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**Declaration**

I declare that this assignment is my own work and does not involve plagiarism or collusion. The sources of other people's work have been appropriately referenced, failing which I am willing to accept the necessary disciplinary action(s) to be taken against me.

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## **Abstract**

This is a comparative analytical study to see if Singapore had successfully managed the COVID-19 virus outbreak, as compared to other countries. This paper has chosen to compare Singapore with the USA in order to obtain a more holistic and unbiased view of Singapore's management of the virus. This paper seeks to find out the reasons for such a great disparity in the ways each country has chosen to deal with the virus, specifically the differing ideologies that each country adopts (Communitarianism - Singapore, Libertarianism - USA) and the outcomes of dealing with the virus differently, overall evaluating the success of each strategy used by these countries.

## **1. Introduction**

### **1.1 General Background**

Coronavirus disease (COVID-19) is an infectious disease caused by a newly discovered coronavirus. Most people infected with the COVID-19 virus will experience mild to moderate respiratory illness and can recover without requiring special treatment. Older people, and those with underlying medical problems like cardiovascular disease, diabetes, chronic respiratory disease, and cancer are more likely to develop serious illness.

On 23 January 2020, the first COVID-19 case was reported in Singapore, by a 66 year old male Chinese national from Wuhan who arrived in Singapore on 20 January 2020. Cases have increased exponentially and citizens were thrown into a panic state. The Singapore Government has implemented different policies to safeguard the livelihoods of every Singaporean.

### **1.2 Rationale**

This research seeks to find out:

- How successful was Singapore in managing COVID-19 as compared to the United States of America, given specific success indicators.
- Reasons for the various successes and failures of either nation.

### **1.3 Research Questions**

- 1) To what extent has Singapore successfully managed the spread of the COVID-19 virus as compared to the USA.
- 2) What are the factors that play a part in influencing disease management?
  - a) Ideology
  - b) Societal Values
- 3) To what extent does governance impact a nation's disease management?

### **1.4 Thesis Statement**

How far did communitarianism contribute to Singapore's success in managing the COVID-19 virus?

### **1.5 Scope of research**

This research will study how Singapore and the USA had reacted to the COVID-19 pandemic one year from the time the World Health Organisation (WHO) declared it a pandemic (11 March 2020 - 11 March 2021)

## **1.6 Significance of research**

This research paper aims to understand if Singapore was successful in dealing with the COVID-19 virus as compared to other countries and in what way was she successful.

## **1.7 Limitations**

- 1) COVID-19 happened in 2020, therefore, there may not have been any scholarly articles published, many news articles and Government media would therefore have to be used in analysis.
- 2) Articles used may contain an inherent bias towards or against how countries managed COVID-19. Cross Referencing with other articles on the same issue would be necessary.
- 3) Government data may not be fully accessible, depending on the transparency of the Government of each country.
- 4) The change in US presidency would affect the attitude to which the USA adopted regarding COVID-19.

## **2 Literature Review**

### **2.1 Quantifying Success**

The success of countries in coping with the COVID-19 pandemic can be broadly defined as the general decrease in the number of COVID-19 cases in the country. However, it is crucial to understand exactly what success can be quantified as for the purpose of this research paper. Success can hence be defined as the following:

- A general decrease in the number of COVID-19 cases from 11 March 2020 to 11 March 2021.
- How prepared the Governments of respective countries were in terms of medical response to combat COVID-19.
- Social stability and cohesion as seen in the response of the citizens to the various measures implemented by the Government to curb the spread of COVID-19.

### **2.2 Communitarianism**

Communitarianism is the idea that human identities are largely shaped by different kinds of constitutive communities (or social relations) and that this conception of human nature should inform our moral and political judgments as well as policies and institutions. As a result, it is understood in communitarian societies that the good of the community should always be prioritized over individual benefits. Communitarian thinking allows a society to progress steadily because of how individuals would work for the betterment of everyone, perhaps even compromising personal gains. Individuals would strive for the goals set by authority, also following the rules and regulations set by them. This philosophical ideology is often seen in Asian countries as compared to American countries, for the sake of this research, the USA.

### **2.3 Libertarianism**

Libertarianism stresses the needs of the individual over the needs of the group as a whole. In this type of culture, people are seen as independent and autonomous. Social behavior tends to be dictated by the attitudes and preferences of individuals. As a result, individuals have the individualistic mindset that they can disobey authority if they think that authority is infringing their personal benefits or freedoms.

### **2.4 Singaporean Culture and Policies**

Singapore started out as a Malay kampong (a Malaysian enclosure or village.) in the 1800s and hence has since developed into a 1st World Country with its traditional values still deeply entrenched within the society.

