

State and Nonprofit Organizations Relationship Model in South Korea's Response to the COVID-19 Pandemic

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Abstract: At the end of 2019, a new category of infectious virus that had never been identified in humans emerged, namely severe acute respiratory syndrome (SARS-CoV-2) or COVID-19. South Korea emerged as one of the few countries that was applauded for their success measurement in the COVID-19 handling. Many analysts and commentators attributed the success to the relations between South Korea's government and non-profit organizations relations in the country. This article will discuss the supplement, complement, and adversary models in non-profit organizations and state relations in handling COVID-19 in South Korea. Data were taken by using qualitative research methods with a literature study approach derived from books, journals, government and community reports, media, and regulations. The findings show that there is a multilayered relationship between the three models that equip each other and widely found from the first wave of COVID-19 to the fourth wave.

Keywords: Nonprofit Organizations – State Relations, Supplement Model, Complement Model, Adversary Model, South Korea, COVID-19.

Abstrak: Di penghujung tahun 2019, muncul kategori baru virus menular yang belum pernah teridentifikasi sebelumnya pada manusia, yaitu severe acute respiratory syndrome (SARS-CoV-2) atau COVID-19. Korea Selatan muncul sebagai salah satu dari sedikit negara yang dipuji karena keberhasilannya dalam penanganan COVID-19. Banyak analis dan komentator yang mengaitkan kesuksesan tersebut dengan hubungan antara negara dan organisasi nirlaba di negara tersebut. Artikel ini akan mendiskusikan model suplemen, komplemen, dan berlawanan dalam hubungan antara organisasi nirlaba dan negara dalam penanganan COVID-19 di Korea Selatan. Data dikumpulkan dengan menggunakan metode penelitian kualitatif dengan pendekatan kepustakaan yang berasal dari buku, jurnal, laporan pemerintah dan masyarakat, media, dan berbagai peraturan pemerintah. Temuan menunjukkan bahwa ada hubungan berlapis antara tiga model yang melengkapi satu sama lain dan banyak ditemukan tersebar mulai dari gelombang pertama COVID-19 hingga gelombang keempat.

Kata kunci; Hubungan Organisasi Nirlaba - Negara, Model Suplemen, Model Komplemen, Model Berlawanan, Korea Selatan, COVID-19.

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INTRODUCTION

At the end of 2019, a new category of infectious virus that had never been identified before in humans emerged, namely severe acute respiratory syndrome (SARS-CoV-2) or COVID-19, which was first detected in Wuhan, China. COVID-19 is a new variant of the previous ones, namely MERS-CoV and SARS-CoV and is spreading rapidly to other countries. This new case caused a global pandemic and has been declared a public health emergency of international concern by the World Health Organization. The effects of the pandemic are damaging globally, and it creates a sense of solidarity and responsibility all over the world (Kusumawardhana, 2021). In a crisis situation, the handling is not only handled by the state itself, but also involves community support. Good government and community partnerships can minimize losses from the pandemic (Velavan & Meyer, 2020).



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The government has taken various steps in fighting the pandemic, but community involvement is essential in providing social services during this extreme event. The important role of communities in fighting COVID-19, either by strengthening government-led efforts or by filling the institutional void left by the government. This paper is then built with a basic question: How is the state and nonprofit organizations relationship model in South Korea's response to the COVID-19 pandemic. This paper will use a multilayered approach, where there will be a supplement, complement, and adversarial lens according to Young (2000). This model is used with the aim of understanding and demonstrating the dynamics of government-nonprofit relations at various stages of the COVID-19 waves in South Korea. This paper can open up opportunities for further research on the role and nature of cooperation between actors in health crises.

South Korea reported its first case on January 20, 2020. In the initial handling of COVID-19, the government has never imposed a national quarantine (lockdown), but instead adopted a policy of intense testing, tracing, and isolation. The South Korean government launched three policy response strategies, namely: (a) Fast and agile action, (b) "3T" action, in the form of extensive testing (testing), contact tracing (tracing), and strict treatment (treatment), and (c) Cooperation between the public, the private sector and public awareness. This strategy can also be called the "TRUST" strategy, which stands for Transparency, Robust screening and quarantine, Unique but universally apply testing, Strict control, and Treatment (You, 2020).

