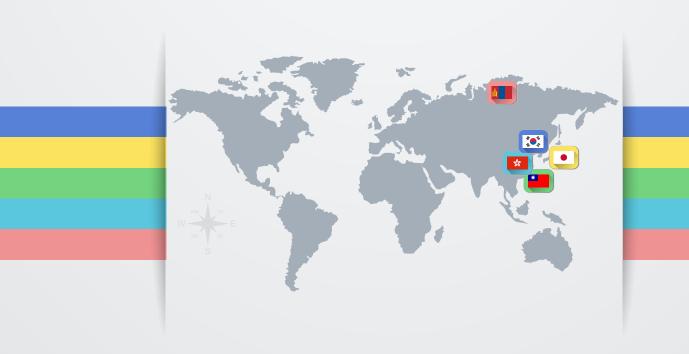
2021
ICSW North East Asia Newsletter



Lasting effects of COVID-19 in social work and NEA region



Since the first case of COVID-19 infection in January 2020, high-intensity social distancing has been prolonged for over a year due to the spread of the pandemic. As of September of this year, even though the national vaccination rate reached over 43%, social instability was still high due to variants of the virus. There's no light at the end of the COVID-19 tunnel as spread, calming, and re-spreading of the pandemic are repeated, and accordingly, there are growing calls to prepare for a so-called "Living with COVID-19" (step-by-step recovery of daily life). The global pandemic of COVID-19 has been affecting all industrial sectors, including airlines, travel, catering, and face-to-face services such as education. In addition, due to the prolonged social distancing, hobbies, sports, and socializing with people came to a screeching halt in an instant and a new word called 'Corona Blue' appeared. In particular, vulnerable groups such as the elderly and the disabled whose scope of social activities are narrowed, became socially isolated.

On the other hand, the long-term COVID-19 infectious disease has been shifting cultures, through the expansion of non-face-to-face contact and contactless culture through online rather than human-to-human and face-to-face contact. Online shopping, online classes, online meetings, and over-the-top (OTT) services that are enjoyed through LAN cables are rapidly becoming mainstream. According to the National Statistical Office (November 2020), in the case of online shopping, the total transaction amount increased by 30.7% in September 2020 compared to the same period in 2019. As non-face-to-face services are expanding and access to and use of services for those who have relatively difficulty in using digital technology are limited, the widening digital divide has become emerged as a social problem. In



particular, the vulnerable groups in need of financial support have hard time in using non-face-to-face contact services due to low utilization of digital technology and information. According to the National Information Society Agency (NIA), when the digital informatization level of the general public is set to 100, the elderly had the lowest score at 64.3, followed by the disabled (75.2 points) and the low-income class (87.8 points).

With the outbreak of COVID-19, various changes have occurred in the welfare environment as well. So-cial welfare facilities have been experiencing frequent closures, reduction of programs, and suspension of service provision according to the COVID-19 response policy emphasizing contactless services. Face-to-face welfare services are conflicted with the characteristics of COVID-19, since the infectious disease requires blocking contact. Thus, a vacuum in welfare services is inevitable, and vulnerable groups such as the elderly, the disabled, and children are facing a more vulnerable life. And the 'safety' of social workers who provide welfare services and those who use them, has emerged as a new issue, and the importance of safety has also strengthened. In order to ensure a safe working environment for workers, equipments and supplies related to preventing infectious diseases have become a necessity, not an option.

In this way, the COVID-19 pandemic has brought about various changes in the social welfare environment. Above all, changes in the traditional face-to-face service provision of social welfare facilities caused unexpected phenomena and problems. Social welfare facilities have undergone a series of operational changes such as full closure, resumption of some face-to-face services, closures again, and conversion to non-face-to-face services due to prolonged closures following the outbreak of COVID-19 in January 2020. The current status, problems, and challenges of social welfare facilities after the outbreak of COVID-19 are as follows (Shin Jae-eun et al., 2020). In the case of elderly welfare centers, in-person services and usage of facilities such as counseling services (self-help groups or group counseling), welfare programs using facilities (hair/ beauty services, cafes and rest rooms), and autonomous facilities (physical training room, table tennis and billiards and games like chess and Go) have been suspended or reduced, and some essential services targeted to high-risk groups, those receiving crisis counseling, and emergency care recipients have been continuously provided while observing infection prevention rules. Moreover, most of the services were switched to non-face-to-face formats, such as phone consultation, video content provision, and delivery of alternative meals and side dishes. The Welfare Center for the Disabled has provided face-to-face, non-face-to-face, hybrid (face-to-face + non-face-to-face) services in parallel for all projects. The proportion of face-to-face services was high in some individual treatment and social services, such as the activity support service for the disabled and rehabilitation treatment for disabled children, where in-person services are essential due to the characteristics of the disabled. However, in consideration of concerns about COVID-19 infection, it was necessary to change the service delivery method to the parallel use of contactless services, including segregation into small groups and service individualization. In the case of facilities, it was found that they had hard time preparing and using the equipment, space, and video production system for online services, and the disabled and their caregivers had difficulties in the absence and use of IT devices including computers. The social welfare



center has switched to a contactless format as the closure of the social welfare center rapidly increased and prolonged due to COVID-19, and the absence of care for the vulnerable in the local community became serious. Various programs and services in contactless format have been expanded to meet the needs and circumstances of the recipient, such as video service, phone or text service, and visit service without in-person contact.

