



# Enhancing equity for pandemic preparedness

Yodi Mahendradhata

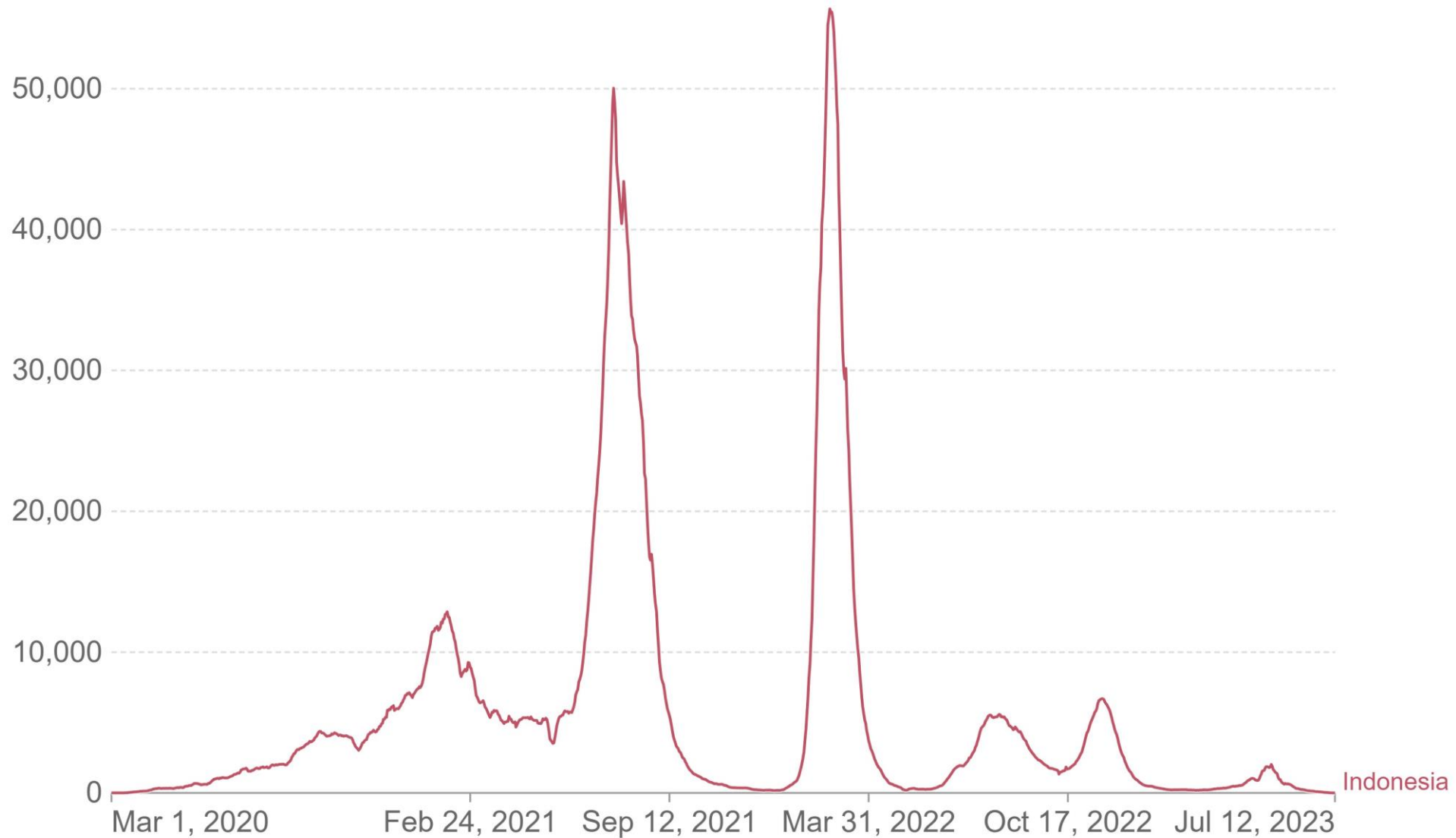
“Only by positioning vulnerable populations at the forefront of national responses and equitably integrating them into health systems can we build a more resilient health system”

