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GOVERNMENT RESPONSE AND COMMUNITY PARTICIPATION OVERCOMING OUTBREAK AND MANAGING ITS IMPACT COVID- 19

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GOVERNMENT RESPONSE AND COMMUNITY PARTICIPATION OVERCOMING OUTBREAK AND MANAGING ITS IMPACT COVID-19

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Abstract

Covid-19 outbreak has become a world pandemic, hundreds of countries in the world are stricken with the deadly virus. The average country in the world has the power to eradicate an outbreak that was first reported to appear in Wuhan, China. Countries in the world make efforts to handle it. This study aimed to (a) analyze the forms of government response in facing and dealing with the impacts caused by Covid-19, and (b) and analyzing the forms of community participation in the world to deal with effects of Covid-19. This research, which uses descriptive qualitative methods, collects data by searching online for various data sources (online media, journals, and scientific reports). From the research conducted, it was found that responsive governments tend to be able to control Covid-19. In addition, the great support of citizens to participate, became the second secret of faster handling of Covid-19.

Keywords: *Covid-19, Public Partisipation, Government Strategic*

Abstrak

Wabah Covid-19 telah menjadi pandemi dunia, ratusan negara di dunia sedang terserang virus mematikan tersebut. Rata-rata negara di dunia memiliki kekuatan untuk memberantas wabah yang dilaporkan pertama kali muncul di Wuhan, China. negara-negara di dunia melakukan upaya untuk menanganinya. Penelitian ini bertujuan untuk (a) menganalisis bentuk-bentuk tanggapan pemerintah dalam menghadapi dan menangani dampak yang ditimbulkan oleh Covid-19, dan (b) serta menganalisis bentuk

partisipasi masyarakat di dunia dalam menghadapi dampak Covid-19. Penelitian yang menggunakan metode deskriptif kualitatif ini mengumpulkan data dengan mencari secara online berbagai sumber data (media online, jurnal, dan laporan ilmiah). Dari penelitian yang dilakukan, ditemukan bahwa pemerintah yang responsif cenderung mampu mengendalikan Covid-19. Selain itu, besarnya dukungan warga untuk berpartisipasi, menjadi rahasia kedua penanganan Covid-19 yang lebih cepat.

Kata Kunci: Covid-19, Partisipasi Publik, Strategi Pemerintah

A. Introduction

The Coronavirus Disease (COVID-19) outbreak has been designated by the World Health Organization as a global pandemic because it has infected and affected the lives of people in more than 200 countries. The spread of COVID-19 first appeared in Wuhan China late in 2019,¹ now evenly distributed in various countries.² The number of victims infected with COVID-19 from time to time continues to grow, the number of victims stated to be positive reached more than two million. Likewise, the number of deaths has increased, significantly approaching two hundred thousand.³

Not only civil society who were victims of COVID-19, many world leaders were victims, ranging from vice presidents, prime ministers, queens, royal families, ministers, regional heads, famous figures, sports athletes, and media personnel. This condition is increasingly worrying because of its massive spread, not recognizing the economic level and general lifestyle. The leaders and

¹Qianying Lin et al., "A Conceptual Model for the Coronavirus Disease 2019 (COVID-19) Outbreak in Wuhan, China with Individual Reaction and Governmental Action," *International Journal of Infectious Diseases* 93 (2020): 211–16, <https://doi.org/10.1016/j.ijid.2020.02.058>.

²Catrin Sohrabi et al., "World Health Organization Declares Global Emergency: A Review of the 2019 Novel Coronavirus (COVID-19)," *International Journal of Surgery* 76, no. February (2020): 71–76, <https://doi.org/10.1016/j.ijsu.2020.02.034>.

³M Khan et al., "COVID-19 Infection: Origin, Transmission, and Characteristics of Human Coronaviruses," *Journal of Advanced Research* 24 (2020): 91–98, <https://doi.org/10.1016/j.jare.2020.03.005>.

officials infected so far have a very clean and healthy lifestyle. However, due to intense interactions with people who have the potential to transmit, eventually become sufferers too, without knowing when and where infected.⁴

COVID-19 which has become a pandemic has devastated the state order in various sectors and fields; health, economics, politics, education, culture, and even religious rituals. In fact, COVID-19 disrupts life in large countries that have been known to advance in science and technology (especially in the field of health/medicine), such as the United States, European Union countries, Britain, Japan, and South Korea. This certainly becomes a historical record for human life in the modern era, which has never happened before, when science and information technology have entered the modern age, even postmodern.⁵

COVID-19 has become the biggest test in the field of health and medical of the world. How not, COVID-19 is transmitted from person to person through physical contact, especially through fluids coming out of the body. This is of course a problem in itself for doctors and medical personnel who treat patients with COVID-19.⁶ Even countries that have good health infrastructure, such as Italy and Spain, are still overwhelmed. In addition to treatment for the sick, to eliminate more massive transmission, quarantine is carried out on people who are still healthy, so that people do not interact sick. A fairly complicated choice in the world of modern health.⁷ Until now, no vaccine has been found that is effective against

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⁴Duccio Fanelli and Francesco Piazza, "Analysis and Forecast of COVID-19 Spreading in China, Italy and France," *Chaos, Solitons and Fractals* 134 (2020): 109761, <https://doi.org/10.1016/j.chaos.2020.109761>.

