

Policy Responses on Covid-19 Pandemic:

A Comparison Between West Java Province and East Java Province

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Abstract—This study described how policies are implemented in response to current health disaster condition. Policy was regarded as a concrete effort by the Government to deal with current problems. Comparison of policies was carried out in order to compare policies with one another in order to determine their strengths and weaknesses. A qualitative approach was used in this study, where data collection used documentation and literature study. The location of this research was in two areas, namely West Java Province and East Java Province. Policy comparisons were made based on 2 (two) main policy focuses, namely the Covid-19 response policy and the social safety net policy. There were different forms and characteristics of policies in the two regions, so that the resulting impacts were also different. The Government's response regarding the Covid-19 countermeasure policy is a strategic and concrete answer in minimizing the impact of Covid-19.

Keywords—comparative, policy, Covid-19

I. INTRODUCTION

Since the beginning of 2020, the Covid-19 pandemic has begun to spread around the world. Indonesia as one of the countries in the Southeast Asia region recorded its first patient in March. Since then, until now (September 2020), Indonesia is still in a pandemic period and has not shown any indication of a decrease in cases. As one of the countries with the fourth largest population in the world, it is a warning that the opportunity for massive spread is possible to occur. The virus that attacks the human respiratory organs has become a worldwide health disaster, even having direct implications for global economic and political conditions. The real implication for the global economy is when the majority of countries in the world experience a recession. On the other hand, from a geopolitical perspective, a pandemic is called a "world war" because everything currently happening is considered to be regulated by certain groups or countries. This uncertainty makes negative prejudices among countries in the world.

Data released from the Covid-19 Task Force as of September 30, 2020, shows the number of confirmed positive patients in Indonesia is 287,008, with details of 61,321 active cases, 214,947 people recovered, and 10,740 people died [1]. This data is an accumulation of events from March to

September. When compared to several countries, the number of cases in Indonesia is indeed extremely small, but the government must continue to focus on dealing with bigger impacts in the future. Data released by WHO [2] reveals that the United States of America currently has the highest cases in the world with 7,077,015 people, followed by India (6,225.73 people), Brazil (4,754,464 people), and Russia (1,167,805 people).

During the Covid-19 pandemic, several countries in the world indirectly compete to produce effective and targeted policies. Collaboration between countries to move together to overcome these problems has also begun to emerge. It is not uncommon for Heads of Government to learn from other Heads of Government regarding the country's response to Covid-19. The number of confirmed cases indeed cannot be used as a reference whether the government's policy is right or not, even when the number of confirmed positive numbers is extremely small, it does not guarantee that the policy is right. This is because the determinants of the success of policies during the pandemic are highly diverse.

South Korea is a country that can be used as a model to refer. With the same conditions as other countries without any preparation, South Korea can control the number of positive confirmed cases perfectly. The South Korean government policy is able to flatten the curve of the Covid-19 virus without crippling the national health and economic system [3]. Apart from South Korea, there is also Sweden as a good example of responding to pandemic condition. Even though it does not implement a full lockdown policy, Sweden seeks to change behaviour without imposing on individuals [4]. Sweden's strategy to tackle COVID-19 is by limiting social distancing and restricting people in their activities. In line with this, the Government focuses on policies that produce self-protection with individual targets [5].

In contrast to Sweden, China's COVID-19 response strategy represents a mandate strategy, which involves authority-based coercive forces and social consensus [4]. Chinese President Xi Jinping declared fighting the virus a people's war, the Chinese authorities directed the public to support the government's tight control of human movement in the fight against COVID-19 [4]. Lessons from those three

countries can be used as a reference for the Indonesian country in responding it through a policy.

This study aims to produce a comparison of policies between West Java Province and East Java Province as a response to the Covid-19 pandemic. The two provinces have interesting data and characteristics to compare. In addition, the role of leadership is a determinant factor in influencing the success of policies. The results of this research can be used as lessons for local governments to enrich references and policy alternatives as a form of government response in the current pandemic.

II. METHODS

This research used a qualitative approach with descriptive research type. Data collection was carried out through two techniques, namely documentation and observation. Documentation was the main part in processing data and information was obtained from publications, reports, and

official reports. Meanwhile, observation was made to observe the activities of the two provincial governments in carrying out their policy agendas. Observation was made either directly or indirectly.

III. RESULTS

During the Covid-19 pandemic, all regions in Indonesia respond with various policies. Mostly, policy characteristics do not differ much among regions because they follow the instructions of the Central Government regulations. Policies formulated during the Pandemic are often top-down. However, in its implementation, it is not uncommon for policy mechanisms to differ among regions according to the role and leadership of the respective Regional Heads. With almost the same policies but different mechanisms, it turns out that they produce different results. This happens in West Java Province and East Java Province where the form of policy is almost the same, but the policy mechanism is different.

