

## HANDLING THE COVID-19 PANDEMIC IN INDONESIA AND INDIA: A CRITICAL FLASHBACK IN 2020

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### Abstract

*The Covid-19 pandemic is one of the most common pandemics in contemporary history. The preparedness of a country is also determined by how well it is able to reduce the rate of spread, the fatality rate, the ability to handle infected patients, as well as from the capacity to mobilize and manage resources appropriately to deal with crises and their impacts. This study attempts to compare the approaches of Indonesia and India in handling the Corona Virus Diseases (Covid-19) pandemic in 2020. This study adopts a qualitative research approach by using secondary data which are collected from the printed and electronic media related to Covid-19 in Indonesia and India. It was found that India implemented a total lockdown until September 2020 because the number of positive cases of COVID-19 in India reached more than 4.7 million with a death toll of more than 78 thousand people. Meanwhile, Indonesia did not implement a total lockdown. It adopted the Large-Scale Social Restrictions (LSSR). Although it succeeded in temporarily suppressing the spread of Covid, the LSSR was considered not effective enough. Similar challenges were faced by India which chose to lock down the country. Despite being able to temporarily suppress the rate of Covid-19, the sudden implementation of a regional quarantine and minimal preparation created a humanitarian crisis.*

**Keywords:** Covid-19, Lockdown, Large-Scale Social Restriction, India, Indonesia

### A. Background

The Covid-19 pandemic is one of the most common pandemics in contemporary history. In the midst of deepening globalization and the massive development of information technology, this pandemic presents greater and more complex challenges. The study that emerged shortly after Covid-19 was declared and its impacts hit the global and domestic political economy. If the previous pandemics were transmitted through animal intermediaries or special interactions between humans, the Covid-19 has a character that is transmitted directly between humans.<sup>1</sup> Governments in many countries are faced with a confusing situation when the Covid-19 outbreak appears. They are forced to take strategic steps to deal with and respond to the pandemic. Each country shows different readiness.

Starting from the city of Wuhan, China, a new variant of the virus which was later identified as SARS Cov-2 became a disaster that was endemic in all

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<sup>1</sup> Muhammad Adnan Shereen et al., "COVID-19 Infection: Origin, Transmission, and Characteristics of Human Coronaviruses," *Journal of Advanced Research* 24 (July 2020): 91–98, <https://doi.org/10.1016/j.jare.2020.03.005>.

countries in the world. The country's response to the Covid-19 pandemic has varied. A country is said to be responsive in handling a pandemic if there is strong leadership. The preparedness of a country is also determined by how well it is able to reduce the rate of spread, the fatality rate, the ability to handle infected patients, as well as from the capacity to mobilize and manage resources appropriately to deal with crises and their impacts. Comprehensive policies also cover the entire cycle of crisis situations, starting with emergency response, handling socio-economic impacts. To cope with the development of the virus, various ways are taken by the state in order to ensure the survival of its citizens. Handling Covid-19 and its impacts, requires a very large capacity of resources.

The Covid-19 pandemic has also shown the good and bad governance and policies of a country's government. At first the Indonesian government showed stuttering and was trapped in denial of the urgency and impact of Covid-19 before finally taking the steps needed to deal with the pandemic more systematically.<sup>2</sup> Meanwhile, India with a population of more than 1.3 billion recorded an increasing number of positive cases of Covid-19. In July 2020, one month after the lockdown was eased, India became the third country with the most Covid-19 cases in the world after the United States and Brazil. Cases are growing rapidly with the addition of more than 20,000 confirmed cases every day.<sup>3</sup> Apart from advances in technology and health services, the pandemic has forced the government to take policies that tend to be trial and error, which have an impact on the sustainability of the lives of its citizens. Various approaches to dealing with the Covid-19 pandemic cannot be separated from the influence of the political system, culture and style of each country's leaders. For example, South Korea chose to use tracing as widely as possible, India chose a lockdown, or the use of Large-Scale Social Restrictions/LSSR (*Pembatasan Sosial Berskala Besar/PSBB*) carried out by Indonesia. In Japan, schools and colleges were closed from mid-March 2020. The closure forced around 13 million students and students across Japan to stay at home, stopping all face-to-face lectures, and internship programs at companies.<sup>4</sup> The governments of Vietnam, Laos, India, Sri Lanka, and Malaysia have decided to close all educational activities since early March 2020. The pandemic also raises new issues regarding the sustainability of which political system is most relevant and successfully handles crises for the sake of human civilization. Political scientists are re-launching the debate about the type of regime, democratic vs. authoritarian,

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<sup>2</sup> Wawan Mas'udi and Poppy S Winanti, *Tata Kelola Penanganan COVID-19 Di Indonesia: Kajian Awal* (Yogyakarta: Gadjah Mada University Press, 2020).