⁵Alessandro Foddai, Juan Lubroth, and Johanne Ellis-iversen, "Surveillance to Improve Evidence for Community Control Decisions during the COVID-19 Pandemic – Opening the Animal Epidemic Toolbox for Public Health," *One Health* 100130 (2020): 1–8, <https://doi.org/10.1016/j.onehlt.2020.100130>.

⁶Francesca Scarabel et al., "Canada Needs to Rapidly Escalate Public Health Interventions for Its COVID-19 Mitigation Strategies," *Infectious Disease Modelling*, 2020, <https://doi.org/10.1016/j.idm.2020.03.004>.

⁷Silvia Amaro, "Lacking Beds, Masks and Doctors, Europe's Health Services Struggle to Cope with the Coronavirus," *CNBC*, April 2020.

COVID-19, so resistance can be done by wearing masks, diligently washing hands, using recommended protective equipment, and trying to carry out self-quarantine, and physical/social distancing.

1 The COVID-19 outbreak also tested the economic resilience of countries in the world. Taiwan is one of the countries outside China that has reported COVID-19 cases from the beginning. COVID-19 in Taiwan is not only a health problem, but also involves an economic problem because their geographical location is very close to the COVID-19 source center in China plus a fairly high Taiwan population.⁸ Countries in Europe are also experiencing economic pressure and population problems, namely a surge in unemployment due to termination of employment, the interruption of production and distribution of goods, the death of tourism, and the reduction or loss of income. Countries in Europe must make efforts to save. The worst economic impact is not only experienced by the state in general, but also disadvantaged groups of people, who are economically vulnerable to general economic downturn.⁹ The COVID-19 outbreak also affected transactions on global stock exchanges.¹⁰

Equally important is that COVID-19 has tested the bureaucratic order and government of the countries of the world. For example, Indonesia has to cut the state budget by tens of trillions of rupiah in a number of sectors, which were then diverted to overcome COVID-19 and deal with its impact. Pandemic which claimed thousands of lives in China made the Chinese government increase its spending budget to establish a special hospital for victims of COVID-19. China has to spend a lot of budget spending

⁸Vivian Chia-Rong Hsieh, "Putting Resiliency of a Health System to the Test: COVID-19 in Taiwan," *Journal of the Formosan Medical Association*, no. xxx (2020): 3–4, <https://doi.org/https://doi.org/10.1016/j.jfma.2020.03.002>.

⁹Kayvan Bozorgmehr et al., "Comment COVID and the Convergence of Three Crises in Europe," *The Lancet Public Health* 2, no. 20 (2020): 10–11, [https://doi.org/10.1016/S2468-2667\(20\)30078-5](https://doi.org/10.1016/S2468-2667(20)30078-5).

¹⁰Alexandre I R White, "Historical Linkages: Epidemic Threat, Economic Risk, and Xenophobia," *The Lancet* 6736, no. 20 (2020): 1–2, [https://doi.org/10.1016/S0140-6736\(20\)30737-6](https://doi.org/10.1016/S0140-6736(20)30737-6).

that was not previously calculated, to cope with the increasingly widespread COVID-19.¹¹

COVID-19 also has an impact on the social life of citizens, as experienced by the United States. The government is closing down total activities in schools to prevent more massive transmission. School closures have an impact on the high costs of child care and care while at home, because the government must provide subsidies. Although school closures have the benefit of reducing the potential for the spread of COVID-19 in schools, the social impact of school closures cannot be eliminated.¹² In China, the COVID-19 epidemic had an enormous psychological impact on students. Students and students living in urban areas experience anxiety about income, and the effects on daily life, including concerns about disruption in academic activities.¹³ As one of the most populous countries in the world, India faces problems with the existence of COVID-19. Restrictions imposed by the Indian government caused turmoil in the community.¹⁴

Government response and community participation are important factors in dealing with outbreaks.¹⁵ Several studies related

¹¹Lin et al., "A Conceptual Model for the Coronavirus Disease 2019 (COVID-19) Outbreak in Wuhan, China with Individual Reaction and Governmental Action."

¹²Jude Bayham and Eli P Fenichel, "The Impact of School Closure for COVID-19 on the US Healthcare Workforce and the Net Mortality Effects," *MedRxiv* 2667, no. 20 (2020): 1–14, <https://doi.org/10.1101/2020.03.09.20033415>.

¹³Wenjun Cao et al., "The Psychological Impact of the COVID-19 Epidemic on College Students in China," *Psychiatry Research*, 2020, 112934, <https://doi.org/10.1016/J.PSYCHRES.2020.112934>.

