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## **Asean Comprehensive Security in Managing Covid-19 Pandemic In Myanmar**

**Rahmadanu Pradityo**

**Departement of International Relation, FISIP, Universitas Indonesia**

**[rahmadanu.pradityo@gmail.com](mailto:rahmadanu.pradityo@gmail.com)**

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### **Abstract**

The COVID-19 pandemic has globally affected all people's life aspects in every country in the world, including the Southeast Asian region. Not all countries can have stable domestic capabilities and conditions to face COVID-19 as happened in Myanmar. Their domestic situation has been negatively impacted by conflicts between the community and the government. The people of Myanmar are exacerbated by the coup by the Myanmar military against the legitimate government. This has caused the political and security situation in Myanmar to become chaotic because Myanmar people who oppose the military junta stage demonstrations that triggered the military junta to be repressive by arresting the protesters including health workers, teachers, and others. This results in less optimal handling of the COVID-19 pandemic and causes the spread of COVID-19 is getting worse and out of control. Therefore, ASEAN which is a regional organization in South East Asia has decided to take strategic steps to make the spread of the virus remain under control in the region, especially Myanmar. This article describes ASEAN's approach to Myanmar in tackling COVID-19 and providing humanitarian assistance to the Myanmar people who are struggling during an unstable situation. This research uses a comprehensive security concept framework with a qualitative approach. The data are collected using literature studies consisting of books, journal articles, official ASEAN and government websites, and online news sites. The results show that ASEAN has taken an approach with its typical characteristics to cope with COVID-19 amid pressure and criticism from state and non-state actors toward Myanmar.

**Key words:** *COVID-19, Myanmar, ASEAN, Comprehensive Security*

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\*Corresponding author:  
*E-mail Author<sup>1</sup>*

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## INTRODUCTION

The people around the world must struggle to deal with nontraditional security threats, namely the COVID-19 pandemic since the end of 2019. This virus has forced all countries to focus on protecting their communities and dealing with all limitations, thus requiring each relevant party to survive and cope with the impacts of COVID-19. That is why bilateral and multilateral cooperation continues to develop to share help and overcome all kinds of threats amid the global COVID-19 pandemic.

In December 2019, there was a mysterious type of pneumonia that infected many people in Wuhan City, Hubei, China. Its clinical symptoms were similar to flu and viral pneumonia. It was then called Severe Acute Respiratory Syndrome-Related Coronavirus 2 or SARS-CoV-2. The World Health Organization (WHO) mentioned it as COVID-19. Interim findings indicate that various subtypes of COVID-19 have been present in circulating bat populations and other species such as birds, cats, dogs, pigs, rats, horses, and whales before the virus developed to infect human beings (Biswas et al. 2020).

Since the first case in China, the virus has spread around the world rapidly. Based to the WHO (last data update on March 3, 2022), there are 438,968,263 confirmed cases of COVID-19, and 5,969,439 patients died globally. The European region has the most positive confirmed cases with 180,462,972 infected people, followed by the American continent with 147,480,653 cases, while the Southeast Asia region has 55,941,245 cases in third place (WHO 2022).

The data from the ASEAN Briefing (last updated on March 4, 2022) show positive confirmed cases of COVID-19 in Southeast Asian countries. Brunei Darussalam has a total of 76,534 positive confirmed cases and 135 deaths; Cambodia has a total of 131,738 positive confirmed cases, and 3,038 people died; Indonesia has a total of 5,693,702 confirmed cases and 149,596 people died; Laos has a total of 143,710 confirmed cases and 628 people died; Malaysia has a total of 3,528,557 confirmed cases and 33,028 people died; the Philippines has a total of 3,665,747 confirmed cases and 56,770 people died; Singapore has a total of 785,825 confirmed cases and 1,049 people died; Thailand has a total of 2,981,996

confirmed cases and 23,127 people died; Vietnam has a total of 3,885,631 cases and 40,547 people died; and Myanmar has a total of 593,958 confirmed cases and 19,379 people died (Shira 2022).

