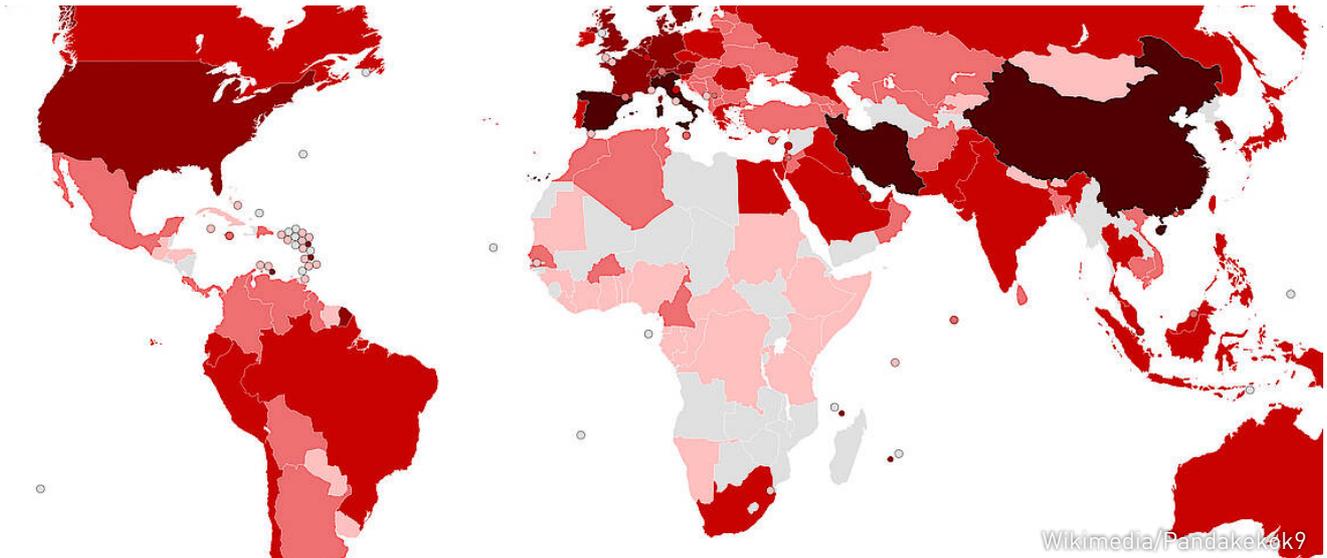




## Global quarantine II

Singapore is a poster boy in the fight against Covid-19, while existing inequalities are exacerbated in Bulgaria and Colombia

By [Mirco Günther](#), [Helene Kortländer](#), [Kristina Birke Daniels](#) | 25.03.2020



Map of Covid-19 infected countries and territories

*Read our first part of 'Global Quarantine' with perspectives from Russia, Vietnam and Argentina; and the [third part](#) with perspectives from Brazil, Palestine and Benin.*

*Read this article in [German](#).*

### Singapore

The 'gold standard'. That's how a [study by Harvard University](#) described Singapore's exemplary approach in the early phase of the corona crisis. WHO Secretary General Tedros Adhanom Ghebreyesus [was also impressed](#) by the crisis management of the small city-state. The ingredients of the Singapore recipe for success have been: rigorous testing, strict and consistent isolation, detailed clustering and reconstruction of contact and infection chains, modern, rapid, and transparent communication, and cracking down when regulations are violated.

Two months after the first confirmed case of Covid-19 in Singapore, the total number currently stands at 509, resulting, so far, in two deaths. Over 21,000 people are in home quarantine and must regularly use photos or the GPS function on their phones to prove that they are not leaving their homes. 152 people have already been released from hospital.

Some time ago, the government information service [gov.sg](#) began sending the latest case numbers and updates several times a day via WhatsApp; studying these has become part of the daily routine. Corresponding diagrams show the infection clusters that currently exist in Singapore, how they are

interconnected and which cases have been imported. The visualisation resembles a gigantic spider web made of data points – an easy-to-understand representation where the course of the spread of Covid-19 can be traced from the first case up to today.

