



Multilateral Policy Coordinated in Order to Facing Global Pandemic of Covid-19

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Abstract. The Covid-19 pandemic outbreak has hit various parts of the world and this has caused limited activities and has an impact on the life sector. To date, data from JHU CSSE COVID-19 55 million positive cases of Covid-19 have been confirmed in the world and the death toll is 6.35 million. These figures show how serious and dangerous this disease is in the survival of the world community. Facing this case, of course, requires cooperation or coordination of various countries (multilateral) to accelerate the handling. The World Health Organization as a world organization engaged in the health sector should be a pioneer in making this health policy. One form of world policy in this case is contained in the International Health Regulation (IHR) which regulates travel rules between countries when a pandemic case like this occurs. International Health Regulations, which are incorporated in legislative obligations to improve confidence between nations, allow for the coordination of evidence-based travel policies at the international level. However, the numerous commerce and travel restrictions put in place during the pandemic violated these laws. Governments encounter complicated domestic issues that limit their ability to manage long-term global commitments to provide global public goods, which is another hurdle to international cooperation.

Keywords: COVID-19 · Pandemic · Multilateral Policy · Diplomacy · International Collaboration

1 Introduction

A viral infection is what causes Covid-19 pandemic, an illness. The world has been affected by the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) pandemic. COVID-19 has the potential to cause respiratory illnesses, ranging in severity from flu-like symptoms to lung infections like pneumonia. To date, data from JHU CSSE COVID-19 It has been confirmed that there have been 6.11 million positive cases of Covid-19 in Indonesia and a death toll of 157,000. These figures show how serious and dangerous this disease is in the survival of the world community. This virus also has an impact on various sectors of life ranging from the economic sector, social culture, to education which ends up being forced to all be done remotely to minimize interaction between humans. In the beginning, all of humanity was forced to adapt to the existing situation with all its changes. Activities that previously could be done freely are now

completely limited and need to be minimized. The life of the world is no longer like it used to be, where you are free to roam here and there without thinking about disease, now everyone must wear a mask to prevent the spread of the virus. The school that used to be a place to study with friends with fun at the beginning of the pandemic was also carried out from their respective homes. Likewise, in the workplace, where previously office people worked from the office, they are now making adjustments to work from home.

The development of the Covid-19 virus can now be seen the change in the number of cases and the death rate which is decreasing day by day. This is a good sign for what efforts have been made by various stakeholders since the emergence of this virus until now. Not to mention the crucial effort done by healthcare professionals who are at the forefront of addressing the Covid-19 virus. For the purpose of addressing COVID 19, the Indonesian government has set up Rp405.1 trillion. The budgetary allocation is used for the business sector, funding for MSMEs, tax advantages, and business loans for people. The budget for the Family Hope programme was also boosted by the government by 25%, as were the budgets for staple food cards by 33% and pre-employment cards by IDR 10 trillion to IDR 20 trillion. Around 24 million 450 VA power users had their electricity payments cancelled, and 7 million 900 VA electricity users received a 3-month, 50% subsidy from the government. When that happens, the government will offer low-income communities incentives of up to Rp. 175 thousand for subsidised housing quotas and budget Rp. 25 trillion for logistics to finance basic needs and basic needs of the community [1]. The government has also taken the handling of this pandemic seriously by issuing policies such as school from home/work from home, social distancing, using masks wherever you are, to travel rules. Minimizing the spread of the Covid-19 virus has made the government prohibit people from traveling such as going home which is commonly done during holidays. Homecoming is a very identical thing during the holidays where people return to their hometowns to unwind and meet their families and celebrate the holidays together. However, again the circumstances forced to limit all activities for the common good.

Not only Indonesia, the Covid-19 virus pandemic has also become a common enemy of various countries around the world. Thus, these countries also face problems that but of course in each country has its own policy. These policies are certainly oriented towards the common good and restoring various sectors of life. China as the country that first experienced the impact of this virus issued a policy to fight this outbreak which of course can be an example for other countries. Currently, According to reports, Wuhan has defeated Covid-19 and is now able to congregate without a mask. In reality, a number of music festivals have been held to commemorate this independence, including the Wuhan Music Strawberry Festival, which drew 11,000 visitors. The Deep Knowledge Group (DGK) compiled a security ranking of countries in the world in the face of Covid-19. On a global scale, Switzerland ranks first. The country managed to pocket a score of 752 points. Switzerland excels in government risk management (188 points). Just below Switzerland, Germany followed with 749 points. Israel sits in third position with 748 points. Both also excel in risk management by the government with 194 points and 191 points. While Indonesia is in position 97 with a score of 450 points [2]. The assessment indicators according to the Deep Knowledge Group are quarantine efficiency, government risk

management, monitoring and detection, health preparedness, regional resilience, and emergency preparedness. The categories are further divided into 30 indicators and 130 parameters.

