ALL ABOUT KOREA'S RESPONSE TO COVID-19

Government of the Republic of Korea



Foreword

In the early days of 2020, few could have predicted that our lives would be upended by a novel pathogen that eventually evolved into a pandemic of global scale, claiming a devastating number of lives, and yielding multifaceted, long-term repercussions, perhaps permanently changing our entire way of life. The outbreak has not only disrupted the global mobility of people and goods across borders, eroding the web of distribution networks, but also spread panic, fear and distrust, prompting many to turn insular. In many ways, the impact of COVID-19 has served as a powerful reminder of just how interconnected yet vulnerable we are.

Korea was one of the first countries to be hit by COVID-19. We witnessed explosions in the number of cases in late February, latter part of August and early September, but were able to flatten the curve. Guided by our past experiences with infectious diseases such as MERS and SARS, we have firmly adhered to the principles of openness, transparency and civic engagement from the very beginning of the outbreak. Since then, we have responded to sporadic cluster infections and the evolving nature of the virus by quickly adapting and fine tuning our countermeasures, control strategies and preparedness.

As different parts of the world experiment with different policy combinations, the crisis has triggered calls for global solidarity. We firmly believe that safety for all can only be achieved by pooling resources, knowledge and lessons learned. *All About Korea's Response to COVID-19*, comprehensively outlines Korea's endeavors against COVID-19 from its outbreak in late January to the end of September 2020. We hope that it may serve as a source of reference for the international community. The compilation captures our whole-of-government deliberations¹ and the constant process of enhancing and fine-tuning our measures in line with the evolving situation.

We pay tribute to the healthcare workers and public servants around the world who are striving relentlessly at the frontline of the fight against COVID-19. We also extend our heartfelt sympathy to those battling the infection and wish them a speedy and full recovery.

COVID-19 continues to spread around the world. We may have been unprepared at its arrival, but we do have the power to change its course. Korea's efforts to initiate and engage in more vigorous international cooperation will continue. In sharing our experience and learning from others, we hope to identify best practices and emerge from the crisis as a more alert, more interconnected and better prepared world for the next global public health challenge.

¹ The Office for Government Policy Coordination, Ministry of Economy and Finance, Ministry of Education, Ministry of Science and ICT, Ministry of Foreign Affairs, Ministry of Justice, Ministry of the Interior and Safety, Ministry of Trade, Industry and Energy, Ministry of Health and Welfare, Korean National Police Agency, National Fire Agency, Korea Centers for Disease Control and Prevention, Korea Health Industry Development Institute, Korea Foundation for International Healthcare, Korea International Cooperation Agency, National Medical Center, Korea International Medical Association, Korea Foundation.

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Introduction





- 01. Spread of COVID-19 around the World and in Korea
- 02. Korea's Response to COVID-19: Objectives and Principles



Spread of COVID-19 around the World and in Korea







1. COVID-19 Situation around the World

The first confirmed COVID-19 case was reported in Wuhan, China on December 31, 2019. After the first COVID-19 death was reported on January 11, 2020, the initial spread of the virus occurred predominantly in China and neighboring countries of Asia. Eventually, the virus spread across the entire Asian continent. In response, the World Health Organization (WHO) officially declared COVID-19 a Public Health Emergency of International Concern (PHEIC) on January 30, 2020. This was the sixth¹ PHEIC since the International Health Regulations (IHR) came into force in 2005.

As the virus continued to rapidly spread across the world, WHO characterized COVID-19 as a global pandemic on March 11, 2020. The spread of COVID-19 has been extremely rapid and the impact radius has been far broader than the previous cases. When the H1N1 flu was declared pandemic in 2009, 28,000 people had been infected in 74 countries at the time of declaration. As for COVID-19, 126,000 people were confirmed positive in 114 countries by the time of pandemic declaration on March 11, 2020. As of September

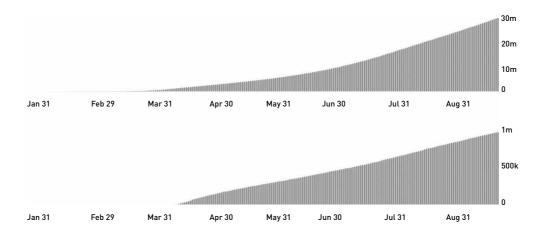
¹ History of PHEIC Declarations: 2009 H1N1 Influenza (global), 2014 Polio (Pakistan, Cameroon, Syria, et al.), 2014 Ebola virus (Liberia, et al.), 2016 Zika virus (Brazil, et al.), 2018-20 Kivu Ebola virus (Democratic Republic of the Congo, et al.).

22, 2020, there have been 31.2 million confirmed cases of COVID-19 and more than 960,000 deaths.

As COVID-19 swept around the globe, countries responded with strict control measures. Trying to stem the inflow of the virus, many governments banned the entry of foreign nationals and strengthened immigration procedures. Many declared state of emergency and even locked down entire cities. These restrictive measures placed severe limitations on the flow of goods and people within and between countries, and resulted in fundamental changes in our daily lives. The shockwaves registered in deteriorating economic indexes, such as soaring unemployment, shrinking production, and falling consumer confidence. The repercussions were felt across entire economies and societies.

Tracking Global Confirmed Cases (WHO²)

Globally, as of 22 Sept 2020, there have been 31,178,864 confirmed cases of COVID-19, including 962,644 deaths, reported to WHO

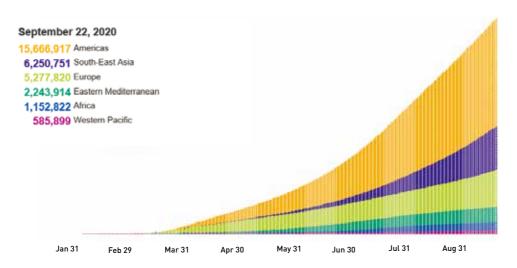


Source: World Health Organization

Data may be incomplete for the current day or week.

² WHO COVID-19 Dashboard

Tracking Global Confirmed Cases by Region (WHO³)



Source: World Health Organization

Countries have been taking various approaches to fight COVID-19, reflecting diverse situations in different countries. A number of countries, which have observed a slowdown in the spread of the virus, are moving forward with various strategies to return their economies and societies to normal. Some are relaxing lockdown measures not just within their borders, but also vis-à-vis the outside world, others are maintaining lockdowns as they remain wary of a resurgence. There are still others which lifted the lockdowns only to bring them back as the number of new cases spiked again.

2. COVID-19 Situation in Korea

The first COVID-19 case in Korea was confirmed on January 20. The subsequent spread of the epidemic has been in three stages. The total number of COVID-19 cases in Korea stands at 23,106 as of September 22.

(Stage I: January 20 to February 17) In the earliest stage of the epidemic, confirmed cases were limited to either travelers from overseas (17 patients) or their close contacts (13 patients). The daily number of newly confirmed cases averaged at 1.03 and the total of 30 cases were found during this stage. Korea's 4-tier Infectious Disease Risk Alert⁴ (Level 1 to 4 (highest)) was raised from 'Level 2' to 'Level 3' on January 27.

(Stage II: February 18 to May 5) The second stage of the epidemic was largely concentrated in a specific region of the country within a specific religious group. Large-scale community transmissions were also observed centering on hospital facilities and a call-center. An average of 138 new cases emerged per day during this stage. However, by quickly identifying those infected through exhaustive testing and aggressively tracking down their contacts to prevent further spread of the virus, the situation was stabilized.

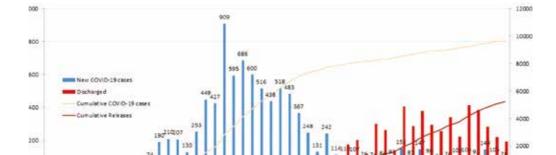
The Infectious Disease Risk Alert was upgraded from 'Level 3' to the highest level 'Level 4' on February 23. Social distancing measures were introduced, first on February 29 and then strengthened on March 22 to halt the spread of infections. A total of 10,774 cases emerged during this stage. Among these, 10.1% of the cases (1,085 patients) were found to be imports from overseas.

⁴ The Minister of Health and Welfare has the authority to issue a color-coded National Infectious Disease Risk Alert System, which ranges from "Level 1," "Level 2," "Level 3," to "Level 4 (Highest)."

⁵ As of March 30, 58.7% of confirmed cases were linked to Shincheonji Church and 82% were residents of Daegu/North Gyeongsang Province.

A number of border-control measures were phased in at this stage, corresponding to the shifting locations of concentrated outbreaks overseas.

The number of newly confirmed cases per day steadily declined since hitting a peak at 909 new cases on February 29. Since March 15, when the number first fell below 100, the average number of newly confirmed cases per day fluctuated around this level. Since mid-March, the daily number of patients who had fully recovered, tested negative for COVID-19, and discharged from hospitals of treatment centers (shown in red below) surpassed that of the newly confirmed cases (shown in blue below). On March 28, the number of patients fully cured and released surpassed those still remaining in care.



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COVID-19 Situation in Korea from February to March 2020

(Stage III: May 6 to August 13) The third stage of the epidemic is characterized by small-scale community/group infections that first originated from multiple epicenters (nightclubs, large-scale logistics center, door-to-door sale agent, churches, etc) in the metropolitan Seoul area that then spread to other regions. Social distancing measures that had been introduced in stage II was pulled back on May 6 to a set of personal and community codes of conduct that is more sustainable in the long run. The average number of new cases per day

was 41 from May 6 to August 13. Another characteristic at this stage is the increasing proportion of cases found amongst inbound travelers. In response to this increasing risk from overseas, additional border-control measures were introduced.

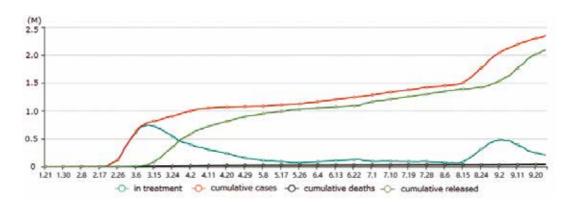
(Stage IV: August 14 onwards) The fourth stage witnessed a community infection, which originated from several hot-spots in the Seoul metropolitan area, spreading to other regions of the country through churches, call-centers, hospitals, convalescent facilities, schools, etc. The daily number of newly confirmed cases at this stage averaged at 214 as of September 22 and peaked at 441 on August 27. The Korean government took the situation seriously, and implemented preemptive and strict measures to control the spread of the disease.

Specifically, the Korean government responded to the spread by adjusting the level of social distancing measures. Social distancing measure level 2 was introduced on August 23 throughout the country, followed by "enhanced" social distancing measure level 2 for the Seoul metropolitan area, which was hit hardest, from August 30 to September 13. Thanks to active public adherence to this measure, the government managed to flatten the soaring curve. The number of daily new cases fell to two-digit figures as of September 20, and the numbers of daily new cases have since averaged at 80 as of September 28.

To prevent further spread during the upcoming Chuseok holidays from September 30 to October 4, tighter disease prevention rules were also issued with effect from September 28 to October 11.

Tracking COVID-19 Cases in Korea⁶

Total Confirmed Cases 23,106, Deaths 388, Released from Isolation/Self-Quarantine 20,441





6 http://coronaboard.kr

Timeline of Major Events and Korea's Key Responses

Dec. 31, 2019. Wuhan Municipal Health Commission reports pneumonia cases in Wuhan, Hubei Province. Jan. 3. National Infectious Disease Risk Alert level is declared to "Level 1." / Korea Centers for Disease Control and Prevention (KCDC) forms the Countermeasures Team for Unidentified Pneumonia Outbreak in Wuhan. Jan 9. COVID-19 testing method (Pan-corona testing method) is established. Jan. 20. First confirmed case in Korea is reported. / National Infectious Disease Risk Alert level is raised to "Level 2." / Central Disease Control Headquarters begins operation. Jan 24. Nationwide expansion of COVID-19 testing method to public testing agencies Jan 27. National Infectious Disease Risk Alert level is raised to "Level 3." / Central Disaster Management Headquarters begins operation. / Government holds briefing session with private manufacturing companies on development of diagnostic reagents and testing kits. Jan. 30. WHO declares COVID-19 Public Health Emergency of International Concern (PHEIC). Jan 31. New testing method (Real-Time RT-PCR) is launched. Feb. 1. Central Disaster Management Headquarters is expanded and reorganized. / Government assists the return of Korean nationals from Wuhan. Feb. 4. Emergency Use Authorization is granted for COVID-19 diagnostic reagents. / Special Entry Procedures are applied for arrivals from China. Feb 7. Nationwide expansion of COVID-19 testing method to private medical institutions Feb 12. Special Entry Procedures are introduced to arrivals from Hong Kong and Macao. / Self-Check Mobile App is launched. Feb 19. Government repatriates Korean nationals from cruise ship Diamond Princess docked in Yokohama. Feb 21. Whole-of-Government Special Support Team for Daegu is dispatched to the region. / Government designates infectious disease hospitals.	Month	Responses			
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Feb 23. National Infectious Disease Risk Alert level is raised to "Level 4 (Highest)."/ Central Disaster and Safety Countermeasure Headquarters begins operation./ Drive-through screening starts.		Central Disaster and Safety Countermeasure Headquarters begins operation./			
Feb 24. Government evacuates Korean travelers/residents in Israel.		Feb 24. Government evacuates Korean travelers/residents in Israel.			
Feb 29. Social distancing is introduced.		Feb 29. Social distancing is introduced.			

Month	Responses			
	Mar 1. Residential treatment centers begin operation.			
	Mar 5. Mask supply and demand stabilization policy is introduced to two per person per week.			
	Mar 7. Self-Quarantine Safety Protection App is launched.			
	Mar 9. Five-Day Rotation Face Mask Rationing System is implemented./ Special Entry Procedures are extended to arrivals from Japan.			
	Mar 11. WHO characterizes COVID-19 as a pandemic. / Special Entry Procedures are applied for arrivals from Italy and Iran.			
Mar.	Mar 15. Special Entry Procedures are extended to arrivals from France, Germany, Spain, the UK, and the Netherlands.			
	Mar 16. Special Entry Procedures are extended to arrivals from all regions in Europe.			
	Mar 18. Government evacuates Korean travelers/residents in Iran.			
	Mar 19. Special Entry Procedures and Self-Check Mobile App are extended to all arrivals.			
	Mar 22. Mandatory testing is carried out for all arrivals from COVID-19 hot spots./ Enhanced social distancing measures go into effect.			
	Mar 26. G20 Extraordinary Virtual Leaders' Summit is held.			
	Mar 30. Government evacuates Korean travelers/residents in Italy.			
	Apr 1. 14-day quarantine requirement goes into effect for all arrivals.			
Apr.	Apr 9. Online classes begin and are further extended in phases.			
	Apr 10-11. Special Early Voting for 21 st National Assembly Elections are carried out.			
	Apr 13. Visa free entry and visa waiver entry are temporarily suspended.			
	Apr 14. Special ASEAN Plus Three (APT) Summit is held via video conference.			
	Apr 15. 21 st National Assembly Elections are carried out.			
	Apr 20. Eased Social distancing measures go into effect.			
	Apr 27. Restrictions on face mask purchases are eased from two to three masks per person per week./ Self-Quarantine Safety Band is introduced.			

Month	Responses			
	May 6. Distancing in Daily Life begins.			
May Jun.	May 11. All arrivals are required to undergo testing for COVID-19.			
	May 12. UN Group of Friends of Solidarity for Global Health Security is launched in New York.			
	May 18. President Moon Jae-in delivers a special address at the 73 rd World Health Assembly by video.			
	May 20. WHO Support Group for Global Infectious Disease Response is launched in Geneva./ Schools begin reopening in a staggered manner.			
	May 26. UNESCO Group of Friends for Solidarity and Inclusion with Global Citizenship Education (GCED) is launched in Paris.			
	Jun 1. Five-Day Rotation Face Mask Rationing System is lifted.			
	Jun 28. Three-level Social Distancing Scheme is introduced in anticipation of future surges.			
Jul.	Jul 14. Korean New Deal for post-COVID19 is announced.			
	Aug 23. Social distancing measure level 2 is applied across the country.			
Aug.	Aug 30. "Enhanced" social distancing measure level 2 is applied for the Seoul metropolitan area.			
Sept.	Sept 14. Social distancing measure for the Seoul metropolitan area is downgraded from "enhanced" level 2 to level 2.			
	Sept 21. President Moon Jae-in delivers an address at High Level Meeting to commemorate the 75 th anniversary of the United Nations by video.			
	Sept 22. President Moon Jae-in delivers an address at the 75 th session of United Nations General Assembly by video.			

Korea's Response to COVID-19:Objectives and Principles







The objectives of the Korea's COVID-19 response strategy have been to prevent the spread of the disease, protect public health, keep the society and economy open, and thereby allow daily life to continue. The government has been able to maintain a delicate balance between containing the spread of the infectious disease and keeping society open and functioning. Efforts were made not only to preserve the freedom of movement within the country so that citizens could go about their daily lives, but also to keep the channels of international exchange as open as possible.

In pursuit of these objectives, Korea's response to COVID-19 has been grounded on the principles of Openness, Transparency, Civic Engagement, and innovativeness.

- Openness: Keeping borders and society open without blanket entry ban and mandatory lockdown measures.
- Transparency: Full and prompt disclosure of data on global and domestic COVID-19 trends, along with information about government decisions and strategies.

- Civic Engagement: Implementing policies based on clear communication and citizen participation.
- Innovativeness: Embracing creative problem-solving and resilient and flexible responses.

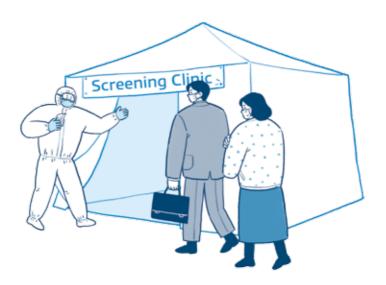
President Moon Jae-in delivers a message during the 73rd World Health Assembly (May 18, 2020)



"The Korean people displayed the highest form of civic virtues to practice the spirit of 'freedom for all' and voluntarily participated in quarantine efforts. This was what really enabled the three main principles of openness, transparency, and democracy to flourish. The government also supported the people's efforts with swift, widespread testing and creative approaches."

At the core of Korea's response to COVID-19 is a strategy of robust and preemptive Testing, Tracing, and Treatment (3Ts). This has been built upon the lessons learned from Korea's experience with similar infectious disease outbreaks in the past, its extensive public health infrastructure, advanced information and communications technology, and the integrated administrative capacity of the government. These elements have all come together to produce a dynamic and continuously evolving system for combating the fast-changing COVID-19 pandemic.

For more information				
Part	Organization	Division	Email	Contact
Introduction	Ministry of Foreign Affairs	Task Force for Tackling COVID-19	khmin19@ mofa.go.kr	+82-2-2100-6885







Key Sectors in Korea's Response to COVID-19







- 01. Governance
- 02. Testing, Tracing, and Treatment (3Ts)
- 03. Immigration and Screening Measures
- 04. Social Measures
- 05. Education
- 06. Economy
- 07. Assistance for Korean Nationals Overseas
- 08. International Cooperation



Governance







1. Governance Reform Based on the Previous Experience

Much of Korea's response to COVID-19 in terms of governance has been the result of lessons learned from our experience and shortcomings while dealing with the outbreak of Middle East Respiratory Syndrome (MERS) in 2015. Many institutional and legal changes were adopted in the aftermath of the MERS crisis. The Korea Centers for Disease Control and Prevention (KCDC)¹ was granted greater authority and autonomy as the control tower for infectious disease control. Laws were amended to promote public-private medical partnerships, authorize emergency use of testing kits and treatments, and enable health authorities to collect data needed for contact-tracing of infected individuals.

¹ The Korea Centers for Disease Control and Prevention (KCDC) was established in 2004, and expanded from the former Korea National Institute of Health. The additional need for changes in infectious disease management was raised after experiencing policy confusions during the Severe Acute Respiratory Syndrome (SARS) outbreak in 2003 and the Middle East Respiratory Syndrome (MERS) outbreak in 2015.

The importance of risk communication also came to be recognized — that the public has a right to access accurate and timely information, and that public trust in the government is crucial in garnering civic engagement and participation. Another lesson learnt was the importance of effective cooperation between central and local governments, as the latter are the ones at the forefront of ground operations for epidemic control. All these changes provided the base framework of Korea's COVID-19 response.

To strengthen the response to infectious diseases, against the current pandemic as well as other challenges to come, the Korean government promoted KCDC, which was under the Ministry of Health and Welfare, to a stand-alone government agency on September 12. The new Korea Disease Control and Prevention Agency (KDCA)² was given independent authority to set and execute policies related to infectious disease, and have control over budgetary, personnel and organizational matters. To support local governments in their infectious disease-related groundwork, 'Regional Centers for Disease Control and Prevention' were accordingly established in major provinces nationwide. Investment into research and development efforts in basic and applied sciences will be expanded.



