



Sağlık Politikaları ve Dirençlilik İlişkisi: Covid-19 Pandemisi Örneği

Relationship Between Health Policies and Resilience: The Case of the Covid-19 Pandemic

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ÖZ

Covid-19 pandemisi yakın dönemde modern toplumların deneyimlememiş olduğu bir kaos ortamı yaratmıştır. Ortaya çıkan bu yeni duruma ülkelerin ve toplumların göstermiş olduğu tepkiler farklılaşmaktadır. Covid-19 pandemisi sürecinde salgınla mücadelede ülkelerin uyguladığı sağlık politikaları, toplumların dirençliliği üzerinde etkili olmakta ve oluşan her türlü kayıpta belirleyici bir unsur oluşturmaktadır. Dirençlilik kavramı ise son yıllarda literatürde giderek artan bir kullanıma sahip olmaktadır. Dirençlilik, kelime anlamı olarak bir sistemin maruz kaldığı dış etkilere karşı verdiği tepkilerle fonksiyonlarını sürdürebilme kapasitesi olarak tanımlanmaktadır. Bu derlemenin amacı, Covid-19 pandemisinde uygulanan sağlık politikalarını ve toplum dayanıklılığı üzerindeki etkilerini araştıran çalışmalarını sistematik bir derleme çerçevesinde açıklamaktır. Bu çerçevede Çin, Güney Kore, Japonya, Rusya, Hindistan, Amerika Birleşik Devletleri ve Brezilya ülkeleri belirgin sağlık politikaları farklılıkları ve toplumların yaşadıkları kayıplar ölçüsünde değerlendirilmiştir. Ayrıca sistematik derleme yaklaşımıyla bu konuda yapılmış 20 farklı makale değerlendirilmiştir. Dirençlilik kapasitesinde ülkelerin yönetsel veya politik becerisi, şeffaflığı sağlayan süreçlerin varlığı, sağlık sistemleri altyapı ve kapasitesi ve sosyal sermaye belirleyici olmakta olduğu bulgusuna ulaşılmıştır.

Anahtar kelimeler

Sağlık Politikaları, Dirençlilik, Covid-19 Pandemisi

ABSTRACT

The Covid-19 pandemic has recently created an environment of chaos that modern societies have not experienced. The reactions of countries and societies to this new situation are different. The health policies implemented by countries in the fight against the epidemic during the Covid-19 pandemic process have an impact on the resilience of societies and constitute a determining factor in all kinds of losses. The concept of resilience has been increasingly used in the literature in recent years. Resilience, as a word meaning, is defined as the capacity of a system to continue its functions with the reactions it gives to the external effects it is exposed to. The purpose of this review is to explain the health policies implemented in the Covid-19 pandemic and the studies investigating their effects on community resilience within the framework of a systematic review. In this context, the countries of China, South Korea, Japan, Russia, India, the United States of America and Brazil were evaluated in terms of significant health policy differences and the losses suffered by the societies. In addition, 20 different articles on this subject were evaluated with a systematic review approach. It has been found that the administrative or political skills of the countries, the existence of processes that ensure transparency, the infrastructure and capacity of health systems, and social capital are determinants in the resilience capacity.

Keywords

Health Policies, Resilience, Covid-19 Pandemic

INTRODUCTION

Social life and the social order we have created to maintain this life bring many risks that we may encounter. Social networks, economic relations, cultural differences that societies have developed have played a major role in creating their health, living spaces and urban spaces. (Tuğaç, 2021).

As modern societies, a lot of progress has been made in determining the risks that societies may face, thanks to the many technological advances that have been reached today. However, it is known that there were epidemics that led to mass deaths in the past that many societies encountered in different geographical regions and often even the causes of which were not sufficiently understood. Today, despite the social progress achieved in the face of the Covid-19 pandemic experience, it has been seen how fragile societies are (Haldane et al., 2021).

At this point, the importance of the resilience of societies in the fight against the epidemic has come to the fore. The purpose of this review is to explain the health policies implemented in the covid-19 pandemic and the studies investigating the effects on community resilience within the framework of a systematic review. In this study, regarding the importance of the subject, firstly the concept of health and the conceptual framework of health policies will be established, and secondly, the concept of community resilience will be explained. In the third part, the Covid-19 pandemic and the processes experienced in the country and the reactions of the communities to the Covid-19 pandemic will be discussed for support the subject with examples of selected countries and will be evaluated within the framework of community resilience. In the last section, the methods and findings used will be explained.

