

An analysis of Indonesian government policies against COVID-19

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Abstract

Purpose – COVID-19 cases in Indonesia continue to increase and spread. This article aims to analyse the Indonesian government policies as a response in dealing with COVID-19.

Design/methodology/approach – This article is a narrative analysis with the approach of a systematic literature review.

Findings – This article found that the Indonesian government responded slowly to the COVID-19 pandemic at the beginning of its spread in March 2020. The government then issued some policies such as physical distancing, large-scale social restriction (PSBB - *Pembatasan Sosial Berskala Besar*) and social safety net. These policies will only work if the society follows them. The society could be the key to success of those policies, either as the support or the obstacles.

Practical implications – This policy analysis with literature review, conducted from March to July 2020 in Indonesia, provides experiences and knowledge in how to respond to the dynamic problems of public policy in dealing with the COVID-19 outbreak, especially in the context of a developing country.

Originality/value – The novelty of the article lies in the unique policy response in a diverse society. It suggests that the policymakers should pay more attention to the society's characteristics as well as the mitigation system as a preventive measure and risk management to make clear policy in the society.

Keywords Policy analysis, COVID-19, Large-scale social restriction, Physical distancing, Social safety net, Systematic literature review

Paper type Research paper

Introduction

The aim of this article is to analyse the Indonesian government policies in facing COVID-19 as a global pandemic, as well as the society's responses to those policies. The focus is to investigate the dynamics and variation of the policies fulfilled by the Indonesian government. There are sections for the discussion. It analyses what policies have been made by the Indonesian government in response to the pandemic, such as physical distancing, regional quarantine, and other social safety net policies. Those policies do not guarantee the effect to

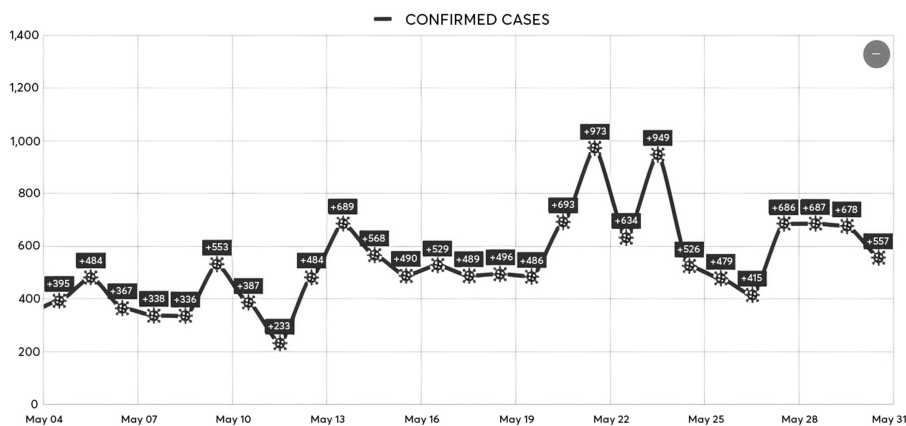


reduce or eliminate the pandemic from Indonesia. The authors found that the highlight of the implementation of such policies lies in the hand of the society, not in the policies themselves. Society involvement becomes the subject of the policies.

Since its appearance in Wuhan City, Hubei Province, China, at the end of 2019, COVID-19 has rapidly spread worldwide (WHO, 2020). The scientists have explained that the coronavirus outbreak came from the virus called Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2), which was then called simply COVID-19. This virus attacks the human respiratory system. Some general symptoms include fever, dyspepsia, aches, dry coughing, and shortness of breath. COVID-19 is quite deadly with respiratory failure and multiorgan dysfunction (Sohrabi *et al.*, 2020; Weible *et al.*, 2020). It is more deadly to the elderly and those with pre-existing complication conditions. The World Health Organization (WHO) announced the coronavirus as a global pandemic on 11 March 2020 (Djalante *et al.*, 2020).

