Research Article

Tantamount: A Comparative Study in Analyzing the Effectiveness of Covid-19 Response Policy in Indonesia and Thailand

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Abstract
Over the past few years, the world has experienced a pandemic with the spread of the COVID-19 outbreak. Every country attempts to minimize virus transmission through the implementation of various policies such as implementing travel restrictions, the closure of international borders, mass vaccination, and stabilizing the economy and welfare. This research aims to compare the effectiveness of the domestic policies in Indonesia and Thailand in responding to the COVID-19 pandemic and analyze the impact that followed the implementation of the policies. The authors use comparative theory by analyzing two main indicators: the health and economic sectors. The results show that the policies implemented by the Thai government are more effective in reducing the rate of transmission of COVID-19 and recovering the economic sector during a pandemic. The authors argue that the effectiveness of the Thai government’s policies is a major factor in the country’s post-pandemic recovery.

Keywords: COVID-19, comparative study, domestic policy, Indonesia, Thailand

I. Introduction
The COVID-19 pandemic, which is a virus outbreak caused by SARS-CoV-2 virus, has paralyzed the world since early 2020. This virus was first found in the city of Wuhan, China, back in December 2019 and rapidly spread worldwide (WHO, 2020). Not only the health sector, but this Coronavirus has also affected other sectors such as the economy and industry, tourism, social, and educational sectors. Within the first semester, since the virus had been found, most of the countries in the world were experiencing economic setbacks, health crises, as well as limited movement, and lots of restrictions for more than two years. The governments along with the World Health Organization (WHO) try their best to reduce the spread of Coronavirus and recover from the pandemic through the domestic policies implemented in each country, including in the Southeast Asia region.

The first recorded COVID-19 case in Southeast Asia was in Thailand, which is also the second country affected by COVID-19 after China, on January 13th, 2020 (Cheung, 2020). The cases remained low in the country until May 2021, it reached 10,000 daily cases. In January-March 2022, Thailand experienced its peak number of COVID-19 infections with more than 25,000 cases recorded during the wave. However, the death rate has sharply decreased. In Indonesia, the first COVID-19 case was discovered in Depok on March 2nd,

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2020 (Jaya, 2021). The peak was recorded in July-August 2021 as the delta variant started infecting people and caused middle to severe symptoms. As of July 5, 2022, Indonesia has had 6,095,351 confirmed COVID-19 cases and 156,758 deaths, while Thailand has had 4,532,100 confirmed cases and 30,718 deaths (WHO, 2022).

The high number of COVID-19 infections as well as the death rate has affected Indonesia and Thailand, prominently in the economic and health sector. As the ASEAN economic tiger with the two GDps combined makes up 50% of the whole ASEAN, Indonesia and Thailand experienced a decrease in economic growth. Indonesian economic growth was minus 2.1 percent during the first year of the pandemic (Muhyiddin & Nugroho, 2021). The deficit was equal to IDR 1.226,8 trillion for the prevention of COVID-19 according to APBD (Regional Revenue and Expenditure Budget). On the other hand, Thailand’s GDP also decreased by 6.1 percent from the previous year, marking the largest decline since the Asian financial crisis (Kaendera & Leigh, 2021). Not only affecting national economic growth, the pandemic also resulted in a high rate of unemployment, decreased incomes, businesses and food security as well as tourism, education and social protection for both countries, particularly the low-middle income society.

In the last 2 years, COVID-19 has become everyone’s concern from the government, businesses, and society. The government put their best effort to decrease the spread of Coronavirus, while businesses and society are experiencing critical socioeconomic fatigue amid the pandemic. In Indonesia, large-scale social restrictions were implemented, particularly in the big cities. The government also closed the international border, issued a ‘stay at home’ policy, mass vaccination, and supported micro, small, and medium enterprises (MSMEs) as the key factors of domestic economic growth during the pandemic. Meanwhile, in Thailand, the government focused on four aspects: social distancing implementation, economic incentives, health insurance system, and national emergency status on COVID-19 (Tunggal, Putra, & Salim, 2021).