1. Health and Health Policy Development Process

The relationships that individuals and societies establish with their social environments are very important in protecting and maintaining their health status. Today's changing living conditions have brought environmental changes. The rapid increase in urbanization rates and the problems brought about by this increase, the wastes caused by the production and consumption of industrialized societies, the rapid decrease in forest areas, etc. environmental changes occur rapidly due to reasons (Kuddus et al., 2020).

With the increasing rates of urbanization, an increasing number of populations in cities are trying to meet their need for shelter, and infrastructures need to be established in many areas for these needs. Underdeveloped countries, which are economically weak, have health institutions, transportation infrastructure, communication, waste management, etc. Generally, they cannot make sufficient investments for their needs compared to their population. Communities living in these countries can live in very harsh and unhealthy conditions to survive. (Koop & Van Leeuwen, 2017).

People have needed to conceptualize them to make sense of all the events they have experienced in the historical process. The definition of the concept of health is also a result of this effort to make sense. The most common definition of the concept of health was made by the World Health Organization in 1948. Accordingly, health; is not merely the absence of disease or infirmity, but also a state of complete physical, social, and spiritual well-being (Salomon et al., 2003).

Health is a condition related to the quality of life. A healthy life cannot be achieved only by having economic welfare, it can be achieved by a healthy social and physical environment, meeting material and spiritual needs, and having mutual social relations. Even if a person has

some disease, if his social life is good and he has healthy relations with his environment and his life is in balance, it can be considered that this individual is healthy (Açıkgöz, 2021). At this point, the development process of health policies will be explained.

1.1 Health Policy Development Process

Social studies on health started in the 16th century. The main goal of these studies is related to production because the size and health of the population determine the power of a state. It was understood in the future that the issue of health is a phenomenon without borders, and states laid the first foundations of international health policies with various conferences and joint decisions they took (Porter, 1999).

Health studies, which emerged in the form of a struggle against epidemics, which were initially seen as a threat to the future of society in the historical process; It differed in the period between 1945-1980, which was seen as the golden age in terms of living standards provided to citizens in social policy when the World Health Organization was also established. General health services have been accepted as one of the guaranteed personal rights that can be enjoyed by every citizen. (WHO, 2008).

As a result of the crises in developed countries, neo-liberal policies have been implemented since the 1970s and then spread to developing countries. In this period, it can be shown as the years when the concept of 'health consumer' began to emerge and the private sector entered the field of health as well as the state (Whitehead, 2001). Therefore, the years 1974-1984 is a transitional period. In the said period, the scope of health services was also expanded. Although the current health policies continued in the post-1984 period; globalization as a diversity in developed countries; In developing countries, due to structural deficiencies, has led the private sector and NGOs to enter health services. (Topkaya, 2016).

There has been a transformation towards a centralized and participatory health policy in international health policies. Local governments are authorized by central governments to carry out health policies. Despite the increase in public expenditures in the field of general health due to neo-liberal policies and the negative effects of the 2008 Global Economic Crisis on socio-economic life; As a result of the insufficient amount of money and its criticism in the field of social policy, the understanding of improving the social determinants of health has started to gain importance in the policies of the World Health Organization. The organization put forward; The understanding that existing inequalities between health-related individuals within and between countries can be eliminated is an important understanding for more optimistic social policies regarding health. (Çelik, 2006).

Despite the optimistic point of view on health; It should not be forgotten that the subject is closely related to economic development, poverty, and income distribution. In this respect, the problem of eliminating health inequalities between different income groups, which are determined according to the social determinants of health, will be discussed for a long time in the field of social policy. In future studies, empirical studies on the social determinants of health or age groups will be beneficial in terms of revealing social or inter-country inequalities on the social dimension of health. (Braveman & Gottlieb, 2014). From here on, the concept of social resilience, which includes social inequalities and is associated with disasters, will be explained.

2. Community Resilience

Today, although technological advances have been made, disasters continue to affect individuals, societies, and systems created by humans. Therefore, individuals, societies, and systems must be able to cope with the effects of disasters. In dealing with the effects of disasters,

the concept of "resilience", which has been frequently emphasized in the disaster management literature in recent years and has become increasingly important, has come to the fore (Caruso et al., 2020).