Singapore is currently experiencing the third and most severe wave of Covid-19 infections, with the number of cases growing at a significantly higher rate. The first cases at the end of January mostly came from people from Wuhan and those who travelled to Hubei province. Local infections followed in February, with an increasing number of clusters not directly related to China. March is now dominated by imported cases. Numerous returnees from Europe, North America and the ASEAN countries have tested positive. Particularly in Singapore's neighbouring countries of Malaysia and Indonesia, but also in Thailand and the Philippines, the numbers are rising so dramatically that the WHO was prompted to call on the countries of Southeast Asia to 'act decisively'.

The Singapore authorities' reaction? A swift and determined one. As a matter of principle, visitors are prohibited from entering and travelling through the country. Every Singaporean returning to the country must undergo two weeks of self-isolation. Foreigners with work permits can return only if they are working in essential areas of the service sector such as medicine and logistics. To the extent possible, Singaporeans are not to leave the country. At the same time, schools, shopping streets, malls and restaurants remain open, albeit under significantly stricter guidelines. So far, public life has not stopped. A curfew has not yet been imposed.

In this tense situation, the core components of the 'Singapore model' show themselves again.

First, technical know-how: A new government app called [TraceTogether](#) is supposed to readily identify close contacts of infected persons. Using Bluetooth and randomly generated IDs, mobile phones of other users within a radius of two metres are saved. In this way, contact chains can be quickly reconstructed in an emergency.

Second, harsh penalties: Foreigners who violate the home quarantine requirement or return to Singapore without prior authorisation can lose their work permits. Deliberately giving false information about health, travel, and personal contacts is also punishable.

Third, overall social acceptance and the public's support of the measures taken: These include a comprehensive 'whole of society approach' under the #SGUnited campaign, its song '[The Light](#)' and a joint effort by the government, employers, unions, and public figures.

There are a number of similarities between Germany and Singapore: among them, a historically developed administrative and organisational culture, innovative enterprises and excellence in research. At the same time, the underlying conditions are different, for example in the balancing between individual freedoms and the state's right to fully intervene, or in the culture of collective coexistence. Singapore's sometimes drastic penalties for violating the rules would hardly be met with broad approval in Germany.

A recent study by [the Imperial College in London](#) summarises the main difference in approaches as follows: While Europe focuses on mitigation, the approach in Asia is suppression – defined as consistently testing as many cases as possible, and in addition, people without symptoms and those outside the risk groups. In the Asian countries that are dealing with Covid-19 most successfully, the most important formula is: testing, testing, testing.

Singapore has learned much from the SARS crisis in 2003 and the outbreak of H1N1 in 2009. Despite its proven track record and broad international praise, Singapore's outcome in fighting the Corona crisis remains uncertain. This is why, in a recent TV address, Singapore's Prime Minister Lee Hsien Loong told the people to prepare for a struggle of one year or even longer.

## **Bulgaria**

European trends are often slow to arrive in Bulgaria. At the end of February, while the rest of Europe apprehensively realised that the coronavirus might reach epidemic proportions, for a while Bulgaria seemed to be the Isle of the Blessed. Number of cases: zero. However, at the pharmacies it was clear how much the Bulgarians trusted this statistic: masks, disinfectants and disposable gloves were sold out before there was even one confirmed case in Bulgaria.

Bulgaria did not officially report the first four Corona victims until 8 March – in the remote towns of Gabrovo and Pleven. The chain of infection cannot be traced; the cases seem to have come from nowhere. Schools across the country had already been closed, allegedly due to frequent flu infections. In mid-March a national emergency was declared. Since then, 23 cases have been confirmed. Day-care centres were closed, and shops, public buildings, and facilities soon followed.

In Bulgaria's story of the coronavirus, some parts just don't add up. But the explanation is simple: no tests, therefore no cases. The Bulgarian government originally purchased 2,000 tests – for an internationally mobile population of seven million. In the meantime, private donors have stepped in and a total of 5,000 people have been tested for the virus – still far too few to get even an approximate realistic picture of the situation. At the latest, when Bulgarian seasonal workers return from the closed northern Italian holiday resorts, the number of unreported cases is likely to be enormous.

The Bulgarians' reaction is partly cynical – a belief that the government was just waiting for a European aid fund before it announced its first cases – and partly with typical fatalism, seeing yet another crisis in the long series of Bulgarian catastrophes. There is currently little confidence, as hardly anyone actually believes the government or the health system can manage the crisis. Trust in Bulgarian institutions is low: fake news and conspiracy theories are flourishing, but above all so is the Bulgarian conviction that you have only yourself to rely on.

