**Covid-19 Pandemic: A Social Welfare Perspective**

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***Abstract:-*** *The enormity of Coronavirus (COVID-19) pandemic has affected not only social life but also economic activities. Apart from epidemiological and biological factors, societal and financial aspects are also governing the viral spread among populations. The devastating effects of the disease have placed an enormous burden on families, primarily concerning the care of children and the elderly. Consequently, companies, non-governmental organizations, hospitals, and national administrations are strengthening their social protection strategies by responding through various essential methods to mitigate the impacts. This paper seeks to explore the social welfare perspective of Covid-19 by describing the pandemic's effects on service provision. Specifically, it will investigate the differing initiatives adopted by governments, companies, non-governmental organizations, and individuals to lessen the impact on various societal aspects. Further, it will examine the potential cultural, political, and community issues that may cause resistance to social welfare programs in different geographical regions across the globe. The study will use a qualitative design, which will entail a review of existing scholarly and public literature on the subject matter. The analysis revealed that COVID-19 had generated different social welfare concerns in different nations due to political, cultural, social, and economic dissimilarities. These issues should be addressed for any meaningful impact on society to be realized.*

***Keywords****:- COVID-19, pandemic, social, welfare, distances*

**Introduction**

Coronavirus (COVID-19) is a highly infectious viral disease affecting the human breathing system. The ailment is particularly severe among the elderly, especially those suffering from underlying medical issues, including diabetes, cancer, heart problems, and chronic respiratory diseases. The first case was reported in December 2019, when Wuhan, China, reported a small outbreak (McGregor, 2020). However, the infection spread quickly to other countries and became a global threat. Many nations were unprepared to handle the disease. Within no time, hospitals were overcrowded, and deaths resulting from the virus skyrocketed. As of May 2020, the world has recorded a total of 4.2 million infected cases, while the death toll is at about 280000 (Malik, 2020). The sickness is transmitted

primarily through contact with nasal discharge or saliva droplets of an infected person when they sneeze or cough. Currently, there are no vaccines, but people are getting healed through specialized treatments. However, clinical trials are ongoing to evaluate potential curative and preventive drugs.

In an attempt to control the disease's impacts, governments of affected countries responded by implanting social distance restrictions, including the closure of airports, shopping malls, schools, major cities, restaurants, and borders. The most severely affected states, such as Spain and Italy, imposed a total lockdown, whereby people were banned from getting out of their houses (Li & Li, 2020). Consequently, a significant downturn in the global economy has resulted from these reactions. Currently, there is slow international trade, a drastic drop in stock prices, bankruptcy in businesses, and a widespread loss of jobs (Karseva & Kuznetsova, 2020). While the restrictions have a notable impact on reducing the transmission of COVID-19, the disease's spread among populations varies from one country to another. Several economic and social factors are suggested as potential determinants for the ailment's outcome. According to Stein (2020), the sickness is prevalent in the aging population, while some argue that weak health care systems in many nations are a leading cause of spread.

The devastating impacts of Coronavirus require not only immediate but also long-term emergency response procedures. Therefore, there is a need for strengthening social reaction for impact mitigation. Social welfare systems are crucial for protecting the vulnerable during times of crisis. However, is most countries, the coverage of the services is limited, prompting the necessity for upgrades in response strategies during this outbreak (Karseva & Kuznetsova, 2020). Various organizations and governments have deployed financial aid, housing funds, and foodstuffs to help individuals and families affected by COVID-19 and help them cope with the consequences. Moreover, social workers are at the forefront of ensuring the welfare of the communities that they serve. Notably, they are offering counseling services and ensuring mental wellbeing during isolation (Mitra & Mitra, 2020). In other areas, social welfare groups are active in promoting the distribution of factual information to overcome the fear brought about by myths reaching people, especially in rural areas. Furthermore, agencies are assisting in emergency preparedness and ensuring that there are inclusive efforts during planning as well as advocating for increased government support (Danielsson et al., 2020). A protected, well-equipped, empowered and adequately supported social welfare network is crucial to mitigating the damaging effects of the virus. Community service providers can take advantage of their existing ties with families to offer a rapid response in the most effective ways.