Resilience is defined by the United Nations Office for Disaster Risk Reduction, an internationally important institution: a timely and efficient response to the effects of a hazard, including the protection and reconstruction of the essential structures and functions of a system, community, or society exposed to hazards, through risk management. It is defined as the ability to resist, assimilate, adapt, transform, and get rid of (UNDRR, 2022). Community resilience defined as the ability to prepare for anticipated hazards, adapt to changing conditions, and withstand and recover rapidly from disruptions (Barthelemy et al., 2021). Most important characteristics of a resilient community is social networks. A community with strong social networks and local systems is prepared to easily take action after a disaster. Strong health systems, local governments, and other organizations support recovery with prepared resources, like clean water and access to healthcare, available for those affected by adversity. Presence of these health systems, reduce the negative consequences of hardships (Madsen et al., 2019).

As a type of disaster, the pandemic has also affected society and its resilience, which is a system that falls under this definition. Sociologically, communities are seen as living organisms like individuals. Communities perform their functions through complex systems, similar to the fact that a human body consists of many organs and systems working in coordination with each other (Bryce et al., 2020). Disasters or situations that lead to crises also affect the functions of communities and may even harm the coping capacity of society. According to Norris et al., who conducted the first studies on community resilience, resilient communities can remain effectively functional and adaptive after disasters occur. (Norris et al., 2008).

3. Covid-19 Pandemic

Undoubtedly, one of the most important issues in world history is epidemic diseases. Considering the epidemics experienced in the past, it is understood that these events are facts of human history that cannot be ignored. The increase in interactions between people through events such as war, migration, and trade leads to the mutation of microbes and the emergence of epidemics. (Frank M, 2021).

On the other hand, reasons such as the decrease in the quality of life of people, insufficient and proper nutrition, decrease in clean water resources and climate changes pave the way for diseases. There have been pandemic periods in the world, such as the Black Plague epidemic, the Cholera Epidemic, and the Spanish Flu, which have had devastating effects on the historical scene. Epidemic diseases have caused significant changes in social life and deeply affected the life of societies in many ways. (Tekin, 2023).

The coronavirus, which first appeared in Wuhan, China on December 1, 2019, spread to Europe, America, and all other parts of the world in 2020, and the epidemic continues today. The symptoms of the virus, which can be transmitted from person to person and persist for various periods on inanimate objects, include symptoms such as high fever, difficulty in breathing, dry cough, and sore throat. (Tekin, 2023).

Millions of people have been infected with the virus, which is especially deadly for those with weak immune systems and mostly for the elderly. When the Covid-19 pandemic is compared to

the epidemics in history, it is seen that it is one of the most serious epidemics of the last century. Many conspiracy theories have been produced on the subject, especially the situation of being a biological weapon (Ataman et al., 2021).

Many measures have been tried to be implemented to slow the spread of the Covid-19 virus. Flight restrictions within and between countries, rapid screening tests, curfews, remote training, prevention of community gatherings, etc. a large number of measures have been mostly implemented by the country administrations (Ciotti et al., 2020). All these measures, which were tried to be implemented by the countries, had a wide impact on the communities. Compliance with these measures has been effective in the spread of the epidemic to the extent of the resilience of the communities. In this section, the relationship between the Covid-19 pandemic and community resilience will be explained with some country examples.

3.1 The Relationship Between the Covid-19 Pandemic and Community Resilience

In this section, the health policies implemented by the country's governments during the Covid-19 pandemic and the reaction of the communities will be explained within the framework of community resilience. In this context, the process experienced in the people's Republic of China, South Korea, Japan, Russia, India, the United States, and Brazil will be evaluated. These countries differ in the form of government, characteristic features of the society, population density, levels of economic development, etc. It was chosen because the differences allow comparison. In this context, the process experienced in the countries will be briefly explained and evaluated within the framework of the community resilience relationship, respectively.

3.1.1 Republic of China

The starting point of the epidemic in the Republic of China is known as the city of Wuhan in Hubei province. This has led to the identification of the virus in China. In addition, the fact that the starting point of the epidemic was in this country affected its foreign relations with other countries and had striking results in domestic politics (Breslin, 2011).

China is the driving force of capitalist production in the world, which is based on the one-party system of government, and adopts a socialist understanding, but at the same time. This production power and capacity is carried out with high population and state policies and strict control processes (Ferchen, 2013).

Chinese society experienced an epidemic with the SARS virus at the beginning of the 21st century. Despite this, after the Covid-19 virus spread from person to person and became an epidemic, there were great problems and even delays in warning of the situation, both within the country and in other countries (Mason, 2017).