² To avoid the confusion, we will continue to use the term "KCDC" to refer to this agency hereafter, not "KDCA".

2. Infectious Disease Risk Alert System

Korea's National Infectious Disease Risk Alert System has four levels in ascending order from "Level 1" to "Level 4." The government raises and lowers the levels based on the assessment of the public health risks, and simultaneously adjusts the response methods. The Minister of Health and Welfare has the authority to issue and adjust the risk alert.

This response system for disease control goes hand in hand with the crisis alert level: at the Level 1 level, countermeasures teams are organized at KCDC according to types of infectious diseases; at the Level 2 the Central Disease Control Headquarters at KCDC is formed and operated; at the Level 3 level, the Central Disaster Management Headquarters is launched to support the Central Disease Control Headquarters; and at the Level 4 (Highest) whole-of-government response measures through the Central Disaster and Safety Countermeasure Headquarters is activated.



Infectious Disease Risk Alert System and Countermeasure Activities³

	Type of	fThreat		
Level	Novel Infectious Disease Emerging Overseas	Unknown/ Reemerging Domestic Infectious Disease	Major Activities Undertaken as Response Measures	
Level 1	Novel infectious disease emerges overseas, and becomes an epidemic.	Unknown/ reemerging of domestic infectious disease	 Countermeasures teams at KCDC initiate operations to tackle each infectious disease. Monitoring and surveillance for potential health risk takes place. Response capacity is prepared. If needed, measures for on-site measures are implemented, and related infrastructure can be deployed. 	
	Novel infectious disease enters Korea.	Limited transmission of the unknown/ reemerging domestic infectious disease	 Central Disease Control Headquarters is formed at KCDC and put into operation. Cooperation mechanisms for relevant agencies are activated. Relevant measures are installed and related infrastructures are activated. Monitoring and surveillance activities are strengthened. 	
Level 3	Limited transmission is detected for the novel infectious disease in Korea.	Community transmission of unknown/ reemerging domestic infectious disease	 Central Disease Control Headquarters of KCDC continues its operation. Central Disaster Management Headquarters is established at the Ministry of Health and Welfare. If needed, the Prime Minister holds a pan-governmental meeting. The Ministry of the Interior and Safety reviews for operation of pan-governmental support headquarters. Cooperation mechanisms for relevant agencies are strengthened. Disease prevention and surveillance activities are enhanced. 	

³ Disaster Management Working-level Manual for Infectious Diseases (Ministry of Food and Drug Safety, July 2019)

Type of Threat		fThreat		
Level	Novel Infectious Disease Emerging Overseas	Unknown/ Reemerging Domestic Infectious Disease	Major Activities Undertaken as Response Measures	
Level 4 (Highest)	Community transmission or nationwide spread is observed for the novel infectious disease in Korea.	Nationwide spread of unknown/ reemerging domestic infectious disease	 Full-capacity and pan-governmental response is in place. If needed, Central Disaster and Safety Countermeasure Headquarters begins its operation. 	

3. Whole-of-Government Approach

Since February 23 when the health alert for COVID-19 was upgraded to the highest level ("Level 4") in the face of the massive outbreak in Daegu, the Korean government has maintained a concerted whole-of-government approach. The Prime Minister chairs the Central Disaster and Safety Countermeasure (CDSC) Headquarters Meeting, comprising all relevant ministries of the central government as well as the seventeen provinces and major cities.

The CDSC Headquarters Meeting has convened seven days a week since late February with very few exceptions such as the day of general elections on April 15. Since late April, as the number of daily new confirmed cases gradually decreased, the Prime Minister has cut back from chairing the committee meetings to three times a week, with the Minister of Health and Welfare or other high level officials filling in the rest. The Prime Minister also oversees ad-hoc meetings when new challenges arise, such as face mask shortages or steep increase in influx of COVID-19 from overseas that require in-depth deliberations.

This daily conversation at the highest level between the central and local governments has been crucial to identifying problems and blockages and finding solutions, and ensuring that the solutions are implemented and adjusted as needed. With this approach, the Korean government was able to effectively utilize and allocate resources around the country. For example, when cases were soaring in Daegu/North Gyeongsang Province at the initial stage of the outbreak, many patients were transferred to other cities/ provinces for intensive care. After successfully flattening the initial surge, the conversations have centered on restructuring the allocation of the medical resources in preparation for the prolonged pandemic, and on ways to alleviate the sense of fatigue that has begun spreading among the public from the prolonged pandemic and social distancing measures.

In June, the CDSC decided to cluster the medical resources around the country, spread among the 17 provincial/city authorities, into six regional clusters. This was to remove bureaucratic hurdles when transferring patients across administrative lines, and effectively pool together and secure hospital beds and medical resources in preparation for a possible surge in caseloads. A simulation exercise for the metropolitan cluster (comprising Seoul city, the adjacent Incheon city and the surrounding Gyeonggi province) was undertaken in early June. In early July, when caseloads surged in Gwangju city to around 50 per day, the southwest regional cluster (comprising Gwangju city and the adjacent North and South Jeolla provinces) was activated for nearly a month until the situation came under control.

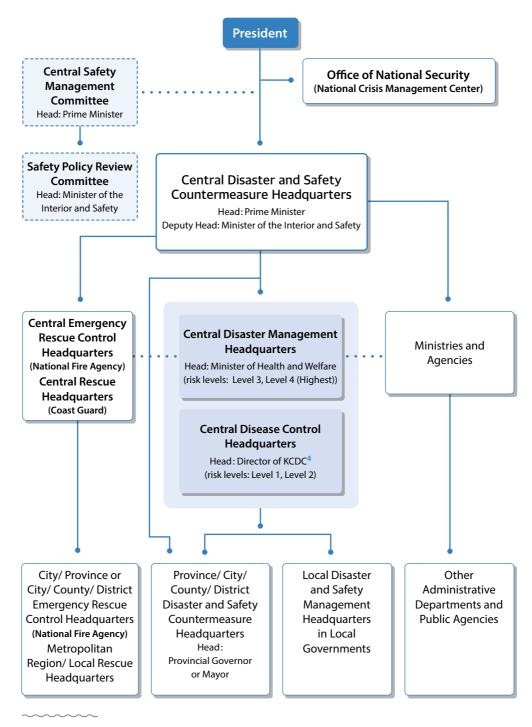
Also, the close collaboration and division of labor between the central and local government officials have been instrumental in the effective management of self-quarantine cases, whereby each case is monitored/assisted by an assigned official. This concerted, adaptive approach will remain central in the Korean government's collective efforts to overcome the socio-economic consequences of COVID-19.





Prime Minister presiding Central Disaster and Safety Countermeasure Headquarters meeting

Overview of Korea's Comprehensive Crisis Management System



4 To avoid the confusion, we will continue to use the term "KCDC" to refer to this agency hereafter, not "KDCA".



Minister of Health and Welfare giving a press briefing

In addition, since day one, press briefings have been held twice a day, by the Minister/Vice Minister of Health in the morning and by the Director of KCDC and Director of the Korea National Institute of Health (KNIH) in the afternoon.⁵ Regular press releases that cover a wide range of information including the number of confirmed and suspected cases of COVID-19, number of tests performed, regional distribution of confirmed cases, epidemiological links, number of contacts under quarantine, number of discharged cases, and other statistics are also provided in English daily (www.cdc.go.kr/cdc_eng/ and ncov.mohw.go.kr/en).

For more information					
Part	Organization	Division	Email	Contact	
Governance	Ministry of Foreign Affairs	Task Force for Tackling COVID-19	khmin19@ mofa.go.kr	+82-2-2100-6885	
Governance	Ministry of Health and Welfare	Division of International Cooperation	bjw3813@ korea.kr	+82-44-202-2352	
Governance	Korea Disease Control and Prevention Agency	International Affairs	shinyelee@ korea.kr	+82-43-719-7751	

⁵ These briefings are live-streamed through the internet with simultaneous interpretation into English for international viewers (www.arirang.com at 11:00 am and 2:00 pm daily).

Testing, Tracing, and Treatment (3Ts)







The Korean government has been fighting COVID-19 without resorting to massive lockdowns by pursuing a systematic response strategy that consists of robust laboratory diagnostic testing to confirm positive cases, rigorous contact tracing to prevent further spread, and treating those infected at the earliest possible stage.

Given the potential risk of virus transmission by asymptomatic cases or mild cases, the Korean government placed a priority on early detection of the virus through preemptive laboratory diagnostic testing and strict epidemiological investigation. During the peak of the spread in mid-February, the authorities utilized most of the country's testing capacity at nearly 20,000 tests per day. The efficiency of testing was enhanced through Korea's innovative drivethrough and walk-through screening stations, which allow easy access for sample collection while maximizing the safety of medical workers and health care institutions.

Where needed, the Korean government utilized mobile GPS data and other advanced technologies to track people who came into close contact with the confirmed cases, in accordance with the Infectious Disease Control and Prevention Act, and place them under self-quarantine.

While implementing such practice, the Korean government has taken due care to protect and anonymize personal information and data before their disclosure to the public.

Treatment by symptoms and early response strategies led to high recovery and low mortality rates. Moreover, the classification of patients by severity of symptoms prevented a sharp increase in demand for medical attention so that hospitals could prioritize the treatment of patients who are at higher risk of severe illness.

1. TESTING: Laboratory Diagnostic Testing

The core of Korea's COVID-19 response lies in its robust laboratory diagnostic testing capability. As of September, 90,000 tests can be processed a day at full capacity, enabling the country to operate nationwide tests to preemptively and proactively.

This was possible due to the Korean government's resolve to expedite actions. The government rapidly transferred COVID-19 testing technology to the private sector and requested manufacturers to produce high-quality testing kits. The testing kits so produced received emergency use authorization in record time. Furthermore, the government mobilized available public and civic laboratory resources to boost up national testing capacity.

The Korean government soon adopted innovative measures such as drivethrough screening stations to make full use of the nation's mass testing capability, secure easy access to testing facilities for the public, and ensure safety at the related facilities and for the healthcare professionals who work on site.

1.1. Developing COVID-19 Testing Method

Based on the DNA sequence of a novel virus from China on January 10, KCDC recognized that this viral strain shares high genomic sequence homology to SARS-like coronavirus and set out to develop a testing method to identify SARS-CoV-2, the virus that causes COVID-19. At the early stage of the COVID-19 outbreak, pan-coronavirus testing method was conducted to detect all types of coronaviruses followed by a specific testing to identify the novel coronavirus. This process took one or two days for analysis and was not easy to use. Under the circumstances, the Korean government initiated a plan to roll out a new test method to detect SARS-CoV-2 in an easier and faster manner. On January 30, KCDC streamlined the chain of development, evaluation, and quality assessment of a new test method by using Real-time RT-PCR for faster and more convenient testing.

	Pan-Coronavirus Test	Novel Coronavirus Test
Detection Target	All strains of coronaviruses	Novel coronavirus first detected in Wuhan
Test Difficulty	High	Average
Time for Test Results	1–2 days	Few hours

Source: KCDC Press Release (January 13, 2020)

The Real-time RT-PCR test method is easy to use and only takes six hours for the results. Korean manufacturers utilized the method to produce their own COVID-19 testing kits and put them on the market quickly.

1.2. Developing Testing Kits, Emergency Use Authorization

On January 27, KCDC met with about 20 IVD (In Vitro Diagnostic) manufacturers and shared the KCDC's COVID-19 test method and request them to develop testing kits to effectively identify COVID-19. As for Emergency Use Authorization (EUA), KCDC evaluated test performance of the kits, which had been submitted since January 29, with civilian experts. KCDC asked the Ministry of Food and Drug Safety (MFDS) to issue EUAs for their use on February 3. The next day, MFDS notified KCDC that one product was approved for an EUA. As a result, designated hospitals and referral laboratories were soon able to perform the test. By the end of May, seven testing kits were authorized for their emergency use.

Before the outbreak, an authorization of testing kits used to take about a year due to a long haul of quality assessment and other follow-ups, but thanks to close cooperation between KCDC and MFDS, the EUA system unprecedentedly shortened the authorization process so that the public health authorities could swiftly respond to the spread of the infectious disease.

After the MERS outbreak in 2015, KCDC recognized the need for a swift authorization system on laboratory testing kits to prevent any pandemic. After consultations with MFDS, KCDC finally established the EUA system for IVD medical devices. This system was designed to authorize test reagents when they were urgently needed amid the threat of the pandemic but none of those had been granted authorization for domestic use. KCDC set up guidelines on submitting testing kits, notified to the public, reviewed submitted documentations, conducted expert reviews, and sent the integrated documents of the product to MFDS for an EUA. By the request of KCDC, MFDS could make an EUA approval on the product, after reviewing the related documents.

The EUA testing kits had been distributed nationwide, which made large-scale diagnostic testing available. KCDC also took steps to manage the accuracy of the tests by designating the certified laboratories with laboratory excellence program as COVID-19 testing facilities after conducting training sessions and quality assessment reviews. KCDC and the Korean society for laboratory medicine jointly established Committee for Laboratory Diagnosis Management to continuously monitor and manage the quality of tests.

The Committee published *Guidelines for the Laboratory Diagnosis of COVID-19 in Korea and Q&A for COVID-19 Laboratory Diagnosis* to further support accurate and efficient diagnostic testing at these designated facilities. Along with the efforts, the Ministry of Health and Welfare prepared plans for applying medical care expenses to COVID-19 laboratory testing to rapid use of the test at the medical facilities.

As a result of close cooperation among government agencies and private sectors, 146 institutions are conducting COVID-19 testing as of August 10: KCDC, 13 National Quarantine Stations, 18 Research Institutes for Public Health and Environment, 1 Armed Force Medical Science Research Institute and 113 civil hospitals and referral laboratories.

The EUA testing kits enabled private medical institutions to start COVID-19 testing rapidly. It makes intensive and rapid identification of confirmed cases and follow-up measures such as prompt isolation of contacts possible. The systematic cooperation among the central government, local governments, and the private sector, ultimately laid a foundation for Korea's predictable and effective response to COVID-19.

1.3. COVID-19 Screening Stations

Screening stations are coronavirus testing facilities set up in emergency rooms or an outside venue to screen visitors and patients before entering the hospital, with an aim to prevent any coronavirus transmissions within medical institutions or possible exposures to medical staff or other patients. The Korean government made efforts to ease public anxiety by opening up screening stations where suspected cases can be promptly diagnosed and treated. The Korean government sought innovative measures to further reduce the time spent for sample collection, to protect healthcare professionals from infection, and to prevent cross-infection between people waiting in line to get tested.

1.3.1. Drive-Through Screening Stations

In February, when the number of confirmed cases was rapidly increasing in Korea, an innovative scheme — "drive-through screening station" — was introduced. The drive-through system itself has been widely placed at fast-food restaurants or coffee houses, well-known for its convenience. Noting the need to protect medical staff and conduct multiple tests at the same time, a doctor of infectious internal medicine suggested setting up drive-through testing facilities across the country. Local governments put his idea into practice, making several drive-through screening stations in operation. As of September 22, 48 drive-through screening stations were being operated, accounting for 8% of 599 nationwide screening stations.

A drive-through screening station operates in 4 steps: registration, medical examination, sample collection, vehicle disinfection and education. Those who wish to get tested have to go through each tent while staying inside to minimize direct contact with other drivers and medical staff members, and this screening process takes less than 10 minutes.⁶

^{6 「}Standard Operating Model for "Drive-Through" Screening Clinics」, Central Disaster Management Headquarters (March 2020)





Drive-through screening station © YonhapNews

The drive-through screening stations not only reduced the time taken for sample collection to a one-sixth of the previous screening stations but also dramatically lowered the possibility of transmission among people. Recognizing the advantages of drive-through screening stations, many countries started opening up drive-through testing sites.

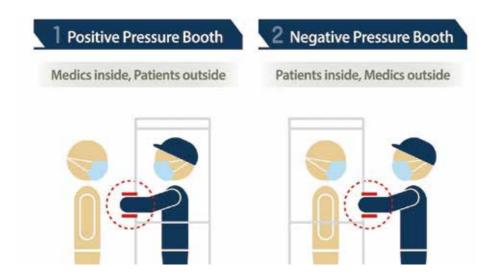
Registration Medical Sample-taking Entry Disinfection/ Education Exit no need for sample-taking

Drive-Through Screening Procedure

1.3.2. Walk-Through Screening Stations

Even though drive-through screening stations were lauded for its method for minimizing direct contact between the suspected cases and medical staff, there were still people who have no cars and the hospitals do not have enough space to build one. Against this backdrop, a new type of screening station — "walk-through screening station" — was devised in Korea. Walk-through screening stations can be installed in small areas for people who cannot drive, or in the regions that are prone to bad weather conditions.

Unlike general screening stations, walk-through screening stations utilize portable booths to separate the patients from the medical staff in the "patient safety zone" and "medical personnel clean zone" respectively. Two different types of walk-through screening stations exist according to the air pressure types. In a negative air pressure booth, patients should go inside while



healthcare professionals stay outside, and in a positive air pressure booth goes vice versa.⁷ Sample collection in a negative pressure-type booth takes 10 to 15 minutes as the booth needs to be sterilized and ventilated after use, whereas it takes about one minute using a positive pressure-type booth.⁸

As for inbound travelers, Incheon International Airport built an open-air, walk-through screening station like an outdoor testing facility in an open space with good ventilation to quickly and safely collect samples from a large number of visitors.

As this walk-through screening station started garnering a global attention for its effectiveness in reducing contacts, the Korean Intellectual Property Office (KIPO) proposed a national brand name for the walk-through system and its procedure as a "K Walk-Through" and filed a patent application for its name and technology to be used in Korea and beyond.

⁷ Korea's Quick & Safe COVID-19 Testing, Korean Intellectual Property Office

^{8 &}quot;Flattening the curve on COVID-19," p. 27, The Government of the Republic of Korea (April 2020)





Open-air walk-through screening stations in operation c YonhapNews

The Korean government has been systematizing every procedure and technique including the drive-through and walk-through systems and further proposing the registration of Korea's streamlined response system, identification of confirmed cases, epidemiological investigation with contact tracing, isolation and treatment to the International Organization for Standardization (ISO).

2. TRACING: Epidemiological Investigation and Self-Quarantine

2.1. Epidemiological Investigation

Epidemiological investigation refers to the act of identifying the causes and epidemiological characteristics of an infectious disease in order to establish appropriate measures for its prevention and control. As part of its COVID-19 response, the Korean government established and operated an Epidemiological Investigation Support System to quickly identify the paths of confirmed cases and analyze the modes of transmission. In order to improve the accuracy of epidemiological investigation, contact tracing should be conducted when necessary, within the scope permitted by the Infectious Disease Control and Prevention Act, by tracking credit card transaction records, CCTV footages, and mobile phone GPS data. While paying careful attention⁹ to protect privacy, the information found during epidemiological investigation was anonymously disclosed to the public. People could check themselves with the information if they had come across with the infected person and get tested if necessary.

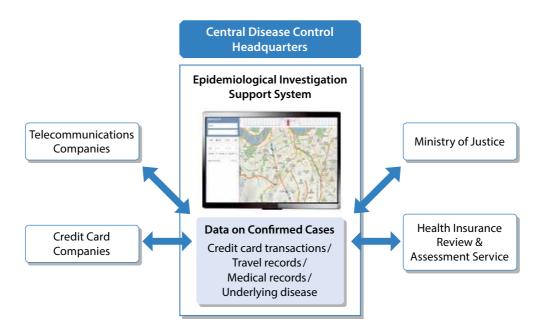
⁹ Personal information for epidemiological investigations is collected according to the Infectious Disease Control and Prevention Act. The Epidemiological Investigation Support System is operated in a strict manner to protect privacy, with the data accessible only to essential personnel such as epidemic intelligence officers of the Central Disease Control Headquarters and the application of strict principles related to the use of personal information.

The accuracy and effectiveness of the epidemiological investigation was further strengthened by ICT-based contact tracing. 'KI-Pass (Korea Internet Pass)', which is QR codes based entry log system was introduced in order to keep record of visitors to the facilities with a high risk of mass infection, such as entertainment facilities, private academies, Internet cafés, etc. The Korean government sought to minimize cross-contamination of COVID-19, by linking the information collected via KI-Pass to the Epidemiological Investigation Support System, whereby the officers could track visitors of each building or those who encountered with an infected person.

Close contacts identified by the epidemiological investigation were subject to self-quarantine, and their compliance and health conditions were further monitored on a one-on-one basis by assigned public health officials. The legal framework for the Korean government's contact-tracing methods was established after the MERS outbreak in 2015, through the amendment of the Infectious Disease Control and Prevention Act to allow relevant authorities to collect information on confirmed cases or suspected cases. The revised Act also states the public's right ¹⁰ to know regarding the outbreak and mandates the disclosure of information during a public health emergency by the central government and local governments.