Various problems arose in the process where individual social welfare facilities struggled to provide face-to-face and non-face-to-face services. First, there is a blind spot due to the suspension of welfare services. Social distancing caused various gatherings or group activities and programs to be suspended or reduced, prolonging the social isolation of the vulnerable. In the case of the elderly, mental health and physical deterioration such as feelings of isolation, depression, and loneliness are increasing and expanding into social problems due to the suspension or reduction of singing classes and various cultural and leisure programs, which were healthy outlets for them in maintaining social relationships. Care for the disabled increases the burden of caregivers and frequent appeals to caring stress, and the problems of depression and educational gap have also increased as low-income children stay at home. Second, as the in-person service is converted to a contactless method, problems are exposed with the service method that has not been experienced before. With the exception of very few services, almost all services have been converted into the contactless format such as greeting calls or text services, smartphone video conversations, online education, YouTube video provision, and contactless food delivery. In the process, inexperience of use and cost burden of the vulnerable continuously exists, and it reveals the limit of the workers' ability to operate contactless programs and use ICT devices, such as the ability to use IT devices, inexperience in online content production and technology usage, and lack of experience in operating programs in contactless format. The third is the increase in the workload of workers since they have to provide contactless service at the same time. Conversion of large-group activities into small groups, development of alternative programs in contactless format, user management using contactless means such as video calls, infection prevention activities in facilities, shortage of program support personnel due to a decrease in volunteers and weak capabilities in using IT devices, etc. have increased workload increased and brought about limitation in program operation. Fourth is insufficient building of ICT environment for service recipients. Welfare facilities have developed and utilized contactless services on their own to meet the essential welfare needs of the underprivileged. However, it faced limitations in understanding and responding to situations such as insufficient communication with service recipients with poor online access, and their health and psychological status. As contactless methods become activated, the use of computers and smartphones is increasing. However, it was found that the vulnerable groups such as the elderly and the disabled who are not accustomed to using digital media devices have low access to digital media. Therefore, we need to make some efforts to bridge the digital divide by providing equipment, software, and auxiliary devices for the Internet use environment such as Wi-Fi, tablet, PC, and communication equipment in the home of the vulnerable. Fifth, service support should be tailored to each service recipient, such as the elderly, the disabled, and local residents. Due to the closure of senior welfare centers or limited programs due to COVID-19, the elderly who used the facilities had nowhere



to go, thus, their social networks were also weakened or cut off. The need for developing contactless services that enable two-way communication while reducing the social disconnection of the elderly or providing small-scale activity services in external spaces has significantly grown. In the case of the disabled, despite the importance of non-face-to-face services being emphasized due to the pandemic, it was confirmed that we should provide in-person services such as 'treatment', 'caring service', and 'case management of the disabled at home in the community'. However, as some service hours are reduced or provided non-face-to-face, which increases the burden of parenting, small-scale face-to-face services are continuously requested, demanding preparation of alternative solutions. In the case of children, it is necessary to establish a contactless environment as there are many vulnerable households not equipped with devices such as computers, cell phones, and cameras in their homes, which can lead to blind spots for other non-face-to-face services.

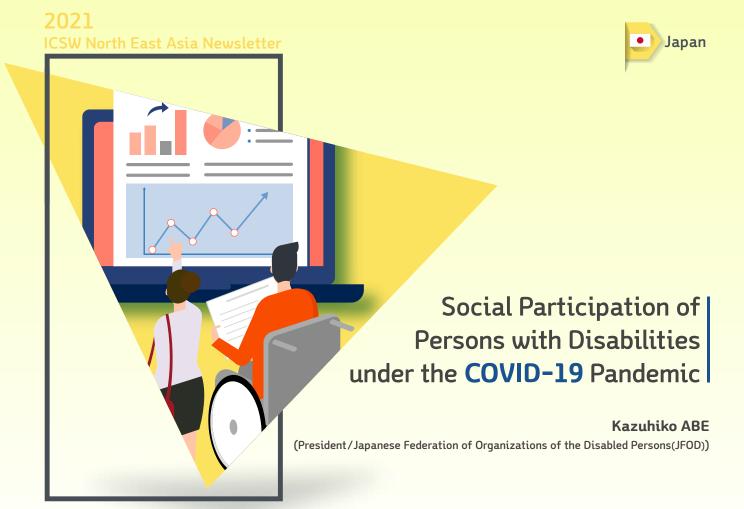
The above paragraphs explain environmental changes caused by COVID-19, the current status of social welfare facilities, and problems. The tasks for improvement are as follows. Short-term tasks are: First, social welfare facilities should strengthen their capacity to regularly and periodically prepare for and respond to infectious disease crises. To this end, it is necessary to establish a daily prevention and management system to prepare safe facilities and environments against infection while establishing and periodically revising and supplementing the facility and service operation manuals for the outbreak and prevention of infections. In addition, workers must have the ability to use and utilize information and communication technology to develop and operate smart device-based contactless services such as smartphones, tablet or PCs. Another option is to create a 'Digital Welfare Service Team' within the welfare facility to be in charge of content production and provision, and to recruit not only social workers, but also ICT and content utilization experts. Meanwhile, in preparation against the spread of infectious diseases, it is necessary to consider all possible format of services including small grouping, individualization, in-person and contactless services from the time of service plan establishment, and to actively expand services that utilize space within the local communities. The second short-term task is to provide media equipment and technical support for the underprivileged and strengthen their information literacy education. In the event of an infectious disease, it is necessary to establish an ICT environment that can be utilized along with content production to boost contactless services. Therefore, we may consider setting up an ICT kit and providing education on digital use by establishing a 'welfare technology support center' to prepare an Internet environment for vulnerable families, supply equipment, and provide technical support. Among the mid- to long-term tasks, the first is to expand contactless services and introduce new methods. We can develop platform-based services that can replace or supplement face-to-face services, or use Zoom or other tools available on the Internet to provide digital-based volunteer services by using telephone, video, or e-mail to those who are experiencing social isolation as new contactless service. In addition, in line with the 4th industrial era, it is to strengthen care services through ICT technology-based smart robots, etc. By using smart robots, it is possible to provide various types of care services such as safety management, psychological/emotional support, and medication management for the elderly whose cognitive function is weakening. The third task is to build a contactless welfare service platform. In welfare

2021

ICSW North East Asia Newsletter



facilities, the difficulties experienced by practitioners are doubled or tripled due to lack of experience in non-face-to-face services, complicated usage of various applications such as YouTube, Zoom, and real-time live streaming as well as poor accessibility of users. In addition, since each welfare facility separately produces and provides online content, there is a limit to its expertise. Therefore, by establishing a non-face-to-face welfare service platform, we can promote the accessibility of non-face-to-face services and convenience of service use through the development of content tailored to service recipients and the sharing of various contents, at the same time reducing the workload of the workers, thereby increasing the efficiency and effectiveness of the services.



