

India's COVID-19 Opportunity in Southeast Asia

India needs to extend its regional COVID diplomacy eastward.

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Credit: [Indian Ministry of External Affairs](#)

On March 15, Indian Prime Minister Narendra Modi initiated discussions on a potential regional response to the COVID-19 pandemic through a video meeting with leaders from the South Asian Association for Regional Cooperation (SAARC). New Delhi has not yet pushed for such multilateral cooperation to its east, either within the Bay of Bengal Initiative for Multi-Sectoral Technical and Economic Cooperation (BIMSTEC) or with the Association of Southeast Asian Nations (ASEAN).

New Delhi has reached out to only a few Southeast Asian countries and companies in a case-specific manner to give or receive crisis-time assistance. India must eschew a piecemeal strategy and broaden the scope of its COVID-19 outreach eastward to strengthen its Act East Policy (AEP), fortify its credibility in Southeast Asia, and balance Chinese interventions. For India, institutionalizing crisis-time transregional cooperation carries both short and medium-to-long term imperatives.

Unequal Outreach

Besides countries in its extended neighborhood, like Mauritius and the Seychelles, India has so far offered COVID-19-related assistance — supplying hydroxychloroquine (HCQ) and paracetamol tablets and other medical supplies — to at least 123 countries, including the United States, Germany, Spain, South Africa, Kuwait, Jordan, the Dominican Republic, and Antigua and Barbuda. Seen in this context, India's outreach to the nearby ASEAN region appears oddly scant.

So far, Modi has directly spoken to his counterparts in only three ASEAN member states — Vietnam, Singapore, and Indonesia — to discuss health and economic challenges. India has also agreed to supply HCQ tablets to Malaysia and received a donation of 30,000 COVID-19 testing kits from a Singaporean company. The Indian embassy in Manila has supplied masks, sanitizers, and medicines to Philippine government officials, university students, and regular citizens.

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While India's broad-spectrum diplomatic outreach during the pandemic is noteworthy, the Modi government should not overlook key foreign policy priorities and regional interests. Over the past decade, both BIMSTEC and ASEAN have emerged as core areas of interest for New Delhi within the ambit of its AEP and the Neighborhood First Policy. New Delhi has spiritedly engaged with both regional formations through multisectoral initiatives in the domains of traditional and nontraditional security. These must now be furthered within the context of the COVID-19 pandemic.

Why Should New Delhi Expand Its COVID-19 Outreach Eastwards?

One of the foremost challenges that India faces in implementing AEP is a credibility deficit at both the institutional and popular levels in Southeast Asia. The COVID-19 crisis provides a window for New Delhi to fix some of this deficit.

Initiating joint action and shared learning during a crisis can positively shape public and institutional memories in partner countries. The pandemic thus offers New Delhi an opportunity to ramp up its public diplomacy in Southeast Asia and show its willingness — and wherewithal — to undertake mutually-beneficial collaborations. Ultimately, this would help New Delhi broaden and deepen the scope of AEP and secure greater legitimacy for future regional projects.

Collaborating with BIMSTEC members could serve as a catalyst in creating a joint economic recovery plan for the Bay of Bengal subregion, which has taken a heavy blow from COVID-19 and the ensuing national lockdowns. To prevent a rapid regression of the organization into its erstwhile comatose state, member states must ensure the resumption of subregional trade links once cross-border restrictions are lifted. For India, post-crisis collaboration within BIMSTEC could give a fillip to both AEP and NFP, particularly by incentivizing Myanmar and Thailand, both ASEAN members, to accelerate focus on their [“look west” policies](#).

ASEAN is already [engaging directly](#) with China on technical knowledge-sharing and multisectoral coordination over COVID-19 through an exclusive dialogue mechanism. ASEAN is also collaborating with China, Japan, and South Korea within the ASEAN Plus Three (APT) mechanism. It has even created an “APT reserve of essential medical supplies,” as outlined in a recent [joint statement](#). Evidently, ASEAN is open to transregional multilateral cooperation on COVID-19. This indication must encourage New Delhi to make its own forays on proposing joint initiatives.

A long-term impact of sustained Indian collaboration with ASEAN over pandemics is that a stronger, more effective, and more outcome-oriented AEP would automatically entail greater engagement, including smoother physical connectivity and higher people-to-people contact. This should be a solid driver for both sides to install a durable joint pandemic response framework so better connectivity does not transgress into faster pathogenic transmissions.