¹⁴Balaji Krishnakumar and Sravendra Rana, "ScienceDirect COVID 19 in INDIA: Strategies to Combat from Combination Threat of Life and Livelihood," *Journal of Microbiology, Immunology and Infection*, no. xxxx (2020): 4–6, <https://doi.org/10.1016/j.jmii.2020.03.024>.

¹⁵World Health Organization, *Managing Epidemics* (Geneva, Switzerland: World Health Organization, 2018); Ilona Kickbusch and K. Srikanth Reddy, "Community Movers – Why Outbreak Responses Need to Integrate Health Promotion," *Global Health Promotion* 23, no. 1 (2016): 75–78, <https://doi.org/10.1177/1757975915606833>.

to this have been conducted. In the context of the Ebola outbreak,¹⁶ found that “Ensuring community participation has been acknowledged as a key strategy to not only control the disease in affected nations, but even remains a crucial link in those nations where no case of Ebola disease has been detected”. The conclusion is also in line with¹⁷ and¹⁸. Meanwhile, in the context of different outbreaks, it is also still in the same conclusion about the important role of government and community participation, for example Dengue,¹⁹ Cholera,²⁰ and other outbreaks in general.²¹ Research focusing on government response and community participation in dealing with the COVID-19 outbreak is still very rare. Even searches on the SCOPUS database until early April 2020 showed no study at all about the theme.

Studies related to these issues will be an important main reference for researchers in the world, or for studies of economics, politics, and government in tertiary institutions. The results of this study can also be an initial step in making the right decision in dealing with outbreaks, especially the COVID-19 outbreak. This study aims to (a) analyze the forms of government response in dealing with and dealing with the impacts caused by the COVID-19 outbreak, and (b) and analyze the forms of community participation in the world to deal with and deal with the impact of the COVID-19 outbreak.

¹⁶Shrivastava, Shrivastava, and Ramasamy (2015)

¹⁷Rugarabamu et al (2020)

¹⁸Vetter et al (2016)

¹⁹Joël Ladner et al., “Societal Impact of Dengue Outbreaks: Stakeholder Perceptions and Related Implications. A Qualitative Study in Brazil, 2015,” *PLoS Neglected Tropical Diseases* 11, no. 3 (2017): 1–16, <https://doi.org/10.1371/journal.pntd.0005366>; Karolina Griffiths et al., “Public Health Responses to a Dengue Outbreak in a Fragile State: A Case Study of Nepal,” *Journal of Tropical Medicine* 2013 (2013), <https://doi.org/10.1155/2013/158462>.

²⁰Elizabeth Lamond and Jeseé Kinyanjui, *Cholera Outbreak Guidelines: Preparedness, Prevention and Control* (Oxford, UK: OXFAM, 2012).

²¹Susan B. Rifkin, “Examining the Links between Community Participation and Health Outcomes: A Review of the Literature,” *Health Policy and Planning* 29 (2014): ii98–106, <https://doi.org/10.1093/heapol/czu076>.

This research uses a qualitative descriptive method, by observation, indepth interview with informants and collecting data through online searches, from various sources relating to COVID-19. The data obtained is then classified according to the type and nature as an appropriate part. The data is then analyzed using content analysis that refers to.²² The results of content analysis are directed at two approaches. *First*, the policy approach or government response. *Second*, the response or public involvement in responding to the outbreak of COVID-19. From both approaches, interesting results were found, related to the success rates of countries in the world in overcoming the COVID-19 outbreak.

Figure 1. Local government activities in Indonesia, socializing the use of masks to residents.



(Source: Author's personal documents)

²²Miles, Huberman, and Saldana (2019)

Figure 2. Resident in housing estates also do quarantine by not leaving and not accepting new arrivals in residential areas.



(Source: Author's personal documents)

B. Result and Discussion

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Countries in the world make a major step in anticipating the spread of COVID-19, by limiting the interaction of many people, especially those whose conditions are vulnerable if contracting COVID-19 elderly people and children who can act as carriers. People in charge of serving health, both doctors, nurses, and workers in hospitals are equipped with self-protection equipment. Meanwhile, COVID-19 infected people who were positively infected by isolation efforts were made, so that they did not transmit to them or those who infect others.²³ However, the success and failure of various efforts by these countries if analyzed in more detail, depends on two things. First, the government response is fast and accurate to make policies in anticipation of the spread that has been infected. Second, community participation also

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²³Hussin A. Rothan and Siddappa N. Byrareddy, "The Epidemiology and Pathogenesis of Coronavirus Disease (COVID-19) Outbreak," *Journal of Autoimmunity*, no. February (2020): 102433, <https://doi.org/10.1016/j.jaut.2020.102433>.

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determines the success or failure of the handling of the COVID-19 outbreak. Government response cannot run optimally, if there is no support from the public, so that community participation also determines the success and failure of handling the COVID-19 outbreak.