Since April 2020, the number of people infected with COVID-19 has been increasing and decreasing repeatedly in Japan as big waves, and due to the emergence of variant, the height of the wave has become greater and greater.

Under such circumstances, people's life has been restricted in many ways, and especially, persons with disabilities have experienced great difficulties and inconvenience in their daily life.

In this article, I would like to summarize the current status of daily life and social life of persons with disabilities from the viewpoint of persons with disabilities, and would like to consider the future of this society.

New Lifestyles and Life of Persons with Disabilities

To prevent the spread of infection, the government has indicated so-called "New Lifestyles" such as wearing masks, preventing 3-Cs, i.e., closed spaces crowds and close contact, refraining from unnecessary outing, etc.; however, for persons with disabilities, these things are very hard to implement. For persons with hearing impairment, it means that it will make difficult for them to utilize sign language interpreters; masks will hide the movement of mouth, and it will make them impossible to understand



words from the movement of the other person's mouth. For persons with visual impairment, it also causes difficulties as they need to touch someone to have a support for movement, or to touch something to check what it is. For persons with severe disabilities, physical contact is indispensable to be cared. For people with developmental disabilities or intellectual disabilities who are sensitive to stimuli, wearing masks may cause pain, and they may be accused because they don't (can't) wear a mask. Thus, persons with disabilities tend to refrain from going out; for example, to commute to medical institutions, to go shopping for food and daily necessities, to go for a walk or exercise that are necessary for maintaining good health. Consequently, it causes a great stress for persons with disabilities.

For organizations of persons with disabilities or support groups, it is difficult to work as expected. Activities they planned were often cancelled, and even they were not cancelled, they had to limit the number of participants to keep social distancing. For persons with disabilities, stay-home will cause hypokinesia which may lead to significant problems such as a decrease in mental and physical functions. Continuing stay-home easily increases loneliness, isolation and anxiety, and subsequently, together with the fear for the danger of infection of COVID-19, it causes great stress. The importance of social participation activities, especially leisure activities, should be recognized.

Employment of Persons with Disabilities under COVID-19 Pandemic

COVID-19 pandemic has made economic activity stagnant, and has affected employment and working in general. Looking at the impact on persons with disabilities, the number of persons with disabilities who found job through Public Employment Security Offices in 2020 decreased comparing to the previous year.

Actually, it was increasing year by year for more than 10 years, and suddenly, it turned to decrease due to COVID-19 pandemic because job vacancies in the manufacturing industry, accommodation industry, food service industry, wholesale industry, retail business industry, etc., i.e., easy-to-work workplaces for persons with disabilities, reduced.

Further, the introduction of teleworking to reduce the number of commuters affected the employment of persons with disabilities. As the teleworking has become the mainstream work style, the number of commuters decreased, and consequently, working opportunities for persons with disabilities drastically decreased as cafeterias were closed and office work assistance jobs which they could do were disappeared. As a result, many of them were temporarily laid off or had to leave their jobs. As the way of working changes, it will be a big challenge for us to consider how to secure their working places, and what they can do as their job.

On the other hand, teleworking may give new opportunities of employment for persons with disabilities who have difficulties to commute or to communicate with others. Today, under the development of ICTs,



people can work from home utilizing online meeting systems, etc., and it will give various opportunities to persons with disabilities who live in a community where public transportation systems are less available.

Efforts by Organizations of Persons with Disabilities

Due to COVID-19 pandemic, activities of organizations of persons with disabilities have greatly affected, and most of them including national conventions or national-level workshops were canceled. Some events were survived; however, the number of participants was significantly decreased to secure the social distance. Refrained from going out, people were stressed, and their loneliness and anxiety were exacerbated.

On the other hand, some advantages are also brought by COVID-19. For example, many organizations of persons with disabilities utilize online meeting systems now. Our organization, Japanese Federation of Organizations of the Disabled Persons (JFOD) has its branches in all prefectures and ordinance-designated cities, and before COVID-19 pandemic, a national convention was rather a burden for participants because they had to travel a long distance to get together. Today, by utilizing a online meeting system, participants don't need to travel and financial burden such as accommodation cost or transportation cost are decreased. The burden has reduced a lot. Though the importance of face-to-face meeting cannot be ignored, the advantage of online meeting is also cannot be denied; the number of meetings can be increased, issues can be discussed in detail, catch-up streaming services can be used, etc. Many workshops or national conventions are now held online.

Face-to-face meetings are still difficult to be held. When COVID-19 pandemic is over, it will become possible to connect with persons with severe disabilities, and the range of our activities will be expanded more.

About Japanese Society

On the occasion of Tokyo 2020 Olympic & Paralympic Games, the Universal Design 2020 Action Plan was formulated. It includes two main pillars to realize the social participation of persons with disabilities, the aged, etc. One is "Development of a town with universal design" to make a town where people can enjoy outing even they have any disabilities. The other is "Barrier-free mind" to make a society where people can support each other and live together based on the understanding of disabilities. Both of them are very important to promote understanding of the various inconveniences or difficulties of persons with disabilities during COVID-19 pandemic.



