyse, it is better to comprehend that it is indeed true that the city of Wuhan is where the coronavirus outbreak was first documented, however, the search for the virus's origins has been clouded by uncertainty and many conspiracy theories that may have worsened China's position further. Assumptions that the virus is a human-made mutation that comes from China's biosecurity-level four laboratories in Wuhan has gained its popularity even though neither the World Health Organization (WHO) nor the Five Eyes intelligence network (comprises of the U.S., U.K, Canada, Australia, and New Zealand) can confirm this theory.[11] The most likely hypothesis, however, stated that the COVID-19 originated in bats that through a pangolin intermediary jumped to humans.[12] Either way, China would still be put at the centre of this virus-blame which has claimed more than a million lives worldwide with an estimated 41 million ongoing active cases.[13]

With no indication that this pandemic would stop anytime soon, it is estimated that the current development would devastate Global South countries more than the rest of the world. Particularly, with many of the Global South countries imminent population, insufficient crisis-mechanism system, underdeveloped healthcare centres, red-tape bureaucracies, ineffective pandemic-related policy formulation and implementation, and most of all, their inability to afford prolonged lockdown regulations.[14] According to the WHO, three-quarters of 100.000 daily new COVID-19 cases are found

[11] Campbell, C., Yunnan, Y., & Park, A. (2020). Inside the Global Quest to Trace the Origins of COVID-19—and Predict Where It Will Go Next. Retrieved from https://time.com/5870481/coronavirus-origins/

[12] How did coronavirus start and where did it come from? Was it really Wuhan's animal market?. (2020). Retrieved from https://www.theguardian.com/world/2020/apr/28/how-did-the-coronavirus-start-where-did-it-come-from-how-did-it-spread-humans-was-it-really-bats-pangolins-wuhan-animal-market

[13] Coronavirus Update (Live): 41,540,988 Cases and 1,137,189 Deaths from COVID-19 Virus Pandemic. (2020). Retrieved from https://www.worldometers.info/coronavirus/?utm_campaign=homeAdvegas1?%22%20%5C1%20%22countries

[14] Mead, W. (2020). The Coronavirus Hits the Global South. Retrieved from https://www.wsj.com/articles/the-coronavirus-hits-the-global-south-11587422555; Malley, R., & Malley, R. (2020); When the Pandemic Hits the Most Vulnerable. Retrieved from https://www.foreignaffairs.com/articles/africa/2020-03-31/when-pandemic-hits-most-vulnerable

in developing countries while the developed ones have managed to slow the curve down.[15] These numbers may have been higher due to the many unreported cases as the COVID-19 development is still in its early stages within these countries.[16] Many governments now face the dilemma of sustaining the national-restrictions to prevent the spread of the virus or gradually relaxing them as a financial ruin is looming on the horizon.[17] IMF Managing Director, Kristalina Georgieva, stated that the economic impact of this pandemic could cause a freefall of global economic growth in 2020, prompting the worst fallout since the Great Depression in the 1930s.[18]

Consequently, even when the whole pandemic could be perceived as just an unfortunate tragedy, a large part of the international community still makes China as their scapegoat. Hence, this can be seen through the rising anti-China sentiment and the increase of racial tension among Chinese diaspora across the globe. In Japan, #ChineseDon'tComeToJapan hashtag started to run rampant in social media.[19] In Hong Kong, South Korea, and Vietnam, many businesses had refused to let Chinese customers come to its store.[20] Back in January 2020, a French newspaper had put a front-page headline of warning on "Yellow Alert".[21] Many Chinese descendants living abroad have also cited an increase of stigma against themselves, which in some cases had led to exclusions and even hate crimes.[22] Next comes the closing of borders for the Chinese nationals, countries like Italy, Malaysia, Philippines, Vietnam, Australia, the U.S. and Russia had since closed their borders for Chinese nationals since early February 2020.[23] The spread of coronavirus has undoubtedly fed the latent xenophobia against the people of mainland China which was long caused by the political and economic anxieties concerning China's fast track of growth.[24]

From there, the Chinese economy suffered a record downfall due to the pandemic and brought its fast track of economic growth to a standstill. In the first quarter of the virus outbreak in Wuhan, China's industrial output plunged up to 13.5%, urban unemployment hit record high at 6.2%, retail sales fell up to 20.5%, while its GDP contracted 13%.[25] In consequence, the domestic fallout has

[15] Dettmer, J. (2020). Coronavirus Spreading Fast in Developing World. Retrieved from https://www.voanews.com/covid-19-pandemic/coronavirus-spreading-fast-developing-world

[16] Wolf, M. (2020). Covid-19 will hit developing countries hard. Retrieved from https://www.ft.com/content/31eb2686-a982-11ea-a766-7c300513fe47

[17] Wolf, M. (2020). This pandemic is an ethical challenge. Retrieved from https://www.ft.com/content/de7796b6-6cef-11ea-9bca-bf503995cd6f

[18] Shalal, A., & Lawder, D. (2020). IMF chief says pandemic will unleash worst recession since Great Depression. Retrieved from https://www.reuters.com/article/us-health-coronavirus-imf-idUSKCN21R1SM

[19] The coronavirus spreads racism against—and among—ethnic Chinese. (2020). Retrieved from https://www.economist.com/china/2020/02/17/the-coronavirus-spreads-racism-against-and-among-ethnic-chinese

[20] Vu, K., & Widianto, S. (2020). Anti-China sentiment spreads along with coronavirus. Retrieved from https://www.reuters.com/article/us-china-health-sentiment-idUSKBN1ZT1B6

[21] Coronavirus: French Asians hit back at racism with 'I'm not a virus'. (2020). Retrieved from https://www.bbc.com/news/world-europe-51294305

[22] He, J., He, L., Zhou, W., Nie, X., & He, M. (2020). Discrimination and Social Exclusion in the Outbreak of COVID-19. International Journal of Environmental Research and Public Health, 17(8), 2933.

[23] Coronavirus: US and Australia close borders to Chinese arrivals. (2020). Retrieved from https://www.bbc.com/news/world-51338899

[24] Rich, M. (2020). As Coronavirus Spreads, So Does Anti-Chinese Sentiment. Retrieved from https://www.nytimes.com/2020/01/30/world/asia/coronavirus-chinese-racism.html

[25] Weinland, D., & Liu, X. (2020). Chinese economy suffers record blow from coronavirus. Retrieved from https://

severely impacted China's overseas investments. It is reported by the American Enterprise Institute and the Heritage Foundation that China's outbound investment in 2019 only amounted to $68.4 billion, a 43% decrease from 2018.[26] The actual fall could be way more significant than the stated numbers, indicating a way worse downturn in decades.

With all of these combined, China's mega-project of the BRI became the next victim of this virus-ridden, politically-anxious, and economically-unstable situation. Many of the BRI projects across the globe have been put on hold until further notice, particularly prohibiting the entry Chinese workers, materials, and supplies' into many of the host countries.[27] Accordingly, this would risk years of planning and trillions of dollars into not only China's economic diplomacy but also the host countries' capacity to take advantage of a complete BRI project. An official report, released by China's Ministry of Foreign Affairs in June, stated that 20% of the projects were deeply affected by the

pandemic development, 30-40% were somewhat affected, while the rest saw little adverse effect.[28] Projects like Cambodia's Sihanoukville Special Economic Zone, China-Pakistan Economic Corridor (CPC), Nigeria's 1.5$ billion rail project, and Indonesia's Jakarta-Bandung high-speed rail have been disrupted.[29] As the virus progresses, many countries in Africa and Asia are not able to continue its former commitment to China's mega-project. This has prompted many host countries to demand a renegotiation with China as uncertainties continue to linger.

Prior to the COVID-19 pandemic, the BRI was already under many criticisms due to its lack of transparency, adverse ecological impacts, debt-trap diplomacy, displacement of local communities, disregard on local construction companies and workers, as well as, a rising of a more assertive China. These problems are highlighted in cases, such as the "highway to nowhere" in Montenegro that sent the country's debt to its highest point. Hence, it was threatened never to be finalised due to the inability of the government to repay its loans.[30] There is also the Hambantota Port Development Project that despite the thousand ships that pass through one of the world's most intense trading routes it had only managed to draw 34 ships in 2012.[31] The port's ownership has been transferred to China due to the inability of Sri Lanka to pay its debt.[32] In Malaysia, its Anti-Corruption Commission

www.ft.com/content/318ae26c-6733-11ea-800d-da70cff6e4d3

[26] Marlow, I., Salna, K., Ondaatji, A., & Li, D. (2020). China's Belt and Road Plan Is Getting Lashed by Coronavirus. Retrieved from https://www.bloombergquint.com/global-economics/china-s-grand-belt-and-road-plan-is-being-lashed-by-coronavirus

[27] Shepard, W. (2020). Coronavirus Outbreak puts Belt and Road Projects on Hold, For Now. Retrieved from https://www.forbes.com/sites/wadeshepard/2020/02/29/coronavirus-outbreak-puts-belt-and-road-projects-on-hold-for-now/

[28] China says one-fifth of Belt and Road projects 'seriously affected' by pandemic. (2020). Retrieved from https://www.reuters.com/article/us-health-coronavirus-china-silkroad-idUSKBN23Q0I1

[29] Majority of China's BRI projects abroad adversely affected by COVID-19 pandemic: Official. (2020). Retrieved from https://economictimes.indiatimes.com/news/international/business/majority-of-chinas-bri-projects-abroad-adversely-affected-by-covid-19-pandemic-official/articleshow/76673279.cms?from=mdr

[30] Vasovic, A., & Barkin, N. (2018). Chinese 'highway to nowhere' haunts Montenegro. Retrieved from https://www.reuters.com/article/us-china-silkroad-europe-montenegro-insi-idUSKBN1K60QX

[31] Abi-Habib, M. (2018). How China Got Sri Lanka to Cough Up a Port (Published 2018). Retrieved from https://www.nytimes.com/2018/06/25/world/asia/china-sri-lanka-port.html

[32] Panda, A. (2020). Sri Lanka Formally Hands Over Hambantota Port to Chinese Firms on 99-Year Lease. Retrieved from https://thediplomat.com/2017/12/sri-lanka-formally-hands-over-hambantota-port-to-chinese-firms-on-99-year-lease/

(MACC) found that contract values of BRI projects had been severely inflated and projects were put on hold as the Malaysian Government negotiated for a reduction in the project's costs from almost costing the state of $20 billion to a mere $10.7 billion.[33] Kyrgyzstan free trade zone is also another example of this which may indicate the possibility of unfulfilled anticipated economic and social benefits, especially as a rising debt that is not matched by the host countries' ability to pay back.[34]

With the pandemic majorly affecting the implementation of BRI's physical manifestation, thus delaying its promised prospects even further, it certainly does not look suitable for the project's criticised reception.[35] One of the critical factors in this process is the lack of travel facilities and permission for Chinese labour to enter and return to BRI stations, where over 130 countries across the globe have placed restrictions towards Chinese citizens.[36] The Chinese Government has tried to lobby some of these host countries to ease their travel restrictions, particularly towards Global South nations such as Pakistan. Nevertheless, as the situation is yet to be conducive, continuous disruption is to be expected. In Malaysia's $10.4 billion East Coast Rail Link, 200 Chinese workers are not allowed back inside the country despite the fact that other workers can return after two weeks of quarantine process.[37] The pandemic has also affected China's supply and demand chains, where many of the projects still rely on for their completion. Hence, becoming another criticism for the Belt Road Initiative development as a whole.