In response to testing, South Korea works with the private sector to build screening test facilities (through hospitals, local health centers, drive-through and walk-through facilities) and COVID-19 diagnostic laboratories to ensure an adequate supply of tests from the start of the pandemic (Sangil Kim & Lee, 2020). This test facility is conditionally free for all people and can also be paid below the highest fixed price. In the tracking response, South Korea requires infected patients to be hospitalized or self-isolate for close contacts. Contact tracing is carried out in collaboration with local governments and nonprofit organizations with the community in a location, reporting voluntarily, or using other tracking sources such as credit card transaction history, GPS tracking of vehicles and mobile phones, travel history, and CCTV footage through inter-ministerial collaboration. In addition, a QR Code KI-Pass application system was also developed which is used by the public when entering public facilities in high-risk areas (Oh et al., 2020). In response to treatment and care, the South Korean government restructured the hospital system, built temporary hospitals to increase capacity, and ensured the availability of hospital beds, personal protective equipment, masks, disinfectants, and drugs. At the beginning of the pandemic until early June 2020, the government implemented a rotation system for purchasing masks according to the year of birth due to the limited supply of masks in South Korea (Paek & Hove, 2021). The nonprofit organization then began to help supply health and sanitation equipment for both medical workers and the community. The government appointed the Korea Disease Control and Prevention Agency (KDCA) as the main gate for handling COVID-19.

South Korea's National Assembly through Decree Enforcement of the Infectious Disease Control and Prevention Act, Presidential Decree No. 29180 on February 26, 2020 passed the March 3, 2020 amendment which stipulates: (1) All citizens have the right to receive medical diagnosis and treatment of any infectious disease and state and local governments must bear the costs incurred in it, (2) Implement punitive measures for violating self-quarantine up to 1,000,000 Won or 1 year in prison, (3) Authorizing legal authority officials to provide masks for children and the elderly in public health crises involving any respiratory virus, and (4) Mandatory disinfection duty rules for the government (Park & Chung, 2020).

To reach the public better, the government and nonprofit organizations continue to carry out health campaigns (cough etiquette, wearing masks, using hand sanitizers, and go to doctors), maintaining social distancing and staying at home. Sources of information are conveyed transparently through daily briefings on KTV's official Facebook and YouTube accounts, official mobile websites and applications, as well as phone messages and notifications on mobile phones. The government through four levels of social distancing strongly controls community gatherings, but relatively does not restrain the movement of people and still opens international borders on a limited basis (Choi, 2020). To expand the COVID-19 tracing policy, the government through advocacy from nonprofit organizations also ensures that foreigners who do not have a residence permit/work permit or are not registered with the National Health Insurance in South Korea can still check themselves (Sook Yoon et al., 2021)

Nonprofit organizations have participated in the success of efforts to suppress the spread of COVID-19 by distributing advocacy assistance and proposing changes in handling policies (adversary), especially for minority communities, so that policies are more equitable. In addition, there are also volunteer activities for community groups affected by the pandemic such as fundraising and providing economic and health assistance (supplement), such as quarantine and sanitation supplies, food, and necessities. Nonprofit organizations and local governments also synergize in distributing health assistance programs and disseminating surveillance information among the community (complement). The actions taken are in the form of coordination of aid distribution, cooperation in supervision in an area, and distribution and supply schemes for medical and basic needs. The involvement of nonprofit organizations with the government aims to make handling and communication more effective.



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RESEARCH METHOD

This paper uses a qualitative method with a case study approach to find out the relationship between nonprofit organizations and the state in the successful handling of COVID-19. The data is taken from books, journals, media, regulations that have been or are currently in effect, as well as reports from official websites of governments and nonprofit organizations available. In the search for real action, a combination of the keywords “COVID-19”, “nonprofit”, “volunteer 자 자원봉사”, “NGO 비영리기구”, and “donation 기부” is used in the Google search engine. Data and statistics regarding COVID-19 were taken from 2020 to August 2021. The limitation of this paper was taken only during the COVID-19 pandemic.

Literature Review

In dealing with HIV/AIDS in Ghana, good relations are established between the two actors. The model strategy implemented by the Ghana AIDS Center (GAC) is to channel donations to several communities with greater absorption capacity as intermediaries, which then distribute funds to a large number of smaller communities to implement the HIV/AIDS strategy at the national, regional, and local levels. districts and communities (Hushie et al., 2016). According to Della Porta (2020), it can be concluded that: (1) The more trust that has been built in previous cooperation, the better the cooperation will be during a pandemic, (2) The application of the right system can accelerate coordination procedures between the government and the community so that can be more efficient, (3) Lack of standardization can cause confusion among community organizations and make it difficult for them to work together. Meanwhile, Brinkerhoff (2002) in his writings divides government and nonprofit cooperation in two frameworks, namely mutuality and organizational identity. Mutuality refers to the interdependence and responsibility of each actor to the other. This cooperation model will be divided into partnership, contracting, extension, as well as cooptation and absorption. Organizational identity reflects the sector or type of organization from which the organization belongs.