It was regrettable that Olympic & Paralympic Games were held with no audience. It is expected that the efforts made so far will be inherited by future society as a legacy.

Under the COVID-19 pandemic, the conversion to a non-face-to-face / non-contact system can be seen in various scenes, and due to such conversion, some new inconveniences are emerged. For example, wheelchair users cannot use a gas station because it became self-service; people with physical disabilities cannot use a self-service restaurant because it is difficult for them to carry food or drink by themselves; self-checkout machines introduced at supermarkets or convenience stores are difficult to use for people with some specific disabilities, etc.

It is expected that job-cut will be continued, and the introduction of non-face-to-face / non-contact systems will be promoted in the future. It is necessary to stop and consider whether there are anyone who have difficulties to use those systems or not before introducing them, and what kind of creativity and ingenuity are necessary to make those systems usable for everyone. It is certainly important to cut labor costs, but it is also absolutely important to secure personnel who give necessary consideration to persons with disabilities as well as the aged.

Conclusion

Based on the Universal Design 2020 Action Plan, all Japanese people including persons with disabilities, business enterprises and government have worked together to realize a society where everyone can live comfortably aiming for creating an environment for social participation including persons with disabilities as well as for understanding of diversity including disabilities.

Persons with disabilities are often compelled difficulties by the "new lifestyle" under COVID-19 pandemic. To avoid it, more understanding for disabilities through "Barrier-free mind" is required. Furthermore, efforts to prevent loneliness and isolation are indispensable today as the progress of super aging, population declining, depopulation, etc. in Japan. It means that the social participation should be enhanced more and more than before, and therefore, the role of organizations of persons with disabilities is increasing more and more as activities to create a society where everyone can live comfortably by sharing the inconveniences or difficulties caused by disabilities with community people becomes more important all over Japan.

The social environment may change drastically in the future due to COVID-19, and the utilization of ICT or AI technologies is highly expected. It is also expected that persons with disabilities and the aged will not be left behind and will be able to receive a lot of benefits. The more the rate of vaccination will increase, the more the range of activities will be expanded. We long for the realization of a society that is more comfortable for everyone to live in than before COVID-19 pandemic.



Pandemic of COVID-19 in Taiwan

Before the outbreak of the COVID-19 in the world, Taiwan, this country with 23.5 million people, had senced the threat of the virus and taken her countermeasures. It seemed that everyone in this island had a consensus and did not want the SARS epidemic tragedy in 2003 to be repeated. Taiwanese government took early response before WHO declared COVID-19 as a pandemic on 11th March 2020, enforced various preventative measures such as border control, contact tracing, facemask rationing, cancelling large gatherings etc. These early response and preventative measures and the spontaneously cooperation from populace had contributed to the success of pandemic control and cause global attention(Bremmer, 2021): as of July 2020, there were less than 500 COVID cases (with 7 deaths) in Taiwan, and the country had never entered any form of lockdown. However, this successful control had also led the populance to overlook the necessary of vaccines, especially when there was no lockdown as other major cities around the world, and Taiwanese daily live was almost the same.

The counterattack of low vaccine coverage appeared after mid-May 2021. A series of confirmed cases put Taiwan on high alert. Taiwan Central Epidemic Command Center (CECC) raises pandemic alert level to Level 3 and strengthens national restrictions and measures, in response to increasing level of community transmission. Such as, closure of leisure and entertainment venues, new social distancing measures, restricting indoor gatherings, close all schools and kindergartens and workplace rearrangements (working



in multiple offices, distance working and flexible working hours). Due to past successful experiences, most Taiwanese were optimistically expecting to return to their normal lives in just two weeks. However, as the number of daily new confirmed COVID-19 cases increases every day, the level 3 epidemic alert had been repeatedly postponed, from two weeks to three and a half months. The government has not announced a stricter lockdown strategy, with Taiwanese self-discipline, although the influence of semi-lockdown is about one year behind the world, has already occurred gradually. This article will outline the impact of COVID-19 on Taiwanese families, with particular attention to families with school-age children.

Family Impact Before May 2021: Taiwan is another parallel world outside of the impact

A research team composed of ICSW President, Fen-Ling Chen and Deputy Secretary-General, An-Ti Shih, and Ching-Yu Huang of Keele University in the UK found that from June to August 2020, most of the participants (over 90%) agreed to and followed those border control measures (over 90%). The results were based on a questionnaire survey of 197 two-parent families with school-age children in Taiwan. In terms of lives within Taiwan, the government rationed facemask distribution, enforcing facemask wearing in public transportation, encouraging social distancing, cancelling large gatherings, and suspended leisure and entertainment venues. These domestic pandemic control measures were still met with high levels of agreement (over 80%) and adherence (over 85%). However, such nationwide control may have caused more than half of them felt moderately to extremely stressed (63%) and anxious (58%) during the pandemic period. Moreover, in 2020, the pandemic situation did not affect the daily child-care and spousal interaction too much, as schools, child-care facilities, and most employment sectors remained open, but the ever-changing pandemic situation and the invisible health threat can still take a toll on the participants' mental wellbeing in Taiwan.

The research team also conducted a qualitative research on 22 families with school-age child in different employment sectors to explore the impact of the pandemic from May to November 2020. The results fully supported the questionnair servey. The results confirmed that families did followed the meausres: face-mask wearing in public, washing hands more frequently, self-cleaning and disinfecting after returning home and changing into household clothes before home activities. Participants also use video meetings instead of physical contacts with their elders to protect them from possible infections. Some interviewees said, "How deep the love is, the distance would be kept." Some families still face their financial challenge due to the pandemic. The findings suggested that the extent to which the families were affected depended heavily on how their industries and housedholds responded flexibly to the ever-changing global pandemic situation, and the support which government provided to the industries and households in need.