Global uncertainties certainly have its effects on the values of this project, where it is calculated that the worth of new construction contracts with the BRI members had fallen 5.3% in the first half of 2020; this is a significant number considering that the previous year the project witnessed a 33.2% increase.[38] The situation is made worse as the projects are primarily debt-financed. Even before the pandemic strikes, the Global South countries like Djibouti, Laos, Kyrgyzstan, the Maldives, Mongolia, Montenegro, Pakistan, and Tajikistan are highly indebted to China where its debt to GDP ratio has risen more than 70%.[39] Coupled with the domestic economic situation of the host countries that may not be able to take the full impact of the virus-ridden world, let alone their debt-repayment commitment, it is unlikely that the projects would regain their former trajectory.[40]

[33] Lam, A. (2020). Domestic Politics in Southeast Asia and Local Backlash against the Belt and Road Initiative - Foreign Policy Research Institute. Retrieved from https://www.fpri.org/article/2020/10/domestic-politics-in-southeast-asia-and-local-backlash-against-the-belt-and-road-initiative/

[34] Buckley, P. (2020). China's Belt and Road Initiative and the COVID-19 crisis. Journal Of International Business Policy, 3(3), 311-314. doi: 10.1057/s42214-020-00063-9

[35] YingHui, L. (2020). COVID-19: The Nail in the Coffin of China's Belt and Road Initiative?. Retrieved from https://thediplomat.com/2020/09/covid-19-the-nail-in-the-coffin-of-chinas-belt-and-road-initiative/

[36] Chaudhury, D. (2020). Covid-19 pandemic puts brakes on Chinese projects. Retrieved from https://economictimes.indiatimes.com/news/international/world-news/covid-19-pandemic-puts-brakes-on-chinese-projects/articleshow/75017723.cms

[37] Malaysian rail project stops Chinese workers returning from Wuhan. (2020). Retrieved from https://www.reuters.com/article/us-china-health-malaysia-idUSKBN1ZU0JK

[38] Impact of Covid-19 on Belt & Road Initiative - Belt & Road News. (2020). Retrieved from https://www.beltandroad.news/2020/08/01/impact-of-covid-19-on-belt-road-initiative/

[39] Hurley, J., Morris, S., & Portelance, G. (2019). Examining the debt implications of the Belt and Road Initiative from a policy perspective. Journal of Infrastructure, Policy and Development, 3(1), 139-175.

[40] Buckley, P. (2020). China's Belt and Road Initiative and the COVID-19 crisis. Journal Of International Business Policy, 3(3), 311-314. doi: 10.1057/s42214-020-00063-9

Not only would the pandemic derail the BRI implementation, but it would also reduce its significance as many of the host countries, especially the global south nations, grappled with the aftermath of the pandemic. Therefore, the project's initial prospects, such as 6.2% increase of global trade or 2.9% rise in global income might either take more time to be realised or could never be fulfilled. For many developing countries who are expecting the project could turn their domestic outlook into a more positive light, the pandemic could present to be a challenge. China, once again, became the centre point for the coronavirus-blame due to their status as the COVID-19 place of origin.

In the end, despite the initiative's initial prospects that can further China's relations with the Global South and increase their prominence to the international community, the pandemic would degrade China's reputation thus creating a wedge between China and its intensifying Global South relations. China, in turn, needs to take this unfortunate situation as a momentum to create new dimensions to its project and open more opportunities to further its cooperation with the BRI members.[41] These opportunities would not only compensate for the aftermath of the COVID-19 devastation but also reclaim the initiative's former prominence.

The Reinvention of BRI in a Post-Pandemic world and China's 'foreign assistance' present a potential opportunity for China

The post-ripple effect of the coronavirus has turned the international community against China. Nevertheless, its ability to mobilise a relatively new dimension to the BRI with the name of the 'Health Silk Road' is seen as an opportunity to regain the initiative's initial momentum. The Health Silk Road (HSR) as mentioned earlier can be traced back before the pandemic outbreak, accurately during the year 2015 to 2016, when President Xi Jinping first advocated the need for China to enhance mutual-beneficial medical and health cooperation amongst BRI members. The HSR endorsed medical rescue, epidemic control, infectious disease notification, commercial activity all

framed under notion cooperation as China intended to reflect its view as a community of common destiny.[42] Accordingly, the framework was instituted by the supporting fact that China by that time was already a prominent exporter of medical equipment with the total value of 20.5 billion U.S. dollars in 2016 which accumulated to 28.7 billion U.S. dollars in just three years.[43] Moreover, China accounts for at least half of the world's medical equipment exporter having the competency of producing 150 tonnes of specialised fabrics for masks, thus exporting 70.6 billion masks from March through May.[44] In the wake of the novel coronavirus outbreak, China would then optimise its Health Silk Road as a means of presenting its adaptability as a distinguished player amongst the international community.

The HSR came to a realisation during a phone call between President Xi Jinping and Italian

[41] YingHui, L. (2020). COVID-19: The Nail in the Coffin of China's Belt and Road Initiative?. Retrieved from https://thediplomat.com/2020/09/covid-19-the-nail-in-the-coffin-of-chinas-belt-and-road-initiative/

[42] China's Post-Covid19 Belt & Road Priorities. (2020). Retrieved from https://www.beltandroad.news/2020/06/18/chinas-post-covid19-belt-road-priorities/

[43] Value of medical equipment exports from China from 2008 to 2019. (2019). Retrieved from https://www.statista.com/statistics/436834/china-medtech-export-value/

[44] Brasdher, K. (2020). China Dominates Medical Supplies, in this Outbreak and the next. Retrieved from https://www.nytimes.com/2020/07/05/business/china-medical-supplies.html

Prime Minister Giuseppe Conte when China offered to give immediate assistance in the form of dispatching doctors thus supplying 31 tons of medical supplies such as PPE (Personal Protective Equipment), ventilators, and medications to country's prolonged outbreak.[45] China's response was enthusiastically welcomed by Italy, owing to the fact that not only is the nation recognised as a BRI member, but Italy's emergency request was declined by EU countries thus portraying China and Italy's solidarity and promotion of the BRI-quote, "The Friendship road knows no borders,".[46] With the ongoing sentiment and complaints towards the European Union for its slow response in tackling the pandemic altogether, China seized this opening by shipping 50,000 testing kits and 200,000 advanced masks to EU countries during the first wave.[47] In consequence, China metaphorically was able to kill two birds with one stone; shifting away from its negative focus as the so-called epicentre of the virus spreader and obtaining the role as a global health leader.

The considerable efforts given by China as a Global South nation has been praised not only by Italy but too by the World Health Organization. Italy, as an acknowledged Global North state has made clear statements over the lack of the EU and Italy's unity in curbing the coronavirus. Quoting the Italian Foreign Minister, Luigi Di Maio, "Many foreign ministers offered their solidarity and wanted to give us a hand, but this evening I want to show the first aid arrived from China".[48] The previous video statement posted on Facebook reflects towards Italy's anger, thus assuredly affecting future relations between China and European Union members; shattering the illusions that the EU once held against mainland China.

In the attempts of becoming a global health leader, the Chinese Government did not only limit its aid donations to the EU but also donated a total of 50 million U.S. dollars to the World Health Organization (WHO) and pledges to contribute another 2 billion U.S. dollars over the next two years to assist with COVID-19 response.[49] China's commitment to the WHO coincides with President

Trump's halt over U.S. funding to the WHO which accounts at least 400 to 500 million U.S. dollars each year over allegations that the International Organization is China-centric.[50] As stated by Zeng Guang, chief epidemiologist of the Chinese Centre for Disease Control and Prevention, the United States disengagement with the WHO only illustrates its pettiness and lack of political insight.[51] Looking at an international perspective, the action that was taken upon by the United States only

[45] China sends medical supplies, experts help Italy battle coronavirus. (2020). Retrieved from https://www.reuters.com/article/us-health-coronavirus-italy-respirators-idUSKBN2101IM

[46] Beg, Z. (2020). The Health Silk Road: Implications for the EU under Covid 19. Retrieved from https://www.eias.org/news/the-health-silk-road-implications-for-the-eu-under-covid-19/

[47] Peel, M., Hancock, T., Hopkins, V., & Johnson, M. (2020). China ramps up coronavirus help to Europe. Retrieved from https://www.ft.com/content/186a9260-693a-11ea-800d-da70cff6e4d3

[48] Barigazzi, J. (2020). Italy's foreign minister hails Chinese coronavirus aid. Retrieved from https://www.politico.eu/article/italys-foreign-minister-hails-chinese-caronavirus-aid/

[49] Cheng, E. (2020). China's Xi pledges $2 billion to help fight coronavirus. Retrieved from https://www.cnbc.com/2020/05/18/chinas-xi-pledges-2-billion-to-help-fight-coronavirus-at-who-meeting.html

[50] Coronavirus: Trump attacks 'China-centric' WHO over global pandemic. (2020). Retrieved from https://www.bbc.com/news/world-us-canada-52213439

[51] Caiyu, L., Shumei, L., & Lingzhi, F. (2020). US withdraws from WHO in midst of world's fight against global pandemic, sabotaging own interests and reputation: Chinese experts. Retrieved from https://www.globaltimes.cn/content/1193857.shtml

damaged its international reputation and state interest, leaving an extensive vacuum for China to fill in. In that manner, not only would the United States allow China's growing soft power in reshaping the global economic and governance system, but too might lose in an ideological war that most are not aware.