1. Government Response

The governments of countries in the world are polarized in two conditions in response to the spread of COVID-19. There are groups of countries that are quick to respond, and some are slow and even tend to underestimate. Vietnam is one of the countries whose governments are relatively fast in acting to overcome the COVID-19 pandemic. The first case arose in Vietnam occurred in early February 2020 which struck a baby aged three months, after contact with his grandmother who was first confirmed to have COVID-19.²⁴ After learning that their citizens were victims of COVID-19, the Vietnamese government took a quick step by isolating infected people, tracking everyone who had contact with infected people, and then immediately quarantined them. Despite not lockdowns, the Vietnamese government closed schools, canceled all festivals, conferences and activities involving many people, and ordered residents to stay at home. The Vietnamese government strictly prohibits people from infected areas from entering Vietnam, while migrants who are already in Vietnam are quarantined in a place that is centered for two weeks. In areas where no COVID-19 cases were found, residents were advised to wear masks and wash their hands frequently when leaving the house. Vietnam's government efforts proved successful in stopping the transmission that occurred.²⁵

²⁴Hai T Le et al., "Case Report The First Infant Case of COVID-19 Acquired from a Secondary Transmission in Vietnam," *The Lancet Child and Adolescent Health* 4642, no. 20 (2020): 19–20, [https://doi.org/10.1016/S2352-4642\(20\)30091-2](https://doi.org/10.1016/S2352-4642(20)30091-2).

²⁵Trang H D Nguyen and Danh C Vu, "Summary of the COVID-19 Outbreak in Vietnam – Lessons and Suggestions," *Travel Medicine and Infectious Disease*, n.d., 101651, <https://doi.org/10.1016/j.tmaid.2020.101651>.

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Saudi Arabia is one of the countries affected by the COVID-19 outbreak. The country was visited by 7.5 million religious pilgrims (umrah) who came from 180 countries in the world in 2019. In addition, this country was also visited by 39 million people outside of pilgrimage (umrah). The pilgrims (umroh) spend an average of 10 days in holy places, without any social distance. More than 40% of those who mingle are aged over 50 years, an age that is susceptible to COVID-19 transmission. Nearly 50% of them also have a history of respiratory problems. This condition is very vulnerable to the spread of COVID-19. Not wanting to play around with the dangers of COVID-19, Saudi Arabia then stopped the pilgrimage activities (umrah) and closed the activities at the Haram Mosque, the city of Mecca. In fact, if there is no significant change from the COVID-19 pandemic, then the government of Saudi Arabia will take the option to postpone the implementation of the Hajj in 2020.²⁶

Japan is the country that coincides with China for the first time exposed to COVID-19. However, this country also successfully overcome COVID-19 for the first time. Interestingly, Japan did not lockdown when the country was hit by COVID-19. This is inseparable from the Japanese government which acted aggressively in handling COVID-19. The government strictly prohibits activities that gather large numbers of people, and conducts temporary school closures consistently. Events that involve a lot of people are canceled. After the Japanese government implemented quarantine, the results were clear. The number of infected residents began to decline on the 25th day.²⁷

The response of the Singapore government is different from what the governments of other countries have also infected with COVID-19. As one of the countries that became the center of

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²⁶Shahul H. Ebrahim and Ziad A. Memish, "COVID-19: Preparing for Superspreader Potential among Umrah Pilgrims to Saudi Arabia," *The Lancet* 395, no. 10227 (2020): e48, [https://doi.org/10.1016/S0140-6736\(20\)30466-9](https://doi.org/10.1016/S0140-6736(20)30466-9).

²⁷Kenji Mizumoto and Gerardo Chowell, "Transmission Potential of the Novel Coronavirus (COVID-19) Onboard the Diamond Princess Cruises Ship, 2020," *Infectious Disease Modelling* 5 (2020): 264–70, <https://doi.org/10.1016/j.idm.2020.02.003>.

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international business and trade in Southeast Asia and even the world, the Singapore government took a step of transparency, by opening the data of COVID-19 sufferers. Transparency is intended to prevent transmission to others. Data is provided to the private sector, namely Upcode Academy to create a site that monitors COVID-19 movements. Thanks to the transparency of the data carried out, the Singapore government succeeded in suppressing the number of sufferers of COVID-19. Data transparency is also carried out supported by the existence of a very adequate and sophisticated health infrastructure, so the mortality rate is very minimal in Singapore.²⁸ Singapore is the most ready country to face COVID-19 in Southeast Asia. The Singaporean government from the beginning has taken quick steps to break the chain of transmission. The government also ensures that medical staff are ready to work in treating patients, professionally and safely. The Singapore government is inconsistent in providing guarantees and security facilities for working medical personnel.²⁹

Many other countries also have the readiness and readiness to use monitoring and supervision and apply health standards from the World Health Organization. Countries in Africa such as Egypt, Algeria and South Africa have a moderate and rapid response in overcoming the COVID-19 pandemic, so the spread rate is also relatively low. Conversely, there are a number of countries that have low response rates, so that they have a high risk of spread such as Nigeria, Ethiopia, Sudan, Angola, Tanzania, Ghana and Kenya.³⁰ Italy is a country in Europe affected by COVID-19 is quite severe.