Tan et al 2023

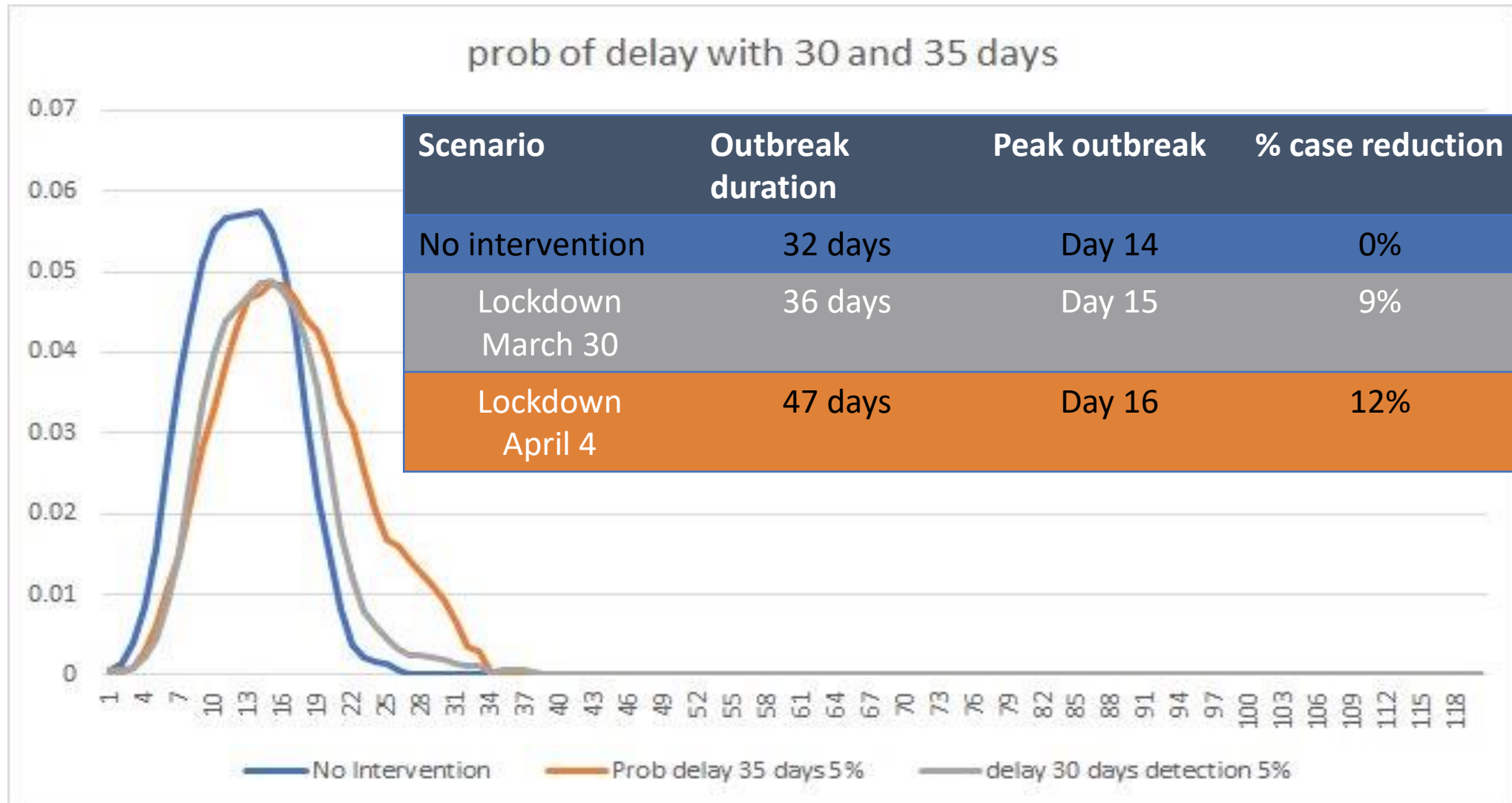


# Daily new confirmed COVID-19 cases

7-day rolling average. Due to limited testing, the number of confirmed cases is lower than the true number of infections.








