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## Human Rights and Democracy Amidst Militarized COVID-19 Responses in Southeast Asia

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LI-LI CHEN, MAY 13 2020

All Southeast Asian states responded to COVID-19 crisis through a militarized approach, such as suspension of political and civil rights of citizens, surveillance, controlling or blocking the access of information, quarantine, hygiene, travel bans, border closure and increased border control, detainment, and legitimizing military and police use of force. Nevertheless, the danger of putting forth a militarized approach to combat COVID-19 is no less than the deadly virus. The chair of the ASEAN Parliamentarians for Human Rights (APHR) pledged for governments in the region to put human rights at the center in March, since suspending or suppressing these rights will further compromise their attempts to protect health and other inalienable rights. Yet, the disturbing trends of militarized measures in the region calls for due attention on how governments' militarized responses to COVID-19 could harm democracy and human rights.

First, leaders could gain unlimited, undefined, and unchecked power under the state of emergency while giving way to normalizing exceptional policies and security measures in violating human rights – such as martial law. Laws may be suspended and rights and liberties could be infringed, suspended, or rejected with tightened censorship, prevalent surveillance and disproportionate controls. For example, Cambodian Prime Minister Hun Sen and Philippines president Rodrigo Duterte – who have a record of overrunning the human rights in their countries – were granted special powers on 31 and 24 March respectively. In particular, Duterte not only warned the military and the police that the violators of the lockdown could be shot to death, but also extended the coerced community quarantine in the island of Luzon and other high risk regions, which involves curfew, shelter-in-place, and closure of non-essential businesses. More than 100000 were arrested for violating the curfew, and human rights violation cases by the police surged. Those cases include confining violators in dog cage, coffin, forcing them to sit for hours in the midday sun. While the increasing power of the rulers could be affirmed or normalized in prolonged lockdowns, the encroachment of basic rights could outlast the crises.

Moreover, securitization of health is likely to be manipulated by political leaders and opportunities to purge political dissent, which could sharply limit the space for democratic discussion and participation. Many Southeast Asian countries use strict censorship against 'fake news' as well as comprehensive surveillance to defend public health, however, it allows the governments to identify and filter the articles, news, data, correspondence and information that are not in alignment with the government's policies or reporting. Across the region, governments spy on, or arrest, civilians for spreading misinformation and hundreds have been locked up.

In Indonesia, people were arrested for spreading inaccurate information on social media. In Thailand, people critical of the government's response to COVID-19 are prosecuted. In Myanmar, terrorism law has been mobilized to crackdown on journalists, block websites and internet as well as people's access to information. In Vietnam, which was praised for limiting the number of infected cases successfully due to its culture of surveillance, people who are suspected of sharing fake news risk being reported and fined. Contact tracing apps, such as those promoted in Singapore, also raise suspicion of increasing governmental surveillance means beyond COVID-19.

Limiting access to information coupled by curbing the political and civil rights of people may even make them more vulnerable to the coronavirus. Leaders could deny, delay, manipulate, or shut down the necessary and reliable data

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regarding the virus in order to deny access and prevent critiques of the governmental responses and capability from being exposed. For instance, Myanmar shutdown the internet in the Rakhine state, which hinders the Rohingya refugees from accessing life-saving information. What is more, government could crack down on free speech by targeting groups or individuals. In Cambodia, journalists are detained for sharing opinions or news about coronavirus. When security measures become normalcies in peoples' daily life, it may be hard to reverse them. Seeing freedom of speech and access to information as disposable helps deflect us from the political nature of the security measures in the name of health.

Second, while focusing on COVID-19 and concentrating all necessary resources to battle it, other unessential health-related services and cares are overlooked. Take women for example, it was reported that the cases of domestic and intimate partner violence are rising, therefore, there is a pressing need of shelter, protection, and access of basic healthcare and services, which might be constrained due to overwhelmed healthcare systems. Moreover, in some conflict-affected areas, security forces are responsible for sexual violence. Taken these together, a securitized response to COVID-19 in Southeast Asia could expose women to risks of restrained access to health services and care as well as higher threats of sexual violence.

Some vulnerable groups could also be considered for political purposes as incubators of the virus – and so need to be confined or eliminated to avoid spreading the virus. Consequently, violence, discrimination and stigmatization through xenophobic comments, hate speech, and conspiracy theories are likely. In Malaysia, local authorities sent Rohingya refugees away because 'refugees might bring the virus to the country'. In Myanmar, doctors and nurses were kicked out by their landlord for likely carrying virus. Muslims in Cambodia also faced discrimination in different forms after the Health Ministry named groups of people infected by COVID-19. In Singapore, a local activist stated that comments online scapegoated the migrant workers on the face of surging cases of COVID-19 due to an outbreak among the migrant workers: 'On top of [the view that] 'it's their fault for not being clean and for their eating habits' and things like that, there is also this almost worst mindset of 'they're driving our numbers up and it makes us look bad on the world stage, and they should go home'.

The poor could also fall into despair due to economic, health, and social shocks brought by the pandemic. During lockdown, many daily wage workers in informal sectors as well as formal workers suffer from loss of income or unemployment. In spite of the government subsidy or aid, the fact that help tends to come late (or never arrives at all) could become the last straw which breaks the least fortunate.

In Thailand, research examining the relevance between COVID-19 and suicide found 'at least 38 suicide attempts linked to the lockdown.' The social problems preexisting in the societies could be aggravated due to lockdown, since lockdown deprives the vulnerable of their livelihoods and adds more stress and hardship to their situations. If the governments fail to take action swiftly, the most vulnerable might not be spared.

That most citizens in Southeast Asian countries seem to support their states of emergency or lockdown worryingly functions to consolidate the state power as well as to silence political dissent, constrain the space for civic discussion and participation, or cover up human rights violations, which could curb future public discussion and debate as well as independent monitoring fundamental to consolidation of democracy. Democracy and human rights should not take the backseat even under a state of emergency or lockdown. We need to be cautious of the forms of suppression and violence justified in a time of crisis, because they may indicate the emergence of a politics of intolerance and cruelty across Southeast Asia in the near future.

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“Rethinking Timor-Leste’s COVID-19 State of Emergency”. Twitter @liliche44511875