

Indonesian Government Dilematics In Covid-19 Pandemic Handling

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Abstract: *The purpose of this paper is to describe the extent to which Indonesia's ability to deal with the Covid-19 pandemic outbreak in Indonesia. The Corona virus outbreak or commonly known as Covid-19 is getting more and more violent. The virus thought to have originated in the Chinese city of Wuhan has claimed many lives. Not only in the bamboo curtain country, countries on the continent of Europe, Asia, America and Africa are also affected by this virus, including Indonesia. World Health Organization (WHO) has designated COVID-19 as a pandemic. This pandemic has spread in 212 countries. Quoting from Worldometers, there were 3,911,454 people in the world infected with the corona virus, the death toll from the SARS-CoV-2 virus reached 270,339 people. While those who recovered were recorded as many as 1,340,231 as of Friday. The Covid 19 pandemic has also weakened global economic growth, due to economic downturns. People in countries that have implemented lockdowns or social distancing have paralyzed the country's economy, many industries have closed and even laid off their employees. The impact is that the decreasing income of the lower middle class, especially workers and daily businesses, which are large in number, will quickly trigger a social contraction. Before the Corona outbreak alone, Indonesia had a potential crisis, due to Indonesia's dependence on imported goods to meet domestic consumption. This research is qualitative in nature by looking at the facts and existing data both from direct observation and from various electronic media. In the conditions of the Covid 19 pandemic, the Indonesian government established a Large-Scale Social Restriction (PSBB) policy with a social - physical distincting approach. , not by lockdown. This policy was taken by the government with economic considerations and the state's ability to worry about being unable to provide for the basic needs of the community during the Karantina region as mandated by Law no. 6 of 2018 concerning health quarantine. Meanwhile, the PSBB policy is considered not optimal in handling this pandemic outbreak because it is considered unable to cut the spread of the Covid 19 virus.*

Keywords: *Pandemic, Covid-19, Covid-19 Handling, Indonesia Government*

I. PENDAHULUAN

The number of victims exposed to the Covid virus is increasing day by day (until May 8, 2020, 338 new cases have increased to a total of 12,776 with 930 deaths and 2,381 patients have been declared cured. With the massive pandemic of the Corona virus in Indonesia, it also has an impact on the sluggishness of the Indonesian economy. The rupiah exchange rate against the US dollar at the beginning of the pandemic at the end of March 2020 exceeded Rp. 17,000 per dollar. The last time the rupiah was at this level was during the monetary crisis that hit in 1998. Based on Bloomberg data, the weakest rupiah exchange rate of all time

was at Rp 16,650 per US dollar which was reached on June 17, 1998. World financial institutions, economists and government authorities have made a number of predictions that the Indonesian economy could fall into the worst case scenario if it does not properly cope with the Corona pandemic. When the outbreak of the corona virus pandemic has spread and hit Indonesia, the government is trying to be responsive and preventive in overcoming this pandemic outbreak. Some of the highlights are physical distancing calls or behavior to maintain distance in interacting with other people. Physical distancing appeal is a form of awareness by a person. In fact there are still many people who come out to interact in the crowd, especially the movement of people going home to the village or the large number of Indonesian Workers (TKI) or Foreign Workers (TKA) who enter Indonesia who are feared that this virus is transmitting from person to person so that it has implications. on the mass transmission of the Covid-19 virus.

When the WHO announced a warning of the dangers of the corona virus that could threaten all countries in the world at the end of December 2019, after the first case was found in Wuhan, China, almost all countries in the world were prepared to be on standby or alert to be aware of the spread of the corona virus in their respective countries starting from the beginning of January 2020 ago. In Indonesia, since the early announcement of two residents of Depok that were positive for corona on March 2, 2020, the government has tried to be ready and anticipate to face this pandemic outbreak. Starting with the case of the disclosure of the patient's identity, paid examinations, lack of facilities and Personal Protective Equipment (PPE) for medical personnel to infection and death of medical personnel (the latest data is Saturday, April 11, 2020, this has reached 26 doctors and 6 nurses who died. because infected with the covid 19 virus). Then the Indonesian government, received a "love" letter from WHO to establish a national covid-19 emergency. As a result, in the midst of public panic about corona, the government adopted a subsidy policy of 72 trillion to improve the tourism economy by giving discounts to foreigners to enter Indonesia.