The authoritarian structure of the country's government delayed the implementation of early measures that could be taken to notify the outbreak and prevent its spread. The limited access to information resources, which is one of the elements of social resilience, has reduced the resilience of the Chinese people. It can be said that the sharing of data about the epidemic on a domestic and international scale does not comply with the principle of transparency, and trying to prevent it oppressively makes it difficult to comply with the measures to be implemented (Mason, 2017).

Despite all this, although it was late in taking precautions and the warnings were not taken into account, the spread of the epidemic in the country was largely prevented by applying very strict

measures with the health policies implemented later. To prevent the spread of the epidemic, strict quarantine practices and, when necessary, forced screening tests were reacted by society, and the country's government often protested (Shan & Chen, 2020).

The concern of protecting and sustaining the economic production power of the country has been effective in taking such strict measures (Cha, 2020). However, in all these processes, the Chinese government has increased health investments to protect the economy and has been more successful compared to other developed countries. It can be said that it is relatively more successful in managing the crisis well. Developing effective systems for data sharing and prioritizing transparency in the management process will contribute to increasing the resilience of the community.

3.1.2 South Korea

South Korea was one of the first countries to encounter the Covid-19 virus. Like China, South Korea has experienced the SARS experience seriously, and important lessons have been learned from this process as a state and society. During the pandemic process, South Korea has been found very successful in the fight against the pandemic by many countries' media. Here, the characteristics of the society and the established behavior patterns played a very important role (Choi, 2020).

South Korea has tried to manage a fast, effective, and transparent process since the beginning of the epidemic process. Transparency, information sharing, cooperation, and freedom were often emphasized while fighting the epidemic. Compared to many developed countries in terms of population, it is much better than many developed countries in terms of both the number of deaths and the number of cases. (Choi, 2020).

The health policies followed in this process can be accepted as a model. It can be said here that a transparent management approach and effective information sharing have increased the public's trust in the state. From the moment the epidemic was seen in the country, people wore masks and social distancing was carefully considered (Lee et al., 2020).

In addition, thanks to the tests that can be done by giving a swab outside without getting out of the vehicles and preventing the formation of crowds, the transmission of the virus has been reduced. It should be emphasized here that the resilience of the community is high. Resilience could be seen at a high rate thanks to the transparency of the administration, the democratic approach, and the easy and easy adaptation of the community to the measures to prevent the spread of the epidemic. (Lee et al., 2020).

The high cohesion between the local and the central government facilitated the administrative processes, and a balanced distribution was observed with the transfer of patients and health personnel between the regions. Even elections were held in this process and there was no significant increase in the number of cases after the election. The fact that the country's social capital has a strong character is an important factor in this situation (KIM, 2020). In Asian countries, unlike Western societies, cultural codes based on not harming others have been very useful in such a situation and have made society resistant to this disaster.

3.1.3 Japan

As one of the first countries to encounter the virus, Japan had to fight the epidemic earlier than many other countries. But it has been one of the most successful struggling countries to date.

What is meant by successful here is the low death rates and relatively fewer economic losses, and the presence of situations such as the low number of cases without the need for a complete stop in social life. (Dewit et al., 2020).

Japan is the country with the oldest population in the world compared to its population, and 28.4% of the country's population is over 65 years old. It is known that the Covid-19 virus usually causes death in people over the age of 65. For this reason, it was expected that Japanese society would experience very serious losses, but in this process, it was seen that on the contrary, there were much fewer losses in addition to the serious losses experienced by many developed countries (Demir & Çelik, 2021).

Here, it can be said that the health policy approach adopted by the country's administration and the dedication of the society to preventing the spread of the epidemic were effective in achieving this success. Japanese management philosophy adopts an approach that is very respectful to its people and that the boundaries of the state's intervention in the social life of the citizen are drawn with very clear legal texts. For this reason, practices such as the obligation to wear masks, curfews, and closures of workplaces, which are applied in many other countries, are not mandatory, such measures are only recommended (Karako et al., 2021).

Due to the high awareness of society and the fact that the behavior of not harming people is a cultural element, the Japanese State did not have to take compulsory measures. There has been a much more comfortable pandemic process compared to other countries where the number of cases has increased, thanks to the habit of wearing masks in the usual period, and the behavior of the people to wear masks on their own, maintaining social distance, and not entering crowded environments since the epidemic was declared (Lipsy, 2023).