<sup>3</sup> BBC News, "Covid-19: Sebulan Usai Longgarkan Lockdown, India Jadi Negara Ketiga Dengan Kasus Terbanyak Di Dunia," BBC News, 2020, <https://www.bbc.com/indonesia/dunia-53306305>.

<sup>4</sup> Helen Davidson, Lily Kuo, and Justin McCurry, "The Longest Holiday: Parents Coping with Coronavirus School Closures in East Asia," *The Guardian*, 2020, <https://www.theguardian.com/world/2020/mar/03/the-longest-holiday-parents-coping-with-coronavirus-school-closures-in-east-asia>.

and also which government policy options are effective, lockdown vs. non-lockdown.

Both Indonesia and India are countries on the Asian continent that are included in the study of the Global Democracy Ranking with positions that are not much different. According to Global Democracy, in 2015 Indonesia was ranked 68th, while India was much better 3 places, namely at 65<sup>th</sup> ranking.<sup>5</sup> Indonesia and India are categorized as developing democratic states or democracies that are undergoing transition. Both have demographic and historical similarities that make civil society and the process of democratization between the two have similarities. One of them is the emergence of the phenomenon of uncivil society (or a sick civil society). This is marked, for example, by the emergence of groups carrying certain identity politics by using violent campaigns in their movements.<sup>6</sup> This study attempts to compare the effectiveness of the governance of the Covid-19 pandemic in two countries, namely Indonesia and India. As a country equally affected by Covid-19, India imposed a total lockdown as a policy option taken by the government, while Indonesia implemented Large-Scale Social Restrictions for three months, starting from mid-March to June 2020.

## B. Identified Problems

In some countries the mobilization of enormous resources, both to deal with epidemics and to save the economy and people's daily lives through various forms of economic subsidies and social safety nets. The fast movements taken by each country in responding to Covid-19 determine not only the rate of development of Covid-19, but also the movement of the economy of its citizens. As with other affected countries, Indonesia is making various efforts so that the spread of the virus can be suppressed as much as possible. The vast territory of Indonesia, with a large population, has forced the Indonesian government to gradually impose restrictions on activities and the closure of regional access. The opposite choice was made by India, which suddenly made a total restriction. Indonesia is the country with the largest population in Southeast Asia. Likewise, with India, as the first most populous in South Asia. This condition raised concerns from the WHO that assessed if the two countries could become new epicentres. Senior Advisor on gender and Youth to the WHO, Diah Saminarsih said if these two countries cannot control the epidemic, the Southeast Asia Region will become the epicenter in the world, shifting America and Europe.<sup>7</sup> This is a big challenge for the governments of each country in formulating the policies they make. In

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<sup>5</sup> Global Democracy Ranking, "The Democracy Ranking of the Quality of Democracy 2015," Global Democracy Ranking, 2015, <http://democracyranking.org/wordpress/rank/democracy-ranking-2015/>.

<sup>6</sup> Gemael Flamirion and Muradi, "Demokrasi Civil Society Di Indonesia Dan India: Sebuah Perbandingan," *Jurnal Wacana Politik* 1, no. 2 (2016): 189–195, <https://doi.org/10.24198/jwp.v1i2.11061>.

<sup>7</sup> Ellyvon Pranita, "Pakar Peringatkan, Indonesia Dan India Berpotensi Jadi Episenter Baru Covid-19," *Kompas.com*, 2020, <https://www.kompas.com/sains/read/2020/04/10/180200123/pakar-peringatkan-indonesia-dan-india-berpotensi-jadi-episenter-baru-covid>.

addition, the management of the Covid-19 pandemic faces challenges due to the very high mobility of today's people. Covid 19 is also developing when populism (nationalist political leadership and anti-science attitudes) is increasingly widespread in the domestic politics of many countries. A situation where the government should take rational policies that are long-term in nature, replaced by short-term and interest-oriented political and popularity-oriented policies to strengthen power.<sup>8</sup> This pandemic character is used as a personal or group political commodity, at the expense of the essence of crisis management, namely humanity.