The first case of COVID-19 in Indonesia was announced by the President at the beginning of March 2020. At that time, two people were infected (Kompas, 2020a). Previously, Japanese citizens living in Malaysia had visited Indonesia in early February (The Jakarta Post, 2020). That case was called the Jakarta cluster as the result of the Malaysian government's tracing. Since this pandemic was new, the government lacked a mitigation system (Djalante *et al.*, 2020) as well as policies to respond to it, resulting in some national panics. No one knew how to respond quickly to this pandemic (Olivia *et al.*, 2020). This condition was worsened by statements from several Indonesian government officials which said that Indonesia was free from COVID-19, while some epidemiologists believed that the coronavirus had existed since mid January to February 2020 (Kompas, 2020b).

The spread of COVID-19 in Indonesia cannot be separated from crisis management and less than adequate mitigation (Madhav *et al.*, 2018; Winanti and Mas'udi, 2020). Some of them are related to authority or responsibility and public communication in handling outbreaks. The wide spread of COVID-19 in Indonesia (Figure 1) demanded fast and proper response by the government, not only in health sector, but also in other aspects, such as gender, labor, environment and manufacture (Barneveld *et al.*, 2020); tourism (Gössling *et al.*, 2020); governance and government aspects (Moon, 2020; Oh *et al.*, 2020); and socioeconomics in general (Shammi *et al.*, 2020). Suryahadi *et al.* (2020a) gave an example that, if workers were contaminated, then production output would be limited. Therefore, as the part of the government's output, science and fact-based policies would resolve the problem precisely whereas unprecedented complex problems would also impact (Weible *et al.*, 2020).



Source: Adapted from COVID-19 Task Force (2020)

Figure 1.
Graphic of positive
cases in Indonesia
(From day per day until
31 May 2020)

Both proper response and policies from the government are essential to handle the spread of COVID-19 (Moon, 2020). Society, which initially was the subject for the policies, also had a significant role for the implementation of a policy itself.

Public policy: a response

Making a policy is an effort to combine technical knowledge with a complex political and social reality (Buick *et al.*, 2016). Fawcett *et al.* (2018) stated that policy is meeting boundaries between administration and politics. A policy taken by public organizations is to answer the problems experienced by the society. Policy studies have three characteristics: first, as a framework to solve a problem; second, the nature of policy is multidisciplinary and, policy is normative or value oriented (deLeon, 1992). Traditionally, a public policy approach consists of choices which would be taken by the decision-makers by calculating expected impact through the consideration of costs and benefits (Mueller, 2019). In developing countries like Indonesia, a public policy has a hierarchical scope, whether it is local, national, regional, or even international. Public policy is a set of activities issued by the government to resolve any problems in the society, direct or indirect, through various influential institutions in the society (Wang and Wei, 2009).

Public policy which is complex and multidisciplinary often fails to realize its purpose in society (Mueller, 2019). Swift actions by the government can reduce the socio-economic impact and deaths resulting from COVID-19 (Balmford *et al.*, 2020). In the context of policies regarding COVID-19, previously the Indonesian government did not have adequate policies in an outbreak. The Law Number 24 of 2007 concerning Disaster Management and Law number 6 of 2018 concerning Health Quarantine were deemed unable to accommodate the current policy response needed. This situation eventually led to a policy crisis, until finally the Indonesia's government issued technical regulations.

The world is in the midst of the most severe pandemic in the history of human civilization and it has had unprecedented effects (Weible *et al.*, 2020). The effect goes far beyond the healthcare system. It has an effect across every sector of society, i.e. economic, technical, and social system such as religion, education, work patterns and social communications. According to the WHO cited in Sohrabi *et al.* (2020), the spread of COVID-19 could be inhibited by early detection, isolation, and effective treatment and contact tracing of patients. China as an early country in the epicentre of the spread of COVID-19 carried out regional quarantine or lockdown for several months to suppress the spread of coronavirus outbreaks (Gong *et al.*, 2020; Liu *et al.*, 2020). Several countries for instance Malaysia, Iran, Singapore, the US, Germany, Italy, the UK and most countries in the EU, Asia, North Africa, and Australia implemented regional quarantine and lockdown (Zowalaty *et al.*, 2020). There were some countries, such as South Korea, that did not implement lockdown but successfully suppressed the spread of COVID-19 cases (Oh *et al.*, 2020), by incorporating testing, early separation, and free care of positive cases together with digital technology (Lee *et al.*, 2020).