**Problems**

With the current spread in COVID-19, it is estimated that, in the near future, between 40 to 70 percent of the global population could be affected (Kickbusch et al., 2020). There is increased vulnerability, especially among people who cannot afford self-quarantine and treatment, thereby endangering their lives and those of others (Li & Li, 2020). It is worth noting that if one country is unable to contain the virus, then the whole world is at risk of infections and re-infections. In addition, more than 40 percent of the global population lacks access to national health care services, and some have no health insurance. A further 800 million use about 10 percent of their income on medical care, while about 100 million others live in poverty (Kickbusch et al., 2020). Consequently, people under the described category are likely to be short of means for seeking treatment, especially after contracting the highly contagious Coronavirus. Another critical issue for consideration is that the majority of workers in developing countries lack the security of sick leaves, as well as the capacity to deal with unexpected emergencies (Barnett-Howell & Mobarak, 2020). It is, therefore, likely that they may lose their jobs if they take time to seek medical treatment. As a result, such people continue working even when they experience the ailment’s symptoms, thereby endangering public health.

Across health care, security, social protection, and economic spheres, Coronavirus impacts have disproportionately affected women and girls by virtue of their sex. Evidently, women typically earn less or in insecure employment, while others live in poverty. While health reports show that the death rate resulting from COVID-19 is higher in men than women, the latter are unsympathetically affected due to misplaced priorities in resource reallocation, including reproductive and sexual health services (Tepepa, 2020). In addition, with the children out of school, the provision of basic needs is overwhelming the mothers living in poverty. Gender violence is also high due to the widened social and economic stress, coupled with controlled movement. The majority of women are forced to stay at home with abusive men, and social services are inaccessible or disrupted (Barnett-Howell & Mobarak, 2020). These impacts of the ailment have heightened conflicts, emergencies, and fragility at the time when social welfare and institutional capacity is undermined. The effect on women and girls shows that COVID-19 has not only challenged global health care systems but also tested the human spirit.

The calamity has caused production disruptions across the globe. Businesses are seriously challenged regardless of their size, especially those in the tourism, hospitality, and aviation industries. The real threat takes the form of a dramatic drop in revenues, job losses, and insolvency in certain regions. Consequently, small and medium enterprises operating in such areas are finding it difficult to sustain their operations (Krsak et al., 2020). Additionally, travel bans, lockdowns, quarantines, and border closures are preventing people from journeying to their workplaces or continuing with their jobs. Consequently, relative poverty levels may skyrocket due to the lack of income, particularly in the informal sector or for people in casual employment (Ennals, 2020). Consumers are now unable to purchase essential commodities and are living in fear and uncertainty.

COVID-19 has caused a noteworthy social welfare crisis. As the pandemic continues to spread throughout the world, a considerable degree of worry and fear is induced in populations, particularly among the elderly suffering from underlying medical issues, and caregivers. The primary psychological impact affecting individuals is anxiety and stress. People’s daily routines have been disrupted, whereas others have lost their source of livelihood. It is, therefore, expected that cases of depression, loneliness, and drug use, leading to suicidal thoughts and actions or self-harm, might rise (Jacoby, 2020). Mental health and the wellbeing of frontline workers are now a public health concern.