In the study presented by Gazley & Brudney (2007), sectoral membership is one of the many factors that influence organizational behavior or policy decisions. The motivation to partner tends to be driven by a desire to secure scarcer resources for each sector, such as expertise for government and funding for nonprofits. Positive results in occurred in the contribution to service improvement. On the other hand, many organizations will find their mission incompatible with government activities. Meanwhile, Najam (2016) developed a model that combines the potential of service delivery and advocacy. The type of relationship is determined by the strategic interest of the government and NGOs, not solely by contextual factors or government initiatives. This type of relationship is based on the four C's model such as: (1) Cooperation, where the government and NGOs have the same goals and means, (2) Confrontation, where the goals and means are not the same, (3) Complementarity, where the outcomes are similar, but the method is different, and (4) Cooptation, where the government and NGOs pursue the same path, but towards different goals.

According to Jeong & Kim (2021), the relationship between government and community organizations uses two dimensions, namely community involvement in government and involvement in the public policy process. Involvement in government is seen based on the depth of contribution in cooperation. It is called ‘high-level governance’ if NGOs participate in decision-making and co-production. Meanwhile, it will be called ‘low-level governance’ if the NGO is only a third party or service provider. In the public policy process, NGOs will be included in the public policy formation if there is an agenda for formulating policies and policy issues that are initiated by NGOs. Public policy implementation occurs when NGO social services are only an extension of the implementation of public policies. In addition, Cai et al. (2021) found similarities in Japan, South Korea, and China in response to social resilience in crisis situations, namely the focus on providing social services for vulnerable populations. The analysis used looks at the indicators of the role seen, volunteer activities, collaboration with the government, and transnational relations.

Young (2000a) shows a different time view of the relationship between nonprofits and government in United States history. Adversaries are especially helpful during the early republican period when the autonomous public and private spheres were first sorted out, as well as during the mid to late twentieth century when governments were trying to improve the balance of power between public and private interests. Supplement was evident in the late nineteenth and early twentieth centuries when the individual supported the provision of social needs. Complement is useful in explaining the post-World War II era when governments sought to meet social needs without over-expanding their own bureaucracies. The relationship of responsibilities assigned to the three models aren't defined rigidly or fixedly but shifts over time to meet changing circumstances and needs. Prior to the period of industrial growth, the "social contract" consisted of the division of responsibilities between very modest government efforts to provide for social needs and autonomous private efforts. With major changes following the Civil War, including industrialization and immigration, the private sector through social welfare associations and the business sector took on a new level of responsibility for collective needs. In the mid-twentieth



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century, forms of welfare fulfillment emerged, with government and nonprofit partnerships providing for the public's needs.

Institutional innovation emerged in the private business and social era in the late 19th and 20th centuries to coordinate the development and allocation of private resources to the needs of society. As the role of government in the 20th century began to grow in the provision of public services, the supplement model by nonprofit organizations persisted. Nonprofit organizations are becoming increasingly important because of the enormous flow of information from television and computers that brings diversity to society everywhere, resulting in increased dependence on the nonprofit sector. The substantial character and sustainable growth of nonprofit organizations are self-supporting without government assistance as well as the provision of collective goods that essentially complement the government sector. Governments in the complement model act as partners to nonprofit organizations. But sometimes within a government, there are policy initiatives toward cutting government funding and encouraging private organizations to take over service delivery and resource support. In the 1990s the policy direction was more towards the tendency of state and local governments to compensate for cuts in the federal budget and to take advantage of the flexibility of new block grant arrangements to expand and diversify contracts with the private sector. This prospect is uncertain for nonprofits because it could shift the social policy agenda in another direction. Non-profit organizations became increasingly independent on the government's budget in the 1960s and 1970s which caused the relationship between the two to change. The 1969 tax reform aimed at keeping nonprofits away from politics and making them more open and accountable. In the 1990s, Congress also banned lobbying by nonprofits that received federal funding. Through various regulations and restrictions, the government has attempted to limit the activities of nonprofit organizations and hold them accountable to the public. Reciprocal efforts through the formation and continuous development of non-profit organizations serve as a form of government accountability, to influence the direction of public policy in the adversary model. Volunteering by nonprofits is seen as a fundamental part of the national power system. There is a natural and necessary relationship between civic associations and political associations in which citizens join to influence the state. First, as a basis for organizing political opposition to the power of elected officials. Second, as a basis for formulating a conceptual agenda on which to base political opposition.