Methods

This article uses narrative analysis (Creswell *et al.*, 2007), with a systematic literature review approach. According to Liberati *et al.* (2009), systematic reviews are a critical resource to accurately and consistently summarize proof. Based on the guidelines, there is a 27-item checklist included in the guidance of PRISMA (Preferred Reporting Items for Systematic reviews and Meta Analyses) as summarized in Appendix 1.

Policy responses against COVID-19

The WHO has announced that the coronavirus outbreak has become a global pandemic (Shammi *et al.*, 2020; Tosepu *et al.*, 2020). Globally, transmission of this virus has spread very

fast. There are around 215 countries that have coronavirus cases (Ministry of Health Republic of Indonesia, 2020). Not only Indonesia but also many countries experienced confusion in dealing with the COVID-19 pandemic situation (Mas'udi and Winanti, 2020).

There was variability in science that was used as a policy approach. Some scientific approaches attempted to suppress or control the spread of the coronavirus through the use of information technology and collaboration between institutions as used in China (Yang *et al.*, 2020). Almost all countries have imposed several restrictions on the community. This complex and dynamic situation demanded a policy elaboration from government authorities (Nicholls, 2020). A comprehensive and coordinative policy was necessary in dealing with this outbreak. The government had to be adaptive and agile in responding to all the problems developing in society (Moon, 2020). The Indonesian government under Joko Widodo's leadership formulated several policies. There were at least nine legal products for the COVID-19 handling, namely four Presidential Decrees, two Presidential Regulations, one Government Regulation, one Presidential Instruction, and one Government Regulation in lieu of Law.

These regulations were directly or indirectly related to the COVID-19 had an impact on communication and the coordination nature of policy actors and caused overlap between policies. As a large country which implements a decentralized system, Indonesia has a variety of institutions and it also implements diverse local policies. Totally, there are 24 provinces, 514 regencies, 70,244 sub-district and 81,626 villages. The result is that policies from one region to another can differ in response to COVID-19. Due to many policies issued by the government, the authors summarize some fundamental policies which became a public concern in Indonesia.

(1) *Social/Physical distancing*

Firstly, the Indonesian government issued an appeal to implement physical distancing. This was preceded by a presidential speech to work at home, worship at home, and study at home on 16 March 2020. Social or physical distancing was considered the most effective way to suppress COVID-19 cases. This was an effort to keep a distance of at least 1 meter and to reduce crowds of people. Physical distancing was a form of mitigation or prevention of the spread of COVID-19 (Kompas, 2020d). It was also a suggestion from WHO (Susilo *et al.*, 2020). Prevention was considered the most rational measure that could be done because the vaccine had not been developed yet.

Indonesia has social ties that are still strong in society. The community was accustomed to social togetherness, cooperation, solidarity and other social interactions prior to COVID-19 (Kompas, 2020c). Many public facilities in Indonesia such as malls, places of worship, bus stations, and airports were still crowded. The unsuccessful implementation of physical distancing was a communication crisis about COVID-19 (Winanti and Mas'udi, 2020). There was so much information that flowed to the public, especially by online media, and which included the rise of information mixed with false information, that people became confused, and then ignored it. On the other hand, the government was not able to prepare access to information that was valid, official and integrated. Nevertheless, in its development, the government succeeded in creating an official channel named as: <https://covid19.go.id/>.