Several previous studies have examined the government policies in Southeast Asia, as well as compared one and other countries. However, there is the least research regarding comparative policies between Indonesia and Thailand in handling the COVID-19 pandemic, particularly on a national level. Agustino (2020) in the journal article entitled “Policy Analysis of Handling The COVID-19 Outbreak: Indonesian Experiences” argues that the combination of the slow response of the government, weak coordination, and citizen ignorance has weakened the policy implementation in Indonesia. Regarding Thailand’s policies in handling COVID-19, Tungga et al. (2021) and Tantrakarnapa (2021) described how Thailand’s government coped with the pandemic, such as implementing social distancing, closing international borders, preparing health personnel, etc. In addition, Naprathansuk, et al (2021) compared the good governance between Indonesia and Thailand in handling the COVID-19 situation at the province level, which is in Tegal, Indonesia, and Chang Puak sub-district in Thailand.

This research aims to compare the effectiveness of the domestic policies in Indonesia and Thailand in responding to the COVID-19 pandemic and analyze the impact that followed the implementation of the policies. Despite the geographical aspect, Indonesia and Thailand were economically leading in Southeast Asia. Furthermore, both countries rely on the tourism sector, which was highly impacted by the pandemic. There are two major concerns regarding government
policies in handling the COVID-19 pandemic in both countries: the health sector and the economic and industry sector. By comparing and examining the two major aspects of the government policies, the author argues that although the policies implemented were similar, however, the result of COVID-19 handling between the two countries turned out different. Thai government policies are more effective in handling the COVID-19 situation in the country rather than in Indonesia. This argument was proven by the ability of the Thai government in maintaining low cases of COVID-19, offer its best healthcare system, as well as recovering its economic hardship amid the pandemic.

II. Method

This research is descriptive research using mostly qualitative approaches. Some statistical data is taken from secondary resources such as books, research articles, official websites, and reliable news and is interpreted in qualitative analysis. In this regard, the authors try to examine the effectiveness of the government in handling the COVID-19 pandemic using a data set of COVID-19 development particularly in the past two years. Subsequently, the authors use the concept of comparative politics as a tool for analysis.

Comparative politics is the study of political institutions that exist in different countries. The study includes the analysis and comparison of the actual behavior of formal and informal political structures. Scholars define at least three approaches as tools to analyze the complexity of political systems and behavior. First, the institutional approach focuses primarily on the formal aspects of government and politics such as the legislature, executive, and judiciary. Many scholars argued that institutions have shaped political behavior and social change. Second, the system approach which analyses the relationship between politics and other aspects of life such as economic, religious, or social aspects. Third, the structural and functional approach, which argue that all political system performs input and output functions. The input functions are political socialization and recruitment, interest-articulation, interest-aggression, and political communication, while the output functions relate to policymaking and implementation.

In the system approach, David Easton developed this approach and argued that the political system operates within an environment. The environment generates demand from various segments of society and various levels of support, which became inputs for the government. After considering some factors, the inputs are converted into outputs in the form of policies, decisions, rules, regulations, and laws. The outputs result in social change and flow back into the environment through a feedback mechanism.

The main goal of comparative politics is to encompass similarities and differences between countries which therefore advance our understanding within the field (Hague & Harrop, 2004). Using comparative politics, this research seeks to compare which country is better at mitigating the spread of COVID-19. The authors use the system approach as a tool to analyze the relationship between politics
and other two sectors in handling COVID-19: the health and economics aspects. Comparing all the similar and different environments in both Indonesia and Thailand during the period of the pandemic, this research shows which countries perform better in handling the COVID-19 pandemic through the government’s outputs.

III. Result and Discussion

a. Health Sector

2020 was the first year of this COVID-19 pandemic that struck South-east Asia. The number gradually increased and caused an outbreak in some countries, including Indonesia and Thailand. Some people experienced mild symptoms such as sore throat, mild fever, and cough. However, some experienced middle to severe symptoms that they desperately needed a ventilator to help them breathe and get hospitalized, and some others died due to the late handling.