In the use of the three models in the context of the COVID-19 pandemic in South Korea, the supplement model was seen at the beginning of the pandemic until now when individual actors supported the provision of assistance due to the situation of sudden scarcity. Then an adversary model appears when the handling policy is sorted after the initial handling is implemented and further public policy directions are needed to influence the handling policy in depth, especially for minority groups. The complement model with non-profit organizations follows because the government needs to expand the implementation of handling to the community but is limited by bureaucracy and knowledge in the community, so that non-profit organizations are assisted in bridging the government bureaucracy to meet social needs. Local governments are also more flexible in managing their budgets and policies according to community conditions.

Conceptual Framework

To analyze the partnership between the state and civil society organizations, three terms will first be defined in the context of handling COVID-19 in South Korea, namely the definition of the state, various community organizations, and partnership. For the purposes of this paper, the following definitions of terms are used to understand the analysis of state-community interactions and roles in the response to COVID-19 in the three selected models. The use of the term community organization/community in this paper also refers to nonprofit organizations and NGOs. State organizations include various levels of government such as departmental or ministry bureaucracies, and state-appointed bodies that provide public services at the national or local level (Waddel & Brown, 1997). Government agencies involve legislative, executive, and judicial organizations that govern the state and regulate other sectors on the basis of the right to enforce compliance. In this paper, the South Korean government (along with KDCA and other ministries) is seen as the main government agency that has collaborated across sectors with civil society organizations, given the multi-sectoral partnership nature of the national crisis response.

The operational definition of the not-for-profit sector adopted in this article covers a broad spectrum of voluntary associations that are wholly or largely independent of government and which are not primarily motivated by commercial interests. These organizations are principally motivated by the desire to articulate and actualize a particular social vision and they operate in the realm of society through shared normative values of their patrons, members and clients (I. Kim & Hwang, 2002). There is no single definition of partnership. Instead, a large number of terms have been used, such as trust relationships (Essia & Yearoo, 2009), collaboration (Kövé, 2021), alliances, cooperation, or inter-organizational relationships (Vasconcellos et al., 2011). Partnership means the sharing of power over the decision-making process which has double consequences (Sunhyuk Kim, 2010). In state partnerships and civil society organizations, good governance requires citizen involvement in public processes, including services, delivery, and support (Bräutigam & Segarra, 2007). Non-governmental



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organizations can fill gaps in inefficient public services (Bano, 2018). Non-profit organizations can contribute to state-provided public services and processes by providing information and tactical support, making services and policies more relevant, responsive and effective (Van Huijstee et al., 2007).

Young (2000) has an alternative view that nonprofit organizations: (1) Operate independently as a supplement to government (supplement), (2) Work as a complement to government in a complementary partnership, or (3) Engage in an accountability relationship that may conflict with the government (adversarial). The government-nonprofit sector relationship is understood as a multilayered phenomenon to provide a richer understanding. One view may dominate, but all three can be relevant. According to Young, these three perspectives can go hand in hand, such as organizations can simultaneously finance and deliver services where the government does not provide government-funded or assisted services, advocate for changes in government policies and practices and be influenced by government pressure and oversight.

In the model of non-profit organizations as a supplement to the government, non-profit organizations are seen as a forum to fulfill the demand for public goods that cannot be fulfilled by the government. Every individual in society has their own preferences, so that in making decisions, the government will take the preference of the majority. It is this minority preference that will lead to a voluntary collective basis through the nonprofit sector. However, it has limitations due to regulations that restrict society, and the purchase of private goods is not a perfect substitute for public goods. Therefore, there is still considerable room for non-profit organizations to fill the role of complementing government services such as collective goods. The supplement model also sheds light on the idea that nonprofit actions are often actually meant to encourage government to act. America has a long experience in forming nonprofits where tasks cannot be completed by individuals or other public bodies for one reason or another. This history can be drawn from the formation of social and religious communities, which later initiated the need for more higher education, where these needs were ignored by the government. This self-help tradition continues to strengthen and makes the role of nonprofits separate from the state. In the 1990s, the surge in the role of nonprofits and the private sector as a government supplement was driven by a combination of the large wealth of new private industry and political progress stemming from industrialization, urbanization, and immigration, as well as the strengthening role of women in the creation of volunteer associations amid weak governance. In another case, the UK passed laws in the 1940s on income support, health and education in helping to complete the welfare development of the nation's people. However, certain welfare services such as residential care, provision of assistance to persons with special needs, and independent counseling remain part of the voluntary sector because state authorities do not cover these areas.