(2) *Regional PSBB (Partial Lockdown)*

The less than optimal implementation of physical distancing in suppressing the spread of COVID-19 cases in Indonesia led the government to compile other binding and coercive policy instruments which were said to have some distortion (Wang and Wei, 2009). According to Wang and Wei (2009), the distortion in question is that the implementer always chooses policies which have beneficial value for policy makers.

This is quite rational, because through physical distribution, people are still able to carry out economic activities and this greatly contributes to maintain the economic stability of the country. The Indonesian terminology used is PSBB (Large-Scale Social Restrictions), and the implementation of PSBB in these regions was considered far more realistic than the full implementation of lockdown in all regions of the country.

The implementation of this PSBB refers to Presidential Decree No. 11 of 2020 concerning the Establishment of Public Health Emergency and Government Regulation No. 21 of 2020 concerning Large-Scale Social Restrictions. PSBB in an area can be performed after obtaining approval from the Indonesian Minister of Health. Additionally, PSBB request can also be submitted by the COVID-19 response team. Furthermore, almost all regions in Indonesia implemented regional PSBB, both province and region depending on how the development of COVID-19 cases in the area occurred. As of early June, four provinces and ten regencies/cities implemented PSBB (*CNN Indonesia, 2020*).

According to Denny JA's LSI Survey (Indonesian Survey Institute) report, there are 33 provinces with COVID-19 cases that have implemented PSBB (*LSI Indonesia, 2020*). Furthermore, it also explained that, although PSBB was implemented, it did not guarantee a decrease in the daily COVID-19 case rate. However, it appears that PSBB can relatively control the distribution of COVID-19 in an area. A top down PSBB policy has actually adopted the principles of policy implementation according to *Wang and Wei (2009)*, for instance, careful planning, rapidity, veracity, agility, innovation, and consideration of various aspects, even though the aspect of speed of policy making in dealing with COVID-19 was a bit late. The implementation of PSBB in several regions of Indonesia had a negative impact on various aspects of life.

COVID-19 brought the impact of vulnerability on some groups of society, especially the informal sectors. Community groups that rely on daily income such as online taxi bike, taxi drivers, street vendors, and unskilled laborers are increasingly having trouble to obtain earnings. They have been forced to suspend economic activities outside the home even if a small number of community groups still carry out economic activities to meet their daily needs. In addition, approximately 3.05 million employees were laid off from employment (*Tempo, 2020*). This effect was positively correlated with the rising of unemployment in Indonesia, which was predicted to be as many as 6.88 million people (*Gusman, 2020*). Therefore, the government needs to formulate social policies to protect the most affected groups from the COVID-19 outbreak.

(3) *Social Safety Net*

The socioeconomic impact arose from the implementation of physical distancing and PSBB was certainly a severe blow to all, particularly for middle and lower class groups. The lower middle class group had most of the work in the informal sector; they did not get daily income for approximately one to two months. Without a strong social safety net, informal workers will face a deep crisis. Who then are the informal workers? *Eddyono et al. (2020)* divided informal workers into two large categories namely paid and non-paid workers. Apart from informal workers, vulnerable groups of people are the poor.

The current crisis has implications of the decline of poor communities. According to *Suryahadi et al. (2020b)*, the existence of COVID-19 has had an impact on the number of poverty population, which increased to 12.4% or around 8.5 million.

The government issued a social safety net policy to improve the protection of the community with health programs to provide facilities and infrastructure ([COVID-19 Task Force, 2020](#)). There were a number of social policies which included additional recipients of the Family Hope Program (PKH), Staple Food Cards, Pre-Employment Cards, electricity subsidies, additional market and logistical operations, and credit payment relief for informal workers ([KSI, 2020](#)) and Village Fund BLT (direct cash assistance).

1. PKH

The Family Hope Program (PKH) is the flagship program in the Joko Widodo's administration aimed to maintain purchasing power to meet basic needs for underprivileged community groups, especially during the current crisis. The government increased the social assistance budget by 25% and there was a change in the amount received by the Family Beneficiary (KPM). For example, mothers with children aged 0-6 years to Rp. 250,000 per month, for elementary school children to Rp. 75,000 per month, secondary school children reached Rp. 125,000 per month, high school children became Rp. 1,656 per month, and people with severe disabilities and for people aged 70 and older became Rp. 200,000 per month. Totally, budget was Rp 37.4 trillion and the total recipients reached 10 million KPM/target group ([Detik, 2020](#)).