According to a Knowledge Group report published on the Forbes website, Indonesia is in the category of 20 countries with the lowest level of virus attack safety, with the highest transmission risks. In terms of safety as measured from policy aspects related to quarantine efficiency, government management efficiency, monitoring and detection, and emergency treatment readiness, Indonesia is in the five countries with the lowest security levels, along with India, Sri Lanka, Myanmar, Cambodia, and Laos.<sup>9</sup> As the country with the most population in the world, both India and Indonesia were faced with a big problem when the WHO declared the status of Coronavirus Disease (Covid-19) as a pandemic. The disease, which has infected more than 110 countries, has been treated with a different response. These various choices of attitude are considered successful if they are able to contain the rate of spread and the low number of deaths caused by Covid-19. Government control and responsive policies are not only a question of controlling the fatality rate but also the survival of its citizens in general.

By looking at the security of India which chose total restriction (lockdown), then Indonesia with Large-Scale Social Restrictions, this study wishes to see the effectiveness of the choices made by the two states. The decision-making mechanism carried out by policy makers plays the most role in suppressing the spread of Covid-19. In this regard, this study poses the following questions: 1) How did Indonesia and India handle the Covid-19 pandemic crisis in 2020? And 2) What are the results of comparing the two countries' approaches to handle the Covid-19 pandemic in 2020?

### C. Research Methods

The research design in this study is a comparative study. This type of writing refers to a form of descriptive research that compares two or more of the same or similar situations, events, activities, programs, etc.<sup>10</sup> The data collection technique in this study is to use the literature study method. Various

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<sup>8</sup> Andreas Kluth, "From Orban to Kaczynski, Wannabe Autocrats Love the Pandemic," Yahoo! Finance, 2020, <https://finance.yahoo.com/news/orban-kaczynski-wannabe-autocrats-love-155104181.html>.

<sup>9</sup> Margaretta Colangelo, "Deep Analysis of Global Pandemic Data Reveals Important Insights," Forbes, 2020, <https://www.forbes.com/sites/cognitiveworld/2020/04/13/covid-19-complexity-demands-sophisticated-analytics-deep-analysis-of-global-pandemic-data-reveals-important-insights/?sh=7e352b9c2f6e>.

<sup>10</sup> Syaodih, S. N. 2007. Metode Penelitian Pendidikan. Bandung: Rosdakarya.

secondary data including mass media articles, print and online related to the Covid-19 pandemic by focusing on studying in two countries, namely Indonesia and India. Other sources in the form of video recordings are supporting research data to understand further the Covid-19 pandemic, the response of affected countries, and its socio-political impact. The existing data is processed by the author using a critical reading approach.

#### D. Research Findings and Discussions

##### 1. The Indonesia's Approaches in Handling the Covid-19 Pandemic in 2020

When the first case of Covid-19 was confirmed in Indonesia on March 2, 2020, globally, the number of confirmed cases had reached 88,948. The first confirmed case of Covid-19 in Indonesia was reported by WHO in "Situation Report 2", where Indonesia was listed along with 5 other countries, namely Armenia, Czechia, Dominican Republic, Luxembourg, and Iceland.<sup>11</sup> The sudden crisis situation triggered panic from all parties, both at the central government level and regional governments as well as ordinary people. In such conditions, policy makers are required to make policies that can reduce potential conflicts due to crisis situations.<sup>12</sup> A week after the first case was confirmed and cases continued to soar, various parties began to raise their voices for a lockdown (regional quarantine) as has been exemplified by other countries such as China. However, this call for lockdown did not make the government budge. President Joko Widodo had confidence that the spread of Covid -9 can be done by physical distancing. Although the Indonesian Doctors Association (*Ikatan Dokter Indonesia/IDI*) considered regional quarantine to be more effective in breaking the chain of spread of Covid-19 than the implementation of LSSR, Joko Widodo did not enforce regional quarantine with economic, geographical, cultural, and sociological considerations for the Indonesian people, which were different from other countries implementing regional quarantine. According to Joko Widodo, the regional quarantine was not chosen after comparing the policies from other countries which were considered not to guarantee the success of implementing the regional quarantine without causing problems. According to him, there was no one definite formula to overcome this Covid-19 problem.<sup>13</sup>

The implementation of a new large-scale social policy was set by Joko Widodo at the end of March as a continuation of social distancing restrictions by using Government Regulation Number 21 of 2020 as a regulatory basis. This policy was taken due to the addition of cases that

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<sup>11</sup> World Health Organization, "Coronavirus Disease 2019 (COVID-19) Situation Report - 42" (Jenewa, 2020).