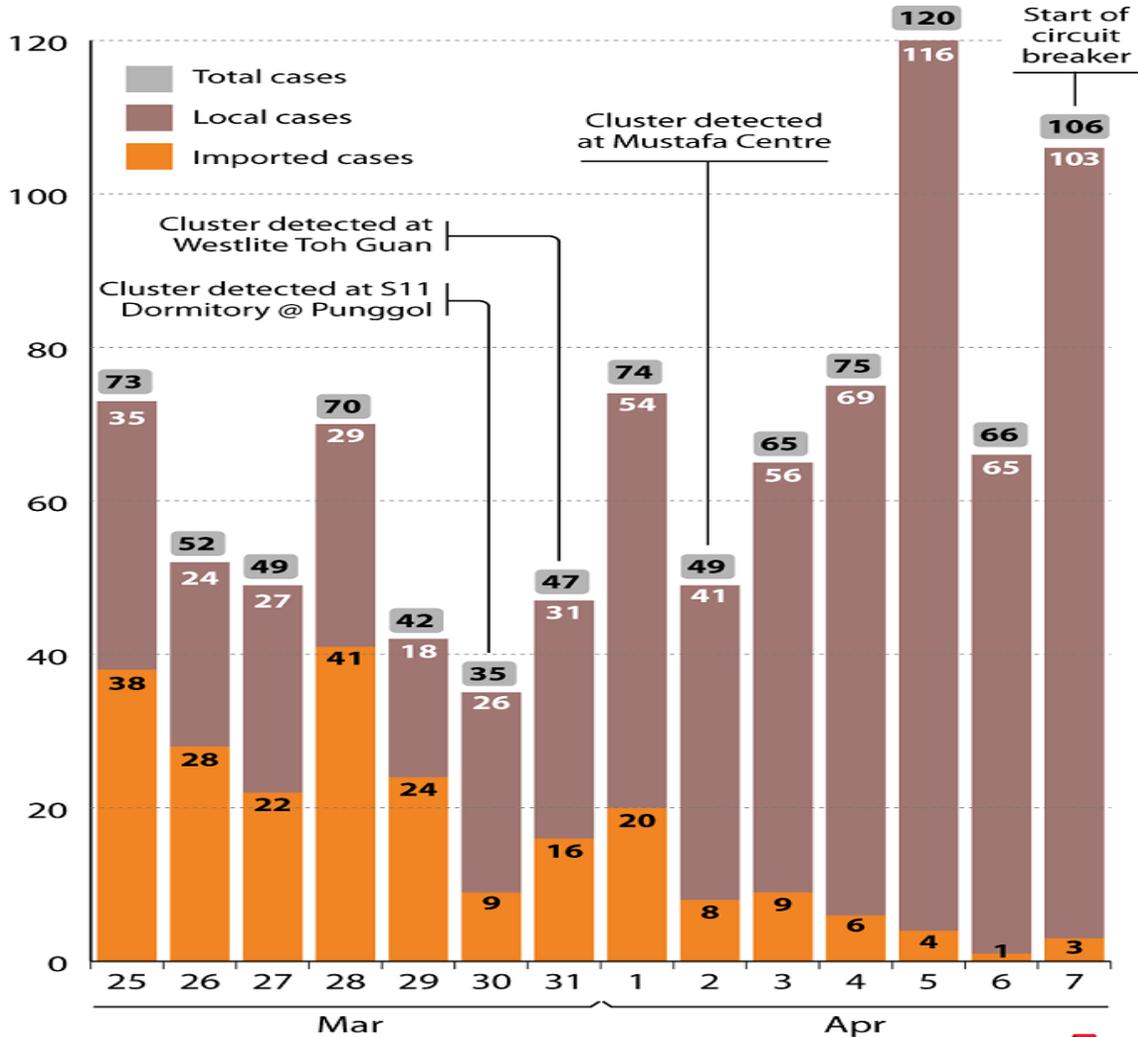
The late Mr Lee Kuan Yew established Singapore as a communitarian society when he founded the dominant People's Action Party in 1959. Such an ideology would be an extension of the already in place Confucianism which was widely accepted by Singaporeans in the 1960s. As a result, a communitarian ideology was also widely accepted by Singaporeans. Singaporeans therefore pride their community with importance over themselves. Such an acceptance of communitarianism may also be due to the fact that Singapore is a multi-racial, multi-religious society, often looked upon for how people of different races and cultures are able to harmoniously live together. A communitarian ideology therefore stems from such a unique Singaporean culture, which compels each individual of the Singaporean society to place the good of society over personal gains.

## **2.5 Pragmatic Communitarianism in Singapore**

Singapore's policies and style of governance is greatly based on "pragmatism". Being a small island country, Singapore adopted this style of governance in order to safeguard her future and protect herself from her neighbouring countries. To thrive in the global economy, a small country would have to stand united, which made communitarianism a rather pragmatic approach for the Government in the implementation of its policies. For the timeline of this research study, I would go on to acquire a deeper understanding of Singapore's pragmatic communitarianism and how the Singaporean Government used pragmatic communitarianism to deal with the COVID-19 pandemic.

## 2.5.1 Pre COVID-19 Circuit-Breaker Period (23 January2020 - 7 April 2020)

### COVID-19 IN SINGAPORE: 2 WEEKS BEFORE CIRCUIT BREAKER



Infographic by Rafa Estrada

Source: Ministry of Health



#### 2.5.1.1 Mask wearing

The General Directive from the Singapore Government towards wearing a mask during the early stages of COVID-19 in Singapore, as issued by the World Health Organisation (WHO), was to “only wear masks if you are sick or feeling unwell, or worn to “see a doctor”. Government leaders pointed to this in the wake of signs of panic buying of surgical masks, with more than five million masks released to retailers “snapped up in hours” each time a batch of these were put up for sale over the past nine days, Minister for National Development Lawrence Wong said at a news conference. However, after more scientific research on COVID-19 made by the WHO,

mask wearing policies changed upon discovery that COVID-19 was transmitted by droplets when a person coughs or sneezes. The data also showed that some people can test positive for COVID-19 one to three days before they actually develop symptoms, meaning that an infected person might not display symptoms, but their respiratory droplets still remain infectious. This resulted in a short term shortage of masks, as Singaporeans turned to panic buying in fear of the virus, doing anything within their means to protect themselves as well as their loved ones. Minister for Trade and Industry Chan Chun Sing has stated that "We must all act in unison and not jeopardise the entire system by doing things that we think might benefit and protect ourselves, to the detriment of everyone else in society." From this, it is obvious that Singapore is fighting the COVID-19 virus in lines with its communitarian ideology, to ensure that there would be sufficient supplies of masks, without the need to tap into National Reserves.