The government's efforts to anticipate the impact of the spread of the Covid-19 virus, because from the start trying to remain calm and not panic by the spread of this virus, the Indonesian Minister of Health, dr. Terawan said that "Indonesia is free from the Corona virus" even though when Harvard University researchers doubted and expressed disbelief in the ability of Indonesian medical personnel to detect the Corona virus, the Minister of Transportation joked about the arrival of this corona virus, saying that "Indonesians are immune from the Corona Virus because like to drink herbs and eat cat rice. So when other countries close the access of people from China to enter through the airport, in Indonesia, people from China are still allowed to enter freely through the airport on behalf of foreign workers and the tourism economy. Likewise, when we need Personal Protective Equipment (PPE) such as masks, there is a scarcity and even the price skyrocketed because previously in January 2020 it was already exported in large quantities to China, and when the government imported PPE from China in March 2020, it was PPE which on Import it says Made in Indonesia.

When several regions such as the DKI Jakarta Government, Papua Province and Tegal City implement a Regional Quarantine (Lockdown) policy, the central government warns local governments that the regional quarantine or lockdown policy is the authority of the central government, not the authority of the local government, and finally the central government decides on a Restriction Policy. Large-Scale Social (PSBB). Regional heads who make their own rules will be subject to sanctions ranging from reprimands to disciplinary punishments. What should the government do, is it enough that the Social - Physical Distancing policy, PSBB policy, lockdown, or the policy plan to increase the national emergency status to become a Civil Emergency is effective enough to cope with the spread of

COVID-19 virus? This paper will try to describe the extent of Indonesia's ability to handle the Covid-19 pandemic outbreak in Indonesia.

II. LITERATURE REVIEW

Corona virus is the name of the virus family that can cause respiratory problems ranging from mild to severe. Previously, we were familiar with other coronaviruses that were also endemic, namely the Severe Acute Respiratory Syndrome Corona Virus (SARS-Cov) and Middle East Respiratory Corona Virus (MERS-CoV). Covid-19 itself is a new type found in Wuhan, Hubei Province, China in 2019. Therefore, this virus is named Corona Virus Disease-2019 which is abbreviated as COVID-19.

Conceptual models for the COVID-19 outbreak in Wuhan with the consideration of individual behavioural reaction and governmental actions (Lin et al., 2020)

A sound system of emergency reserve supplies is crucial to the management of public health emergencies. Based on international experiences with pandemic control, the world should emphasize improving the system of emergency reserve medical supplies in the process of establishing and improving public health emergency response systems, and it should promote the establishment of international cooperative programs to jointly deal with public health emergencies of international concern in the future (Wang et al., 2020).. to provide detailed reporting and analyses of the present rapid responses to COVID-19 in Indonesia. We outline the gaps and limitations in the responses, based on our rapid analysis of media contents, from government speeches and reports, social and mass media platforms. We present our recommendations toward more rapid, effective, and comprehensive responses (Djalante et al., 2020).

the challenges of crisis and emergency risk communication with special populations during a pandemic. a model of community engagement, disaster risk education, and crisis and emergency risk communication to prepare minority communities and government agencies to work effectively in a pandemic, build the capacity of each to respond, and strengthen the trust that is critical at such moments (Crouse Quinn, 2008).

Often, while clinicians get this information, support personnel do not, leading to absenteeism and deteriorating healthcare services. Leadership can use good risk communication (complete, widely transmitted, and transparent) to align healthcare workers' risk perceptions with reality. They also can address the common problems healthcare workers must overcome to continue working (ie, risk mitigation techniques). Ideally, they will use a predetermined plan, probably based on the principles of Utilitarianism (maximizing the greatest good) and derived from professional and community input ((Iserson, 2020).

By emphasizing the need for immediate and genuine cooperation between government, civil society, and private individuals, the case study offers valuable lessons for other nations concerning not only the concurrent fight against the COVID-19 pandemic but also the overall responses to a public health crisis ((La et al., 2020)

the improvement includes developing a complementary communication plan, increasing human resources, and updating community-level pandemic plans. Conclusions: Participants reported many issues that may be attributable to the dichotomy (or trichotomy) of government bodies responsible for healthcare delivery during a pandemic. Increasing formal communication and collaboration between responsible government bodies will assist in clarifying roles and responsibilities and improve the pandemic response (Charania & Tsuji, 2011)