Even with the negative criticism of obfuscating COVID-19 data, the Chinese Government did not cease its door-to-door diplomacy with both BRI members and Global South nations such as but not least Colombia, Kenya, Bangladesh, Sri Lanka, Thailand, India, and Indonesia. Notwithstanding the fact that Colombia is not a BRI member, China still regards the country as a fellow Global South country owing to the fact that Colombia is in a critical urgency as officials record with an overwhelming 8,000 new cases and 300 deaths per day.[52] Undeterred by lockdown regulations, Colombia's healthcare units are swamped every day with new patients thus leading the country into using a new type of ventilator, Heron, despite not having the full approval from Colombian regulators. Seeing the crisis, China immediately came to aid and dispatched a total of 1.5 million U.S. dollars' worth of relief support to Colombia.[53] After Colombia, China continued to assist, coordinate and support developing countries by discharging medical relief in accordance with the opposing state's domestic condition. In the face of the first outbreak, Kenya has offered mutual support to China at the height of their COVID-19 cases. Hence, in return, China reciprocated their mutual support by rushing as the first country to assist in supplying medical kits and exchanging knowledge in how to tackle the widespread of the virus. As stated by Rashid Aman, Kenyan's Chief administrative secretary of the Ministry of Health, "China is a true partner of ours".[54]

Another bold action that China took in response to the widespread of the coronavirus was accommodating another 22 to 40 tonnes of medical support which included medical kits, gloves, mask, PPE, and ventilators amongst its BRI members.[55] States such as Bangladesh were amongst one of the countries that received COVID-19 aid from China. In a state of a level 3 warning, Bangladesh has already recorded 390,206 confirmed coronavirus cases with 5,681 total deaths till this day.[56] As a fellow BRI member thus Global South partner, China has stand side by side with Bangladesh, proving Bangladesh to be their essential partner and priority as they offered another medical assistance in its third batch of supplying 30.000 testing reagents, 130.000 surgical masks, 50.000 protective medical gowns, N95 medical masks and goggles.[57] Seeing the trend, BRI members and Global South countries have praised China for being consistent with its promises and priorities. The dismissal of the United States standing at the frontline response for COVID-19 has not only shown

[52] Rueda, M. (2020). Colombia turns emergency ventilators to treat COVID-19. Retrieved from https://abcnews.go.com/International/wireStory/colombia-turns-emergency-ventilators-treat-covid-19-72596075

[53] Gamba, L. (2020). China makes massive medical donations to Latin America. Retrieved from https://www.aa.com.tr/en/americas/china-makes-massive-medical-donations-to-latin-america/1871366

[54] Kenya hails China's Support towards COVID-19 fight. (2020). Retrieved from http://en.nhc.gov.cn/2020-08/25/c_81478.html

[55] Afifa, L. (2020). 40 Tons of Covid-19 Medical Kits from China Arrive in Indonesia. Retrieved from https://en.tempo.co/read/1324664/40-tons-of-covid-19-medical-kits-from-china-arrive-in-indonesia

[56] Bangladesh: WHO Coronavirus Disease. (2020). Retrieved from https://covid19.who.int/region/searo/country/bd

[57] China continued providing assistance to Bangladesh in the fight against Covid-19. (2020). Retrieved from http://bd.china-embassy.org/eng/zmjw/t1786211.htm

China's capability in rescuing but too serving the needs and answer to every nation's emerging crisis.

If one were to think that China would stop only at its Health Silk Road, then they are mistaken. It cannot be hindered that the ongoing pandemic has halted its BRI projects such as the Port City development in Sri Lanka or the Payra Power Plant in Southern Bangladesh as they all require Chinese resources thus skilled workers.[58] Accordingly, BRI Projects remains as one of the main priorities for the Chinese Government. Nevertheless, in order to sustain its promises and liability, further initiatives have been implemented, such as the Digital Silk Road. The two extensions of the BRI grand project are all interconnected, particularly during the global crisis. The DSR (Digital Silk Road) is an integral component of the Belt Road Initiative which embodies the creation of a technological infrastructure, allowing states to network with one another. China's plan for DSR ranges from smart-cities, e-commerce (Ali Baba), telecommunication network and even its new satellite system.[59] Subsequently, one would question how would the Digital Silk Road be significant under the pandemic circumstances.

With the international community being forced to stay at home, children, parents, and office workers are intensively dependent and inclined towards the use of its technological device. Hence, it creates a demand for not only a more robust network and broadband, but also in allowing individuals to continue its economic activity under social-distancing and quarantine regulations. Seizing the golden opportunity, China kindly slides into the picture offering Huawei's 5G network. Huawei's 5G network offers download speed that is ten times faster than the average speed we use today, entitling users with new modifications on streaming videos, and communication.[60] Regardless of the United States' utmost effort in lobbying EU members to ban the Chinese telecommunication firm, Italy reassuringly welcomed the Chinese tech firm to enter its domestic market. Being the first EU country to permit the entry of China's IT giant, Huawei has provided Italy with direct conference terminals and advanced health systems operating between Italian hospitals with Huashan hospital based in Shanghai.[61] Thus allows Chinese medical experts to exchange knowledge and experience in anticipating another widespread of the virus.

Further accommodations have been made by Chinese tech giants such as Alibaba and Huawei such as but not limited to manufacturing AI-based diagnosis systems for COVID-19 response in order to cut down the time-consuming wait thus maximising the treatment capacity for hospitals.[62] Alongside with AI-based diagnosis systems, China has taken further measures in creating advanced data centres and enhancing networks lines to allow Global South countries such as Egypt, South Africa, Nigeria and Kenya to broaden its global market engagement.[63] Not only will we discern a change in technological

[58] Pal, D., & Bhatia, R. (2020). The BRI in Post-Coronavirus South Asia. Global Pandemic: Coronavirus and Global Disorder, 1-3. Retrieved from https://carnegieendowment.org/files/Pal_Corona_BRI4.pdf

[59] Dekker, B., Okano-Heijmans, M., & Zhang, E. S. (2020). Unpacking China's Digital Silk Road. Netherlands: Clingendael Institute.

[60] Bowler, T. (2020). Huawei: Why is it being banned from the UK's 5G Network?. Retrieved from https://www.bbc.com/news/newsbeat-47041341

[61] China's Post-Covid19 Belt & Road priorities. (2020). Retrieved from https://www.beltandroad.news/2020/06/18/chinas-post-covid19-belt-road-priorities/

[62] Covid-19 Diagnosis and Treatment systemL Huawei and AGS Jointly Combat Global Pandemic with AI. (2020). Retrieved from https://e.huawei.com/cz/case-studies/intelligent-computing/2020/healthy

[63] Moss, S. (2019). Huawei to build konza data center and smart city in Kenya, with Chinese concession loan. Re-

advancement, but BRI members will benefit to a greater extent in becoming the priority for China thus enabling the Chinese Government to realise its commitments of the BRI project.

China's efforts to redeem itself did not stop there. In the wake of economic crises caused by the widespread pandemic, China has seen the necessity to alleviate a certain amount of the debt burden of the several BRI victims. Countries like Mozambique, Oman, the Republic of Congo, Vietnam, Zambia, Mongolia, the Maldives, Djibouti, Malaysia, Belarus, and Angola are amongst the most vulnerable to debt crisis due to the disruption in China's global supply chain, severe contraction in the transport and travel sectors, and the decrease of export revenues.[64] China, however, could not merely bestow debt-relief to many countries at once, lest it destroys its financial stability, considering it is estimated that the total lending given by Chinese financial institutions to the BRI members have reached $461 billion.[65] The situation has prompted China, albeit traditionally unwilling, to formally join the G20 countries and the World Bank, as well as the famed Paris Club, in an agreement of debt moratorium.[66] Not long after that, China announced that it would suspend debt repayments for many global south countries as part of its debt-relief initiative released in April by the G-20.[67] In the Extraordinary China-Africa Summit on Solidarity Against COVID-19, China further its commitment by offering to cancel the interest-free loans of many BRI members in the Africa continent.[68] As the biggest creditor to sub-Saharan Africa's low-income countries, this offer was a godsend. Hence, it becomes the indication that China is indeed warming up to the idea of furthering its debt-relief efforts to assist the BRI members, especially the developing ones, in the post-pandemic world.

With the world racing to manufacture a safe COVID-19 vaccine, China has shown its interest by formally joining the WHO Covax initiative, allowing participating states globally develop, produce and have access to COVID-19 testing kits, treatments, and vaccines.[69] Under the COVAX initiative, 171 countries and regions have participated in order to ensure its spot in acquiring the 20% of vaccine doses distributed following the country's population.[70] Presenting its strength internationally, China already has three leading vaccine manufacturers; Sinovac, CanSino, and Sinopharm being the largest pharmaceutical corporation. Amongst the three leading manufacturers, Sinopharm has already reached the end of its Phase III trials with assessing two different types of vaccine.[71] In spite of the

trieved from https://www.datacenterdynamics.com/en/news/huawei-build-konza-data-center-and-smart-city-kenya-chinese-concessional-loan/

[64] Crawford, N., & Gordon, D. (2020). China Confronts Major Risk of Debt Crisis on the Belt and Road Due to Pandemic. Retrieved from https://thediplomat.com/2020/04/china-confronts-major-risk-of-debt-crisis-on-the-belt-and-road-due-to-pandemic/

[65] Kynge, J., & Li, S. (2020). China faces wave of calls for debt relief on 'Belt and Road' projects. Retrieved from https://www.ft.com/content/5a3192be-27c6-4fe7-87e7-78d4158bd39b

[66] Champbell, C. (2020). Impact of Coronavirus on China's Economy Only Just Beginning. Retrieved from https://time.com/5824599/china-coronavirus-covid19-economy/

[67] Albert, E. (2020). What to Make of China's Debt Relief Announcement. Retrieved from https://thediplomat.com/2020/06/what-to-make-of-chinas-debt-relief-announcement/

[68] Paduano, S. (2020). As Africa Faces COVID-19, Chinese Debt Relief is a Welcome Development. Retrieved from https://www.cfr.org/blog/africa-faces-covid-19-chinese-debt-relief-welcome-development

[69] What is COVAX?. (2020). Retrieved from https://www.gavi.org/covax-facility

[70] Covax: Working for global equitable access to COVID-19 vaccines. (2020). Retrieved from https://www.who.int/initiatives/act-accelerator/covax

[71] Hessler, P. (2020). Chinese Citizens are already receiving a Coronavirus vaccine. Retrieved from https://www.newyorker.com/news/news-desk/the-november-surprise-of-chinas-coronavirus-vaccine

minimum access for the vaccine to be publicly consumed, many individuals are willing to become volunteers in order to grasp the spot of being vaccinated. Not only are the Chinese Government

incorporating volunteers from its citizens, but it has managed to get a hold of 50 thousand subjects from Middle Eastern countries, South American countries, and the United Arab Emirates for clinical trials.[72] In consequence, UAE's COVID-19 Clinical Management committee has reported that the thousands of individuals who volunteered to take the trial have not experienced any side effects from the vaccine making Sinopharm as the first acknowledged vaccine producer to acquire approval from a foreign state.

As China takes the lead in the race, many foreign countries have criticised its sceptic information and production as many individuals have already booked for vaccination. In response to the reproval, China has proven to tighten its regulations, making sure that its standard for Phase III testing is aligned with what the Global North countries approve. To assure the international community, China has already involved itself in the International Council for Harmonisation of Technical Requirements for Pharmaceuticals for Human Use (ICH). With its persistent belief in delivering the vaccine by early 2021, many nations such as Brazil have agreed to import 46 million doses of the Sinovac vaccine.[73] President Xi Jinping and Premier Li Keqiang have publicly pledged to make the vaccine accessible to its low-income countries and fellow partners such as the Philippines, Thailand, Vietnam, African and Latin American countries.[74] Not only will China prioritise its COVID-19 vaccine to the aforementioned countries, but has also pledged in shipping 100,000 free doses to Bangladesh thus offering $1 billion U.S. dollars of loan to Latin America and Caribbean nations for them to afford in buying the vaccine.[75] Altogether, China becoming the global vaccine manufacturer will top off its triumph efforts, thus creating an inclining foreign relation and support from the international community.