2. Staple Food Cards

Based on Presidential Regulation No. 63 of 2017 concerning Distribution of Social Assistance on a non-cash basis, it has been replaced by a Staple Food Card in its development. The purpose of this policy is to meet the basic needs of the weak economic community. The distribution was carried out through RT/RW (Neighbourhood/Community Association) with a target of 20 million families in the mid-distribution channel from April to September 2020. Recipient communities received Rp 200,000 of groceries that can be spent in the outlets (*e-warong*), in cooperation with the distribution bank ([AIDRAN, 2020](#)).

3. Pre-Employment Cards

Pre-Employment Cards are a social empowerment specifically for pre-work groups in increasing competence in the world of work. This empowering assistance was based on Presidential Regulation No. 36 of 2020 concerning Development of Work Competence. In this program, the beneficiary group must be pro-active by registering on [prakerja.go.id](#). Furthermore, this program is also intended for workers who were laid off during the pandemic. Beneficiaries get incentives of Rp. 1,000,000/training, incentives of Rp. 600,000/-month and work incentives of Rp. 150,000- ([AIDRAN, 2020](#)). The target recipient of this assistance is 5.6 million people.

4. Electricity subsidies

As an effort to ease the burden on the community, especially the poor during the pandemic, the government also subsidized basic electricity tariffs to the people who had 450 kV and 900 VA electricity capacities ([AIDRAN, 2020](#)). The subsidy was given as much as 50% of highest monthly electricity rate for the past four months prior to April 2020 and was valid from April to June 2020 with a target recipient of 24 million users.

5. Additional market and logistical operations

During the pandemic, logistical transportation was limited. This was designed to break the spread of COVID-19. Furthermore, due to limited logistical mobility and the availability of increasingly depletion of goods, this had an impact on rising prices of basic commodities. Therefore, the presence of additional market and logistics operations coordinated by BULOG (State Logistics Agency) was beneficial for the community so the poor could meet basic needs easily and affordably.

6. Credit payment relief for informal workers

Informal workers in Indonesia in 2019 reached 70.49 million people (BPS Indonesia, 2020). The majority were engaged in services and traded on a small and medium scale. Therefore, the government eased credit interest to them and SMEs for one year. This relief policy was regulated in the Financial Services Authority Regulation (POJK) No. 11 of 2020 concerning National Economic Stimulus as a Countercyclical Policy on the Impact of Coronavirus Disease 2019.

7. Village Fund BLT

Since many villagers are also affected by the COVID-19 pandemic, the government provides Direct Cash Assistance (BLT), particularly for the poor whom have not received the aid scheme described in the previous points. The Village Fund BLT refers to the Regulation of the Minister of Villages, Development of Disadvantaged Regions and Transmigration (Permendes PDTT) No. 6 of 2020 concerning Amendments to the Regulation of the Minister of Villages, Development of Disadvantaged Regions, and Transmigration No. 11 of 2019 concerning Priority of the Use of Village Fund BLT in 2020 (Figure 2).