²⁸Rachael Pung et al., "Articles Investigation of Three Clusters of COVID-19 in Singapore: Implications for Surveillance and Response Measures," *The Lancet* 19, no. 20 (2020): 1–8, [https://doi.org/10.1016/S0140-6736\(20\)30528-6](https://doi.org/10.1016/S0140-6736(20)30528-6).

²⁹Jeremy Tey et al., "Navigating the Challenges of the COVID-19 Outbreak: Perspectives from the Radiation Oncology Service in Singapore," *Radiotherapy and Oncology*, 2020, <https://doi.org/10.1016/j.radonc.2020.03.030>.

³⁰Marius Gilbert et al., "Preparedness and Vulnerability of African Countries against Importations of COVID-19: A Modelling Study," *The Lancet* 395, no. 10227 (2020): 871–77, [https://doi.org/10.1016/S0140-6736\(20\)30411-6](https://doi.org/10.1016/S0140-6736(20)30411-6).

Italy is too late in dealing with the COVID-19 crossing. Positive number of COVID-19 people who died is high. Beginning in April 2020, the number of positive Italians was 110,574, with a death rate of 13,155 and recovering 16,847. The number of deaths of COVID-19 victims in Italy is highest among the three most exposed countries, namely America with 5,137 deaths and Spain with 9,387 deaths (<https://coronavirus.jhu.edu/data/new-cases>. Accessed, April 3, 2020). The number of victims being treated at the hospital also from time to time continues to experience a surge.³¹

Indonesia is a country that is relatively slow in dealing with COVID-19, so the number of victims exposed has increased dramatically from time to time. Since the first COVID-19 case was found in March to April 2020, the number of positive COVID-19 victims in Indonesia has reached more than 10.000 people. As for the number who died approximately 1.000 people or as much as 10%.³² The Indonesian government in every disaster tends to face coordination problems within its own (internal) government. This can be seen from the many officials at the central level who are arguing with each other (Prahono & Elidjen, 2017). In addition, the government faces the problem of coordinating with a parliament consisting of multiparty parties, so the Government of Indonesia takes a "short cut" by making *Peraturan Pemerintah Pengganti Undang-Undang* or PERPPU (Enactment of Government Regulation in Lieu of Law). Indonesia also was conducted large-scale social restrictions (PSBB) and provision of social assistance for the poor people.

The policy was seen as an effort to cut a long and complicated coordination chain with parliament. Another problem faced by democratic countries such as Indonesia is the obstacles in coordination and communication between the central government and regional governments, ranging from provincial to district/ city governments that reach hundreds in number and are spread in far

³¹ Andrea Remuzzi and Giuseppe Remuzzi, "COVID-19 and Italy: What Next?" *The Lancet* 2 (2020): 10–13, [https://doi.org/10.1016/S0140-6736\(20\)30627-9](https://doi.org/10.1016/S0140-6736(20)30627-9).

³² Addi M Idhom, "Update Corona 3 April 2020: Data COVID-19 Terbaru Indonesia & Dunia," *Tirto*, April 2020.

areas.³³ Indonesia also has a problem in the form of a minimal budget to make efforts to overcome COVID-19. This of course has an impact on the government's unpreparedness to provide guarantees to medical staff. One of the manifestations is the unavailability of personal protective equipment (PPE) for medical workers who work with COVID-19 patients. Including the unavailability of the budget to buy a rapid test kit for the general public.³⁴ As a result, the high mortality rate for medical staff, especially doctors and nurses.

Iraq is one of the countries whose governments can also be said to be late in responding to the COVID-19 outbreak. This is inseparable from the ongoing conflict conditions in the country, thus causing inadequate facilities to isolate infected citizens. The Iraqi government also does not have adequate laboratories that can be used to conduct trials. Even if there is, there is only in the city center, namely Baghdad. Personal protective equipment (PPE) that can be used by medical staff is insufficient, making it difficult for officers to deal with COVID-19 patients to the maximum. The means of transportation used to transport patients are also not available in large quantities. The Iraqi government also can not tighten in the border region and the entrance to other countries, because the conditions are still in an atmosphere of conflict. Iraq is very dependent on the assistance of the international community to fight COVID-19.³⁵

Various descriptions related to the response of the government in several countries which become a more concise example can be seen in Table 1.

³³World Health Organization, *State of Health Inequality: Indonesia* (Geneva, Switzerland: World Health Organization, 2017).

³⁴Rossanto Dwi Handoyo, Angga Erlando, and Nita Tri Astutik, "Analysis of Twin Deficits Hypothesis in Indonesia and Its Impact on Financial Crisis," *Heliyon* 6, no. 1 (2020): e03248, <https://doi.org/10.1016/j.heliyon.2020.e03248>.

³⁵Ehab Mudher Mikhael and Ali Azeez Al-jumaili, "Can Developing Countries Face Novel Coronavirus Outbreak Alone? The Iraqi Situation," *Public Health in Practice* 100004, no. 1 (2020), <https://doi.org/10.1016/j.puhip.2020.100004>.

