



HANDLING THE COVID-19 PANDEMIC: AN ANALYSIS OF INDONESIA'S VACCINE DIPLOMACY IN THE ASIAN REGION IN 2020-2023

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Abstract

The COVID-19 pandemic has occurred worldwide, one of which is in Indonesia. In Indonesia itself, the entry of COVID-19 in March 2020 was a mass transmission at that time because many Indonesian tourists had just returned from China. Since then, the COVID-19 pandemic has continued to increase, causing P.S.B.B. in all regions of Indonesia. Seeing this phenomenon, the government plans to prevent the transmission of COVID-19 from continuing to occur in Indonesia, one of which is with a vaccine. The study aims to provide knowledge about handling the COVID-19 pandemic using the Indonesian vaccine. The method used is qualitative, with a narrative and descriptive-analytical approach. This study explains how the Indonesian government has handled the COVID-19 pandemic by creating its vaccine. This aims to reduce the cost of purchasing imported vaccines from abroad and improve the Indonesian government's economy. Many people have been helped with the Indonesian vaccine because they used it. The Indonesian vaccine itself is a work created by Indonesian children to prevent the transmission of COVID-19 in Indonesia. With this, Covid-19 in Indonesia can be overcome.

INTRODUCTION

An unprecedented outbreak of pneumonia of unknown etiology in Wuhan City, Hubei Province, China, emerged in December 2019 (Chakraborty & Maity, 2020). The disease associated with this novel coronavirus was initially termed novel coronavirus-infected pneumonia (NCIP) (Zhu et al., 2020). It is a class of epidemic diseases with human-to-human transmission caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Kumar et al., 2021; Li et al., 2021; Rosenthal et al., 2022). This virus's high infectivity and pathogenicity were discovered early in the epidemic and became a worldwide trend. The World Health Organization (WHO) later declared the disease a global pandemic. Since public awareness of virus prevention was initially still confusing, SARS-CoV-2 had an excellent opportunity to spread and mutate worldwide (Davis et al., 2021; Hu et al., 2020; Kumar et al., 2021). Globally, there is much uncertainty about when SARS-CoV-2 emerged and began to spread locally (Davis et al., 2021). The World Health Organization named it COVID-19, which is short for coronavirus disease 2019 (Wang et al., 2020). COVID-19 is caused by a betacoronavirus called SARS-CoV-2, which attacks the lower respiratory tract and manifests as pneumonia in humans. Containment and quarantine efforts have been carried out strictly in various countries, but the number of COVID-19 cases continues to increase, with 90,870 positive cases and more than 3,000 deaths worldwide. The number of COVID-19 cases is considered the largest in the world compared to previous related outbreaks, such as Ebola, Zika, and SARS. Ebola occurred in 2014 in 28,646 cases, with 11,323 deaths in the global environment (Fitriyah & Luqyana, 2021).

The Zika outbreak occurred in 2015 and occurred in 83,760 cases, with nine deaths in the global environment. Finally, the SARS outbreak occurred in 2003, again in 8,096 cases with 774 deaths (Kapuriri & Ross, 2020). Currently, most patients infected with SARS-CoV-2 only experience mild symptoms such as dry cough, sore throat, and fever. Some of them experience symptoms that develop, such as various fatal complications, including organ dysfunction, pneumonia, and acute respiratory distress syndrome (Fitriyah & Luqyana, 2021).

On 30 January 2020, WHO declared the COVID-19 outbreak in China an international public health emergency with a high risk to countries with vulnerable health systems. As of 3 March 2020, there were 90,870 confirmed cases of COVID-19, 80,304 of which were in China (Lau et al., 2021).

Figure 1 shows the WHO website on 28 March 2020, where 202 countries were affected by Covid-19, with a total of 575,444 confirmed cases and 26,654 confirmed deaths. The country with the highest number of cases was Italy, with 86,498 cases, followed by the United States, with 85,228 cases, and China, with 82,230 cases. The fewest number of COVID-19 cases in one country was 1 case; the countries with the fewest cases were Libya, Papua New Guinea, Saint Vincent and the Grenadines, and Timor Leste (Fitriyah & Luqyana, 2021).

Seeing the increasingly widespread cases of the spread of COVID-19 makes the issue a threat, where this threat can disrupt the fundamental values of individuals and groups, as well as the nation, which has the potential to cause a humanitarian crisis. Thus, the spread of COVID-19 is an essential concern for various parliaments worldwide. To handle this case, a form of international community cooperation is needed; this is based on the limited knowledge of each country in suppressing the spread of COVID-19. In international relations, diplomacy has various roles and functions. This is accompanied by various human efforts to solve all problems in the world. Thus, diplomacy between countries is one of the efforts that can be made to overcome the humanitarian crisis caused by COVID-19 (Maulidia et al., 2023).