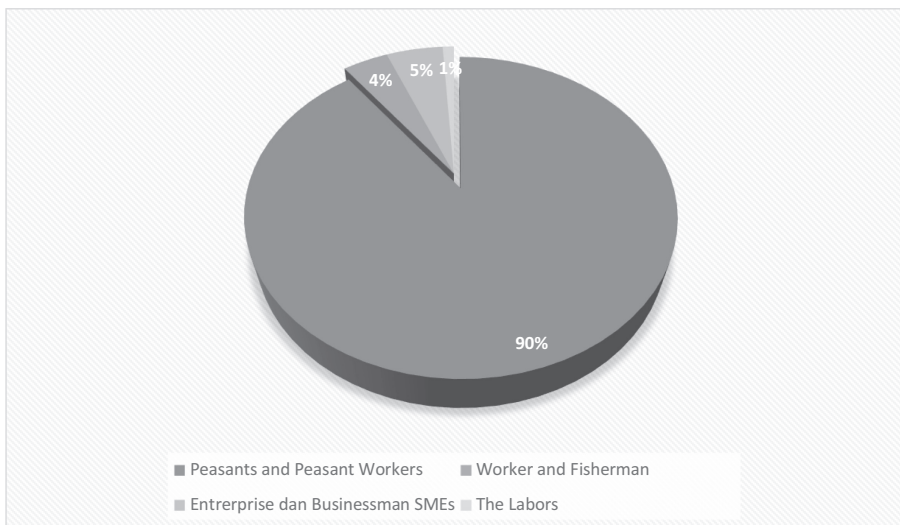


Figure 2.
Distribution of Village
Fund BLT

Source: Adapted from Ministry of Village, Development of Disadvantaged Regions And Transmigration (2020)

The communities that are entitled to get this assistance are:

- a) Registered as poor citizens through RT/RW (Neighbourhood/Community Association) data collection in the village area;
- b) Not registered as a beneficiary in the following Social Aid Program: Ministry of Social Affairs Family Hope Program, Non-Cash Food Aid, Pre-employment Card;
- c) Do not have family members who are vulnerable to chronic illness;
- d) Loss of livelihood due to COVID-19;
- e) If they are not registered as recipients of Social Aid by the central or regional government and are also not recorded in the RT/RW data collection as well, then they can communicate with village officials / authorized apparatus;
- f) If the prospective beneficiary is eligible, but does not have NIK/KTP (identity card), then the person can still receive the assistance without having to make KTP first and the domicile address in the village will be recorded as a substitute.

Figure 2 indicates this beneficiary group received assistance of Rp. 600,000/KK (Head of Family) during the period April-June 2020. The total number of Village Fund BLT recipients was targeted to reach 7.74 million KPM (Family Beneficiary), consisting of 90% of peasants and peasant workers of the total recipients. The other 4% was fishermen and fishermen workers, 5% was traders of micro, Small and Medium Enterprises (SMEs) and 1% of the labors.

Society as a key of success and obstacles of policy

There were many stakeholders in various sectors who took part in determining the success of a policy. It means that the success of a policy was influenced by the behavior of policy actors, especially the community as a target group of a policy (Strassheim, 2019) in which people's behavior was influenced by the level of cognitive knowledge possessed. Traditionally, the community in policy studies has always been placed as an object (Roziqin, 2018). However, according to Bernauer *et al.* (2016) a policy obtains more legitimacy when the majority of people are actively involved and have a role. This was confirmed by the fact that in contemporary policy studies in various sectors, people were placed as subjects (Király and Miskolczi, 2019). Moreover, waiting and following the policies taken by policy makers must be based on adequate science (Spalding *et al.*, 2020).

Government policy in Indonesia in handling COVID-19 can be discussed with three elements: ideas, institutional, and interests (Carter and May, 2020). The idea in such crisis situation was about the purpose of the policy being implemented. Reducing COVID-19 case numbers; minimizing socio-economic impacts and breaking the chain of distribution are the objectives of several policies taken by the government. A comprehensive and mature idea is very much needed in dealing with the crisis. Then, the institutional structure involved in policy needs to facilitate and share information. In the situation, both formal and informal institutions do not only act administratively, but are able to understand and mitigate conflicts between jurisdictions and organizational boundaries (Kettl, 2003). Furthermore, both political and operational interest can ensure public participation.