However, in the course of responding to the COVID-19 outbreak, concerns were raised that the anonymized information released to the public could be too specific at times and risk violation of privacy. Taking note of the issue, the Central Disease Control Headquarters laid out guidelines on the time frame

 ¹⁰ Article 6 (2) of the Infectious Disease Control and Prevention Act (Duties and Rights of Citizens)
 – Each citizen shall have the right to know information on the situation of the outbreak of infectious diseases and the prevention and control of infectious diseases and how to cope therewith, and the State and local governments shall promptly disclose the relevant information.



of the movements of confirmed cases, a maximum of 14 days,¹¹ and the scope of publicly accessible information.¹² In addition, expired data on the official websites of KCDC or local administrations are removed regularly.

Upon identifying a confirmed case, the public health center must immediately report it to its respective city or province administration and the Central Disease Control Headquarters. An epidemiological investigation generally covers contact tracing of the confirmed cases and management of facilities and sites. And a research of the confirmed case focuses on their overseas visits,

¹¹ The disclosed information contains the movement of confirmed cases from two days before the onset of symptoms to the date of isolation, and as for asymptomatic cases, it is two days before testing to the date of isolation. All published travel routes will be deleted after 14 days from the last contact exposure by confirmed cases.

¹² It is anonymized information regarding the movements of confirmed cases, i.e. location and transportation information with time logs, etc. If all contacts are identified, the information will not be disclosed. Workplace information may be disclosed in case a significant number of random individuals may have come into contact.

Tracking Movements during an Epidemiological Investigation and Scope of Information Disclosure

Tracking the movements of confirmed cases and contact tracing

- To initiate prompt response measures, the movements of confirmed cases can be firstly checked during patient interviews. Investigations using GPS,* DUR,** and card transaction records** should only be conducted when deemed necessary by municipal epidemic service officers.
 - * The administrative agencies of city/county/district can make requests for cellular GPS data to police stations according to Article 76-2 (2) of the Infectious Disease Control and Prevention Act.
 - ** City/province epidemic service officers can make requests for DUR and card transaction records to KCDC through an official document or the online system.

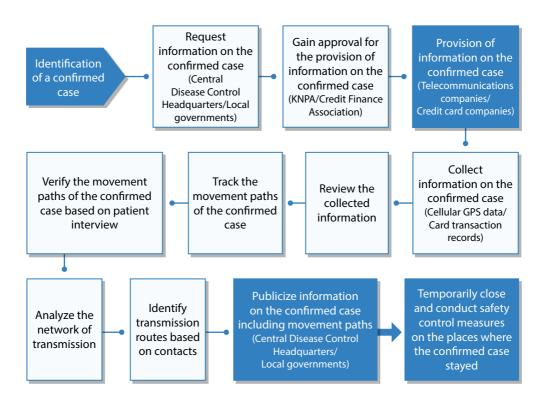
Scope of information disclosure regarding movements and contacts of confirmed cases

- (Subject to disclosure) Patients with an infectious disease* as defined in Article 2 (13) of the Infectious Disease Control and Prevention Act.
 - * A person whose body has been affected by the pathogen of an infectious disease to indicate relevant symptoms and whose case has been confirmed by a diagnosis or by a laboratory test.
- (Scope of disclosure) Information deemed relevant to the prevention and control of the infectious disease.
 - (Time frame) Two days* before the onset of symptoms to the date of isolation
 - * From Coronavirus Disease Response Guidelines Edition 7-4 (published on April 3), the time frame was modified to "one day before showing symptoms" to "two days before showing symptoms."
 - (Location) Places including mode of transportation where contact* exposure happened with high risk transmissions.
 - * A "contact" is determined based on an exposure assessment after an epidemiological investigation, including the symptoms of the confirmed case, wearing face masks, and time and length of exposure.
 - The places in the routes of confirmed cases will be marked "disinfection completed" on the websites after disinfection measures are taken.

contacts with existing confirmed cases, visits to public or healthcare facilities, linkage to mass infection cases, and medical history.

Normally, the 14-day travel history before the onset of symptoms is analyzed in an epidemiological approach to acquire relevant information. The scope of close contacts includes any individuals encountered with the confirmed case starting from 2 days before their illness onset, after considering a variety of factors such as symptoms of the confirmed case, wearing face masks, type of place, and time and length of exposure. The management of facilities and sites means conducting safety control measures on places where the confirmed cases might have visited or stayed. These places can be temporarily closed for disinfection in pursuance of Article 47 of the Act.

Epidemiological Investigation System



The Ministry of Land, Infrastructure and Transport (MOLIT) and the Ministry of Science and ICT (MSICT) is in close cooperation with KCDC, the Korean National Police Agency (KNPA), and telecommunications companies operating the COVID-19 Epidemiological Investigation Support System for collecting location information on confirmed cases and those subject to self-quarantine. The system is a new computer network system designed to support epidemiological investigations on confirmed cases.

It enabled drastic reduction of the time consumed for epidemiological investigations by rapidly analyzing and providing information related to movement paths. KCDC and local governments can conduct more accurate and thorough epidemiological investigations via the system,¹³ as they are able to easily acquire the location and track information of confirmed cases from telecommunications companies.

Upon the request of health authorities and local governments, the KNPA is prioritizing the tracking of confirmed cases. Especially, when they receive a 112 call from health authorities, the police immediately check the GPS data of a suspected or probable case and then dispatch police officers with health officials. If the confirmed case's mobile phone is turned off or GPS function is deactivated, a Quick Response Team, consisting of local police investigators and detectives, tracks the person's whereabouts based on the mobile phone subscriber information, credit card transaction records, and CCTV footages. In addition, the Korean National Police have used the latest investigative techniques and digital forensic technology to support identifying routes of cluster infections and tracing their origins.

¹³ According to the domestic law, the Infectious Disease Control and Prevention Act, administrative government agencies are not allowed to make a direct information request for cellular GPS data to telecommunications companies but have to make the request through the chief of the competent police station.



Director of KCDC giving a press briefing

In the wake of several sporadic mass infections in publicly-used facilities, the Korean government also introduced KI-Pass, which contains QR codes to keep a customer or visitor entry log digitally at high-risk facilities and to implement rapid response measures. Any individual can receive a QR code from his/her smartphone service provider. Upon entry into a high-risk facility, he/she is asked to register the QR code through scanning. The scanned information is automatically transferred to Korea Social Security Information Service, a public institution.

The KI-Pass system could successfully secure the reliability of the visitors' list. To prevent any disclosure of private information, the system was updated to automatically discard all collected information after four weeks. The government also closely cooperated with the application operators to make it more accessible and hosted educational sessions for relevant public officials in different local governments as well as competent authorities to enhance their understanding of the system. In addition, the government continuously encouraged its usage through a series of videos and infographics.

Facilities Mandated to Adopt the KI-Pass System and the Duration of Mandatory Use

Category	Type of Facilities					
	1. High-risk facilities					
		Category	High-risk facilities			
		Restaurants	Hunting pocha,* Gamseong jujeom** * Hunting pochas are bars for singles where people can meet others while drinking. ** Gamseong jujeoms are pubs equipped with a dance floor.			
		Entertainment facilities	Bars and pubs, karaoke bars, disco clubs			
		Recreational facilities	Karaoke rooms			
		Fitness centers	Indoor gyms (with GX* programs) * GX (Group Exercise): Zumba, Tae Bo, Spinning, etc.			
		Concert halls	Indoor standing concert halls (concert halls in which all or some of the audience space includes standing seats)			
	Facilities under the gathering restriction order issued by local governments or facilities ordered to use KI-Pass.					
Facilities allowed to exercise discretion	 At their discretion, any facilities may adopt the KI-Pass system. Voluntary participation is encouraged for facilities such as private academies. 					
Duration	• Temporarily mandated during the period in which the risk alert level is at "Level 3" and "Level 4 (Highest)."					

A Video Clip for KI-Pass





2.2. Self-Quarantine Control

All suspected¹⁴ and probable cases are subject to a 14-day self-quarantine. Generally, self-quarantine means that they are not allowed to leave their place and must refrain from contact with others. People who stay in their own residence in fear of getting infected are not classified as a person in self-quarantine.

2.2.1. Criteria and Guidelines for Self-Quarantine

Self-quarantine is an act of self-restriction to lower the risk of transmission. Self-quarantine is decided based on whether the individual was showing suspected COVID-19 symptoms, got tested at a screening station, and/or had contact with a confirmed case. When the person is required to self-quarantine, a Notice of Isolation/Quarantine will be issued by the relevant public authorities, and a government official will be assigned one-on-one to check the person twice a day for major symptoms such as fever or shortness of breath.

Those under the quarantine order are asked to comply with the self-quarantine guidelines provided by the government. First, they must stay home or quarantine facilities to prevent the spread of the disease. Those who violate the guidelines may face up to a fine of KRW 10 million (USD 8,594) (USD 1 = KRW 1,163.6 for Sept 22, 2020) or one year of imprisonment in accordance with the Infectious Disease Control and Prevention Act. Second, they should stay alone in a specific room. If possible, they should be in a place where they can use a separate bathroom and sink. If not, it is recommended that the area be cleaned and disinfected after their use. Third, they must notify the public health center or an assigned case officer if they need to leave

¹⁴ A suspected case refers to a person who is suspected of having the pathogen enter his/her body but is in the stage before being identified as a confirmed case.

the place for an inevitable reason like medical treatment. Fourth, they should avoid contact or having conversations with family members or roommates. But if inevitable, they must try to keep at least two meters apart from each other, avoid facing each other, and wear masks. Fifth, they should use their own household items, including dishes, clothes, bedding, and wash them separately. Sixth, they must comply with the health guidance and personal hygiene habits such as hand washing, and when coughing without a mask, they should cover their mouth and nose with their sleeve so as to minimize dispersing mucus or droplets into the air.

The combined efforts of those family members and roommates of persons in quarantine are also required. Everyone, especially those who have underlying diseases or weak immune system, should avoid contact with the person in self-quarantine. Visitors are not allowed in the residences or facilities under the quarantine order. In the event of inevitable contact with the quarantined person, both should wear a mask at all times and maintain a physical distance of at least two meters. It is also necessary to use separate living spaces as well as personal items, and shared rooms need to be frequently disinfected and ventilated.



Example of Notice of Isolation/Quarantine in English

NOTICE OF ISOLATION/QUARANTINE					
Name		Resident registration number (or alien registration number)			
Reason for isolation/ quarantine					
	Effective from				
	Duration				
Details	Place of isolation / quarantine	ation / Address			
This is to notify that the person identified above is subject to isolation/quarantine as per Articles 43 and 43-2 of the Infectious Disease Control and Prevention Act. **Wiolation of isolation or quarantine measures is punishable by up to 1 year of prison time or up to 10 million KRW of fine as per Article 79-3 of the Infectious Disease Control and Prevention Act. **Date: 20 / /					
Commissioner of KDCA, Mayor of City, Governor of Province, or Head of County or District					

Guidelines for Quarantine Subjects

- 1. This is a **quarantine facility** of the National Quarantine Station.
- 2. Wait here until your infectious disease test results have been verified.
 - ** Patients testing positive for infectious disease will be transferred to a designated hospital for treatment, while patients testing negative will be able to go home following a class on public health education.
- 3. Patients are prohibited from going outside until a quarantine officer provides notification of test results.
- 4. Free meals are provided until leaving this facility.
- 5. For required assistance from a quarantine officer, please **call an officer by using one of the facility phones**.
- 6. Please be careful not to fall from the bed.
- 7. This facility is a **non-smoking area**. Please do not smoke inside the building.
- 8. Please keep the noise level down out of respect for other patients in the facility.
- 9. Please notify a quarantine officer upon the worsening of **fevers**, **coughing**, **breathing difficulties**, **and other symptoms**.

Health & Safety Rules

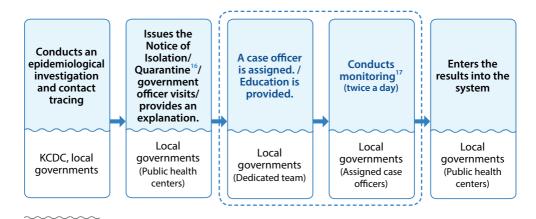
- 1. Please pay particular attention to **personal hygiene** by thoroughly washing and disinfecting hands.
- 2. If experiencing a fever and respiratory symptoms, e.g. coughing, sore throat, and runny nose, please **wear a mask at all times** while inside the monitoring room.

2.2.2. Monitoring

All contacts must conduct self-monitoring of their health conditions for 14 days. They should check their body temperature every morning and evening as well as health condition for the main symptoms of COVID-19, including fever (37.5°C or higher), coughing, shortness of breath, chills, muscle pain, headache, sore throat, loss of taste or smell, pneumonia once a day. They also must report to the public health authorities or an assigned case officer in case of the onset of COVID-19 symptoms.

The Self-Quarantine Safety Protection App connects those in self-quarantine to their assigned case officers, allowing the officers to check them twice a day and to get notified when any contacts break the self-quarantine order. Only upon a prior consent of the persons in self-quarantine, the authorities can utilize cellular GPS data. Meanwhile, the joint government inspection team and the competent public health center can monitor their compliance with self-quarantine guidelines through random on-site inspections.

Management of Persons under Self-Quarantine



- 16 A Notice of Isolation/Quarantine is issued pursuant to the Infectious Disease Control and Prevention Act, and a government officer visits the person under self-quarantine and provides the guidelines, a thermometer, personal sanitation kits, etc.
- 17 Monitor persons in quarantine comply with the guidance, such as breaking self-quarantine; check their symptoms such as coughing and fever; and handle other difficulties they might face in.

Installation Guidelines for the Self-Quarantine Safety Protection App¹⁸

Self-Check Mobile App Installation Instructions

People with A visas – Diplomat (A-1), Government Official (A-2) – or a Quarantine Exemption Certificate issued by the Embassy of the Republic of Korea should install the Self-Check Mobile App and record their daily health status on the App for 14 days after their arrival in Korea. The personal details entered in the Self-Check Mobile App should match the information submitted in the Travel Record Special Declaration. If there is a change to your personal details, you should update the information on the App. You may receive SMS reminders to submit your daily health status for 14 days after entry into Korea. Please check your health conditions on the App every day.

Guide on the Installation of "Self-Quarantine Safety Protection App"

All Korean citizens and foreign nationals with long-term visas must install the Self-Quarantine Safety Protection App by the Ministry of the Interior and Safety and abide by the guidelines for self-quarantined persons including submitting their health status on the Self-Check Mobile App for a period of 14 days. If you leave your quarantine area without permission during your home quarantine period or otherwise fail to comply with quarantine guidelines, you will be required to wear a Safety Band on your wrist. If you still refuse to comply, you will be ordered to quarantine at a designated facility.

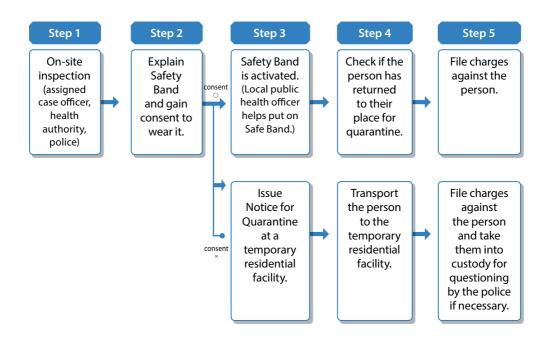
In the event of their non-compliance with the self-quarantine rules, the Korean government is taking prompt response measures with inter-ministerial cooperation. Public officials encourage voluntary return by persuading and notifying such violators of fines that may be imposed. If the person still leaves their quarantine area without a permit and refuses to return, criminal charges will be filed against the violator or forceful isolation may be enforced at a temporary residential facility.

¹⁸ COVID-19 Quarantine Response Guidelines (Eighth Edition)

The Korean government implements the One-Strike Out system, which immediately enforces such measures to non-compliants without any justifiable reasons to ensure the effectiveness of self-quarantine management. In this process, an on-site inspection is conducted unexpectedly by the police upon the request from the health authorities and local governments. The police track down whereabouts of the violator who is handed over to the health authorities eventually.

Recently, the Korean government has enhanced the monitoring of those who violate the self-quarantine guidelines via ICT; for example, the violator of the 14-day guidelines must wear a Safety Band, an electronic wristband for tracing. If the person refuses to wear the Safety Band, they will be quarantined at a temporary residential facility. And those who refuse to install the Self-Quarantine Safety Protection App or do not have a mobile phone will be transferred at a temporary residential facility as well.

Procedures for a Safety Band



As the number of persons in quarantine surged, the Korean government devised an Al-backed Monitoring Call Center system to improve its administrative efficiency. This system was in operation for 35 days, from April 3 to May 7, during which it monitored 27,143 people and identified 379 individuals with symptoms.



Safety Band © YonhapNews

2.2.3. Dedicated Team of Government Officials

The Korean government operates a team dedicated to self-quarantine management, whose command center is headed by the Director General of the Disaster Management Cooperation Policy Bureau; and support teams comprising local government officers in cities and provinces. The team facilitates close cooperation with local governments for status reports on self-quarantine and daily status reports, and is operated by multiple levels of management units to maintain the 24-hour monitoring system.

This dedicated team also has its duties such as; assigning persons in selfquarantine to case officers on a one-on-one basis monitoring them at least twice a day according to the monitoring guidelines; and managing the Self-Quarantine Safety Protection App and supporting local administrations, such as rationing and delivering medicines and daily necessities to those in quarantine.

Team Dedicated to Self-Quarantine Management

Dedicated team at the Central Disaster and Safety Countermeasure Headquarters

- Manage anyone breaking selfquarantine
- Supervise local governments and provide instruction

Dedicated team at city/ province level

- 24-hour monitoring (city/province)
- Report to Central Disaster and Safety Countermeasure Headquarters on anyone breaking self-quarantine

Dedicated team at city/county/ district level

- 24-hour monitoring (city/county/ district)
- Check/report anyone breaking self-quarantine

Dedicated government officers

- Manage/take measures against anyone breaking self-quarantine
- Full-time management

Meanwhile, the central government and local governments are sending information on confirmed cases and their movement paths through public safety alert messages to the general public. Psychological counseling services are provided to persons in quarantine. The government is also in collaboration with private companies to create video contents for those under self-quarantine to watch, free for one month.

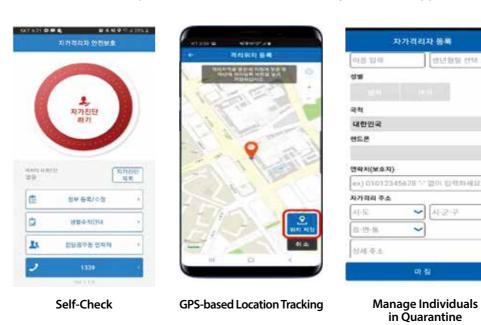
2.2.4. Self-Quarantine Safety Protection App

The Korean government developed the Self-Quarantine Safety Protection App to effectively support the monitoring of those under self-quarantine. The App came out with two versions, one for those in quarantine (in three different languages, Korean, English, and Chinese) and the other for the case officers.

Those subject to self-quarantine are mandated to install the App¹⁹ and required to put their personal information and the place of quarantine. If they fail to comply with the quarantine order, the App will send alerts automatically to the person and the assigned case officer.

The App has two key functions: self-check and GPS-based location tracking. The self-check menu allows the users to monitor their conditions namely for the main four symptoms — fever, cough, sore throat, shortness of breath — twice a day, which information is automatically reported to the assigned case officer. In case the person in quarantine does not submit the data or shows any possible symptoms, the assigned case officer will receive a notice right away. The GPS-based location tracking also allows the officer to know if the user leaves their location. The App also provides the information on the quarantine guidelines and the contact information of the assigned case officer.

Screen Captures of the Self-Quarantine Safety Protection App



¹⁹ Both Android and iPhone versions of the App can be downloaded on the Play Store or App Store.

3. TREATMENT: Treatment and Patient Care

The Korean government covers the cost of diagnosis and treatment for those who meet the relevant criteria, encouraging the public not to hesitate to get tested for COVID-19. If a medical professional classifies a person as Patient Under Investigation (PUI), generally the Korean government covers the cost of the diagnosis. For confirmed cases, the cost of treatment is free for Korean citizens and certain foreign nationals.²⁰ Furthermore, the Korean government has taken measures so that persons under self-quarantine after being classified as a contact or PUI receive support to cover their economic losses, such as living expenses and paid leave.