METODE

The type of research used in this study is descriptive. Descriptive research tends to use analysis. In descriptive research, the process is also more displayed using the theoretical basis. The theory is used as a guide to focus on research based on facts in the field. Descriptive research obtains primary data from interviews and observations at the research location. Furthermore, researchers will analyze the data obtained from the research to produce new concepts or theories. This happens if the results of the research being studied contradict the theory that has been used by researchers in their research activities.

Descriptive research aims to create a systematic, factual, and accurate description of the facts and characteristics of a particular population or area. Descriptive research can provide a more detailed picture of a symptom or phenomenon as a continuation of exploratory research. They use the question "HOW" to develop information. In this study, the author uses a qualitative research style. Qualitative research emphasizes the observation of phenomena and examines the substance of the meaning of the phenomenon. The power of words and sentences greatly influences qualitative research's analysis and search.

According to Neumann, qualitative research is usually based on critical or interpretive social sciences and discusses cases and contexts. Qualitative research emphasizes submitting cases that arise in social life, always trying to avoid authentic interpretations and being sensitive to socio-historical contexts (Neumann, 2007). Qualitative research begins by collecting data containing general topics and then focuses after conducting an initial analysis. Data containing this general description is then used as a guide to form research questions. Thus, qualitative research is inductive, drawing general conclusions from existing facts. This method begins with data collection and then directly enters a process that leads to deductive (Nurlina et al. et al., 2017). This study will use a deductive data analysis technique, where the author searches for data from various sources and then collects it. After collecting all the data obtained, the author selects some needed data. Furthermore, the data is analyzed to support the arguments put forward by the author regarding vaccine diplomacy carried out by Indonesia towards several countries in Asia in 2020 - 2023.

RESULTS AND DISCUSSION

Vaccines are one of the essential commodities and will be widely contested in early 2021. The limited quantity due to limited production and uneven distribution makes vaccines a rare commodity. Tedros Adhanom, in his discussion facilitated by Indonesia for Global Justice, stated that the most formidable challenge facing vaccine distribution in 2020 was when pharmaceutical companies were still using a "business as usual" approach despite a crisis. This is closely related to the procedures for making vaccines protected by patents and other related matters. This phenomenon impacts the manufacture and distribution of vaccines amid a pandemic where every individual in the world must have access to vaccines and ensure that no country is left behind (Prajogo et al., 2022). According to Indonesia for Global Justice, amid the struggle for equal distribution of vaccines, Indonesia plays an active role in conducting diplomacy and negotiations regarding vaccine access for Indonesia and the world. These efforts are carried out through the C.O.V.A.X. Facility cooperation scheme, the World Health Organization (WHO) COVID-19 vaccine distribution program. The C.O.V.A.X. Facility is a joint program to support access to COVID-19 prevention through collaborative research, production, and equal access to the COVID-19 vaccine. G.A.V.I., WHO, and C.E.P.I. jointly manage this program. Through this scheme, Indonesia acts as a co-chair that continues to strive for easy access, safety, and affordable vaccine prices (Prajogo et al., 2022). Through Foreign Minister Retno Marsudi, Indonesia is encouraging the acceleration of global vaccine

distribution through the C.O.V.A.X. Facility scheme. Indonesia emphasized that the high death rate and the increasing number of cases in many countries, exacerbated by the global vaccination gap, are challenges that must be addressed together. Therefore, Foreign Minister Retno is encouraging the acceleration of global vaccination by increasing vaccine production through production diversification, expanding the vaccine portfolio distributed by C.O.V.A.X., and increasing the vaccination capacity of countries. According to the official statement of the Ministry of Foreign Affairs, there have been several positive developments, such as the delivery of 103 million doses to 135 countries and the approval of the G.A.V.I. Alliance Council to support funding for vaccine delivery to several participating countries worth USD 775 million, and the increasing number of countries submitting applications to purchase vaccines through a cost-sharing mechanism, including Indonesia (Prajogo et al., 2022). In addition to being co-chair of the C.O.V.A.X. Facility, Indonesia is also using its leadership on other platforms to fight for equal access to vaccines. After receiving the G20 Presidency baton from Italy for 2022, the Ministry of Finance stated that Indonesia has many agendas to encourage the accommodation of developing countries' interests to obtain equal access to vaccines. Carrying the theme "Recover Together, Recover Stronger" for the 2022 Presidency, Indonesia emphasizes the importance of equal distribution of vaccines, especially for developing countries.