The first confirmed case of COVID-19 in Myanmar was on March 23, 2020, from some immigrants visiting Myanmar. Then, the government conducted a tight screening at the airport in early January 2020 and sent a plane back to its place on January 31, 2020, because there was one passenger who showed symptoms like COVID-19. The first local transmission in Myanmar occurred on March 27, 2020. The cases are mostly found in Yangon. Next, the government of Myanmar restricted international flights on March 31, 2020, accompanied by a Stay-at-Home policy in the middle of April 2020 (Wai et al. 2021).

In dealing with the COVID-19 pandemic, the government of Myanmar has established a special committee to handle and overcome the crisis which is led by Aung San Suu Kyi in mid-March 2020. On the other hand, on March 31, 2020, U Myint Swe (Vice President of Myanmar) led the Military Task Force separately. This task force was assigned to investigate the cases of COVID-19, conducted tracing, and restricted the press and social media. Since April 19, 2020, Myanmar has imposed a curfew and an order for the people not to leave their houses in Yangon until June 18, 2020. All schools were also closed nationally until June 1, 2020 (CSIS 2020).

Based on the increasing cases in the world and the Southeast Asia region particularly; ASEAN needs to take collective actions in dealing with the COVID-19 pandemic. This is because the countries in Southeast Asia have different economic levels and non-uniform health facilities, such as Myanmar, Laos, and Cambodia. On the one hand, Myanmar still has unstable domestic problems. On the other hand, their limited health facilities pose a challenge in dealing with COVID-19.

Previous studies on the management of COVID-19 in Myanmar can be divided into four groups; Economics, Medicine/Medical, Public Policies, and Human Security. In the Economics category, the resilience of the agricultural system in response to initial disruptions, financial pressures, and the food business system indicate that the food business recovery will take much time due to

the impacts of the Covid-19 pandemic in Myanmar (Boughton et al. 2021). On the other hand, Carl Grundy-Warr & Shaun Lin (2020) argued that the existing or ongoing linkages between economics and politics have established the country's responses to COVID-19 (Grundy-Warr and Lin 2020). Meanwhile, other studies explain the economic impacts of the COVID-19 pandemic in the ASEAN countries by analyzing the economic figures of each country in the first two quarters of 2020 (Chong, Li, and Yip 2021).

In the medical category, some findings show the COVID-19 situations, virus variants, and COVID-19 vaccination coverage in the Southeast Asia region that require vaccine availability (Chu et al. 2022). Another article describes the estimated costs of clinical management of patients infected with COVID-19 based on its severity and the results of resource exploration used to provide better health services in Myanmar (Thant et al. 2021).

Next, in the public policy category, Amul & Yoong (2022) stated that the approaches used by the Southeast Asian countries to overcome COVID-19 refer to their respective experiences (Amul and Yoong 2022). Other studies found multi-dimensional responses to COVID-19 in Malaysia, Myanmar, and Singapore. They are countries that once became the British colony (Wai et al. 2021). There is also the human security category which explains that ASEAN, which borders China, has taken various ways to slow down the spread of COVID-19 (Fauzi and Paiman 2021).

Based on the literature reviews above, there has been no research that examines the relationship of ASEAN member countries in tackling COVID-19 in the region, especially Myanmar. Therefore, this research will try to answer the question "Why does ASEAN help Myanmar in tackling COVID-19 amid pressure from external parties and the instability of Myanmar's domestic situation?" The initial findings reveal that ASEAN continues to help Myanmar overcome the COVID-19 pandemic, even though their domestic conditions are not yet fully good and are still under pressure from foreign parties beyond ASEAN.

This article is divided into five parts.

The first is the introduction which explains the background to the problems. The second section is a conceptual framework that uses comprehensive security in ASEAN. The third part explains the research methods used in this research. Next, there will be some discussions that explain the relationship between ASEAN and Myanmar during the COVID-19 pandemic. The last part is the research conclusions.

## **METHODOLOGY**

The presence of a new priority such as regional integration becomes a foundation for establishing a paradigm that emphasizes group interests as the core. These regional interests are formulated into regional cooperation which leads to self-grouping to fulfill regional and global interests. Political and security cooperation is the best choice to maintain regional stability (Mahendra 2017).

