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THE ROLES OF GOVERNMENTS IN IMPLEMENTING LARGE-SCALE SOCIAL RESTRICTIONS TO ACCELERATE COVID-19 HANDLING

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***Abstract**: Based on the data obtained from wordometers per April 2021, coronavirus infection cases throughout the world reached 141,982,642 cases. 3,032,005 people died and 120,513,253 people recovered. In handling Covid-19, Indonesia has implemented Social Distancing and Rapid Test. The government has issued some regulations related to the Large-Scale Social Restrictions (known as PSBB/Pembatasan Sosial Berskala Besar). At the end of January 2020, China has immediately and assertively locked down Wuhan, a city with a total population of 11 million people. It was the biggest lockdown made throughout history. The problem in this research is how the governments Indonesia and China dealt with Covid-19 in its incipient phase. This research used a qualitative method based on the randomly-selected mapped news in accordance with the research focus and social distancing regulations enforced in Indonesia and China. Furthermore, those materials were systematically classified to prove that social distancing regulations can well reduce the spread of Covid-19 both in Indonesia and China. The research results show that the COVID-19 handling in each country is different.*

***Keywords:** public administration, government, large-scale social restrictions, Covid-19*

1. Introduction

Covid-19 is a new type of coronavirus possibly transmitted to humans (Ji et al., 2020). This virus can attack anyone, including babies, children, adults, elderly, pregnant

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women, and breastfeeding mothers (Rollins et al., 2021). COVID-19 was first discovered in Wuhan, China, at the end of December 2019. This virus spread rapidly throughout China and several countries, including Indonesia. The Indonesian President, Joko Widodo, first reported that there were two cases of COVID-19 infection in Indonesia on March 2, 2020. The patients got infected at an event in Jakarta where they got in contact with foreigners from Japan living in Malaysia. After the event, the patients experienced fever, coughing, and shortness of breath. The Indonesian Government issued Regulation No. 21/2020 regarding Large-Scale Social Restrictions to Accelerate the Handling of Covid-19, which states what regions in the country have to implement the restrictions, depending on the number of infections. The concerned regions are at least asked to close all schools and workplaces. In addition, the regions must also limit their religious and other activities in public places or facilities. However, the government has also asserted that the restrictions must still pay attention to the fulfillment of people's basic needs, especially related to health services and food for their daily lives. Each country has different national conditions and capabilities, while each outbreak has its own characteristics. Therefore, not all countries can implement similar policies in dealing with the Covid-19 pandemic (Balmford et al., 2020). As the epicenter country of the virus, China has tried to deal with the spread of Covid-19 before worsening the country's condition (Mishra et al., 2020). After four months in which the virus has spread throughout the world – raising challenges for people (Rosca, 2021a, 2021b) – China begun showing a slowdown in the spread of the virus. After stopping the lockdown of several regions in early April 2020, the number of new cases reported daily has decreased. What should be highlighted are the Chinese government's fast and responsive movements proven with an official statement made by the Chinese President, Xi Jinping, who immediately declared the Covid-19 pandemic as a national threat accompanied with the intensive handling in various sectors (CNN Indonesia, 2020). From the explanations in this research background, the research problems formulated by the authors are related to what strategies the governments implemented dealing with Covid-19 in Indonesia and China.

2. Analysis and Discussion

From the point of view of various policies made by some countries affected by Covid-19, Indonesia has recently focused on finding the best solution to overcome the pandemic. If, on 2 March 2020, only two patients were Covid positive, the number of cases has dramatically increased to 686 patients by 24 March 2020. 30 people were declared cured while 55 people died (CNN Indonesia, 2020). Covid-19 impacted not only the health sector, but also society and economy, forcing the government to take anticipatory measures (Auriemma and Iannaccone, 2020), such as the implementation of physical distancing, social distancing, and finally the large-scale social restrictions (known as PSBB/Pembatasan Sosial Berskala Besar). The measures included:

1. Ministry of Finance of the Republic of Indonesia, Regulation Number 23/Pmk.03/2020 on Tax Incentives for Taxpayers Affected by the Outbreak of Corona Virus;