Conclusion

Looking at contemporary China's relations with the Global South, China has presented itself as a significant contributor to South-South cooperation. When the Belt and Road Initiative was introduced, its role was amplified mainly because the project is set to create a new equilibrium for North-South cooperation. However, with the recent coronavirus outbreak that was first documented in China, this has created a massive challenge for the BRI implementation. Consequently, not only China's reputation is on the line, but its mega-project is also facing a prolonged delay. Many of the Global South countries, in turn, are subjected to a more devastating outcome from uncontrolled virus

[72] Qingqing, C., Yuwei, H., & Shumei, L. (2020). Chinese vaccines in sight, providing promising solution to conquer COVID-19. Retrieved from https://www.globaltimes.cn/content/1204263.shtml

[73] Brazil Institute to import 6 million doses of Chinese Covid-19 vaccine. (2020). Retrieved from https://news.cgtn.com/news/2020-10-25/Brazil-institute-to-import-6-million-does-of-Chinese-COVID-19-vaccine-URVu-2jYtEc/index.html

[74] Cyranoski, D. (2020). What China's speedy COVID vaccine deployment means for the pandemic. Retrieved from https://www.nature.com/articles/d41586-020-02807-2

[75] Wee, S.L. (2020). From Asia to Africa, China Promotes its Vaccines to Win Friends. Retrieved from https://www.nytimes.com/2020/09/11/business/china-vaccine-diplomacy.html

outbreak, failing healthcare system, therising possibility of economic fall down, and now unfulfilled promises of the BRI prospects. When before the BRI has garnered many criticisms, the pandemic has undoubtedly worsened the project's reception. This has aggravated China's relations with many of the Global South countries within the context of the BRI.

Regardless of the unfavourable and contradicting allegations stated towards China, this Global South country was able to reverse its downward reputation by rejuvenating its Health Silk Road (HSR) and Digital Silk Road (DSR) as a central component of its BRI project. Shifting the physical manifestations of the BRI project to a technological infrastructure, China was able to recover its

economic loss through its mask diplomacy. China is a businessman at heart and will seize to take any advantage it sees that serves the common interest. With the retreat of the United States position as one of the main funders of the World Health Organization (WHO), China has taken an additional step in repositioning itself by contributing at least two billion U.S. dollars throughout the following two years. Deriving from the motivation of becoming a global health leader, China has fully shown its maximum capacity by too engaging in the race for the COVID-19 vaccine. In the event that China wins the race of the vaccine procurement, this would elevate the need to join forces distinctly between China, the Global South, and the Global North. As long as China can continue its considerable efforts in alleviating the devastating outcomes of the outbreak, especially with its vaccine-in-progress trump card, the BRI would eventually retain its former eminence.

Bibliography

Article/Journal

JBuckley, P. (2020). China's Belt and Road Initiative and the COVID-19 crisis. Journal Of International Business Policy, 3(3), 311-314. doi: 10.1057/s42214-020-00063-9

Chun, Z. (2017). The Belt and Road Initiative and Global Governance in Transition. China Quarterly Of International Strategic Studies, 3(2), 175-191. doi: 10.1142/s2377740017500166

Dados, N., & Connell, R. (2012). The Global South. Contexts, 11(1), 12-13. doi:10.1177/1536504212436479

Dekker, B., Okano-Heijmans, M., & Zhang, E. S. (2020). Unpacking China's Digital Silk Road. Netherlands: Clingendael Institute.

He, J., He, L., Zhou, W., Nie, X., & He, M. (2020). Discrimination and Social Exclusion in the Outbreak of COVID-19. International Journal of Environmental Research and Public Health, 17(8), 2933.

Hung, H. (2018). The tapestry of Chinese capital in the Global South. Palgrave Communications, 4(1). doi: 10.1057/s41599-018-0123-7

Hurley, J., Morris, S., & Portelance, G. (2019). Examining the debt implications of the Belt and Road Initiative from a policy perspective. Journal of Infrastructure, Policy and Development, 3(1), 139-175.

Pal, D., & Bhatia, R. (2020). The BRI in Post-Coronavirus South Asia. Global Pandemic: Coronavirus and Global Disorder, 1-3. Retrieved from https://carnegieendowment.org/files/Pal_

Corona_BRI4.pdf

Sarker, M. N. I., Hossin, M. A., Yin, X., & Sarkar, M. K. (2018). One Belt One Road initiative of China: Implication for future of global development. Modern Economy, 9(4), 623-638.

Taidong, Z., & Haibing, Z. (2018). China's Belt and Road Initiative: An Opportunity to Re-energize South-South Cooperation. China Quarterly Of International Strategic Studies, 4(4), 561-569. doi: 10.1142/s2377740018500264

Website

Abi-Habib, M. (2018). How China Got Sri Lanka to Cough Up a Port (Published 2018). Retrieved from https://www.nytimes.com/2018/06/25/world/asia/china-sri-lanka-port.html

Afifa, L. (2020). 40 Tons of Covid-19 Medical Kits from China Arrive in Indonesia. Retrieved from https://en.tempo.co/read/1324664/40-tons-of-covid-19-medical-kits-from-china-arrive-in-indonesia

Albert, E. (2020). What to Make of China's Debt Relief Announcement. Retrieved from https://thediplomat.com/2020/06/what-to-make-of-chinas-debt-relief-announcement/

Bangladesh: WHO Coronavirus Disease. (2020). Retrieved from https://covid19.who.int/region/searo/country/bd

Barigazzi, J. (2020). Italy's foreign minister hails Chinese coronavirus aid. Retrieved from https://www.politico.eu/article/italys-foreign-minister-hails-chinese-caronavirus-aid/

Beg, Z. (2020). The Health Silk Road: Implications for the EU under Covid 19. Retrieved from https://www.eias.org/news/the-health-silk-road-implications-for-the-eu-under-covid-19/

Brazil Institute to import 6 million doses of Chinese Covid-19 vaccine. (2020). Retrieved from https://news.cgtn.com/news/2020-10-25/Brazil-institute-to-import-6-million-does-of-Chinese-COVID-19-vaccine-URVu2jYtEc/index.html

Bowler, T. (2020). Huawei: Why is it being banned from the UK's 5G Network?. Retrieved from https://www.bbc.com/news/newsbeat-47041341

Brasdher, K. (2020). China Dominates Medical Supplies, in this Outbreak and the next. Retrieved from https://www.nytimes.com/2020/07/05/business/china-medical-supplies.html

Caiyu, L., Shumei, L., & Lingzhi, F. (2020). US withdraws from WHO in midst of world's fight against global pandemic, sabotaging own interests and reputation: Chinese experts. Retrieved from https://www.globaltimes.cn/content/1193857.shtml

Campbell, C., Yunnan, Y., & Park, A. (2020). Inside the Global Quest to Trace the Origins of COVID-19—and Predict Where It Will Go Next. Retrieved from https://time.com/5870481/coronavirus-origins/

Champbell, C. (2020). Impact of Coronavirus on China's Economy Only Just Beginning. Retrieved from https://time.com/5824599/china-coronavirus-covid19-economy/

Chaudhury, D. (2020). Covid-19 pandemic puts brakes on Chinese projects. Retrieved from https://economictimes.indiatimes.com/news/international/world-news/covid-19-pandemic-puts-brakes-on-chinese-projects/articleshow/75017723.cms

Cheng, E. (2020). China's Xi pledges $2 billion to help fight coronavirus. Retrieved from https://www.

cnbc.com/2020/05/18/chinas-xi-pledges-2-billion-to-help-fight-coronavirus-at-who-meeting.html

China continued providing assistance to Bangladesh in the fight against Covid-19. (2020). Retrieved from http://bd.china-embassy.org/eng/zmjw/t1786211.htm

China's Post-Covid19 Belt & Road Priorities. (2020). Retrieved from https://www.beltandroad.news/2020/06/18/chinas-post-covid19-belt-road-priorities/

China sends medical supplies, experts help Italy battle coronavirus. (2020). Retrieved from https://www.reuters.com/article/us-health-coronavirus-italy-respirators-idUSKBN2101IM

Coronavirus: French Asians hit back at racism with 'I'm not a virus'. (2020). Retrieved from https://www.bbc.com/news/world-europe-51294305

Coronavirus: US and Australia close borders to Chinese arrivals. (2020). Retrieved from https://www.bbc.com/news/world-51338899

Coronavirus: Trump attacks 'China-centric' WHO over global pandemic. (2020). Retrieved from https://www.bbc.com/news/world-us-canada-52213439

Coronavirus Update (Live): 41,540,988 Cases and 1,137,189 Deaths from COVID-19 Virus Pandemic. (2020). Retrieved from https://www.worldometers.info/coronavirus/?utm_campaign=homeAdvegas1?%22%20%5C1%20%22countriesCoronavirus: French Asians hit back at racism with 'I'm not a virus'. (2020). Retrieved from https://www.bbc.com/news/world-europe-51294305

China says one-fifth of Belt and Road projects 'seriously affected' by pandemic. (2020). Retrieved from https://www.reuters.com/article/us-health-coronavirus-china-silkroad-idUSKBN23Q0I1

Covax: Working for global equitable access to COVID-19 vaccines. (2020). Retrieved from https://www.who.int/initiatives/act-accelerator/covax

Covid-19 Diagnosis and Treatment systemL Huawei and AGS Jointly Combat Global Pandemic with AI. (2020). Retrieved from https://e.huawei.com/cz/case-studies/intelligent-computing/2020/healthy

Crawford, N., & Gordon, D. (2020). China Confronts Major Risk of Debt Crisis on the Belt and Road Due to Pandemic. Retrieved from https://thediplomat.com/2020/04/china-confronts-major-risk-of-debt-crisis-on-the-belt-and-road-due-to-pandemic/

Cyranoski, D. (2020). What China's speedy COVID vaccine deployment means for the pandemic. Retrieved from https://www.nature.com/articles/d41586-020-02807-2

Dettmer, J. (2020). Coronavirus Spreading Fast in Developing World. Retrieved from https://www.voanews.com/covid-19-pandemic/coronavirus-spreading-fast-developing-world

Gamba, L. (2020). China makes massive medical donations to Latin America. Retrieved from https://www.aa.com.tr/en/americas/china-makes-massive-medical-donations-to-latin-america/1871366

How did coronavirus start and where did it come from? Was it really Wuhan's animal market?. (2020). Retrieved from https://www.theguardian.com/world/2020/apr/28/how-did-the-coronavirus-start-where-did-it-come-from-how-did-it-spread-humans-was-it-really-

bats-pangolins-wuhan-animal-market

Hessler, P. (2020). Chinese Citizens are already receiving a Coronavirus vaccine. Retrieved from https://www.newyorker.com/news/news-desk/the-november-surprise-of-chinas-coronavirus-vaccine