### **2.5.1.2 Pandemic management protocols**

Singapore has learnt her lesson from the SARS outbreak in 2003, and since then, has set up multi-ministry task forces to work together should another outbreak occur. These ministries include: Health, Trade, Communications, Transport, Manpower, Education, etc. Since the SARS outbreak, the Singapore Government has also set up a disease outbreak response plan, following closely to that of the World Health Organisation (WHO), colour coding it "Disease Outbreak Response System Condition" (DORSCON). Such a response system helped raise public awareness among Singaporeans with regards to how able our healthcare system was equipped to fight the virus outbreak. Singapore had also established strict border controls, to control the influx of foreign cases that might place a further strain on her healthcare system. Singapore had also adopted an array of measures to prevent sick workers (potentially COVID-19 cases) from transmitting the virus to the rest of the community. This was done through the Leave Of Absence (LOA), Stay Home Notice (SHN), as well as the Quarantine Order (QO). LOA precautionary measure to prevent the possible transmission of infections. Those on LOA should stay at home, minimise contact with other people in the home, and monitor their health closely. They may leave home briefly to get meals and necessities.

### **2.5.2 Circuit Breaker Period**

Singapore swiftly implemented its "Circuit Breaker" from 7 April 2020 to 1 June 2020 in order to stamp out the COVID-19 virus spread, where citizens were not permitted to gather with family or friends in their respective houses or in public spaces. It is also stated in the COVID-19 (Temporary Measures) Act 2020, that Singaporeans are required to stay at home except to buy essential goods, for healthcare emergencies, to exercise in open spaces alone, etc.



Singapore had also used its media to teach Singaporeans how to protect themselves from the COVID-19 virus, showing the Government's holistic approach in dealing with the COVID-19 virus, empowering citizens to take care of themselves.

## **2.6 Provision of medical supplies in Singapore**

At the start of the pandemic, while Singapore did have sufficient medical supplies to support frontline hospital staff, there were insufficient masks for the public, which had resulted in the prices of masks increasing to as high as \$50 per box.

### **2.6.1 Provision of vaccines**

According to the Singapore Government (via Gov.sg, official Government website), “Singapore became the first nation in Asia to receive doses of the Pfizer-BioNTech COVID-19 vaccine on 21 December 2020, thanks to a coordinated approach between the Government, the scientific community and industry partners. Soon after the COVID-19 outbreak began, the wheels in Singapore’s efforts to secure vaccines began turning as the Government began closely monitoring the global development of vaccines.” One other thing to note is how the Government is rapidly rolling out these vaccines to the ordinary Singaporean, by providing vaccinations free of charge. Ample quantities of vaccines allow every Singaporean to get vaccinated promptly, helping the population fight against COVID-19

### **2.6.2 Provision of Personal Protection Equipment and masks**

At the start of the pandemic, when the Singapore Government activated over 600 Public Health Preparedness Clinics (PHPCs) across the island. According to The StraitsTimes (Goh, T. (2020, February 19)), “Dr Tan Teck Jack, medical director of Northeast Medical Group, which has nine clinics in the network, said there was an “acute shortage” of PPE”. However, recognising the severity of this issue, the Government responded by saying “GPs play a critical role in detecting and managing patients at the front line. MOH will continue to work with our GP partners to ensure they have sufficient supplies of PPE to manage suspect cases”, following, the Government with ST Logistics, managed to provide these PHPCs with at least two weeks worth of PPEs, actively supporting them in crisis management.

## **2.7 Singapore’s COVID-19 management in dormitories**

Around 200,000 migrant workers are residing in Singapore with work permits as of April 2020, according to Minister of Manpower, Josephine Teo. Many of these foreign workers are from less wealthy nations like India and Bangladesh and are employed in low-wage jobs like construction, shipyard work and cleaning. These foreign workers are typically housed in dorms, where each room is shared by up to 12 men in double decker beds. Migrant worker COVID cases have been on the rise and have totalled 152,000 as of 16 December 2020. Migrant worker cases totalled to be 3 times higher than that of local community cases among the Singaporeans.

## **2.8 American culture and policies**

America has aligned herself with the libertarian philosophy, believing that the Government should follow laissez-faire style politics, where the Government encourages a free capitalistic market, believing that businessmen would allow the economy to prosper when given such free reign.

