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# Does Regionalism Work in Managing the COVID-19 Pandemic: a Case Study of ASEAN

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#### Abstract

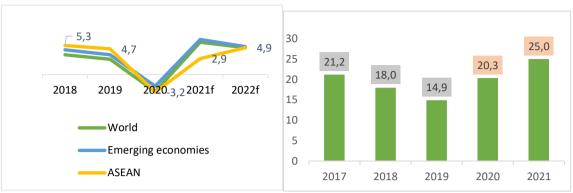
This article attempts to examine ASEAN's response to and recovery from the COVID-19 pandemic, including through the implementation of the ASEAN Comprehensive Recovery Framework (ACRF). It is aimed to contribute to the existing literature by providing an applicable and valuable research on policy analysis by addressing the existing research evidence and the current research gaps on the response to the COVID-19 pandemic at the regional level, as well as what ASEAN brings to the regional security and prosperity. The adoption and implementation of the ACRF have successfully ensured a robust and inclusive socioeconomic recovery. It signaled a firm commitment from the ASEAN Member States and its External Partners to work together to carve a path through the COVID-19 crisis. In this sense, the ACRF has proven that regionalism does work in managing the COVID-19. ASEAN should reconsider and reprioritised its development agenda. With the commencement of work in developing ASEAN's post-2025 agenda, ASEAN may start considering the use of programmatic approach in improving its regional cooperation mechanism, rather than continuing business as usual in doing sectoral work.

Keywords: ASEAN Social Pillar, social policy, pandemic, recovery, regional, security

#### Introduction

Since the World Health Organization declared the COVID-19 pandemic in March 2020, the impact of the pandemic has continued to upend lives and damage livelihoods. In ASEAN, the crisis created unprecedented uncertainty for the region, with terrible economic and social consequences beyond its affect to the health system (Shahi et al., 2021) ASEAN recorded a total of more than 32 million COVID-19 cases and more than 350,000 deaths by July 2022. On the economic front, the gross domestic products (GDP) of the region fell by 3.2 percent in 2020 - the region's first contraction in 22 years -with an addition of more than 10 million people have been pushed back to extreme poverty level, hampering the 20-year progress of poverty alleviation in the region(Asian Development Bank, 2022) (Figure 1)

**Figure 1.** ASEAN's GDP Growth, 2018 – 2022f (%) (*left*) and estimate number of people living below extreme poverty line (millions) (*right*)



Source: Asian Development Bank (April 2022)

Noting the global emergency situation, it is then important to observe the role of international institutions such as ASEAN to respond to the COVID-19 pandemic. Neoliberalists such as Keohane and Martin as well as Simon (Keohane & Martin, 1995) for example, proposed the notion that ASEAN serves as a functional tool to advance regional cooperation through the reduction of transaction costs, increase of transparency, and providence of regional focal points for its Member States. Another important feature of international institution the promotion of cooperation between states through the institution, as highlighted by He (He, 2008) and the interdependence, which affect states' behaviour given the autonomy limitation and uncertain guarantee to reap the maximum benefits (Keohane & Nye, 1987).

This paper will then attempt to examine the role of ASEAN, as an international institution, to manage the COVID-19 pandemic from the perspective of liberalism and neoliberalism.

### Methodology

This paper applies desk research methodology which involves the use of the existing data published by organizations or companies in the field of the international relations, regional security and management of COVID-19. This study also attempts to explore data from various sources and use Secondary Data Analysis (SDA) with qualitative data (Johnston, 2014). SDA with qualitative data is carried out to explore new research questions or analysis strategies that are not part of the primary analysis (Habibullah et al., 2022). The data sources were published in the period of 2017–2023.

# **Results and Discussions**

# ASEAN's COVID-19 Pandemic Response and Recovery Efforts

For ASEAN, the case of experiencing public health emergencies is not entirely new. The region was previously exposed to the severe acute respiratory syndrome (SARS) and the Middle East Respiratory Syndrome Coronavirus (MERS-CoV). The region was also experiencing the severe impact of animal diseases such as the swine and avian influenza in the past twenty years. In SARS, for example, four out of the ten countries with the highest cumulative number of cases are in ASEAN, namely Singapore, Philippines, Viet Nam and Thailand (Lam et al., 2003). With these experiences, some ASEAN Member States have then built their emergency preparedness and response plans, although each Member States have disproportionate policy responses (Purnomo et al., 2022). At the national level, there have been some are some examples of how countries addressing the COVID-19 pandemic through social work and social assistance schemes (Susantyo et al., 2023). Sina-on et al. (2022) for example, examined the experiences of Child Caring Agencies in the Philippines that offer free residential care services for Children in Need of Special Protection amidst the COVID-19 pandemic.(Sina-on et al., 2022). In the meantime, Sumadi (2023) explores that the Indonesian government has developed several social protection policy instruments to prevent the severe impact of COVID-19, such as through socio-economic registry and digitalized village monograph (Kolopaking et al., 2022). However, with that experience, the question arises whether ASEAN at the regional level has been prepared to face health crisis such as the COVID-19 pandemic (Sumadi, 2023).