TABLE I. COMPARISON OF POLICY RESPONSES DURING THE PANDEMIC BETWEEN WEST JAVA PROVINCE AND EAST JAVA PROVINCE

	<i>Policy Focus</i>	<i>Policy Implementation</i>	<i>Policy Mechanism</i>
West Java Province	Covid-19 countermeasures policy	Restrictions on human movement through the implementation of the Large-Scale Social Restrictions (PSBB) at provincial level and the Large-Scale Social Restrictions (PSBB) at Bodebek and Greater Bandung; Conducting test & trace through door to door, drive thru & health facilities Improving health facilities	Regulated through West Java Governor Regulation number 27 of 2020, briefly summarized as follows: temporary suspension of activities at school; temporary suspension of working in the office and changed to work from home; places of worship are closed; temporary suspension of residents' activities in public places; restrictions on the use of transportation modes for the movement of people and goods; and the number of passengers using transportation modes is limited to 50%. Providing 27 mobile PCR test kits; making PIKOBAR application; and formulating the standardization of New Normal Adaptation.
West Java Province	<i>Jaring Pengaman Sosial (JPS)</i> /Social safety net policy	There are several types of social assistance programs, namely PKH Murni (not receiving BPNT); kartu sembako (basic food cards)/non-cash food assistance (BPNT); Presidential assistance, Village Fund Assistance, Cash assistance from the Ministry of Social Affairs; Social assistance from West Java Province; and social assistance from the district/municipality.	JPS divides into 3 (three) groups, namely: 1.) Group A, namely citizens who have been registered in the Integrated Social Welfare Data (DTKS) by the central government; 2.) Group B, namely non-DTKS residents, also known as residents who have become prone to new poverty due to the COVID-19 pandemic; and 3.) Group C is Group B who is also a migrant or not having an ID card according to their domicile or person in the West Java region.
East Java Province	Covid-19 countermeasures policy	Restrictions on human movement through the implementation of Large-Scale Social Restrictions (PSBB) in regencies/municipalities in Surabaya, Sidoarjo, Gresik and Greater Malang Performing testing, tracing, and treatment (3T) massively Improving health facilities, building Indrapura field hospital Creating Kampung Tangguh Covid-19 (Firm Village to Fight Covid-19)	Regulated through Governor Regulation No. 21 of 2020, summarized as follows: Restrictions on the work process in the workplace/office (there are exceptions for certain types of work); If a case is found in the workplace, work activities must be stopped for at least 14 calendar days; The activity of providing food and beverages is limited to take away service only; hospitality activities are required to apply health protocol by providing special services for guests who wish to self isolate; restrictions on religious activities in places of worship; and Restrictions on activities in public places or facilities. Building 27 laboratories for testing specimens from PCR test results, apart from having a mobile molecular laboratory. Strengthening the role of villages to be firm in overcoming Covid-19 and supporting the implementation of Jaring Pengaman Sosial (a social safety net).

Table I. Cont.

	<i>Policy Focus</i>	<i>Policy Implementation</i>	<i>Policy Mechanism</i>
East Java Province	Jaring Pengaman Sosial (JPS)/Social Safety Net Policy	<p>Here are eight government assistance schemes for residents affected by Covid-19 and schemes for migrant residents.</p> <ol style="list-style-type: none"> 1. Program Harapan Keluarga (PKH)/Family Social Assistance 2. Bantuan Pangan Non Tunai (BPNT)/Non-Cash Food Assistance (BPNT) 3. Kartu Sembako/Basic food card 4. Bantuan Langsung Tunai (BLT)/Direct Cash Assistance (BLT) of the Ministry of Social Affairs 5. Bantuan Langsung Tunai (BLT)/Direct Cash Assistance (BLT) from the Village Fund 6. Program Prakerja/Pre-Employment Program 7. Bansos/Social Assistance from the East Java Provincial Government 8. Radar Bansos/Social Assistance for migrant residents. 	<ol style="list-style-type: none"> 1. The PKH is a program of providing social assistance to poor and vulnerable families. 2. Bantuan Pangan Nontunai (BPNT)/Non-cash Food Assistance. This assistance is to strengthen protection for the community so that they have access to nutritious food of 2.4 million/year per family. 3. Prakerja Program is a training fee assistance program and incentives for workers, job seekers, and micro and small business actors who have lost their jobs and/or experienced a decrease in purchasing power due to the Covid-19 pandemic. 4. Bantuan Langsung Tunai (BLT)/Direct cash assistance from the village fund program. Per month, poor household who meet the criteria will receive IDR 600,000

Source: Processed by the Researchers, 2020

IV. DISCUSSION

The spread of Covid-19 at the end of 2019 resulted in a response to various policies in the central and local governments. The majority of policy characteristics that emerged during a pandemic were top-down from the Central Government to Regional Governments. The Covid-19 pandemic has had a huge impact on society and the business sector. Such control measures require the role of public administration as a regulator [3]. The role of public administration through its policy response tremendously influences conditions in the regions. Public administration as a policy maker and policy implementer has been used as a locomotive for the prevention of Covid-19.