Thailand began fighting against the COVID-19 pandemic in January 2020, two months earlier than Indonesia. The case slightly increased in March 2020, with the highest reach of 188 people who tested positive in a day (Dechsupa & Assawakosri, 2020). The cases accumulated slowly until early 2021, before Thailand hit its second outbreak. July 2021 to November 2021 marked the second wave of COVID-19 in Thailand, as the government reported 50,000-100,000 daily cases confirmed with a high mortality rate (Thailand: WHO Coronavirus Disease (COVID-19) Dashboard With Vaccination Data). Subsequently, the third wave hit in early 2022 as the omicron variant rapidly spread. As of 15 August 2022, WHO recorded cumulatively 4,639,291 confirmed cases with 32,109 deaths. The situation in Thailand remained manageable compared to other countries in the region.

The first outbreak in Thailand urged the government to take action in handling the COVID-19 pandemic, as China is experiencing uncontrollable cases. On March 22, 2020, the Thai government announced the national emergency status of COVID-19, starting their effort to control the outbreak (Tantrakarnapa, Bhopdhornangkul, & Nakhaapakorn, 2020). Subsequently, the central and local governments implemented several regulations to reduce COVID-19 cases such as the crowd restriction in public places; the obligation to use masks and hand sanitizer; support self-quarantine and quarantine for the confirmed cases, etc. The government policy was later escalated to the lockdown policy implemented throughout the country, and the closure of international borders to prevent cross-country transmission.

During the pandemic, health workers in Thailand also suffered from a high-risk infection. During the first period of the COVID-19 outbreak, health workers struggled with the shortage of Personal Protective Equipment (PPE), which protects them from the risk of infection. Some of them are also confirmed positive and required self-quarantine, causing a decrease in the number of health workers in the country. Meanwhile, during its peak period, Bangkok reported a severe shortage of bed occupancy rate as well as the need for oxygen to support severe cases (Provision of oxygen concentrators and other equipment in response to COVID-19 in Thailand and Laos - Thailand, 2021). The health sector in Thailand seems to be overwhelmed in handling the COVID-19 outbreak, however, the Thai government has succeeded in reducing the spread of COVID-19 within several months.

The prominent player in handling the COVID-19 outbreak in Thailand was their community health workers, varying from the first responders (FR) to life support (Issac, et al., 2021). The community health workers are
trained volunteers in the health sector who help to provide first aid in handling COVID-19 before the health worker takeover. They conduct several tasks in maintaining the low number of COVID-19 cases, such as door-to-door education regarding mask-wearing, and hygienic lifestyle, providing first aid and basic needs to those who are in self-quarantine period, providing an initial diagnosis and linking the residents to the health care system, etc. Therefore, the number of health workers infected with COVID-19 in Thailand is the least among other Southeast Asia Countries, owing to the volunteers as the first fore gate in COVID-19 handling.

While other countries are busy dealing with the number of people infected with COVID-19, the Thai government relies on preventive measures in handling the pandemic. Obligation to wear masks in public spaces started earlier, as well as the awareness of personal hygiene. Once the case increased, the Thai government responsively announced the lockdown policy and border closure. At their peak level of transmission, the collaboration between the Thai government response and grassroots health volunteers successfully build a considerable and hefty health system. This preventive response is proven by a sharp decrease of bed occupancy rates from 49% in May 2020 to less than 20% in March 2022. Moreover, vaccination rates in Thailand continue to rise, which up to 72% of total population got their second dose, reducing the number of severe symptoms and death caused by COVID-19 (WHO, 2022).

On the other hand, in Indonesia, the first COVID-19 case was found on March 2nd, 2020. In March 20, 2020, the government established the National Task Force for the acceleration of the COVID-19 as well as prepare the Large Scale Social Distancing (PSBB) as the case was increased significantly (Purwanto, 2020). During the pandemic, there are at least 3 waves hit Indonesia; the first was on January-March 2021, the second wave was in July-August 2021, and the third wave happened in February-March 2022 (Indonesia COVID - Coronavirus Statistics).

The second wave of COVID-19 outbreak in Indonesia was the deadliest one.