Such questions were not exclusive to ASEAN. Similar critiques were also delivered to other international and regional organisations, such as the World Health Organization (WHO) or the European Union, to act faster in responding to the pandemic. While the critiques are on point, the main challenge

for global cooperation in public health is that there is no hard law obligation nor strong institutional mechanism for countries to adhere. While international institution has mechanism in place to address issues such as on financial crisis or disaster response, international organisation has their own limitation in addressing public health concern as countries can opt to implement the provided regional advice or protocols (Hsien-Li, 2020).

In the wake of SARS, for instance, comprehensive evaluations of public health regulations were carried out in Canada, China, Hong Kong, and Singapore in order to provide an appropriate legal framework for pandemic planning and other public health emergencies that may arise. In contrast, law is on the weak side when the discussions are on the infectious disease issues. Similarly, for ASEAN, while the region has already several regional mechanisms to address health concern, most of these mechanisms are loose and non-binding. For example, ASEAN already has regional frameworks such as *One ASEAN One Response Framework in ASEAN Agreement on Disaster Management and Emergency Response* and the *Memorandum of Understanding between ASEAN Secretariat and WHO* in place. However, scholars examined that these mechanisms have not been implemented in any meaningful way during the first five months of the COVID-19 given the overwhelming pace of the COVID-19 viral transmission in the region (Bennett & Carney, 2011). While the situation is understandable as Member States are struggling to manage the impact of the pandemic at the national level, this also indicates the risk that existing platform have yet to be effective for the region in facing the health crisis.

Building on liberal institutionalist concept, comparative regionalism researchers have noted that regional organizations are created to address particular cooperative issues along with its sectoral mutual recognition arrangement. To address the impact of the COVID-19 pandemic for instance, ASEAN has set up the ASEAN Coordinating Council Working Group on Public Health Emergencies in March 2020, which is a dedicated ASEAN body comprising senior officials from the three community pillars to coordinate ASEAN's response and recovery efforts. While this working group reports to the ASEAN Coordinating Council, which comprises the Foreign Ministers from the ten ASEAN Member States, representatives from the ASEAN Senior Economic Officials Meeting (SEOM) and Senior Officials Committee for the ASEAN Socio-Cultural Community (SOCA) as many of the response and recovery initiatives lie within the purview of the two pillars. For example, SEOM which comprises the representatives of the Ministry of Trade or Ministry of Commerce are responsible in maintaining the supply chain connectivity, including on essential goods such as medical kits, vaccine, and pharmaceutical products. In the meantime, SOCA are responsible to, among others climate change, public health, disasters, as well as social protection and inclusion which are pivotal to ensure an inclusive and sustainable recovery in the region.

ASEAN has also developed a number of response and recovery initiatives, such as the COVID-19 ASEAN Response Fund which serves as a pool of financial resources in the detection, control and prevention of COVID-19 transmission and in protecting the safety of ASEAN population (ASEAN, 2020). As of October 2021, the Fund has collected pledged contributions amounting to approximately USD 25.8 million from the contribution of ASEAN Member States and its external partners (ASEAN, 2021). In addition, ASEAN established the ASEAN Regional Reserve of Medical Supplies for Public Health Emergencies (RRMS) which consists of earmarked assets of medical supplies such as personal protective equipment, face shields, goggles, medical and N95 masks, N95 masks, surgical gloves, and various types of emergency health kits (ASEAN Secretariat, 2020).

Beyond the two initiatives above, ASEAN recovery efforts are guided by the ASEAN Comprehensive Recovery Framework (ACRF) and its Implementation Plan. Adopted at the 37<sup>th</sup> ASEAN Summit in 2020, the Framework underlines ASEAN's recovery efforts in 3 phases namely Reopening, Recovery, and Resilience. It comprises of more than 180 initiatives under the five Broad Strategies namely on (i) enhancing health systems, (ii) strengthening human security, (iii) maximizing the potential of intra-ASEAN market, (iv) inclusive digital transformation, and (v) sustainable and resilient future.