During the epidemic process, there was no compulsory closure of workplaces and schools for a long time. Business closure is only encouraged. High amounts of unrequited aid were provided by the state to those who went to closure in their workplaces, and to all citizens and even those who have a residence permit in the country (Lipsy, 2023). All these processes have helped Japanese society to overcome a situation in which it could be very damaged, relatively more easily. The transparent management of society, the power of social networks, economic support, and high awareness of disasters have made it resilient.

3.1.4 Russia

Russia, as the largest country in the area, is located in a very wide geography. The country is important and powerful in the world with its political history and current strategic position. The government system in the country looks far from democracy and has been ruled under the authoritarian and oppressive regime of Vladimir Putin for more than two decades (Lo, 2020).

It can be said that since the Covid-19 virus started to spread in the country, the approach that the administration has put forward has led to very negative situations, causing the country to be one of the countries with the most loss of life in the world (Lo, 2020). In the period when the outbreak began to spread, the statements made by the administration that the Covid-19 virus was not present in the country and the denial of the outbreak caused a very negative picture to spread. Due to the centralized structure of the country's administrative system, there were delays in the measures to be taken to prevent the spread of the outbreak in the country. (King & Dudina, 2021).

The country does not have a strong health infrastructure in the fight against the pandemic, as the current authoritarian government has made its expenditures and investments in the military field. It can be said that this situation leads to the fact that it is among the countries with the highest number of casualties. As mentioned earlier, although there are similar population rates, there has been more than five times the loss compared to Japan. It is difficult to say that a strong and effective health policy is also implemented during the most severe periods of the pandemic. Criticism has been made that the number of cases and deaths shared with the public about the situation in the country is unreliable, as the government in the country does not adopt a transparency and accountability approach (King & Dudina, 2021).

Thanks to the country's strong academic infrastructure, Russia was one of the first countries to develop a vaccine to prevent the spread of the pandemic. But at the same time, there have been many criticisms that the vaccine is unreliable, as the steps required in the vaccine development process are not accessible and clearly explained. (Burki, 2020).

In terms of social life, the situation is not very encouraging. Many people have been deprived of income due to the many curfews imposed to prevent the spread of the pandemic and the forced closure of workplaces. On the other hand, although the Russian State announced some economic support packages, these supports were generally aimed at companies that have close relations with the current administration, the needs of the society were not sufficiently prioritized, and social assistance was very limited. Although there were social reactions in different parts of the country, the authoritarian government suppressed these reactions through repression (Reznik et al., 2021).

As a general assessment, the existence of a non-transparent administration in the Russian State, insufficient health infrastructure, and insufficient economic support made the society unresistance, and according to official figures, it was the fourth country with the highest loss of life.

3.1.5 India

As the second most populous country in the world in terms of population, India has experienced huge losses in the Covid-19 pandemic and is the third country with the most casualties (Worldometer, 2023). The political and social structure in the country has been decisive in experiencing these losses. The sociological course of the pandemic in the country differed to a certain extent from other countries. In the country, which has the densest settlements compared to the population, social life continues with the caste system consisting of different social classes. (Chatterjee, 2020).

These castes are shaped within the framework of Buddhism belief and consist of the clergy, administrators, merchants and the group called slaves or workers who deal with dirty work. This social classification is highly internalized and the transition between castes is not possible. Cultural texture has also been very decisive in the course of the pandemic. (Demir & Çelik, 2021).

Although India is made up of crowded cities due to its dense population, most of the social segment, which is considered to be the lower class in many states, continues to live in villages. Social inequalities across the country are quite conspicuous. Members of the lower caste live in very poor social conditions and can live deprived of even the most basic needs (Lancet, 2020).

For this reason, when the Covid-19 pandemic began to spread in the country, strict measures were taken with the fear of intense loss of life, but these measures were taken in a hurry and were announced to people late. When the 21-day quarantine decision was taken in haste, many low-caste people trying to get on the trains, as it was on the agenda in the media, were crushed or lost their lives on the roads while trying to return to their villages (Chatterjee, 2020).

The country's health capacity and infrastructure are quite inadequate and people with limited access to health care apply with local healers. Due to the insufficient health investments in the country compared to the population, in the most severe period of the pandemic, many people lost their lives due to not being able to access these services. When health capacity is not inclusive and other social inequalities are combined, great loss of life has occurred (Chatterjee, 2020).