# Modelling of Jakarta Lockdown April 2020





“The informal sector accounts for more than 60 per cent of the workforce” (ILO)

# COVID-19 public health and social measures: a comprehensive picture of six Asian countries

Chuan De Foo ,<sup>1</sup> Monica Verma,<sup>1</sup> See Mieng Tan,<sup>1</sup> Victoria Haldane,<sup>2</sup> Katherine Ann Reyes ,<sup>3,4</sup> Fernando Garcia,<sup>5</sup> Carmelita Canila,<sup>5</sup> Joseph Orano,<sup>6</sup> Alfredo Jose Ballesteros,<sup>6</sup> Tiara Marthias ,<sup>7,8</sup> Yodi Mahendradhata,<sup>7</sup> Titiporn Tuangratananon,<sup>9</sup> Nattadhanai Rajatanavin ,<sup>9</sup> Warapon Pongkantha,<sup>9</sup> Tran Mai Oanh,<sup>10</sup> Ong The Due ,<sup>10</sup> Nima Asgari-Jirhandeh,<sup>11</sup> Viroj Tangcharoensathien,<sup>9</sup> Helena Legido-Quigley<sup>1</sup>

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## ABSTRACT

The COVID-19 pandemic will not be the last of its kind. As

**WHAT IS ALREADY KNOWN ON THIS TOPIC**

# Lockdowns? (Foo et al 2022)

Indonesia	Thailand	Philippines	Vietnam
<ul style="list-style-type: none"><li>Initially called Large Scale Social Restrictions was renamed PPKM which zones areas based on risks, epidemiology, surveillance and health services availability used to control stringency of measures</li><li>A lockdown was never enacted.</li></ul>	<ul style="list-style-type: none"><li>A nationwide lockdown was introduced in April 2020 with tight curfews in place to stem the first wave.</li><li>As the Delta wave swept in July 2021, targeting lockdowns in Bangkok and provinces with high case numbers took effect.</li></ul>	<ul style="list-style-type: none"><li>The first lockdown took place in March 2020 in the Luzon island group, which included the Greater Manila Area, while individualised recommendations on the Community Quarantine levels differed based on the local epidemiological situation.</li><li>Highly restrictive community quarantines were instituted for specific cities and provinces depending on the estimated infection rates and healthcare system burden</li></ul>	<p>There were multiple waves that caused a nationwide lockdown, but flexibility was applied to each province and smaller administrative levels after the second wave.</p>

# Restriction on public gatherings (Foo et al 2022)

Indonesia	Thailand	Philippines	• Vietnam
<ul style="list-style-type: none"><li>• Restrictions were based on the Implementation of Community Activity Restrictions (PPKM).</li><li>• A significant spike in cases in mid-2021 had resulted in the prohibition of gathering in public places and tightened limits on restaurant capacity and places of worship.</li><li>• Restrictions continue to vary based on location according to epidemiological severity and hospital capacities.</li></ul>	<ul style="list-style-type: none"><li>• Public gatherings were limited since the beginning of the pandemic.</li><li>• In 2021, a zoning system was in place with dark red, red, orange and yellow zones based on size of epidemic.</li><li>• Limits on restaurant and mall capacities were also enforced.</li><li>• By the end of 2021, the system was revised to include a blue zone, which has minimum restrictions and are deemed safe to visit.</li></ul>	<ul style="list-style-type: none"><li>• Mass gatherings were prohibited since 2020, based on graduated four-tiered system, with a higher-tiered categorisation for locations facing immense stress to their hospitals and large caseloads.</li><li>• Towards the end of 2021, gatherings in residences not belonging to the same household were permitted, while indoor capacities were limited to 50% of the full capacity with only the fully vaccinated allowed entry.</li></ul>	<ul style="list-style-type: none"><li>• The levels of restrictions are based on three Directives, which will vary the level of restriction on public gatherings and curfews.</li><li>• Event capacities are also capped.</li><li>• Areas deemed as low risk can permit entertainment establishments to open while social events can accept only individuals who are vaccinated.</li></ul>