India has other strong short-term imperatives to expand its COVID-19 outreach eastwards. India shares a 1,640 kilometer-long porous land border with Myanmar, where COVID-19 cases are steadily rising. While this border is currently sealed, infections can easily travel back and forth in the near future, particularly when the lockdowns in both countries are lifted. A harmonization of containment strategies between New Delhi and Naypyitaw is important to prevent cross-border transmissions. Further, India must ensure continuity in its trade and connectivity links with Myanmar, also known as the “land bridge to Southeast Asia” in AEP parlance, to offset the severe disruptions caused by the pandemic.

So far, the individual country responses to the pandemic in Southeast Asia [have been mixed](#). Some countries (like Vietnam, Thailand, and Singapore) have successfully limited the virus and tackled the attendant socioeconomic challenges robustly. Others (like Indonesia, Cambodia, and the Philippines) struggling to cope.

Institutionalized collaboration between India and ASEAN will enable two-way knowledge-sharing, exchange of technical expertise, and transfer of best practice norms to mutual benefit.

What Can India Do?

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India's COVID-19 expansion eastward must follow two pathways: BIMSTEC and India-ASEAN. The former must be the first point of contact, given the proximity of Myanmar and Thailand to India's northeast. New Delhi could begin with a SAARC-like video conference with BIMSTEC to flag-off collaboration, and then customize as per the specific needs of member states. Thailand's role as the lead country in the organization's "public health" vertical, combined with its own best practices in managing the crisis, can be a big asset here.

The second pathway for India would be to propose direct collaboration with ASEAN within the existing India-ASEAN dialogue mechanism. A good place to begin would be the [India-ASEAN Plan of Action \(2016-2020\)](#), which has an embedded component of "Health and Pandemic Preparedness and Response." A major provision within this is working together "to enhance ASEAN's preparedness and capacity in responding to communicable and emerging infectious diseases including pandemics" through "preparedness planning, prevention efforts, and capacity building." It also includes "the strengthening of areas on surveillance, laboratory networking, human resource capacities, and information networking." The health component is also present in the [India-ASEAN Dialogue Relations](#) agenda, as updated in July 2019. These frameworks can be immediately operationalized through an Emergency Communication Network (ECN) handled by the Indian Mission to ASEAN in Jakarta, Indonesia. One of the first emergency measures that India could undertake is supplying HCQ and paracetamol tablets to countries in the region, depending on their requirements.

Within ASEAN, India should pay special attention to the Cambodia-Laos-Myanmar-Vietnam (CLMV) subregion, with which it already has synergies within the Mekong Ganga Cooperation (MGC) framework. In the immediate term, India must directly engage with the four countries to provide emergency assistance, including HCQ tablets and technical expertise. New Delhi could also lend its flagship Integrated Disease Surveillance Portal (IDSP) to the subregion, much like it has done with SAARC members.

In the medium-to-longer term, India must complete the creation of the long-pending MGC Working Group on Health and push Indian pharmaceutical and medical equipment companies to invest in the subregion's malnourished health sector. The Indian healthcare industry already has a significant footprint in the subregion. For instance, [according](#) to the Indian Chamber of Commerce in Cambodia, the health industry occupies a large segment of India-Cambodia bilateral trade, and India's Export-Import (EXIM) Bank has prioritized funding for Indian healthcare operators to expand operations in the country. Similar EXIM-led healthcare initiatives are being [considered](#) for Myanmar. These initiatives must be given priority in the post-pandemic phase.

Pandemic management was a key area of cooperation discussed in the sixth MGC Ministerial Meeting held in New Delhi in 2012. However, in the next session, in August 2019, "pandemics" found no mention. In light of the COVID-19 threat, India must revive this vertical in the next ministerial meeting and lay emphasis on pandemic surveillance and technical cooperation. India must also redirect focus on public health-centered Quick Impact Projects (QIPs) in the CLMV region, in line with the suggestion made during the sixth ministerial meeting.

Conclusion

India cannot take the lead in the Southeast Asian regional response — unlike SAARC. However, this must not preclude bilateral or multilateral cooperation, given New Delhi's rapidly evolving foreign policy priorities in the Indo-Pacific Region. New Delhi must note that the COVID-19 crisis has severely hampered transregional links, which is bad news for AEP and the many synergies that it had managed to build since 2014. To keep the policy's momentum going, crisis-time collaboration is critical. In fact, by repositioning faith in Indian diplomacy and goodwill, COVID-19 collaboration with the ASEAN region can ultimately prove to be a force multiplier for AEP.

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