In addition to situations such as economic inadequacies and inadequate health infrastructure, the absence of a strong social capital, which is one of the basic elements of resilience, has been a situation that has eroded resilience. People living in the lowest strata of the caste system and those who do not even exist in the caste system have been excluded from society and exposed to discrimination and have become quite vulnerable during the pandemic process. (Chatterjee, 2020). India's inadequate healthcare infrastructure, overpopulation, uneven urbanization, policy issues, the existence of social inequalities, etc. It can be said that these situations weaken the resilience of society.

3.1.6 United States of America

The United States of America, as the main center of globalization, is a decisive power in the world in terms of economy. It is also the most economically developed country in the world and has the most financial resources. However, despite all this power, it is by far the country with the most loss of life, with more than one million deaths in the Covid-19 pandemic (Worldometer, 2023).

It can be said that many factors, politically, socially, and economically, are responsible for the emergence of this picture. It can be said that US President Donald Trump, who was in power when the Covid-19 pandemic began to spread, caused a false perception in the public and society by denying the existence of the virus and even calling it the "Chinese Virus" (Balogun, 2020).

This attitude, which mocked the epidemic in the period when the virus started to spread in China, and the delay in taking precautions led to the rapid spread of the virus in the country. It can be said that the political attitude of the administration reduces the resilience of the community. (Yamey & Gonsalves, 2020).

In the social sense, different reactions to the epidemic have emerged in the United States of America during the Covid-19 process. A certain segment of society, who supported this cynical attitude of President Trump, strongly opposed methods such as masks, social distancing, or protection from the epidemic with vaccines (Yamey & Gonsalves, 2020).

The culture of individualization, which is dominant in the country, adopts an approach that prioritizes the freedoms and decisions of the person. For this reason, it creates a quite opposite image of the harmony of the society in Asian countries such as Japan and South Korea in taking all these measures spontaneously and without the need for coercion. In addition, many social reactions and protests have been seen in the country due to the practices that amount to

discrimination against African-American citizens. The vulnerabilities arising from the cultural and social structure have led to a decrease in the resilience of the community.

Although it is the country with the largest economic resources, the existing health system is far from being a social state that includes everyone. Economic life coming to a standstill due to the pandemic has caused many people to lose their jobs (Johnson-Agbakwu et al., 2022). Losing a job, as well as being unable to have health insurance and access to health services, in the country, many people living in this situation have become fragile and have suffered from the pandemic. Although many economic supports were announced in the following period, these aids, which were generally aimed at protecting companies, were insufficient to meet the needs of society. (Khatana & Groeneveld, 2020). It can be said that all these situations, which are explained in general terms, increase the fragility and vulnerabilities of society and cause many casualties.

3.1.7 Brazil

Brazil has been one of the countries that came to the fore the most during the pandemic period. The main reason for this situation was the fact that almost no measures were taken by the administration against the pandemic that the country experienced tragically, and the society was deeply affected by the loss of many lives during the pandemic (Uysal Oğuz & Sezek, 2020).

Since the epidemic began to spread in the country, then-president Jair Bolsonaro persistently denied the existence and spread of the virus in the society at a time when the epidemic was most violently killed, even when mass graves were formed, and opposed any measures or policies being implemented (Boschiero et al., 2021).

Jair Bolsonaro exhibited an attitude similar to US President Donald Trump, and by taking this attitude to a further stage, he did not implement any health policy that includes practices such as the obligation to wear masks and curfews, which reduce the spread of any contagion by the state in the country. Emphasizing that the country's economy cannot stop, he almost ran a campaign for everyone to continue their lives as if there was no pandemic (Ponce, 2020).

The social structure and socio-economic conditions of the country have been decisive in the losses. Compared to the economically developed and high-prosperity social segments, workers who live in poor housing in the outer parts of cities and who generally make their living with their daily labor suffered significantly more loss of life (Boschiero et al., 2021).

These people, who do not have the chance to work remotely and who earn their daily income by working in crowded environments, have been exposed to the virus more. This section of workers, who were left without social assistance as a result of the administration's approach that ignores the epidemic, which ignores the problems and even the existence of these groups, suffered great damage by being fragile and defenseless (Boschiero et al., 2021).

Because the current health system has patients far above its capacity, the health system has also become inoperable, and as a result, Brazil has been the second country with the highest loss according to official figures (Worldometer, 2023). There are many criticisms here that the tests and death numbers are not reported accurately and transparently. It can be said that administrative inadequacies increase socio-economic vulnerabilities and cause a decrease in social resistance and great losses.