While there are warnings of panic everywhere, no one seems to panic. But people are concerned. Many here can still recall the bottlenecks in the food supply that existed up until the 90s. The government's assurance that consumer stockpiling is not necessary is more a matter of sober calculation than runaway fear. And most people are counting on being able to sit out the crisis at home, whether sick or healthy.

Even under normal conditions, the health system is deficient in terms of equipment and personnel. People say, 'If you have no money, you have to die.' What used to be corruption is now privatisation – state health insurance hardly covers the bare minimum. The rest comes from private services that you have to be able to afford.

Worse yet, the longer the shutdown lasts, the less stuff can be afforded. In the poorest country in the EU, two weeks of closure means bankruptcy for many small businesses, and unpaid vacation for countless employees. With an average income of €671 a month, the middle class likewise has no reserves for this situation.

President Rumen Radev recently warned that the crisis could put hundreds of thousands of Bulgarians on the brink of survival: 'Hunger will be greater than fear and the consequences will be devastating.'

*Helene Kortländer, FES Bulgaria*

## Colombia

Among Latin American countries, Colombia's cases of coronavirus are statistically mid-range. The crisis intersects with basic structural problems that also exist in other countries in the Global South. Above all, this includes a largely privatised and overloaded healthcare system, a shortage of state welfare services in many regions of the country and the vulnerability of large segments of the population affected by poverty, who live just above the poverty line, work in the informal sector or perform poorly paid care work. As in the rest of Latin America, the prisons are overcrowded by up to 200 per cent due to a heavy-handed security policy; humanitarian and sanitary standards are lacking. This has already led to rebellions that ended in 23 deaths this past weekend.

Even without the corona crisis, President Ivan Duque would have his hands full. Three years after signing the peace agreement with FARC, many regions of the country have still been hit by violent clashes between armed groups, while activists and ex-FARC fighters are being murdered in substantial numbers. Because of the coronavirus, 100 communities and ethnic organisations have now asked armed fighters and the government for a ceasefire.

At the end of last year, political life was marked by a wave of protests – and not just in the capital. Hundreds of thousands, from all economic classes and across the political spectrum, took to the streets for weeks. They called for political and social reforms, united by criticism of the government's tough, backward-looking course in many policy areas. If the virus did not exist, Duque would be forced to deal with the scandalous allegations that he had bought votes in his election.

Duque, a technocrat with 13 years of experience at the Inter-American Development Bank, is keeping an eye on the crisis. His bad luck is that the regional heads of government elected in 2019 are always one step ahead of him – above all, Bogotá mayor Claudia López. With a mixture of concerned precautions and no-nonsense instructions, last weekend she tried out a lockdown, which the president did not impose on the entire country until Saturday night. During the political turmoil, however, a surprising alliance arose between arch-enemies such as left-wing presidential candidate Gustavo Petro and right-wing ex-president Álvaro Uribe, both of whom campaigned for quick-acting government measures.

Are curfews and the nation's experiences with epidemics of dengue, the Zika virus and chikungunya fever an adequate preparation to fight the Corona pandemic? The initial contagion curve is steeper than in Italy. But there is even greater cause for concern. The corona pandemic is not only a national public health problem. The issue is rather to avert a multi-faceted humanitarian crisis in a situation where the economy is already in bad shape. In 2020, unemployment has reached 13 per cent, the highest rate in a decade, and the Colombian peso has plummeted due to the drop in raw material prices. It is not possible for the population living in poverty and those working in the informal sector to work remotely, and even if they do, they have no health insurance if they fall ill. This affects women in particular. They have no reserves and often have to pay off high-interest microcredits.

Even the 9.8 million formally employed are currently at risk. Colombian entrepreneurs have reacted in various ways since the government took measures against the spread of the virus, and mass layoffs are not uncommon. Universities and unions are calling for tripartite arbitration committees composed of the state, business associations and unions, but so far to no avail.

Colombia has shut the borders with its neighbouring countries; national and international flights have been cancelled. The closure of the border with Venezuela, which suffered from a glaring economic and social emergency even before the virus broke out, is particularly problematic. Until the border was closed, 60,000 people a day were passing through to obtain food and medicine. Many migrants are living on the streets. In the border regions in particular, they are dependent on temporary aid facilities that provide them with food, accommodation, and medicine. However, many of these national and

international institutions have already ceased operations. Aid organisations report that Venezuelans are already starving.

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