<sup>12</sup> Mas'udi and Winanti, *Tata Kelola Penanganan COVID-19 Di Indonesia: Kajian Awal*.

<sup>13</sup> Najwa Shihab, *Jokowi Diuji Pandemi: Didesak Mundur, Menkes Terawan Dipuji Jokowi (Part 1)*/ Mata Najwa (Indonesia: Youtube, 2020), <https://www.youtube.com/watch?v=JFHHzLixfXA>.

are increasing day by day. Government spokesman for the handling of Covid-19 Achmad Yurianto who is also the Director General of Disease Prevention and Control at the Ministry of Health said that the LSSR was carried out because of physical distancing which was ignored by the community. According to him, if social restrictions do not work, large-scale social restrictions would be imposed. This method was taken because it was believed to be able to break the chain of transmission. He added that social distancing must also be done because if it failed to do so, the country would be in danger of collapsing.<sup>14</sup> Indonesia was relatively late in responding to the crisis situation. When viewed from the perspective of public communication, Indonesia had done rash things with simplistic statements from public officials. For example, claims that Indonesia was the only country that was not infected, or the herbal medicine campaign as an antidote to drugs.<sup>15</sup>

WHO then warned Indonesia to immediately declare a Covid-19 national emergency through a letter dated March 10, 2020 addressed to the President of Indonesia, Joko Widodo.<sup>16</sup> The impact is that the government issues a “tofu” legal product. In just one month, 9 legal products related to the handling of the Covid-19 pandemic were issued. These policies were a response to the escalation of the problem in terms of public health, social, administration, finance, authority and politics of the government bureaucracy. To maintain state financial stability due to the pandemic crisis, the Indonesian government issued Government Regulation in Lieu of Law (*Peraturan Pemerintah Pengganti Undang-Undang/PERPPU*) Number 1 of 2020 concerning State Financial Policy and Financial System Stability for Handling Covid-19 and in order to deal with threats that endanger the national economy and financial system stability on March 31, 2020. This PERPPU serves as the legal basis for budget adjustments in extraordinary circumstances, as well as justification for the addition of the 2020 state budget and financing to deal with Covid 19, with a total additional 2020 state budget spending and financing of 405.1 trillion. In addition, funds of 110 trillion were allocated by the government for additional social safety nets related to Covid-19. The reach of the family of hope program was expanded from 9.2 million recipients to 10 million recipients and the value was increased by 25%. The allocation of basic food cards, which was originally budgeted for 15.2 million recipients, was enlarged to 20 million recipients with the benefit value increasing from 150 thousand

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<sup>14</sup> Tempo.co, “Pembatasan Sosial Untuk Hentikan Penularan Covid-19,” Tempo.co, 2020, <https://nasional.tempo.co/read/1328644/pembatasan-sosial-untuk-hentikan-penularan-covid-19>.

<sup>15</sup> Mochammad Fakhruroji et al., “Strategi Komunikasi Publik Penanganan COVID-19 Di Indonesia: Perspektif Sosiologi Komunikasi Massa Dan Agama,” Tesis., (Universitas Islam Negeri Sunan Gunung Djati, 2020).

<sup>16</sup> Tanti Yulianingsih, “WHO Surati Jokowi, Minta RI Umumkan Darurat Nasional Virus Corona COVID-19,” Liputan 6, 2020, <https://www.liputan6.com/global/read/4201537/who-surati-jokowi-minta-ri-umumkan-darurat-nasional-virus-corona-covid-19>.

to 200,000. Then the pre-employment card budget was increased from 10 trillion to 20 trillion with details on the number of recipients. benefits increased from two million people to 5.6 million recipients.<sup>17</sup>