In the model of nonprofit organizations and the government as a complement, nonprofit organizations are seen as partners of the government, which help carry out the delivery of public goods, which are mostly financed by the government. This is done based on the fact that it is cheaper and more efficient for the government to collaborate with external parties, compared to developing the government's internal management. Apart from financial reasons, the government collaborates with third parties because the government cannot answer the diverse responses of the community. A nonprofit group with experience in the field needed by the community can answer this problem. Through a complement lens, the state involves other sectors such as the non-profit sector to solve public affairs together. In America, nonprofit groups help the government with financing to get its work done. More generally, governments have been encouraging by seeking non-profit organizations to deliver public services under a public policy mandate. Government support is also not limited to social services. Government reliance on nonprofits to provide public services is found widely in social services, housing and community development, health care, and the arts. In each of these areas, more than 40 percent of government spending is allocated to private organizations (Young, 2000a).

In the nonprofit model and government as an adversary, nonprofit organizations encourage the government to make changes in public policy and to maintain accountability to the public. The government can then regulate its services and also respond to its advocacy initiatives. In this case, nonprofits can advocate for smaller or more efficient government operations, and they can advocate for new programs and regulations that will increase government activity. When minority aspirations are not properly conveyed, a small proportion of these citizens can promote ideas through advocacy and demonstrate their efficacy with voluntary contributions. In the 1990s, women's communities in America were able to build on small local issues to lay the groundwork for social justice campaigns that ultimately shape national policy. This social action movement, which is mostly manifested through non-profit organizations and voluntary activities, is aimed at changing public policy across a wide spectrum of issues. This influenced the emergence of many advocacy organizations in the future that monitor government performance and try to influence public policy by lobbying, demonstrating, and empowering beneficiaries of social programs.

RESULT AND DISCUSSION

Since the 1987 democracy movement, South Korean public interest in the role of civil society as an alternative institution to government has increased rapidly. The increase in size and significance is supported by



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the public's desire for collaborative efforts to shape and disseminate diverse social and even global agendas at national and international levels (S. H. Lee, 2000). According to Rhee (2011), many nonprofits in South Korea have actively played a participatory and collaborative role in policy-making and law-making, especially through public interest and legislative initiatives. The partnership for sustainability is due to a variety of reasons, both domestic and international. Some of these include protection and welfare. Communities in South Korea have played a role as a mechanism for triggering institutional change through legal changes. Proactive citizen participation in policy-making and law-making has constitutional significance and consequences because it is protected by the legal process (Vaslavskiy, 2020). In practice, South Korea has succeeded in developing National Health Insurance (NHI) in its health system. Funding comes from individual or company payments (employees), and donations of health assistance for the poor. The status of the health system in South Korea is still found to be disproportionate between urban and rural areas. Only 21.4% of recipients of health assistance in 2013 were hospitalized for serious illnesses (cancer, heart disease, stroke, and other conditions) compared to 46.8% of NHI patients. Untreated medical conditions for financial reasons are estimated at 21.7% nationally. Mortality for the low-income population (25 percent of the lowest income) is 2.6 times higher than for the high-income population (25 percent of the highest).

According to Valero et al. (2020), a large number of organizations in South Korea are service-oriented. For example, of the total workforce of community organizations (both paid and unpaid), 82% are involved in service role activities such as education (41%), social services (15%), and health (26%) with the majority of funding coming from service fees. (71%) followed by government support (24%) and philanthropy (4%). It also found out that although most civil society organizations are funded primarily by service fees, the types of social services of civil society organizations tend to be dominated by government funds (68%). The growth of nonprofits in South Korea is largely because of the theory of interdependence, that is, increased funding support from the South Korean government positively contributes to the density of nonprofits.