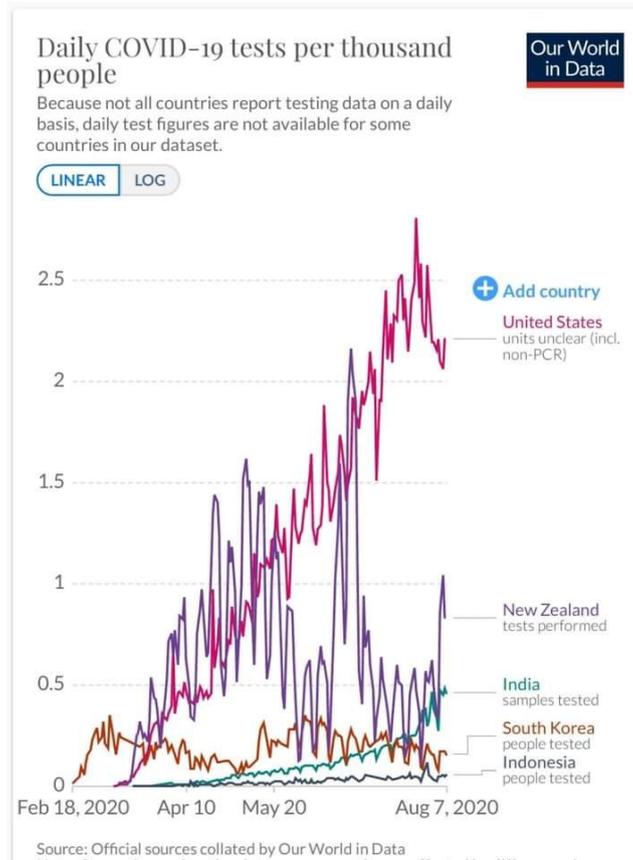
Now the Covid-19 virus is a pandemic, which has spread to more than 200 countries with 1.6 million cases and 102,659 deaths. In Indonesia, the announcement of positive Indonesian citizens was made on March 2, 2020 in Depok City. Since then the data that tested

positive has continued to increase. The spread of covid-19 in Indonesia has reached 50% of Indonesia's provinces, namely: Bali, Banten, DI. Yogyakarta, West Java, Central Java, East Java, West Kalimantan, East Kalimantan, Central Kalimantan, South Kalimantan, Riau Islands, North Sulawesi, Southeast Sulawesi, South Sulawesi, Lampung, Riau, Maluku, and Papua. The potential for widespread spread is still very large due to a lack of education and the government's readiness to face an outbreak. When the policy was made to close schools and university students, they chose to return to their hometowns and were even directed by the campus. Whereas with this policy students have the potential to become carriers.

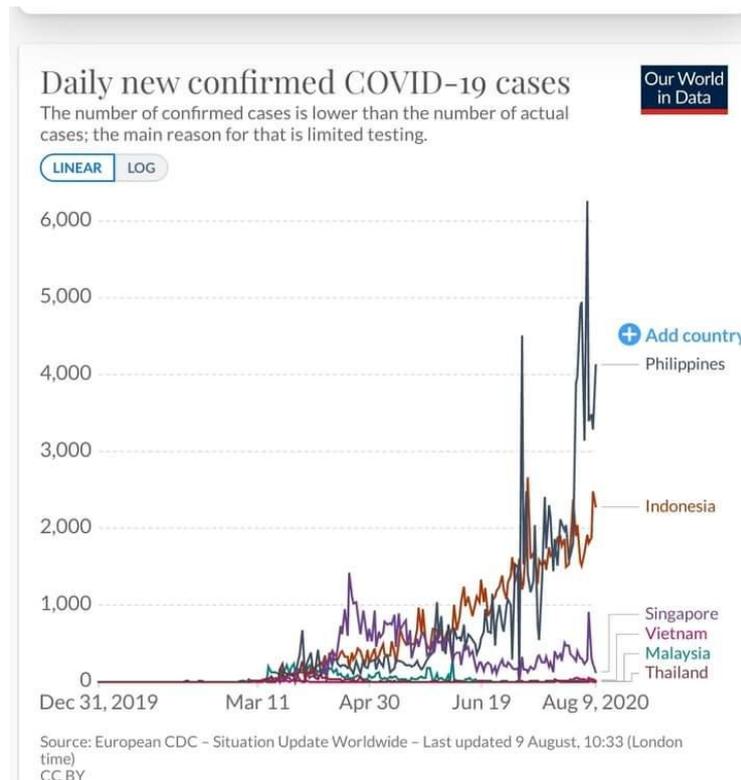
Many parties are also worried about this situation, According to dr. Surahman Muin SpPD. FINASIM, a specialist in internal medicine from a leading hospital in Jakarta, said that the Covid 19 epidemic is a serious problem, all levels of society are potentially exposed to this virus, including medical personnel. However, it is unfortunate that the number of medical personnel infected with this virus has even died due to limited Personal Protective Equipment (PPE). In the midst of the outbreak, the Indonesian Doctors Association (IDI) has threatened to strike if the government cannot guarantee the provision of this personal protective equipment. Of course, this demand is very reasonable because doctors and medical personnel are at the forefront of treating Covid-19 patients.