# Work From Home (Foo et al 2022)

Indonesia	Thailand	Philippines	Vietnam
<ul style="list-style-type: none"><li>• WFH in Indonesia is part of the community mobility restriction policy, which at the beginning of the pandemic applies for all affected areas.</li><li>• At end of 2020, WFH implementation depends on severity within the area, which could be either at the district or provincial level.</li><li>• At a more micro level, in areas where low case load is recorded, offices would apply WFH should there is a local outbreak among the employees.</li></ul>	<ul style="list-style-type: none"><li>• Advised voluntary WFH during first wave in 2020 and when the Omicron cases surged in July 2021.</li><li>• Adherence was low among non-salaried and informal sector workers.</li></ul>	<ul style="list-style-type: none"><li>• An existing policy, Telecommuting Act enacted in 2019 was supplemented with new rules in March 2020 for fair remuneration and treatment for those who WFH.</li><li>• Employers are also required to offer adequate support for this transition.</li><li>• However, the huge informal economy had made WFH for a substantial proportion of the population challenging.</li></ul>	<ul style="list-style-type: none"><li>• Since the start of the pandemic, WFH had been promoted based on epidemiological and hospital indicators, aligned with national Directives.</li><li>• As numbers remained high in 2021, most companies adopted hybrid work strategies.</li><li>• A 'stay at work' initiative where factory workers stay on premises to minimise contact with potential cases was trialled.</li></ul>

# School Closures (Foo et al 2022)

Indonesia	Thailand	Philippines	Vietnam
<ul style="list-style-type: none"><li>• Schools were shuttered since March 2020 and remote learning was promoted but was faced with difficulties due to lack of internet access and learning devices.</li><li>• Schools reopened after 18 months when the numbers stabilised, but level of hybrid or remote learning was determined by local epidemiological severity.</li></ul>	<ul style="list-style-type: none"><li>• Schools closed in 2020 and 2021 during the peaks.</li><li>• Sandbox Safety Zones were set up end 2021 giving local authorities the power to evaluate the situation and open schools accordingly.</li><li>• For severe zones, a minimum of 85% vaccination of school personnel and students were needed for reopening.</li></ul>	<ul style="list-style-type: none"><li>• Schools had been shut since early 2020, with the cases remaining high and a slow vaccination campaign.</li><li>• More was needed to support blended learning, but the lack of internet access and devices stymied learning.</li><li>• Some schools reopened at the end of 2021, but all schools had to shut after an exponential growth in Omicron cases was experienced.</li></ul>	<ul style="list-style-type: none"><li>• Telecommunications companies have agreed to waive internet charges for computers under an internet and computers campaign for children.</li><li>• The education gap is reported to have widened for those in poor and rural areas, with schools shuttered for the greater part of 2020 and 2021.</li></ul>

# Public health and social measures (Foo et al 2022)

## Objectives

Curbing  
onward  
transmission

Reducing  
mortality

Preserving  
livelihood

## Unintended consequences

Widening  
income gaps

Increased  
gender based  
violence

Lowered  
educational  
attainment

Lowered other  
social and  
health indices

# Support packages of general population

(Foo et al 2022)

Indonesia	Thailand	Philippines	Vietnam
<p>Unemployment benefits programme was introduced, this entail financial subsidies and training for those looking for new job or just lost their employment.</p>	<ul style="list-style-type: none"><li>• A 6-month grace period was awarded to Social Health Insurance members whose employment was terminated or voluntarily resigned during the pandemic.</li><li>• After that, they were covered under the Universal Coverage Scheme.</li><li>• Utility bills were also subsidised for 4 months and e-vouchers were issued for a host of uses such as food and general goods.</li></ul>	<ul style="list-style-type: none"><li>• A four-pillar socioeconomic strategy against COVID-19, which addresses the needs from all sectors of the population was implemented.</li><li>• For the general population, packages such as ringfencing US\$23 million in Social Security System unemployment benefits and U\$600 million for the Department of Agriculture programmes to ensure food security and agri-fishery support were implemented</li></ul>	<ul style="list-style-type: none"><li>• The government has issued various policies to support workers in the context of the COVID-19 pandemic, such as reduction of land rent, electricity bills, income tax, social insurance premium and a no of other fees and charges.</li><li>• 136 000 tonnes of rice from the national reserve was also issued to 29 provinces severely affected by the public health restrictions at the end of 2021, as measures persist due to the Omicron incursion.</li></ul>