4. Method

A systematic review uses all the existing research and is sometime called ‘secondary research’ (research on research). They are often required by research funders to establish the state of existing knowledge and are frequently used in guideline development (Clarke, 2011). The systematic review method has a four-stage application. In the first stage, article eligibility criteria are clearly defined. In the second stage, the article eligibility criteria are met. All studies that meet the criteria are systematically searched and articles that meet the acceptance criteria are identified. Articles eligible at the third stage (meeting the article acceptance criteria) is determined. In the last stage, the findings and results of the selected articles are presented and evaluated systematically (Greenwood et al., 2014).

In this systematic review, the articles published between 2020-2022, when the Covid-19 pandemic was intense, were examined. For this purpose, databases of Pubmed, Web of Science and National Institution of Health (NIH) the words “health policies covid-19” and “resilience” were scanned and 252 articles on the subject were reached. 20 articles were included in the study, as a result of 232 articles extracted by filtering from topics other than health policy and resilience, or the same article in each database, out of 252 articles reached as a result of this search. Since there is no article written on this subject in Turkish, it could not be included in the study. Book chapters and papers are not included.

4.1 Results

In this study, the region and the identified problem areas of these 20 studies, which were accessed in accordance with the systematic review approach, are summarized Table 1. respectively.

Table 1. *Included Articles*

Study	Region of The Study	Problem Areas Studied in Health Policy and Resilience
(Jae Moon & Wu, 2022)	Asia	This study examines two aspects of resilience building in policy responses to crises such as Covid-19 - capacity development and governance innovation.
(Angeler et al., 2022)	Australia and North America	This study discusses adaptation and transformation as two complementary, integral components of resilience and applies them to healthcare.
(Wallenburg et al., 2022)	Europe	This study discusses unmask the institutionalized resilience of the Dutch health care system to pandemic crisis.
(Haldane et al., 2021)	Europe	In this study, which investigated the health system resilience of 28 countries, It was emphasized that governance and financing, health workforce, medical products and technologies, public health functions, health service delivery and community engagement to prevent and mitigate the spread of Covid-19.

(Apostolopoulos et al., 2021)	Europe	This study comes to investigate the implications of public policies on Covid-19 for the healthcare enterprises in the Greek rural areas and contribute to ongoing discussion about the impact of Covid-19 crisis, entrepreneurship in disadvantaged areas, and trends in healthcare enterprises.
(Mardiyanta & Wijaya, 2021)	Asia	This study focusing on primary and secondary studies exploring the application of policy capacity competencies in facilitating Covid-19 handling in Asia. Findings from the studies are related to operational, technology use, individual privacy, paradox of trust and legitimacy, or centralisation versus decentralization.
(Dauner & Wilmot, 2022)	North America	This study debates whether pre-pandemic social capital and social trust, civic participation, and presence of mask mandates, affected pandemic mental health, measured as the percent of the population experiencing symptoms of depression and anxiety at the state level. Results confirming that existing social capital, particularly social trust, may protect against anxiety and depression and contribute to community resilience during times of adversity.
(Sajadi & Hartley, 2022)	Middle East	This study investigates the policy responses of Iran's government during the first months of the pandemic and pointing that several governance weaknesses.
(Song et al., 2020)	Asia	This study focusing employee's health and social economic stressors. Results showing that there is need for organization administrators to be aware of the status of and factors associated with employees' mental health and work attitudes during the Covid-19 pandemic.
(An et al., 2021)	Europe-North America	This study results shows that the mask mandate is consistently associated with lower infection rates in the short term, and its early adoption boosts the long-term efficacy. By contrast, the other five policy instruments—domestic lockdowns, international travel bans, mass gathering bans, and restaurant and school closures—show weaker efficacy
(Eriksson et al., 2022)	Europe	In this study seven obstacles discussed in Covid-19 pandemic: learning lessons difficulties, effectively drawing les-sons from other countries, the potential vulnerabilities in the system, political pressure, drawing the conclusions from