Selected ACRF initiatives are presented in Table 1. In this table, the policy intervention in ASEAN's recovery efforts is categorised into five categories namely capacity building, resource mobilisation, legal and non-legal framework, institutional mechanism, and regional guidelines. The selection of these initiatives does not represent the whole ACRF and ASEAN's recovery initiatives, but rather provide general illustration on the type of regional response and recovery efforts in ASEAN.

**Table 1.** Type of Policy Intervention and Selected ACRF Initiatives

Type of Policy Intervention	Selected Initiatives
Capacity building	Capacity building for health professionals through the ASEAN Plus Three Field Epidemiology Training Network, the ASEAN Center for Military Medicine, and ASEAN Emergency Operation Center (EOC) Network on Public Health Emergencies.
Resource mobilisation	<b>COVID-19 ASEAN Response Fund,</b> comprising about USD 25.8 million pledged contribution from ASEAN Member States and external partners, which serves as a pool of financial resources to provide support in vaccine procurement, detection, control and prevention of COVID-19 transmission.
Legal and non- legal framework	Through the <b>ASEAN Plus Three Emergency Rice Reserve</b> , a total volume of 5,028 metric tons has been distributed to address emergencies related to COVID-19 and natural disaster in Cambodia, Myanmar and the Philippines. The signing of <b>Memorandum of Understanding on Non-Tariff Measures on Essential Goods</b> which is accompanied by a list of more than 250 essential goods, mainly on medical supplies, food, and agriculture products.
Institutional mechanism	The adoption of Regional Strategic and Action Plan for ASEAN Vaccine Security and Self-Reliance (AVSSR) to ensure prompt and fair access to affordable and quality-assured COVID-19 vaccines.  Establishment of the ASEAN Centre for Public Health Emergencies and Emerging Diseases (ACPHEED), which will serve as a center of excellence and regional resource hub to strengthen ASEAN's public health capacities in prevention, detection and responses towards emerging diseases.
Regional guidelines	Establishment of the <b>ASEAN Regional Reserve on Medical Supplies (RRMS)</b> , which serves as a virtual warehouse consisting earmarked medical supplies, such as protective clothing, face shields, medical and N95 masks, N95 masks, to be readily distributed to the ASEAN Member States. <b>Post-Covid-19 Recovery Plan for ASEAN Tourism</b> to provide a holistic coordinated measure to safely reopen the tourism industry.
	ASEAN-wide COVID-19 operational guidelines for the protection and safety of passengers and operational air crew, as well as cleaning and disinfection of aircraft, serving as a reference to the guidance by the International Civil Aviation Organization (ICAO) Council Aviation Recovery Taskforce (CART).

Source: ASEAN Comprehensive Recovery Framework and Its Implementation Plan, Chairman Statement of the 36<sup>th</sup> to 39<sup>th</sup> ASEAN Summit, Terms of Reference of ASEAN Regional Reserve of Medical Supplies for Public Health Emergencies, ASEAN-Australia Development Cooperation Program Phase II's Infographics of the ACRF. Compiled by author.

# Does ASEAN's Regional Response and Recovery Work?

While the ACRF has recognized the multifaceted impact of the pandemic and the need of multistakeholder partnership to carry out the response and recovery efforts, challenge persists.

There are at least two main challenges on the implementation of ASEAN's response and recovery initiatives. First is the lack of strong institutions to guarantee the success of the implementation of its collective decisions. ASEAN Member States have their own pressing social, economic and political challenges and each of them tries to focus on addressing their own internal affairs. While it is evident that ASEAN has shifted beyond speeches and statements to concrete initiatives, further research is required to examine the utilisation of the various initiatives.

For example, how does ASEAN monitor the utilisation rate of its initiatives? The utilisation of COVID-19 ASEAN Response Fund, for instance, remains limited. While it is able to collect more than USD25 million pledged contributions, the latest reported utilisation only mentions the delivery of more than 139,000 doses of Pfizer-BioNTech vaccines to Cambodia (UNICEF, 2022). Another example is the utilisation of the Memorandum of Understanding on essential goods, which comprises a list of more than 250 essential products, consisting mostly of medical goods such as test kits and equipment and

food and agricultural products to ensure an open market and supply chain connectivity in the region (Lawler et al., 2021). This would require further study to ensure its effectiveness in keeping the region's market open for international trade (ASEAN Secretariat, 2022).