Impact of Covid-19 on Belt & Road Initiative - Belt & Road News. (2020). Retrieved from https://www.beltandroad.news/2020/08/01/impact-of-covid-19-on-belt-road-initiative/

Jinping, X. (2017). Full text of President Xi's speech at the opening of the Belt and Road forum. Retrieved from https://www.fmprc.gov.cn/mfa_eng/zxxx_662805/t1465819.shtml

Kenya hails China's Support towards COVID-19 fight. (2020). Retrieved from http://en.nhc.gov.cn/2020-08/25/c_81478.html

Kynge, J., & Li, S. (2020). China faces wave of calls for debt relief on 'Belt and Road' projects. Retrieved from https://www.ft.com/content/5a3192be-27c6-4fe7-87e7-78d4158bd39b

Lam, A. (2020). Domestic Politics in Southeast Asia and Local Backlash against the Belt and Road Initiative - Foreign Policy Research Institute. Retrieved from https://www.fpri.org/article/2020/10/domestic-politics-in-southeast-asia-and-local-backlash-against-the-belt-and-road-initiative/

Majority of China's BRI projects abroad adversely affected by COVID-19 pandemic: Official. (2020). Retrieved from https://economictimes.indiatimes.com/news/international/business/majority-of-chinas-bri-projects-abroad-adversely-affected-by-covid-19-pandemic-official/articleshow/76673279.cms?from=mdr

Malaysian rail project stops Chinese workers returning from Wuhan. (2020). Retrieved from https://www.reuters.com/article/us-china-health-malaysia-idUSKBN1ZU0JK

Malley, R., & Malley, R. (2020); When the Pandemic Hits the Most Vulnerable. Retrieved from https://www.foreignaffairs.com/articles/africa/2020-03-31/when-pandemic-hits-most-vulnerable

Marlow, I., Salna, K., Ondaatji, A., & Li, D. (2020). China's Belt and Road Plan Is Getting Lashed by Coronavirus. Retrieved from https://www.bloombergquint.com/global-economics/china-s-grand-belt-and-road-plan-is-being-lashed-by-coronavirus

Mead, W. (2020). The Coronavirus Hits the Global South. Retrieved from https://www.wsj.com/articles/the-coronavirus-hits-the-global-south-11587422555

Moss, S. (2019). Huawei to build konza data center and smart city in Kenya, with Chinese concession loan. Retrieved from https://www.datacenterdynamics.com/en/news/huawei-build-konza-data-center-and-smart-city-kenya-chinese-concessional-loan/

Paduano, S. (2020). As Africa Faces COVID-19, Chinese Debt Relief is a Welcome Development. Retrieved from https://www.cfr.org/blog/africa-faces-covid-19-chinese-debt-relief-welcome-development

Panda, A. (2020). Sri Lanka Formally Hands Over Hambantota Port to Chinese Firms on 99-Year Lease. Retrieved from https://thediplomat.com/2017/12/sri-lanka-formally-hands-over-hambantota-port-to-chinese-firms-on-99-year-lease/

Peel, M., Hancock, T., Hopkins, V., & Johnson, M. (2020). China ramps up coronavirus help to Europe.

Retrieved from https://www.ft.com/content/186a9260-693a-11ea-800d-da70cff6e4d3

Pro-Active Policies by China in Response to Asian Financial Crisis. (2020, October). Retrieved from https://www.fmprc.gov.cn/mfa_eng/ziliao_665539/3602_665543/3604_665547/t18037.shtml

Qinhua, X. (2019). Opinion: BRI is the most ambitious infrastructure project ever. Retrieved from https://news.cgtn.com/news/3d3d514e77496a4d32457a6333566d54/index.html

Qingqing, C., Yuwei, H., & Shumei, L. (2020). Chinese vaccines in sight, providing promising solution to conquer COVID-19. Retrieved from https://www.globaltimes.cn/content/1204263.shtml

Rich, M. (2020). As Coronavirus Spreads, So Does Anti-Chinese Sentiment. Retrieved from https://www.nytimes.com/2020/01/30/world/asia/coronavirus-chinese-racism.html

Rueda, M. (2020). Colombia turns emergency ventilators to treat COVID-19. Retrieved from https://abcnews.go.com/International/wireStory/colombia-turns-emergency-ventilators-treat-covid-19-72596075

Shalal, A., & Lawder, D. (2020). IMF chief says pandemic will unleash worst recession since Great Depression. Retrieved from https://www.reuters.com/article/us-health-coronavirus-imf-idUSKCN21R1SM

Shepard, W. (2020). Coronavirus Outbreak puts Belt and Road Projects on Hold, For Now. Retrieved from https://www.forbes.com/sites/wadeshepard/2020/02/29/coronavirus-outbreak-puts-belt-and-road-projects-on-hold-for-now/

Stronger South-South Cooperation Key to Tackling Climate Change, Rising Inequality, Global Leaders Stress as High-Level Conference Begins in Buenos Aires. (2019). Retrieved from https://www.un.org/press/en/2019/dev3388.doc.htm

The coronavirus spreads racism against—and among—ethnic Chinese. (2020). Retrieved from https://www.economist.com/china/2020/02/17/the-coronavirus-spreads-racism-against-and-among-ethnic-chinese

Vasovic, A., & Barkin, N. (2018). Chinese 'highway to nowhere' haunts Montenegro. Retrieved from https://www.reuters.com/article/us-china-silkroad-europe-montenegro-insi-idUSKBN1K60QX

Value of medical equipment exports from China from 2008 to 2019. (2019). Retrieved from https://www.statista.com/statistics/436834/china-medtech-export-value/

Vu, K., & Widianto, S. (2020). Anti-China sentiment spreads along with coronavirus. Retrieved from https://www.reuters.com/article/us-china-health-sentiment-idUSKBN1ZT1B6

Wee, S.L. (2020). From Asia to Africa, China Promotes its Vaccines to Win Friends. Retrieved from https://www.nytimes.com/2020/09/11/business/china-vaccine-diplomacy.html

Weinland, D., & Liu, X. (2020). Chinese economy suffers record blow from coronavirus. Retrieved from https://www.ft.com/content/318ae26c-6733-11ea-800d-da70cff6e4d3

What is COVAX?. (2020). Retrieved from https://www.gavi.org/covax-facility

Wolf, M. (2020). Covid-19 will hit developing countries hard. Retrieved from https://www.ft.com/content/31eb2686-a982-11ea-a766-7c300513fe47

Wolf, M. (2020). This pandemic is an ethical challenge. Retrieved from https://www.ft.com/content/de7796b6-6cef-11ea-9bca-bf503995cd6f

YingHui, L. (2020). COVID-19: The Nail in the Coffin of China's Belt and Road Initiative?. Retrieved from https://thediplomat.com/2020/09/covid-19-the-nail-in-the-coffin-of-chinas-belt-and-road-initiative/

Yucheng, L. (2019). China: a Source of Certainty and Stability in a Changing World. Retrieved from https://www.fmprc.gov.cn/mfa_eng/wjdt_665385/zyjh_665391/t1709807.shtml

Vaccine for All: Projecting Indonesia's Role in Vaccine Production to Fight the Covid-19 Pandemic in South-South Countries

Fadhilah Permata Nira. Fahrizal Lazuardi. Ferdian Ahya Al Putra. Zia'ulhaq As Shidqi

Abstract

The Global pandemic Covid-19 gives a huge impact on global health resilience. South-South Countries (SSC) are also affected by this pandemic. There are 63% of active cases and 58% of deceased cases confirmed, higher than the average cases in the world. This condition depicts that SSC is mostly vulnerable due toa lack of quality on health infrastructure. It becomes worse because every country seems to believe in zero-sum game by their policies such as protectionism for limiting export of medical equipment. Indonesia is a member of SSC which is playing an important role in solving this pandemic. Currently, Indonesia is in process to produce the Merah Putih vaccine, as the result of collaboration between Bio Farma & Eijkman Institute and Bio Farma-Sinovac vaccine has reached the third phase as well. The writers believe that it will be the problem solver for the other countries that have limited access to afford the vaccines. This research uses neoliberalism institutional approach and qualitative method to analyze how Indonesian Government, particularly The National Coordination Team on South-South Cooperation (NCT-SSC) and the other relevant stakeholders in solving this pandemic by those vaccines distribution (Merah Putih and Biofarma-Sinovac) to SSC both through trade or grant. Based on this approach, Indonesia should take this opportunity as a leader for solving this problem and strengthening SSC.

Keywords: South-South Countries, Vaccine, Covid-19, Neoliberalism Institutional

Introduction

Covid-19 is the biggest health crisis faced by the world at present. The World Health Organization (WHO) has declared Covid-19 as a global pandemic. There is no single country that is immune to the spread of the Covid-19 pandemic, where 210 countries/regions have been infected with a total of 35,274,993 cases and 1,038,534 deaths (WHO, 2020). This pandemic does not only affect the health sector but also affects almost all aspects, from economic, social, tourism, education, etc. In fact, not all countries in the world have the same capacity in handling this global pandemic, especially the countries that are categorized as least developed countries (LDCs) and developing countries.

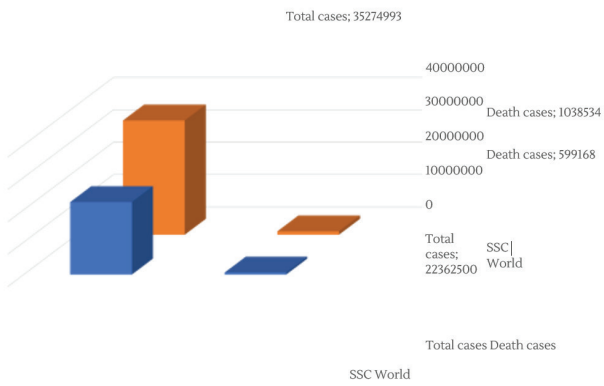


Figure 1. Comparison of the Covid-19 numbers in SSC and the World

SSC that consists of LDCs and developing countries is difficult to deal with this global pandemic. SSC contributed 22.362.500 (63%) active cases and 599.168 (57%) deaths cases of the total Covid-19 cases in the world (WHO, 2020). These high cases were caused by the inadequate quality of health facilities, limitations of economy, and resources to prevent Covid-19. Indeed, this certainly puts these countries in a dilemmatic situation, whether to prevent the spread of the Covid-19 or to protect the national economics from recession.

One of the most ideal efforts is currently to take further measures through the production of vaccines. Countries in the world, however, are competing to create a vaccine as the answer for this problem. Indonesia is one of the countries that is producing vaccines, both independently and collaborating with several countries. Nowadays, the potential vaccines being developed by Indonesia are Sinovac vaccine, the result of a collaboration between Bio Farma and Biotech Sinovac from China; Kimia Farma in cooperation with Group 42 (G42) of the United Arab Emirates (UAE); Kalbe Farma cooperates in vaccine development with the South Korean company Genexine; and Merah Putih Vaccine which is as the result of collaboration between the Eijkman Biomolecular Institute and Bio Farma. This shows Indonesia's seriousness and independence in producing vaccines, which are not only intended for the Indonesian, but also other countries. This effort is getting more interesting considering that Indonesia is a member of SSC.