Learning from countries in the world, mostly, the first response made by the Government is to cover a total area. On January 23, 2020, Wuhan municipal government announced “lockdown” measures and implemented quarantine across the city [6]. Unlike Wuhan China which immediately implemented a lockdown, South Korea did not do the same thing directly. South Korea recorded its first coronavirus disease 2019 (Covid-19) case on January 20, 2020. South Korea’s responses in three policy strategies: (a) Speedy and swift action, (b) “3T” measures (widespread Testing, contact Tracing, and rigorous Treating), and (c) public-private cooperation and civic awareness [3]. Moving to the continent of Europe, Italy was the first European country to experience hotspots of COVID-19 infection and is still reporting one of the highest number of deaths in the world. Italy involves public administration experts in producing knowledge and policy recommendations [7]. During the pandemic at the beginning of the time, the Italian Government focused on two policies, namely health and budgeting [7].

Positive confirmed cases in several countries are still increasing, including in Indonesia. The average number of increasing daily cases in Indonesia is around 4000 confirmed positive people. On the other hand, the number of cures per day is also increasing by an average of around 3600 people. The most cases in Indonesia are still being contributed by Special Capital Region of Jakarta (72,577 people). The next position is occupied by East Java (43,450 people), Central Java (22,205 people) and West Java (21,759 people). The four provinces in Java Island are the largest contributors to positive cases of Covid-19 in Indonesia. With areas directly adjacent to each other, it is interesting to study their effects on one another to what policy responses are produced from one another. In this study, there are two regions that are used as loci, namely West Java Province and East Java Province. These two regions have their own characteristics and advantages in responding to pandemic condition with various policies.

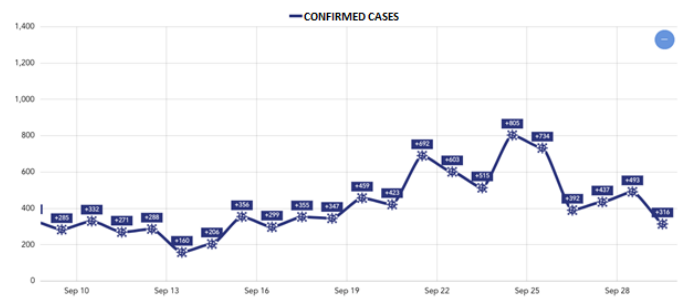


Fig. 1. Data on the spreading of confirmed cases in West Java. Source: Covid19.go.id.

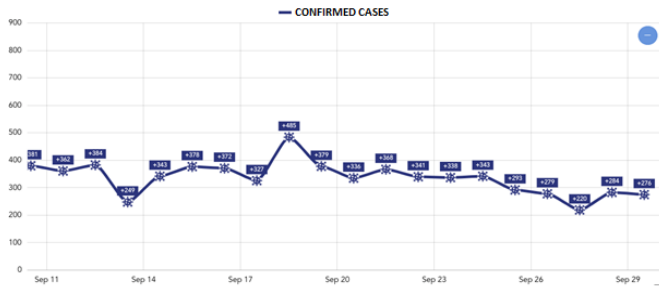


Fig. 2. Data on the spreading of confirmed cases in East Java. Source: Covid19.go.id

The Provincial Governments of West Java and East Java Province based on table 1, figure 1 and 2. mentioned there were two policy focuses during the pandemic. First, the Covid-19 response policy in which the two provinces have almost the same policy forms. Implementing Large-Scale Social Restrictions (PSBB) and carrying out massive rapid tests to increase the number of specimen testing laboratories. Second, Jaring Pengaman Sosial/the social safety net policy in which the two provinces also have almost the same policy forms. There are 7-8 social assistance programs with various targets. This indicates that the policies during the pandemic in the regions are directed to be harmonized under the coordination of the Central Government.

V. CONCLUSION

During the current pandemic, an effective, efficient, and fast-moving crisis management and governance are needed. The speed of the Government in responding to current conditions is a priority need. Through the public administration approach, the response that can be generated by the Government is in the form of policies. The interesting thing in

Indonesia is that the majority of policies during the pandemic are top-down and mandatory from the Central Government to Regional Governments. This is proven by the comparison of policies during the pandemic in West Java Province and East Java Province which have almost the same policy forms in which the difference is more from the policy mechanism. The policy pattern that is directed in harmony from the centre to the regions is expected to become the Government's strategic step in tackling Covid-19.

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