**Aims**

Coronavirus poses a continuing threat to social welfare systems. The latter are supposed to offer aid to individuals and households most affected by the pandemic through initiatives, such as food stamps, health care, housing assistance, unemployment compensation, among others. Emergency responses in various countries, including the United States, have revealed essential fissures in their safety nets and disaster preparedness. They have exposed a widespread lack of access to critical services, such as child care, sick leave, and health insurance. The social distancing measures implemented in numerous jurisdictions have culminated in pervasive layoffs, which have particularly affected employees in the travel, food service, and retail industries, who typically work on an hourly basis (Kartseva & Kuznetsoza, 2020). As the ever-increasing unease over unemployment and the subsequent lack of income in numerous households persists, the debate concerning the affordability and accessibility of health care services has taken center stage in political and social circles. Undoubtedly, COVID-19 bears severe connotations for social welfare systems that need to be addressed collaboratively by all stakeholders.

The notable impacts of Coronavirus underscore the need for adequate emergency preparedness plans to allow governments, nonprofit organizations, corporate bodies, and individuals to respond appropriately to crises of global proportions. The present research aims at investigating the social welfare initiatives implemented in various countries, their target populations, and efficiency at alleviating COVID-19’s impacts on individuals and families. The findings of this study may be used by policymakers to design and execute proper measures when epidemics strike. They can also be used for monitoring and evaluation purposes to help stakeholders assess the effectiveness of their programs. The recommendations can be used to take crucial corrective actions or determine which strategies deliver optimal results for specific populations. Further, this study will delve into the intricate relationship between political, social, and cultural influences and the acceptance of services by individuals. Notably, it is not enough for stakeholders to offer assistance. People also have to be willing to acknowledge the help. Otherwise, any efforts will be futile. Accordingly, the factors that may cause resistance among the populace will also be identified. The results can be used to craft policies that fit within society’s context, thereby boosting the success of social welfare activities.

**Method**

This study will utilize a qualitative study design. Specifically, a detailed review of the existing literature will be conducted using reputable, accurate, and valid sources. The resources will include newspaper articles, government publications, peer-reviewed journal articles, and books. They will be gathered using a comprehensive search on the Internet and various online databases, such as Google Scholar and Ebscohost, using a predetermined set of keywords. Rahman (2017) notes that qualitative research generates a detailed analysis of the subject matter by facilitating a holistic comprehension of the human experience in particular contexts. Moreover, this technique is ideographic, which implies that it allows for the investigation of individual events and cases. Accordingly, it enables researchers to dig deeper into diverse opinions and facts. It also aids in determining the connection between culture and meaning. Therefore, a qualitative approach is best suited for this project because it will provide an opportunity to go beyond the mere description of occurrences. It will make it possible to create inferences concerning the motivations of the various social welfare stakeholders. The information can be assessed in a specific social context by incorporating a cultural perspective, thereby eliminating the potential for bias. Further, this method will facilitate the evaluation of data on a case-by-case basis, which means that each country's responses to the COVID-19 pandemic will be appraised without influence from data from other nations. As a result, it will increase the accuracy of the findings, thereby enhancing the practicality of the recommendations.

**Results and Discussion**

The worldwide outbreak of Coronavirus is unprecedented. According to Mitra and Mitra (2020), the pandemic’s impacts are evidence that today’s societies are only as secure as the most susceptible ones. The inability of one nation to contain the disease poses the risk of infection and re-infection to millions of people. Nevertheless, COVID-19’s rapid spread across the world may symbolize a critical failure by the established social protection mechanisms to safeguard the livelihoods and welfare of vulnerable factions. Every nation across the globe has set up some sort of protective measures to shield citizens from the pandemic (Blose et al., 2020). The efficacy and success of these mechanisms vary from one jurisdiction to another, primarily due to financial, social, cultural, and political factors.

The United States was one of the few countries that reported new infections shortly after China confirmed the first case of Coronavirus in December 2019. On 21st January 2019, authorities declared a public health emergency as the number of affected states increased. As of 30th March, the nation was the most affected in the world, having recorded over 143,000 patients and more than 2400 deaths (Chowell & Mizumoto, 2020). Experts continued to make worrisome projections of the illness' spread due to the high rates of human-to-human transmission in various states, including Washington and Oregon. Subsequently, the local, state and federal governments implemented stringent measures to curb the spread of the disease, such as 14-day mandatory quarantine for all inter-state travelers, mass testing, social distancing rules, and restrictions on voyages. The administration also embraced legislation as a way of preventing further transmissions (Vara, 2020). The Senate approved the Emergency Coronavirus Response Bill and other laws, which allocated billions of U.S. dollars to states and some of the most vulnerable countries, such as Nepal, Afghanistan, and Sri Lanka, among others, to support their efforts to fight the pandemic.