This momentum certainly provides an opportunity for Indonesia to play a role as leader for southern countries. SSC consists of LDCs and developing countries that are facing various obstacles during this pandemic, both in terms of health facilities and infrastructure as well as economic aspects. This situation provides an opportunity for Indonesia to give its role, especially in vaccine production as the answer for the problems experienced by SSC countries. However, Indonesia has a big challenge in this regard. First, Indonesia must fulfill its domestic needs. Then, questions will arise such as how effective the vaccine is and how the mechanism for distributing that vaccine. Moreover, Indonesia has another challenge, that is to say trust deficit, when many countries in the world are skeptical of Indonesia's capacity in handling the Covid-19 pandemic, even 59 countries have restricted Indonesia from entering their countries as a result. This research is important to understand how Indonesia's role is in producing vaccines and distributing them to

southern countries to fight the Covid-19 pandemic amidst various dynamics and challenges.

Methods

Descriptive qualitative method

This paper will conduct research with descriptive research. According to Sugiyono, qualitative research is also called interpretive research because the research data is an interpretation of the data found in the field (Sugiyono, 2013). Hence, qualitative research explores attitudes, behaviour and experiences through such methods as interviews or focus groups (Dawson, 2007). Furthermore, Hennink, Hutter, and Bailey explained that qualitative research is an approach that makes it possible to examine people's experiences using specific research methods such as in-depth interviews, focus group discussions, observation, content analysis, visual methods and biographies (Hennink, Hutter, & Bailey, 2011).

This research will apply structured interviews to collect and to confirm data that was obtained from the online sources. In structured interviews, the researcher decides on a structure for the interview before start; this structure may be a list of topics, or a list of questions so tightly scripted that it's essentially a spoken questionnaire (Rugg & Petre, 2007). Moreover, a structured interview or standardized interview is a type of interview that has been scheduled and has a list of questions. In this type of interview, the interviewer is obliged to record the responses or answers from the respondent. The respondents or contributors interviewed were:

1. Mr. Arifi Saiman, Indonesian Consul General in New York;
2. Mr. M. Rahman Roestan, Operations Director of PT Bio Farma; and 3. Mr. Ignatius Agung Satyawan, Head of the International Relations Study Program, Universitas Sebelas Maret (UNS).

The data analysis technique used in this research is qualitative data analysis. Qualitative data analysis is carried out if the empirical data obtained is qualitative data in the form of a collection of words and not a series of numbers and cannot be arranged into categories/classification structures. According to Miles and Huberman, after collecting data, analysis activities will include three main lines, namely: data reduction, data presentation, and drawing conclusions (Silalahi, 2009).

Liberal Institutionalism

Liberal institutionalism argues that emphasis should be placed on global governance and international organizations as a way of explaining international relations. Institutionalism places emphasis on the role that common goals play in the international system and the ability of international organizations to get states to cooperate. Furthermore, within a liberal institutionalist model states seek to maximize absolute gains through cooperation, states are therefore less concerned about the advantages achieved by other states in cooperative arrangements (Devitt, 2011).

Keohane and Joseph Nye labelled the human global system as 'complex interdependence' and suggested that under certain circumstances states could use international institutions to bolster cooperation (O'Brien & Williams, 2016). Institutional liberals claim that international institutions help promote cooperation among states. International institutions help advance cooperation between states and therefore help reduce the mistrust between states and the fear of states with each other

that is considered to be a traditional problem associated with international anarchy (Jackson & Sorensen, 2014). Relating to the Covid-19 pandemic, institutional liberalism approaches suggest that each country must prioritize cooperation in overcoming this problem, one of which is cooperation in the production and distribution of Covid-19 vaccines through South-South Cooperation as an international cooperation framework.

State Strength Concept

Oatley argues that the various institutional characteristics that make some states more and others less able to design and implement coherent industrial policies can be summarized by the concept of state strength (Oatley, 2011). According to Oatley, state strength is defined as the level to which national policymakers, a category that includes elected and appointed officials, are not hampered from domestic interest-group pressures. The characters of strong states are centralization of authority, coordination among state agencies, and a limited number of channels through which societal actors can attempt to influence policy. Meanwhile, weak states are characterized by decentralized authority, a lack of coordination among agencies, and a large number of channels through which domestic interest groups can influence economic policy. Hence, the state strength concept is used to analyze how domestic political dynamics influence the foreign policy of a country. In this context, it will elaborate deeper that the domestic needs and political dynamics in Indonesia becomes a big challenge toward Indonesia's role in vaccine production and distribution in SSC.

Result and Discussion

Covid-19 Pandemic: Searching for Vaccine

As a global pandemic, Covid-19 has affected countries in many aspects such as economy, tourism, social, education, health etc. So far, no country could stop the spread of this pandemic. Based on the official report of the World Health Organization to 6 October 2020 there are 210 countries/regions that have been infected with a total of 35,274,993 cases and 1,038,534 deaths (WHO, 2020). The data shows that many countries are difficult to deal with coronavirus and decrease the growth of cases. The differences in taking control of this pandemic by each country are based on their capability. Many developed countries could decrease the growth of Covid-19 better than less developing countries and developing countries (BBCNews, 2020).

Currently, Indonesia is still researching to produce the proper vaccines for domestic and foreign needs. Bio Farma as a state-owned enterprise develops vaccines in several ways that are collaborating with domestic researchers and developing cooperation at the national level with various research institutions and vaccine production factories (Roestan, 2020). At present, the potential vaccines developed by Indonesia such as Sinovac vaccine, the result of a collaboration between Bio Farma and Biotech Sinovac from China, Kimia Farma in cooperation with Group 42 (G42) of the United Arab Emirates (UAE), Kalbe Farma cooperates in vaccine development with the South Korean company Genexine, and Merah Putih Vaccine which is the result of collaboration between the Eijkman Biomolecular Institute and Bio Farma (CNNIndonesia, 2020). This explained how serious and independent Indonesia is to gain the best solution for solving this pandemic.

Operations Director of Bio Farma, Mr. Rahman M. Roestan explained that vaccine production is one of the main strategies used by Indonesia. It becomes one of main strategies because Indonesia has capability and legitimacy in producing vaccines. This can be seen since Indonesia has succeeded in producing and distributing polio vaccines domestically and globally. By using vaccines, Indonesia was able to deal with polio outbreak (Roestan, 2020). Based on this experience, he feels optimistic that Bio Farma capable to produce vaccines which has good quality and could fulfill the domestic needs. This vaccine is expected to be able to fulfill 70% vaccine needs in Indonesia (Roestan, 2020). Another potential vaccine is Merah Putih vaccine. This vaccine is using virus strain originated from Indonesia, but the production takes longer which is estimated could be used in 2022. Government hopes this can meet the needs of 20% of Indonesian (TheJakartaPost, 2020).

In preparing for vaccine production, the government already has a domestic vaccine distribution scheme. In the vaccine distribution process, the Indonesian government prioritizes domestic needs. This is because Bio Farma as a state-owned enterprise has the main responsibility to fulfill the needs of the Indonesian. On the other hand, Indonesia also has the desire to export vaccines to other countries, especially developing countries. Based on a statement from the Director General of Disease Prevention and Control Achmad Yurianto, the early stage vaccine recipient scheme is intended for medical officers who have direct contact with Covid-19 patients and public services such as the POLRI and TNI. There are 9.1 million doses which are prepared for them by using Indonesia's revised budget. Furthermore, on the next step the government is preparing a scheme for vaccine recipients with independent costs. This group will consist of people whose in the range age from over 18 years and under 60 years and do not have chronic disease. Nevertheless, it does not mean people in the range age under 18 and over 60 will be ignored (Fahmiasari, 2020).

Bringing the spirit of humanity for solving this pandemic makes Indonesia work hard. Indonesia's work gets affordable and good vaccines both domestically and globally. Domestically, Indonesia strengthened the effort through the quality of Indonesian researchers and Indonesia's manufacturing capacity. Meanwhile, Indonesia also makes great agreement and coordination with other countries. All of the efforts of Indonesia through Bio Farma shows that Indonesia is serious to become a vaccine manufacturer and have a strong desire to meet domestic and international needs. Cooperation between countries is used as a good platform to resolve this pandemic, one of them is SSC. Indonesia hopes SSC will give many opportunities for all of its members. Hopefully, Indonesia will be able to take a role and take advantage of this institution to spread the spirit of cooperation and humanity.

3.2 South-South Cooperation: A Global Challenge with a Global Response SSC has a higher percentage of coronavirus than the world average which is 22.362.500 (63%) active cases and 599.168 (57%) deaths cases (WHO, 2020). Indeed, there is divergence and asymmetry between North-South in utilizing resources to handle the Covid-19 crisis. First, the significant differences in the economic conditions of developed and developing countries that determine their respective vulnerabilities to external shocks and capacity to respond. As shown on Figure 2, while developed countries are providing trillions of dollars in relief, support and bailouts, developing countries are more constrained on the fiscal, monetary and external payments fronts making it difficult for many

of them to respond to the multiple shocks triggered by the crisis (UNCTAD, 2020).

In addition to financial problems – according to the UNCTAD report, SSC is also most exposed to Covid-19 due to lack of health infrastructure. For example, in low income countries, health spending was only US$41 a person in 2017, compared with US$2,937 in high income countries – a difference of more than 70 times (WHO, 2019). In terms of medical personnel, LDCs have only one doctor per 2000 people, developing countries have a ratio of one doctor per 1000 people, while the European Union region has 3,7 doctors per 1000 people (Figure 3) (World Bank, 2018). Developing countries also have a relatively small capacity of hospital beds per 1,000. Regions such South Asia only 0,67, Latin America & Carribean 2,17 compared to European Union 6,10 (Figure 3) (World Bank, 2014). By looking at these large inequalities between North-South, the South is more vulnerable and will take more time to recover from Covid-19 (UNCTAD, 2020).

Taking into account the current pandemic, the collaboration among SSC countries is now more important than ever (United Nations, 2020). Covid-19 have revealed that medicines and vaccine discoveries need to be guaranteed available to all, particularly to the most vulnerable countries such as SSC. Thus, collective R&D efforts in medical and vaccine research should be the top priority, involve sharing results, methodologies and testing best practices that can prepare countries in the South to fight pandemics like Covid-19 (UNCTAD, 2020). Moreover, UNOSSC at both global and regional levels, has been actively assessing needs in the Global South, facilitating connections, sharing knowledge and best practices, sourcing medical personal protective equipment (PPE) suppliers information through partners networks, and urging strong international solidarity and support among governments and people as we all jointly respond to the pandemic (South-South Galaxy, 2020).

This response defines how SSC becomes a forum for developing countries to work together in overcoming this pandemic. This is appropriate with liberal institutionalism's ideas which shape international institutions, a forum for cooperation and building solidarity in solving pandemic problems. Indonesia as emerging economies with more advanced medical research capabilities could lead and create a strong call for common action and resource pooling. However, to realize it, firstly, this paper will look at the opportunities and challenges for Indonesia to become a producer and distributor of vaccines for SSC.