Table 1. Responses of various governments in dealing with COVID-19

No	Country name	Form of action	The nature of the action
1	Vietnam	<ol style="list-style-type: none"> 1. Isolating infected people. 2. Track people who come in contact with infected people and then carry out isolation. 3. Quarantine the village / region. 4. Close the school. 5. Cancel all festivals and conferences. 6. Ordering residents to remain at home, must not leave the house at all. 7. Prohibit people who come from infected areas into Vietnam. 8. Migrants who have been in Vietnam are quarantined centrally for two weeks. 9. The government encourages people to wear masks and wash their hands frequently. 	Fast
2	Saudi Arabia	<ol style="list-style-type: none"> 1. Stop the pilgrimage activities (Umrah). 2. Closing activities at the Grand Mosque of Haram. 3. Postpone the implementation of the Hajj in 2020. 	Fast
3	Japan	<ol style="list-style-type: none"> 1. The government tightens interactions. 2. School closure consistently. 3. Cancellation of festivals and activities involving many people. 	Fast
4	Singapore	<ol style="list-style-type: none"> 1. Transparency of data of people with COVID-19. 2. Involving the private sector in managing data. 3. Setting up health infrastructure and facilities. 4. Ensuring the safety of health workers who handle patients. 5. Breaking the chain of transmission. 	Fast
5	Italy	<ol style="list-style-type: none"> 1. Establish an emergency situation. 	Slow

		<ol style="list-style-type: none"> 1. Promoting the health protection movement. 2. Returning citizens living in risk countries. 3. Define the entire region as a red zone. 4. Quarantine area. 5. Close the school. 	
6	Indonesia	<ol style="list-style-type: none"> 1. Close schools and colleges. 2. Quarantine a limited area. 3. Making Government Regulations in lieu of Laws. 4. Providing grant assistance and subsidies for poor and affected people. 5. conducted large-scale social restrictions (PSBB) 	Slow
7	Iraqi	<ol style="list-style-type: none"> 1. Treatment of victims. 2. Perform limited quarantine. 3. Applying for help from the international community. 	Slow

(Source: data processed from various sources).

2. Community Participation

In addition to the government's response, one of the important factors that will determine the success of COVID-19 handling is community involvement. In countries where the community is aware of funds actively involved in dealing with COVID-19 the success rate overcomes the impact of COVID-19 is quite high when compared to countries whose citizens are fairly passive, or even do not want to be involved at all to participate (apathetic). The government has limitations, namely not being able to reach all components of public life. Thus, public involvement and participation will facilitate the government's task in carrying out the policies that have been made. Moreover, if the community is proactive in assisting the government in carrying out the programs made, it is carried out consciously with all the potential it has.

The Chinese community, as the first place to find COVID-19 cases, mostly participated in efforts to overcome COVID-19 and deal with its spread. Society tends to obey various policies determined by the government. The most basic thing is a very large input from intellectual circles towards policy makers. Not all

citizens are motivated to participate in handling COVID-19, but citizens are also actively involved in preventive behavior, especially in terms of maintaining healthy living patterns and behavior, as directed by the Chinese government. The most visible participation is that they do not leave the house or interact outside the home. Chinese citizens choose to be indoors, as long as the conditions have not been declared safe by the government.³⁶

Canada has a pattern of building citizen participation by establishing the Canadian Public Health Agency, as a national coordinating body that occurs during emergencies. His job is to make cross-sectoral emergency response efforts, ranging from technical guidance, training, therapy and so forth. What is also done is to conduct screening and inspection in the border area, as well as building the spirit and culture of mutual cooperation among fellow citizens. Officers do not hesitate to ask for help from relevant parties if facing an emergency.³⁷

From 20 January to 15 March 2020 there were 8,086 cases with 72 deaths in South Korea. South Korea chooses close monitoring of infected citizens and leaves the city running normally. Interestingly, South Koreans have the initiative to secure themselves and be in their respective neighborhoods. Likewise with companies and offices that issue policies to dismiss their employees independently and isolate themselves at home. On the other hand, the South Korean government conducted massive clean-up efforts in public places, ranging from airports, terminals and other public places, by spraying disinfectants. South Korea's participation is most evident in the form of willingness to take rapid tests in large numbers, to find out whether or not they are infected by COVID-

³⁶J B Li et al, "Chinese Public's Knowledge, Perceived Severity, and Perceived Controllability of the COVID-19 and Their Associations with Emotional and Behavioural Reactions, Social ...," no. February (2020): 0-30, <https://doi.org/10.31234/osf.io/5tmsh>.

³⁷Theresa W S Tam and Bmbs Uk, "Preparing for Uncertainty during Public Health Emergencies : What Canadian Health Leaders Can Do Now to Optimize Future Emergency Response," 2020, <https://doi.org/10.1177/0840470420917172>.