During the pandemic, 70% of nonprofit organizations in Korea experienced difficulties in running programs or were forced to stop operational activities (Jeong & Kim, 2021). Nonprofit organizations are making efforts to overcome this crisis by planning to implement new methods of funding, operational actions, programs, and strategies. Despite the unprecedented challenges, community organizations in South Korea have made various efforts to serve vulnerable communities and populations, including the elderly, the disabled, the homeless, and children without proper care and support. In the implementation of COVID-19 handling in Korea, the government plays a central role as a policy maker with almost some policies in the ministry not including public participation. Most government efforts are related to quarantine and prevention of COVID-19. Examples include the provision of emergency quarantine supplies such as sanitation facilities, emergency precautions in workplaces and residential areas with a high risk of group infection, social distancing campaigns, offering COVID-19 response simulation training, and distribution of quarantine-related manuals and guidelines to residents (Cai et al., 2021).

Although the use of the three models in this paper as if nonprofit organizations and governments are different entities from each other, the boundaries of these models are often blurred. In its daily implementation (especially outside of the pandemic), this relationship does not use only one model. This paper focuses on the COVID-19 period, so the organizations mentioned only use a model because they are grouped from their actions in helping the success of handling COVID-19 to show a dominant character in the context of a pandemic, but it does not apply constantly. In addition, during the data search, there was also one organization that experienced an expansion of the model and did not only use one model.

Supplement

From the beginning of the pandemic until now, nonprofit organizations in South Korea have shown many supplement actions in handling the pandemic, especially during the first wave. Many activities were initially centered in Daegu in helping medical problems such as providing masks, hand sanitizers, and medicines as well as to help with daily needs such as food assistance. This action extends to various regions in South Korea with almost the same focus. Restrictions on the purchase of masks in South Korea created a mask crisis, so many communities provided masks. Quarantine and sanitation assistance (49.89%) received the highest allocation of funds, followed by support for vulnerable communities (27.22%), support for gaps in social welfare services (10.29%), and support for health workers, volunteers, and patients (12, 60%). The Ministry of Home Affairs and Safety reported that about 760,000 people from 246 volunteer centers participated in volunteer work in the first half of this year. The number of people who have benefited from this is estimated at 2.33 million.

These COVID-19 volunteer activities can be divided into disinfection and quarantine support, health protocol campaigns, and distribution and production of health goods. In the early stages of the crisis, volunteers make masks and distribute them to the community or medical staff. Many residents also participate in self-quarantine and disinfection activities, especially in areas with large populations. This is due to the community's compliance with government regulations during COVID-19. However in practice, the government has not been able to provide the needs for the implementation of handling COVID-19, such as masks and sanitation, or



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quarantine. Nonprofit organization then came down to meet the unmet needs of the community in implementing policy compliance.

The Child Fund of Korea (CFK) shows a non-profit organization playing a role during this pandemic. CFK provides food to children in need of support due to the discontinuation of food services through local schools and children's centers, covering children in 10,000 households. In addition to providing medical needs and psychological-emotional support, CFK expands its services to the field of education by offering e-school programs and play equipment for children. The services provided fill the gaps in the broad spectrum of different types of needs that have arisen due to the lack of support during COVID-19. In addition, several nonprofit organizations, such as the Beautiful Foundation, provide cash support for emergency living expenses before the government's disaster subsidies start operating, as well as provide services to people excluded from the insurance system, such as migrants. The Community Chest of Korea (CCK) prioritizes funding to areas with a high proportion of confirmed cases and quarantines, through coordination with the government and related organizations. CCK also places priority on providing emergency support for vulnerable and high-risk groups, such as the elderly, the disabled, and the homeless (Cai et al., 2021).

Supplement models are always seen starting from the first wave to the fourth wave, with the most prominent time being in the first wave when the need for residents to carry out health protocols is in short supply. This model did not gradually decrease along with the mass circulation of masks in South Korea. The provision of assistance remained stable but began to change in some destinations when the government began to distribute subsidies to vulnerable groups affected by COVID-19. It is found aiding and support for groups that are not in the government system. Some organizations, for example, develop organizational models that supplement other models.

Complement

As South Korean nonprofit groups increase their involvement in helping communities during the COVID-19 outbreak, they are also engaging in collaborative partnerships with local governments. In the past, local governments usually waited to see what kind of support would be provided to their regions by the central government. However, during the COVID-19 period, local governments are proactive in providing assistance to residents even before decisions are made by the central government and also involving nonprofit organizations. The nature of local emergency assistance varies depending on political preferences or local government situations. Some cities provide assistance to every household while others provide assistance only to lower-middle class residents.