“As of 3 August 2021, the Indonesian Government has announced 3,496,700 confirmed cases of COVID-19 in all 34 provinces of Indonesia, with 524,142 active cases, 98,889 deaths, and 2,873,669 people that have recovered from the illness. The government has also reported 130,628 suspected cases” (OCHA, 2021).

At this point, the situation in Indonesia, particularly in the health sector nearly collapse. Uncontrolled cases, lack of medical equipment as well as the personnel, low vaccination rate, high demand of bed occupancy led to the high mortality rate due to COVID-19. Beside, the COVID-19 testing rate were also not proportional, as many people are afraid tested positive and required to do self-quarantine. In other word, the number of people infected COVID-19 could be more than the data presented by the government, as many of them do not undertake the PCR or antigen testing.

Regarding the policy handling of COVID-19 in Indonesia, it seemed that Indonesian government has been rather slow in responding the COVID-19, particularly compared to the Thai government. At the early stage, the government threw a joke that COVID-19 will not dare to enter Indonesia. This showed the unresponsive and lack of seriousness in preventing the pandemic COVID-19, which will hit Indonesia soon. When the virus was finally found in Indonesia, the government did not immediately close the border and took some preventive action, but
still reject the possibility that the outbreak is about to explode. The following steps were taken such as announcing the stage of endemic and emergency state, preparing the health workers as well as the emergency hospital, and preparing the preventive measures considered slow. The implementation of PSBB at the beginning of the outbreak seemed to be just a formality, without any tight security followed.

When the transmission rate was inclined, the government just started to take it seriously. The government started to announce Community Activities Restriction Enforcement (PPKM) at varying levels, massive COVID-19 tests and tracing in public spaces, and acceleration of COVID-19 vaccination. However, the policy taken seemed to be late as the cases cannot be controlled. The unresponsiveness in handling COVID-19 is disastrous, as the health workers are overwhelmed in handling COVID-19 patients and lack of bed occupation and oxygen to handle the severe symptoms. The poor COVID-19 handling was also intertwined with the weak coordination between central and local government and people’s disobedience to the government’s policy (Agustino, 2020). For instance, the province of Bali that refused to implement PPKM, low awareness of people using masks, implementing social distancing and maintaining a hygienic lifestyle, the anti-vaccine community who refused to undertake vaccination to create herd immunity, etc.

Until early 2022, active cases of COVID-19 in Indonesia are still high as the third wave is outbroken. However, the acceleration of COVID-19 vaccination is started to show its result. Herd immunity is formed as many people have been vaccinated. Unfortunately, many lives have already been lost due to the weak and slow handling of COVID-19 in Indonesia. Moreover, the poor handling in the health sector slowed recovery in other sectors such as the economic and social sectors.

![Fig. 2. Comparison of bed occupancy use in Indonesia and Thailand](source)

**b. Economic Sector**

Pandemic COVID-19 causes some negative effects for Thailand & Indonesia, prominently because both country relies their economic on tourism sector. In Indonesia, there was an increase in foreign exchange of $5,220 billion from 2016 to 2018, which contributed to the GDP growth of 0.3% in 2019 (Kemenpar, 2019). However, COVID-19 has worsened the situation and caused a sharp decline in the tourism sector. This significant decrease was particularly due to travel restrictions, the closure of international borders, and the social distancing policy. The collapse of tourist destinations, travel businesses, hotels, and other tourist attractions causes people to lose their jobs. Ministry of Tourism and Creative Economics has reported a decrease in the total number of foreign tourists by 70.95% in September 2020 (Kemenparekraf, 2021). Roughly Rp. 20.7 billion of the total state revenue has been lost due to the decline in the tourism sector (Kemenparekraf, 2021).

The industrial sector and MSMEs are also affected by the COVID-19 pandemic. Since the pandemic, the process of export and import has been congested, transfer of goods and services was also slowing down. In addition, the social distancing policy has
impacted the sustainability of MSMEs. Thousands of MSMEs has permanently closed due to the pandemic, and most of them were unable to cover their operational cost. Research proves that 95.6% of MSME owners experienced a decrease in income, only 3.8% experienced an increase in income, and 0.6% did not experience a change in income (Utami, 2021).

