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Government Management during COVID-19 Outbreak: A Pandemic Public Support and Response Study

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Abstract: An unidentified strain of virus called Coronavirus 2019 or COVID-19 posed threats of global and local transmissions in the first quarter of the year 2020. Due to rapid local transmissions in the Philippines, the government declared a 30-day community quarantine period with specific health protocols in the country. The current pandemic poses serious threat to the lives of the people and affects the daily living of everyone. Hence, it is important to understand the current situation of the public to address challenges and future health policies related to a massive outbreak. In this study, the researchers attempts to analyze the pandemic public support and response in view of the health policies implemented by the government during COVID-19 community quarantine period. This paper utilized and adapted Paek et al.'s framework (2018) to analyze the public's awareness, knowledge, level of trust and support. Three hundred sixty eight (368) respondents participated in this research through convenience sampling. Results showed that the public varies in support from national to local government units' response. Furthermore, the researchers recommend the importance of public forum and consultation in health policy planning.

Key Words: Government Management; Health Policies; Public Support; Public Awareness; Pandemic

1. INTRODUCTION

Previous studies showed that the participation of public during community health concerns are helpful to address the needs of the people (Braunack-Mayer, 2010; Paek et al., 2008; Shaerer et al., 2020). The government has the duty to properly set policies that aim to alleviate the impact of an outbreak to frontline community health professionals and the public (Malm et al., 2008). Pandemics has a considerable impact to marginalized poor citizens and the vulnerable ones. (Armor & Taylor, 2002; Strosberg, 2006). Overlapping populations of the nation's citizens, which include public-housing residents, single parent families and low-income households, should be properly supported by public health policies during pandemics (Bouye et al., 2009). Hence, it is important to assess the proper distribution of resources especially when scarce in supply. Countries should have a rapid preparedness or public health management measures to address the risk of

pandemic transmission and should follow appropriate decision models (Shearer et al., 2020). Isolation measures and efforts to delay the local transmission is only possible through systematic agencies participation and public cooperation (Bedford et al., 2020).

Coronaviruses (CoVs) are lethal viruses that could cause human respiratory infections (WHO, 2020). The effect is similar with mammals and birds like bats, cows and pigs. In the past years, several coronaviruses caused the outbreaks around the world. Some of these were Severe Acute Respiratory Syndrome (SARS), Middle Eastern Respiratory Syndrome (MERS) and the recently unidentified type known as Coronavirus 2019 (COVID-19). This COVID-19 strain of coronavirus was yet to be identified since it only emerged in December 2019 and originated in Wuhan, China. As of March 30, 2020 these are the statistics: the total of confirmed cases worldwide is 724,201; the recovered cases are 152,071 and; the deaths are 34,026. United States, Italy, China, Spain, Germany, France, Iran, United Kingdom and Switzerland have the highest number of cases based on World Health Organization Situation Report 69 (2020). Based on statistics per region, COVID-19 has been drastically increasing across the globe until the second week of March 2020.

Specifically, in the Philippines, there are 1,546 confirmed cases; 42 recovered patients and; 78 deaths nationwide. The percentage of death or the mortality ration is 5% in the Philippines, which is the second highest next to Indonesia's 8%. While, the recovery ratio is 3% only which is second bottom country before East Timor, Laos and Myanmar with 0%. It is noteworthy that the number of cases rapidly increases every day and the level of transmission is significantly high compared to SARS and MERS. Accordingly, the response of the National Government, Department of Health (DOH) and Local Government Units (LGU), which include city or municipal and barangay offices, are important. In view of these, the response and support of public are important considerations in making public health policies in the course of outbreak control (Braunack-Mayer et al., 2010).

In this study, the researchers aim to analyze the public support and response in view of the government public health policies implemented in the locality. The researchers aim to know the following specifically:

(1) What is the knowledge of the public about COVID-19 pandemic?
(2) How does the public support the pandemic community policies in the following levels:
    a. National Government
    b. Department of Health
    c. City or Municipal Units
    d. Barangay Units
(3) How does the public respond with specific pandemic policies?