The Large-Scale Social Restriction Policy was implemented after the issuance of Government Regulation (PP) Number 21 of 2020 dated March 31, 2020, three weeks after the first case was announced in Indonesia. The PP regulates the implementation of LSSR and local governments could implement it with the approval of the Minister of Health. With the number of cases increasing and spreading across regions, this policy was too late. Because the LSSR was only implemented in April, and not all regions implemented it at the same time. The LSSR in DKI Jakarta itself, for example, was only implemented in mid-April 2020. Then other big cities followed.<sup>18</sup> Even though the LSSR was enforced, people were still allowed to leave the house by following the health protocols that had been determined. The implementation of the LSSR which was enforced in various regions was not immediately obeyed by the community. Various violations still occurred and were found during the implementation of the LSSR. For example, crowds could still be found on main roads in some areas of the DKI Jakarta area for up to a week since the LSSR was enforced. There were still many motorbike riders who did not wear masks and ride on a bicycle. Likewise, with the traders who offered their wares. During the first period of implementing the LSSR in Jakarta, Polda Metro Jaya noted that there were 32,300 vehicles that violated the rules.<sup>19</sup> Based on the initial chronology of the government's response to the Covid-19 pandemic, there are four factors that caused the failure of the Indonesian government's LSSR policy, namely:

- a) Weak responses in the early handling of Covid-19. This can be seen from the 'relaxed' response shown by officials to the point of causing chaotic coordination between central and regional agencies. The communication crisis occurred and resulted in the handling of Covid-19 in various regions not being transparent and integrated. This condition can be seen from various studies that showed the dis-trust shown by the public to the government. Research conducted by INDEF stated that almost 66.3% of negative sentiment was directed not only to the government collectively but to the President and the Minister of Health, or the results of a survey conducted by change.org which stated 69.3% with a

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<sup>17</sup> Stanly Ravel, "Jumlah Pelanggar PSBB Jakarta Periode Awal Capai 32.300 Kendaraan," Kompas.com, 2020, <https://otomotif.kompas.com/read/2020/04/27/070200315/jumlah-pelanggar-psbb-jakarta-periode-awal-capai-32.300-kendaraan>.

<sup>18</sup> Tria Sutrisna, "Berlaku 14 Hari, Penerapan PSBB Di Jakarta Sampai 23 April 2020," Kompas.com, 2020, <https://megapolitan.kompas.com/read/2020/04/09/23332221/berlaku-14-hari-penerapan-psbb-di-jakarta-sampai-23-april-2020>.

<sup>19</sup> Ravel, "Jumlah Pelanggar PSBB Jakarta Periode Awal Capai 32.300 Kendaraan."

- prohibition if the government did not underestimate Covid-19 problem at the beginning.<sup>20</sup> Whereas trust from the community could be used as capital in building participatory communication; namely communication based on the basis of science / knowledge.
- b) Law enforcement was not optimal. Many people violated the rules for various reasons. There were still many sanctions that were applied that are social sanctions and were implemented optimally. The enactment of a rule that was not accompanied by strict supervision and control did not have a deterrent effect for the violators. Although at the legal level, various products that regulate in detail related to Covid-19 prevention policies were issued, there were still many violations committed by the community that were left unchecked. This was a dilemma considering that the imposition of punishment would be counterproductive if it was dealt with criminal penalties.
  - c) Low community participation. Participation relating to the implementation of LSSR was a determining factor for the effectiveness of a policy. Participant political culture made individuals able to behave in self-defense with or without supervision from the authorities. High awareness and voluntary participation were the most important part of handling Covid-19 besides other strategies. This was acknowledged by the President of South Korea and reaffirmed by Kim Chang Beom, as the South Korean ambassador to Indonesia. According to him, in addition to carrying out a test, trace and treat strategy, citizen awareness was important because in South Korea, every citizen was required to obey the rules of social distancing, discipline to take personal precautions and always follow information. The process of effective prevention and self-isolation was carried out using the self-diagnosis application and the self-quarantine application.<sup>21</sup>
  - d) The massive development of hoax news related to Covid-19 in the community. Massive circulation if Covid-19 was a conspiracy made by a few parties for the benefit of certain groups. The traffic of disinformation was caused by the ease of access to technology where the distribution of information was easily accessed by users without any

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<sup>20</sup> FISIP Universitas Indonesia, *Webinar FISIP UI 2020 - Seri 01 : Komunikasi Publik Pemerintah Di Masa Pandemi Covid-19* (Indonesia: Youtube, 2020), <https://www.youtube.com/watch?v=0vwFmk9eHcI>.