The United States of America has long prided itself for being a “free” nation, a “melting pot” of cultural identities. This translates into the promise that all immigrants can be transformed into Americans, a new alloy forged in a crucible of democracy, freedom and civic responsibility. This belief was at the heart of many of the efforts of the U.S. federal Government in the 1950s and 1960s to desegregate schools and integrate neighborhoods — through court orders, housing laws and executive action. Despite America’s efforts to work towards a society where social harmony is established by people of different races, “were largely abandoned by the 1980s and, since then, the data show a United States that remains strikingly segregated. In Boston, 43.5 percent of the white population lives in areas that are at least 90 percent white and have a median income that is four times the poverty level, University of Minnesota researchers found. In St. Louis, that share of the white population is 54.4 percent.” (Zakaria, F. (2015, June 25). What America can learn from Singapore about racial integration.) This data therefore shows how there is a evident influx of immigrants into America which threatens the dominant White native American population. It is no doubt then, that this vast immigration has bred a certain disdain for immigrants among the native Americans, which in times of crisis would have manifested into animosity between the two parties. Such animosity has been exacerbated by Former US President Trump, as he referred to COVID-19 as the “Chinese Virus”, which according to Harvey Dong, a lecturer in Asian American and Asian diaspora studies with the University of California at Berkeley, “It’s racist and it creates xenophobia”. With over 60 million supporters (as seen in the number that voted for Trump in the 2016 US elections), Trump’s racist remarks are perpetuated into the fabrics of society, discriminating against minorities, who in no way, ought to be blamed for the global pandemic.

## **2.9 Measures that were put in place in America (From 11 March 2020 To 11 March 2021)**

- Medical responses
  - Mask Wearing
  - Hospitalisation
- Lockdown

### **2.9.1 American Mask Wearing politics**

There is no official decree across all states of America regarding mask wearing to which all Americans have to abide. Rather, it is up to the respective State Governments to implement these regulations and to what extent these regulations should be carried out.

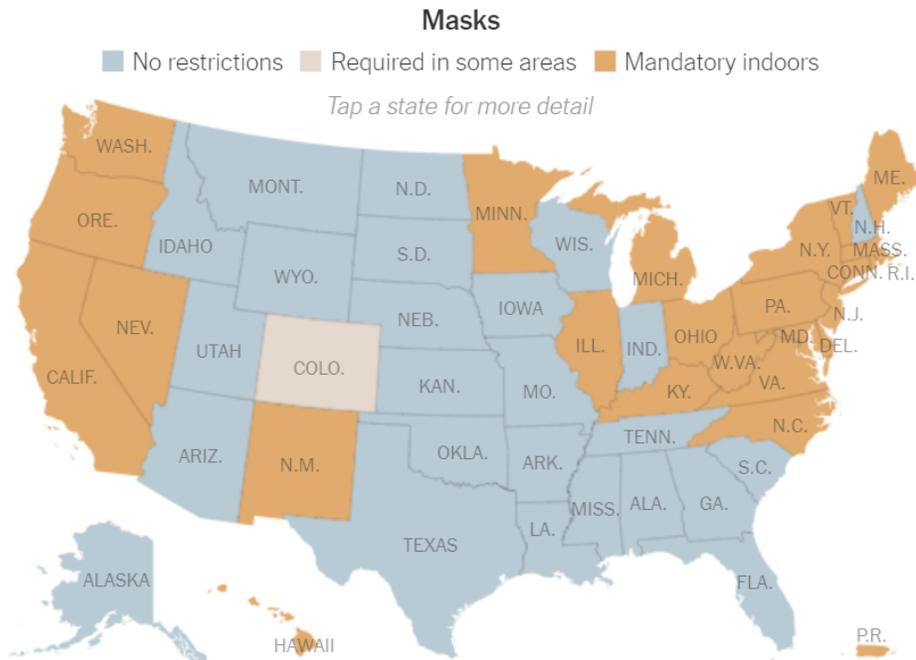


Fig 2.7.1A

Source Acknowledgement: The New York Times.

<https://www.nytimes.com/interactive/2020/us/states-reopen-map-coronavirus.html>

However, despite these advisories, many Americans openly flouted these rules as part of the American “Freedom of choice culture”, refusing to wear a mask simply because they feel it is their right to do so. Since these measures put in place by the authorities were simply advisories, should these advisories be ignored, the public cannot be convicted for flouting state advisories. According to one of Trump’s advisors, Dr Anthony Fauci, “people should not be walking around with masks” and that “wearing a mask might make people feel a little bit better and it might even block a droplet, but it’s not providing the perfect protection that people think that it is.”. Former President Trump also asserted multiple times that the “Coronavirus numbers are looking MUCH better, going down almost everywhere,” and cases are “coming way down.” When Trump made these claims in May, coronavirus cases were either increasing or plateauing in the majority of American states. Over the summer, the country saw a second surge even greater than its first in the spring. Trump made this claim ahead of his rally in Tulsa, Oklahoma, when the country was still seeing at least 20,000 new daily cases and a second spike in infections was beginning. According to ABC News, when asked, “Are you considering instituting a nationwide lockdown, a nationwide quarantine?” ‘There are still some questions about that,’ Trump then responded: “At this point, not nationwide. But there are some, you know, places in our nation that are not very effective at all but we may, we may look at certain areas, certain hot spots as they call them. We’ll be looking at that. But, at this moment, no we are not.” Trump made this statement on 16 March 2020, on which the US recorded 907 cases.



