Warnings that hundreds of thousands of Indonesians may already have COVID-19

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Over the past week, as the coronavirus has begun to spread rapidly in historically oppressed regions of the world, including South America, Africa and Asia, medical experts have warned of a potential mass outbreak in Indonesia, South-East Asia’s most populous country.

After weeks of the Indonesian government downplaying the threat, its spokesman on COVID-19, Achmad Yurianto, admitted on Friday that, according to official estimates, between 600,000 and 700,000 people have likely come into contact with individuals infected by the virus. Indicating that the government has no idea of the true extent of infections, Yurianto said that this “high risk” population was scattered across the archipelago.

Since the beginning of the week, new cases have been reported in South Sumatra and West Nusa Tenggara, along with North Maluku, Jambi and Papua, on top of infections in Jakarta and Bali.

In comments cited by the Australian yesterday, Achmad Yurianto, an Essex University professor of applied mathematics, stated that, on current trends, half the Indonesian population, or some 135 million people, will be infected by mid-May. The projection, however, is based on the government carrying out a lockdown of Jakarta, the capital and apparent epicentre of the pandemic. No lockdown has yet been ordered. The warnings indicate that millions could die.

Already Indonesia has one of the highest mortality rates per confirmed case of any country in the world. As of yesterday, 55 people had died as a result of the virus, under conditions in which just 686 infections have been identified through testing. This means that over eight percent of confirmed cases have resulted in deaths, approaching the level of Italy, which is thus far the country that has been hardest hit by the global pandemic.

In Indonesia, fewer than 3,000 tests have been carried out. The high mortality rate among confirmed cases likely means that only those who are severely affected by the disease and who are approaching a critical medical condition are being treated. In other words, thousands of others are likely carrying the virus without any prospect of being examined.

Over the past week, horrific videos have circulated widely on social media of people collapsing and dying in public streets with symptoms consistent with COVID-19.

The reality was demonstrated by the death of 72-year-old French tourist Gerard Philippe Follet in Bali on March 15. Follet was found slumped over his motorcycle in Denpasar and unresponsive. In front of dozens of tourists and locals, he briefly appeared to regain consciousness before dying suddenly.

For over a week, Balinese authorities claimed that Follet’s death had been the result of an underlying heart condition combined with excessive alcohol consumption. This was despite the fact that witnesses to his death had immediately reported that he displayed symptoms consistent with coronavirus. Only several days ago did officials acknowledge that Follet died as a result of COVID-19. This means that any real prospect of contact tracing those with whom he had interacted and those who sought to treat him has been lost.

For the past month, President Joko Widodo’s administration has done nothing to expand access to testing. This week, China donated 125,000 testing kits, which are beginning to be rolled-out around the country. Given that the virus has likely already spread widely, the kits will rapidly be exhausted.

There are also warnings that the health system will not be able to cope with an influx of cases. Already, hospitals appear to be overwhelmed, leading the government to establish a make-shift medical centre on the grounds of the athlete’s village from the 2018 Asian games. Hospitals have reported shortages of personal protective equipment, including face masks.

The government has belatedly purchased 105,000
pieces of protective equipment and test kits from Singapore. However, doctors’ and nurses’ representatives warn that the supplies will be insufficient.

Indonesian Doctors Association spokesman Halik Malik told the media this week: “In Italy, 4,800 health workers were infected by coronavirus but in Indonesia we can’t afford a situation like that.”

Malik warned: “The system and the resources we have, in terms of funds, equipment and human resources, can’t handle an explosion of cases. We won’t be able to handle a worst-case scenario.” At least eight of the 55 confirmed deaths are doctors and nurses.

The under-resourced hospitals have been subjected to years of funding cuts, amid a rapid rise in Indonesia’s population.

Widodo’s government has embarked upon further pro-business policies since its victory in last year’s national election, including tax breaks for the wealthy and for international investors, privatisations and greater undermining of environment and safety regulations. This program has encountered growing opposition, including mass student protests late last year.

The class character of the government’s response to the pandemic has been graphically demonstrated by its refusal to institute a lockdown of Jakarta, which has a population of almost 10 million.

While office workers have been encouraged to work from home and the wealthiest layers of the population have reportedly fled the city, maids, nannies, vendors and other sections of the working class and the oppressed have been forced to continue working. Local authorities have announced a “state of emergency,” but parts of the city’s public transport network are continuing to operate. Moreover, there are no restrictions on people travelling in and out of the city, threatening to spread infections to provinces across the country.

An article in the Jakarta Post yesterday, which pointed to the lax measures, nervously asked: “Will Indonesia be Southeast Asia’s Italy?”

The government’s hostility to a lockdown is driven solely by fears that it would dramatically impact on corporate profits, including those of the many transnational corporations with operational bases in Jakarta.

Social anger has erupted on social media. Thousands of workers and young people have denounced the government’s decision to “fast-track” testing for all members of the national parliament, under conditions in which ordinary people have been denied any prospect of a medical examination, much less treatment.

As is the case internationally, the criminal response of the Widodo administration to the disaster is inextricably tied to the massive growth of social inequality and the dominance of the corporate and financial elite over every aspect of society. In 2017, Oxfam ranked Indonesia as the sixth-most unequal country in the world. In a country of some 264 million people, the four richest individuals have a combined wealth greater than the poorest 100 million.

Meanwhile, the pandemic is spreading throughout the region. In Malaysia, there were 1,518 confirmed cases as of Monday, the majority of them linked to a mass religious gathering late last month. Its government has implemented a partial lockdown, including the closure of the border with Singapore, and has deployed the military to enforce restrictions on internal movement.

As a result, residents in Singapore are becoming fearful of a potential food shortage. The city-state’s food self-sufficiency rate is less than 10 percent, and Malaysia is one of its key sources of imports. Long queues have begun to form at Singapore supermarkets.

In Thailand, the Public Health Ministry announced 121 new coronavirus infections on Monday, raising the total to 721 cases. Soaring by a rate of 33 percent daily, the number of infections is predicted to reach about 350,000 by April 15, with 7,000 deaths. By then the number of critically ill people would be an estimated 17,000, enough to exceed Thailand’s medical resources.

In the Philippines, more than 670 Manila health workers were quarantined over fears they had been exposed to the virus, which placed additional strain on medical wards. Across the country, two doctors have died from the virus. “It is painful for us to hear about their deaths. This is the reality we face. We are risking our lives as we fulfil our duties,” Maria Theresa Depano, a health staff at a hospital outside Metro Manila, told the Guardian.