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## Learning from Covid-19 in Southeast Asia: Restriction, Relief, Recovery

Edited by Lee Hwok Aun, Siwage Dharma Negara and Jayant Menon., Singapore: ISEAS Publishing, 2025. Pp. xxiv + 579. Softcover: S\$61.40. Also available as an e-book.

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## **BOOK REVIEW**

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Bill Gates recently estimated a 10%–15% chance of another pandemic occurring within the next four years, arguing that global health infrastructure remains unprepared because of political division and weak international cooperation.1 Published by ISEAS, *Learning from Covid-19 in Southeast Asia* may help ameliorate some concerns stemming from this gloomy prediction, at least for ASEAN countries and, perhaps, other less developed countries. The book explores how ASEAN governments of varying wealth, from Cambodia to Singapore, mobilised resources in response to the Covid-19 health crisis while also attending to economic dynamics, especially the well-being of the poor. Overall, ASEAN countries appear to have tackled the pandemic and its effects according to individual constraints.

The book's editors—Lee Hwok Aun, Siwage Dharma Negara and Jayant Menon (all senior researchers at ISEAS)—begin by synthesising the impact of Covid-19 on the economy between 2019 and 2023. They acknowledge that the contributors' strengths lie in addressing the pandemic's economic impacts and public policy implications, and recognise their limitations in other relevant fields, such as medicine. To facilitate a cross-country comparison of experience and achievement, the editors focus on four themes, each covering several ASEAN countries whose geography, demography, economic development and political systems differ significantly. A fifth and final section offers regional perspectives on vaccine rollouts and ASEAN collaboration towards the reopening of borders.

The first theme, 'Covid-19 in the Transition Economies', covers Cambodia (by Teng Delux and Pen Socheata), Laos (by Phouphet Kyophilavong and Khaysy Srithilat) and Myanmar (by Sandii Lwin, Kyaw San Wai and Nilar Win). These three transitional economies, the poorest and newest members of ASEAN, are classified by the United Nations as 'least developed countries'. As such, they were constrained from the onset in their ability to allocate the necessary resources to deal with the pandemic and could reallocate only limited government spending to healthcare. Consequently, hospital beds per 1,000 people were just 0.7 in Cambodia, 1.0 in Myanmar and 1.5 in Laos, compared to 4.7 in OECD countries.

<sup>1.</sup> TIMESOFINDIA.COM, 'Bill Gates Predicts the Next Covid19 Like Pandemic: "The Chance of a Pandemic Is...", *Times of India*, 27 January 2025, https://timesofindia.indiatimes.com/technology/tech-news/bill-gates-predicts-the-next-covid19-like-pandemic-the-chance-of-a-pandemic-is-/articleshow/117592963.cms.

Such limitations added considerable pressure in managing an airborne pandemic whose control required social distancing.

These three country studies, rich in detail and analysis, are synthesised by editor Jayant Menon, formerly lead economist at the Asian Development Bank, whose chapter, 'The Pandemic and Recovery', focuses on the potential trade-off between lives and livelihoods. As it was understood that lockdowns to contain the virus could lead to recession, forestalling economic recovery, governments had to strike a balance. Menon notes that less-developed countries had some advantages in their fight against the virus, notably a younger population and high dependence on agriculture. Youthful populations were better able to withstand the viral attack than the ageing populations of richer countries. Further, dependence on agriculture as a major source of livelihood allowed a greater degree of natural social distancing compared with more urbanised populations. Cambodia enjoyed both advantages while achieving a vaccination rate of 85% of the population, one of the highest rates in the world.

The second theme, 'Managing and Mismanaging the Pandemic', synthesises the experiences of Indonesia, the Philippines and Vietnam. The Indonesian experience, prepared by Arief Ramayandi and Siwage Dharma Negara as 'Mobility Restrictions', comprises Chapter 5. The next chapter, 'Economics of Lockdown', by Ronald U. Mendoza and Sheena A. Valenzuela, discusses the Philippines. Chapter 7, 'Pandemic Passage', by Nguyen Thu Huong, examines the case of Vietnam. This group of three countries comprises the most populous and 'middle-income' ASEAN countries.

The synthesis of these three chapters, 'Approaches and Consequences of the Lockdown Rationales', is also presented by Jayant Menon. Each of these countries had its own approach to, and reasons for, introducing lockdowns, and Menon notes that the outcomes in each country differed in regard to health and well-being. The application of lockdown policies led to different trade-offs between lives and livelihoods in these less-developed countries compared to developed nations. Because a good proportion of the population in these countries is poor—even very poor, living from hand to mouth—prolonged, stringent lockdowns without sufficient public social safety nets could have led to significant loss of life. Menon argues that the different intensity and stringency in implementing social distancing was reflected in economic outcomes as indicated by GDP growth for 2020 (shown in table 1.2). A further important lesson identified by Menon is the benefit of periodically reviewing border and domestic mobility restrictions. Prolonged border closures in these three countries had a devastating impact on livelihoods, especially in those areas dependent on tourism, such as Bali in Indonesia, Boracay in the Philippines and Phu Quoc in Vietnam.