<sup>21</sup> Kim Chang-Beom, "Peduli Sesama Dan Bergotong Royong Sebagai Kunci," *Opini*, 2020, <https://www.kompas.id/baca/opini/2020/04/03/peduli-sesama-dan-bergotong-royong-sebagai-kunci/>.



filtration. The Ministry of Communication and Information (Kominfo) found as many as 1028 hoax issues spread across various digital platforms.<sup>22</sup> Hoaxes were present in various news narratives regarding the causes, symptoms, spread, and cure of Covid-19. Hoaxes about the corona conspiracy theory were increasingly circulating on social media and become chain messages so that they had an impact on people's behavior. Negligence in maintaining health protocols made the number of Covid-19 in Indonesia continue to increase. Information related to the corona had to come from one integrated door so as not to cause confusion in the community. The action taken by the government against the circulation of corona issues was still in curative action by inviting digital platform companies to take down the spread of hoaxes/disinformation. The escalation of Covid-19 cases was still happening and violations of the principle of physical distancing were happening everywhere. This was a sign that government policies were not taken seriously by all components of society. The confusing information about Covid-19 and the failure to break the chain of distribution resulted in no change in people's attitudes and behavior.

## 2. The India's Approaches in Handling the Covid-19 Pandemic in 2020

India is a large country with a dense population and has experienced 1,116,597 Covid-19 cases as of 19 July 2020.<sup>23</sup> The first documented case of Covid-19 was on January 30, 2020, of which an Indian citizen was evacuated from China.<sup>24</sup> In dealing with Covid-19, India is using pro-active measures consisting of aggressive testing carried out by the central government in collaboration with its regional states. India was dare to take steps to lock down the country in several stages.

The country, which is located in the South Asian Region, implemented a lockdown policy, since March 25, 2020, to be enforced for three weeks. The scenario was used by India to track infected people who showed symptoms for 14 days, and one week later was reserved

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<sup>22</sup> Binti Mufarida, "Kominfo Mencatat Sebanyak 1.028 Hoaks Tersebar Terkait COVID-19," Kementerian Komunikasi dan Informatika Republik Indonesia, 2020, [https://kominfo.go.id/content/detail/28536/kominfo-mencatat-sebanyak-1028-hoakstersebar-terkait-covid-19/0/sorotan\\_media](https://kominfo.go.id/content/detail/28536/kominfo-mencatat-sebanyak-1028-hoakstersebar-terkait-covid-19/0/sorotan_media).

<sup>23</sup> Hindustan Times, "Coronavirus in India: Highest Single-Day Spike of 40k Pushes Count Past 1.1 Million," Hindustan Times, 2020, <https://www.hindustantimes.com/india-news/highest-single-day-spike-of-40k-pushes-count-past-1-1-mn/story-eTLEIMrU8idNSMuxiXmVYK.html>.

<sup>24</sup> Ramanan Laxminarayan et al., "Epidemiology and Transmission Dynamics of COVID-19 in Two Indian States," *Science* 370, no. 6517 (2020): 691–97, <https://doi.org/10.1126/science.abd7672>.

for observing the infection situation, mortality and recovery rate.<sup>25</sup> Lockdown itself caused the consequences for the termination of all activities, be it business or public transportation. As a result, a massive exodus occurred in the big city. Since the lockdown was imposed, India was experiencing many problems. Various problems surfaced and led to a humanitarian crisis after the announcement of the lockdown was enforced. Although the Government of India announced an economic stimulus assistance of 260 billion to its people, due to the unclear stages of the scheme, millions of informal workers and migrant workers lost their jobs. India's 10 million workers struggle to access food.<sup>26</sup> The lockdown with minimal preparation, in addition to leaving millions of workers unemployed, ultimately resulted in an increase in reports of racist attacks against migrants from East India, including physical violence that was arrested and shared on social media.<sup>27</sup> The riots occurred because hundreds of thousands of people forced to return to their villages, violence perpetrated by the officers was rampant, cases of hunger were rampant. In fact, the hashtag #ModiMadeDisater had become a trending topic on Twitter.<sup>28</sup> Likewise, the decision to extend the lockdown was made by India until May 3, 2020. The lockdown which was originally planned to end on April 14 had to be extended because Narendra Modi believed that the lockdown and social distancing were an effective way to protect its 1.3 billion citizens.