2. Financial Services Authority of the Republic of Indonesia Regulation Number 11/Pojk.03/2020 on National Economic Stimulus as a Countercyclical Policy to the Impacts of the Spread of Corona Virus Disease 2019;
3. Presidential Instruction of the Republic of Indonesia No. 4/2020 on Refocusing Activities, Budget Reallocation, and Procurement of Goods and Services to Accelerate the Handling of Corona Virus Disease 2019 (Covid-19);
4. The implementation of credit relaxation/restructuring for sectors affected by Covid-19, regulated in Financial Services Authority of the Republic of Indonesia Regulation Number 11/Pojk.03/2020 on National Economic Stimulus as a Countercyclical Policy.

In addition to these strategies, the government has actually made its efforts to minimize the economic impacts, by not implementing a regional quarantine (Carli et al., 2020). Chaotic money circulation was experienced by entrepreneurs due to their great economic losses (Drăgoi, 2020; Obrenovic et al., 2020). However, some commodities have gained huge profits, especially those providing medical equipment or anything related to the eradication or prevention of Covid-19. In addition, the government has also issued some policies in the forms of assistances to the public as follows:

1. Electricity cost reduction. The government has freed the electricity costs for PLN customers using the electricity power of 450 VA for three consecutive months (April, May, and June 2020). Meanwhile, those using the electricity power of 900 kwh received 50 percent discount or paid only half of their electricity costs for the same periods (April, May, and June);
2. Credit dispensation of 1 year starting from April 1, 2020 for motorcycle drivers, fishermen and taxi drivers. The interest payments or installments were also given dispensation for 1 year. The government also provided dispensation for the small and medium sector entrepreneurs who had loans under 10 billion Rupiahs;
3. A National budget of 405.1 trillion rupiahs was provided through the State Budget (APBN) to fulfill the people's needs in the middle of the Covid-19 outbreak. The budget for the health sector was prioritized to protect the health workers, especially to purchase the Personal Protective Equipment (PPE), medical equipment (test kits, reagents, ventilators etc.); to upgrade the referral hospitals including the Wisma Atlet apartment complex, incentives for doctors, nurses and hospital staff, compensation for the death of medical personnel and the handling of other health problems. At least 75 trillion rupiahs were directed to spend in health sector; 70.1 trillion rupiahs for tax incentives and business credit stimulus; 110 trillion rupiahs were allocated for social protection. The rest was used to finance the national economic recovery programs and reserves.

The Chinese Government immediately responded to the initial presence of Covid-19. Coronavirus is sensitive to ultraviolet light and heat as well as effectively inactivated with the ambient temperature of 56°C lasting for 30 minutes and lipid solvents such as ether, ethanol 75 percent, chlorine-containing disinfectants, peroxyacetic acid and chloroform, except chlorhexidine. Based on the recent epidemiological investigations,

the Covid-19 incubation period is 1 to 14 days (Lauer et al. 2020; Böhmer et al. 2020; Lei et al. 2020; Wen & Li. 2020). Nowadays, the main infection sources are patients positive with Covid-19, and asymptomatic carriers (Ye et al. 2020; Cai et al. 2020). The main transmission routes are through respiratory droplets and direct contacts, while the aerosol and fecal-oral transmission routes should be further verified. In general, humans of all ages are susceptible to this virus (Xu et al. 2020).