This is also by the principle of the spirit of No One is Left Behind carried by Indonesia at the annual meeting of the U.N. General Assembly, namely to recover together; only a few countries cannot escape the pandemic, so efforts are needed to carry out joint recovery equal access to vaccines and high vaccination rates worldwide (Prajogo et al., 2022). Through Indonesia's leadership in the G20, Indonesia was also given a mandate by the G20 member countries to design a global health architecture through global preparedness for a pandemic. This aims to prepare countries to be ready to face future pandemics, starting with vaccine producers, strengthening health systems, and equal access to vaccines. In this leadership, Indonesia also encourages strengthening a global health architecture that adheres to the principles of solidarity, equality, justice, and transparency. This is evidenced by the intervention carried out by the President of the Republic of Indonesia, Joko Widodo, to encourage the strengthening of the global health architecture through a commitment to collaboration in controlling the pandemic by ensuring timely, fair, safe, and affordable access to vaccines and vaccines—health equipment as global public goods (Prajogo et al., 2022).

Teck Penland (1997) stated that strategic leadership identifies, crystallises, and communicates existing changes to ensure integration and alignment in the current and future environment. Indonesia has proven to have a transformational leadership role in securing global and national vaccine stocks through its vaccine diplomacy. Indonesia's vaccine diplomacy is not merely to have greater power or bargaining power over other countries but by the first principle of vaccine diplomacy, namely encouraging the use and distribution of vaccines to achieve more significant global health goals (Prajogo et al., 2022). In 2021, the Indonesian COVID-19 Task Force noted that the gap in the distribution and vaccination of COVID-19 in a country was still very high. The Ministry of Foreign Affairs noted that of the 2.2 billion doses of vaccine that had been injected, 75 per cent were in 10 developed countries and only 0.4 per cent in low-income countries. This shows a need to encourage countries to close the gap in resolving this pandemic holistically (Prajogo et al., 2022). Indonesia has successfully proven that it can achieve transformational change through four leadership attitudes. Each attitude reflects the leadership role entrusted to Indonesia. This makes it clear that Indonesia uses every leadership opportunity as a platform to create solutions and become a game changer. This reputation is a strong foundation for other countries to trust Indonesia in every decision-making related to many countries. That is why Indonesia has so far contributed in many leadership roles with satisfaction when a humanitarian crisis is testing the world in the form of vaccine scarcity

due to vaccine access and nationalism. The leadership role studied by Indonesia is like a wind of change amidst failed diplomacy, an excellent example of how cooperation must be carried out shortly. The lack of leadership that the world is currently facing can be a lesson from the ongoing pandemic that solidarity is vital, and to recover fully, there must be no gaps in access to public goods that will support the entire process (Prajogo et al., 2022).

Indonesia's relatively successful vaccine diplomacy in securing vaccine supplies for its citizens indicates the growing soft power of this country in the international arena. Through its various involvements in international forums, the country has succeeded in openly shaping its perception as a developed country in the developing world by challenging what it perceives as the gap between developed and developing countries. Despite its lack of hard power compared to other countries in the more prosperous region, Indonesia has shown that it can still achieve its foreign policy goals. Through the effective use of soft power and public diplomacy, Indonesia's successful diplomacy in its vaccination efforts shows that hard power is not the only factor that determines the success of a country in its diplomatic initiatives (Adrianto, 2021).

The success of Indonesia's diplomacy can be interpreted as a sign of the growth of "soft power" in this country. According to leading international relations theorist Joseph Nye, soft power is the ability to influence other countries to obtain desired results through attraction, not coercion or payment. In 2019, Indonesia was listed as one of the top 10 countries in Asia with significant soft power influence. This is measured based on companies, engagement, culture, digital, education, and government institutions. Regarding vaccine diplomacy, Indonesia's success can be attributed to the strength of its engagement through bilateral and multilateral diplomatic efforts (Adrianto, 2021).

In the bilateral field, Indonesia has channels to voice its rejection of what is considered "vaccine nationalism" by developed countries. One example of activism carried out by Indonesia is seen in the efforts of the Indonesian Minister of Foreign Affairs, Retno Marsudi, as one of the chairs of the Gavi COVID-19 Vaccines Global Advanced Commitment (COVAX AMC) Engagement Group. During Indonesia's leadership with the Ethiopian Minister of Health and the Canadian Minister of International Development, the three countries pioneered diplomatic relations to ensure that all countries receive adequate vaccine allocations regardless of their current economic conditions. The meeting was attended by Heads of State, State Officials, International Organizations and major pharmaceutical companies to raise funds to meet global vaccine needs. This stance was later supported by the World Health Organization (WHO) in a press conference of the Director General in September 2020. Currently, Indonesia, Canada and Ethiopia support global vaccination through vaccine diplomacy coordinated by WHO. The C.O.V.A.X. scheme can be seen as one of the successes of Indonesian diplomacy that directly benefits other developing countries (Adrianto, 2021). Bilaterally, Indonesia has collaborated with China to obtain 50 million doses of Sinovac, making it the first country to use the vaccine, with the first dose given to President Joko Widodo in January 2021.