Fig 2.7.1B

Source Acknowledgement:

<https://www.marketwatch.com/story/why-do-so-many-americans-refuse-to-wear-face-masks-it-may-have-nothing-to-do-with-politics-2020-06-16>

## 2.9.2 American Lockdown

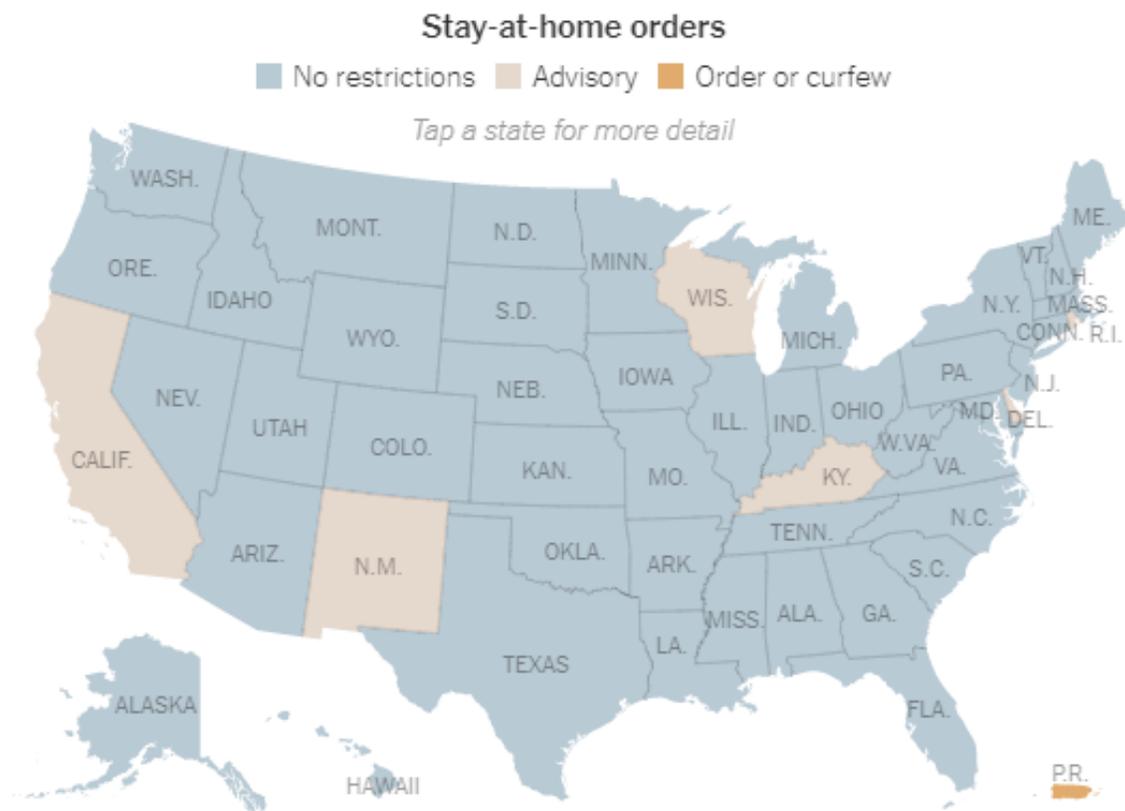


Fig 2.7.2A

Source Acknowledgement: The New York Times.

<https://www.nytimes.com/interactive/2020/us/states-reopen-map-coronavirus.html>

Through imposed lockdowns, some State Governors try to limit contact between Americans. However, as seen in Fig 2.7.2A, most states do not have stay home notices, or any enforced regulation to control the spread of COVID-19 virus. This resulted in only certain states, such as California, implementing movement restrictions on citizens, however though implemented, citizens were seen to be leaving their homes freely.

## 2.9.3 The Trump Administration

Trump's budget proposal calls for a total of \$4.8 trillion in federal spending and looks to eliminate the federal deficit by 2035. As such, the budget proposal includes cuts to some significant domestic and safety-net programs—and those proposed cuts would have big implications for providers and public health. According to CNN, during a meeting with governors at the White House, Trump in regards to his budget proposal said, "We're not touching

Medicare. We want to keep Medicare," and "we're not decreasing Medicaid. But we're doing a lot of things that are very good, including waste and fraud." One of the biggest proposed health care funding cuts in Trump's budget is to Medicaid. The budget includes several Medicaid-related legislative proposals that would reduce federal Medicaid spending by about \$920 billion over 10 years. The budget proposal also calls for reducing federal spending on Medicare by \$750 billion over 10 years, mostly by implementing certain cost-saving proposals that largely would lower payments to providers. The cost-saving proposals include medical liability reforms, changing uncompensated care payments to hospitals, expanding site-neutral payments, and reducing fraud, waste, and abuse in Medicare.

### 2.9.3.1 President Trump's view of COVID-19

President Trump has made many scandalous claims regarding the spread of COVID-19 in America, by either down-playing the virus, or misleading the general public through false directives on the spread of COVID-19 in the USA. A list of false claims that Former President Trump made can be summarized in the table below.