There have been some security concepts, including common security, cooperative security, and comprehensive security. Common security suggests that the relationship among conflicting actors can be changed through a transparent and non-aggressive security policy. This concept aims to eliminate mutual suspicion of other parties to prevent armed conflicts (A'raf 2015). Common security is a way to improve a world dominated by the arms race and move towards an alternative world characterized by states and peoples who recognize common interests in terms of life survival and development of peace (Butfoy 1997).

On the other hand, cooperative security aims to get a clear understanding of security along with the security development that does not only focus on the military sector but also social, economic, and environmental aspects. Cooperative security emphasizes the prevention of conflict among countries and seeks to maintain the status quo among them. Security cooperation can be used to maintain the security of individuals and groups within a country (A'raf 2015). In cooperative security, the countries will work to solve problems together, especially in facing threats and challenges that come from non-state actors (Mihalka 2005).

Meanwhile, comprehensive security discusses more the importance of broadening the understanding of security. This concept

proposes that threats can be directed at a country, authorities, and everything related to human welfare. This shows that comprehensive security is a multidimensional concept, so the countries must have and prepare many security actors to manage the threats properly (A'raf 2015).

The ASEAN Security Community is not a defense community that prioritizes military cooperation, but a comprehensive and cooperative security community that emphasizes cooperation to build communication among the countries and to achieve conflict resolution mechanisms in the Southeast Asia region. The ASEAN Security Community is based on the principle of comprehensive security that is interdependent in the political, economic, and social fields (Saragih 2016). This refers to the Bali Concord II which includes the ASEAN Security Community (ASC). It adopts a comprehensive security approach to build political and security cooperation in Southeast Asia countries. This cooperation includes a mechanism for ASEAN member countries to have the same responsibility in dealing with security threats and demands for stability in the Southeast Asian region, especially in terms of transnational crimes, terrorism, and separatism (Zulkarnain 2014).

In supporting this goal, the ASEAN leaders have agreed to build and realize the ASEAN Political-Security Community (APSC) as one of ASEAN's collective agendas. APSC aims to ensure that all ASEAN member countries can live peacefully side by side and with other actors in the world in a fair, democratic, and harmonious way. The APSC accepts a comprehensive approach to security issues, preventing and combating the use of forces, and peaceful dispute resolution (Riyanto 2021).

ASEAN's comprehensive security concept emphasizes the internal security of individual countries aimed at achieving stability in the region. The security concept combines domestic problems with non-military threats aimed at not being seen as a security alliance and limiting the involvement of foreign intervention in the Southeast Asian region. This encourages ASEAN member states to realize regional resilience by achieving national economic growth and overcoming domestic threats, thereby

strengthening mutual resilience as an organization in the Southeast Asian region (Dewitt 1994).

COVID-19 is a non-traditional threat that jeopardizes the security of a country. Therefore, APSC as the pillar of the ASEAN community must take immediate actions to restore regional stability based on the principles of the ASEAN Charter that all security threats in the Southeast Asian region must be handled collectively (Wai 2020). Thus, ASEAN is obliged to jointly help overcome the COVID-19 pandemic that occurred in the Southeast Asia region, including the response to COVID-19 in Myanmar.

The Comprehensive Security indicator according to Dewitt, namely prioritizes security dialogue as a type of multilateralism. Secondly, the security coverage is comprehensive by not focusing too much on environmental issues, human rights, and democracy. Third, the types of institutions are existing by involving ASEAN dialogue partners. Fourth, the implementation process is inter-governmental (Dewitt 1994).

This research use qualitative research aims to gain an understanding of reality through inductive thinking processes. It encourages the researchers to focus attention on reality or phenomena in the studied contexts (Mardawani 2020). The research data are collected using the documentation technique. The documentation instruments are developed using an analytical approach. The documentation functions as a complement to other data collection techniques such as interviews and observations that have been carried out previously (Anufia and Alhamid 2019). This research uses some sources such as books, scientific articles, official documents, and news articles, especially those from online media (Rijali 2018).