# Support packages for businesses (Foo et al 2022)

Indonesia	Thailand	Philippines	Vietnam
<ul style="list-style-type: none"><li>• Tax incentives were given to selected businesses that supported the pandemic response such as companies producing medical products.</li><li>• Employees earning below a certain wage in these selected companies will be tax exempted.</li></ul>	<ul style="list-style-type: none"><li>• In 2020, a shopping subsidy package was disbursed to stimulate spending on goods and services to boost local demand for businesses.</li><li>• Soft loans were issued for small and medium enterprises in the tourism sector, and this was extended in 2021 due to the sustained slump in the tourism sector and overall economy due to border closures.</li></ul>	<ul style="list-style-type: none"><li>• Support was provided to stakeholders in the food value chain such as the US\$10 million stimulus package for the aquaculture sector.</li><li>• As the economy further weakened in 2021 due to sustained public health measures, the Corporate Recovery and Tax Incentives for Enterprises Act, or CREATE, reduced the income tax rate to 25% for big companies and 20% for smaller enterprises.</li></ul>	<ul style="list-style-type: none"><li>• The government has issued three financial support packages, including from government subsidy for employees, employers, and vulnerable people affected by the COVID-19 and from Unemployment Insurance Fund for workers unemployed due to COVID-19.</li><li>• Reduction of 30% of corporate income tax in 2021 and employers and employees are suspended or need to only pay reduced premiums to the pension and survivorship fund for 6 months</li></ul>

# Support packages for vulnerable groups

(Foo et al 2022)

Indonesia	Thailand	Philippines	Vietnam
<ul style="list-style-type: none"><li>Existing direct cash transfer programme such as Programme Keluarga Harapan catering to low-income households was expanded to support COVID-19 management since April 2020 and it had continued to be in place, but the quantum lowered in mid-2021 as the public health measures persisted in the face of a slow vaccination drives and high infection rates.</li></ul>	<ul style="list-style-type: none"><li>A cash transfer was offered for workers in the informal economy in the first few months of the pandemic.</li><li>The government also provided eligible migrant workers with a one-off payment in mid-2020. COVID-19 testing, and treatment are also covered for migrant workers.</li></ul>	<ul style="list-style-type: none"><li>The Department of Social Welfare and Development received around Php 200 billion under Bayanihan 1 Act and US\$117 million under the Bayanihan 2 Act for the implementation of social amelioration programmes.</li><li>Households in areas under the most severe community quarantine level were entitled to receive a sum between US\$ 100–US\$150.</li></ul>	<ul style="list-style-type: none"><li>Low-income households and workers whose employment was suspended received roughly US\$45 per month for 3 months in 2020.</li><li>Pregnant women and people raising children under 6 years old received food support.</li></ul>

# Key Messages (Foo et al 2022)

- Although PHSMs serve to safeguard the lives and livelihoods of all populations, including the vulnerable, governments need to **redress the existing vulnerabilities and societal inequities.**
- The pandemic has put a wedge on and expanded the current fissures between the have and have-nots and **amplified the inequities in all dimensions**
- Essentially, the level of disproportionate impacts on the poor and vulnerable groups is **determined by the level of existing structural inequality on the one hand, the size of social capital and resilience on the other hand**
- Health systems need to remain resilient and agile while ensuring that PHSMs can be swiftly reinstated to **protect the health of populations and livelihoods with an equity lens.**