With the number of patients increasing day by day, while the capabilities and facilities of the Covid-19 referral hospital are limited, and other hospitals refuse due to inadequate facilities. Meanwhile, Wisma Atlit Emergency Hospital, which has a capacity of 24,000 beds, can only accept light patients, patients who can be independent, because the ICU is not ready, so its function is like isolation at home. This is of course a real threat, if victims are exposed to Covid-19, this is increasing amidst limited medical personnel and health facilities.

This condition is further exacerbated by the lack of discipline, some people recommend the government to keep physical distancing and crowd in crowded places. On the other hand, it shows a reality where the central government does not immediately make a lockdown policy (Health Quarantine) but a PSBB Policy, even though many medical experts and practitioners have voiced a voice to the government to implement a lockdown policy (as mandated by Law No.6 of 2018 concerning Health Quarantine). The government only implements socio-physical distancing and conducts a Rapid Test. The rapid test itself uses the method of looking for antibodies (IgM and IgG), SARS Cov2 is not a virus particle. This means that if the Rapid Test is done before the 7th day, the result will be negative. The method that can detect the virus from the beginning of the virus entry until the 28th day (the virus is still in the body) is Real Time PCR. So the Rapid Test will be in vain if there is no selection of patients who will be tested. The rapid test has weaknesses, for example when the patient has a tight fit with the Rapid test the results can be negative, but when the PCR swab is checked the results are positive (the results come out after 5 days), then when the test is repeated with the Rapid test with the Rapid test type (same product) the results are positive.



In addition, various BIN analyzes estimate the peak spread of COVID-19 in May, namely 60-80 days since the first case was discovered on March 2, 2020. It is different with ITB researchers Nuning, et al. Used the Richard Curve model (Richard's Curve) to simulate the expected number of Covid-19 in Indonesia. Nuning compared Indonesia's Richard Curve with China, Italy, Iran, South Korea, and the United States. Based on this simulation, it is found that the mean value of the sum of squares of error (RMSE) in the South Korean model is relatively similar to that of Indonesia. With this calculation, the prediction is that the number of cases will increase to 8 thousand cases. The number of daily new cases is expected to increase until the end of March with the largest number of cases reaching 600. Nuning et al. also predicts the spread of the corona virus will end mid-April 2020. Meanwhile, based on the European CDC on August 9, 2020, the number of new cases in Indonesia fluctuates but continues to increase. The question is, is Indonesia ready for the peak period of the Covid-19 pandemic?



III. METHOD

This research is a qualitative literature review by looking at the facts and existing data both from direct observation and from various electronic media. Based on this, in general there are several policies taken by countries affected by the pandemic.

Lockdown.

Lockdown is a situation where people are not allowed to enter or leave a building or area freely for reasons of an emergency. At least 15 countries have implemented lockdowns to limit the spread of the virus, including China, Italy, Spain, etc

Social distancing

According to the Centers for Disease Control and Prevention (CDC), the meaning of the term "social distancing" or "social restriction" is avoiding public places, staying away from crowds, and maintaining an optimal distance of 2 meters from other people. With the existence of social restrictions, the spread of this disease is expected to be reduced. this policy was adopted by South Korea and was successful. The success of South Korea was due to the swiftness of the South Korean government in taking swift and disciplined action

Herd immunity

Literally, the term "herd immunity" means herd immunity. Herd immunity against a disease can be achieved by giving the vaccine widely or when a large proportion of people in a group have developed natural immunity after they have been exposed to and recovered from the disease. No country has yet claimed to adopt this method, even though in England this discourse had emerged.

Isolation and quarantine

Isolation is the act of separating people who are already sick from people who are not sick to prevent the spread of the Corona virus, while quarantine separates and limits the activities of people who have been exposed to the Corona virus but have not shown symptoms. Various experts recommend that quarantine at home is carried out for at least 14 days. During quarantine, it is recommended to stay at home while living a clean and healthy lifestyle, not meeting other people, and maintaining a distance of at least 2 meters from people who live in the same house. Even if this action does not stop the outbreak, it can at least slow down the number of infections or is known as Flattening the curve. The condition of the gentle curve will be very helpful in handling the maximum to the patient.