Indonesia's diplomatic efforts have made it one of the first countries to receive the Sinovac vaccine. Asia will be at the forefront of vaccinating its population. Other initiatives driven by bilateral diplomacy to obtain vaccines have yielded positive results. Health Minister Budi Gunadi Sadikin said that Indonesia had received sufficient support from its partners to provide a stable supply of COVID-19 vaccines. In addition to Sinovac, Indonesia has received orders for several vaccines such as Sinovac, Pfizer & BioNTech, Moderna, Sinopharm, and AstraZeneca, with additional plans to acquire Sputnik V (Adrianto, 2021). It is important to note that Indonesia's success in vaccine diplomacy is not due to "hard power" or the ability of a country to force another country to take action through coercion, economic influence, and military. In terms of engagement, Indonesia's active role in various multilateral organizations, such as the non-permanent seat of the U.N. Security Council for the 2019-2020 period, *de facto* leadership in the Association of Southeast Asian Nations (ASEAN), membership in the G-20

and its influential role in the Organization of Islamic Cooperation (O.I.C.) have brought the country back to prominence after previously being considered an “invisible country” by most of the international media. As Indonesia’s credibility grows in terms of economic growth, governance, secular democracy, and its contribution to peace and stability, it is expected that the country will continue to gain influence on the global stage (Adrianto, 2021). There are two fundamental themes regarding how Indonesia has positioned itself as the voice of developing countries. The first is the country’s relative stability after a long period of political turmoil and its role in advocating for developing country issues throughout its history. As a role model for developing countries, Indonesia is one of the few countries that has successfully made a democratic transition from the authoritarian regime under Suharto in 1967-1968 to electoral democracy. The country has also established itself as a secular democracy with a Muslim majority and has made great strides in poverty alleviation and sustained consistent economic growth. Moreover, in 2020, the World Bank upgraded Indonesia from a lower-middle-income country to an upper-middle-income country (Adrianto, 2021).

Second, Indonesia’s influence on developing countries is due to its historical precedent in protecting its national interests by encouraging joint initiatives with other like-minded developing countries. In its diplomatic approach, the country has always succeeded in positioning itself as a champion for developing countries. The “free and active” doctrine, which is the core of Indonesia’s foreign policy, determines the direction of Indonesia’s involvement in the international arena. The policy itself was the impact of the Cold War in 1947-1991, which resulted in a secret war between the U.S. and the Soviet Union, both competing for global influence. For its survival, the young Indonesia under its first president, Sukarno, considered it necessary to remain strategically neutral to prevent Indonesia from becoming a puppet state of a greater global power. The free and active foreign policy that Indonesia later realized became the idea of the Asia-Africa Conference in 1955 and the Non-Aligned Movement in 1961. The origin of the free and active foreign policy was initially aimed at ensuring the country’s independence from external influences. However, doing so later developed into greater activism at the world level for Indonesia. One thing to note is the consistent adherence to this foreign policy doctrine. As a result, the country continues to build its reputation as an advocate or voice for developing countries (Adrianto, 2021).

Regarding Indonesia's diplomatic success in obtaining vaccines through diplomacy, Indonesia has effectively utilized its soft power. This also shows that although the country may lag in power compared to developed countries in the region, Indonesia can still influence global affairs by carefully crafting its image. Indonesia has stepped up its public diplomacy campaign to portray Indonesia as a country that champions equality and a model of national resilience for other countries. This is especially true when the current military coup in Myanmar occurs (Adrianto, 2021).

However, one downside of greater exposure on the international stage is that it will undoubtedly increase greater scrutiny of its domestic affairs. By positioning itself as a model developing country, Indonesia will undoubtedly be criticized for its mishandling of domestic affairs, such as human rights violations, mistreatment of minority groups, and use of force against what are considered “undesirable elements in the country,” among others. Indonesia cannot afford to be complacent about its diplomatic successes. With greater international scrutiny, setting a good example is burdensome, as this will affect the country’s credibility on the global stage (Adrianto, 2021).

To protect its citizens, the Indonesian government is conducting vaccination diplomacy. The efforts made by the Indonesian government to ensure the availability and supply of vaccinations for the country through bilateral and international cooperation are known as “vaccine diplomacy.” Indonesia is involved in vaccine diplomacy because it cannot produce its vaccines and requires assistance and collaboration from other countries. Indonesia is seeking

bilateral cooperation with China, the United Arab Emirates, and the United Kingdom in purchasing vaccines. The Sinovac company and the Chinese government have collaborated on vaccine research since mid-2020 (Hakim, 2020).