19. Once they find out that they are infected, they take care and isolation in the hospital.³⁸

Indonesia is an example of a case of a country that failed to control COVID-19, especially in mobilizing the participation of its people. Policies made by the government are not fully supported by the community, such as a ban on gathering in public places and are not heeded by citizens. There are still many people who do gatherings in public places, both in the form of weddings, recitals, and gatherings with colleagues in public places. Even though the security forces have been urged and repeatedly reminded, the community still does not pay attention. In fact, the Indonesian Ulema Council as a religious authority has issued a fatwa (religious message) which forbids Muslims from carrying out joint worship activities in mosques, but tends to be disobeyed. The most visible thing is, the prohibition of returning home for residents who work in Jakarta (the capital of Indonesia, the epicenter center of COVID-19), is not given any attention at all. Residents still flocked back to their respective villages. This causes the rapid spread of COVID-19, because they are “carriers of COVID-19”. The disease is now increasingly spread to various corners of Indonesia on a massive scale without any control mechanism.

Valuable lessons from the success of governments in the world in overcoming pandemics and dealing with the impact of COVID-19, is to use strategies to increase public participation or citizens. Participation is interpreted as the participation of a person or group of people in a program run by another party, in this case can be done by the government. The forms of participation are quite diverse, ranging from providing thought input to policy makers, helping workers, sacrificing time, helping with their expertise, including also giving funds or materials (philanthropy). In the health sector, public participation is important and fundamental. The greater public participation in the health sector, the more important health problems that occur. Public participation means

³⁸Eunha Shim et al., “Transmission Potential and Severity of COVID-19 in South Korea,” *International Journal of Infectious Diseases* 93 (2020): 339–44, <https://doi.org/10.1016/j.ijid.2020.03.031>.

community involvement in activities related to global health issues. In this regard, according to³⁹ and⁴⁰, what needs to be done is to empower the community, and build the capacity of the community to be involved. There needs to be improved communication and coordination between the community and the government at the local, regional and central levels. This will spur the public's desire to participate in government programs. In line with⁴¹ and⁴², the community can be involved in activities directly in accordance with their expertise, as well as conducting campaigns, outreach, and also promotion of the wider community.

Community participation, of course, in accordance with the spirit of democracy which has become a symptom of the world community. The government can no longer run the program alone, but it requires public support. Government in the era of democracy must provide maximum opportunities and opportunities for public involvement. The democracy referred to by Abraham Lincoln "from the people, by the people, and for the people," carries the spirit that sovereignty is in the hands of the people. In the most visible form is the involvement of the public in programs run by the government, ranging from planning, implementation, to control and evaluation. The greater public participation means the better level of democracy in the country. Conversely, the lower the level of democracy in the country the lower the public participation. Democracy and participation become a kind of two currencies that are equally important and equally needed. Democracy breeds participation, participation perpetuates democracy. Rapid response from the government to respond to public needs, provide security and comfort in the health sector, is a reciprocal of the responsibility of the head of government that has been directly elected by the people through the democratic process. The speed of the government in responding to problems faced by the people is seen

³⁹Mukhtarov, Dieperink, and Driessen (2018)

⁴⁰Olsson, Strøm, Haaland-Øverby, Fredriksen, and Stenberg, (2020)

⁴¹Gastanaduy et al (2018)

⁴²World Health Organization (2017b)

as seriousness by the people to carry out the mandate and responsibility carried.

The context of government response and community participation is in line with previous studies in various epidemics studies,⁴³ and can be linked to Harold Laswell's theory. Laswell, a behavioralist political expert, focuses his attention on the behavior of individuals and groups.⁴⁴ For Harold Lasswell, the concept of policy science is relevant to the political and social world. Lasswell envisions democracy as a vital public discourse to play an important role in shaping the policy domain.⁴⁵ The political theory put forward by Laswell, can be an analysis tool for government responses and public participation in dealing with COVID-19, in relation to individual and group behavior. Behavior can be drawn on the line of action, in this case is a response to stimulus, which means the government's response to COVID-19. Likewise with the actions of citizens to participate, in response to COVID-19 which has become a world pandemic.

According to Laswell, politics is related to who gets what, when, and how.⁴⁶ Under the conditions of the COVID-19 pandemic, what did the people get from their government? In the

⁴³Rifkin, "Examining the Links between Community Participation and Health Outcomes: A Review of the Literature"; Griffiths et al., "Public Health Responses to a Dengue Outbreak in a Fragile State: A Case Study of Nepal"; Ladner et al., "Societal Impact of Dengue Outbreaks: Stakeholder Perceptions and Related Implications. A Qualitative Study in Brazil, 2015"; Lamond and Kinyanjui, *Cholera Outbreak Guidelines: Preparedness, Prevention and Control*; Vetter et al., "The 2014-2015 Ebola Outbreak in West Africa: Hands On"; Rugarabamu et al., "Forty-Two Years of Responding to Ebola Virus Outbreaks in Sub-Saharan Africa: A Review."