Moreover, the Korean government established a strategy to supply hospital beds according to the severity of a patient's case to make efficient use of limited medical resources. Patients with severe symptoms have been given priority in terms of inpatient treatment. As for the monitoring and treatment of patients with mild symptoms, non-medical means such as patients' homes and public and private facilities have been fully used.

3.1. Classification of Patients by Severity

The classification of patients by severity can be modified and applied to different situations depending on the method of evaluation. The classification process of patient can differ depending upon the circumstances faced and may be adjusted to reflect the situation. However, the general classification of patients by severity used by the Korean Medical Association is as follows:

²⁰ As of August 17, any foreign patient who violates Korea's domestic rules for infectious disease prevention and control shall pay the full cost of treatment. As of August 24, a more reciprocal approach has been adopted, wherein treatment is provided free of payment only to foreign nationals whose countries also offer the same benefits for overseas Korean nationals.

The Korean Medical Association's Classification of Patients by Severity

Category	Classification by Severity		
Asymptomatic	Meets all criteria below: ① Normal level of consciousness ② 50 years old or younger ③ No underlying medical condition ④ Body temperature below 37.5°C without fever reducing medication ⑤ Non-smoker		
Mild	The patient has a normal level of consciousness and meets more than one criteria below: ① 50 years old or younger ② No underlying medical condition ③ Body temperature below 38.0°C with fever reducing medication ④ Shows one or more symptoms which are not shortness of breath/difficulty breathing* ⑤ Smoker		
Severe	The patient has a normal level of consciousness and meets more than one criteria below: ① Body temperature over 38.0°C with fever reducing medicine ② Experiences shortness of breath/difficulty breathing or diagnosed with pneumonia after CT scan		
Critical	① Unconscious ② Experiences severe shortness of breath/ difficulty breathing ③ Oxygen saturation level falls below 90% ④ CT scan shows severe double pneumonia or lung function has been impaired by 50% or more		

^{*} When the patient no longer has the symptoms that constitute the criteria for 48 hours, the patient's level of severity is reduced by a level.

In the initial stages of the COVID-19 outbreak, the Korean government's policy response was of hospitalizing all confirmed cases for treatment. However, after the Shincheonji religious sect incident led to a drastic increase in the number of coronavirus infections centering around Daegu and North Gyeongsang Province, the shortage of hospital beds emerged as a serious issue. The Korean government promptly adjusted its treatment system from March 1, in light of the spread of COVID-19 and in such a way as to reflect the need for and available supply of medical resources in each respective region.

The Korean government established a new set of principles for assigning hospital beds according to the severity of patients' symptoms, reflecting the

opinions of medical specialists, who emphasized that more than 80% of the confirmed cases showed mild symptoms, that to reduce fatalities, patients with severe symptoms should be given priority in the assignment of hospital beds, and that it was imperative to minimize the chance of medical staff contracting the virus. Patients were classified into four groups depending on the severity of their symptoms: Asymptomatic, mild, severe, and critical. Patients with severe symptoms who required hospitalization were given priority in the assignment of hospital beds, and asymptomatic patients and patients with mild symptoms were sent to separate treatment facilities.

In this way, the Korean government reshaped its COVID-19 patient treatment system, with hospitalization not provided for all confirmed cases but rather priority given to those patients with severe or critical symptoms. Asymptomatic patients and patients with mild symptoms were isolated at Residential Treatment Centers, which are quarantine facilities where patients are cared for and their condition is monitored.

In addition, as regional mass infections occurred, the National Medical Center's National Emergency Medical Center was expanded and operated as the "COVID-19 Emergency Hospital Transfer Support Center" to redress the shortage of hospital beds in some areas. The Korean government was able to operate a system in which intensive care units across the nation were effectively utilized by transferring patients who were in a state which enabled them to be moved. Employing such measures, the Korean healthcare authorities were able to respond to the rapidly increasing demand for medical resources.

3.2. Facility Quarantine/ Isolation

Depending on the severity of the patient's condition, patients who require hospitalization are placed in "Korean government-designated isolation hospitals" or "dedicated hospitals for infectious diseases." Patients in an extremely

severe condition are sent to hospitals equipped with negative pressure isolation rooms, and patients with relatively less severe conditions are sent to dedicated hospitals for infectious diseases for treatment.

Korea's isolation measures have been officially recognized by the U.S. Centers for Disease Control and Prevention (CDC) as a technique that can effectively "prevent infection." Isolation at a facility after being diagnosed as a confirmed case not only allows for the better monitoring of a patient's condition and for treatment, but indeed it is a way to protect their loved ones and society as a whole. Accordingly, it is important for patients, accepting their situation of isolation, to have the positive attitude and mentality of believing that they can recover, and to try to communicate regularly with friends and family through video calls and online messages to overcome any feelings of isolation.

Cohort isolation is a method of isolation in which a group of patients infected with the same pathogen are isolated in the same room. In terms of infection prevention and control, cohort isolation is not recommended under normal circumstances, but when the number of patients who need to be admitted to a single room exceeds the availability of single rooms, cohort isolation is the only option. Therefore, for cohort isolation, each hospital bed space is considered a single room (isolation space without walls), and the relevant guidelines should be strictly observed in the evaluation of treatment risk, hand sanitization and the use of personal protective equipment (PPE).

3.3. Operation of Hospitals Dedicated to Infectious Disease and Residential Treatment Centers

The Korean government has focused on the rapid recovery of confirmed cases through the early diagnosis of COVID-19, intensive care, and efficient allocation of medical resources. In some cases, confirmed cases are asymptomatic or only display mild symptoms, but the Korean government has

been able to identify them in the early stages based on its highly competitive diagnostic capabilities and provide treatment accordingly. As a result, Korea had recorded a relatively low mortality rate of 1.68 as of September 22. About 83% of the deaths in Korea have been elderly people over the age of 70, and nearly all of the fatalities have been either elderly people or those with underlying medical conditions. So far, no patient under the age of 29 has died, and only single-digit deaths have been recorded for the age group of 30–49. The mortality rate among younger people (49 years old or younger) is very low.

The Korean government designated and operated hospitals equipped with negative pressure isolation rooms and other essential facilities needed to treat infectious diseases as "Korean Government-designated Isolation Hospitals" to prevent and respond to infectious diseases. Patients with severe symptoms or extremely severe symptoms are hospitalized at these facilities.

The government supported a supplementary budget to provide emergency funding for hospitals with high treatment capacity, such as Superior General Hospitals, University Hospitals, and General Hospitals; to treat patients with severe symptoms; and to secure medical resources such as hospital rooms and ambulances.

To treat patients with moderate symptoms but who still require hospitalization, "Dedicated Infectious Disease Hospitals" have been designated. These hospitals are dedicated institutions recognized under the Infectious Disease Control and Prevention Act that have reallocated their hospital beds specifically for the treatment of confirmed COVID-19 cases. As of September 22, there are 43 such hospitals dedicated to infectious diseases, with 4,075 hospital beds around the country.

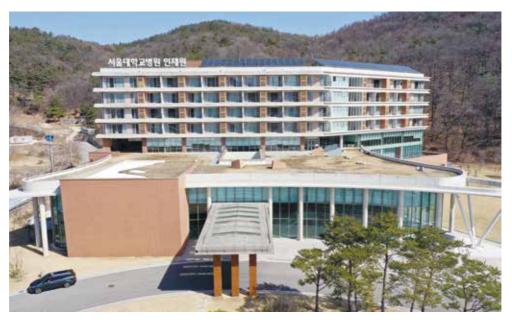
The Korean government also actively utilized public facilities and private accommodation facilities for COVID-19 treatment. Asymptomatic patients

or patients with mild symptoms were sent to residential treatment centers, which are public and private facilities where medical professionals dedicated to infectious disease and the necessary medical devices have been allocated.

The Korean government was able to secure places for asymptomatic patients and patients with mild symptoms who do not require hospitalization by designating training institutes operated by private companies and public accommodation facilities as residential treatment centers and by providing a range of daily necessities and medical resources needed for the treatment and management of such patients. The Korean government adopted the "Data-Based Smart Monitoring System" to minimize medical staff's contact with patients with mild symptoms and to facilitate monitoring of the condition of the patients in residential treatment centers.

Patients with mild symptoms who are placed in residential treatment centers across the country download an app that helps to monitor the patient's condition on their smartphone — they enter their body temperature and blood pressure on the app. Medical staff then engage in real-time monitoring of their condition using the dashboard on their computer screen. If a patient's condition deteriorates, an automatic alert appears, allowing the medical staff to take immediate measures. This system minimizes the medical staff's direct contact with the patients and allows for the real-time monitoring of many patients with only a small number of medical staff.

Moreover, the Korean government also designated National Safe Hospitals to enable the general public to use medical services without being concerned about the possibility of COVID-19 infection. National Safe Hospitals have a separate respiratory disease treatment area (for both outpatients and inpatients) in order to prevent the transmission of the virus within the hospital by separating patients who visit the hospital due to respiratory diseases from all other patients. The treatment area ensures that respiratory patients are separated from their arrival throughout the entire process of medical treatment. Even



Residential treatment center © YonhapNews



Minister of Health and Welfare visiting a residential treatment center in Daegu

patients with a common cold are classified as respiratory patients, and if they are found to have a respiratory disease that is not COVID-19, they are treated and discharged from the hospital. If they are classified as suspected cases, they are sent to a screening station or are hospitalized in an isolation room to prevent transmission within the hospital.

All National Safe Hospitals have a separate respiratory disease treatment zone, and depending on the situation within the hospital, some also operate screening stations that collect specimens for COVID-19 testing and dedicated hospital rooms for patients with respiratory diseases. As of September 22, there are 323 National Safe Hospitals in operation across the country.

In addition, with the National Medical Centers playing a leading role and with the participation of medical institutions and specialists around the country, the National Committee for Clinical Management of Emerging Infectious Diseases was launched. The Committee, which allows for up-to-date information sharing among medical professionals on patients' condition and the formulation of guidelines for treatment, allows for the operation of a patient care system which fully utilizes expertise of clinical experts within the national disease prevention and control framework.



Confirmed Case Treatment and Management System

Classification of patients		Hospital beds	Description	Available facilities and hospital beds	
Severity of the confirmed case	Critical	Hospitali- zation	National	 Hospitals equipped with negative pressure isolation rooms and other essential facilities that are capable of providing specialized treatment for infectious 	100 hospital hads
	Severe		designated isolation unit	diseases; normally designated and operated as hospitals dedicated to infectious disease; Following the outbreak of COVID-19, additional beds have been secured.	198 hospital beds (as of September 22, 2020)
	Moderate		Hospitals dedicated to infectious disease	Existing hospitals dedicated to infectious diseases under the Infectious Disease Control and Prevention Act that have reallocated their hospital beds for treatment of COVID-19 patients who do not have severe symptoms but still require hospitalization	43 hospitals 4,075 hospital beds (as of September 22, 2020)
	Mild / Asymptomatic		Residential treatment center	 Medical professionals dedicated to infectious diseases and necessary medical devices have been sent to public/private facilities for the treatment and care of patients with mild symptoms. Remote operation possible using "App or Social Media" 	5 centers (as of September 22, 2020)
			Self- quarantine	Health condition monitored/ managed using the "Self- quarantine Safety Protection App" or by phonecalls	95.5% installation rate by entrants to Korea (as of July 31, 2020)
General patients Safe Hospitals		Hospitals that designate a separate respiratory disease treatment zone (area)	323 hospitals (as of September 22, 2020)		

3.4. Emergency Response Including Transporting Confirmed Cases

Emergency responders transporting COVID-19 suspected cases or confirmed cases are required to wear personal protective equipment consisting of five items in total: gloves to prevent transmission via hands, full-body protective clothing, shoe covers, safety goggles to prevent the virus entering the body through the mucous membranes of the eyes, and masks to prevent respiratory infection through the mucous membranes of the nose and mouth.



In the event that the health authorities (public health center) are overwhelmed in terms of their capacity to transfer those with suspected or confirmed cases, the fire authorities also conduct patient transfers. In particular, if an instance of regional mass infection occurs, patients with severe symptoms would be transported to designated hospital by fire ambulances whereas patients with mild symptoms are transferred to the shuttle bus boarding location by fire ambulances, then transported to residential treatment centers. In addition, the police are also stationed at some residential treatment centers and temporary residential facilities for internal and external security and order.

When there are requests for support in transporting diagnostic specimens and patients with severe symptoms, fire-fighting ambulances and helicopters







Nationwide 119 responders being mobilized to Daegu

Procedure for Transporting of Patient for Each Classification

Patient Assignment of Hospitals and classification hospital medical facilities City/Province 119 119 Ambulance Situation Room No Local emergency medical suspected institutions symptoms Assign hospitals Patients with mild/ Regional/district severe symptoms (standard guidelines) emergency medical centers (standard guidelines) Local emergency medical institutions/local City/Province 119 emergency medical centers **Situation Room** with screening stations Patients with mild Hospitals dedicated to Assignment of hospital symptoms infectious diseases (check hospital bed Type B National Safe capacity) Hospitals with screening stations Medical Available to City/province 119 institution in accommodate situation room the region patients Regional/district Assignment of emergency medical Possible Patients with centers with separate hospital isolation treatment zones severe symptoms (check hospital bed Has capacity) Emergency medical suspected center for severe cases symptoms If not possible in city/province concerned **National Fire Agency Central Emergency** Situation Management Center * Hospitals dedicated to infectious disease, (Check Severe Type B National Safe Hospitals **Emergency Medical** (outpatient-inpatient) with screening Centers across the stations country) Provision of 119 Situation Room (Nearby city/province) Emergency medical in nearby city/ center for severe cases province

are dispatched to the extent possible. For overseas Koreans, emergency physicians provide 24-hour medical counseling on infectious diseases at the Central EMS Center of the National Fire Agency.

Number of Patient Transfers and Medical Consultations

(As of Sept 22, 2020)

	Patient Transports					Medical	Consultatio	ns (cases)
Total (A+B)	Subtotal (A)	① Confirmed cases	② Suspected cases	③ Inter-hospital transfers	④ Specimens transport	⑤ Subtotal (B)	Domestic residents	Overseas Koreans
		(persons)	(persons)	(persons)	(cases)			
145,347	91,385	15,011	73,940	963	1,471	53,962	53,915	47

In addition, in order to prevent transmission to emergency responders and officers, the fire department created and implemented detailed guidelines for procedures for each stage of transportation for COVID-19 confirmed cases and others as follows.

Detailed Guidelines for Procedures for Each Stage of Transportation

		Cases in which these guidelines apply, including patients considered to have COVID-19 symptoms		
Transportation subjects	Patients with COVID-19 symptoms	- Those who meet at least one of the following criteria: fever (over 37.5℃), respiratory symptoms, overseas travelers and residents, those for whom it is difficult to obtain information, a person who has lost consciousness/ requires CPR; the transporting of specimens		
Collecting information	* As much information as possible	thed to support transportation. ble on the patient, including his/her medical records, recent optoms, is collected, and the dispatched personnel respond		

Dispatching personnel	 The responders dispatched wear Leve five items), and the minimum numbe However, if the person is an emergency post the existing dispatch policy shall be applied The patient is required to wear a mask, and the patient's guardian, if one is present, is required to wear Level D protective clothing. 	atient who requires appropriate treatment,		
Transporting patients with COVID-19 symptoms		ossible following a basic check-up, treatment. ce (of 1-2 meters) from the patient's cion es the patient.		
Transporting specimens	 Designate personnel responsible for transporting the suspected specimens Comply with the Guidelines for Safe Transport of Infectious Substances (published by the Central Disease Control Headquarters). Secure the specimens inside the vehicle so that they are not shaken, and only follow the designated route. 			
Following completion of the transportation	 After transferring the patient to a me ambulance on site in accordance with Take off protective clothing. ⇒ Wash Every dispatched responder returns t devices, and dispatched responders a headquarters using the Infection Con 	n the "Disinfection Guidelines." ⇒ hands with soap or hand sanitizer. ⇒ o the headquarters. ⇒ Ambulance, are disinfected for a second time at the		
Self-isolation of dispatched responders	mask (BVM) ventilation, oropharyngea nebulizer, Positive Airway Pressure ven emergency treatment that entailed clo symptoms or patients who have been transported and tested for COVID-19; o	t (work as usual). erosol generating procedures (bag valve I suctioning, endotracheal intubation, tilation (CPAP, BiPAP, or CPR); conducted use contact with patients with COVID-19 classified as suspected cases after being or discovered a problem with their uring transport (such as partial exposure,		

Disinfection guidelines

- Guidelines for places and vehicles (such as ambulances) that have come into contact with confirmed cases
- (Places) According to "Disinfection Guidelines for Firefighting Facilities," the place can be used 24 hours after disinfection.
 - * Although any traces of the virus should be removed on the day of disinfection, in consideration of any risk incurred by the use of disinfectants, the place is shut down for a day.
- (Vehicles) Disinfection ⇒ Ventilate the inside of the vehicle for two hours with every door open. ⇒ Use after every surface has been wiped with singleuse towels and wipes.

The public security authorities formed the Transport Support Team to escort patients with severe symptoms to hospitals and patients with mild symptoms to residential treatment centers as well as to facilitate a smooth transfer and respond to emergencies during transportation.

	For more information					
Part	Organization	Organization Division		Contact		
3Ts	Korea Disease Control and Prevention Agency	International Affairs	shinyelee@ korea.kr	+82-43-719-7751		
Tracing (ICT)	Ministry of Science and ICT	Big Data Promotion Division	sjkim95@korea.kr	+82-44-202-6295		
Self-Quarantine	Ministry of the Interior and Safety	Self-Quarantine Support Team	mois205@korea.kr	+82-44-205-2815		
Tracing	Korean National Police Agency	International Cooperation Division	cycop21@ police.go.kr	+82-2-3150-2880		
Transportation of patients	Korea National Fire Agency	119EMSDivision	chtravel@korea.kr	+82-44-205-7651		

1 Immigration and Screening Measures







In adherence to WHO recommendations, we have managed the risk associated with cross-border traffic not with blanket entry bans but with continuous adaptation and fine-tuning of measures designed to control and keep track of the virus that some of the inbound travelers may be carrying in. These measures have been phased in, corresponding and proportionate to the location and scale of the incoming risk.

In the early stages of the epidemic, we focused on monitoring measures such as special entry procedures and mandatory installation of a Self-Check Mobile App to keep track of and monitor the health of inbound travelers after arrival. This was initially applied only to travelers from a small number of high-affected countries and gradually expanded to include all inbound travelers.

As imported cases of COVID-19 came to account for an increasingly large portion of new infections in Korea, we introduced mandatory COVID-19 testing and two-week quarantine for inbound travelers from a select number of highly affected countries. Later on, this was expanded to all inbound travelers regardless of their port of departure. Visa-free entry and visa-waiver programs were also suspended, with exceptions made for countries that had not imposed entry bans on travelers from Korea. In late June, we introduced

country-specific restrictions, temporarily suspending visa issuance and non-scheduled flights and requiring submission of negative PCR-test results for issuing Korea-bound flight tickets, in response to a sharp rise in COVID-19 infections among inbound travelers from a select number of countries. As of 5 August, six countries fall under this scheme.

The door has been kept open for essential travel, i.e. holders of A1 (Diplomatic), A2 (Official) and A3 (Treaties) visas, and those who have been issued a 'quarantine waiver' at a Korean Embassy/Consulate prior to departure on grounds of business, medical, scientific and humanitarian purposes. These travelers are tested for COVID-19 upon arrival, and if tested negative, subject to active monitoring for fourteen days, which includes daily submission of health conditions via the Self-Check Mobile App and answering daily phone calls from health authorities throughout their stay in Korea.

The implemented measures were gradually adjusted through a process of close consultations among the relevant ministries to reflect changes in the disease control situation at the domestic and international level.

1. Special Entry Procedures

The Special Entry Procedure refers to a system introduced by the Korean government to effectively block the spread of COVID-19 in the country through the early detection of confirmed cases among inbound travelers during their entry screening. The immigration and quarantine officers check the addresses of the places where inbound travelers will be staying and their phone numbers on their arrival and have them install the Self-Check Mobile App in order to continuously monitor signs of possible symptoms so that they can be quarantined and treated in a timely manner if necessary.