Family Impact After May 2021: Taiwan inevitably face the huge impacts

However, participating families are facing totally different impacts since May 2021 when there have been spikes in daily confirmed cases and community transmission in Taiwan. The government raises epidemic alert level to Level 3 and strengthens national restrictions and measures, such as, closure of leisure and entertainment venues, new social distancing measures, restricting indoor gatherings, close all schools and kindergartens and workplace rearrangements (working in multiple offices, distance working and flexible working hours) in response to increasing level of community transmission. Participating families are facing varying degrees of tension caused by the measures, depending on the child's developmental stages. Parents with children under elementary school have to facilitate their children's online learning courses. However, the effectiveness of learning at home often varies greatly due to the preparation of school teachers, who are also facing the hasty measures caused by community transmission. If the teachers' digitial capabilities are relatively insufficient, or the lessons could not be conducted in a structured manner, parents have to take on much more roles to help their children keep learning and completing the class assignment, as well as arrange children's daily life so that the children can vent their vigorous energy. At the same time, parents have to take into account the quality of their WFH work, not to mention extra housework sine most family members are at home. Our participants with children under elementary school usually expressed their exhausts in their follow-up interviews.

Fortunately, for families with children above middle high school, teachers often have more supports to develop their digitial capability, and are able to take more structured online courses, but on the other hand, parents need to reduce their worries when recognize their children's relatively lazy learning attitude at home. Regardless of their children's developmental stages, most of the participating parents express that homeschooling and working from home have blurred the boundaries between outside system and household and increase life pressure.

The result of another survey, which was conducted by above-mention research team and the King Car Cultural and Educational Foundation, from the perspective of adolescents also shows similar impact to Taiwanese families after May. This online survey from June 15 to July 5, 2021, collected 18,265 vaild responses, completed by school students over 10 and under 18 in Taiwan about the impact of COVID-19 on their daily lives. About 64% participants indicated that they wanted to go back to their original school life, and the ration of elementary school students was much higher to 71.2%. The younger the higher willingness they have to return to school (p<.00).

After the outbreak, the suspension of classes did cause most parents to forbid their children to go out for about 3.5 months for safety. "Online lessons from home" and safety considerations for pandemic prevention have influenced young people's social and gathering activities, and caused 72.2% participants to feel depressed. 80% of participants worry that themselves or their family members will be infected. Compared with the international sever pandemic situation in April 2021, 67% of participants got worry,



and 47% in March 2020. It indicates that this wave of pandemic in Taiwan has caused a huge psychological burden on teenagers because their daily lives have been directly affected. It should be mentioned that compared with other group, students who are female, in elementary school, from rural areas or single-parent families are more concerned about being infected(p<.000). This seems to mean that children with higher economic risks are more concerned about infection.

The pandemic does not bring only negative influences. The results have shown that 56.3% of participants feel their relationships with family members are improved due to spending more time with each other. Elementary school students are the most obvious(p<.000). The qualitive research from the same research team confirmes this outcome. Most participanting families mention that the pandemic makes them reconsider what the important values for their life are. Spending quality time with family members in a healthy state was not their priority in the past busy life. When the pandemic forces everyone to slow down and spend more time with family, participants are grateful for this gift.

Summary and Conclusion

In summary, early response, preventative measures and the spontaneously cooperation from populace had contributed to the success of pandemic control in Taiwan for 2020. During this 1.5 years, the daily life of Taiwanese were almost normal. This slack attitude and low vaccine coverage appeared to be a counterattack after May 2021. Like other countries in the world, Taiwan inevitably have to face the huge impacts of the COVID-19 outbreak. The impacts of the pandemic on Taiwanese households is mostly affected by the family's main income source industry and the stage of family's life cycle. Industries such as tourism, transportation, aviation, and catering are facing greater challenges. Participants who's family main source of household income are from these industries have relatively higher economic pressure. Meanwhile, families in the younger stage of family life cycle have faced higher caring pressure because they have to meet the need of caring for children, with less financial and relationship foundations, and when social distance measure leds withdrawal of the original caregiving manpower and resources, the situation of these young families becomes worse during the pandemic.

It should be reminded that the target population discussed in this article is ordinary households in Taiwan, and the future service. After this impact, it is considered that the future development direction of social welfare services, such as more flexible parental care allowances and parental care leave, public welfare space with the consideration of pandemic prevention costs, and provide enogh safe pandemic prevention space for families with insufficient living space, so that they could have enough activities and get respite for parents, etc. The provision of welfare services also have to reach the new poor families who shoulder the most impacts from pandemic but are not used to apply for the services.