As the seemingly remote viral illness morphed into a global epidemic, concerns over the virus’ connotations on social welfare took center stage in the U.S. COVID-19 has demonstrated unprecedented resilience, with its capacity to be asymptomatic in particular hosts fueling its transmission rate. The disease has stretched the country’s resources to the breaking point. While the country had to invest in the manufacture of new respirators, it faced an even more serious problem of the deficiency of trained clinicians to manage patients in health care facilities (Courtemanche et al., 2020). Moreover, Bhar (2020) posits that the state and federal responses to the pandemic in the United States have been rather slow. Despite early warnings of the potential problems, the government failed to implement proper protective measures in time, perhaps due to jurisdictional healthcare regulations, the lack of a universal health care system, a pervasive sense of personal liberties, and the influence of private health companies. Coupled with the apparent lack of coordination between health experts and the White House, these issues have posed grave social welfare concerns in the country.

According to the Human Rights Watch (2020), the disease's outbreak has illuminated the severe economic inequities and fragile or inadequate social protection systems that have increase communities' susceptibility and left them to bear the brunt of the crisis. In this regard, the U.S. Senate and the House of Representatives passed the Families First Coronavirus Response Act to provide a safety net to households and address the ailment's effects on their livelihoods. Nevertheless, Van Bavel et al. (2020) note this move would be ineffective since the legislation only 20 percent of the country's workers would have access to sick leave. Specifically, firms with less than 50 workers can seek an exemption, while those with over 500 employees are exempted by law's design. Therefore, people working in industries that fall under these categories, such as retailers, restaurant chains, and supermarkets, are not protected.

Notably, the majority of the measures implemented in the United States seem to be tailored for the short term. For instance, the proposed payroll bailouts and tax cuts to specific sectors cannot be maintained for a prolonged period. Further, such monetary responses, despite being costly for the country, do not have substantial benefits for the working population (Gates, 2020). According to Courtemanche et al. (2020), the benefits of abolishing payroll taxes would be disproportionately substantial to the top 20 percent of American earners while the benefits reaching the bottom 20 percent would so meager that they would hardly cover their needs. Such measures would also not help the unemployed or people working in the informal sector. Other individuals that would not benefit from these measures include the more than eight million illegal workers in the United States and those that are ineligible for unemployment benefits.

Bedford et al. (2020) argue that addressing the social welfare needs of any population amid the unending spread of the Coronavirus pandemic requires more than financial support. Fringe benefits, such as child benefits, increased access to medical services, food stamps, among others, would be more effective at alleviating the outbreak's burden to society. The Chinese government seems to acknowledge the excessive burden caused by COVID-19 on disadvantaged populations. Besides the typical steps that most administrations across the globe have adopted, the government of China also extended diversified aid, such as unemployment benefits, to its vast population of rural migrant workers, who are most vulnerable to infection (Nacoti et al., 2020). The premier, Li Keqiang, is on record conceding to the emergent need to take urgent measures to guarantee the livelihoods of the scores of people living in the country. In one initiative, the Chinese authorities allowed contractors working on state-funded infrastructure to raise their expenditure on wages from 10 to 15 percent in an effort to increase employment opportunities (Swart, 2020). This strategy could be more effective than the United States' tax cuts because it will provide money to the needy. The country's commitment to improving the living conditions of the people has also been demonstrated by the State Council's decision to provide minimum living guarantees to those not covered by welfare programs.