The results of the various policies of several countries can be emulated when a country has announced to be free of masks. One example is America, On May 13, 2021, the United States Centers for Disease Control and Prevention (CDC) announced the lifting of the rule to wear masks for residents who have received the Covid-19 vaccine. This provision, according to the CDC's most recent public health guidelines, is applicable both indoors and outdoors. The advice also lists specific situations when masks are still necessary, such as at hospitals or other places of business. This restriction also applies to those who haven't had a vaccination in at least two weeks and aren't allowed to wear a mask. The US uses vaccinations made by Pfizer/BioNTech, Moderna, and Johnson & Johnson. The effectiveness of the vaccine is 90%. Since April, Israel has likewise dispensed with the requirement to wear masks. Additionally, more than 50% of locals are fully immunised. Israel employs the Pfizer/BioNTech vaccination just like the US. With nearly 70 percent of the population receiving the vaccine, the government removed the mandatory rule of wearing masks. The country has reported no new Covid-19 cases since April 24. It marks a great achievement for this country. In fact, the infection rate became the highest in the world in mid-January this year. Israel as a whole recorded 8,39,000 cases of Covid-19 and 6,392 deaths. It marks a great achievement for this country. In fact, the infection rate became the highest in the world in mid-January this year. Israel as a whole recorded 8,39,000 cases of Covid-19 and 6,392 deaths. It marks a great achievement for this country. In fact, the infection rate became the highest in the world in mid-January this year. Israel as a whole recorded 8,39,000 cases of Covid-19 and 6,392 deaths [3].

The pandemic that made fundamental changes in various sectors then forced the government to adjust its rules or policies. In the policy-making process, the Rational decision-making process examines policies from the perspective of a calculated (rational) and controlled by objectivity. First, based on the main pillar, namely from a rational perspective, policies must be based on complete information and all variables are identified. Then in terms of the policy process, this model is carried out based on logical steps, phases, and processes. The process includes calculations, projections, planning, and formulations, and must be based on completeness of information. From the aspect of institutional context, this model tends to be closed, unicentric, hierarchical, and authoritative. Second, based on the implications for policy analysis that this model provides the knowledge and information needed in a policy. Because the mission of policy analysis is to reduce uncertainty in policy making [4]. This method is the most commonly used method in policy making around the world. Why is that because the rational decision making process places more emphasis on efficiency and economic aspects in policy making [5].

2 Policies Made by the State and Who During the Covid-19 Pandemic

Policies made by the government since the Covid-19 pandemic must of course adapt to existing conditions and be oriented towards returning to their original conditions. It is also possible that there are work regulationstogether between countries to tackle this

pandemic. The rules issued by the Indonesian government include large-scale social restrictions (PSBB). The Government Regulation regarding this policy was then made in conjunction with the issuance of a Presidential Decree regarding the status of a health emergency. The guidelines for significant social restrictions were revealed to be Regulation of the Minister of Health Number 9 of 2020. Large-scale social restrictions were first put into place by the government on April 10; they were first imposed in Jakarta and then spread to other cities. Basically, Law Number 6 of 2018 Concerning Health Quarantine contains the regional quarantine policy. According to Article 9, quarantine is used to safeguard the community from illness and/or other sources of public health threats. The Central Government and Regional Governments are in charge of maintaining the community's health and are accountable for addressing the community's needs under the quarantine policy. The Covid-19 virus can be controlled with lockdown and social seclusion measures [6].