The involvement of nonprofit groups, communities, and government can demonstrate that the actors' relationships have complemented each other, assisting the government and public institutions in the extension of public services delivered to local residents and marginalized groups. This includes support and cooperation in the success of medical health protocols, as well as demonstrating professional association relationships with member organizations and individuals for the purpose of providing government services and care. Local governments have various collaborations that differ from one another.

This model can be seen when the Jeju Metropolitan Government held an emergency meeting with the staff at the Volunteer Center and divided the roles between public and non-profit institutions for the dissemination of accurate COVID-19 information. Volunteer Centers are even given the role of providing administrative support in public areas such as airports, ports, and pre-training professional volunteers on health protocols, medical care, and hygiene. The Jeju Metropolitan Government also provides insurance coverage for participating volunteers. The Seongbukgu District in the Seoul Metropolitan Area is expanding its disaster safety response by conducting intensive quarantine in collaboration with non-profits. The quarantine team focuses its efforts on placing equipment (e.g., thermometers) in public areas for local residents. CCK also maintains regular meetings with relevant ministries to share details of the distribution of aid programs. Thus, the efficiency of the COVID-19 assistance program can be increased by coordination between sectors and institutions (Cai et al., 2021). Another example is the collaboration of the Social Enterprise Promotion Agency and local nonprofits in providing masks for vulnerable groups in Daegu and Gyeong-sang (Jeong & Kim, 2021). In the field of education, governments in various regions cooperate with non-profits to succeed in the new education system in the midst of a pandemic, such as counseling and learning that supports campaigns to limit movement outside the home, for example in the case of Gyeonggi and Chungcheongbuk. In addition, the local government together with the local community carried out this model of action in distributing food and masks for the lower-middle income community through elderly centers and available public kitchens. CCK not only uses the supplement model but also uses the complement model.

The complement model in South Korea can be found from the first wave to the fourth wave. The actions taken are varied and of different types according to the required situation. The relationship of this model is relatively not as strong as the supplement model because of the strong central role of the government in policy making, so that non-profits move more to blind spots that are overlooked by the government. The balanced



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distribution of power between actors makes each of them have a role and function and can move independently in its implementation. However, the interdependence relationship between the government and nonprofits in the complement model is often found during the COVID-19 period, even though policy making shows the dominance of the government. If we look at the development of nonprofits in South Korea, the existence of nonprofits is indeed more centered around advocacy and service providers (I. Kim & Hwang, 2002). This causes this model to exist in its implementation, but its function is not as strong as other models. Especially during the COVID-19 period, the relationship between the local government and the community is seen through non-profits in various fields ranging from education to quarantine and sanitation functions.

Adversary

The adversary model was discovered when the second wave hit South Korea and continues to this day. This model is centered so that the policies made can meet all levels of society and there is a sustainable relationship in handling Covid. During the first wave, this model was less available because the policy was government-centered, and it still took time for the people and communities to adjust. In the second wave period, this model was found because problems arose related to the initial policies made by the government.

When the COVID-19 cluster in Itaewon broke out, many foreigners working in Itaewon and the LGBTQ community were reluctant to go to health facilities. The Itaewon case is dangerous because of the breadth and magnitude of the movement of people in Itaewon, where an estimated five thousand people have been exposed to the virus (J. Y. Lee et al., 2020). Under social and moral pressure from Korean society plus negative media coverage since Itaewon's first positive case was confirmed, people, whether members of the LGBTQ community or not, are afraid to get checked out (in the context of being reluctant to be associated with the community or embarrassed by social stigma) (Dimoia, 2020). This is a problem for the government because it hinders the tracking process. When a lot of negative news and social intimidation emerged, the community and Chingusai NGO contacted the Seoul Metropolitan Government requesting a face-to-face meeting to promote human rights and security in the community and demanding that there be no human rights violations during the examination (J. G. Lee, 2020). The government and the community then agreed to an anonymous tracking policy (only through a telephone number and no need to use an ID card number) as well as a consultation facility for the minority community in the screening test.