Other material and information

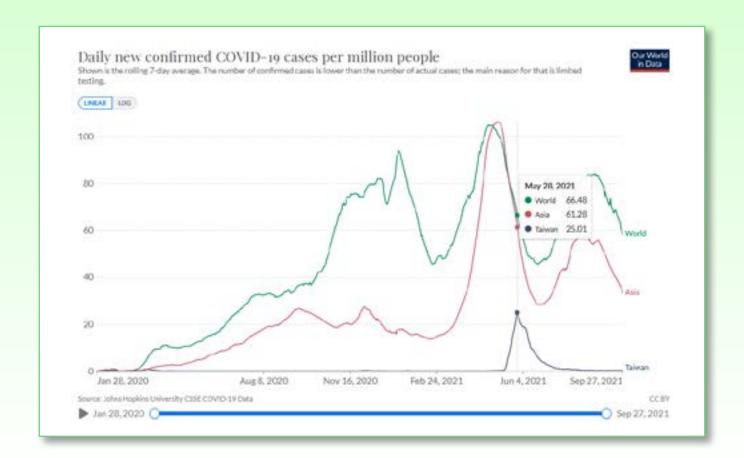
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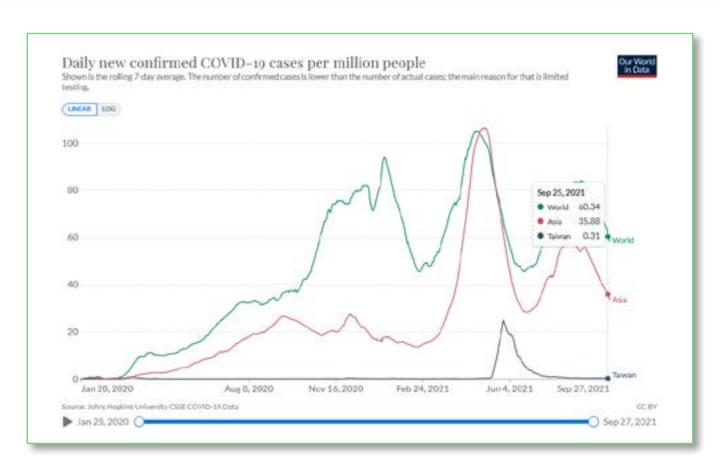
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Charts of Daily new confirmed COVID-19 cases, death (per 1M), and at least one dose vaccine coverage in Taiwan

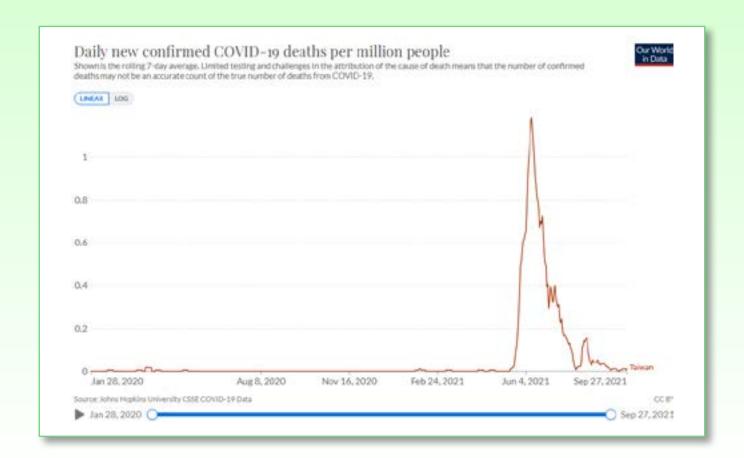
Variable time span	Jan 28, 2020 – Sep 27, 2021
III Jata hiihiished hy	COVID-19 Data Repository by the Center for Systems Science and Engineering (CSSE) at Johns Hopkins University
Link	https://github.com/CSSEGISandData/COVID-19

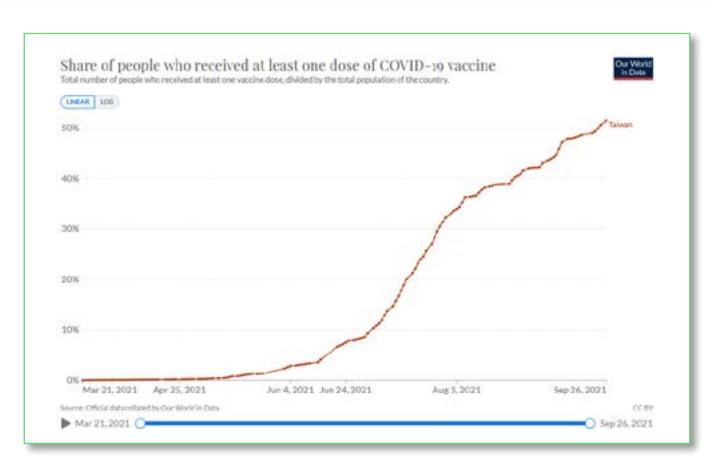














Like other parts of the world, since 2020, Hong Kong has been experiencing the ongoing trauma of the COVID-19 pandemic. The pandemic has hit the economy of Hong Kong badly, and led to differential impacts in the local community and the livelihood of many people of Hong Kong. The unstable development of the epidemic has created many challenges to the government and the society of Hong Kong. At different times, Hong Kong has taken different measures to fight against COVID-19 itself as well as the negative impacts caused by it. The medical sector and the government have, throughout the entire period, been working closely in terms of saving lives, collecting data while releasing accurate and timely information for the general public, and keeping track of the availability, purchase and provision of virus testing and screening methods and services, as well as vaccines. On other fronts of the social and economic impacts, the civil society of Hong Kong has been making tremendous efforts on combating the negative social impacts on the people and the communities. In addition to identification of social needs and advocacy for supports and services, the entire sector has been developing new services and crucial support for both the vulnerable population groups and the NGO sector themselves. Almost two years have passed, although the pandemic is becoming more and more stable, new mutations are still considered latent threats to the society. As for other countries or regions in the world, Hong Kong remains vigilant about the potential challenges arising from the rapidly evolving situation. But to recollect, the city has seen ups and downs in battling the virus.



Situation and impact of COVID-19 infection in Hong Kong

Hong Kong recorded the first COVID-19 case in late January 2020. Within a month, confirmed cases had grown to over 70. As at end of September 2021, there were 12,000+ cases and 200+ fatal cases in Hong Kong.