Second, while some initiatives have legal status, many of the initiatives are non-binding hence the lack of force in implementing the measures. The ASEAN Dialogue Partners (DP)'s desires for improved institutional frameworks for ASEAN-partner engagement are not always consistent with ASEAN's history and preferences for informal and soft regionalism. Dismissing these demands was not the best course of action, as institutionalizing contacts would also help ASEAN maintain these DPs' presence and support in a long-term manner. In addition to this, ASEAN-plus arrangements are not uniformed and vary depending on the relationship and the arrangement. The ASEAN Travel Corridor Arrangement Framework, which was adopted in 2021, has struggled to be implemented by the ASEAN Member States as they prefer the bilateral exchanges of information and accompanying standardized procedures. ASEAN also missed the chance to expedite the elimination of non-tariff measures (NTM) in the region given its lack of willingness to implement the non-legally binding NTM Toolkit. These two examples have shown how national interest prevails in multilateralism and how the bilateral exchanges defeated regional arrangements.

At the same time, ASEAN also needs to enhance coordination while maintaining its centrality and give renewed emphasis on multistakeholder partnership. The COVID-19 crisis has given opportunity for ASEAN to re-prioritise its objectives, while preparing to develop longer-term regional goals. Beyond public health resilience, the pandemic has given ASEAN an opportunity to strengthen its digitalisation and sustainability agenda. While the adoption of technology increased significantly during the pandemic, it is important to ensure ASEAN's digital transformation to be inclusive and encompassing by putting emphasis for youth, women, and rural communities.

In addition, the pandemic has posed ASEAN with the opportunity to build back better by ensuring sustainability as part of ASEAN's long-term development goals. The linkage between the pandemic and climate crisis is evident, as shown by the relations of zoonotic diseases and human-mediated environmental changes such as through the land-use change, intensive livestock production, and illegal wildlife trade (Djalante et al., 2020). To this end, it is pivotal for ASEAN to rebuild and develop its regional resilience while putting emphasis to both climate and public health resilience. Greater linkage and closer engagement between the existing or newly-established ASEAN mechanism, such as the ASEAN Coordinating Centre for Animal Health and Zoonoses, ASEAN Center for Biodiversity, and ASEAN Centre for Public Health Emergencies and Emerging Diseases should be promoted continuously.

# Conclusion and Suggestion Conclusion

The adoption and implementation of the ACRF have successfully ensured a robust and inclusive socioeconomic recovery. It signaled a firm commitment from the ASEAN Member States and its External Partners to work together to carve a path through the COVID-19 crisis. In this sense, the ACRF has proven that regionalism does work in managing the COVID-19. By concentrating on the major societal sectors and segments most impacted by the pandemic, establishing broad strategies, and determining recovery measures in accordance with sectoral and regional priorities, it outlines the ASEAN's response through the various stages of recovery. Since the pandemic is still developing, a proactive, comprehensive, community-wide approach to recovery should be taken. It should also be adaptable and quick so that the region can quickly change its plans in response to new circumstances.

# Suggestions

Finally, to address resource constraints, ASEAN should reconsider and reprioritised its development agenda. With the commencement of work in developing ASEAN's post-2025 agenda, ASEAN may start considering the use of programmatic approach in improving its regional cooperation mechanism, rather than continuing business as usual in doing sectoral work. Such changes could be done gradually given the increasing number of cross-sectoral issues that ASEAN may face. Further, in utilising the programmatic approach, the ASEAN also requires a robust monitoring and evaluation framework to accurately measure and asses the contributions and gaps in the efforts to tackle the global challenges such as COVID-19 pandemic.

In addition, many states and region are now putting more emphasis to engage with ASEAN, such as the United Kingdom, Canada, Chile, Turkey, and Bangladesh. Closer engagement with new and emerging players may also support ASEAN in mobilising resources for ASEAN's development agenda. To do so, ASEAN also needs to maintain its centrality while exercising its role as a major player in the

global forum. We have seen cases where ASEAN is able to work as one entity to tackle global challenges, such as by leading the successful conclusion of the Regional Comprehensive Economic Partnership, and this bring promises that ASEAN is and would be a key institutional actor as envisioned in the Bangkok Declaration.

#### **Author/Authors Brief Bio**

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Sandra is currently working for an international organization and handling development of cooperation projects in the ASEAN region. She has more than 9 years of experience in project development and management, policy research and advocacy, and public relations with the Project Management Professional (PMP)® certification.

She holds a Master degree in Diplomacy and International Policy from Paramadina University and a BA in English Literature and American Studies from Sebelas Maret University. Some of her researches focus on the development and role of ASEAN and BRICS, governmental system in the Islamic countries and gender issues.

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