Regional governments in China have also taken steps to improve people’s welfare. In Beijing, Shanghai, and Guangdong province, for instance, the local government enacted several preferential policies to ensure that small and medium enterprises continue to be operational and productive (Tang, 2020). These guidelines touch on essential aspects of business, including social security, finance, rent reduction, taxation, and subsidies (Swart, 2020). Their primary difference from those in the U.S. is that, rather than providing relief for firms that meet a predetermined inclusion criterion, the Chinese government has adopted blanket policies that are applicable to all companies, irrespective of size or revenue levels (Aleem, 2020). Accordingly, firms can reduce their expenditures and save costs, thereby leaving enough money that can be used to pay workers, even those affected by the illness, instead of laying them off.

The measures taken by the Chinese government may be impressive, but the rapid rise in human rights violations threatens to erode all gains. By mid-March 2020, about 60 million were under forced quarantine in Hubei province (Ahn, 2020). Such drastic or draconian measures have helped the country to slow down the spread of COVID-19 and flatten the curve. However, some factions have faulted the high humanitarian cost at which these achievements have been realized. For instance, according to Amnesty International (2020), the government insisted on suppressing vital information on matters of public interest, which amounted to a violation of human rights. Other than the suppression of the freedom of speech, the government also instituted surveillance and tracking strategies that may be considered to be somewhat excessive by the Western world (Swart, 2020). Indeed, China has been committed to controlling the outbreak's narrative by publicizing the rapid construction of hospitals, the toiling of health care professionals, and the recovery of patients. However, this strict control poses considerable social welfare problems since appropriate corrective actions cannot be taken in the responsible agencies lack sufficient information to deal with the crisis.

South Korea’s case contrasts heavily with that of virtually every other developed country in the world. In April 2020, The Korea Centers for Disease Control and Prevention announced that the country had managed to reduce the number of new COVID-19 infections to single digits in just two months (Aleem, 2020). These accomplishments allowed the government to relax its restrictions on the operations of religious, entertainment, and indoor sports facilities, although the existing social distancing policies were extended (Duddem & Marks, 2020). For a nation that had the second-highest number of confirmed cases in the Asian continent, these developments indicate the efficacy and success of the country’s aggressive contact-tracing and testing mechanisms.

Unlike the United States and China, whose governments were seemingly reluctant to take action, the South Korean government assumed a proactive stance. Its response could have been based on its earlier experience with the Severe Acute Respiratory Syndrome (SARS) pandemic in 2003 (Van Bavel et al., 2020). Health agencies within the country started testing scores of asymptomatic individuals and implemented tracking technology to convey information that residents could use to avoid high-risk areas. South Koreans also received a monthly subsidy of 313 U.S. dollars to cover basic living expenses (Aleem, 2020). While it may not have been substantial, the stipend allowed people to afford daily subsistence. Other factors that may have contributed to the nation’s success in flattening the curve include the abundance of hospital beds, the universal health care system, and low medical fees.

The case of South Korea provides numerous essential social welfare lessons that other nations should emulate. Firstly, it is critical that governments across the world prioritize the provision of adequate protective gear, such as face masks, to health care providers. In countries such as the U.S., Spain, and Italy, infections among medical staff and physicians impeded all actions intended to curb further spread of the virus. The lack of sufficient protective equipment undermines all current efforts to control the epidemic (Ranney et al., 2020). Moreover, there is an urgent need to avert the risk of infections in hospitals. In South Korea, the administration reorganized the entire health care system to prevent human-to-human infections among patients. People showing symptoms of COVID-19 are encouraged to call a dedicated hotline, through which they can either acquire an initial assessment or get directions to the nearest testing facilities, of which the country has numerous (Ahn, 2020). The latter have reduced testing time and allowed medical professions to focus on treating people with severe symptoms, thereby reducing the mortality rate.