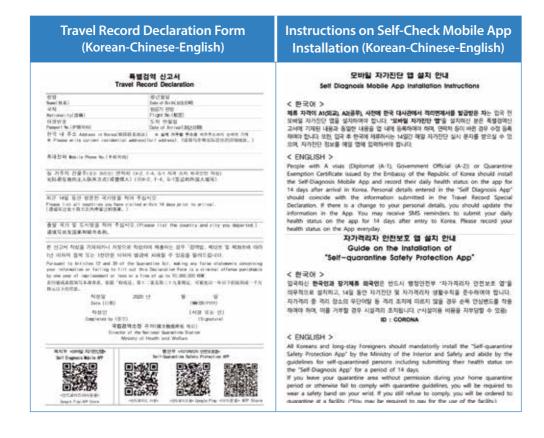
1.1. Scope of Application

The Special Entry Procedure was adopted to effectively monitor the health condition of travelers from specific countries, which were selected based on factors including the number of those entering Korea and the potential risk for infection, for 14 days after arrival. Taking into account the spread of the virus the Korean government first implemented the Special Entry Procedure for all inbound travelers from China on February 4, and later expanded the scope of application to Hong Kong and Macao (February 12), Japan (March 9), Italy and Iran (March 12), and five European countries (France, Germany, Spain, the United Kingdom, and the Netherlands; March 15). The scope of application was further expanded to all European countries (March 16), and after WHO declared the spread of COVID-19 a pandemic (March 11), the Special Entry Procedure was applied to all inbound travelers regardless of their nationality starting from March 19.

1.2. Implementation

From March 19, pursuant to the Special Entry Procedure, all inbound travelers must ① complete the Travel Record Declaration Form in the airplane (or ship), which is distributed in advance; ② have their body temperature measured and complete the Health Declaration Form upon arrival; ③ install the Self-Check Mobile App on their mobile phone (proper installation will be checked); ④ answer the test-call to the phone number written on the Travel Record Declaration form to verify whether the traveler will be able to receive calls elsewhere during their stay; and, ⑤ in the case that the contact number cannot be verified, he/she is transferred to the Ministry of Justice office for a review to determine whether they will be refused entry.

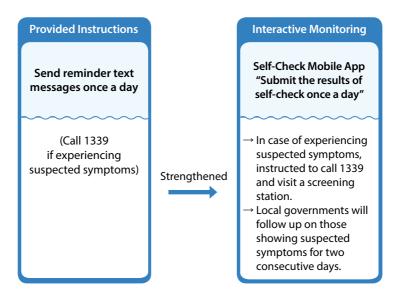




1.3. Self-Check Mobile App

In the initial phase of the Special Entry Procedure, the Korean government advised inbound travelers to call the KCDC 1339 Call Center if they experienced suspected symptoms during their stay in Korea, using the contact information of the Call Center shown on the traveler's Special Health Declaration. However, to adopt a more interactive method of communication to effectively prevent the spread of COVID-19, the "Self-Check Mobile App" was developed and, following a pilot operation, implemented from February 12.

Follow-up Management of Inbound Travelers



The Self-Check Mobile App comprises: ① a screen where the user under the Special Entry Procedure is requested to enter information (such as passport information, nationality, contact information), ② a screen where the user conducts self-check of symptoms such as fever, cough, or sore throat and submits the results once a day (for up to 14 days after entering the country), and ③ a screen directing the user to the KCDC 1339 Call Center/social media counseling channel and offering information on nearby screening stations. All inbound travelers are to install the App, check their condition for possible symptoms, and submit their self-check once a day for 14 days, starting from the date of entry. In addition, the list of all inbound travelers is provided to each local government, enabling the local authorities to strengthen the monitoring system.

* Self-check conducted for the following symptoms: fever (over 37.5° C), cough, sore throat/throat pain, difficulty breathing/shortness of breath

Travel Record Check Locations of Linked to 1339 **Daily Self-Check** Declaration **Screening Stations** (KCDC) 111111 entains o 일일 지거하면 格爾拉特 积层 © FIRSHIN SHIPPENS HERES. Burn D STREET DESCRIPTION BIST-5) Nile WBG (Ferry - above 37.5 degrees) 中央管理 中心管理 管管を含める 第2 1319、利用性を1329を PRINTED BY COMPANY PROSPECT REAL VES STREET, CARRIED * ENGLAND, AMERICAN PARTIES D KCOC STRUMEN O YES DRICHERAN SAPRIARED (Despress) BOOK AND BY YARR. MARCIN AND COURSE OF STACK C KOOC SESSION OF ME AN MAY SH MAY SH DAY #4/84 DN 7/65 ND DRIES 저희 신흥코봇나바이러스감영중 진단감사 받아야함... 期刊的計畫 特別用品 克利斯斯 監視 绳 电相压 an summer TOTAL BREEF STATE 국가선호 선택 0 0 0 0

Self-Check Mobile App Screens

2. Entry Restrictions

2.1. Step-by-Step Introduction of Controls

2.1.1. Initial Phase of COVID-19 Outbreak (End of January – February): Entry Restriction for High-Risk Regions in China

As the number of confirmed cases in Hubei Province, China surged, the Korean government implemented measures, starting from February 4, to prohibit the entry of Chinese and foreign nationals who had visited Hubei Province in order to limit the inflow of COVID-19 from regions in China with a high risk of transmission. As the situation later improved in Hubei Province, the prohibition was retracted on August 10.

(Prohibition of entry for travelers with passports issued in Hubei, China) The Korean government prohibited holders of passports issued in Hubei, China, from entering Korea, regardless of whether or not their point of departure was China. To ensure such measures were properly implemented, airlines or shipping companies were required to check the bio-data page of all passengers' passports in the process of issuing boarding passes.

(Prohibition of entry for all foreign nationals who had visited Hubei Province,

China) The Korean government restricted entry for all foreign nationals who had visited Hubei Province, China, in the previous 14 days. To ensure such measures were properly implemented, airlines or shipping companies checked all passengers' passports in the process of issuing boarding passes, quarantine officers collecting the Special Health Declaration conducted one-on-one interviews with all passengers, and immigration officers interviewed the passengers during the immigration inspection on their arrival. (Exception: Exemptions are permitted for a Korean citizen's spouse and lineal ascendants or descendants, and persons with permanent residency in Korea, on the condition of self-quarantine.)

However, if a person with a record of travel to Hubei Province in China within the previous 14 days was found to have falsely responded or provided false information during the ticketing, quarantine, or immigration inspection process, they were denied entry.



'i-PreChecking'

(Temporary invalidation of visas issued by the Consulate General of the Republic of Korea in Wuhan) Regardless of whether or not a passport was issued by Hubei Province, all visas issued by the Consulate General of the Republic of Korea in Wuhan, which is in charge of administering affairs in Hubei Province, were rendered temporarily invalid. To ensure such measures were properly implemented, Korean immigration authorities employed the i-PreChecking (IPC) system to automatically block high-risk passengers from boarding planes.

(Temporary suspension of visa-free entry to Jeju Island for all foreign nationals)

The visa-free entry to Jeju Island, which had been available for non-Koreans under the Special Cases stipulated by the Special Act on the Establishment of Jeju Special Self-Governing Province and the Development of Free International City, was temporarily suspended.

(Strengthening of visa issuance procedures by diplomatic missions of Korea in China) All diplomatic missions of Korea in China required the submission of the Health Condition Report Form as a mandatory measure including questions regarding whether the person had recently experienced fever, chills, headache or other symptoms and whether the person had recently visited or stayed in Hubei Province. Considering that the incubation period for COVID-19 can be up to 14 days, all diplomatic missions of Korea in China conducted a thorough and full review before granting permission for visa applications, thereby contributing to the quarantine efforts.

(Other measures) Along with the various measures stated above to block the inflow of COVID-19 into Korea, foreign nationals from countries where visas are required to enter Korea traveling from China were temporarily denied visa-free transit through Korea, and visa-free entry for Chinese students on school trips was also temporarily suspended. In addition, the use of the automated immigration inspection system was suspended for all foreigners to prevent restricted persons from entering the country through the automated inspection system.

2.1.2. COVID-19 Spreads beyond China (First Half of March): Entry Restriction for Japan

With concerns in the international community about the COVID-19 situation in Japan and the Japanese government's response, the Korean government implemented the following entry restriction measures for Japanese nationals from midnight of March 9.

* The Japanese government implemented entry restriction measures against Korea from March 7 following the regional spread of COVID-19 in the Daegu region which began in the second half of February.

(Temporary suspension of visa waiver agreements with Japan and suspension of visa-free entry for Japanese nationals) Visa-free entry was temporarily suspended for all Japanese nationals, which applied to all valid Japanese passports including diplomatic and official passports. Japanese nationals wishing to enter the country had to apply for a visa. To ensure such measures were properly implemented, airlines or shipping companies prevented restricted passengers from boarding by checking their passports in the process of issuing boarding passes in Japan, and the entry of restricted passengers was denied during the immigration inspection in Korea.

(Temporary invalidation of visas issued by diplomatic missions of Korea in Japan) All visas issued by diplomatic missions of Korea in Japan were declared temporarily invalid. To ensure such measures were properly implemented, Korean immigration authorities employed the i-PreChecking (IPC) system to automatically block high-risk passengers from boarding planes. Airlines or shipping companies in Japan were required to check all passengers' passports and visas in the process of issuing boarding passes as a mandatory measure. (Exception: persons with a Certificate of Alien Registration (including permanent residency) or persons with a valid Domestic Residence Report)

(Strengthened visa issuance procedures by diplomatic missions of Korea in Japan) All diplomatic missions of Korea in Japan required the mandatory submission of the Health Condition Report Form filled out in one's own handwriting, including questions to ascertain whether the person had recently experienced fever, chills, headache, or other symptoms. The diplomatic missions of Korea in Japan conducted thorough and full examinations before granting permission for visa applications, which also had a preliminary quarantine effect prior to entry into Korea.

2.1.3. COVID-19 Spreads around the World (Second Half of March – Present): Strengthened Restrictive Measures and Expanded Scope of Application

Since the second half of March, while infections spread around the world, the daily number of new confirmed cases of COVID-19 in Korea gradually decreased. In response to this situation, the Korean government tightened regulations on visa issuance and entry into the country and expanded the scope of application for such measures in order to block the inflow of the virus, ease concerns among the public, and make efficient use of quarantine resources.

(Temporary suspension of visa waiver agreements and visa-free entry) From midnight on April 13, following a comprehensive review of the spread of COVID-19 and the countries' entry bans on Koreans, the Korean government temporarily suspended visa waiver agreements with 56 countries, and visa-free entry arrangements which the Korean immigration authorities had unilaterally granted to 35 countries. (Exceptions: holders of diplomatic, official, or service passports; flight attendants; seamen; and APEC Business Travel Card (ABTC)* holders)

* APEC Business Travel Card (ABTC): ABTC holders, who are approved for pre-clearance, are granted visa-free entry when visiting another country participating in the ABTC scheme.

List of Countries and Regions Subject to Temporary Suspension of Visa Waiver Agreements and Visa-free Entry

Countries under v	sa waiver agreements 56 countries			
Asia-Pacific (4)	New Zealand, Malaysia, Singapore, Thailand			
The Americas (18)	The Bahamas, Antigua and Barbuda, Haiti, El Salvador, Uruguay, Jamaica, Chile, Costa Rica, Peru, Guatemala, Grenada, Dominican Republi Brazil, Saint Lucia, Suriname, Colombia, Trinidad and Tobago, Panama			
Europe (29)	Bulgaria, Italy, Greece, Netherlands, Norway, Denmark, Germany, Latvia, Russia, Romania, Luxembourg, Lithuania, Belgium, Sweden, Switzerland, Liechtenstein, Spain, Slovakia, Iceland, Estonia, Austria, Czech Republic, Kazakhstan, Turkey, Portugal, Poland, France, Finland, Hungary			
Middle East (2) United Arab Emirates, Israel				
Africa (3)	Lesotho, Morocco, Tunisia			

Designated visa	a-free entry	35 countries	
Asia-Pacific (15)	shall Islands, Micronesia, Kiribati, Australia, Solomon Hong Kong, Taiwan, Macau, Brunei, Samoa, Tonga		
The Americas (5)	Argentina, Ecuado	r, Honduras, Canada, Paraguay	
Europe (5)	Montenegro, Bosnia and Herzegovina, Cyprus, Serbia, Croatia		
Middle East (5)	Bahrain, Oman, Sa	udi Arabia, Qatar, Kuwait	
Africa (5)	Mauritius, Republi	c of South Africa, Botswana, Seychelles, Eswatini	

Notice on Temporary Suspension of Visa Waiver Agreements on MOFA's Website on Safe Overseas Travel (0404.go.kr)



안전공지

출국 전 우리 국민이 꼭 참고해야할 최신 안전정보를 제공합니다.

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국가	전체국가				
계목	2020.4.13.(월)부터 사증면제	시사중(Visa) 필요			
등록일	2020-04-10	조회	6278		
첨부파일					

2020,4,13.(월)부터 사증면제협정 잠정 정지 국가(56계) 입국 시 사증(Visa) 필요

o 우리 정부는 해외로부터의 코로나19 유입 차단을 위해 2020.4.13.(일)부터 아래 국가와 사증면제협정을 잠청 정지하였습니다.

사증면제협정 잠정 정지 국가 56개

	240000441941						
아-태(4)	△뉴질랜드 △말레이시아 △싱가포르 △태국						
미주(18)	바하마 △앤티가바부다 △아이티 △열살바도르 △우두과이 △자에이카 △칠레 △코스타리카 △페루 △과테알라 △그레나다 △도미니카공화국 △브라질 △세인트루시아 △수리남 △폴롬비아 △트리니다드토바고 △파나마						
유럽(29)	△불가리아 쇼이탈리아 쇼그리스 쇼네덜란드 쇼노르웨이 쇼덴마크 쇼독일 쇼라트비아 쇼러시아 쇼루마니아 쇼록셈부르크 쇼리투아니아 △벨기에 쇼스웨덴 쇼스위스 쇼리하덴슈타인 쇼스페인 쇼슬로바키아 쇼아이슬란드 쇼에스토니아 쇼오스트리아 쇼체코 쇼카자흐스탄 쇼터키 쇼포르투갈 쇼플란드 쇼프랑스 쇼핀란드 쇼헝가리						
중동(2)	△아랍에미리트 △이스라엘						
아프리카(3)	△레소토 △모로코 △튀니지						

o 이에 따라, 2020.4.13.(월) 이후 관광 등 단기체류 목적으로 상기 국가를 방문하길 희망하는 우리 국민은 출국 전 반드시 해당국 사중(Visa)을 취득하여야 하니 유의하시기 바랍니다.**

※ 사증면계협정 정지는 상호 효력이 발생하기 때문에 상대국 국민의 우리나라 입국 시 우리나라 사증이 필요할 뿐만 아니라 우리 국민의 상대국 입국 시에도 상대국의 사증 필요

- * The Korean government temporarily suspended visa waiver agreements and visa-free entry into the country from midnight, April 13, 2020.
- ** Accordingly, please note that Koreans who wish to visit the above destinations for a short-term stay, such as for tourism, after April 13 (Monday), 2020, are required to obtain a visa for the country before leaving Korea.
 - * Since the suspension of visa waiver agreements is mutually effective, not only is the Korean visa required when the citizens of the other country enter Korea, but also the visa of the other country is required when Koreans enter the other country.

(Invalidation of short-term visas) All short-term visas (of up to 90 days, whether single entry, double entry or multiple-reentry visas) issued before April 5 by diplomatic missions of Korea all over the world were invalidated. However, exemptions were granted for short-term commercial visas (C-4) issued to an invitee of a domestic company such as highly-skilled professionals and long-term visa holders for activities such as employment or investment, and short-term visa holders who are already in Korea. In the event that a person attempts to enter Korea using an invalidated visa, the i-PreChecking (IPC) system will automatically block boarding passes from being issued.

(Strengthened visa issuance procedures) The Korean government also required all foreign nationals applying for a visa after midnight of April 13, those whose visas were invalidated by the measures described above, and those from countries where visa-free entry was suspended, to submit a "Health Condition Report Form" as well as a "medical certificate" issued by a medical institution on whether the person exhibits COVID-19-related symptoms. As a result, visa applicants must be examined by a medical institution within 48 hours from the date of application and submit a medical certificate stating whether there are COVID-19 symptoms such as fever, cough, chills, headache, muscle pain, or pneumonia. If these symptoms are present, the visa application will be denied. In addition, all diplomatic missions of Korea were instructed to decide whether to grant visas, only after conducting a thorough review of the applications such as an interview to check the health condition of the applicant.

However, for visa applicants whose purpose of visit is diplomatic/official duties, essential business activities such as investment and technology provision, or other urgent or humanitarian reasons or who is a family member of a Korean citizen, the Korean government allowed the prompt issuance of visas at the discretion of the head of the diplomatic missions.

(Conclusion) With the spread of COVID-19 in different countries and at different stages, to guarantee the movement of essential personnel between countries

while preventing the inflow of infections into the country to the greatest extent possible, the Korean government adopted a two-pronged policy response in its border management.

The first response was a step-by-step visa control policy. In order to curb tourism and simple visits that cannot be considered to be entry for absolutely necessary reasons, the validity of existing visas, visa waiver agreements, and visa-free entry systems were gradually restricted. In addition, to proactively prevent the entry of suspected cases or persons showing early symptoms of COVID-19, all visa applicants were initially required to submit the Health Condition Report Form as a mandatory measure, and subsequently the rules were strengthened to require them to submit a medical certificate issued by a medical institution as a mandatory measure. The diplomatic missions of Korea conducted thorough reviews which took more than 14 days and only issued single-entry visas. However, in order to ensure the movement of essential personnel such as those engaging in international trade and commercial activities and medical services, the Korean government allowed visas to be issued promptly for some selected persons, even within 14 days.

As a result, about 2.36 million visas were invalidated, and there was a decrease of more than 80% in the issuance of visas compared to the previous year. Also, the number of foreign nationals entering the country decreased by approximately 81% year-on-year. Rather than completely closing its borders, the Korean government sought to implement a meticulous and technology-based border management policy, upholding the principle of openness.

The second response was the active use of the i-PreChecking (IPC) system to deny boarding for selected high-risk passengers. The scheme, also known as I-API, links reservation and ticketing systems of carriers to the system of the Korea Immigration Service. The system automatically screens the information to identify passengers who are not allowed to enter Korea and blocks the issuance of boarding passes to them, thereby preventing high-risk passengers

from even boarding planes from the very start. The Korean government was able to successfully block the entry of approximately 20,895 holders of passports issued from at-risk regions and holders of invalidated visas in the four months of using this system.

	Health Condition	on Repo	rt Form	(Korean-English)	
	- 신종 코로나바 건강상태 확인서 (이러스 감염 Health (증 (Novel (Conditio	Coronavirus) - on Report Form)	
성명(Name)			성별(Sex)	,	
			□ 남(M)	□ 여(女)	
 국적(Nationality)			생년월일(Da		
, ,(,			,		
여권번호(Passport Num	borl		(MM/DD/YY)	^{rr)} 뷔정일(Expected Date o	f Entry)
(Passport Nulli	iber)		(MM/DD/YY	1	i Ellury)
본국 내 주소(Address in	Home Country)		본국 내 연락	락처(Phone Number in Ho	ome Country)
한국 내 주소(Address in	Korea)		한국 내 연락	락처(Phone Number in Kore	ea)
최근 30일 동안 체류한 ! Please list all cities wi	도시를 모두 적으시오. here you have stayed v	vithin 30 da	ays prior to	application.	
1)	2)	3)		4)	5)
	미(湖北) 전역 또는 우한(武 nyed in Hubei or Wuhan				
,	[]예(Ye	es)	[]0[·니오(No)	
	증상이 있었거나 현재 있 e following symptoms v				e last 14 days
[]발열(Fever)	[]오한(Chills)	[]두통(He		[]인후통(Sore throat)	[]콧물(Runny nose)
[]기침(Cough)	[]호흡곤란 (Shortness of breath)	[]구토(Vo	miting)	[]복통 또는 설사 (Abdominal pain or Diarrhe	ea) []발진(Rash)
[]황달(Jaundice)	[]의식저하 (Loss of consciousness)	[]점막 지= (Bloody mu * 눈, 코, 입 등 (* Eyes, nose,	ıcus)	us) []그 맊의 증상(Other symptoms)	
	I.	(2) 23, 11032,	, modal, etc.)	I	
	증상이 있는 경우에는 아 e above symptoms, please				
	Medication taken for sym		[]병원	치료·진료를 받음	al comp)
			l(undergo	one diagnosis or medica	at care)
	세는 우측 "증상 없음"란 apply, please mark the "No			오.	[] 증상 없음 (No Symptoms)
, , ,	 하거나 거짓으로 작성			출입국관리법」에 따라	사증 발급 또는 입국이
Making false statemer	nts concerning your hea				n a the denial of a visa, the Republic of Korea.
				성하였음을 확인합니다. ve is true and correct.	
	Da		(MM/DD/Y	,	
		licant	(Signa	•	
			관(총영사관 the Repub) 귀하 llic of Korea in 00000)
	, (0000				

3. Support for Foreign Nationals

3.1. Quarantine Requirement for All Inbound Travelers

In view of the COVID-19 pandemic and the resultant increasing risks, as of midnight of April 1, the Korean government expanded the mandatory 14-day quarantine (self-quarantine or at a facility designated by the Korean government) for travelers from the U.S. and Europe to all inbound travelers in an effort to minimize the transmission of the virus in Korea through imported cases.