The third theme, 'Policy Coordination: Horizontal and Vertical Dimensions', is presented by Siwage Dharma Negara. Chapter 8, 'To Be or Not to Be?', by Yanuar Nugroho and Sofie Syarief, is about Indonesia. This is followed by the Malaysian case authored by Tricia Yeoh, 'Conflict and Cooperation'. Chapter 10, on Thailand, by Punchada Sirivunnabood, is entitled 'The Drama of Vaccine Politics'. All three nations faced the challenge of coordinating several central government ministries as well as local governments to deliver public services across the country. Problems of coordination arose irrespective of whether governments were monarchies or democracies, centralised or decentralised. In Malaysia and Thailand, political

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turmoil appears to have exacerbated the initial difficulties in devising and implementing the necessary policies. Yet, even politically stable Indonesia experienced similar impediments, attributed to a so-called 'silo effect' and a competitive mentality across ministries and local governments.

Theme 4, 'Economic Relief and Stimulus', compares Malaysia, Singapore and Thailand with a synthesis by Lee Hwok Aun. Even though these are the three wealthiest ASEAN countries, Malaysia and Thailand are classified as 'upper-middle-income' countries while the city state of Singapore is currently ranked as the 10th richest country in the world. Malaysia appears to be closer to Singapore than Thailand in terms of the role of the informal sector and also in terms of government institutions. As reflected by the title, 'A Story of Too Little, Too Late', the Malaysian study, by Melati Nungsari, acknowledges some weaknesses of timing in implementing policies. The Singapore story, 'Support for Households and Businesses', by W. L. Terence Ho (Chapter 12), focuses on the provision of wage assistance to workers and labourers under lockdowns and due to social distancing requirements. The discussion reveals the benefit of having experienced and stable public sector institutions that can be called upon to provide emergency assistance when needed and be given access to national reserves. The last chapter in this section, 'Economic Relief and Stimulus' by Archanun Kohpaiboon, Juthathip Jongwanich and Mayoon Boonyarat, examines the case of Thailand. Like other middle-income countries, the Thai economy is heavily dependent on the informal sector, which constitutes two-thirds of the total labor force. Public sector assistance focused on cash transfers for the dominant sectors, such as tourism and farming, was provided through electronic transfers. Based on the experiences of these three countries, Lee concludes that governments need to have systems in place to avoid wasteful delays in providing emergency relief and stimulus measures when sudden and life-threatening events occur in the future, as Bill Gates anticipates may happen very soon.

The fifth and final theme, 'Vaccination and Reopening: Country-Level and ASEAN Experiences', takes a regional perspective on the role of ASEAN. Two important chapters detail the actions and activities carried out in coping with the pandemic. Chapter 14, 'Determinants of Covid-19 Vaccine Roll-Outs in Southeast Asia' by Tham Siew Yean and Andrew Kam Jia Yi, discusses how the ASEAN countries accessed the vaccines. Chapter 15, 'ASEAN'S Response to Covid-19 Collaboration towards Reopening' by Sara Abdullah, documents the various collaborative attempts by ASEAN countries to deal with the Covid-19 pandemic as a public health issue affecting millions of people. Public health initiatives, such as the procurement of medical supplies, drew in the participation of other East Asian governments, such as China, Japan and South Korea, through financial contributions and vaccines.

What can be learned from these ASEAN experiences in projecting how Indonesia might respond to the next pandemic? The approaches taken during the Covid-19 pandemic (2020–23) will probably not change much in the near future. Being the world's largest archipelago and having the world's fourth-largest population, Indonesia, with 280 million people distributed very unevenly between thousands of islands, is vastly different from Singapore. Java is the smallest of Indonesia's major islands; however, it holds 56% of the total population, which means its density is the highest, translating into a much higher potential for contagion. Indeed, between

2019 and 2023, Java–Bali recorded the overwhelming majority of confirmed Covid-19 cases at 70% (as seen in table 5.1).

Due to Indonesia's uneven population distribution, in the event of a future contagion, there cannot be only one standard set of public policies for the whole country. A policy well suited to Jakarta and other large cities may be impractical for agricultural villages. Moreover, Indonesia practises a decentralised system of governance in which local governments have significant autonomy in how they allocate their budgets—and they do not necessarily follow the policies of central government.

The varied experiences of ASEAN countries in dealing with the Covid-19 pandemic suggest that public policy preferences are a function of socio-economic status. Whereas poorer countries, including most ASEAN countries, tend to prioritise livelihoods and/or the economy, Singapore—the one truly rich country in the region, could afford to focus on the individual health needs of the population. Given that Indonesia remains in the 'middle-income' stage, and as it has only recently fought the Covid-19 virus, afterwards experiencing deindustrialisation and lay-offs, it can be expected that the next pandemic will again see the Indonesian government prioritise livelihoods over lives.

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