What about the health regulations established by the multinational body engaged in the health sector, the World Health Organization (WHO)? WHO being a multilateral organisation founded by United Nations (UN) treaties among member states, and governed by the World Health Assembly (WHA) following the principle of one member one vote, its authority is dependent on the countries that accept agree to follow the rules institutional. Under its mandate, WHO is tasked with coordinating international health work (Article 2a) as well as assisting Member States 'on request, in strengthening health services' (Article 2c) and providing 'appropriate technical assistance and, in an emergency, necessary assistance upon request. or Government revenue (Article 2d) (Article 2d). As a result, WHO is required to advance the interests of its members and lead efforts to improve global health [7]. Three traits can be found in multilateral relations. They are indivisible, to start. Everyone is treated fairly. For instance, every WTO member nation must provide the same conditions to all other nations outside of specific agreements like those made by the European Union (EU). Second, reciprocity is a widely held expectation. In other words, even though one side could gain more in a particular transaction than the other, this will eventually balance out. Third, there are several methods of resolving disputes to guarantee that the terms of the agreement are followed. The expansion of multilateral accords since the Second World War is evidence of their perceived worth, both by large countries that frequently have a significant influence on rule-setting and by small countries that can gain greater influence by cooperating. Multilateral agreements do, however, call for some degree of centralised sovereignty, which may arouse hostility from some national governments. The alternative horizontal development model, which is supported as a component of south-South cooperation, places an emphasis on mutually advantageous strategic alliances and proclaims political independence in respect to the neocolonial global order. The question that then arises is: Can WHO create a more socially inclusive development paradigm that promotes cooperation, equality, and justice? Multiple sovereignties are unified as a result of multilateral agreements, which may arouse hostility from some national governments. The alternative horizontal development model, which is supported as a component of south-South cooperation, places an emphasis on mutually advantageous strategic alliances and proclaims political independence in respect to the neocolonial global order. The question that then arises is: Can

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3 Multilateral Coordination in Policy Making in Order to Facing the Pandemic of Covid-19

Multilateral collaboration has clear advantages, but it is frequently challenging to implement [8]. These four factors, which are connected to the creation of global public goods, explain this challenge: The following reasons make it difficult for governments to handle long-term international commitments to produce global public goods: (i) it is difficult to develop a shared vision of a global public good; (ii) governments face complex domestic issues; (iii) different governments pursue different goals; for instance, they may share the same goal of fighting a pandemic but have very different security, financial, or industrial goals; and (iv) previous failed initiatives.

The interaction between “scientific globalism” (seeking open and collaborative knowledge to advance knowledge and address shared challenges) and “scientific nationalism” (seeking local scientific advances to advance national agendas such as economic competitiveness and foreign policy objectives) has been used to describe international collaboration around research on COVID-19 and similar threats [10]. The COVID-19 epidemic necessitates more multinational cooperation to speed up data exchange, from the perspective of “globalism.” Through the early interchange of laboratory and surveillance data, genome sequences, and data on clinical outcomes, it is apparent that the international research community, comprising academic, health, industry, and professional groups, collaborated [11]. According to the bibliometric data, there were more scientific articles with international collaborations published in the first five months of 2020 than there had previously been. Although it has lately been threatened by disagreements about the origins of SARS-CoV-2, such collaboration is still viable between researchers in nations where political cooperation is contentious, such as America and China. The development of vaccinations, which is the only approach to lower the number of Covid-19 by building herd immunity, is also done through international coordinated cooperation. Market dynamics will dictate that supply flows to the countries who can best afford to pay the high rates for the vaccine, while the poorer countries will lose

out due to the vaccine's limited supply, high production costs, and significant worldwide demand. The best way to do this is difficult to determine, but an alternative is to enter into a multilateral agreement to distribute doses as necessary. The majority of COVID-19-related deaths occurred in high-income nations, while the disparity was lessened when underreporting was taken into consideration [12].