Compared to the global figure, Hong Kong is not among the most worrying places. In times of hardship, different precautionary and relief measures were implemented for the people of Hong Kong. Unlike many other economies, Hong Kong has consistently held on to the imperative of "Sparing No Effort in Achieving 'Zero Infection'". The Hong Kong Government imposed cross-boundary epidemic control with a raft of preventive measures soon after the outbreak of COVID-19. Infection control measures were launched to strengthen epidemic control to guard against the importation of cases and the resurgence of domestic infections, such as compulsory quarantine, isolation facilities and virus testing. In order to effectively suppress the epidemic in the community, expediting contact tracing, enhancing epidemiological investigations on infectious disease and social distancing were upheld to prevent the spread of the virus, with a view to achieving "early identification, early isolation and early treatment of the infected".

With fighting of COVID-19 pandemic becoming a "new normal", infection management and readiness to respond to different situations were also considered crucial. Ensuring the effective functioning of the healthcare system was considered the most important. Amidst the public health crisis, some regular healthcare services in both public and private sectors were suspended or distorted. The Government amended regulation mandating specific groups of people exposing to higher infection risk to receive virus test or vaccination. The general public was advised to seek medical advice promptly, but there remained concerns about the risk of transmission if the public delay to seek medical attention when feeling unwell.

On economic front, social distancing measures and travel restrictions dramatically reduced economic activities and hard hit the economy. Tourism, trading and logistics, which are the pillar industries of the Hong Kong economy, faced the biggest challenge since SARS in 2003. In the face of the immediate and huge impact of COVID-19, the Government set up a dedicated fund "Anti-epidemic Fund" as relief measure for affected businesses and sectors to help them stay affoat during the difficult time, and by job retention scheme, to curb sharp rise in unemployment that led to more job loss , and hence household income and then consumption reduction .

Despite the effort, as a result of COVID-19, unemployment rate rose markedly to 16-year high and the unemployed population in Hong Kong surged by 107% within a year. At the same time, the number of under-employed persons also increased. Many employees were asked to take no pay leave. With growing number of people becoming unemployed or under-employed, median monthly household income declined sharply in 2020. Although the government announced measures to help many industries hoping



that the businesses could keep the jobs for their employees, the unemployed did not directly benefit. While many laid-off workers faced challenges of basic livelihood, they were either unwilling to fall for or unqualified to apply for the means-tested social security (Comprehensive Social Security Assistance, CSSA). For many of the unemployed, both lower class or middle class, application for CSSA was considered the least preferred option because they did not want to be seen as "undeserving" welfare recipients. Practically speaking, current level of CSSA was hardly enough for even a household of the lower class. CSSA could not offer adequate financial support for the unemployed who were found by the HKCSS research to be not just income earners coming from the lower class but also those from the middle class.

How the social sector is dealing with COVID-19

The pandemic hit not only economy but also the civil society sector in Hong Kong. The impact of the COVID-19 on the social sector was quite significant. Many NGOs reported difficulties in fundraising. Collectively, they faced unprecedented financial difficulties. Services were significantly affected. They were either closed or suspended to prevent virus spread. The pandemic required that each organization and service unit to re-examine and set up new service delivery as well as management practices and policies. To maintain essential and emergency services, social service organizations would need to engage in something which they were not familiar with, such as sourcing and procuring sanitizing products, special protective equipment or devices for staff and service users. Comprehensive infection prevention and control measures were launched to reduce the risk of exposure to COVID-19. With the pandemic situation getting more stabilized in Hong Kong, some types of services gradually resumed normal operation, while some maintained a limited provision.

Despite their own difficulties, the NGOs stayed united to help the society fight the pandemic. Under the HKCSS, the NGO sector used different approaches to deal with different problems and needs like sourcing protective equipment, food assistance, mental issues, etc. The sector acted as a powerful and trusted resource in helping to relieve the ramifications of the COVID-19 pandemic, especially for the more vulnerable sections of society. Social welfare organizations tried identifying resources within the community in response to the emerging social needs. They also strategized their formal service operation in the context of social distancing policy. More effort was also put on exploring different technologies and solutions, as well as enhancing technology literacy for disadvantaged groups. The delivery of many services was converted to online mode to overcome the difficulties caused by social distancing.

Encouraged collaboration and network building further allowed organizations and different sectors to bring their strengths together to fight against the challenges posed by the pandemic. Different collaborative initiatives were worked out to address the social needs. Resources and financial support were ceaselessly harnessed to help the deprived groups, especially for those innovative initiatives springing from the civil society organizations, NGOs or social enterprises included.



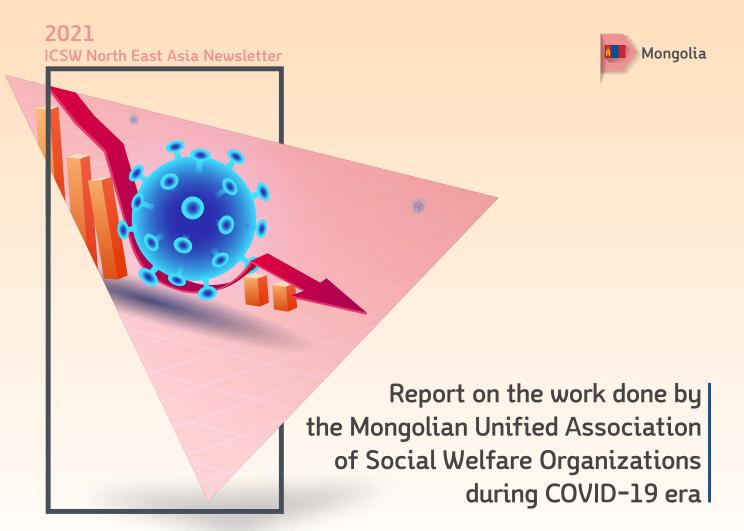
The way forward

Full recovery of the Hong Kong's economy and society in the short run is highly unlikely. We expect that Hong Kong is still going struggle to strike a balance between resumption of economic and social activities and infection control under the "new normal". Although the Government and the civil society sector have already strengthened the anti-epidemic capacity in various aspects, the Hong Kong society is still facing potential and complex challenges of various kinds. There are a lot for us to do.