Thanks to bilateral cooperation between the two countries, Indonesia will receive three million doses of the Sinovac vaccine in 2020 (Herawan, 2021). Meanwhile, the G24 is collaborating with Sinopharm in collaboration with the United Arab Emirates. In addition, AstraZeneca is collaborating with the United Kingdom (SD, 2020). Meanwhile, the G24 is collaborating with Sinopharm and the United Arab Emirates. AstraZeneca is also collaborating with the United Kingdom (Aluanza, 2020). As a result of bilateral diplomacy, Sinovac, AstraZeneca, and Sinopharm have collectively produced more than 75 million doses of vaccination for Indonesia (Rauf, 2021) (Putra, 2023).

The GAVI COVAX Facility (C.E.P.I.) program is expected to be followed by the Ministry of Foreign Affairs, part of the Coalition for Epidemic Preparedness Innovations. The Global Alliance for Vaccines and Immunization (G.A.V.I.) developed the C.O.V.A.X. Method to procure vaccines to reduce mortality, protect health systems, and maintain essential services. This strategy results in free vaccine distribution. Unlike GAVI COVAX, C.E.P.I. is a multilateral collaboration tool in vaccine development that provides access to the latest data and knowledge in its field. As a forum for international and multilateral cooperation, the Alliance for Multilateralism (AoM) Ministerial Meeting allows Indonesia to emphasize WHO's value in ensuring the supply of essential medical supplies, personal protective equipment, and vaccinations. Indonesia's active involvement in increasing the provision of efficient, affordable, and accessible vaccines for poor countries was also emphasized through the International Coordinated Group on COVID-19 conference. Given what Indonesia achieved in 2020, it is clear that this country is practising middle diplomacy. This can be seen from Indonesia's efforts and efforts as a catalyst, facilitator, and manager in a multilateral framework, where Indonesia seeks to play a proactive role as a good global citizen by contributing at the multilateral level by building bridges between countries and regions. Indonesia uses multilateral diplomacy to advance international agreements, channel aspirations for humanitarian values, and communicate its national aspirations (niche diplomacy), especially in citizen protection, strengthening the national health system, and economic recovery.

In other words, Indonesia wants to use its multilateral resources to face global challenges (Putra, 2023). Although there is no single definition of a middle power, its group is based on strength, capabilities, and influence that are both too large and too small in the context of international relations and tend to promote the stability of the global system. (Jordaan 2003). Middle-income countries also play an essential role in fostering international cooperation, acting as catalysts for world problems, and overseeing the formation of international organizations and standards. In recent years, the term "middle power," which refers to the tendency of countries to use multilateral cooperation to resolve international conflicts, make concessions in international disputes, and engage in diplomatic activities based on good international citizenship, has become increasingly popular. Middle-power countries often make similar diplomatic efforts because they uphold global norms and customs. They are also assertive, reformist, and honest in the international world, so their policy directions are predictable. Here are some characteristics of diplomatic activities among middle-power countries: First, middle-power countries prefer multilateral diplomacy over bilateral diplomacy, especially in dispute resolution or other global issues. Through multilateral initiatives, middle-power countries will have greater bargaining power in negotiations, thus preventing large countries from exercising unilateral control and decision-making. (Cooper, Higgott, and Nossal 1993) (Putra, 2023).

Therefore, bilateral collaboration is usually avoided (Lee et al., 2015). In addition, they will decide to maintain existing international organizations and, in some situations, form new

international alliances and institutions to address global issues. According to Mahbubani, multilateral diplomacy is a cooperative effort where more than two countries or individuals provide diplomatic answers to world problems (Mahbubani, 2013). The purpose of multilateral efforts themselves varies. The first is as a forum for all countries to state their goals. Second, we need to set aspirational goals for humanity, such as the Millennium Development Goals (M.D.G.s), which are currently required by the world. The third goal focuses on creating universal standards to improve the state of the world. Multilateral initiatives further serve as efforts to reach international agreements (Mahbubani, 2013) (Putra, 2023). Then, middle-power countries are often associated with their function as bridges between strong and weak countries, a strategy known as intermediary diplomacy (Lee et al., 2015).