IV. RESULTS AND DISCUSSION

According Kumparan.com, handling COVID-19 in Indonesia is called the "Doubt Policy". Given the very large trade and tourism traffic between Indonesia and China, the public hopes that Indonesia will immediately take preventive steps since the beginning of the outbreak of COVID-19 in China. Asynchrony of data between central and local governments and slow initial handlers. . Gradually, social distancing is established a week after the discovery of a positive patient with Covid-19. If we look at the developments during the determination of social distancing or maintaining a distance, this is less successful in resolving COVID-19 in Indonesia because of the low discipline of Indonesians. What about the lockdown option? Viewed from the positive side, lockdown has advantages such as more optimal control and handling of the outbreak, prevention of transmission to assist in tracking suspected COVID-19. Of course, this all results in the possibility of lower infection and mortality rates and lower costs for medical personnel, equipment, logistics and medical personnel.

Lockdown also has negative sides such as anxiety that triggers panic buying, especially for basic goods such as food to medical equipment such as masks and hand sanitizers. If the stock is running low, scarcity can occur and in the end the price will go up like crazy. Another negative impact of the lockdown was paralyzed economic activity. This triggers a decrease in everyone's productivity. Production and supply activities are disrupted. But on the other hand, the decline in community members continues to live in consumption houses. Lockdown also has great potential to make people flock to withdraw their money from banks and prefer to keep it in cash. If this happens, bank liquidity will certainly dry out. This is clearly a grave danger to the economy.

In addition, what is serious about the Corona Plague in the current situation is mass looting. Handling the Corona Outbreak is not just a matter of anticipating and curing diseases which tend to increase rapidly. But economic complaints are a consequence of social distancing which has begun to lead to a law of enforcement approach. The decreasing income of the lower middle class, especially workers and daily businesses, which are large in number, will sooner and later trigger a social contraction. In the conditions before the Corona outbreak alone, Indonesia had a potential crisis. Dependence on imported goods to meet domestic consumption. Plus the weakening of self-sufficiency productivity in strategic sectors such as agriculture, livestock and fisheries has made Indonesia worse off. On the other hand, the natural resource management scheme through investment cooperation positions Indonesia as the loser. In many cases investment management practices always benefit investors. Whereas SDA is public ownership that is mandated by the state to be managed for the greatest prosperity of the people.

The central government is currently implementing the PSBB policy with a Social-Physical Distancing approach in reducing the spread of the Covid 19 virus, not with the

Lockdown Policy (Karatina Health), presumably because of the very limited APBN budget factor. Lockdown or Regional Quarantine Policy, as if shifting the authority responsibility for the consequences of fulfilling the necessities of life to the Regional Government. The question is whether the Regional Government / Pemprov has enough cash reserves to back up all the necessities of the consequences of this PSBB. How fast is it accomplished. Many circles have caught the motive behind the emergence of the Territorial Lockdown as a form of throwing responsibility. Become a byword for the grassroots community.

If the level of social resistance rises due to hunger, then a social explosion in the form of mass plunder is bound to occur. Blended into one with economic failure due to prioritization errors. In order to back up the necessities of life in the next few months, it will be at stake on how far Indonesia's existence as a nation state will continue or there will be a crisis. Therefore, the option to lockdown or quarantine this area is like 'eating the fruit of the Malakama'. Eaten by dead mother, not eaten by dead father. If the lockdown is carried out, the economy is threatened, if not, millions of lives are at stake. Especially if the ones that are locked down are big cities that drive the country's economy, such as Jabodetabek. Then the economic impact can be very significant.

V. CONCLUSION

In Indonesia, in a situation like this, the Social-Physical Distancing policy becomes an option, even though it has an impact on the economy but also prioritizes the safety of life. Another lesson we can take is that the Covid 19 Pandemic has "paralyzed" the global economy, including the existence of the superpowers America and China, China. The US leadership in global capitalism and the leadership of Chinese socialism in the midst of the economic crisis and the aftermath of the Corona global pandemic, are likely to witness in the future a change in the population map as well as a new world order under the global leadership of capitalism substitute. What NIC USA wrote as the New Caliphate. So that the policy was carried out because the Indonesian Government wanted to respond to the Covid-19 problem calmly and not panic because the Covid-19 problem not only had an impact on health but also had an impact on the economy in Indonesia and even had an impact on other fields.

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