In the process of COVID-19 handling, the Indonesian government did not have the same understanding as the communication process did not run well, especially at the government level. Atkinson *et al.* (2020) explained that government communication could assist to deliver information so that people participated and received benefits. Besides, the abundance of information available on social media influenced people's social cognition (Hartley and Vu,

2020; Yu *et al.*, 2020). Accordingly, people tended to be confused as to which information was worth following. Finally, the decision that most people made was to ignore information. This implied that people were ignorant of the policies taken by the government. Public policy can also be seen as an elusive concept, but closely related to information (Stewart, 2013). It means that this information can affect public knowledge (Hale, 2011).

Information in policy internships plays an important role in conveying the substance of the policy. Society, as the subject of policy, also requires valid information as a basis of involvement in achieving policy objectives. The emphasis of the relationship between policy makers and the public should be clearer. It was confirmed by Sabatier's statement to be made in 1993 (Malloy, 1999) that policy is a unity of vision between the state and community actors. All elements of society were important parts in breaking the chain of the spread of COVID-19, including lower levels of society namely the village government. Communities at this level can be the last bastion as well as the beginning of the policy in handling COVID-19. The bottom-up policy model will be far more understandable and in accordance with the characteristics of the community.

Indonesian top-down policy in handling COVID-19 emphasized more on aspects of bureaucratic structure (Malloy, 1999). Doern (1993) suggests that policies that are clear and originate from the policy paradigm and regulate ideas or principles; organization and bureaucratic power; and policies in the community can contribute to the development. The third point assumes that if the policy is formulated with a bottom-up model, then the level of community acceptance will at least continue. This means that community involvement and compliance can be increased. Public discipline is a separate problem. Some policies which have been prepared by the government will be useless if the community is neglectful by ignoring these policies. This implies that the role of the community in a policy is very important. In the context of COVID-19 handling in Indonesia, the *indonesiaterserah* (with literal meaning of "Indonesia, we don't care") sarcasm arose, which means that people were ignorant about health protocol and tended to not care about the COVID-19 pandemic. On the other hand, there were other persuasive efforts informed to the public that discipline is the most important thing. Until the adage appeared, the best vaccines were discipline – discipline in implementing social distancing, discipline in implementing health protocols, and discipline in policy.

Conclusion

The Indonesian government issued various policies in handling the spread of COVID-19 cases. Even though the Indonesian government's initial response was not good, and there was a policy crisis, some policies were directly related to the handling of COVID-19, including physical distancing and Large-Scale Social Restriction (PSBB). Besides, several policies were resulted from socio-economic impacts which created social safety net. This study shows that some policies made by the government were not effective in suppressing the number of COVID-19 cases, as such type of policy is more top-down. The community became the target group of the policy and it was less acceptable to them. This means that, in the case of COVID-19 handling in Indonesia, the community can be a determinant of the success or failure in handling COVID-19.

Policy crisis at the beginning of handling of COVID-19 caused people's negligence. In addition, in responding to the COVID-19, policy makers need to pay attention to community characteristics and to involve in all stages of the policy so as to increase the level of acceptance in the community. Consistent with the situation is as an effort to minimize the socioeconomic impact on society, policy makers can make social safety network policies so that the crisis caused by COVID-19 will not intensify. This research does not imply that other developing countries have to adopt the same policies as

Indonesia's, including social security network policies. We suggest that further research has to focus more on the social aspects of the community in responding to outbreaks. Society is the subject to determine the success or failure of the policies in achieving goals. More policy studies are suggested to investigate the public response to the policies. In addition, future research can explore the level of community compliance and acceptance if the policies are developed bottom-up.