Firstly, the medium or long term impact of COVID-19 on patients in recovery should be addressed. The medical community in Hong Kong and overseas has already been reviewing the impacts on COVID-19 patients. In addition to medical concerns, a careful assessment of the rehabilitation needs and psycho-social needs of recovering COVID-19 patients and their families would be important for planning of support and service programmes for them.

Secondly, we should examine and explore the new potentials and priorities in social development of the society. For example, further study on the psycho-social impact of COVID-19, the role of different sectors, and their influence on public and health crisis is desirable since these factors have a bearing on the effectiveness of many community infection control measures. On the other hand, social distancing policy implemented has somehow transformed everyday life of the people in society, positively or negatively. For example, the increasing use of information technology has as much opened up opportunities for the community as closed down some other traditional activities valued by people. While we should put more effort on exploring wider adoption of digital technologies in enhancing connectivity and productivity of the society, we should also be careful of how humanity and social connection should be enabled rather than disabled by this. Also, policies and new initiatives to bridge digital divides will be much needed to avoid widening cleavages in the community.

Thirdly, for a future that is sustainable, we must address the challenges which we once again observed during the pandemic related to poverty, inequality and social wellbeing for all. The disparity between the "haves" and the "have-nots" was once again clearly manifested, not just at the individual level, but also at the organizational/institutional level, and the international level with increasing severity of COVID-19 crisis. This has further created societal polarization and undermined social solidarity and stability. Prospects for sustainable development and how this should incorporated into the path to COVID-19 recovery should be discussed with a multi-sectoral perspective. Transformative approaches are essential in order to tackle the increasingly complex problems humankind faces today and to redesign our future. We need to critically examine and reflect on the lessons learned to lay the foundation for sustainable post-pandemic community and society that is inclusive and caring.



During this time, the global epidemic of Covid-19 occurred and Mongolia imposed three strict curfews. Prevention of spread of infection The declaration of a state of emergency

1st: November-December, 2020

2nd: February-March, 2021

3rd: April, 2021

As a result, economic and social problems have increased, and the activities of non-governmental organizations have shrunk. The Mongolian Unified Association of Social Welfare Organizations was supposed to be doing its best at the time, but due to financial and human resources, it was forced to shut down. However, we planned our activities using electronic format, which is our advantage. It is planned to switch to electronic mode and conduct advocacy work in 3 areas.

- 1. Influencing government organizations
- 2. Assist in influencing social workers
- 3. Initiate and support the Food Bank program by influencing the private sector and welfare organizations

Objective 1.

In this context, we re-established contacts with government organizations at all levels and organized e-meetings. As a result, a memorandum of understanding was signed with the Ministry of Labor and So-



cial Protection, the General Department of Labor and Welfare, and the Department of Family and Child Development. We also have the opportunity to work closely with the Ministry of Education, Science and Culture, the Ministry of Health, and the Ministry of Justice and Home Affairs. The Mongolian Unified Association of Social Welfare Organizations was elected a member of the National Committee on Social Work Ethics and a member of the non-staff Council for Participatory Welfare Services of the Social Welfare and Labor Agency. Leads the working group for the development of the concept of social work development policy and the working group for drafting the law on the legal status of social workers and acts as a consultant. He also worked to amend the Social Welfare Law, the Family Law, and the Education Law to protect the rights of welfare organizations and social workers, and to establish an effective system.

Objective 2.

Within the framework of this task, attention was paid to increasing the income of social workers, increasing work coordination and developing them. In November 2020, a working group was established with the participation of 30 social workers from each sector. The working group developed an impact plan for 2021 based on the findings of a 2020 study. These include:

- 1. Organize a national e-discussion once a quarter
- 2. Do research
- 3. Organize training and development activities
- 4. Advocacy to increase public awareness of social work

The national consultation was organized three times on the following topics: "Social protection and ethics of social workers", "Social work education and career", and "Social work services and professional management". The next discussion will be held on November 25 under the theme "Social work policy and legal environment". The purpose of the consultation was to ensure the participation of social workers in each sector and to improve the quality of services. There are three main features of the discussion. First: self-initiated by social workers, Second: non-one-time continuous advocacy activities, and Third: social workers from all walks of life come together.

The problems are the same in every sector. But the service is different. It depends on the job description. The participation of social workers in each sector to express their views and contribute to the development of social work varies. The social worker needs to be a bridge between the government and the public. Because we've been working with cases for 20 years. But the results are poor. Therefore, we have to work with policy and pay more attention to prevention. There is nothing wrong with working with cases, but 20-30 percent of our work should be dedicated to public participation and prevention.

In addition, it is important to consolidate your understanding of professional guidance. Every social worker is faced with something they cannot and do not know. To overcome this, you need the help of a professional consultant. However, the lack of this situation in our country has a negative impact on the



quality of professional services.

Finally, there is a lack of coordination and cooperation between social workers in each sector. Therefore, it is necessary to work closely to improve the quality of social work services, develop themselves, and ensure public participation, and to take the development of Mongolian social work to the next level by adopting the Law on Social Work Development Policy and the Law on the Legal Status of Social Workers.

Objective 3.

Food Bank is working with the Korea National Council on Social Welfare and the Mongolian General Department of Labor and Welfare to launch the program. We are also working with GFN.

Preparations for the launch of the program in 2020 began and promotional materials were prepared and distributed. We met with the business entity and offered to cooperate. We also organized events in certain areas.

However, due to the pandemic, it will shrink in 2021. However, we are in constant contact with our partners and hold online meetings. We also participate in international online conferences. Preparations are underway for 2022 with the goal of achieving significant results.