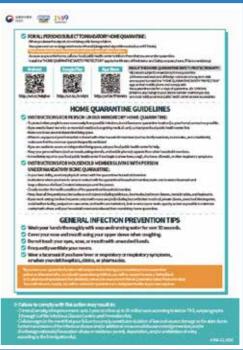
3.1.1. Implementation

Given that short-term visitors do not have a place of residence in Korea for the purposes of self-quarantine, the Korean government provided facilities for them to stay and required that they pay the related expenses (KRW 1.4 million / USD 1,203 per person to stay in the facility for 14 days). To implement this policy, the Korean government required all passengers purchasing tickets to Korea to complete and submit the Facility Quarantine Agreement as a mandatory measure so that only those who needed to enter the country could enter. Korean nationals with a place of residence in Korea and foreigners with long-term stay status were allowed to be quarantined in their places of residence.



Quarantine Instructions for Foreign Visitors





Facility Quarantine Agreement (English) Date of Birth Name Nationality Ship · Flight No. Passport No. Date of Arrival In response to the global COVID-19 outbreak, as of 00:00 April 1, 2020 (arrival time), the Republic of Korea requires all inbound travelers to be subject to self-quarantine (Korean nationals and foreign nationals with long-term visas) or facility quarantine (foreign

- Foreign nationals with short-term visas: B-1, B-2, C-1, C-3, and C-4 visa holders
- Foreign nationals with long-term visas: Holders of visas other than short-term visas

<Subjects of submission and consequences of non-submission>

Foreign nationals with short-term visas should complete and submit this agreement to the government of the Republic of Korea. If the person fails to submit this agreement or does not agree with all categories below, the government may deny entry in accordance with the "Immigration Act_1, "Quarantine Act_1, etc.

<Facility Quarantine>

I, as a foreign national with a short-term visa and without a Self-Isolation Exemption Certificate, agree to be quarantined at

a facility designated by the government of the Republic of Ro 『Infectious Disease Control and Prevention Act』, Article 16 o	rea for 14 days after entry, in accordance with Article 42 of the fthe 『Quarantine Act』,etc.
☐ Agree	□ Disagree
<expenses></expenses>	
I, in compliance with the instructions of the government of the person) for accommodations, meals, transportation, etc., incurrec	Republic of Korea, agree to pay all expenses (KRW 1,400,000 per by facility quarantine for 14 days.
☐ Agree	☐ Disagree
<departure order=""> 1, in compliance with the instructions of the government or to pay the expenses incurred by facility guarantine for 14 or measures, including departure orders, if I fail to comply.</departure>	of the Republic of Korea, agree to accept the responsibility ays and agree to unconditionally abide by the government
☐ Agree	☐ Disagree
Date (MM/DD/YYYY)	Completed by (Signature)
Government of the	Republic of Korea



3.1.2. Exemption from Quarantine

Maintaining the principle of openness regarding cross-border movements, the Korean government allowed exceptions for those engaging in essential international travel. Those exempted from quarantine include people holding A-1 (Diplomat), A-2 (Government Official), or A-3 (Agreement) visas and those who received the 'Quarantine Exemption Certificate' issued by the Korean Embassy prior to their entry in recognition of their purpose of visit being important and urgent business, academic events, the public interest, or humanitarian reasons. Those exempted from quarantine should undergo COVID-19 testing upon arrival, and if they test negative, comply with active surveillance in which they are required to use the Self-Check Mobile App every day to report their health condition and have a designated public officer call to check on their health condition for 14 days.

3.2. Mandatory Diagnostic Testing for Inbound Travelers

3.2.1. Mandatory Diagnostic Test for Inbound Travelers from Regions with Mass Infections (Step 1)

Due to the growing number of imported cases, the Korean government made diagnostic tests mandatory for inbound travelers from Europe from March 22, regardless of whether or not they show symptoms. The scope of those subject to the mandatory diagnostic tests was expanded on April 15 to include inbound travelers arriving from the U.S. following the large-scale spread of infections there.

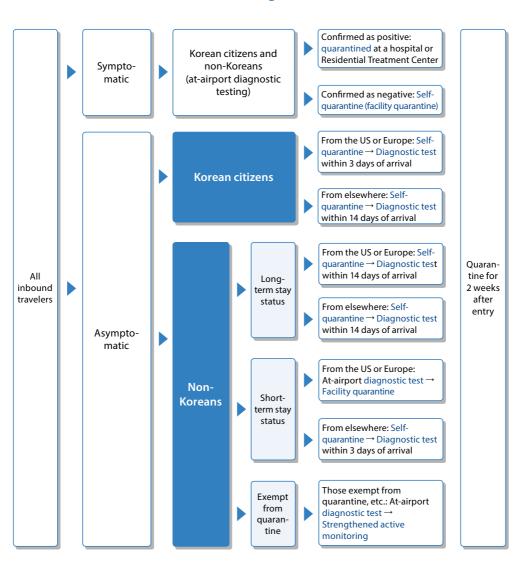
Accordingly, "Korean citizens and foreign nationals with long-term stay status" were required to undergo a diagnostic test within three days of their arrival as a mandatory measure, and "foreign nationals with short-term stay status" were required to have a diagnostic test at the airport upon arrival or at a government-provided facility as a mandatory measure. In the case that an inbound traveler has COVID-19 symptoms, they have a diagnostic test at the airport, and if they test positive, they are isolated for treatment at a hospital or a Residential Treatment Center.

3.2.2. Mandatory Diagnostic Test for All Inbound Travelers (Step 2)

As a majority of the new confirmed cases (72%) from the end of April to the beginning of May (April 25 – May 8) were found to be imported cases, and as new confirmed cases amongst those traveling from the Middle East and Africa increased, the Korean government expanded the scope of mandatory diagnostic tests from those traveling from Europe and the U.S. to all inbound travelers starting May 11. Accordingly, all inbound travelers who do not show COVID-19 symptoms are quarantined for 14 days and receive diagnostic tests during the period of quarantine. In the case of an inbound traveler who does show COVID-19 symptoms, a diagnostic test is conducted at the airport, and if

they test positive, they are isolated for treatment at a hospital or a Residential Treatment Center.

Flow Chart for Quarantine Management of Inbound Travelers



3.3. Minimizing the Movement of Foreigners Staying in Korea

3.3.1. Automatic Extensions of Expiring Visas

In mid-February, the number of confirmed cases of COVID-19 started to surge, concentrated in Daegu and North Gyeongsang Province, and therefore there was a greater call for measures to minimize the movement of people, including foreigners in Korea in order to prevent the spread of the virus among local communities and among non-Koreans staying in Korea. On February 24, the Korean government automatically extended the period of stay to April 30 for foreigners whose visa expiration was imminent. On April 9, the Korean government automatically extended such visas again, this time by three months. The Korean government's two automatic extensions of expiring visas saved about 150,000 foreign nationals a trip to the immigration office. The risk of transmission among communities of foreign nationals and among local communities was thus reduced.

3.3.2. Online Extension of Stay in Korea

Due to the suspension of flights amidst the spread of COVID-19, there were non-Koreans who entered the country for a short-term visit yet were unable to leave the country, leading to a rapid increase in the number of non-Koreans visiting immigration offices to apply for the temporary visa extensions to extend their periods of stay in Korea.

Number of Temporary Visa Extensions for Non-Koreans (2019 and 2020)

Year / Month	February	March	April
2020	7,472	16,512	37,139
2019	417	411	311
Change (YoY)	16 fold increase	40 fold increase	120 fold increase

^{*} Note: "Temporary Visa Extension" scheme is applied to foreigners who are unable to leave the country. The figure excludes general visa extensions.

Monitoring the situation regarding flights in and out of the country, the Korean government took measures to allow flexibility in extending the period of stay for non-Koreans unable to return to their home country. The government launched an "online visa extension application system" to make it easier for foreigners to extend their period of stay.

A Task Force (TF) was formed for the swift development of the online system within a short period of time. By April 28, the online system was in operation, receiving visa extension applications and granting extensions online. In May alone, more than 20,000 applications were processed, enabling non-Koreans to extend their stay contact-free.

3.3.3. Re-entry Permit System and Submission of Diagnosis for Re-entry into Korea

As an increasing number of cases were reported of long-term visa holders becoming infected with COVID-19 after leaving Korea and then re-entering the country, the Korean government, following a process of whole-of-government consultations, took measures to minimize movement in and out of the country by strengthening immigration management for non-Koreans with long-term stay status.

As such, from June 1, the Korean government implemented the Re-Entry Permit System, with exceptions for registered non-Koreans holding A-1 (Diplomat), A-2 (Government Official), and A-3 (Agreement) visas. Under the system, re-entry without a visa is allowed only if the person applied for and was granted a re-entry permit prior to leaving Korea. When re-entering, the person should bring the same medical certificate that had been submitted when applying for a visa (indicating the presence or absence of COVID-19 symptoms) and present the certificate upon re-entry. With such measures in place, re-entry is allowed following a health check of the foreign nationals.

Moreover, to minimize the impact on the movement of persons with the purpose of urgent business matters, academic activities, or news coverage, the Korean government granted an exemption regarding presenting a medical certificate for those who leave Korea for such reasons and then re-enter the country within three weeks.

3.3.4. Tailor-made Services in Foreign Languages

In effectively responding to the spread of COVID-19, another vital element is the prompt provision of relevant information to non-Koreans staying in Korea in multiple languages, and enabling them to seek help immediately in the case that they suspect they have symptoms of COVID-19. Accordingly, the Korean government has been operating the "1345 Immigration Contact Center" to provide guidance in 20 languages.*

* Language assistance provided by 1345 Immigration Contact Center (20 languages) Korean, English, Chinese, Japanese, Vietnamese, Thai, Malay/Indonesian, Russian, Mongolian, Bengali, Pakistani, Nepali, Cambodian, Myanmar, French, German, Spanish, Filipino, Arabic, and Singhalese

As COVID-19 began to spread rapidly from the end of January, there was an urgent need to provide non-Koreans with guidance on how to respond to infectious diseases and which measures should be taken. Accordingly, the 1345 Immigration Contact Center extended its operation to a 24-hour emergency system from January 28 and provided information, safety measures to prevent infection, and the location of screening stations. The 1345 Immigration Contact Center also provides three-way interpretation services so that anyone who has suspected symptoms can immediately call the KCDC's Call Center (1339) and seek treatment.

1345 Immigration Contact Center's COVID-19 Support (January 20 – September 22)

(Unit: Case)

Category	Total	Number of Occasions Consultations Provided	(Number of Occasions) Three-way Interpretation Services Provided
Immigration Contact Center's COVID-19 Support	143,988	142,809	1,179

3.3.5. Interpretation Services, Support for Distribution of Masks

The Korean government has strived to ensure that non-Koreans staying in Korea have easy access to facilities in their own language. In this process, the 1345 Immigration Contact Center has contributed greatly by employing multilingual counselors.

In addition, in order to effectively supply masks to non-Koreans staying in Korea, the Korean government supported the development of the "Mask Supply System for Foreigners" in consultation with the MOHW, the National Health Insurance Service, and the Health Insurance Review and Assessment Service. The Korean government provided relevant information to non-Koreans in Korea, enabling 1.7 million non-Koreans to easily purchase protective masks at affordable prices from pharmacies around the country, regardless of their health insurance status. With such measures in place, non-Koreans were able to more easily purchase masks, helping to reduce the chances of transmission.

3.3.6. Suspension of Initial Orientation Course for Immigrants

The Initial Orientation Course for Immigrants designed for non-Koreans not yet familiar with Korea was suspended to minimize the movement of non-Koreans staying in the country and to facilitate compliance with self-isolation for those entering the country. For those required to complete the Initial Orientation Course, supportive related measures were introduced such as the

exemption from submitting a certificate verifying the completion of the Initial Orientation Course when applying for a stay permit in Korea.

3.3.7. Suspension of Korea Immigration and Integration Program and Use of Online Classes

Classroom education for the Immigration and Integration Program was suspended to prevent the spread of COVID-19 among non-Korean participants. Since April, the program has been temporarily resumed through the use of online classes.

3.3.8. Enhanced Visa Application Procedure for Marriage Immigrants

Marriage immigrants can now apply for a visa even if the Korean spouse has not completed the International Marriage Guidance Program. (However, as a required supplementary step a certificate verifying completion of the program must be submitted prior to the issuing of the visa.) As for marriage immigrants who failed to fly back to Korea and have their visa extended due to COVID-19, the application for re-issuance has been simplified in terms of required documents and necessary procedures.

3.3.9. Temporarily Allowing Change of Status of Sojourn for Marriage Immigrants

Some marriage immigrants who entered the country with short-term stay visa have faced greater uncertainties for a prolonged period due to COVID-19. Marriage immigrants have temporarily been allowed to apply for "marriage migrant status (F-6)" in Korea if they meet certain requirements. This measure helped to prevent the risk of the inflow of the virus and easing difficulties experienced by international-marriage families.

* Previously, non-Koreans who entered Korea with a short-term stay status were not able to change their status of sojourn in Korea and had to obtain a marriage migrant visa (F-6) from diplomatic missions of Korea abroad.

Video of the Relay Campaign to Overcome COVID-19





"Korea Immigration and Integration Program (KIIP) Mentoring Volunteers" Formed by the Ministry of Justice Participating in the Thanks To You Challenge

법무부 사회통합 이민자 멘토단

덕분에 챌린지 릴레이 캠페인



3.3.10. Public Information Campaign to Advise Foreign Nationals on How to Prevent the Spread of the Infectious Disease

The government actively promoted COVID-19 prevention measures through the Relay Campaign to overcome COVID-19 led by the "Korea Immigration and Integration Program (KIIP) Mentoring Volunteers" and the Thanks-To-You Challenge. This campaign helped contribute to containing the spread of the infectious disease through the immigrant network run by the immigration offices and services across the nation.

3.4. Reducing Risk Factors by Encouraging Immigrants without Legal Status to Voluntarily Leave the Country

3.4.1. Minimizing the Clampdown on Immigrants without Legal Status as the Authorities Raised the Infectious Disease Risk Alert Level to "Level 4 (Highest)"

As clamping down on illegal stays is more likely to push immigrants without legal status into hiding, the government relaxed its stance to allow them to voluntarily leave the country so that any blind spots for infection control could be minimized. To avoid situations where immigrants without legal status go into hiding or crowdedness in the temporary shelters that could pose a risk to infection control, the government relaxed its measures on illegal stays in response to the raised Infectious Disease Risk Alert level to "Level 4 (Highest)" (February 24, 2020).

In accordance with the KCDC guidelines, immigrants without legal status can get tested and treated without the fear of being reported and deported.

3.4.2. Implementing Program to Allow Online Reporting Prior to Voluntary Departure

To prevent immigrants without legal status from leaving the country right after committing a crime such as in the case of the October 2019 'hit-and-run accident' that victimized a child in Changwon, the prior reporting to voluntary departure system was put in place on October 21, 2019. In order to prevent community transmission by minimizing people's travel, the government newly introduced the online reporting system that allowed immigrants without legal status to be able to report online prior to leaving the country without having to visit the immigration office in their jurisdiction.

* Foreign nationals who want to report their voluntary departure should visit the immigration office of their jurisdiction and go through prior screening at least three days before their departure, and visit the immigration office/services at the airport or port on their departure date to undergo a criminal background check before departure.

3.4.3. Allowing Voluntary Departure Reports without a Plane Ticket

The immigrants without legal status policy* that has been in effect since December 11, 2019 mainly focused on offering the opportunity for conditional re-entry, facilitating human exchanges to bring about a virtuous circle, controlling new entries of immigrants without legal status, and establishing order to the immigration process in addition to implementing conventional and basic measures such as clampdowns and voluntary departures.

* Immigrants without legal status who voluntarily depart by June 2020 are given the opportunity of re-entry. From July 2020, fines are imposed even for voluntary departure, and those failing to pay are subject to a stricter entry ban.

Immigrants without legal status are eligible to make a notification of their voluntary departure with a booked plane ticket to their home country, but flights have been canceled due to the COVID-19 outbreak, thus making it difficult for them to report their voluntary departure. This raised the concern that such foreign nationals left unchecked regarding their place of residence

can fall into the blind spots of infection control.

* After reaching a peak of 7,512 applicants in the third week of March 2020, the number dropped to 366 in the fourth week of April. An estimated 5,600 immigrants without legal status were unable to depart due to the suspension of flights.

Given the difficulty of booking tickets during the COVID-19 outbreak, the reporting of voluntary departure without a booked plane ticket has been allowed since February 20, 2020. A 30-day grace period has been granted with the suspension of flights, but immigrants without legal status should immediately leave the country once flights are back in service. If flights are not available for over 30 days, they should visit the immigration office where they submitted their report to extend the grace period.

The immigration office checks the temperatures of immigrants without legal status when they visit for voluntary departure. If they show a fever, they are tested at a public health center. The authorities have been actively publicizing the exemption of obligatory notification.

3.5. Encouraging Voluntary Testing by Temporarily Suspending the Mandatory Reporting of Immigrants without Legal Status

As massive outbreaks among migrant workers have been reported in some countries, the Korean government is making an effort to remove risk factors by preemptively checking on all foreign residents, both legal and illegal in the country. In particular, foreign nationals being tested for COVID-19 at public medical facilities are exempted from mandatory reporting to the authorities under Article 92 (2) of the Enforcement Decree of the Immigration Act²¹ even if

²¹ Article 92 (2) of the Enforcement Decree of the Immigration Act (Exemption of obligation to report) – When a public officer learns the personal information of patients while providing health services in a public health facility under Article 2 (2) of the Public Health and Medical Services Act.

public officers learn of their illegal status.

In addition, the government has actively publicized this practice via public offices managing foreign nationals so that they can visit the nearest medical facilities and get tested if they have symptoms.

3.6. Responding Strictly to Violations of Self-Quarantine to Prevent Further Spread

3.6.1. Enacting Administrative Orders to Limit Movement

To strictly implement quarantine of all arrivals from overseas from April 2, 2020, an order was issued by the authorities on April 1, 2020 to reduce violations by foreign nationals.



Media Report on the Implementation of Activity Restrictions on all Foreign Nationals Entering the Country and the Punishment for Violation c YonhapNews

3.6.2. Imposing Fines for Violations

Those who violate the order repeatedly face up to three years in prison or KRW 20 million (USD 17,188) in fines for stricter enforcement. Based on the perception that the initial fine of KRW 500,000 (USD 430) for first time violators was not an efficient deterrent, the fine was raised to KRW 3 million (USD 2,578) on May 29, 2020.

3.6.3. Imposing Strict Punishment

Among 144 foreigners who violated self-quarantine protocols as of September 22, 33 foreigners were ordered to leave the country (16 deported, 17 ordered to leave). Meanwhile, 20 foreigners who refused to check into quarantine facilities were ordered to leave the country and 138 foreign nationals who didn't follow the Special Entry Procedures at the airport/port of arrival were deported.

Prior to Ar	nendment	May 29 Amendment			
Number of Violations	Fine (1USD = 1,163.6 KRW for Sept 22, 2020)	Number of Violations	Fine (1USD = 1,163.6 KRW for Sept 22, 2020)		
1	KRW 500,000 (USD 430)	1	KRW 3M (USD 2,578)		
2	KRW 2M (USD 1,719)	2	KRW 5M (USD 4,297)		
3	KRW 5M (USD 4,297)	3	KRW 10M (USD 8,594)		
4	KRW 10M (USD 8,594)	4	KRW 15M (USD 12,891)		
5 and more	KRW 20M (USD 17,188)	5 and more	KRW 20M (USD 17,188)		



For more information								
Part	Organization	Division	Email	Contact				
Special Entry Procedures	Ministry of Justice/ Korea Disease Control and Prevention Agency	Border Control Division/ International Affairs	bordercontrol@ korea.kr/ shinyelee@ korea.kr	+82-2-2110-4039/ +82-43-719-7751				
Entry Restrictions/ Management of Foreign Nationals	Ministry of Justice	Border Control Division	bordercontrol@ korea.kr	+82-2-2110-4039				
Tracing of undocumented foreigners	Korean National Police Agency	International Cooperation Division	cycop21@ police.go.kr	+82-2-3150-2880				

Social Measures







There are certain conditions that must be met regarding the public for the above 3Ts strategy and measures on immigration to work effectively. For example, when close contact among the public is not controlled, the scope of contact tracing is bound to grow exponentially. Furthermore, infection control is at risk when protective equipment, such as face masks, is not sufficiently supplied. With this in mind, the Korean government took several measures for the public to raise the efficiency of response measures. While continuously promoting social distancing and raising public awareness, the government limited or prohibited activities with high risk of spreading COVID-19. Moreover, it has been implementing measures to ensure the stable supply of protective equipment for effective response measures. As the public continues to respond to and voluntarily participate in the government's various measures, the spread of the disease is gradually coming under control.