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Appendix 1.
Checklist of items to systematic literature review

Section	Item	Checklist of item	Applicable in this paper
TITLE	Title	Identify the research through systematic review, meta-analysis, or both.	The researchers identify Indonesia's policy in responding to COVID-19 with systematic review.
ABSTRACT	Structured summary	Provide a structured summary including, as applicable: background; objectives; data sources; study eligibility criteria, participants, and interventions; study appraisal and synthesis methods; results; limitations; conclusions and implications of key findings.	The researchers convey a summary of this research.
INTRODUCTION	Rationale	Describe, in the sense of what is already understood, the reasoning for the study.	The researchers conducted a review of COVID-19 with a policy approach and the impact of the policies taken by the Indonesian government in dealing with COVID-19.
	Objectives	Provide an explicit statement of questions being addressed with reference to participants, interventions, comparisons, outcomes, and study design.	This article aims to analyse the Indonesian government's policies as a response in dealing with COVID-19 with systematic literature review from various sources.
METHODS	Protocol and registration	Indicate if a review protocol exists, whether it can be accessed and where it can be accessed.	The researchers conducted a review of several publishers, e-books, book chapters, and research reports that discuss public policy and COVID-19.
	Eligibility criteria	Specify study characteristic.	The researchers conducted a review between March and July 2020, and all publications are peer reviewed.
	Information sources	Describe all information sources.	For journal articles, the researchers used the Scopus database published from several publishers such as Emerald, Springer, Taylor and Francis (Routledge), ScienceDirect, Sage and Wiley.
	Search	Present a systematic electronic search strategy for at least one database, including any applicable restrictions, so that it can be replicated.	In the Scopus database, the researchers provide search limits on policy and COVID-19, besides a systematic literature review to support these methods.
	Study selection	State the process for selecting studies	Most literatures are published in 2020, and some previous literatures are used to support the authors' arguments.
	Data collection process	Describe method of data extraction from reports.	The authors search for literature by online books and book chapters about COVID-19.
	Data items	Data items in this research.	The important variables in this research are policy response, COVID-19, society, and Indonesia.
	Risk of bias in individual studies	Describe methods used for assessing risk of bias of individual studies.	To reduce individual bias, the authors combine the updated data in several trusted media and research institutions.
	Summary measures	State the principal summary measures.	Searches in the Scopus database were carried out randomly with the keyword COVID-19 in Title-Abs-Key and Policy on the next keywords.
	Synthesis of results	Describe the methods of handling data and combining results of studies.	We search for journal articles in several reputable publishers with two important keywords, namely COVID-19 and Policy. The keyword Indonesia is used for the uniqueness of this study.
	Risk of bias across studies	Specify any assessment of risk of bias that may affect the cumulative evidence.	Combine many resources.
	Additional analyses	Describe methods of additional analyses.	The analysis supported by official reports and previous studies.

(continued)

Section	Item	Checklist of item	Applicable in this paper
RESULTS	Study selection	Give numbers of studies screened, assessed for eligibility, and included in the review.	There are 1999 documents discussing COVID-19 in the Scopus database (Per October 2020). Then selected by adding the keyword Indonesia to the search strategy, the results were 79 articles discussing COVID-19 and Indonesia. However, authors only took 39 articles that were relevant and published in reputable publishers.
	Study of characteristic	Describe of each study characteristic.	This period is limited to the time between March to July 2020 and limited to the issue of COVID-19 and the policy response.
	Risk of bias within studies	Present data on risk of bias of each study.	To reduce analysis bias, authors only used 36 journal articles and the rest of the references came from book chapters, official government reports and trusted media.
	Results of individual studies	Provide simple summary data.	Team interpretation in this result.
	Synthesis of results	Present the main results of the review.	Team interpretation in this result.
	Risk of bias across studies Additional analysis	Present outcomes of any risk evaluation of prejudice through studies. Give results of additional analyses.	The results were described and narrated with the literature collected. The researchers added some data and arguments from the media and research reports on the development of COVID-19 in Indonesia, Narrative of this research
DISCUSSION	Summary of evidence Limitations	Summarize the main findings. Discuss limitation of study.	Time of this study was five months and the case study was in Indonesia.
	Conclusion	Provide a general interpretation of the results and implications for future research.	The conclusion is interpretation of the results in Indonesia's policy response to against COVID-19.
FUNDING	Funding	Describe sources of funding for the systematic review and other support.	There is no funding in this study.

Source: Adapted from [Liberati et al. \(2009\)](#)

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