## **DISCUSSION**

### **History of the Relationship between ASEAN and Myanmar**

In the 1980s, ASEAN strengthened cooperation among member countries to maintain peaceful life in the region. ASEAN expanded its regional institutions by adding

new members, namely Brunei Darussalam (January 7, 1984), Vietnam (July 28, 1985), Laos and Myanmar (July 23, 1997), and Cambodia (April 30, 1999) (ASEAN n.d.). The joining of Myanmar into ASEAN invited many disputes and differences of opinion among member countries. This was due to the political conflicts in Myanmar which accumulated in the 1990 General Election won by the National League for Democracy (NLD), but was canceled by the Myanmar military regime called the State Law and Order Restoration Council (SLORC). Therefore, ASEAN adopted a constructive engagement with Myanmar (Frost 1997). The constructive engagement policy was also stated in the Statement of the Chairman of the Fourth ASEAN Regional Forum held in Subang Jaya, Malaysia (Acharya 2012).

The constructive engagement took place from 1988-1998. The ASEAN member countries approached Myanmar by strictly implementing the non-intervention doctrine. Interaction with Myanmar was more of an economic agreement by ASEAN member countries bilaterally (Acharya 2012). Singapore, Malaysia, Thailand, and Indonesia had invested in Myanmar since the early 1990s. Also, Myanmar was subject to sanctions from Western countries. This triggered a closer relationship with ASEAN to reduce Myanmar's economic dependence on China (Haacke 2006).

After Myanmar joined ASEAN, there was an Asian financial crisis that greatly impacted the Southeast Asian region. This crisis gradually shifted ASEAN's non-intervention doctrine which did not only apply to Myanmar, but also to ASEAN's general approaches to solving these severe problems (Acharya 2012). ASEAN, concerning Myanmar, started a new chapter with the implementation of the flexible engagement concept proposed by Surin Pitsuwan (Thai Foreign Minister). This policy allowed ASEAN to comment openly and collectively discussed domestic issues when there were cross-border implications (Haacke 2005). In the end, the concept of flexible engagement was replaced informally by a concept of enhanced interaction (Roberts 2009).

However, ASEAN's approach to Myanmar has not had a significant impact on ASEAN's relations with Myanmar. This can be

seen in the increasing tension between the NLD and the Military Junta government which led to the bloody incident in Depayin on May 30, 2003. This case made Aung San Suu Kyi to be detained again by the Military Junta Government (Haacke 2005). Then, the relationship between ASEAN and Myanmar was getting worse due to the natural disaster of Typhoon Nargis in 2008. At first, Myanmar refused all kinds of humanitarian assistance from overseas Myanmar because foreign parties potentially caused domestic political turmoil (Acharya 2012). Therefore, ASEAN became a facilitator between Myanmar and the international community. ASEAN held an informal meeting of high-ranking ASEAN officials to discuss the problems related to Typhoon Nargis. Surin Pitsuwan (ASEAN's Secretary General) encouraged Myanmar to accept the Save and Rescue Team from ASEAN. It was the first mission of the ASEAN Emergency Rapid Assessment Team (ERAT) (Haacke 2009).

ASEAN's coordinating role in responding to post-disaster humanitarian needs was driving significant changes in Myanmar. The Union Solidarity and Development Party (USDP) carried out political and economic reforms in 2011. They brought a new beginning to Myanmar's role in ASEAN by becoming the leaders in 2014. Political reforms in Myanmar made the NLD, led by Aung San Suu Kyi, could re-participate in Myanmar's political stage (Thuzar 2016).

Myanmar's political stability and security, which had previously been reorganized after the Nargis disaster, were again disrupted due to the Rohingya ethnicity issue. Tensions escalated dramatically in August 2017, leading the Rohingya people to escape to the Bangladesh border. Apart from Bangladesh, the Rohingya people also left for Malaysia, India, Thailand, and Indonesia (Albert and Maizland 2020). Thus, this problem also caused negative impacts on ASEAN-Myanmar relations, given a large number of Rohingya who had moved to other ASEAN member countries (Pramudyani 2019).

### **COVID-19 Management in Myanmar**

Myanmar reported its first case of COVID-19 on March 23, 2020. Due to limited sample testing and patients dying while still

under surveillance, the spread of COVID-19 was predicted to get worse (Wai 2020). Myanmar has a 2,200 km long border with China and a 2,100 km border with Thailand. This increases the risks of spreading the virus because this geographical condition makes the people can easily move from or to the two countries (Kipgen 2020).