Regarding the economic sector, Thailand experienced a more significant decline than Indonesia. The tourism sector in Thailand contributed more than 20% of the total national GDP (Kaendera & Leigh, 2021). In 2020, tourist arrivals declined from 40 to 6 million, resulting in a sharp decrease in the national GDP of Thailand by 8.1% due to COVID-19. The tourism sector in Thailand, which often became the main tourist destination in the South East Asia, almost completely collapsed due to the lockdown policy. Almost no tourist visit in the past two years, the souvenir sellers cannot sell their wares, most hotels, travel businesses, restaurants, and tourist attractions are forced to shut down. Tourism industry workers, which is a large number of workers in Thailand, have been affected by either they were going unpaid or losing their job (Pongsakornrungsilp, Pongsakornrungsilp, Kumar, & Maswongssa, 2021).

Not only affecting the tourism sector, COVID-19 pandemic also inevitably hit the MSMEs, including the tourism and manufacturing MSMEs. According to a survey by UNCTAD Thailand, there were 187 companies that experienced a decrease in income, roughly 50 percent of the sample of MSME companies in the manufacturing category and 119 companies (28.74%) had problems with the loan payment, staff wages, social security costs, fixed costs, invoice payments, etc during the pandemic COVID-19 (Charoenrat, 2021). Another survey conducted by Parks (2020) shows that around 23 percent of tourism MSMEs have permanently shut down, and 21 percent of manufacturing MSMEs have closed for good. This situation makes Thailand became the worst-affected country in ASEAN during the pandemic (Parks, 2020).

In mitigating the impact of COVID-19, Indonesia and Thailand have made several economic policies. In 2020, the Indonesian government passed the Omnibus Job Creation Law, which is expected to increase investment and productivity by simplifying the labor bureaucracy, issuing business permits, and restricting investment (Asian Development Bank, 2022). The Indonesian government also implemented a stimulus policy in the National Economic Recovery program in 2020 through Law No. 2/2020 of Rp 579.8 trillion (Bank Indonesia, 2021). Indonesia increases the APBN allocation for the tourism sector in 2021 by Rp14.6 trillion with the aim of restoring the tourism sector and the creative economy and is supported by Government Incentive Assistance (Wulandari, 2021). Moreover, Indonesia also increased the budget for the National Economic Recovery Program in the 2021 State Budget by 22%, which will be used as support for MSMEs and corporations, amounting to Rp 184.83 trillion (Bank Indonesia, 2021).

On the other hand, the Thai government has approved the first stimulus package of $12.7 billion on March 10, 2020 and the subsequent stimulus package with the amount of 10% of Thailand’s national GDP on April 3, 2020 (Muhibat, 2020). Then, the Thai government added another stimulus package of TB 1.9 trillion with the aim of providing financial assistance for workers, infrastructure, job investment, soft loans for MSMEs, and as a Corporate Bond Liquidity Stabilization Fund on April 7, 2020 (Muhibat, 2020). Thai government also created a new tourism
concept in 2021 called "SEXY", which stands for Safety and cleanliness; Environmental sustainability; eXtra experience; and Yield, which expected to be able to restore tourist confidence (TAT, 2021). In addition, the Thai government has also launched various kinds of campaigns about tourist travel starting from July 2021, accompanied by subsidies for various types of accommodation for tourists who come (Asian Development Bank, 2022).

The government’s efforts in maintaining the economic sector amid the pandemic COVID-19 show a good result. There is a significant raised in Thailand’s national GDP from 2021 onwards, after a sharp decline in 2020 due to the collapse of the tourism sector. On the other hand, there is a constant increase in the Indonesian national GDP in 2021 and 2022, particularly the tourism sector contribution on GDP. The graphic can be seen below:

**Fig. 3.** Comparison of Thailand and Indonesian GDP amid COVID-19

**Source:** (The National Economic and Social Development Council, 2022); (Tim Publikasi Katadata, 2021); (Azzahra, 2022).

