

No work, no money: Self-isolation due to COVID-19 pandemic punishes the poor

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The spread of COVID-19 continues to unfold across the globe. More than 209,000 people in 168 countries have been infected. The disease has recorded a fatality rate of more than 4% as 8,600 people have died



from the disease.

The world's third-largest democracy, Indonesia, has reported more than 300 cases with a higher fatality rate of over 8%.

Since the outbreak, the Indonesian government has made public calls for people to self-isolate if they have symptoms. Self-isolation means staying indoors and completely avoiding contact with other people.

Public <u>health experts</u> have encouraged the public to self-isolate for at least 14 days to contain the rapid spread of the coronavirus. Research <u>has shown</u> that self-isolation is highly effective, especially when the majority of COVID-19 cases do not show symptoms.

Echoing many <u>health</u> experts, President Joko "Jokowi" Widodo has suggested people <u>"stay, work and pray at home" for two weeks</u> to prevent further spread of the highly contagious disease.

Even though this preventive action is proven effective, it fails to take into account the fact that many poor and low-income people cannot afford to self-isolate.

People working in informal sectors and casuals like online drivers, grocery store assistants and kitchen hands do not have the luxury of working from home as their jobs cannot be done remotely.

In 2019, people working in informal sectors accounted for 57.2% of Indonesia's workforce, or around <u>74 million people</u>. As many as <u>25.14 million people</u> live under the poverty line—that's about 9% of Indonesia's population.

Two weeks of self-isolation means these people risk losing their sole income source.



The poor narratives

The COVID-19 pandemic has hurt the economy <u>worldwide</u>. Many companies have reported losses as demand drops. With business slowing down, workers are facing greater risks of losing their jobs and income. It is happening in Indonesia.

"Ohh so sad. No *turis* [tourists] no job," posted one online driver on his social media just three days after the government declared COVID-19 a national disaster.

Online drivers are also prone to coronavirus infections as they meet many different people in the course of their work.

GOJEK, one of the largest online driver platforms in Indonesia, has suspended the account of one of its drivers who was suspected of having COVID-19. But how will the driver get his income?

A similar story involves a 36-year-old casual domestic worker and mother from Yogyakarta, about 500 kilometers from the capital Jakarta.

"I can't afford to self-isolate. I need to go to work," she said. "No work means no money, and no money means no food for my kids."

These accounts illustrate the difficult situations facing many blue-collar workers during the COVID-19 pandemic. They can not afford to take a day off, let alone two weeks.

What can be done

To minimize discriminatory policies against poor people during the COVID-19 pandemic, the government should address the underlying and



structural issues that create vulnerabilities in the first place.

This can be done, for example, by strengthening poverty eradication programs and establishing <u>universal health coverage</u> for low-income households.

A <u>universal health coverage system</u> will ensure everyone, regardless of their <u>economic status</u>, has access to high-quality health services and financial risk protection.

The current Indonesian system, known as <u>BPJS</u>, is not adequate to be called universal health coverage as it still requires people to pay a monthly premium. This could be a problem for <u>informal and casual workers who are often unable to pay their monthly charge regularly</u>, resulting in their memberships being canceled.

The government must allocate a budget to provide primary health services to poor people. <u>These services</u> include providing access to health education,safe drinking water, nutrition, immunization and treatment of communicable and non-communicable diseases.

In addition, the government should address more fundamental problems related to the changing nature of work during the pandemic.

One of the strategies required is to provide social assistance and social insurance for people working in informal sectors during the COVID-19 emergency period.

Without adequate support from the government, many of these people face a higher risk of losing their income or contracting the disease and then spreading the virus.

Therefore, any public health measures to mitigate multiple impacts of



the COVID-19 pandemic must seriously consider the society's various economic and social backgrounds to ensure preventive measures do not further punish already marginalized and vulnerable communities.

By strengthening the nation's social welfare and health care systems, the government can help keep all citizens both physically and economically healthy and also protect the vulnerable during the pandemic.

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