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# Mitigating the impacts of the COVID-19 pandemic on vulnerable populations: Lessons for improving health and social equity

Si Ying Tan<sup>a,\*</sup>, Chuan De Foo<sup>a</sup>, Monica Verma<sup>a</sup>, Piya Hanvoravongchai<sup>b,c</sup>, Paul Li Jen Cheh<sup>b,c</sup>, Aungsumalee Pholpark<sup>b,d</sup>, Tiara Marthias<sup>e</sup>, Firdaus Hafidz<sup>e</sup>, Likke Prawidya Putri<sup>e</sup>, Yodi Mahendradhata<sup>e</sup>, Kim Bao Giang<sup>f</sup>, Stefan Nachuk<sup>g</sup>, Hong Wang<sup>g</sup>, Jeremy Lim<sup>a</sup>, Helena Legido-Quigley<sup>a,h</sup>

<sup>a</sup> Saw Swee Hock School of Public Health, National University of Singapore, Singapore

<sup>b</sup> Thailand National Health Foundation, Bangkok, Thailand

<sup>c</sup> Chulalongkorn University, Bangkok, Thailand

<sup>d</sup> Mahidol University, Nakhon Pathom, Thailand

<sup>e</sup> Faculty of Medicine, Public Health and Nursing, Universitas Gadjah Mada, Yogyakarta, Indonesia

<sup>f</sup> Hanoi Medical University, Hanoi, Viet Nam

<sup>g</sup> Gates Foundation, Seattle, USA

<sup>h</sup> London School of Hygiene and Tropical Medicine, London, United Kingdom



# Types of vulnerabilities in the context of the COVID-19 pandemic (Tan et al 2023)

Category	Definition	Example
Health vulnerability	Exhibit serious health conditions and lack of access to health services, inadequate financial protection towards health.	Chronically sick or disabled people, terminally ill or seriously ill subjects, indigenous people and migrant workers with poorer baseline health statuses, high risks of exposure to virus, high risks of developing severe COVID-19 symptoms or COVID-19 complications and lack of access to health services.
Economic vulnerability	Epidemic-induced income shocks that could result in overnight and systemic poverty.	Dependent persons, or impoverished people with adverse employment conditions (unemployment, working on temporary contract, part-time employment, self-employment, informal sector workers, or migrant workers); adverse financial conditions (payment arrears, or low-income); digital and connectivity conditions (lack of internet access, or lack of access to computers or other digital devices).

# Types of vulnerabilities in the context of the COVID-19 pandemic (Tan et al 2023)

Category	Definition	Example
Social vulnerability	Disadvantaged in the distribution of social goods and services.	Populations exposed to poor quality housing (lack of access to necessities, e.g., water and sanitation) or overcrowded housing; the socially isolated; populations vulnerable to violence (sex workers, domestic violence victims).
Institutional or deferential vulnerability	Subject to formal authority of others or informal subordination to others.	Prisoners, institutionalised older persons, physically and mentally challenged populations who are institutionalised, and school-going children.

# Types of vulnerabilities in the context of the COVID-19 pandemic (Tan et al 2023)

Category	Definition	Example
Cognitive or communicative vulnerability	Diminished capacity to understand and communicate.	Children, migrant populations, people with speech and/or hearing impairment, people struggling with communication due to low subjective well-being or poor mental health conditions.

# Mitigation strategies to address vulnerabilities

(Tan et al 2023)

Vulnerabilities	Mitigation Strategies
Health	(1) Human rights centered public health measures; (2) Equitable access to vaccines and health services; (3) Financial protection for health
Economic	(1) Direct financial subsidies; (2) Indirect financial subsidies; (3) Expansion of existing social security programmes; (4) Adjustment of eligibility criteria for various financial support packages
Social	(1) Food assistance programmes; (2) Designing targeted and group-specific policies;
Institutional	(1) Flexible administrative arrangement to increase the flexibility of existing rules; (2) Design precaution measures to safeguard and ringfence institutionalised senior citizens; (3) Tighten existing rules and protocols in the prison
Cognitive/communicative	(1) Mobilisation of village health volunteers to increase the outreach of risk communications regarding COVID-19; (2) Civil society-led advocacy campaign to address the gaps in government-led responses; (3) Implementation of culturally sensitive health promotion interventions and community engagement strategies

