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Nuzulul Kusuma Putri, S.KM., M.Kes
Editor-In-Chief

Managing Health System and Health Security During COVID-19 Pandemic

We dedicated this special issue of COVID-19 to support the urgency of implementing the resilience approach of the health system. Health system resilience is a concept that is predicted by experts as a surefire solution to prepare the country to face various uncertain health situations. COVID-19 pandemic is not the first outbreak that has attacked the world, and it is also likely not the last outbreak that will strike.

Our commentary article in this edition highlights the importance of building a health system resilience. The article presents how health system resilience plays a role in previous global health problems such as Ebola, SARS-CoV, H5N1 Avian Influenza, and H1N1 influenza. Since the concept of health system resilience is very context-dependent, our authors argue that the health resilience system is needed in the context of the COVID-19 pandemic.

What happened in Indonesia?

The concept of the health resilience system begins by explaining the capacity of health workers and the readiness of the community in overcoming any health problems (Kruk *et al.*, 2015). In this edition, the articles written by Yanti *et al.* (2020) and Setyawan and Lestari (2020) explained the readiness of the Indonesia community to overcome the COVID-19 pandemic.

Physical distancing or previously called social distancing by the World Health Organization (WHO) is one of the health protocols used in the prevention of COVID-19. Yanti *et al.* (2020) underlined how knowledge, attitude, and behavior of Indonesian carried out physical distancing to prevent COVID-19 transmission. Their study showed that Indonesian already have good knowledge, attitude, and behavior in carrying out social distancing. Unfortunately, this promising condition seems not occurred for other health protocols, especially that interact with human productivity.

The health protocols that bring any impact on socioeconomic sustainability, such as stay-at-home policy (which includes work from home, study from home, and pray from home in Indonesia setting) are predicted could not be implemented well (Setyawan and Lestari, 2020). The commentary article in this edition highlighted why this policy is vulnerable to failure. The basic idea to engage the targetted population is by considering whether the economic and social impact will be more valuable than just the health impact. At the end, rewards and referent power might be needed in implementing policies that have sizeable socioeconomic implications. For those reasons, we expect further research should be able to explain how people perceive the value of health policy.

An original research article in this edition also showed the weakness of Indonesia health system resilience. Misinformation arose during the COVID-19 pandemic and hindered COVID-19's handling strategy in Indonesia (Nasir, Baequni and Nurmansyah, 2020). Nasir, Baequni and Nurmansyah (2020) identified that myths in COVID-19 prevention and the debate about COVID-19 as a biological weapon are the center of misinformation in Indonesia. The hip of digitalization should be able to use as an effective communication channel for health

policy makers and the public. Unfortunately, data transparency about the COVID-19 outbreak is perceived as still weak (Farizi and Harmawan, 2020). It probably becomes the main reason why misinformation is problematic during the pandemic. Some pandemics have happened a long time ago, but the COVID19 pandemic became more dangerous due to the onslaught of misinformation. Hence, the health system resilience strategy should also be able to cover up infodemic issues.

Cross-border perspectives

Other than discussing the COVID-10 pandemic in the Indonesia context, this issue also discusses what is happening abroad. An article from Pathirathna et al. (2020) compared the readiness of Australia, Singapore, United Kingdom, and Sri Lanka in tackling COVID-19 pandemics. This article used the interim guidelines by the WHO concerning the first two phases of the disease transmission scenario as a basis for comparison. This article showed that the response of each country is varied. With respect to the gap of the country's economic conditions, the preparedness and emergency response given in dealing with COVID-19 is also different. For instance, although both the United Kingdom and Singapore are included in developed countries, Singapore has more responsive mechanisms than the United Kingdom.

Given that COVID-19 has the characteristics of transmission, which are very fast and do not recognize national borders, Pathirathna et al. (2020) concluded that global political and health authorities need much more robust mechanisms for preparedness, response and coordination of contagious diseases with similar nature. Thus, sporadic transmission can also be prevented by sporadic prevention as well.

Moreover, the COVID-19 pandemic also shows the importance of collaboration between the fields of science. Suryaatmadja and Maulani (2020) explained how space technology can help the world through this pandemic. Four domains of space technology have the potential to assist the world in carrying out more effective case tracing. The manual method of contact tracing that commonly conducted by health personnel by meeting the population personally can be switched to a safer and precise method by using space technology. More advantages of space technology is explained in the article.

Finally, we send our best appreciation for all authors, reviewers, and editors who have contributed to this special issue. We strongly believe that scientific discussion on the health system and health security will support the health and other discipline scientists to combat the disease.

Cultivate. Collaborate. Connect.

Surabaya, 17th June 2020

Nuzulul Kusuma Putri, S.KM., M.Kes
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