Middle powers will serve as mediators to open channels of dialogue when countries have different points of view. Middle powers can achieve this because of the interdependence that results from depending on each other, significantly strengthening each other's weaknesses. These elements, such as resources, investment, technology transfer, or expertise, usually have economic impacts. The last component is niche diplomacy, or "concentrating resources on specific areas that are most likely to produce beneficial outcomes" (Lee et al., 2015). In other words, middle powers will often focus their efforts on participating in the most favourable international conditions (Putra, 2023). This illustrates the challenges middle-income countries face while still dependent on other countries. On the other hand, middle powers must continue to participate in world politics. Therefore, middle-income countries must continue to maintain and utilize their unique resources. Middle powers also implement niche diplomacy to achieve their foreign policy goals. By acting as a regional leader, spokesperson for developing countries, promoter of democracy, and focal point of global issues, Indonesia hopes to fulfil its role as a middle power (Karim, 2018).

This study assumes that Indonesia is one of the middle powers that actively carries out the characteristics mentioned above, namely advancing multilateral diplomacy, especially in solving global problems, establishing alliances with other countries, and utilizing its "niches" to achieve national goals. Indonesia's long-standing free and active foreign policy is also a driving force for this activity. A "free and active" foreign policy is a foreign policy that is not neutral but has the freedom to choose attitudes and policies towards global challenges, according to the Law on Foreign Relations of the Republic of Indonesia No. 37 of 1999. Furthermore, this concept emphasizes how Indonesia is actively involved in conflict situations and other problems rather than relying on only one particular power. This is done only for the national interest of Indonesia, as stated in the Preamble to the 1945 Constitution (Law Number 37 of 1999 concerning Foreign Relations). This non-aligned mindset also influences Indonesia's belief that it should not become a world political football.

On the contrary, Indonesian society is aware of the need to maintain positive relations with other countries to advance its country's growth. As a result of the country's diplomatic and foreign policy decisions, Indonesia's involvement in bilateral and multilateral relations is logical (Anwar, 2001) (Putra, 2023). The Minister of Foreign Affairs conveyed the success of Indonesia's health diplomacy in securing vaccine supplies for national needs during the COVID-19 pandemic in the 2024 Annual Press Statement of the Minister of Foreign Affairs (P.P.T.M.) (08/01). As a result, Indonesia has a supply of more than 516 million vaccine doses, 26% of which are grants obtained through international cooperation (Ministry of Foreign Affairs, 2024). "2020-2022 was a difficult year for the world with the COVID-19 pandemic. "Indonesia's diplomacy is at the forefront in securing the supply of more than 516 million vaccines for domestic needs," said Minister of Foreign Affairs Retno Marsudi in 2024. Press Statement of the Minister of Foreign Affairs (P.P.T.M.) held at the Asian-African Conference (K.A.A.) Museum (Ministry of Foreign Affairs, 2024).

Foreign Minister Retno also said that the WHO appreciated Indonesia's handling of the COVID-19 pandemic. The WHO Director-General called Indonesia one of the best countries in handling the pandemic (Ministry of Foreign Affairs, 2024). The Ministry of Foreign Affairs actively encourages equitable vaccine access for developing countries. In this regard, Retno was elected as Co-Chair of the COVAX AMC Engagement Group in 2021. The C.O.V.A.X. Facility has successfully distributed 1.97 billion vaccine doses to 146 countries (Ministry of Foreign Affairs, 2024).

In addition, health diplomacy also supports strengthening health resilience through several concrete initiatives over the past nine years, such as the launch of the Indovac vaccine through the Bio Farma - Baylor College of Medicine U.S. collaboration, strengthening the ASEAN health mechanism, launching the Pandemic Fund during Indonesia's G20 Presidency, initiating the Pandemic Agreement to strengthen global health mechanisms, to Indonesia being selected by WHO to become one of the mRNA vaccine production hubs in the region (Ministry of Foreign Affairs, 2024).

In her annual statement in January, Foreign Minister Retno L.P. Marsudi said Indonesia would focus on "health security diplomacy." "Our focus is to realize vaccine commitments through bilateral and multilateral partnerships," she said, and the policy guidelines continue the government's 2020 strategy. As President Joko Widodo's chief diplomat, Retno is tasked with organizing efforts to secure the vaccines Indonesia needs to defeat COVID-19. During the country's second wave of infections, medical equipment such as oxygen cylinders and ventilators have been added to her health diplomacy list (The Jakarta Post, 2021). This does not mean other foreign policy issues, such as Myanmar, are less critical. It is simply a matter of priority. At a time when millions of its citizens are at increased risk of contracting the coronavirus, the government needs to make a concerted effort to ensure the rapid arrival of promised vaccines and other supplies through bilateral and multilateral mechanisms. When the second wave of COVID-19 hit India in mid-February, Indonesia sent 2,000 oxygen cylinders and 200 oxygen concentrators in solidarity with the world's largest democracy and second-most populous country. The number may seem insignificant when compared to the millions of patients in India who need treatment, but our attention and concern for other countries is more important in these difficult times; as the saying goes: "a friend in need is a friend indeed" (The Jakarta Post, 2021).