# Policy recommendations for addressing different types of vulnerabilities faced by vulnerable populations for future health emergencies

(Tan et al 2023)

Vulnerabilities	Mitigation Strategies
Health	<ul style="list-style-type: none"><li>• Extend access both emergency (i.e. pandemic related) and non-emergency (non-pandemic related) health services to all vulnerable populations, including undocumented migrant populations.</li><li>• Design fairer distribution mechanisms to enable equitable access to vaccines with priorities given to vulnerable populations.</li><li>• Extend care provisions and surveillance efforts to detect hidden needs of the vulnerable population.</li><li>• Ensure financial protection for health for vulnerable populations via active enrollment into the national health insurance system or health service delivery system</li></ul>
Economic	<ul style="list-style-type: none"><li>• Design comprehensive stimulus package which include subsidies and other forms of financial assistance for vulnerable populations.</li><li>• Implement tax relief, tax referral and non-monetary financial assistance for vulnerable populations.</li><li>• Adjustment of means-testing criteria and other governing rules for existing financial programmes targeting the vulnerable populations.</li></ul>

# Policy recommendations for addressing different types of vulnerabilities faced by vulnerable populations for future health emergencies

(Tan et al 2023)

Vulnerabilities	Mitigation Strategies
Social	<ul style="list-style-type: none"><li>• Expand food assistance programmes.</li><li>• Revisit the adequacy of provision for other existing social security programmes.</li><li>• Design targeted and group specific policies for vulnerable populations with unique needs and are traditionally marginalised.</li></ul>
Institutional	<ul style="list-style-type: none"><li>• Increase flexibility of administrative rules governing existing educational funds or emergency funds supporting schools.</li><li>• Institute additional precaution measures to safeguard and ringfence institutionalised older people.</li><li>• Tighten existing rules and protocols in the prison to prevent disease transmission.</li></ul>

# Policy recommendations for addressing different types of vulnerabilities faced by vulnerable populations for future health emergencies

(Tan et al 2023)

Vulnerabilities	Mitigation Strategies
Cognitive/ communicative	<ul style="list-style-type: none"><li>• Mobilise volunteers to increase the outreach of public health communications.</li><li>• Establish advocacies and coalition network in the civil society to address service gaps targeting the vulnerable populations.</li><li>• Incorporate cultural and linguistic sensitivity in various health promotion interventions.</li><li>• Leverage on community engagement strategies and both traditional and social media tools to improve risk communication to the vulnerable populations.</li></ul>
Vulnerabilities intersection	<ul style="list-style-type: none"><li>• Adopt participatory approach to involve leaders of civil society and vulnerable populations in the co-creation of intervention and policy solutions.</li><li>• Design population-specific guidelines for future public health emergencies.</li><li>• Plan early for future emergencies by strengthening existing social protection programmes.</li><li>• Reform legislations to actively include vulnerable populations in the provisions of emergency care, primary and non-primary health services.</li></ul>

# Key Messages (Tan et al 2023)

- While a spectrum of mitigation strategies has been deployed to address different vulnerabilities, **these efforts within countries were rarely enough to protect vulnerable populations** comprehensively.
- **Less visible and hidden populations** such as migrant workers, refugees, sex workers, prisoners and people with disabilities were **largely neglected** in formal policy responses.



# Key Messages (Tan et al 2023)

- Countries need to **use this pandemic as a window of opportunity** to prioritise the right to UHC for vulnerable populations
- The overlapping vulnerabilities experienced by the vulnerable populations also call for more **policy attention toward the social, economic and political determinants of health** during the pandemic.

“Only by positioning vulnerable populations at the forefront of national responses and equitably integrating them into health systems can we build a more resilient health system”

Tan et al 2023





[ymahendradhata@ugm.ac.id](mailto:ymahendradhata@ugm.ac.id)