Primarily, this research will benefit policy makers in respect to handling emergency healthy measures that might transpire in the future. Moreover, future researchers, students, educators in policy planning and public management might get insightful data from this research.

2. METHODOLOGY

This study utilized a quantitative research design to analyze the public support and response to the government's public health policies during COVID-19 outbreak. The respondents of this study is comprised of 368 adults who are 18 and older, residing in selected regions of Luzon Island in the Philippines during COVID-19 outbreak and declaration of community quarantine policies. The respondents are situated from selected regions only namely: National Capital Region (NCR); Region 1, Region 2, Region 3, Region IV-A. The researchers initially intended to gather data from all regions in Luzon, however, the current situation pose challenges to gather data. Convenience sampling was utilized to gather data through online survey questionnaires from March 23 until March 30, 2020 in Luzon, Philippines. The limitation of convenience sampling is that the sample may not representative of the general population in the target location.

This study adapted Paek et al.'s framework on public support (2018). Some items were modified to suit the objectives of this study. Pilot testing was conducted with 40 respondents. Then, the validity and reliability of the questionnaire was tested using Cronbach's Alpha Coefficient to assure that the instrument will address specific constructs.

During data analysis, the researchers analyzed data using descriptive and inferential statistics.

3. RESULTS AND DISCUSSION

3.1 Awareness and Knowledge about COVID-19

The respondents were asked about their basic knowledge regarding COVID-19, which includes its nature and mode of transmission. To analyze the respondents' level of knowledge scale about COVID-19, results showed that four out of five questions correctly (M = 4.12). A majority of 82.4% answered correctly about the basic knowledge in COVID-19. However, three out of five respondents (54.8%) seemed to be less knowledgeable that taking medicine will not protect them from being infected with the virus. Using correlational analysis, results showed that respondents from the National Capital Region (NCR) with higher educational attainment, working in professional industry have higher level of knowledge about its nature and possible transmission. While, respondents from rural regions, in the services industry, below average income and low educational background are less knowledgeable about the virus' nature. That being so, it is alarming that people from the services industry who are more vulnerable in transmission are less informed about its nature. The findings suggest that the public health agencies should exhaust resources to inform the public regarding the virus especially in rural municipalities. Specifically, a close cooperation and guidelines should be implemented more importantly to people in the services industry since a direct contact is frequent and possible in this type of job.

3.2 Levels of Susceptibility

The public's health risk susceptibility creates an impact to the extent they will protect themselves from a public health threat (Armor and Taylor, 2002). With this, it is important to understand the optimistic bias of the public during pandemics. Results showed that about 61 % of the respondents think that they are less vulnerable, about 16 % of the respondents were vulnerable as a normal Filipino and 23 % of the respondents believe that they are more vulnerable with COVID-19. Furthermore, respondents with above average income, with high educational background regular employees/ freelance specialists, in professional industry are more positive that they are less likely to be infected with the virus. On the other hand, respondents with below average income, with low educational background, contractual, in production industry believe that they more vulnerable to be infected. Although other key indicators might affect the risk perceptions of the less vulnerable groups, it is noteworthy that the public from the lower level of societal status should be given more attention and support economically (Paek et al., 2008; Strosberg, 2006). Through this, the people from low income families will be more religious in following the public health policies imposed in their communities.

3.2 Levels of Trust in Government Management

Results showed that half of the respondents generally trust the National Government (50%), Department of Health (53%), City/Municipal (51%) and Barangay Units (50%). In view of the other key dimensions like confidence, openness, benevolence and competence, results vary:

(1) Confidence. Half of the respondents are self-assured with the policies of the Department of Health (51%). While, they are less assured with National Government (46%), City / Municipal Units (48%) and Barangay Units (45%)

(2) Openness. Half of the respondents think that the Department of Health (55%) and City/Municipal Units (53%) give right information regarding COVID-19. While, the public thinks that the National Government (49%) and Barangay Units (47%) are not giving right information.