Opportunities

Indonesia is a member of the G20 which has the largest economic growth in the world. Indonesia's economic development in 2019 is the second largest after China. This development is marked by the support of the government which prepares 20% of the APBN budget for development in Indonesia. Indonesia also plays a role in various world organizations such as the United Nations, ASEAN, OIC, WHO, SSC, and other international organizations. One of Indonesia's important roles in this context is that Indonesia has received the mandate as Organization of Islamic Cooperation (OIC) Center of Excellence for Vaccines and Biotechnology Products in Bandung. Indonesia stated the importance of health issues and emphasized Indonesia's commitment in promoting health issues. This is enhanced with Indonesia's capacity as one of the only two countries in OIC that

has WHO prequalified vaccine products. Indonesia also committed to optimize its role as Chair of Foreign Policy and Global Health to get concrete results that are beneficial for OIC members (Roestan, 2020).

Indonesia's important role in international organizations is supported by the quality of its diplomats, the existence of Indonesian representative offices in SSC, and Indonesia's foreign policy. Indonesia has 132 representatives in abroad consist of 44 technical attaches (consisting of 22 trade attaches, 4 agricultural attaches, 5 financial attaches, and 13 labour attaches), 19 Indonesian Trade Promotion Centers (ITPC), 8 Indonesian Investment Promotion Centers (IIPC), and 23 Visit Indonesia Tourism Office (VITO). In this case, the presence of Indonesian representatives abroad is useful to be the spearhead in fighting for interests in partner countries, especially in the current pandemic situation (Saiman, 2020). Diplomacy plays an important and significant role, especially during the corona pandemic (Covid-19). Diplomacy has become a channel of communication with other countries in building the trust and Indonesian identity in the middle of the global stage, including during this pandemic. The existence of Indonesian diplomats and embassy offices in various countries has greatly assisted Indonesia's diplomacy during this pandemic period amid limited meetings and access to partner countries.

Indonesia's Diplomacy Infrastructure Abroad

Indonesia applies Free and Active policy. This Free and Active policy leads Indonesia to achieve global freedom, mutual respect and peace. This kind of foreign policy provides benefits where Indonesia can freely cooperate with anyone. In this pandemic, cooperation between countries is urgently needed.

Indonesia has an important role in SSC. Since becoming the chairman of the NAM (Non-Aligned Movement) in 1992, Indonesia has firmly launched foreign aid, especially technical cooperation with developing countries within the SSC framework. Indonesia has formed The National Coordination Team on The South-South Technical Cooperation (SSTC). In this pandemic, Indonesia believes that Covid-19 is a world problem and each country has to work hand in hand for solving it. A togetherness effort between countries is using regional coordination such

as cooperation of SSC. According to institutional liberalism approaches suggest that each country must prioritize cooperation in overcoming this problem, one of which is cooperation in the production and distribution of Covid-19 vaccines through South-South Cooperation as an international cooperation framework.

In order to enhance its role and influence in global partnerships, Indonesia takes a position as an important actor in SSC's participation. One of Indonesia's contributions to the SSC framework is the transfer of knowledge in the field of vaccine. Indonesia is experienced in the manufacturing of vaccines independently through its State-Owned Enterprise, Bio Farma. Indonesia's vaccination technology is advanced toward other developing countries because it has expertise and experience in producing vaccines covering more than 150 countries and its products have been recognized by the World Health Organization. Therefore, the Organization of Islamic Conference in cooperation with the State Secretariat Ministry aims to organize vaccine management workshops for member countries as part of knowledge sharing in the framework of South-South Cooperation (National Coordination Team of SSC, 2016).

Institutional Liberalism sees that Bio Farma has a big role in this vaccine production since they have been involved in the international pharmaceutical world since 1997. Bio Farma is listed as one of 29 vaccine producers in the world that has been prequalified by the World Health Organization (WHO) as a condition of meeting Good Manufacturing Practices (GMP) (WHO, 2020). Despite that, an interesting fact is that Bio Farma is selected as President of the Developing Countries Vaccine Manufacturer Network (DCVMN), for the two periods, 2012-2014 and 2014-2016. Bio Farma also has a good credibility in vaccine development by members of OIC. Bio Farma also transfers knowledge of vaccine technology for independence in member countries of the OIC. In 2019, there were more than 16 OIC members who learned directly from Bio Farma regarding vaccine production and distribution (UOBKayhian News, 2020).

Currently, Bio Farma has several products qualified by the World Health Organization (WHO), those are: Tetanus Toxoid (TT) vial; Diphtheria and Tetanus (DT); Diphtheria, Tetanus Toxoids and Pertussis (DTP); Tetanus Toxoid (TT) Uniject; Hepatitis B; Tetanus and Diphtheria (Td); bivalent oral polio vaccine (bOPV) (type 1 and 3); and DTP-HB-Hib (Pentabio). Besides gaining prequalified (PQ) WHO for product quality, Bio Farma is also obtaining WHO prequalified for their laboratory. The quality management system of Bio Farma has been certified (ISO 9001; 2015) which is integrated with environment (ISO 14001: 2004) and K3 (Occupational Health and Safety) - OHSAS 18001: 2007 from PT Lyoy'd Register Quality Assurance.

Therefore, through this WHO, ISO and OHSAS certification and high commitment to be a green company can make Bio Farma become a competitive power to compete in the global market. For several fundamental vaccine immunization products, Bio Farma supplied to UNICEF and through bilateral cooperation. Until late 2018, Bio Farma supplied vaccines such as poliomyelitis, measles, TT, DTP, TD to several developing countries such as Pakistan, Afghanistan, Sudan, Maroko and etc. (Bio Farma, 2019).

Bio Farma has production capacities up to 3.2 billion vaccines per year. In this covid 19 pandemic situation, Bio Farma with the Eijkman Institute, BPPT, LIPI, BPOM, Ministry of Research

and Technology, and universities in Indonesia are doing research to produce the Covid-19 vaccine (Merah Putih) that predicted could be used in 2022. Bio Farma also has prepared a particular production capacity for the Covid-19 vaccine of 250 million in early 2021 (Basyir, 2020).

Challenge

Indonesia has big challenges in terms of the production of the Covid-19 vaccine. Apart from the long production stages, there is a potential for conflict of interest between domestic and global needs. The conflict of interest refers to the number of vaccine doses intended for domestic needs. Based on Badan Pusat Statistika (BPS), the total population of Indonesia as in 2020 is projected to be able to reach 271 million (Katadata, 2018). One person needs two doses of the vaccine. The Indonesian government has a projection to provide vaccines for 70% of Indonesia's population as WHO suggests, so that if it is calculated using two doses, the amount needed is around 380 million doses. Meanwhile, based on interviewing with Operations Director of Bio Farma, Rahman Roestan, the vaccine production capacity until November 2020 reached 100 million doses, and until January 2021 there are additional 150 million doses, so that the total production capacity only reached 250 million. This means that the domestic need is not sufficient yet, especially if it is projected for global needs, which in this context is for south-south countries, the amount is still far from the minimum requirement. This situation, if not accompanied by the right steps, could create a conflict of interest between domestic and global interests. This means that the government, before distributing vaccines to SSC, must meet or prioritize domestic needs before fulfilling the global needs. As a consequence, it will take a long time for Indonesia to distribute the vaccine. The challenge in terms of vaccine production also lies in the raw materials for making vaccines that must be imported (Roestan, 2020). This limitation of course causes the production of vaccines to be constrained, both in terms of time and production costs.

Furthermore, many technology accesses are protected by developed countries under the pretext of Intellectual Property (IPR). IPR in vaccines should be eliminated because this is related to the common good. Rahman cited the case of H5N1 (avian influenza) vaccine which was patented by the West, even though the source of the virus for the vaccine came from Indonesia (Roestan, 2020). This is certainly a challenge that must be faced by Indonesia, to ensure that the vaccine production process works properly and on time. Another challenge that arises is the limitations of the current Covid-19 vaccine producers. Countries in the world are competing for vaccine producers, including Indonesia. On the other hand, Indonesia's foreign policy which is friends with anyone is an advantage, however, on the other hand it can affect Indonesia's relations with certain countries. This means that Indonesia cannot provide exposure to whom they pour funds for these producers, to maintain relationships with other producers (Roestan, 2020).

Another problem that arises is that the information regarding the production of the Covid-19 vaccine is biased. There is various information stating that the vaccines produced by Indonesia are unsafe and have the potential to exacerbate Covid-19 infection. According to an expert in international political economy from Universitas Sebelas Maret Surakarta, Agung Satyawan, the government needs to carry out information management so that it does not cause bigger problems,

because this affects the image of Indonesia in the world regarding the production of Covid-19 vaccine. This is important to gain trust from SSC that the vaccines produced by Indonesia can work properly. Furthermore, Indonesia's image in handling Covid-19 in Indonesia is another challenge. The Indonesian government in handling Covid 19 is considered unprofessional, such as fluctuating (inconsistent) policies, implementation of indecisive policies, and the number of Covid-19 sampling tests that are not comparable to the comparison of population in Indonesia, which then causing tracing to the spread of Covid-19 in Indonesia is not optimal. This has an impact on restrictions by 59 countries on Indonesia from entering their territory, as well as warnings against its citizens not to enter Indonesia during the pandemic (Wijaya, 2020). According to Agung Satyawan, this is a blunder, especially in relation to the global market's trust in vaccine products that will be distributed to Southern countries. He gave an example that currently Indonesia is implementing a social restriction policy, however, the government's policy when passing the Omnibus Law has caused demonstrations in a number of places, so this has potential to increase the Covid-19 case in Indonesia (Satyawan, 2020). Therefore, Indonesian government must pay attention to this blunder by taking decisive steps in handling Covid-19 to restore world trust in Indonesia.

Historically, Indonesia has had a strong bargaining position in the SSC since Indonesia has previously initiated various movements such as the non-aligned movement, and has contributed a lot in providing assistance to developing countries, but what needs to be done is to form an institution to coordinate the distribution of these vaccines. Indonesia needs to establish institution governance in order to manage the vaccine production. According to Agung Satyawan, Indonesian government institutions are currently still sectoral ego, meaning that each institution has its own interests (Satyawan, 2020). This condition has an impact on Indonesian governance, which in this context affects coordination with SSC regarding the distribution of vaccines. He gave examples, such as Japan which has the Japan International Cooperation Agency (JICA) and Canada has the Canadian International Development Agency (CIDA), which is a special agency to manage international cooperation, especially in the economic sector. Currently, Indonesia does not have it, where the dominant institution in managing this is usually borne by the Ministry of Foreign Affairs of the Republic of Indonesia. According to Christensen et al, in the "Governance of Handling Covid-19 in Indonesia: Preliminary Study", there needs to be institutional synergy and coordination in dealing with crises. Crisis situations are multidimensional, and therefore handling them requires the involvement and synergy of all elements of governance (Mas'udi & Winanti, 2020). Therefore, it is necessary to have a Ministerial-level Institution that coordinates government agencies in the distribution of this vaccine, especially in relation to SSC. Relying on Indonesian representatives abroad is not enough, so it is necessary to have special institutions such as JICA and CIDA to make approaches to SSC. This institution will then become the spearhead of Indonesia's diplomacy and cooperation with Southern countries regarding the Covid-19 vaccine. This is in accordance with thinion of Arifi Saiman that this effort is a form of multilateral effort that might be carried out by Indonesia (Saiman, 2020).