There were around 600 critical care beds, including 180 special intensive care unit (ICU) beds in Myanmar with a ratio of 6.7 doctors, and 10 nurses and midwives per 10,000 population in 2018. This situation is caused by the Myanmar government's less attention to their national health system. The Ministry of Health only relied on 2 PCR units located in Yangon. The tools could only test 350 people per day from April 18-30, 2020. This condition was exacerbated by 23 percent of Myanmar's population (12.4 million people) who had one or more chronic health problems, such as cardiovascular, neurological, or respiratory diseases (Wai 2020).

The Myanmar government prepared funds of US\$ 70 million and launched the COVID-19 Comprehensive Relief Plan (CCRP) program on April 28, 2020 (Wai 2020). Previously, the Central Bank of Myanmar lowered national loan interest rates on April 1, 2020. Also, the residence permits and visas were issued digitally (KPMG Global 2020). Myanmar also closed its borders with China and India. The border with Bangladesh was limited only to trade flows. International flights and public gatherings were banned (CSIS 2020). Another problem was the return of migrant workers. A total of 45,498 workers from Myawaddy who returned to Myanmar were currently undergoing quarantine. Thus, a total of 50,731 people were quarantined in mid-April 2020 (Brennan 2020).

Due to the weak health insurance system in Myanmar, there were some areas in the countries that could be covered by the government. Therefore, some cities and villages in Myanmar decided to close and protect themselves independently using manual barricades as happened in Ngwetha Ywar Thit and Yankin City (The Japan Times 2020). Another problem was the return of migrant workers. A total of 45,498 migrant workers from Myawaddy returned to Myanmar and were currently undergoing

quarantine. Thus, a total of 50,731 people were quarantined in mid-April 2020 (Brennan 2020).

The Myanmar government was strongly committed to dealing with the COVID-19 pandemic amid the Myanmar military's activities or the Tatmadaw which continued security and prosecutions in seven ethnic minority states, namely Rakhine, Chin, Northern Shan, and Karen states. This incident made foreign ambassadors push for a ceasefire amid the COVID-19 pandemic (Carter 2020). Around 80 cases of violence were reported in Myanmar, resulting in four people dying. On the other hand, the Arakan Army (Armed Ethnic Group) had declared a month-long ceasefire but was rejected by the Myanmar government.

Another unexpected event during the COVID-19 pandemic was the shooting of a driver named Pyae Sone Win Maung. He was driving a WHO car in Rakhine State on April 20, 2020. Pyae Sone Win Maung was in charge of collecting COVID-19 monitoring samples. However, the Myanmar military and the Arakan Army denied such action (Caturini 2020).

Many problems faced by the government in handling COVID-19 could be separated from the political and security situations. This condition was getting serious after there was a coup against the Myanmar government by the Military Junta on February 1, 2021. It was because there was a fraud in Myanmar's general election in November 2020. The election was won by the NLD led by Aung San Suu Kyi. Therefore, supporters of the NLD and the public conducted protests and demonstrations in Yangon and other cities. However, the Military Junta responded with violence using water cannons, beatings of demonstrators, and the use of live ammunition. By January 2022, 1,350 civilians had died, 11,000 were arrested and another 8,700 were detained (Nachemson and Fishbein 2022).

This condition adversely influenced the handling of COVID-19 in Myanmar, whereas there was a Delta variant of the COVID-19 wave that hit Myanmar in June 2021. Myanmar's health care system was getting weakened, and the Military Junta controlled special medicines and oxygen only for military purposes. Besides, doctors and

nurses were targeted for arrest by the Military Junta for joining the Civil Disobedience Movement (CDM) which opposed the military coup (Kyed 2021).

That is why many hospitals could not operate optimally because many doctors were forced to treat patients secretly. Data from the Ministry of Health and Sports of the Myanmar Military Junta stated that 4,629 people died from COVID-19 since June 2021. Until August 2021, statistics recorded more than 284,000 cases of COVID-19 with 8,000 deaths in Myanmar (CNN Indonesia 2021). In some countries like Indonesia, Malaysia, Philippines, and Myanmar, there were two momentums where COVID-19 cases were increasing significantly, namely in late 2019 to early 2021, and in mid-2021 (Rijal 2021).