According to international health regulations, limits on travel during emergencies should be supported by facts. Evidence suggests that these limitations are most helpful when COVID19 (and the incidence of variant of concern) are uncommon in the destination country. Restrictions on travel imposed by nations with high COVID-19 prevalence may have had little effect on the dynamics of the pandemic [13]. As previously mentioned, Indonesia has also released travel regulations that prohibit returning home. Free movement entails a duty to integrate health regulations, which could have implications for Europe. In nations like Sweden, who have adopted different COVID-19 response policies than many of their neighbours, this could be difficult. Perhaps one area that could lead to greater epidemiological convergence within Europe and, perhaps, in its public health competence, is the alignment of vaccination distribution tactics (not simply procurement). The fact that different nations have varying levels of economic resilience and reliance on international travel presents another difficulty, necessitating the potential need for solidarity structures to support the most severely affected nations as regional regulations are harmonised. The International Health Regulations, which are incorporated in legislative obligations to improve confidence between nations, enable evidence-based travel policy cooperation on a worldwide scale. However, the numerous commerce and travel restrictions put in place during the pandemic violated these laws. A lack of transparency regarding the use of evidence in decision-making is another issue. For instance, a misunderstanding of the GISAID data may have led to the UK's decision in July 2021 to mandate quarantine for fully immunised French passengers. International health regulations allow for the coordination of evidence-based travel policies that are legally binding and improve international confidence. However, the numerous commerce and travel restrictions put in place during the pandemic violated these laws. A lack of transparency regarding the use of evidence in decision-making is another issue. For instance, a misunderstanding of GISAID data may have led to the UK's decision in July 2021 to mandate quarantine for fully immunised French passengers. International Health Regulations provide for the coordination of evidence-based travel policies that are legally binding and improve confidence between nations. The numerous commerce and travel restrictions put in place during the pandemic, however, violated these laws. A lack of transparency regarding how evidence has influenced decision-making is another issue. For instance, a misunderstanding of the GISAID data may have led to the UK's decision in July 2021 to mandate quarantine for fully immunised French passengers. A lack of transparency regarding the use of evidence in decision-making is another issue. For instance, a misunderstanding of the GISAID data may have led to the UK's decision in July 2021 to mandate quarantine for fully immunised French travellers [14]. In order

to foster greater international trust, WHO has recommended for tighter legal obligations between nations. Strong multilateral collaboration seems necessary for the world to absorb these shocks.

Policy coordination is also applied, one of which is travel rules that do not rule out the possibility that trade activities are carried out between countries and enter the territory between countries. The World Health Assembly adopted the International Health Regulation (IHR) in 1969, and all member states reviewed and revised it in 2005. The IHR's 2005 mission and mandate are to "prevent, protect, control, and provide a public health response to the spread of international disease in a manner commensurate with and restricted to public health concerns, and which minimises needless interference with international trade and traffic." According to Article 43 or other applicable international accords, ships or aeroplanes should not be prohibited from calling at any point of entry for public health grounds, according to the first paragraph of Article 28 IHR (2005). The ship or aircraft may be instructed to proceed at its own risk to the closest accessible port of entry if the entrance is not equipped to implement the health precautions required by this Regulation, unless the ship or aircraft has operating facilities. Difficulties that would render this reroute risky. In the meantime, the second paragraph of Article 28 IHR (2005) states that "ships or aircraft may not be refused by a State party for reasons of public health; in particular, they must not be prevented from ascending or descending, unloading or loading cargo or storage, or retrieving fuel, water, food, and supplies; subject to Article 43 or as provided for in applicable international agreements." In addition, the third paragraph of Article 43 IHR (2005) states that "a State Party shall provide WHO with the public health justification and relevant scientific information for any additional health measures it implements that significantly affect international traffic, including the refusal of entry or departure of international travellers, baggage, cargo, containers, conveyances, goods and the like, or the delay of the same of more than 24 h." Many nations adopted some cross-border measures during the COVID-19 pandemic that are outside the purview of the IHR (2005). However, the IHR (2005)'s provisions cannot be enforced by the WHO Secretariat against member nations [15].

4 Conclusion

The epidemic presents an opportunity to rethink governance frameworks and draw lessons from the past. The necessity of international cooperation in a variety of areas, including research and knowledge exchange, the discovery, production, and distribution of vaccines, and travel restrictions, has been shown by COVID-19 and past pandemics. Beyond infectious diseases, tackling the effects of additional global disease factors like food insecurity and climate change, such as multinational health infrastructure, will be essential. Effective multilateral action is founded on a number of principles, not all of which are universally acknowledged, as was previously mentioned. The numerous advantages of international cooperation are inseparable, and the universal reciprocity principle necessitates that relationships be founded on trust. Regulations issued in the face of the Covid-19 pandemic must be integrated and coordinated between countries because this pandemic has also hit various countries. International agreements and multilateral policies are needed so that this pandemic can be immediately overcome and

turned into an endemic. Therefore, it is possible that countries must always prioritize common interests above their political problems in order to solve world problems.

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