As a disaster-prone country, Indonesia often receives assistance from the international community, such as when the Indian Ocean earthquake and tsunami devastated Aceh in 2004 and, more recently, in 2018, when another earthquake and tsunami devastated Palu, Central Sulawesi. Driven by the Delta variant, the second wave of infections has plunged Indonesia into a critical condition, leaving it with no choice but to send an S.O.S. to the world. There is no shame in asking for help from the international community, as every country must help each other and work together to face this global pandemic (The Jakarta Post, 2021). As Tedros Ghebreyesus said in August 2020, "No one is safe until everyone is safe." Indonesia's diplomatic strategy has been successful, as evidenced by the many countries responding to our request for assistance. Australia has donated 2.5 million doses of the AstraZeneca vaccine, oxygen-related equipment, and antigen test kits, which Foreign Minister Marise Payne announced on 7 July after speaking with Retno. Other countries, including the United States, Japan, and Singapore, have also pledged their assistance to Indonesia. We have received 4 million doses of the Moderna vaccine from Washington through the C.O.V.A.X. Facility, the global vaccine access scheme. Japan has sent 1 million doses of AstraZeneca with another 1 million doses to follow, and Japan has also sent shipments of vaccines to our close neighbours, Malaysia, the Philippines, and Thailand. Two planeloads of medical supplies and equipment, including oxygen tanks, ventilators, masks, gloves, and protective suits, arrived from Singapore on 9 July, and a shipment of compressed oxygen tanks is on the way. We must not forget that

China was the first country to help Indonesia. Indonesia has received millions of vaccines from the world's second-largest, most populous economy. It has been a veteran of the COVID-19 response since the novel coronavirus emerged there. China's vaccines play a critical role in Indonesia's efforts to vaccinate 70 per cent of its population to achieve herd immunity. While we may one day have to pay back what we have received now because "there is no such thing as a free lunch," Retno said coordinating with the world is crucial to protecting the entire nation from this virus (The Jakarta Post, 2021).

CONCLUSION

On 30 January 2020, WHO declared the COVID-19 outbreak in China an international public health emergency with high risk to countries with vulnerable health systems. As of 3 March 2020, there were 90,870 confirmed cases of Covid-19, 80,304 of which were in China. According to WHO, on 28 March 2020, 202 countries were affected by Covid-19, with 575,444 confirmed cases and 26,654 confirmed deaths. The country with the highest number of cases is Italy, with 86,498 cases, followed by the United States with 85,228 cases, and China with 82,230 cases. The fewest COVID-19 cases in one country is 1 case; the countries with the fewest cases are Libya, Papua New Guinea, Saint Vincent and the Grenadines, and Timor Leste. Seeing the increasingly widespread cases of the spread of COVID-19 makes the issue a threat, where this threat can disrupt the fundamental values of individuals, groups, and nations, which has the potential to cause a humanitarian crisis. Thus, the spread of COVID-19 is an essential concern for various parliaments worldwide. To handle this case, a form of international community cooperation is needed; this is based on the limited knowledge of each country in suppressing the spread of COVID-19. In international relations, diplomacy has various roles and functions. This is accompanied by various human efforts to solve all problems in the world. Thus, diplomacy between countries is one of the efforts that can be made to overcome the humanitarian crisis due to COVID-19.

As of 31 March 2020, there were 1,528 confirmed cases of COVID-19 in Indonesia and 136 deaths related to this disease. This country's case fatality rate (C.F.R.) is much higher than the People's Republic of China (8.9% vs 4%). Health facilities in Indonesia still need to be ready to face COVID-19. Massive preparations should have been taken seriously before spreading the disease in the People's Republic of China. Professor Joseph Wu warned all parties since January 2020 in The Lancet. The author stated that 2019-nCoV would become a global epidemic at that time. He also suggested that a preparedness plan be prepared by ensuring the supply of medicines, personal protective equipment (P.P.E.) and human resources needed to deal with a global outbreak.