		observations, experts versus decision makers, reforms may not be related to the actual crisis.
(Watkins & Clevenger, 2021)	North America	In this study, the subject of political leadership and crisis communication has been studied. Results shows that President Trump and other leaders are particularly vulnerable to political fallout for their handling of COVID-19 because stakeholders might view them as inattentive to the crisis and ineffective in their policy responses.
(Newman, 2021)	Global	In this study, it is emphasized that the Covid-19 pandemic reduces resilience at both the individual and societal level by damaging the traditional security perspective.
(Orhan et al., 2021)	Europe	In this study, it was emphasized that the Covid-19 pandemic creates a great burden on the European Union health system . It has been determined that a country alone will be weak in preparing for such a situation that policies should be produced in cooperation with this problem.
(Fukuda-Parr, 2022)	North America	In this study, attention was drawn to the problematic areas in the indicators used in monitoring the sustainable development goals. It has been determined that the indicators are quite weak against a situation such as the preparation of a country for a pandemic .
(Soon et al., 2021)	Asia	In this study, which examines the policies followed during the Covid-19 pandemic in China, Japan, Korea and Taiwan, it is emphasized that unemployment protection and social support are given importance.
(O'Donnell et al., 2022)	Australia	In this study, which investigated the long-term effects of Covid-19 infections and lockdown on mental health and the protective effect of neighborhood social relationships, it was concluded that depression and neighborhood relationships were negatively affected .
(Pekarčíková & Staničková, 2022)	Europe	In this study, it is stated that within the framework of the Covid-19 experience, policies that prioritize transparency should be determined for the continuity of the European Union for new crisis situations that may arise in the future.
(Kim et al., 2022)	Asia	In this study, the importance of the Singapore State to draw lessons from previous experiences and to determine its policies within this framework was emphasized during the Covid-19 pandemic process. In addition, it was stated that the

		cooperation between the private and public sectors would increase the resilience of the community access to the services it needs.
(Donkor et al., 2022)	Africa	In this study, the effects of events that may prolonged the achievement of sustainable development goals are mentioned. It was emphasized that to build resilient communities, communities should be developed in terms of sociological, technological, physical and economic capacity.

As can be seen in Table 1, many different types of studies in different parts of the world have examined the problems in the covid-19 pandemic process. Studies in the European region have identified problems in areas such as health systems capacity, health workforce, health care financing, transparency and governance. In studies on the North American region, problematic areas such as leadership and crisis communication, mental health status, and social problems were emphasized. In studies conducted in Asian and African countries, the importance of intersectoral cooperation and preventing workforce loss has mostly come to the fore.

Table 2. Covid-19 Pandemic Current Situation

Ülke (Country)	Toplam Vaka Sayısı (Total Cases)	Toplam Ölüm Sayısı (Total Deaths)	Ülke Nüfusu (Population)
Çin Halk Cumhuriyeti (China)	503302	5272	1,448,471,400
Amerika Birleşik Devletleri (USA)	107,394,096	1,168,886	334,805,269
Hindistan (India)	44,994,819	531,914	1,406,631,776
Brezilya (Brasil)	37,693,506	704,320	215,353,593
Japonya (Japan)	33,803,572	74,694	125,584,838
Güney Kore (South Korea)	32,415,857	35,111	51,329,899
Rusya (Russia)	22,967,718	399,715	145,805,947

The current situation regarding the Covid-19 pandemic is shown in Table 2. In this table, which is sorted by the highest number of cases, the number of cases of the countries, the number of deaths, population, etc. information is included. Despite the number of cases in Japan and Korea countries, it is striking that the number of deaths is quite low compared to their population. Although it is known that the elderly population is very high, especially in Japan, and the Covid-19 virus often causes the death of elderly individuals, the death rates are quite low. Death figures

in Russia, Brazil and India appear to be significantly higher. Despite all its economic and health capacity, the United States of America has been the country with the heaviest loss among all countries. It can be interpreted that community resilience is low in these countries where the loss of life is much higher than expected. The policies followed by the countries with the least losses need to be examined in more detail.

Conclusion

All societies around the world are experiencing an extraordinary situation unprecedented in recent history with Covid-19. Since the date of its announcement, no statement has been made by WHO that the pandemic is over. The fight against the pandemic continues to the extent of each country's own experience and capacity.

Due to the social, economic, or administrative differences between the countries, it does not seem possible to establish a single struggle or policy for other similar epidemics that we are living in today or that may occur in the future. However, there is a need for mechanisms that can enable countries to act jointly against such transboundary disasters.

It is necessary to produce more policies and solutions for the solution of administrative and economic problems, which cause damage by reducing the resilience of communities. Socio-economic vulnerabilities need to be minimized and health infrastructures need to be strengthened. In addition, it is necessary to produce solutions that will ensure the formation of a culture to increase social awareness and provide behavior change, especially for epidemics that may turn into possible pandemics. Traditional and social media, various training programs, etc. to increase the awareness of the society in cases such as epidemics. It is important to carry out all these activities with tools to ensure the resilience of the community.

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