Last, but not least, another big challenge is the progress of the Merah Putih vaccine. Operations Director of Bio Farma, Rahman Roestan, said that the potential vaccine which is eligible

for Indonesia to distribute to the SSC is the Merah Putih vaccine. Therefore, the capabilities of Indonesia to distribute vaccines to SSC heavily depends on the research progress conducted by Eijkman. Furthermore, the vaccine has to show no significant side effects during the clinical testing phase as well. Besides that, it is well known that Bio Farma's ability to distribute vaccines is beyond doubt due to their experience. But the main homework to be pursued is to increase the production capacity of the Merah Putih vaccine to fulfill domestic needs. After domestic needs are secured and the production of the Merah Putih vaccine is reaching surplus, distribution of the vaccine to SSC will be very possible to be realized. However, this requires a considerable investment of time, commitment, and resources in the long term (Roestan, 2020).

Conclusion

In dealing with the Covid-19 pandemic, Indonesia is making various efforts to overcome Covid-19 pandemic, one of which is by vaccine production. The effort to produce vaccines in Indonesia was taken over by state-owned enterprise, Bio Farma. Bio Farma conducts research by involving domestic researchers and foreign companies. Even if Bio Farma does many efforts to get good and affordable vaccine, Indonesia is still facing many obstacles. There are at least four challenges that Indonesia faces in this vaccine production and distribution. First, Indonesia has to manage the risk of conflict of interest that may occur. This refers to the fulfilling vaccine for domestic and global needs. Second, information management must be carried out properly to prevent the biased information related Covid-19 vaccine. Third, there must be a governance institution to coordinate and negotiate the vaccine among the members of SSC. The last challenge is the time, commitment, and resources needed in the long term to realize the Merah Putih vaccine.

Finally, this paper needs deeper and more comprehensive future research. It should be noted that the recommendations in this paper are compiled in a very short time. It also caused some important respondents such as the Ministry of National Development Planning/National Development Planning Agency (Bappenas), The Indonesian Food and Drug Authority, and Ministry of Health, and particularly the consortium of Merah Putih vaccine have not been reached in this paper. The different perspectives of these stakeholders can enrich the recommendations of this paper.

Recommendations:

1. Increase the capacity of Bio Farma vaccine production particularly for the Covid-19 by reallocating other vaccine capacities for Covid-19 vaccine compared with making new factories in the current situation. Whereas for long-term, Bio Farma could allocate for making new factories which could be a preventive step to deal with any virus in the future. The government could collaborate with private vaccine companies as well to increase production of the Covid-19 vaccine.
2. Domestically, distribution and socialization Covid-19 vaccines could be promoted through cooperation with Puskesmas, as well as the distribution of the polio vaccine. Through that method of distribution, Indonesia was successful in distributing vaccines to all Indonesians. The procedure for distributing vaccines both at home and abroad must be clear and need synergy between all parties. Meanwhile, the framework of Indonesian Institution (Indonesian Aid) can be

utilized in distributing vaccines to SSC in the form of grants or technical assistance or through trade mechanisms by Bio Farma.

3. Establishing supportive regulation for state-owned enterprises especially, Bio Farma. Through these incentives, hopefully Bio Farma could freely create cooperation in sharing technology and knowledge about vaccines and export vaccines to other countries.
4. Improving cooperation between stakeholders in Indonesia particularly about Indonesia development in outbreak situations. It refers to establishing institutional governance to deal with SSC regarding the vaccine distribution.
5. Managing information about production of Covid-19 vaccine to prevent the biased information spreading in public.

Bibliography

Basyir, H. (2020, October 4). LIVE STREAMING - RDP Komisi VI DPR RI. Retrieved from Youtube: https://www.youtube.com/watch?v=anGyRdE3Kag

BBCNews. (2020). Covid-19 pandemic: Tracking the global coronavirus outbreak. Retrieved from BBCNews: https://www.bbc.com/news/world-51235105

Bio Farma. (2019). Prospek Usaha Perusahaan 2018. Retrieved from Bio Farma: http://www.biofarma.co.id/wp-content/uploads/2017/05/AR_BIO_OJK_ARA_JUL24- final_-Capaian-dan-Prospek-Perusahaan.pdf

CNNIndonesia. (2020). Kerja sama vaksin Pemerintah Indonesia. Retrieved from CNN: https://www.bing.com/search?q=kerja+sama+vaksin+pemerintah+Indonesia&cvid=975c9ec7747041baae4ad9e0d1ce7d85&FORM=ANAB01&PC=U531#

Dawson, C. (2007). A Practical Guide to Research Methods, 3rd edn. Oxford, United Kingdom: How To Content Ltd.

Devitt, R. (2011). Liberal Institutionalism: An Alternative IR Theory or Just Maintaining the Status Quo? 11.

Fahmiasari, H. (2020, October 6). How to distribute vaccines is the big question. Retrieved from TheJakartaPost: https://www.thejakartapost.com/paper/2020/10/04/preordering potential-covid-19-vaccines-a-selfish-strategy.html

Hennink, M., Hutter, I., & Bailey, A. (2011). Qualitative Research Methods. London: SAGE. Jackson, R., & Sorensen, G. (2014). Pengantar Studi Ilmu HUbungan Internasional Edisi Kelima. Yogyakarta: Pustaka Pelajar.

Katadata. (2018, March 3). Penduduk Inodnesia Diproyeksi Mencapai 271 Juta Jiwa. Retrieved from Katadata: https://databoks.katadata.co.id/datapublish/2018/03/06/2020-penduduk indonesia-diproyeksi-mencapai-271-juta-jiwa

Mas'udi, W., & Winanti, P. S. (2020). Covid-19: Dari Krisis Kesehatan ke Krisis Tata Kelola. Yogyakarta: Gadjah Mada Univeristy Press.

National Coordination Team of SSC. (2016). Annual Report of Indonesia's South-South and Triangular Cooperation (SSTC). Government of Indonesia.

Oatley, T. (2011). International Political Economy Interests and Institutions in the Global Economy 5th

Edition. New York: Pearson Education Inc.

O'Brien, R., & Williams, M. (2016). Global Political Economy Evolution and Dynamics 5th Ed.,. London: Macmillan.

Roestan, R. (2020, October 17-18). Vaccine for All: Projecting Indonesia's Role in Vaccine Production to Fight Covid-19 Pandemic in South-South Countries. (F. P. Nira, F. Lazuardi, F. A. Putra, & Z. A. Shidqi, Interviewers)

Rugg, G., & Petre, M. (2007). A Gentle Guide to Research Methods. New York: Open University Press.

Saiman, A. (2020, October 17). Vaccine for All: Projecting Indonesia's Role in Vaccine Production to Fight the Covid-19 Pandemic in South-South Countries. (F. P. Nira, F. Lazuardi, F. A. Putra, & Z. A. Shidqi, Interviewers)

Satyawan, I. A. (2020, October 21). Vaccine for All: Projecting Indonesia's Role in Vaccine Production to Fight the Covid-19 Pandemic in South-South Countries. (F. P. Nira, F. Lazuardi, F. A. Putra, & Z. A. Shidqi, Interviewers)

Silalahi, U. (2009). Metode Penelitian Sosial. Bandung: PT Refika Aditama.

South-South Galaxy. (2020). UNOSSC in Action in Response to the Novel Coronavirus (COVID-19) Pandemic. Retrieved from South-South Galaxy: https://www.southsouth galaxy.org/news/unossc-in-action-in-response-to-the-novel-coronavirus-covid-19/

Sugiyono. (2013). Metode Penelitian Kuantitatif, Kualitatif, dan R&D. Bandung: Alfabeta. TheJakartaPost. (2020, October 15). Development of Merah Putih vaccine reaches 55 percent: Eijkman. Retrieved from TheJakartaPost:

https://www.thejakartapost.com/news/2020/10/15/development-of-merah-putih-vaccine reaches-55-percent-eijkman.html

UNCTAD. (2020). From the Great Lockdown to the Great Meltdown: Developing Country Debt in the Time of Covid-19. Geneva: United Nations.

UNCTAD. (2020). South-South Cooperation at the time of COVID-19: Building Solidarity Among Developing countries. New York: United Nations. Retrieved from

https://unctad.org/system/files/official-document/gdsinf2020d4_en.pdf

United Nations. (2020, September 12). International Day for South-South Cooperation. Retrieved from United Nations: https://www.un.org/en/observances/south-south cooperation-day

UOBKayhian News. (2020, October 22). CEPI Percayakan Bio Farma untuk Produksi Vaksin Covid-19. Retrieved from UOBKayhian News:

https://www.utrade.co.id/news/ShowNews.aspx?id=88130648

WHO. (2019). Global Spending on Health: A World in Transition. Retrieved from World Health Organization: https://www.who.int/health_financing/documents/health-expenditure report

2019.pdf?ua=1#:~:text=Two%20years%20into%20the%20Sustainable,US%24%207.6% 20trillion%20 in%202016

WHO. (2020, October 6). WHO Coronavirus Disease (COVID-19) Dashboard. Retrieved from https:// covid19.who.int/: https://covid19.who.int/

WHO. (2020). WHOPIRs for manufacturing sites inspected by WHO-PQT. Retrieved from World Health Organization:
https://www.who.int/immunization_standards/vaccine_quality/WHOPIRs_Listing/en/ Wijaya, Y. G. (2020, March 20). Daftar 59 Negara yang Melarang Masuk WNA dan WNI Terkait Virus Corona. Retrieved from Kompas:
https://travel.kompas.com/read/2020/03/20/074430327/daftar-59-negara-yang melarang-masuk-wna-dan-wni-terkait-virus-corona?page=all
World Bank. (2014). Hospital beds (per 1,000 people). Retrieved from World Bank: https://data.worldbank.org/indicator/SH.MED.BEDS.ZS?locations=EU-XU-ZJ-Z4-8S ZG&name_desc=true&start=2014&year=2018
World Bank. (2018). Physicians (per 1,000 people). Retrieved from World Bank: https://data.worldbank.org/indicator/SH.MED.PHYS.ZS?end=2017&locations=EU-XU ZJ-Z4-8S-ZG&name_desc=true&start=2017&view=chart&year=2018


Institute of
International
Studies
DEPT. OF INTERNATIONAL RELATIONS
UNIVERSITAS GADJAH MADA


Department of
International Relations
FACULTY OF SOCIAL AND POLITICAL SCIENCES
UNIVERSITAS GADJAH MADA