

# Coronavirus deaths go unrecorded in Indonesia

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While Indonesia stands on the brink of an unprecedented social disaster, which could result in the loss of thousands of lives, two members of the government's COVID-19 taskforce announced on Monday that a return to "normal lives" would be possible by July.

Indonesian Disaster Mitigation Agency chief Doni Monardo and Professor Wiku Adisasmito, told a press gathering that these hopes were based upon a decline in coronavirus infections. Adisasmito said: "Previously, we thought that the peak would be reached around May. But with the trend, at least in the last week, it's going down."

Soon after the announcement, infectious disease experts, epidemiologists, and data analysts contradicted these assertions. The numbers of daily cases over the week preceding the announcement—375, 283, 357, 436 (a record high), 396, 275, and 214—do not indicate a clear downward trend.

The official total has reached 9,771 infections, having grown more than five times within the space of a month. As a result of widespread community transmission, all of Indonesia's 34 provinces are affected.

The pandemic tallying website Worldometer shows Indonesia has one of the lowest testing rates in the world. At the beginning of the week it had conducted only 59,000 tests, or 210 tests per million people. The government claims to be waiting on some 479,000 reagents to arrive from South Korea and China, but as with previous deliveries, these will only allow a temporary boost to the testing rate.

At the end of last month, government spokesman on COVID-19 affairs Achmad Yurianto admitted that between 600,000 and 700,000 people have likely come into contact with individuals infected by the virus. The official case numbers are, therefore, likely to be far from the reality.

At the moment, the country has one of the world's

highest mortality rates, and the death toll of 784 fatalities is the highest in Asia outside of China.

The real death toll could be far higher.

A recent review by Reuters of the most current data from 16 provinces has shown that there were at least 2,212 deaths of patients suffering from acute symptoms of COVID-19. As they were not tested, they have not been counted in the official toll. If all of these people were indeed victims of the coronavirus, this would mean that the country's total has already reached nearly 3,000 deaths.

This discovery follows another Reuters review, published two weeks ago, of statistics which found that Jakarta cemeteries had experienced a 40 percent rise in burials in March.

Government officials have divulged that many of the country's 19,897 suspected coronavirus sufferers had not been tested due to the number of specimens awaiting processing at under-staffed laboratories. As a result, some had died before their samples were analysed.

As the spread of the virus worsens, medical facilities across the country are overwhelmed and under-equipped. The severe scarcity of personal protective equipment (PPE) is putting health workers at extreme risk of contracting the disease. At least 26 doctors, including the directors of two hospitals, and nine nurses have died from the virus. Most health workers are using cheap plastic raincoats as medical gowns.

In a hospital in the Sumatran province of Aceh, for instance, 40 suspected coronavirus cases are being treated. One patient died and, days later, doctors discovered he had tested positive for the virus. They had treated him over the course of a week without any protective gear.

A doctor working at a government hospital in Labuan Bajo on the island of Flores spoke to the *Los Angeles Times* about the situation facing the Indonesian healthcare system. She remained anonymous, as workers at her

hospital were prohibited from speaking to the media. She said: “We’re terrified. We’re using homemade face shields. Doctors are developing mild symptoms. Three have been quarantined... The central government didn’t take COVID seriously. So no one was prepared for this.”

The virus’ impact on health facilities threatens to grow even worse after a mass exodus of people from the major cities to the countryside over the past week.

The closure of non-essential workplaces in Jakarta has left millions of workers jobless and without sufficient financial assistance. A government stimulus package provided a paltry \$US7 billion as a social safety net for the millions who were laid off. Most have consequently had no choice but to return home to their villages.

Last Monday, President Joko Widodo declared a domestic travel ban leading up to the religious holiday of Idul Fitri, which was anticipated to see tens of millions moving to the country. Trains and buses were overcrowded in a rush of passengers hoping to escape the cities, before the ban came into effect on Friday. More than 14,000 people left Jakarta last week.

Even though the ban, which will remain until June, is set to prevent any further spread of virus to the provinces, it has left vast sections of the working class stranded in viral hotspots like Greater Jakarta, and unable to meet the cost of living.

Dozens of workers have described their plight to foreign media outlets. Edi, a factory worker, has lost his income and cannot afford to pay his rent of \$US50 a month. “I can’t live in Jakarta without a job,” he told Al Jazeera. “I can’t afford it, so I decided to go home before the ban.”

In comments to the *LA Times*, Diro, a 25-year-old ride-hailing motorcycle driver, said he would need further government assistance to survive in Jakarta. Despite wanting to return to his hometown in Central Java and fall back on his family for support, he explained: “I’m afraid if I go back home, I could spread the virus there. I may look healthy, but I don’t know if the virus is already inside me.”

The government proposal for a return to business as usual by July, under such conditions, is part of an international campaign by the ruling elites to force workers back onto the job in the interests of corporate profit, despite the immense health risks.

The government response to the crisis has provoked widespread anger, with many denouncing its initial denial of the problem in February and March, along with its current resistance to impose a full lockdown. Discussion on social media has erupted, with the Twitter hashtag

#LockdownOrDie being used widely.

The pandemic response has included partial lockdown measures in only two provinces, Jakarta and West Sumatra. Unrestricted movement in tourism centres, most notably the Balinese capital Denpasar, continues.

Indonesian President Joko Widodo has justified his opposition to a lockdown by claiming to be concerned about its potential impact on the working poor. This is belied by his administration’s refusal to provide anything more than token social assistance during the crisis.

Indonesia is a country of astonishingly high levels of wealth inequality, which have only grown during Widodo’s time in office. Nearly 10 percent of the nation’s 273 million people earn less than one dollar a day. The four richest individuals, on the other hand, have a combined wealth greater than the poorest 100 million.

The pandemic is being viewed by the Indonesian financial oligarchy, not as a public health crisis, but as a market event.

The COVID-19 taskforce announced earlier this month that the shortage in medical equipment would be quickly addressed. Around 3,000 garment factories would be retooled to produce 17 million items of PPE. It was claimed that within a week one million face masks would be produced per day.

These promises, however, went unfulfilled despite Indonesia’s substantial manufacturing capacity. The country, for instance, is the largest producer of cars in Southeast Asia. The government could enable a speedy manufacturing of desperately-needed health equipment, but this would not be profitable.

Instead, Widodo has in recent weeks implemented a string of emergency measures, worth around \$US28 billion, aimed primarily at ensuring the corporate sector can return to normal as soon as possible, with only a fraction allocated for an already buckling healthcare system.



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