In addition, there was also a coalition of 530 civil society organizations in South Korea who gathered to call for structural changes at the public policy level by forming the Civil Society Response Committee for the COVID-19 Social and Economic Crisis. The coalition aims to protect economically vulnerable populations by expanding the national health insurance system and public health support, and transforming the existing system into a more sustainable economic structure (Cai et al., 2021). The People's Health Institute (PHI) also submitted advocacy proposals for the government to deal with the crisis, such as asking for policies for daily workers, MSMEs, entrepreneurs, and low-middle income communities in economic assistance in disasters by the government. Then, PHI asked for a reconstruction of the institutional system in health insurance for the elderly and disabled, especially in nursing homes and other health centers, which were not well protected, especially during COVID-19. PHI also supports stopping racism and hatred through the media that occurred during COVID-19, such as xenophobia, religious discrimination, and negative stigma against minorities. Negative news can hinder the handling of COVID-19. At the beginning of the pandemic, PHI asked for good management in the distribution of medical devices such as masks by setting purchasing priority standards (People's Health Institute, 2021).

The Itaewon case study shows the involvement of input or opinion from the community to the government which shows the involvement of the community in governance, namely a change in policy obtained from the meeting of the government and the community. The formation of public policy also includes the stage of setting a policy agenda and the government allows stakeholders to influence public policy decisions in terms of tracking COVID-19. The existence of public hearings and meetings between actors as the main source of input and contribution of state and community partnerships. The coalition of community and nonprofits also demonstrates the role of the adversary model in state and nonprofit relations. The continuous input from the community in efforts to deal with COVID-19 shows the strength of this model from the past until the time of the pandemic. This relationship tends to increase especially in crisis situations because community groups will continue to demand government action and policy changes. The nonprofits then engage the government to advocate for improvement, and the nonprofits will be engaged by the government to improve service delivery.

CONCLUSION

South Korea's response to COVID-19 does not depend solely on one government actor. The role of other actors such as the private sector, non-profit, citizens, and other communities are important. The South Korean government acts as the coordinator of many actors, as well as encourages input from partners. While monitoring and tackling COVID-19, the South Korean government is maximizing opportunities and opening channels for



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other actors to contribute resources and input. In addition, local governments also involve community partners in handling COVID-19, to create collaboration between the government and non-profits that enhance and complement each other.

Interventions carried out by the central and local governments are mostly focused on quarantine policies and COVID-19 prevention. Community contributions complement quarantine measures by supporting vulnerable groups and reaching out to local communities. Donations and volunteering during COVID-19 are always available. The voices and inputs of the civil society are fed into the public policy process through the open channels and platforms of the South Korean government. The support of nonprofit organizations for vulnerable groups and the existence of advocacy coalitions for social justice and equality also reflect good cooperation from the government level to the community. The government is also effectively leading the engagement and providing sufficient support to volunteers.

The relationship between the government and non-profit sectors in South Korea is best understood as a composite of layers of views obtained through each lens. The government-nonprofit relationship is dynamic and the emphasis on supplement, complement, and adversary relationships continues to develop during the COVID-19 waves. Emphasis on different models of government-nonprofit relations varies by the demands and needs of citizens from time to time which is always changing so that it can affect the diversity of model preferences.

This dynamic handling process can create social dislocations that stimulate nonprofit sector initiatives to meet needs in the supplement model, in a context where government is not responsive in meeting the demands demanded in handling COVID-19. Within this scope, nonprofits also involve the government in an adversary mode to advocate for better public services and support policy changes. In the end, initiatives from nonprofits can move the government to provide public service policies in a more comprehensive way. When the government then has problems expanding or campaigning for its services, nonprofit organizations can then be involved to improve service delivery through a complement model. At the same time, failure to provide government services leads to a reduction in public services which pave the way for supplement activity, which keeps the cycle going.

In the COVID-19 policy, the government plays more role in policy making, so the role of nonprofit organizations is more towards supplements. This model continues to be found from the first wave to the fourth wave. Although the government continues to make policy revisions, there are still blind spots that the government has not achieved, so the involvement of non-profit organizations is still needed. However, it does not mean that other models are forgotten, it is proven that there is still a role for complement nonprofit models in supporting government policies. This model is mostly found in the process of successfully handling COVID-19 by nonprofits. Meanwhile, an adversary model was found for changes to better policies for handling COVID-19 in the future.

The relationship between government and non-profit is very important, even when the government is the dominant and dominating institutional player, the nature of the relationship between the two is a strategic partnership made by both parties. In any case, nonprofits and the state although not always mutually supportive and can be mutually confrontational, relationships are maintained with the result that various types of nonprofit-government relationships are maintained. This is an example of the heterogeneity of the two sectors encountered. In handling COVID-19, partnerships with these three models reinforce each other and complement the success of the handling.

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