<b>Trump's Claim</b>	<b>Scientific Truths</b>
The outbreak would be temporary: "It's going to disappear. One day, it's like a miracle—it will disappear."	COVID-19 is still raging in the US, with a total of 33.1 Million.
The pandemic is "getting under control."	Trump's claim came as the country's daily cases doubled to about 50,000, a higher count than was seen at the beginning of the pandemic, and as the number continued to rise, fueled by infections in the South and the West.
"99%" of COVID-19 cases are "totally harmless."	The virus can still cause tremendous suffering if it doesn't kill a patient, and the WHO has said that about 15 percent of COVID-19 cases can be severe, with 5 percent being critical. Fauci has rejected Trump's claim, saying the evidence shows that the virus "can make you seriously ill" even if it doesn't kill you.

<p>The U.S. has “among the lowest case-fatality rates of any major country anywhere in the world.”</p>	<p>When Trump said this, Russia, Saudi Arabia, South Korea, and India all had lower case-fatality rates than the U.S., which sat in the middle of performance rankings among all nations and among the 20 countries hardest hit by the virus.</p>
<p>“You get better and then you’re immune.”</p>	<p>Although similar viruses provide some short-term immunity after recovery, doctors don’t yet know how long COVID-19 immunity lasts, especially given anecdotal reports of reinfection. Trump’s claim also ignores the long-term side effects of contracting COVID-19 that so-called long-haulers have reported. Furthermore, different variants of COVID-19 such as the B.1.1.7, B.1.351, P.1, B.1.427 and B.1.429, which were all present in the US as of February 2021.</p>
<p>“Anybody that needs a test, gets a test. We—they’re there. They have the tests. And the tests are beautiful” and “If somebody wants to be tested right now, they’ll be able to be tested.”</p>	<p>Trump made these two claims two months apart, but the truth was the same both times: The U.S. did not have enough testing.</p>

**3 Methodology**

Newspaper Articles, Documentaries, Journals, Government-Released statistical data will be used for analysis of the responses and implications of the COVID-19 virus. Such resources include:

- Liberalism disavowed. Communitarianism and State Capitalism in Singapore. (Chua Beng Huat)
- Communitarian ideology and democracy in Singapore. (Chua Beng Huat)
- Tan, E. (2003). Re-Engaging Chineseness: Political, Economic and Cultural Imperatives of Nation-Building in Singapore. The China Quarterly, (175), 751-774. Retrieved February 20, 2021, from <http://www.jstor.org/stable/20059038>
- Benjaathonsirikul, F. (2009). Singapore: Staying the course. In Hart P. & Tindall K. (Eds.), Framing the Global Economic Downturn: Crisis rhetoric and the politics of recessions (pp. 267-284). ANU Press. Retrieved February 20, 2021, from <http://www.jstor.org/stable/j.ctt24hf3m.14>

Political theories involved

- Communitarianism  
(a theory or system of social organization based on small self-governing communities.)

- Libertarianism  
(A theory that advocates only minimal state intervention in the free market and the private lives of citizens.)
- Individualism  
(A social theory favouring freedom of action for individuals over collective or state control.)

## **4 Discussion and Analysis**

### **4.1 Evaluating the effectiveness in Singapore's disease management**

#### **4.1.1 Evaluating Singapore's Governmental policies in providing disease management.**

Singapore's Government followed closely to the World Health Organisation's (WHO) disease management protocols, to actively stamp out the COVID-19 virus. To manage the crisis, "learning" will be especially important for the city-state, both to measure the success of the crisis response and to inform new policies and procedures that may be applied to future incidents (Pearson & Clair, 1998; as cited in Moynihan, 2008, p. 350). This suggests that Singapore's Government would have to learn from the mistakes that it had made in disease control in the past. This "learning" had taken place in the formulation of DORSCON, as well as swift human traffic control measures, such as the Leave Of Absence, Stay Home Notice and the Quarantine Order. This demonstrates that Singapore's Government did have the capacity to deal with the virus right from the start, since these protocols were drafted after the 2003 SARS outbreak. It is also important to note that these measures introduced to the country by the Government were tightly enforced and lawbreakers would face heavy punishments, such as fines mounting up to \$3,000 or sentenced to jail. Such tight law enforcements largely deter Singaporeans from flouting Safety Management Measures (SMM) , for the fear of ignominy online on top of the hefty fines. With the above cooperation of the public in adhering to Governmental policies, COVID-19 cases started to drop gradually, proving the efficiency of the Singaporean Government to deal with the pandemic from the start. This shows that it was not Singapore's Communitarian ideology that allowed the government to be successful in managing the COVID-19 cases, rather, it was because the government was simply responsible and effective, fulfilling its duty, as the government, to govern the safety and wellbeing of its citizens.

#### **4.1.2 Evaluating the social stability and cohesion in Singapore when measures were implemented**

Singaporeans generally abided by the measures put forth by the Government. Several factors contributed to this united effort to combat COVID-19.

Singaporeans being highly educated and also since this was the first pandemic faced by Singaporeans in the decade, many were in a state of panic and wanting this global health crisis to end quickly. According to Mandhana, N. (2021, July 1). *From Pandemic to Endemic, Singapore Creates Model for Living With Covid-19*, "People are battle-weary, a group of Singapore Government ministers wrote in a recent editorial in the Straits Times newspaper. "All are asking: When and how will the pandemic end?" they added." This proves how Singaporeans are willing to cooperate with the measures implemented by the Government for their lives to go back to some semblance of normalcy. This social cohesion and the cooperation with the Government have proved useful in bringing the COVID-19 cases in Singapore to decrease. On 20 April 2020, it was recorded that there were 1426 COVID-19 cases in Singapore, but on 1 June 2020, less than a month later, there were 408 COVID-19 cases. The fact that the cases

dropped by more than two-thirds in a span of 10 days shows the effectiveness of the Government policies as well as the extent the citizens cooperated with the Government to achieve this feat.