1. Social Distancing

The Korean Society for Preventive Medicine proposed a campaign for social distancing aimed at preventing the community spread of COVID-19 by limiting contact among the public. Social distancing is a non-pharmaceutical

intervention implemented alongside other forms of intervention, such as medical treatment or vaccinations, that involves diverse layers of methods ranging from minimizing contact among individuals to separating low-risk population groups from high-risk ones.

Examples of Social Distancing²²

Method	Purpose and Measures
Isolation	Isolate and treat confirmed patients away from the public to minimize spread.
Quarantine	Minimize the spread of the disease before symptoms develop after contact (or during the highly transmissible period).
Stay-at-home advisory	Encourage the stay at-home advisory voluntarily to minimize spread (particularly high risk groups).
Closure of schools	Minimize contact among school-age children to prevent transmission.
Restriction on using group facilities	Protect vulnerable population living in high-risk facilities housing, who are higher risk of outbreak. The restriction must be necessary until community spread ends.
Restriction on group events	Minimize spread by restricting group events in closed spaces. Close contact can also occur in open spaces, e.g., sporting events, as well.
Curfew by district	Minimize spread from high-risk to low-risk districts. Curfews can be set in place alongside school closures and restrictions on group events to maximize the effect of social distancing.





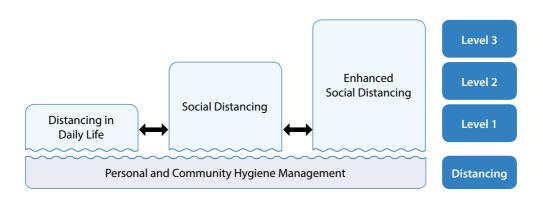


1.1. Evolution of Social Distancing

With COVID-19 spreading around the globe, countries have taken strong measures to contain the outbreak, including city or border lockdowns and stay-at-home orders. However, the Korean government has implemented social distancing without the outright blocking of the borders under the objective of keeping society open by maintaining daily routines while containing the outbreak. This form of social distancing entails refraining from attending social gatherings and coming into direct contact with others, refraining from holding group events in closed spaces including religious activities, monitoring any cold symptoms for 3–4 days before reporting to a screening station, delaying school reopenings, and encouraging employees to work from home. The levels of social distancing have been differentiated to "Social Distancing," "Enhanced

Social Distancing," "Eased Social Distancing," and "Distancing in Daily Life" in accordance with the trajectory of the outbreak.

Levels of Social Distancing



The government advised the public to refrain from attending group activities and maintain safe distancing during the social distancing period (February 29 to March 21). During the first and second rounds of the enhanced social distancing period (March 22 to April 19), staying at home and closing facilities for religion, indoor sports, and entertainment were advised.

However, when deemed impossible to close a facility, the eight guidelines released by the authorities, including banning individuals with symptoms from entering facilities, maintaining two meters of social distancing, and wearing face masks, should be complied with. Facilities violating these guidelines may face an order to ban gatherings, a fine, or claims for damages in the case of an outbreak including expenses for hospitalization, treatment, and disinfection.

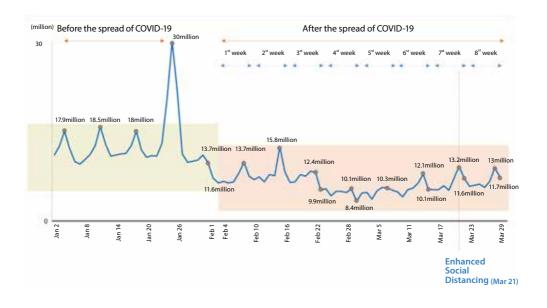
Guidelines for Enhanced Social Distancing

Subject	Detailed Guidelines
Guidelines for the Public	 Delay or cancel non-essential gatherings, dining-out, events, travel, etc. In case of fever or respiratory symptoms (coughing, sore throat, muscle pain, etc.), take adequate rest at home and do not go to work. Refrain from going out except for buying necessities, visiting a doctor, commuting to/from work. Avoid shaking hands and physical contact, and maintain a distance of 2m from each other. Follow personal hygiene practices such as washing hands, coughing etiquette, etc. Disinfect and ventilate your surroundings every day.
Workplace guidelines	 Thoroughly wash your hands with soap and running water. Maintain a distance of at least 1-2m from others and avoid physical contact including shaking hands. Do not use publicly used facilities such as locker rooms, indoor lounges, etc. Use your own personal items such as cups, eating utensils, etc. Maintain distance and avoid sitting face to face while having meals. Go directly home after work.
Guidelines for employers	 To avoid a crowded work environment, increase the distance between employee seating. Implement work-from-home and flexible work schedules or adjust the work start/end time and lunch hours. Postpone or cancel business trips and encourage meetings through phone calls or video conferences. Monitor fever and respiratory symptoms of employees and visitors every day, and make sure those with symptoms do not enter. Keep the workplace clean and create a better work environment. For instance, commonly used spaces such as locker rooms should close, disinfect highly touched surfaces every day, ventilate areas twice a day, and ensure hygiene-related supplies are available. Make sure symptomatic people do not come to work and check temperatures every day during work hours to make sure employees with symptoms leave immediately.
Guidelines for entertainment facilities	 Make sure employees with symptoms leave work immediately (check and record temperatures twice a day). Check temperature and conditions, such as respiratory symptoms, at the entrance, and prohibit the entry of people with a history of overseas travel in the past two weeks, have symptoms, and are part of a high-risk group (keep records). All employees and visitors should wear face masks (those not wearing a mask should be prohibited from entering). Place hand sanitizer at the entrance and multiple locations throughout the facility. When queueing outside the facility, visitors should keep a distance of 1-2m from one another.

Subject	Detailed Guidelines
Guidelines for entertainment facilities	 Disinfect and ventilate the surroundings at least twice per day (keep records including date and supervisor confirmation). Places or objects that are frequently touched with hands including door handles and handrails Designate a person responsible for disinfection and keep records of all visitors (must include names and phone numbers).
Guidelines for religious facilities	 Make sure employees with symptoms leave work immediately (check and record temperatures twice a day). Check temperatures and conditions such as respiratory symptoms at the entrance, and prohibit the entry of those with a history of overseas travel in the past two weeks. All employees and attendees should wear a face mask (those not wearing a mask should be prohibited from entering). Place hand sanitizer at the entrance and multiple locations throughout the facility and prohibit the entry of people with symptoms (keep records). Participants should keep a distance of at least 1-2m from each other. Disinfect and ventilate the surroundings before and after assembly (keep records including date and supervisor confirmation). Places or objects that are frequently touched with hands including door handles and handrails Designate a person responsible for disinfection and keep records of all attendees (must include names and phone numbers).
Guidelines for indoor sports facilities	 Make sure employees with symptoms leave work immediately (check and record temperatures twice a day). Check temperatures and conditions, such as respiratory symptoms, at the entrance and prohibit the entry of people with a history of overseas travel in the past two weeks, have symptoms, and are part of a high-risk group (keep records). All employees and users should wear face masks (those not wearing a mask should be prohibited from entering). Place hand sanitizer at the entrance and multiple locations throughout the facility. Disinfect and ventilate the surroundings at least twice per day (keep records including date and supervisor confirmation). Places or objects that are frequently touched with hands, including door handles and handrails Sports trainers and trainees should wear face masks. Supplies such as sportswear, towels, and workout equipment (those that individuals can carry) should not be provided. Group meals in the facility are banned. Thoroughly sanitize locker rooms, showers, and lounges, and ensure that the facility is not crowded. Keep records of sanitization. Advise users to keep a distance of 1-2m when using exercise equipment. Treadmills, benches, etc. Group exercise programs in closed spaces are banned. Designate a person responsible for disinfection and keep records of all users (must include names and phone numbers).

The Korean people have actively participated in social distancing, which has enabled effective infection control without the outright shutdown of facilities or a movement ban. The public voluntarily refrained from travel right after the outbreak and continued this practice through the enhanced social distancing period. The effect of social distancing in containing the spread of the disease has been clear, with the share of confirmed cases of unknown transmission route dropping from 19.8% on March 6 to 6.1% on March 31. Social distancing also helped reduce the possibility of mass infection, with cases of mass infection going down from 11 cases for the 10 days before enhanced social distancing to four cases after its implementation.

Daily Population Traffic Based on Mobile Big Data²³



²³ Press material by the Ministry of Health and Welfare (April 4, 2020)

Number of New Mass Infection Cases before and after Enhanced Social Distancing²⁴

Before Social Distancing									Afte	r Soc	ial D	istar	icing								
Mar 12	Mar 13	Mar 14	Mar 15	Mar 16	Mar 17	Mar 18	Mar 19	Mar 20	Mar 21	Total	Total	Mar 22	Mar 23	Mar 24	Mar 25	Mar 26	Mar 27	Mar 28	Mar 29	Mar 30	Mar 31
1	1		1		4	2	2			11	4			1	1	1		1			

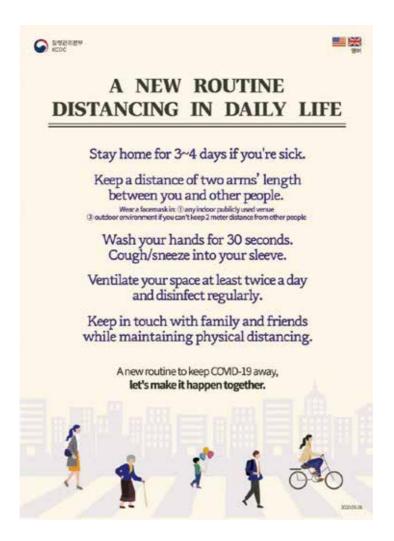
As the spread declined, the government announced a period of "Eased Social Distancing" (April 20 – May 5), which partially lifted restrictions on facilities with relatively low risk such as outdoor venues or facilities that can ensure sufficient distancing between visitors. This directive was later changed to "Distancing in Daily Life" on May 6 considering the shift in recovering control over the COVID-19 response system and the increased emotional fatigue among the public due to prolonged social distancing.²⁵

"Distancing in Daily Life" consists of personal and community guidelines. The five rules in the personal guideline are as follows: stay home for 3–4 days if sick, keep a distance of two arms' length from others, frequently wash hands for 30 seconds and cough/sneeze into sleeves, ventilate at least twice a day and disinfect regularly, and keep in touch with family and friends while maintaining physical distancing. Furthermore, specific guidelines have been released for the following categories: wearing face masks, disinfecting surroundings, following the code of conduct for high-risk groups including people aged 65 and older, and ensuring healthy lifestyle habits.

²⁴ Press material by the Ministry of Health and Welfare (April 4, 2020)

According to a big data analysis, online search results for "having a hard time due to social distancing" have increased five times from early April to mid April.

English Poster for Distancing in Daily Life

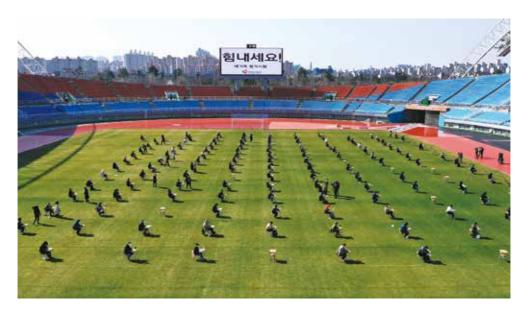


The community guideline outlines the basic code of conduct for groups of people such as appointing a designated manager, implementing and complying with customized preventive measures for the group, and cooperating with the manager. The guideline also includes 31 separate sub-guidelines drafted by 12 ministries in categories such as the workplace, meetings, restaurants, weddings, religious facilities, hotels, zoos, libraries, museums, and sporting facilities.

Meanwhile, after the "Distancing in Daily Life" phase in May, several mass infections occurred mainly in the entertainment and publicly-used facilities of the Seoul metropolitan area (Seoul, Gyeonggi Province, and Incheon). In response, the government decided to implement strengthened relevant response measures for residents and facilities across the metropolitan area from May 29 to June 14. The measures were as follows:

	Item	Subject	Detail
1	Administrative measures	Entertainment facilities, karaoke rooms, private academies, Internet cafes in the metropolitan area	 Advised to shut down, but response guidelines should be followed if facility must remain open. Conduct regular on-site inspections and take measures, such as prosecution and the banning of gatherings if response guidelines are violated.
2	Shut-down of public facilities	Public facilities in the metropolitan area	 Shut down indoor/outdoor publicly used facilities and delay or cancel events held by central/local governments or public agencies unless necessary.
3	Flexible work practices	Government agencies and public enterprises in the metropolitan area	Implement work-from-home and flexible work hours.
4	Recommen- dations	Residents and private- sector companies in the metropolitan area	 Residents should refrain from gathering or appointments, unless necessary, and go directly home after work. Companies should allow employees to adjust work start/end times and work from home.
5	Vulnerable facilities	Medical facilities and nursing facilities in the metropolitan area	Restrict visits, wear masks, monitor symptoms of employees, etc.

Despite the strengthened response measures during the above period, the average number of new confirmed cases per day recorded 43.6 from May 31 to June 13, up 1.5 times from 29.9 of the previous two weeks (May 17 to May 30). This led the government to extend the strengthened measures for the metropolitan area to in order block the chain of infection until daily new confirmed cases fell back to single-digit figures. Furthermore, more facilities are being monitored and designated as high-risk facilities so that they do not



Taking an examination amid social distancing © YonhapNews

fall through the cracks of infectious disease prevention and control. Regions in metropolitan areas reporting many new confirmed cases are also subject to inspection regarding whether the guidelines have been followed. Additional measures will be decided by the inspection results.

The private sector has been very cooperative with regard to the measures taken by the government. The sports industry and leagues delayed the opening of major sporting events and developed their own internal guidelines to tackle COVID-19 through cooperation with government agencies and local authorities. The Korea Baseball Organization (KBO) opened league play in May without spectators after consulting with local authorities and jointly conducted inspections of the stadiums with the authorities. The KBO's response measures involve temperature checks for players and staff at the entrance and a separation of the two groups in their movements.

In order to prevent the spread of the disease among the players, they were advised not to slap palms or spray water on each other and use face masks



No-spectator Games © YonhapNews

and sanitary gloves while at the gym or other training facilities. All games are played in accordance with the guidelines and aired via ESPN around the globe.

Because effective social distancing requires the active participation of Korean citizens and foreign nationals residing in Korea, the government published promotional materials on social distancing in two foreign languages, including English, and collateral on "Distancing in Daily Life" was made available in 13 different languages. These materials are available at central and local government websites and places frequented by foreign nationals.

The adjustment of social distancing phases is decided after taking into account the diverse opinions of groups such as task force teams established in related government agencies, epidemiologists/medical experts, economists, and civic group leaders. The government is prepared to implement different levels of social distancing as well as shut down publicly used facilities based on the trajectory of the COVID-19 outbreak, meaning enhanced social distancing and eased social distancing can be put back in place.

1.2. Three-Level Social Distancing Scheme

Building upon insights learned from the above experience, the Korean government systematized a three-level social distancing scheme on June 28, differentiated according to the severity of the outbreak, with clear-cut public messaging and matching countermeasures. An index has been outlined as below to provide a benchmark for when to implement each level. The levels may be implemented nationwide or on a smaller scale applied to a region according to circumstances.

Index for Three-Level Social Distancing Scheme

For Two Weeks	Level 1	Level 2	Level 3
Number of daily cases	Below 50	Between 50–100	Over 100–200 Doubling twice within a week
Epidemiological link unknown	Below 5%	-	Sharp increase
Community transmissions	Decreasing or under control	Steady increase	Sharp increase

Level 1 denotes that the number of new cases is within manageable capacity of Korea's regular healthcare system. The public is recommended to carry on with their daily lives while following prevention guidelines. Level 2 denotes that the number of new cases has surpassed the capacity of the country's regular healthcare system and community transmissions are on the rise. The public is recommended to refrain from non-essential social engagements, avoid mass gatherings, and minimize contact with people. High-risk facilities are shut down, and other public-use facilities are obligated to follow prevention measures. Level 3 is put into effect when multiple community transmissions are occurring within a region, the infection is spreading at high-speed and a large-scale outbreak is within sight. The public is advised to refrain from all



Director of KCDC giving a press briefing

social engagements and outings other than those necessary such as for work. High and mid-risk facilities are shut down, and all other facilities are subject to restrictions such as suspension of night time operations.

Depending on the COVID-19 situation, social distancing measures have been scaled up or down in a flexible manner as necessary. As COVID-19 spread primarily in the Seoul metropolitan area, the government applied "enhanced" social distancing measure level 2 from August 30 to September 13 in this area, along with social distancing measure level 2 already implemented across the nation. Restrictions on business activities of cafes, bakeries, restaurants, academies, indoor fitness centers etc. were included in the enhanced measures.

Three-Level Scheme and Corresponding Measures of Social Distancing

			Measures for Prev	ention and Control	l
Level	Situation	Gatherings/ Events	Public Facilities	School	Work Pattern
Level 1	Repeated spread and mitigation of small-scale sporadic cases under the control of the healthcare system	Compliance with quarantine rules at gatherings, events, and sporting events (with audience restriction)	Use of publicly used facilities is allowed in principle, but in case of highrisk facilities, it is mandatory to comply with the core quarantine rules	Compliance with the quarantine rules while attending both regular and remote classes	The public sector utilizes flextime and telecommuting at an appropriate rate per department. The private sector is encouraged to follow the same measures as the public sector.
Level 2	The community's COVID-19 epidemic continues to spread beyond what can be afforded by conventional healthcare systems.	Enforcement of an administrative order banning all private and public gatherings and events with 50 or more indoors and 100 or more outdoors people. Sporting events continue with no spectators.	In principle, public facilities are closed (operation is possible when contact-free service is available). Among private facilities, highrisk facilities such as entertainment facilities are suspended and are required to take preventive measures to mitigate the risk of mass infection.	Combination of attending school and distance learning to minimize density to reduce the number of students attending school	Flextime, telecommuting, and staggered lunch hours for public sector employees. The private sector is encouraged to follow the same measures as the public sector.
Level 3	Multiple cases of mass infection in the community, COVID-19 is spreading rapidly and on a large scale.	All meetings where 10 or more people meet face-to-face are banned. All sporting events are suspended.	All public, private, and high to mid- risk facilities are suspended.	Suspension of classes at school. Distance learning and telelearning to continue or close down.	Except for essential personnel, all public sector employees to work from home. Similarly, private sector employees are recommended to work from home.

1.3. Government Measures

As mentioned above, the government has encouraged the public to participate in infection prevention and control through the social distancing movement. Facilities with a high risk of mass infection were strongly advised to shut down from March 22, and local governments independently issued administrative orders, such as restrictions on crowded gatherings and events, to control public behavior. The police and local governments have been jointly conducting inspections on entertainment and publicly used facilities to check compliance with the relevant guidelines.

When violations are detected on site, managers or owners of the facilities are advised to correct their practices and additional measures are implemented to monitor compliance. In the aftermath of cluster infections via entertainment facilities in early May, strong restrictions, such as shutdown orders, have been put in place for entertainment facilities by local governments that saw a spike in new confirmed cases under their jurisdictions.

2. Strengthening Social Trust and Solidarity

In order for government measures to work effectively, social disruption triggered by fake news, cornering and hoarding must be kept under control alongside direct law enforcement on violations of relevant regulations. Since the COVID-19 outbreak began, the stockpiling of protective equipment and daily necessities has been reported around the world. Fake news and infodemics have spread about COVID-19. While face masks were in short supply during the early days of the COVID-19 pandemic, the government has calmed social disruption by actively confronting fake news and introducing a five-day rotation face mask distribution system.



Police dispatch to COVID-19 call



Police Crisis Situation Room

2.1. Investigations into Violations of the Infectious Disease Control and Prevention Act

Jointly with the local governments and disease control authorities, the Korean police have sternly dealt with serious violations of the Infectious Disease Control and Prevention Act, such as quarantine breaks, acts of giving false information during epidemiological investigations, and violations of administrative orders by local governments prohibiting group gatherings or assemblies. Police are investigating the alleged serious violations, giving priority to preventing the spread of infectious diseases and considering the seriousness of the illegal activities.