The Indian government then extended the lockdown until 30 June 2020, allowing only the gradual opening of retail, recreational and shopping activities.<sup>29</sup> The government provided the relief for farmers and daily workers in the application of these rules. The Indian government considered the sacrifice of economic losses that had to bear as a result of the lockdown was no more meaningful than preserving the lives of its citizens. Despite many humanitarian problems and criticism, India's 45-day lockdown yielded positive results and was claimed to have played a major role in suppressing the spread of the disease.<sup>30</sup> The timely lockdown made the volume of infected with Covid-19 in India

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<sup>25</sup> Chintamani Pai, Ankush Bhaskar, and Vaibhav Rawoot, "Investigating the Dynamics of COVID-19 Pandemic in India Under Lockdown," *Chaos, Solitons & Fractals* 138 (2020): 1–7, <https://doi.org/10.1016/j.chaos.2020.109988>.

<sup>26</sup> International Growth Centre, *Webinar: The Impact of COVID-19 on Informal and Migrant Workers in India* (Inggris: Youtube, 2020), <https://www.youtube.com/watch?v=NcVAyxFS8M>.

<sup>27</sup> Dolly Kikon, "A Long Way From Home," The University of Melbourne, 2020, <https://pursuit.unimelb.edu.au/articles/a-long-way-from-home>.

<sup>28</sup> Aulia Adam, "Lockdown India Sebabkan Kekacauan, Apa Yang Terjadi?," *tirto.id*, 2020, <https://tirto.id/lockdown-india-sebabkan-kekacauan-apa-yang-terjadi-eJVG>.

<sup>29</sup> Jay Saha, Bikash Barman, and Pradip Chouhan, "Lockdown for COVID-19 and Its Impact on Community Mobility in India: An Analysis of the COVID-19 Community Mobility Reports, 2020," *Children and Youth Services Review* 116 (2020): 1–14, <https://doi.org/10.1016/j.chilyouth.2020.105160>.

<sup>30</sup> Atanu Bhattacharjee, Mukesh Kumar, and Kamalesh Kumar Patel, "When COVID-19 Will Decline in India? Prediction by Combination of Recovery and Case Load Rate," *Clinical Epidemiology and Global Health* 9 (2021): 17–20, <https://doi.org/10.1016/j.cegh.2020.06.004>.

less compared to other major countries.<sup>31</sup> The lockdown received appreciation from WHO because India as the second most populous country in the world showed low infection and death rates compared to other countries. These are 9,152 and 306 per 1.3 billion population as of April 13, 2020, respectively.<sup>32</sup> In addition to suppressing the spread of Covid-19, the lockdown had a significant impact on environmental and air conditions. India was undergoing a rejuvenation process which was characterized by the reduction of pollutants which are harmful and fatal to human health.<sup>33</sup>

In order to cope with the impact of the Covid-19 pandemic, India allocated a budget of US\$2.1 billion to equip health facilities. From the budget, the Government of India's Department of Science and Technology proposed a scheme to promote research and discoveries in research institutes working on outbreak control while under lockdown. The Indian Industrial Research Council reported that India also experienced the Covid-19 hoaxes.

The alertness of the health authorities in India through the tracking and testing process was carried out to reduce the death rate. The strategic steps taken by the Indian government did not last long. The lockdown process in addition to having a social impact, also had an impact on the rotation of the economy so that India began to relax its lockdown policy. The lockdown was carried out during the months of March-May 2020 cases were concentrated in big cities, the easing of the lockdown had an impact on the mobilization of the Indian population from cities to rural areas, which resulted in the spread of Covid-19 cases in the countryside. The policy choice to loosen the lockdown made the number of infections spike again sharply. Entering August, cases increased and grew rapidly to reach 75,000 cases of infection every day. It was recorded that until the fourth week of August 2020, India became the third country with the highest number of deaths after the United States and Brazil with 60,000 deaths and 3 million confirmed cases.<sup>34</sup>

### **3. The comparison of Indonesia's and India's Approaches in Handling the Covid-19 Pandemic in 2020**

Indonesia chose to implement Large-Scale Social Restrictions in order to suppress the rate of Covid-19, instead of implementing a lockdown as recommended by WHO. Joko Widodo as President emphasized that local governments implemented the policies that did

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<sup>31</sup> Pai, Bhaskar, and Rawoot, "Investigating the Dynamics of COVID-19 Pandemic in India Under Lockdown."