Singapore did have her fair share of ethnic or religious conflicts in the past, but as Singapore grew to become a more developed country and through education, harmonious existence of a peaceful society has been prided over such cultural differences which had caused political tensions in Singapore previously. It is through public education, that Singaporeans stand united, regardless of race, language or religion, as Singaporeans. Such a guiding principle in the society grew to allow Singaporeans to feel affiliated with each other, as individuals bear the moral responsibility to strive for the betterment of the society as a whole. This ties into how Singapore is a generally communitarian society, where Singaporeans would go the extra mile to take care of the societal benefits it reaps; And in this case, Singaporeans, with this national education, would take responsibility to abide by SMM.

#### **4.1.3 Evaluating Singapore's medical response**

Singapore, with the experience of SARS, already has experience in dealing with major disease outbreaks. With the incorporation of DORSCON, the disease management in Singapore was as a whole very orderly, with the Government actively revising management protocols to keep up with the community spread of COVID-19. This promptness in dealing with COVID-19 exemplified the excellence and efficiency of the Singaporean Government to source for the required medical supplies and distribute them out to the Public Health Preparedness Clinics (PHPCs), despite early hiccups. Other evidence such as the gradually decreasing number of COVID-19 cases in Singapore and a functioning economy testifies to how the Singapore Government has rolled out efficient policies that govern the overall wellbeing of the Singaporean, from Social, Economic and Medical aspects. The medical response to COVID-19 in Singapore followed in the footsteps of the Government and fulfilled its duty to provide accessible healthcare to the Singapore population. As such, communitarian ideology did not have such a big role to play as compared to the sense of duty and responsibility of medical personnel.

#### **4.1.4 Concluding remarks about Singapore's overall response**

From all these measures that the Singapore Government implemented to combat COVID-19, it is crucial to note how the Government is adopting a very serious attitude towards COVID-19, decisive in following official documents from the WHO on how to deal with the outbreak, exemplifying this decisiveness in coming down hard on those who breach such management measures - who act based on self interest instead of the general good for society. By viewing these measures through the lens of consequentialism, the positive outcomes of these measures heavily outweigh the negative social consequences. Through firm pragmatic communitarianism

and prioritising community over the individual, Singapore has managed to control the spread of COVID-19.

One limitation to the extent of Singapore's success would be the negligence to the inevitable spread of COVID-19 in the dormitories, something which the Singapore Government should have seen coming.

## **4.2 Evaluating the effectiveness in USA's disease management**

### **4.2.1 Evaluating USA's Governmental policies in providing disease management.**

While the USA did have Governmental policies to control the spread of COVID-19, such as the lockdowns and travel bans (imposed on people returning from COVID-19 hotspots), the main problem that the USA faced is the lack of enforcement due to a conflicting lifestyle culture which is deeply entrenched in society. For most of the investigated timeline (11 March 2020 to 11 March 2021), the USA was under the Trump Administration. Based on the literature reviewed, we can see that "Donald Trump (is the) biggest driver of COVID-19 misinformation" (Ahmed, I. (2020, October 2). Donald Trump biggest driver of COVID-19 MISINFORMATION: STUDY. CTVNews.) Trump had a big supporter base in the USA, with more than 60 million voting him for President in 2016, many had believed him when he claimed that the USA "would be safe" and that "the spread of COVID-19 could be drastically slowed by the onset of warmer and more humid weather" Matthews, C. (2020, April 23). *Trump says coronavirus could be thwarted by summer heat, Citing Dhs study*. MarketWatch. This presented a great limitation on just how effective various Government policies would be. Many Americans believed Trump and continued with their daily activities, braving the virus, convinced that it would "go away" in summer. In the Summer 2020, Americans went out into the sun and mingled without face coverings, this led to the sudden rise in COVID-19 cases in the US, with more than 100,000 cases recorded in a single day. By this time, Trump had revised his previous advisory, and now advised Americans to don on face covering to limit the spread of COVID-19. However, COVID-19 was already very rampant from all the months of ignoring its spread in the US. This shows that it was not because the US government was trying to act alongside its libertarian ideology, but because the head of government, Trump, disregarded COVID-19 as a serious virus which needed prompt action. We can therefore conclude that it was this playing down of the virus that was what the US government advocated.

### **4.2.2 Evaluating the social stability and cohesion in the USA when measures were implemented**

When measures were implemented in the US, cases were exponentially increasing under Trump's leadership. As a result, a large proportion of the US's population, consisting of both Democrats and Republicans, were unhappy with how Trump dealt with COVID-19, effectively leading the US "into a lost cause against COVID-19". This resulted in rather fierce protesting in the streets, most of them involving violence and damage to public and private property.

Furthermore, many supported Trump when he made many xenophobic claims about the virus about how it had originated from China, which promoted the already prevalent Asian Hate in the country, leading to many Asians in America having to deal with excessive, undue discrimination, although they had not done anything wrong.