The COVID-19 pandemic has destroyed the health sector and all aspects of life, including social and economic aspects. For the past two years, the whole world has been working tirelessly to prevent the increase in COVID-19 cases. However, due to low public awareness and discipline, there are difficulties regarding the importance of implementing strict health protocols. Various efforts and policies have been made. However, not all of them have achieved the expected results. Although the number of cases has started to decrease compared to the first year of the pandemic, and there is a polemic about whether it has turned into an endemic, new cases are still being found. In the last 24 hours (10 June 2020), 574,365 new cases were found worldwide. This ensures that the pandemic is not over and still requires vigilance from all countries. Since the early detection of COVID-19 in Indonesia, there has been a sharp increase in cases from June to September 2021 due to the Delta variant. A slow decline followed for several months. Then, an increase occurred again in February 2022 due to the Omicron variant. The cumulative number of COVID-19 cases in Indonesia from February 2020 to 20 May 2022 reached more than 6 million. In other words, they are dealing with

COVID-19 not as a pandemic but progressively as an endemic, where cases persist and are low, but only in areas with high vaccination rates. Areas with low vaccination rates will not experience a shift to endemic areas. This pandemic can end when almost everyone has immunity, mainly because they have been vaccinated or infected and survived.

REFERENCE

- Gan, W. H., Lim, J. W., & Koh, D. (2020). Since January 2020 Elsevier has created a COVID-19 resource centre with free information in English and Mandarin on the novel coronavirus COVID-19. The COVID-19 resource centre is hosted on Elsevier Connect, the company's public news and information. *Safety and Health at Work Journal*, (January).
- Guan, W. J., Chen, R. C., & Zhong, N. S. (2020). Strategies for the prevention and management of coronavirus disease 2019. *The European Respiratory Journal*, 55(4). <https://doi.org/10.1183/13993003.00597-2020>
- Gupta, A., & Kakkar, R. (2020). Managing a covid 19 patient at different health care and field level settings. *Indian Journal of Community Health*, 32(2 Special Issue), 188–195.
- Herron, J. B. T., Hay-David, A. G. C., Gilliam, A. D., & Brennan, P. A. (2020). Personal protective equipment and Covid 19- a risk to healthcare staff? *British Journal of Oral and Maxillofacial Surgery*, 58, 500–502. <https://doi.org/10.1016/j.bjoms.2020.04.015>
- Kemenkes RI. (2020). Pedoman Pemberdayaan Masyarakat dalam Pencegahan Covid-19 di RT/RW/Desa. Kemenkes RI, 53(9), 1689–1699. <https://doi.org/10.1017/CBO9781107415324.004>
- Kemenkes RI. (2020b). Pedoman Pencegahan dan Pengendalian Coronavirus Disease (COVID-19). Kemenkes RI, 0–115.
- Nathavitharana, R. R., Patel, P. K., Tierney, D. B., Mehrotra, P., Lederer, P. A., Davis, S., & Nardell, E. (2020). Innovation and Knowledge Sharing Can Transform COVID-19 Infection Prevention Response. *Journal of Hospital Medicine*, 15(5), 299–301. <https://doi.org/10.12788/jhm.3439>
- Putra, I. D., & Hasana, U. (2020). Analisis Hubungan Sikap dan Pengetahuan Keluarga dengan Penerapan Program Indonesia Sehat dengan Pendekatan Keluarga. *Jurnal Endurance: Kajian Ilmiah Problematika Kesehatan*, 5(1), 13–20.
- Sharma, S. K., Mudgal, S. K., Panda, P. K., Gupta, P., & Agarwal, P. (2020). COVID-19: Guidance outlines on infection prevention and control for health care workers. *Indian Journal of Community Health*, 32(1), 9–16.

- Susilo, A., Rumende, C. M., Pitoyo, C. W., Santoso, W. D., Yulianti, M., Sinto, R., Cipto, R. (2020). Coronavirus Disease 2019 : Tinjauan Literatur Terkini Coronavirus Disease 2019 : Review of Current Literatures. *Jurnal Penyakit Dalam Indonesia*, 7(1), 45–67.
- Tan, L. F. (2020). Preventing the transmission of COVID-19 amongst healthcare workers. *Journal of Hospital Infection*, 105(2), 364–365. <https://doi.org/10.1016/j.jhin.2020.04.008>
- Wu, Y. C., Chen, C. S., & Chan, Y. J. (2020). Reply of “The outbreak of COVID-19 -An overview.” *Journal of the Chinese Medical Association : JCMA*, 217–220. <https://doi.org/10.1097/JCMA.0000000000000331>
- Xu, K., Lai, X., & Liu, Z. (2020). Suggestions on the prevention of COVID-19 for health care workers in department of otorhinolaryngology head and neck surgery. *World Journal of Otorhinolaryngology - Head and Neck Surgery*, (xxxx), 0–3. <https://doi.org/10.1016/j.wjorl.2020.03.002>
- Yuliana. (2020). Corona virus diseases (Covid -19); Sebuah tinjauan literatur. *Wellness and Healthy Magazine*, 2(1), 187–192.
- Zhang, M., Zhou, M., Tang, F., Wang, Y., Nie, H., Zhang, L., & You, G. (2020). Knowledge, attitude, and practice regarding COVID-19 among