<sup>32</sup> Ibid.

<sup>33</sup> D. M. Lal and S. D. Pawar, "Effect of Urbanization on Lightning Over Four Metropolitan Cities of India," *Atmospheric Environment* 45, no. 1 (2011): 191–96, <https://doi.org/10.1016/j.atmosenv.2010.09.027>.

<sup>34</sup> Jeffrey Gettleman and Sameer Yasir, "India's Covid Outbreak Is Now the World's Fastest-Growing," *The New York Times*, 2021, <https://www.nytimes.com/2020/08/28/world/asia/india-coronavirus.html>.

not conflict with the protocols of the central government. In addition, the President formed a Task Force for the Acceleration of Covid-19 Handling to facilitate coordination from the center to the regional government. The policy was initiated by the capital city of Jakarta and followed by other regions. If the lockdown required residents not to leave their homes at all, the LSSR still provided space for residents to carry out activities as long as they did not conflict with health protocols.

The implementation of strict regional restrictions by India had an impact on reducing the transmission of the corona virus and the number of cases reported. However, the effectiveness of such lockdowns varies between regions and depended on many factors, including demographic variables, population density, and social gatherings.<sup>35</sup> Meanwhile, the lockdown also created a humanitarian crisis and new chaos due to the massive exodus. Over time, the easing of the lockdown in India was carried out to save India from the brink of recession. Until June 2020 India's economy contracted at a steep pace of up to 23.9% due to the lockdown imposed.<sup>36</sup> After the lockdown was relaxed, the number of confirmed cases of Covid-19 was increasing in India.

The Early Covid-19 confirmed in India. With a higher number of the Covid-19 test compared to Indonesia, these two countries experienced the same problem, namely the low health budget. The implication was that both Indonesia and India had limited health fatalities when compared to the ratio of the total population. Even so, the number of the Covid-19 test in Indonesia was far less than what was done by India. The confirmed record number of cases in India experienced a spike in cases after the lockdown was eased.

Indonesia took the LSSR step, which in its journey experienced an adjustment in duration for various regions. A number of violations caused by the low awareness of citizens were still often found. Although it succeeded in temporarily suppressing the spread of Covid, the LSSR was considered not effective enough. Similar challenges were faced by India which chose to lock down the country of 1.3 billion people. Despite being able to temporarily suppress the rate of Covid-19, the sudden implementation of a regional quarantine and minimal preparation created a humanitarian crisis. The decision to lock down the region had a severe impact on the poor in India. Indonesia's experience at the beginning of the Covid-19 outbreak showed that one of the heaviest burdens is the politicization of the pandemic among key government actors. The failure of synergy and coordination between elements in responding to the threat of a pandemic were paid by a deep humanitarian crisis.

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<sup>35</sup> Stelvin Sebastian et al., "Impact of Lockdown in India: A Case Study Comparing Karnataka with an International Model," *Kesmas: Jurnal Kesehatan Masyarakat Nasional* 1 (2020): 93–98, <https://doi.org/10.21109/kesmas.v15i2.3978>.

<sup>36</sup> Abdul, "GDP Contracts by Record 23.9% in Q1," *Factly*, 2020, <https://factly.forumias.com/gdp-contracts-by-record-23-9-in-q1/>.

## E. Conclusions

The Large-Scale Social Restriction Policy was implemented after the issuance of Government Regulation (PP) Number 21 of 2020 dated March 31, 2020, three weeks after the first case was announced in Indonesia. The implementation of the LSSR which was enforced in various regions was not immediately obeyed by the community. Various violations still occurred and were found during the implementation of the LSSR.

In dealing with Covid-19, India was using pro-active measures consisting of aggressive testing carried out by the central government in collaboration with its regional states. India was dare to take steps to lock down the country in several stages. The lockdown process in addition to having a social impact, also had an impact on the rotation of the economy so that India began to relax its lockdown policy.

Both Indonesia and India face a similar challenge in handling the Covid-19 pandemic, particularly the hoaxes relating Covid-19 were spread in communities of the two countries.

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