### **ASEAN's Responses in Dealing with COVID-19**

Since the outbreak of COVID-19 in China in December 2019, ASEAN has taken specific preparatory steps to deal with this health threat. However, in the January-February 2020 period, ASEAN's responses were getting slower, and there was less synergy with one another. From March-April 2020, ASEAN was again consolidating and utilizing regional mechanisms in the health sector to respond coherently to the impact of the COVID-19 pandemic in the region (Djalante et al. 2020). Efforts made by ASEAN in improving the health sector included sharing information and experiences using dialogue partners through the ASEAN Emergency Operations Center (EOC), directly informing other member countries regarding the presence of suspected/confirmed COVID-19 patients who traveled across countries, carrying out risk management for the International Dissemination of COVID-19 in the Southeast Asia region through ASEAN, increasing cooperation through the ASEAN Risk Assessment and Risk Communication Center, and improving laboratory capacity (Mangku 2021).

On February 19, 2020, the Ministers of Defense from ASEAN member countries met in Hanoi, Vietnam. The meeting resulted in a Joint Statement on Defense Cooperation against Disease Outbreak which stated that

COVID-19 affected the lives of the ASEAN people, economic growth, and regional security and stability. ASEAN must enhance practical cooperation among defense institutions to organize best practice information and sharing activities with external partners bilaterally and multilaterally, including holding a tabletop exercise on public health emergency response by the ASEAN Center of Military Medicine (ACMM). Other efforts were promoting scientific cooperation and enhancing professional relations by the ASEAN Network of Chemical, Biological, and Radiological Defense Experts (ASEAN 2020b).

Then, on April 14, 2020, there was a virtual Special ASEAN Summit which resulted in the Declaration of the Special ASEAN Summit on Coronavirus Disease 2019 (COVID-19). It stated that ASEAN was committed to staying united and increasing awareness of COVID-19 and to working with WHO, ASEAN external partners, and the international community to suppress the spread of the pandemic, protect people's lives and jobs, maintain socio-economic stability and support the ASEAN Community in maintaining sustainable development, inclusive growth, and sticking together with all member countries (ASEAN 2020a). This agreement led to joint solidarity among ASEAN countries in fighting the COVID-19 pandemic at the regional level (Rijal 2021).

There were other strategic steps taken by ASEAN. The leaders of ASEAN countries agreed on five consensus points consisting of an immediate cessation of violence in Myanmar, and all parties must exercise restraint. Second, there must be a constructive dialogue among the parties involved to find a peaceful solution in the interests of the people of Myanmar. Third, the ASEAN Special Envoy from the ASEAN Chair (Brunei Darussalam) facilitated mediation in the dialogue process, assisted by the ASEAN Secretary General. Fourth, ASEAN provided humanitarian assistance through ASEAN's Humanitarian Assistance (AHA) Centre. Fifth, the ASEAN Special Envoy and delegation must visit Myanmar to meet all engaged sides (ASEAN 2021b).

Next, ASEAN held a conference to support AHA in Myanmar on August 18, 2021.

During the meeting, Dato Lim Jock Hoi (Secretary General of ASEAN) emphasized strong support for the Myanmar people with the spirit of "One ASEAN, One Response." The conference resulted in a monetary aid commitment of US\$ 8 million accompanied by the contribution of medical supplies and other equipment to slow down the spread of COVID-19 in Myanmar (ASEAN 2021c).

Singapore assisted Myanmar in the forms of some tools like ventilators, oxygen, hand sanitizers, vaccines, and others (Rijal 2021). Singapore also donated 3,000 COVID-19 test kits (Djalante et al. 2020). Vivian Balakrishnan (Minister of Foreign Affairs of Singapore) stated that Singapore would assist with US\$ 100,000 in support of the ASEAN Coordinating Center for Humanitarian Assistance (Ministry for Foreign Affairs Singapore 2021).