Unlike most other countries, all citizens and foreigners with the South Korean boundaries can enjoy government-sponsored medical care, basic living expenses, and paid leave. The administration also enacted arduous but extensive contact tracing mechanisms by embracing technology. This effort has helped to prevent further infections, thereby easing the burden in care providers. Indeed, South Korea did not need to implement a lockdown of any kind (Ahn, 2020). The people supported the government’s initiatives, which negated the need for most of the measures adopted by Western countries. South Korea’s success also symbolizes the need for transparency in information dissemination, a positive culture, and leadership in combating the spread of COVID-19.

The COVID-19 pandemic has entered a new stage in Singapore. Initially, the country's government dedicated efforts towards decreasing imported infected cases through imposing social distance protocols and travel bans. However, local infections are now on the rise. Currently, nonessential services and schools are using online platforms, while tighter rules for restricting social interactions have been adopted (Lee et al., 2020). The state has also recorded spontaneous growth in the number of positive cases in dormitories occupied by foreign workers driving up national cases exponentially. As of March 29th, the number of new infections was 942, but currently, the country is recording more than 942 positive individuals per day (Pung et al., 2020).

The Singaporean government has formulated strategies for preventing further spread of the virus to the residents. Health agencies are advising people and businesses on how to protect themselves from contracting the ailment. Businesses should prioritize fundamental activities that require face-to-face interactions and ensure that screening procedures are put in place at the workplace. In addition, people whose symptoms of the disease are directed control movement and avoid going out, but rather inform medical practitioners for further help (Wong et al., 2020a). Strict regulations have been put up in ports and entry points. Currently, the country is under partial lockdown, and people are advised to stay at home. Harsh penalties are enforced to people who defy government directives.

Given that Singapore has a dire scarcity of medical capacity, a government task force took measures to convert public sector facilities into makeshift hospitals and stores for therapeutic supplies. However, due to the prolonged crisis, the facilities are overwhelmed while the stockpiles are getting limited. Efforts are now made to maximize and conserve resources. Individuals are advised to wear face masks only when sick and COVID-19 testing is only conducted on people who show symptoms. A number of isolation protocols are adopted, and only the seriously ill are admitted in hospitals (Wong et al., 2020b). While the number of cases in the country is still high, the health sector has not yet put up measures for mandatory testing. The government also aims to create a balance between normality and compliance from the population. Polices are made to ensure that businesses and normal life since the outbreak seems to take longer than expected (Wong et al., 2020a). In addition, the government has introduced financial aid to counter the economic impacts of the Coronavirus.

The state government came up with Unity Budget, which was meant to supplement the residents’ household expenses, support health care workers offering frontline services, and stabilize businesses. A financial resilience plan was established to help firms in the aviation and tourism industries, offer wages to local employees, and hold up other companies. Lastly, solidarity budget was provided to support businesses with loans, subsidies payment for workers earning less than 4600 Singaporean dollars, and for other welfare payments (Pung et al., 2020).

**Conclusion**

The spread of Coronavirus in numerous regions across the globe seems to be unending, and numerous countries continue to report increasing numbers of new infections and deaths. Accordingly, governments have adopted a wide range of potential solutions to reduce the infection rate and flatten the curve. In the United States, the rampant inequalities have produced challenges for the executing of protective measures. Specifically, some households fall beyond the provisions of new laws enacted by the Senate and House of Representatives. Consequently, such people are left to bear the brunt of the illness. Similarly, in China, the government has reported to a draconian strategy of withholding crucial information, thereby hindering the effective discharge of social welfare schemes. However, the administration has managed to implement adequate measures to provide financial relief to rural populations, especially among immigrant workers, to ease their COVID-19 burden. South Korea, on the other hand, has managed to reduce its numbers to single digits in only two months, thanks to carefully structured response mechanisms. The country's residents can access vital social welfare services and have abided by government regulations, thereby reducing the spread of the disease. Accordingly, the efficacy of any schemes intended to curb the transmission of Coronavirus should address the more important social concerns to ensure their success in the long run.

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