Thailand economic situation post-pandemic has rapidly increased, although has not fully recovered. Economic stimulus package was given to the highly-impacted people, such as the low-middle income family and those who losses their job or family during the pandemic. This package helped them to secure their lives during crisis. Subsequently, Thai government’s quick response in mitigating the COVID-19 spread allow them to immediately revoke the lockdown policy as well as the travel restriction. The re-opening of the international border along with the strict health protocol has successfully recover the tourism sector and boost the national income post-pandemic. Moreover, the “new normal” of economic and tourism industry ensure hygiene, health and safety through their SEXY policy successfully building trust and good relationships with the investors and tourists in Thailand (Pongsakornrungsilp, Pongsakornrungsilp, Kumar, & Maswongssa, 2021). Hence, the combination of those implemented policies during pandemic has effectively recover Thailand from the economic crisis.

Compared to Thailand, Indonesian government policies was less effective in boosting the national GDP post-pandemic. From 2021, Indonesia only has a constant increase of national GDP, particularly from tourism sector, by 0.1% annually. There are at least four lessons to learn from the implementation of Indonesian government policies in maintaining economic sector during pandemic. First, the omnibus job creation law has a low impact on the labor, as only few jobs are available during the pandemic. Secondly, the late closure of International border led to a late and slow mitigation procedure in handling the spread of COVID-19. Thirdly, the poor mitigation procedure also cause a slow recovery in the tourism sector, where international visitor feeling doubt to visit Indonesia due to the uncontrolled COVID-19 cases while re-open the border. Lastly, the stimulus packages given to the people in need facing some problems, such as corruption and mistargeting.
Other than those mentioned policies, Indonesian government seems to focused on national economic recovery program through the MSMEs support. In 2020, the government allocated a specific funds in COVID-19 finance to support MSMEs of 17.75%, roughly Rp. 123.46 trillion. The funding includes the interest subsidies, placement of funds for credit restructuring, expenditures for guarantee service fees, guarantee for working capital, government borne final income tax, and investment financing to cooperatives through the Cooperative, Micro, Small, and Medium Enterprises (LDPB KUMKM) (Purwanto, 2020). In addition, the government also gave Direct Assistance Program (BLT) for MSMEs in the last 2020, where each business actor received IDR 2.4 million to maintain their business during the pandemic (Purwanto, 2020). The growth of MSMEs during COVID-19 pandemic can also be seen through the online marketplace. During the Stay at Home period, people tend to buy everything from MSMEs through online platform, making the MSMEs play a prominent role in maintaining national economic resilience.

IV. Conclusion

Whilst comparing the policies between Thailand and Indonesia, we can conclude that Thai government is better in handling COVID-19. The policies implemented in Thailand is more effective compared to Indonesia, thanks to the good collaboration between the local and central government together with the obedient of the people. Thailand successfully maintained the low rate of transmission and survived the economic crisis, at the same time, Indonesia tends to be slower in handling the COVID-19. In the health sector, the use of health volunteer to help handling the COVID-19 in Thailand effectively maintaining the low rate of transmission and the mortality rate. While Thailand focused on the preventive measurement, COVID-19 handling in Indonesia considered unresponsive and lack of seriousness. The poor handling of COVID-19 in Indonesia from the central and local government as well as the people led to the prolonged endemic along with the high transmission and mortality rate in COVID-19.

On the other hand, in the economic sector, the policies implemented by both countries are slightly the same. Thailand successful effort in maintaining the low case of COVID-19 led to the re-open of the Thailand border faster than Indonesia. Beside the stimulus package for the vulnerable people affected by COVID-19, Thailand boosts its economic growth by rapidly promoting its tourism destination called a SEXY policy. This SEXY policy help Thailand suffered from the economic crisis due to the pandemic. Meanwhile, not being able to open its border, Indonesia focused on supporting the MSMEs sector to maintain the economic growth. During the pandemic, MSMEs sector played a prominent role in stabilizing Indonesian economic sector.

Works Cited