The Covid-19 pandemic started from Wuhan, Hubei province, China, in December 2019. Within a month, all Chinese public activities were suspended to stop the spread of the virus. As a result, the Chinese economy did not run as usual. The virus is similar to MERS and SARS, which previously caused epidemics by similarly infecting lungs (Ali and Alharbi. 2020; Dhama et al., 2020). The initial presence of Covid-19 was predicted to come from the Hunan Market, a market that traded wild animals for consumption. As reported from thediplomat.com, a director at Wuhan Central Hospital, Ai Fen, has uploaded information related to the new virus on December 30, 2019. However, after spreading the information, he was reported disappeared. In the following days, China reported several unusual cases of pneumonia in Wuhan to WHO. The government immediately closed the Huanan Seafood Wholesale Market on January 1, 2020. However, the Chinese officials did not really pay attention to the possibly that SARS viruses which have killed more than 770 people throughout the world in 2002-2003 might return (Aljazeera, 2020). On January 7, 2020, Chinese authorities confirmed that they had identified the virus as a new coronavirus, known as 2019-nCoV. The Chinese President, Xi Jinping, started responding to the news related to the virus. Between the 13th and the 19th of January 2020, Covid-19 cases were confirmed in several countries such as Thailand, the United States, Nepal, France, Australia, Malaysia, Singapore, South Korea, Vietnam, and Taiwan (Aljazeera, 2020). On 21 January 2020, the Chinese President, Xi Jinping, gave a speech in the form of important instructions to prioritize the people's health and safety through the Chinese Communist Party (CCP) newspapers. With a number of reported cases reaching 4,500, the officials in Wuhan and other regions began openly accepting their guilt and immediately responded to the increasing crisis scale (Washington Post, 2020). Through speeches in which the virus was framed as a health security threat, many nations and states tried to protect the safety of their citizens and institutions. The increasing number of cases indicated that Covid-19 was a threat to the referent objects consisting of Chinese citizens. Therefore, it was necessary for China to make various strategies in dealing with the rapid transmission of Covid-19 by implementing lockdown policies in Wuhan and three other cities around Wuhan. The speech performed by the Chinese President Xi Jinping has succeeded justifying an extraordinary measure by issuing a three-stage virus handling policy as China's containment strategy. The containment policy performed by China made the people firmly believe that Covid-19 was a real existential threat and eventually they fully accepted and supported the country by implementing the policies. As reported by WHO-China Joint Mission on Covid-19, three main measures were taken to stop the spread of Covid-19 in China.

First, Covid-19 was categorized as a communicable disease class B, and then it was treated as an Infectious Disease Class A on 20 January 2020. It indicated that there was a change starting from an initial approach in the form of partial control to a

comprehensive control in accordance with the Law of the Chinese People's Republic (PRC) on Prevention and Action against the Infectious Diseases (Liang et al., 2020). Second, a statement given by the State Council indicating that the national epidemic handling efforts had completely entered the epidemic prevention and controlling phase followed with the restoration of social operations and normal economics on 8 February 2020 (WHO, 2020). WHO has, in fact, explained the three response stages made by the Chinese government in dealing with Covid-19. The first stage was self-isolation aiming to control the infection sources, block the transmission and prevent further outbreak. The protocols to identify the diagnosis and medication, epidemiological investigations, and laboratory examinations have been formulated in this stage. Diagnostic testing kits have also been developed, and animals in the poultry markets were placed under strict government control. At the end of January 2020, China immediately and assertively ordered to lock down Wuhan, a city with of 11 million people. It was the biggest lockdown throughout history. Two days later, the Hubei province (45 million people), was also entirely closed for three months to stop the virus from spreading. The government locked down the areas meaning that each resident had to stay indoors 24/7 for three months. Lockdown was the first part of the handling plan (BBC Indonesia, 2020).