The problem in this case is how the Government, under Trump promoted such racist claims, instead standing by the country's vision of encouraging cultural integration and immigration into the US. This exacerbated the tension between different groups of people, where they expressed intense animosity towards each other. In the USA's big cities, Asian Americans, being a rather established immigrant group, were frequently looked down upon by true-blue Americans due to how they were physically smaller, and therefore seemed to be "more easily bullied". They therefore became the scapegoat for the extensive spread of COVID-19, producing a very toxic brew for social cohesion in the US. This shows how people in the US have adopted an "everyone for themselves" attitude towards COVID-9, and will not mind discriminating against a minority group as they themselves are not the ones at fault. This also ties into the Libertarian ideology present in American society. Americans are evidently more concerned with how they, as individuals, can minimise the damage of the virus upon themselves, done so by blaming others for bringing the virus into America. Social behaviour in the US is therefore seen to be dictated by the individual benefits that individuals can enjoy.

#### **4.2.3 Evaluating USA's medical response**

The US is actually a leader in the pharmaceutical industry, with its advanced technology and vast research capabilities. However, as COVID-19 spread, it was increasingly evident that the US was not prepared to combat COVID-19. As more and more citizens contracted COVID-19, the medical facilities (hospital beds, respirators, medical staff) were strained and were in short supply. This resulted in many Americans not receiving prompt medical attention and dying due to further complication of the disease. Some reasons why the medical response in the US was severely lacking would be due to the Trump Administration cutting down medical funding for research or healthcare infrastructure. These budget cuts led to the retrenchment of many healthcare workers, and so when COVID-19 was so widespread in the US, the US simply did not have sufficient medical personnel to effectively deal with the situation.

Furthermore, healthcare is not accessible in the US. This is because hospital admissions are minimally subsidised by the Government, meaning citizens have to bear the brunt of medical expenses if they are without insurance. This leads to many Americans, especially the financially challenged, self medicating by buying "over the counter" drugs, assuming that they would recover in a few days. This culture of self medicating has proved disastrous in the US. Early symptoms of COVID-19 cause many to identify it as a common flu, and hence pay little attention to it. This results in two implications. First, since many Americans are unaware that they have contracted COVID-19, assuming that they have merely contracted the common flu, they would carry on with their daily lives without seeking professional medical attention. As a result, when COVID-19 starts to show symptoms worse than that of the common flu, the medical condition of individuals is already so serious that they need critical medical attention, inducing a very great strain on the healthcare of the nation. Second, as they continue to live life normally, they would

spread the virus to more people, perpetuating the cycle of self-medication and the spread of COVID-19.

#### **4.3 Other reasons for Singapore's management of COVID-19**

Singapore, as an island country, had to control the spread of COVID-19 well for several other reasons than those already discussed.

Singapore does not have natural resources so she works on an export-import based economy. When COVID-19 cases peaked in 2020, the Singapore Government imposed a circuit breaker, targeting the community spread of COVID-19. This caused a major economic slowdown since a large proportion of workers had to work from home, with lower productivity. In order to remain competitive in Asia, competing against similar regional economies like that of Hong Kong or Taiwan, Singapore has to promote trade as a business hub. This meant that the Singapore Government had to control the spread of COVID-19 quickly and effectively, to maintain the trust of international trading partners that Singapore's economy was still functional and competent despite the implications.

#### **5 Conclusion**

Singapore was better prepared than the US during the pandemic. Although the US had the technological advantage in terms of medical expertise, it lacked the capable governance that could capitalise on such an advantage which hindered its overall management of the disease. Singapore on the other hand, had a Government which had drafted up protocols from the SARS outbreak in 2003, which boosted its capabilities in dealing with COVID-19. Responses from the Singaporean Government were prompt and efficient, which allowed COVID-19 to be controlled more effectively.

The different ideologies play a significant role in influencing the social response of the public to these measures implemented by the various Governments. In Singapore, since it is part of the Singaporean culture to care for the greater good of society before that of an individual, measures implemented by the Government were interpreted as a way to help the community decrease the spread of COVID-19, decrease the strain on healthcare workers, and to allow life to return to some semblance of normalcy as soon as possible. Therefore, it is possible to conclude that the measures implemented by the Singapore Government worked because the population had understood the necessity of such measures in times of a health crisis. It is also crucial to note therefore that the Singapore Government had understood the severity of COVID-19 and had acted promptly. This means that Singapore's success in managing the virus is also largely due to the effective Government in Singapore.

Libertarianism plays a crucial role in influencing American's social response to the various measures implemented by the Government. Americans highly value their freedom, and therefore viewed some measures imposed by the Government (Lockdown, Mandatory wearing

of a face covering) as infringing on such liberties. As a result the social stability in the US was worse as compared to that of Singapore and this was exacerbated by Former President Trump's xenophobic remarks. The US did not have a capable Government, under the Trump Administration, to lead and guide the population in the time of a global pandemic, hence, COVID-19 had spread extensively in the USA. It was only after Biden became President of the United States that the Government's attitude towards COVID-19 changed, but due to the timeline of this research paper, the effectiveness of these new measures is unable to be measured.

In conclusion, both ideologies and societal values play an important role in influencing the social aspect of disease management, particularly in the way the public would respond to measures implemented by the governments of various countries. However, the overall effectiveness of COVID-19 management as a whole relies heavily on the effectiveness and efficiency of the governments in the different countries, which impacts all aspects of disease management, social, economic and medical.

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