(3) Benevolence. Half of the respondents believe that all government units concerning COVID-19 work for their own interest and safety.

(4) Competence. Half of the respondents believe that the Department of Health (52%) is capable of handling COVID-19. While, they believe that the National Government, City/Municipal and Barangay Units are not capable of handling the outbreak.

The level of public trust and other dimensions does not have significant differences across age, location, income, industry and education. Consequently, it reflects a relatively assured public with the Department of Health policies but skeptical with the other government units (Paek et al., 2016). The regard of the public to professional doctors, nurses and healthcare specialists is high during these times of public health concerns. Similarly, they urge to prepare the frontline health professionals are suggested through the following (Corless et al., 2018):

(1) Establishing an organized national network from community to clinic to laboratories systems;
(2) Facilitate a rapid communication network/ system through the health community;
(3) Develop a curriculum for infectious diseases in the academe or trainings;
(4) Develop a strategic plan to allocate medical resources during outbreaks.

3.4 Levels of Support for Government Pandemic Policies

Results showed that majority of the respondents are in favor of the following:

(1) Giving out medicines or vaccines (64%);
(2) Using the National Guards or police to prevent movement (64%);
(3) Setting priorities to determine who gets limited supplies of vaccines or drugs (64%);
(4) Giving instructions to local government units or LGUs (65%);
(5) Closing down airports, shutting down railroads, and limiting car traffic (66%) and;
(6) Giving proper actions with people not following the government COVID-19 protocols (67%).

Furthermore, the general public is more favorable of the following:

(7) Encouraging people to work from home or not go to work when possible between cities and states (70%);
(8) Closing schools, stores, places of worship and other places where people gather (70%).
(9) Closing the borders to visitors from countries with outbreaks of COVID-19 (71%);
(10) Quarantining those who might have been exposed (72%).

The success of health policies implementation is noteworthy to be also considered from the engagement of the public (Braunack-Mayer et al., 2010; Paek et al., 2008). On the other hand, respondents oppose helping people give health care to sick family members at home rather than having them be in the hospital (49%) and strongly oppose offering people vaccines or drugs that are not fully approved (34%). Scott et al. (2020) agrees on carefully securing access to pharmaceutical supplies to address the needs of global health pandemics. Interestingly, the result across demographics does not have significant differences and pose a similar trend. Thus, the public seemed to be divided in their views related to the health protocols but in general favorable to most of the measures.

4. CONCLUSIONS

The urgent and efficient government management is critical during massive outbreaks. In case of the Philippines, this research critically analyzed and reported the public support and response during COVID-19 outbreak. Four key findings of the study are noteworthy in government management during pandemics. First, half of the respondents trust various agencies to manage a massive outbreak like COVID-19. Although, it is conspicuous that the public's response vary in terms of various dimensions like confidence, openness, benevolence and capacity. The frontline community health workers are the most trusted during these challenging health concerns as represented by Department of Health in the Philippines.

Second, the study recommends a more systematic, urgent and visible information dissemination and health support. Health policies should boost the public's knowledge regarding the

virus' nature and mode of transmission. The notion that 'medicines will protect me from the virus' should be addressed promptly through massive public health campaign that would reach the marginalized groups and rural areas.

Third, the National Government and Local Government Units including City/Municipal and Barangay units should provide sufficient economic living assistance to citizens affected by the community quarantine, especially to the citizens with higher risks. Based on the findings, the people who believe that they are more vulnerable to the disease are in the groups of individuals with below average income, with low educational background, with contractual employment and in production industry. Therefore, these people have higher risk of being exposed to diseases due to their socio-economic status.

Lastly, public forums and community consultations are crucial in holistic public health policies to prevent the community to suffer more challenges and conflicts upon the implementation of health measures. Community quarantine during pandemics is difficult but workable if the participation of everyone exists, specially the public.

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