The second-phase strategy in response to the outbreak was mass mobilization aiming to reduce the epidemic intensity and slow down the increasing number of cases in Wuhan and other priority areas in the Hubei province. The main focus was actively curing the patients, reducing mortality rate, and preventing the spread of the virus. Within several hours of lockdown, 42,000 medical personnel volunteers from all countries arrived and helped the infected people in Wuhan and Hubei. 35,000 medical personnel volunteers arrived between January and April 2020 in Wuhan. Within 10 days, 12,000 workers came to build two emergency infectious-disease hospitals, named Huoshenshan and Leishenshan, which are now able to treat thousands of Covid-19 patients (WHO, 2020). The central government immediately mobilized thousands of medical teams to Wuhan and other infected areas. The Chinese military, better known as the People's Liberation Army (PLA), sent 340 military medical teams with thousands of military medical personnel, as well as logistics teams to the entire Hubei province. In addition, during the lockdown in Wuhan, 580,000 community volunteers were mobilized to help the residents. They actively enrolled themselves as front-line officers. Those applying as volunteers were members who loved performing military-like missions and chose to stay away from their homes and families for weeks, even months. Chinese people called them "retrogressers", heroes who chose rushing to the disaster zones and save lives (Hernández, 2020). In China, there is a custom that government officials and members of the Communist Party are the first actors mobilized to the front line. During the lockdown in the Hubei province, the CPC young members were actively involved in the medical front lines. Half of hospital staff, frontline workers, port workers, customs officials and volunteers throughout the country were Party members under the age of 30. China understood that one important part to win the war against this virus and gain public trust was by involving the civil servants responsible for the country. According to nytimes.com, on 13 April 2020, there were 29.77 million party members and officials working in the front lines throughout the country. Of those volunteers, 2,337 people were infected by the virus and 396 died (Hernández. 2020). Most deaths though were

not caused by the virus, but by car or labor accidents in the front lines. In addition, communication on the public crisis and on health education was performed in one direction without creating fake news. The Chinese government also strived to maintain a stable supply of commodities by coordinating all stakeholders and suppliers of basic needs for the affected communities. In addition, logistical support was important in winning the war against the virus. Several international media revealed that at the beginning of the epidemic, China immediately ran out of their Personal Protective Equipment (PPE). Wuhan needed 60,000 protective suits, 125,000 medical masks and 25,000 medical goggles daily. In comparison, China typically produced only 30,000 protective suits per day. China has rapidly mobilized the national efforts including the state enterprises throughout the country to increase the PPE production and build new PPE production lines. Within several weeks, in the middle of February, the PPE crisis in China was over. Each medical staff was completely protected with the disposable PPE. In addition to increasing the testing capacity, the Chinese government immediately mobilized, coordinated, and completed the public and private testing facilities with the testing equipment, such as BGI, a genetics and screening company. Within several days, they succeeded building the Huo-Yan Laboratory, a Covid-19 testing center (Global Times, 2020).

The third stage was the use of technology. This stage focused on reducing groups with Covid-19 cases, completely controlling the epidemic, and achieving the balance between epidemic prevention and control as well as sustainable economic and social development followed by the implementation of scientific evidence-based policies. Relevant measures strengthened the epidemiological investigation, case management, and epidemic prevention in the high-risk public places. At this stage, the government has applied new technologies, such as the use of big data and artificial intelligence (AI) to strengthen the contact tracing and management of priority populations. Normal social operations were gradually restored, knowledge on disease prevention was improved, and the comprehensive program of emergency scientific research was conducted to develop the diagnostics, therapies and vaccines. The use of technology was considered effective and had an important role in handling the spread of Covid-19. According to several sources, the Chinese government has used advanced technology to provide one-way information and monitor the history of activities and health of its residents. To prevent the second outbreak of Covid-19 in Wuhan, the Chinese government has decided to test the entire population. Based on workers.org, 11 million people were tested in May 2020. The purpose of this testing was to check whether there were clusters still suffering from or infected with Covid-19. 74,000 residents were exposed to the virus. About 300 people infected by the virus were sent to hospitals for medication. Meanwhile, the other exposed residents were ordered to self-quarantine for 21 days. To successfully mobilize the rapid tests in the entire city, the Chinese government had to utilize its possible sources and recruit thousands of health care workers and support staff into the campaign. In addition, the Chinese government has openly, transparently, and responsibly released accurate data. Thus, the public had dynamic, obvious, and important information to completely understand the government policies, strategies and actions.

3. Conclusions

Both the Indonesian and the Chinese governments took important steps in dealing with the Covid-19 crisis. Large-Scale Social Restrictions were implemented in both countries, with China even deciding on mass quarantines that limited mobility. These were meant to reduce the intensity of the epidemics and slow down the spread of the virus.

Authorship

All authors contributed equally to the study. H.S.B. led the manuscript preparation and manuscript drafting.

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Declaration of conflicting interests

The authors declare no conflicting interests.

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