⁴⁴Robert A. Dahl, "The Behavioral Approach in Political Science: Epitaph for a Monument to a Successful Protest," *The American Political Science Review* 55, no. 4 (1961): 763-72, <https://doi.org/10.2307/1952525>; Ithiel de Sola Pool, *Humane Politics and Methods of Inquiry*, ed. L. S. Etheredge (New Jersey: Transaction Publisher, 2016); Byron Kaldis, *Encyclopedia of Philosophy and the Social Sciences*, vol. 1 (Los Angeles: SAGE Publications, Inc, 2013).

⁴⁵N. T. Block, "Handbook of Public Policy," *Psychiatric Services* 58, no. 9 (2007): 1231-1231, <https://doi.org/10.1176/appi.ps.58.9.1231>.

⁴⁶"Politics LASWELL.Pdf," n.d.

logic of democratic theory, the people should get the main thing (service excellence) from what is done and made by the government. For the people, the government also makes policies. Policy to create life together.

Aristotle clearly stated that politics has the dimension of creating a shared life, not a personal or group life, but a shared life or living together.⁴⁷ So, it is called humans as political beings (homo politicon), by politics will create a better human life. Talcott Parsons talks about politics also emphasizing politics on the problem of human actions oriented to a collective life rather than an individual life. According to him politics is an aspect of all actions concerning collective effort, for purposes which are also collective in nature.⁴⁸ When viewed more broadly, Laswell's political theory is also directly related to fair policy making and includes the distribution of justice. In the context of the outbreak of COVID-19 is creating government relations with the community, to the granting of rights to those who are victims of COVID-19 and having a direct or indirect impact on the COVID-19 pandemo. Thus, politics is interpreted not only to see the vertical side - how the government has the authority to make policies and control the policies made - but also related to the horizontal side that prioritizes equality between the government and citizens. This will give birth to the paradigm of social justice in a world situation facing the COVID-19 pandemic.

Politics is actually a key word to create a shared life among members of the community, with the presence of politics, then the problem of an individual nature becomes fused in a shared life, because what is put forward is the collective spirit, togetherness

⁴⁷"No 9 Title," n.d.; Laura Valentini, "Justice, Disagreement, and Democracy," *British Journal of Political Science* 43, no. 1 (2012): 177–99, <https://doi.org/10.1017/S0007123412000294>; Fred Miller, "Aristotle's Political Theory," in *The Stanford Encyclopedia of Philosophy* (Center for the Study of Language and Information (CSLI), Stanford University, 2017).

⁴⁸American Philosophical Society and American Philosophical Society, "On the Concept of Political Power Author (s): Talcott Parsons Reviewed Work (s): Published by: American Philosophical Society Stable URL: <http://www.jstor.org/stable/985582>." 107, no. 3 (2012): 232–62.

among fellow citizens. Likewise with the government, it needs to be a good relationship with the community so that the community continues to support and participate in policies made by the government, as stated by John Rawls. Rawls refers to justice as a way to create a better social life for society, in the form of the realization of justice. According to Rawls, justice to achieve a good social order.⁴⁹ Politics is a way to create justice, justice perceived by the public, not justice that applies to a handful of the ruling government elite.⁵⁰

David Easton sees politics as a unified system and the overall interaction related to values and their distribution based on the authority obtained by those who have authority (authority) on behalf of the people or the public. The public provides input (input) to the owner of the authority to be used as a policy relating to the public.⁵¹ The government made policies based on the authority given by the people, in response to the COVID-19 pandemic. Then the people participated in the policies made by the government. It is clear that the cycle of power is united in a simple sentence "from the people, by the people, and for the people." The people mandate the government to make policies that are related to the people's destiny, these policies are then supported and criticized by the people, as a form of direct participation in their lives.

C. Conclusion

Countries in the world seemed to race to conquer the spread of COVID-19 which took place on a massive scale, from human to human. Since it was discovered late in 2019 in China, COVID-19 has infected tens of millions of people, and caused millions of people died worldwide. COVID-19 also overturned the global macroeconomic assumptions and the micro economics of the countries in the world. No matter big or small countries, developed or developing countries. All were hit by COVID-19. The

⁴⁹*No Title*, n.d.

⁵⁰Pilar Domingo, "Rule of Law , Politics and The Politics of Rule of Law," no. January (2017).

⁵¹"David Easton Political System.Pdf," n.d.

governments of the countries in the world responded to COVID-19, but not all of them succeeded. Only countries that are fast and appropriate in responding to and supported by their citizens are able to overcome the effects of the COVID-19 outbreak, like South Korea. The forms of government response in facing and dealing with the impacts caused by Covid-19. There are groups of countries that are quick to respond, and some are slow and even tend to underestimate. The forms of community participation in the world to deal with effects of Covid-19, there are community is aware of funds actively involved in dealing with COVID-19 the success rate overcomes the impact of COVID-19 is quite high when compared to countries whose citizens are fairly passive, or even do not want to be involved at all to participate (apathetic).

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