Vietnam provided assistance of US\$ 50,000 to Myanmar to help Myanmar in fighting against COVID-19 in April 2020. Vietnam stated this as solidarity among ASEAN members (Nguyen 2020). Vietnam also provided delivered masks, COVID-19 test kits, medical personnel, medical equipment, ventilators, and others (Rijal 2021).

Thailand is allowed migrant workers from Myanmar to return to Myanmar despite restrictions on the people's movement among countries. From March 21-30, 2020, approximately 40,000 migrant workers in Thailand came back to Myanmar via the borders of Myawaddy, Karen and Tachileik, and Shan states (Htwe 2020). Myanmar also received assistance from Thailand in the form of mobile isolation rooms (Rijal 2021).

Meanwhile, the Philippines were committed to donating COVID-19 vaccines to Myanmar, provided that the vaccines were not used as a condition for civil society to submit to the Military Junta government (Gregorio 2021). On the other hand, President Duterte was willing to accept refugees from Myanmar due to the coup and internal conflicts, including those from the Rohingya ethnic group (Quismorio 2021).

Indonesia assisted US\$ 200,000 as part of humanitarian assistance in the form of KN95 masks, medical gloves, Personal Protective Equipment (PPE), and others (Sekretariat Kabinet Republik Indonesia 2021). The assistance was handed over by the

Indonesian Ambassador to Myanmar, Iza Fadri, to the Director of Operations of the AHA Center Yangon, Sithu Pe Thein, and witnessed by the Deputy Secretary General of the Myanmar Red Cross Society (MRCS), dr. Tin Tun Aung. The first wave of ASEAN support had mostly been received in September 2021. Meanwhile, other assistance from other countries include the Temasek Foundation, India, and Canada (Kemlu RI 2021).

On September 15, 2021, Dato Lim Jock Hoi (Secretary General of ASEAN) assisted US\$1.1 million equivalent to medical needs and equipment through MRCS. The ASEAN Special Envoy to Myanmar stressed that COVID-19 was a common enemy that affected not only socio-economic structures but also human life. The humanitarian assistance to Myanmar was a manifestation of the ASEAN Way which showed ASEAN's joint commitment to helping fellow ASEAN communities when they needed urgent help (ASEAN 2021a).

Those strategic steps were based on the ASEAN Charter in article 1 point 8 which stated ASEAN's objectives to respond effectively to all kinds of threats, transnational crimes, and cross-border challenges (ASEAN 2008). COVID-19 was an infectious disease classified as a non-traditional security threat that could cross borders among countries. This issue became a common concern for all countries in the Southeast Asian region since the occurrence of SARS a couple of years ago (Caballero-Anthony 2008). On the other hand, ASEAN had also shown good cooperation based on shared responsibility to deal with COVID-19 within the framework of the ASEAN Political-Security Community (APSC) (Calvin 2020).

The synergy that puts forward an inclusive development paradigm reflects that ASEAN member countries want to protect their regional cooperation. Increasing social interaction and cooperation will strengthen integration in the Southeast Asian region (Falahi and Nainggolan 2020). The COVID-19 pandemic must be faced together as a regional organization, where all ASEAN member countries must prioritize shared responsibilities.

Based on comprehensive security indicators according to Dewitt (1994), ASEAN prioritizes dialogue between ASEAN member



states in order to overcome COVID-19 in the region which is manifested in the ASEAN Special Summit on COVID-19, ASEAN Defense Ministers' meetings and other meetings. On the other hand, the meeting of leaders of ASEAN member states on Myanmar's domestic situation did not focus on human rights and democracy issues, despite a coup d'état by the military junta. Then, ASEAN prioritizes the involvement of ASEAN member states with inter-governmental processes.

## CONCLUSION

Cooperation among ASEAN member countries has unique characteristics in carrying out its regionalism institutional mechanism. This can be seen from the process of Myanmar's entry into ASEAN which required adjustment and consensus from other members. Although Myanmar's domestic situation has not been stable since 1997, ASEAN together can overcome it by adhering to the ASEAN Way and the concept of comprehensive security. Besides, several global phenomena must be faced together since Myanmar joined, such as the Asian financial crisis, SARS, and others. History shows that ASEAN can solve all of those issues together, including the COVID-19 pandemic.

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