2.2. Dissemination of Accurate Information to the Public and Response to False Information

The global community has also witnessed the phenomenon of an infodemic²⁶ about COVID-19. Korea was not an exception during the early stages of the outbreak. The misinformation being spread on social media included inaccurate information on viral disease prevention, treatment, face masks, and transmission distance. One of the prime examples was the idea that gargling with salt water could eliminate the virus or prevent the infection. The Central Disease Control Headquarters referred to such claims as an infodemic and has actively responded. The Korean government has strived to halt the circulation of misinformation by holding briefings and issuing press releases in a timely manner. The private sector has launched a campaign to prevent the spread of the infodemic, which, in turn, has minimized casualties and physical damage.

The term is a combination of the words "information" and "epidemic" and was introduced in 2003 in an opinion article in the Washington Post, which pointed out that misinformation surrounding SARS was widespread among the public.

To prevent social disruption triggered by fake news, the Korean government has sought to disseminate accurate information on COVID-19, from medical knowledge to proper methods of wearing a mask.

Government Instructions on Correct Ways to Wear a Mask²⁷

Category	Government Instructions
Correct methods of wearing a mask (general)	 Wash your hands thoroughly with soap and running water before putting on the mask. Place the mask tightly on the face, fully covering your mouth and nose. Do not put a towel, tissues, etc. in the mask. Do not touch the mask while wearing the mask. If you do, wash your hands thoroughly with soap and running water. Wash your hands with soap and running water after removing the mask, and remove the mask by touching only its straps.
Fold-type mask	 Unfold the mask and round the side edges. Ensure its nose wire is facing upwards, fully covering your nose and mouth. Put the ear loops around your ears. Use both hands to pinch the nose wire around your nose. Keep the mask fit tightly on your face, checking for air leakage.
Cup-type mask	 Gently hold the mask in your hand, letting the headbands hang downwards. Place the mask on your face, covering your nose and chin. Pull the top strap over your head and secure it around the crown of your head. Pull the bottom strap over your head and secure it on the back of your neck with a holding device. Use both hands to pinch the nose wire around your nose. Keep the mask fit tightly on your face, checking for air leakage.

In addition, the government has been taking proactive measures to prevent the creation and distribution of misinformation and disinformation related to COVID-19. The Cyber Bureau of the Korean National Police Agency has launched the Cyber Countermeasure Situation Center and set up a hotline for solid cooperation with the Central Disease Control Headquarters, the Central Disaster Management Headquarters, and the Korea Communications Commission (KCC).

²⁷ Press release issued by the KCDC

The Bureau has also assigned a monitoring task to police investigators at all Metropolitan and Provincial Police Agencies to track down false information and fake news on the disease posted on major portal sites. The investigators monitor disinformation and misinformation online, and then request the portal site companies or Korea Communications Standards Commission to block and delete such information. The KCC has coordinated with Google, Twitter, and Facebook to provide their users with a shortcut or quick access to the official website of the Central Disaster Management Headquarter.²⁸

The purpose of this investigation is to protect the basic right to freedom of expression by excluding simple expressions of doubt or opinions and criticism of government policy.²⁹ Accordingly, the scope of misrepresentation is limited to the following: groundless claims about the disease, defamation of COVID-19 patients, leakage of personally identifiable information, and business interruption led by misleading information about hospital closures.

Meanwhile, the private sector is making its own efforts to tackle the spread of fake news. Domestic portal sites have posted COVID-19 symptoms and preventive behaviors following related government or KCDC announcements, as well as mapping screening center locations and offering mask inventory services. Some application developers have launched applications to provide mask inventory data, thereby contributing to providing the public with accurate information. Furthermore, the Journalists Association of Korea, Korea Broadcasting Journalist Association, and Korea Science Journalists Association have established the Epidemic Reporting Guidelines on April 28 stating that journalists should distinguish medical facts from opinions in reporting on infectious diseases and refrain from the use of exaggerated and provocative expressions which could cause social unrest.

²⁸ The Republic of Korea's response to COVID-19 and key factors (The Economy & Society Research Institute/Science and Technology Policy Institute)

²⁹ The Korean police response to the COVID-19 outbreak (Policing Under and Against COVID-19), Korean National Police Agency

2.3. Government Management of Equipments Related to Preventing Infectious Diseases

The Korean government has strictly clamped down on cornering the market and sales fraud of health items and equipment. On February 5, the government announced a ban on cornering the market to provide a legal basis for the crackdown, and a joint governmental inspection team has carried out inspections and enforcement on illegal business activities and violations of the public service obligations.

On the other hand, efforts have been made to stabilize the supply and demand of masks. Despite such efforts, a shortage of masks continued to be a problem, which led the government to enhance its measures to stabilize the situation. The measures include the following plans: production facility expansion, diversification of import routes for mask materials, and deregulation policies. The measures also include a fair distribution plan for face masks in which the government is involved in the management of face mask production, distribution, and sales.

Furthermore, on March 9, the Korean government increased its share of mask purchases from 50 percent to 80 percent of the total supply and implemented the Five-day Rotation Face Mask Distribution System to ensure fair distribution of it. Under this system, all Koreans and registered foreigners could buy two masks per week through a five-day rotation depending on their birth year.

Pharmacies, post offices, and Nonghyup Hanaro Mart have established an integrated system to prevent multiple purchases. For certain groups of people, such as minors, pregnant women, and the disabled, their family members can purchase masks for them. As the supply and demand of masks have been gradually stabilized, the mask-purchasing limit increased from two to three masks per person (April 27) and the designated day-only

purchase rule has been abolished (June 1). Starting from June 18, the mask-purchasing limit was again increased from three to ten pieces, which shows that restrictive measures have been eased.

Rules for the Five-Day Rotation Face Mask Distribution System

Category	Content						
Purchase quota per person	 Two masks per person per week If you do not purchase masks during a given week, you will not be allowed to purchase additional masks the following week. 						
Purchase day	 The Five-day Rotation Face Mask Distribution System enables you to purchase masks only on a specified day, based on the last number of your birth year. Based on the last number of your birth year, Mondays are for 1 and 6, Tuesdays 2 and 7, Wednesdays 3 and 8, Thursdays 4 and 9, Fridays 5 and 0. Those who did not purchase masks on week days can purchase them on Saturdays and Sundays. 						
Purchase location	 Pharmacies (March 6) Post office, Nonghyup Hanaro Mart (March 6)* * For areas where there are no pharmacies 						
ID verification	 When purchasing masks, you must bring a government-issued identification card to prove your identity. If you are a foreigner, you must present your health insurance card and alien registration card. For minors or persons with disabilities, their family members can buy masks for them. 						
Make sure you o							
Use the last digit of your year of birth to your resident registration number or alice Monday Tuesday Wednesday Thursday 1-6 2-7 3-8 4-9 Cuilf you were born in 1967, you can buy or	Friday Saturday Friday Saturday Sunday Su						

Meanwhile, the Korean police tracked down and penalized acts of fraud in online secondhand markets,³⁰ such as selling substandard products, not delivering products after payment, or impersonating a manufacturer. As described above, the government has implemented multi-approach strategies to ensure that the supply of protective equipment remains stable.

2.4. Campaign for Solidarity

The Central Disease Control Headquarters has implemented measures to help citizens relieve the stress and psychological fatigue caused by the prolonged COVID-19 pandemic and social distancing measures. To prevent mental illness during the COVID-19 outbreak, the Korean Psychological Association (Special Committee on COVID-19) and the Headquarters have jointly offered psychological counseling services to citizens suffering from depression or anxiety as well as introduced stress management guidance for the general public, patients, and people in quarantine.

The Headquarters has also formed a joint COVID-19 psychological support team consisting of staff from the Ministry of Health and Welfare, the National Center for Disaster Trauma, the Trauma Center of the Yeongnam Region, and the National Center of Mental Health. The team conducts psychological health evaluations through phone calls or face-to-face counseling to identify high-risk individuals and offer treatment. The purpose of such an approach is to reduce the public's mental fatigue during the COVID-19 outbreak and thereby encourage public participation in government policy.

To promote national solidarity, the Korean government has launched multiple campaigns on social media. One of them is the "Thanks To You Challenge" to support and express gratitude to medical personnel working tirelessly on

³⁰ Policing Under and Against COVID-19, published by the Korean National Police Agency.

the front lines of the outbreak. The campaign endorses the use of the hand gesture that means "respect" and "pride" in sign language and encourages people to be a part of the movement by uploading a photograph of themselves doing the hand gesture on social media.

In the midst of large-scale COVID-19 infections in Daegu, the Korean government launched a major campaign with the slogan "Cheer up, Daegu, Gyeongbuk-do" to highlight national solidarity and cooperation in the crisis response.

(Public Use) Sign Language Meaning "Respect" Is Used for the Logo







In addition, the Korean government has launched the "Stay Strong" campaign on social media not only to promote national solidarity and support but also to encourage resilience among the global community. The logo of this campaign is a symbolic hand-washing gesture, representing the hope that all people will stay healthy and resilient until the COVID-19 outbreak ends. Those who would like to participate in the campaign can recreate and upload their own logo, tagging friends to relay the campaign. Ambassadors and diplomats to Korea, celebrities across the country, and people from more than 128 countries have joined this movement, reaching more than 1million likes as of July 31.



President Moon Jae-in participating in the Thanks To You Challenge campaign

Logo of the #Staystrong Campaign

Strong St

#Staystrong Instagram Page



The Korean government also launched a public relations campaign called "TRUST" to enhance understanding on Korea's response strategy to COVID-19. Through the acronym "TRUST", the Korean government promotes how it has been fighting the pandemic based on "Transparency, Robust Screening" and Quarantine, Unique but Universally-Applicable Solution, Strict Control, and Treatment," and calls for solidarity and cooperation of the international community based on the principles of "Transparency, Responsibility, United Action, Science and Speed, and Together in Solidarity." 31

Major foreign press and think tanks commended Korea's COVID-19 strategy, referring to the TRUST campaign.

First Meaning of TRUST







<u>U</u>nique but Universally-Applicable, <u>Strict Control</u>, <u>Science and Speed, <u>T</u>ogether in Solidarity</u> **Treatment**

Transparency, Robust Screening and Quarantine, Transparency, Responsibility, United Action,

^{31 – &}quot;... Few governments are doing that better than South Korea as it battles coronavirus... Every campaign needs a slogan, The country's Ministry of Foreign Affairs created one based on the acronym TRUST..." (In Coronavirus Crisis, South Korea Shows How Government PR is Done, PR News, March 16, 2020)

^{- &}quot;... Korean officials attribute this to a strategy called TRUST: transparency; robust screening and quarantine; unique but universally applicable testing and; strict control and treatment..." (In Depth: Why South Korea is winning the coronavirus battle, Nikkei, April 1, 2020)

3. Election

3.1. Preparation to Hold the 21st National Assembly Elections

The National Election Commission (NEC) laid out measures to safeguard the health of voters and their right to vote during the COVID-19 outbreak with the belief that dis-infecting as much as possible is the best election management. Also, the Korean government prepared various plans for COVID-19 patients and people in self-quarantine with a restriction on travel in order to protect their right to vote in political elections."

Thanks to the thorough preparations to prevent infections during the elections, the Korean government successfully conducted the 21st National Assembly elections on April 15 and received much global attention. The early voting turnout hit a record high of 26.69% (11.74 million voters), and the final turnout, including early voting, was 66.2% (29.12 million voters), the largest turnout in 28 years since the 14th National Assembly elections in 1992. Despite the high turnout, not a single confirmed case was reported during these elections.

3.2. Methods for Casting Ballots during the COVID-19 Outbreak

3.2.1. Methods for the General Public

The NEC announced the National Code of Conduct for Casting Ballots and continuously promoted it by issuing press releases and notifications. This effort was aimed at informing the public of safe voting procedures and

^{- &}quot;... Shortly after the initial discovery of the virus, South Korea implemented a 'TRUST' strategyan acronym for 'Transparency, Robust screening and quarantine, Unique but universally applicable testing, Strict control, and Treatment." (South Korea Provides Lessons, Good and Bad, on Coronavirus Response, The Heritage Foundation, March 28, 2020)





Standing in a line in the polling station © YonhapNews

disinfection measures at polling stations so that the public would feel safe heading to the polling stations.

On the day of the election, eligible voters visited the polling stations wearing face masks and kept a distance of more than one-meter from each other as notified in the safety posters attached on the walls of the polling stations.

Also, polling station staff dedicated to checking people's temperatures waited at the entrances to check the temperature of everyone entering the polling stations. Voters with a normal temperature were allowed to enter the station after sterilizing their hands and putting on disposable plastic gloves. Voters with a fever or respiratory symptoms were moved to a temporary polling booth installed outside the station or in a ventilated place.

Polling station staff wore face masks and surgical gloves. Polling station staff dedicated to checking people's temperatures wore face shields as well as face masks and gloves. The polling station staff sterilized voting equipment, polling booths, marking devices, and ballot boxes with disinfectant tissues as often as they could. They were also instructed to avoid any unnecessary conversations.

3.2.2. Voting Protocol for Confirmed COVID-19 Patients

The NEC minimized any blind spots in the people's right to vote by allowing home and special early voting for people confirmed with COVID-19. The NEC decided that those who tested positive before March 28, the end of the home voting registration period, were eligible to vote from their place of residence and those who were put under isolation in residential treatment centers and tested positive after the date were eligible to vote through special early voting.

A. Home Voting

Home voting is a system that allows voters who cannot cast their ballot at a polling station, because of a serious physical disability, hospitalization, or residence at a nursing home, to receive their ballot papers via post and vote from their place of residence. Those who tested positive before March 28, the end of the home voting registration period, and were put under isolation at hospitals, residential treatment centers, or their homes were also made eligible for home voting via registration.

Home voters cast their ballot from the hospital, care center or place of residence and were guided to wear face masks and sanitary gloves throughout the voting process including when receiving their ballot. The return envelopes containing home voting ballots collected from hospitals and residential treatment centers were sterilized and put into mailboxes or delivered to post offices, and the election commission staff were required to wear face masks and sanitary gloves when receiving the return envelopes and frequently use hand sanitizer to ensure strict hygiene.

B. Special Early Voting

Confirmed COVID-19 patients who were diagnosed after the deadline for home voting registration on March 28 and showed relatively minor symptoms participated in voting at special early voting polling stations set up at eight residential treatment centers from April 10 to 11.

Special early voting polling stations were set up in well-ventilated places or outdoors and one voter at a time was guided to the special early voting polling station to avoid contact among confirmed patients. Confirmed patients were requested to wear face masks before entering the station, clean their hands with the provided hand sanitizer, and wear sanitary gloves.

Polling station staff and officers wore Level D protective clothing normally used by medical professionals; equipment such as polling booths and stationery were discarded on site; and return envelopes were sanitized then given to the post office.

3.2.3. Voting Protocol for Persons under Self-Quarantine

Those who had close contact with confirmed cases or those who entered the country from overseas and were ordered to self-quarantine from April 1 to April 14, 6:00 pm, a day before the election, also participated in voting. They received permission from health authorities to temporarily leave their place of quarantine and voted at temporary polling booths after 6:00 p.m., when voting by regular voters had ended. Their voting was conditionally allowed only when they showed no respiratory symptoms or fever and were able to access the polling station from their place of quarantine in less than 30 minutes by car, which needed to be driven alone, or on foot.

The voting protocol for those put under self-quarantine was basically similar to the regular protocol but with enhanced measures. For example, temporary polling booths were set up in well-ventilated places or outdoors after regular voting concluded. Polling station staff were required to wear personal protective equipment (Level D protective clothing, face protective gear, face masks, medical gloves, and shoe covers).



Voting under Self-quarantine © YonhapNews

Voters were required to enter the booth after sanitizing their hands, one at a time, wearing face masks and disposable plastic gloves, and staff assigned to temporary polling booths sanitized marking devices with sanitizing wipes after each voter finished voting. Participants were advised to refrain from speaking to each other throughout the voting process.

3.3. Disinfection of Polling Stations and Counting Centers and Staff Management

3.3.1. Sanitizing Polling Stations and Counting Centers and Infection Control Equipment

Infection control equipment, including face masks (for hygiene and medical purposes), thermometers, hand sanitizers, sanitizing wipes, medical gloves, disposable plastic gloves, and face protective gear, were provided at polling stations and counting centers to prevent the spread of COVID-19. The NEC estimated the necessary amount of such equipment per city and province and prepared the actual amount provided with 10–20% extra. As a result, 3 million face masks, 300,000 hand sanitizers, and 20,000 thermometers were placed at polling stations and counting centers across the country.

Disinfection was conducted before and after voting and ballot-counting as well as on the first day of early voting after the voting hours for effective disinfection. To minimize the time required to disinfect the premises, disinfection was conducted at night. The inside and outside of polling/counting stations and voters' pathways, including publicly accessible hallways, restrooms, and





Disinfection in the polling station © YonhapNews

elevators, were all disinfected and anyone from outside was prohibited from entering the polling station before voting started.

3.3.2. Hiring and Educating Voting and Counting Staff

Despite difficulties in securing staff amid the COVID-19 outbreak, the NEC worked diligently to address the concerns of polling and counting staff by conducting thorough education. For example, all staff were required to wear medical gloves to minimize direct contact with voters on election day.

The NEC used a video conference system and education materials and videos to provide education for polling and counting staff and ensured strict hygiene for face-to-face education by checking temperatures and using hand sanitizer and face masks. Furthermore, in preparation for a situation where polling and counting staff are unable to serve due to being put under self-isolation for testing positive or coming into close contact with confirmed cases, teachers and staff at schools and ordinary citizens who were confirmed to be fair and unbiased were prepared as reserve voting staff.

3.4. Ballot Counting Protocol

In order to prevent the spread of COVID-19 during ballot counting, spacious places with ventilation systems were secured and counting staff kept an appropriate distance from each other. Observers were guided to keep a safe distance from the counting staff by designating their location with floor markers.

Additional staff exclusively responsible for checking temperatures were assigned at the entrances of counting centers to check the temperatures of all ballot counting staff. Anyone showing symptoms was banned from entering center and immediately sent home or guided to visit a public health center or COVID-19 screening station.

Ballot counting staff and other officials were required to wear face masks at all times in the counting center. Hand sanitizers were provided at the entrances, inside and outside of the counting center. Door handles, counting equipment, and other items were disinfected regularly with sanitizing wipes. All these measures were taken by the NEC to successfully conduct the election while preventing the spread of the disease through thorough disinfection, sanitation, and temperature checks at the polling stations on Election Day. At the same time, voting methods were expanded to minimize blind spots in the people's right to vote so that people confirmed with COVID-19 and in self-isolation with limited mobility could vote.

For more information								
Part	Organization	Division	Email	Contact				
Social Distancing	Ministry of Foreign Affairs	Task Force for Tackling COVID-19	khmin 19@ mofa.go.kr	+82-2-2100-6885				
Investigation into violations of Act/ Response to false information	Korean National Police Agency	International Cooperation Division	cycop21@ police.go.kr	+82-2-3150-2880				
Election	National Election Commission	Administration &international Affairs Division	necvote@ nec.go.kr	+82-2-503-0883				

05 Education







Since the first confirmed case of COVID-19 was reported in Korea on January 20, the Korean government has been working closely with the health authorities and city and provincial education offices to come up with measures that put the health and safety of students on top priority. The government worked together with the Centers for Disease Control and Prevention and the Central Disaster and Safety Countermeasures Headquarters to swiftly create a pandemic response team within the Ministry of Education when the outbreak first began. In response to the wider spread of the disease, the team was expanded and upgraded to a COVID-19 response headquarters led by the Deputy Prime Minister and Minister of Education on February 21.

In consultation with the government, city and provincial education offices, the health authorities, and epidemiology experts, the COVID-19 response headquarters adjourned the beginning date of the spring semester after closely monitoring the infection trends and worked to put in place adequate prevention and control systems at schools.

To protect the health and safety of students and to ensure continuity in their learning, the Korean government decided to phase in online classes in elementary, middle and high schools starting from April 9. To make sure online classes are run successfully as part of the official curriculum, the



Online class © YonhapNews



School reopening © YonhapNews

government expanded the public online education infrastructure and worked on improving the system. The government also provided free digital device rental services and support for internet access to students from low-income families in order to prevent any blind spots in online learning. Customized online classes were provided to younger elementary school students and students with disabilities as they may experience difficulties in online learning settings, and supervisors were assigned to help children in emergency care at schools with online classes.

Moreover, the government sought out best practices in online education by operating pilot schools and encouraged teachers to share information and online class content and strengthen their capacity through the Community of 10,000 Representative Teachers.*

* The Community of 10,000 Representative Teachers is a communication platform designed to help teachers receive real-time assistance for handling difficulties and share online class programs, policies, and best practices.

In parallel with the easing of social distancing measures to a relaxed "Distancing in Daily Life," the Korean government decided to reopen schools in phases, starting with 3rd graders in high school on May 20. The decision was made after seeking expert advice from the Centers for Disease Control and Prevention and epidemiologists and carefully considering the opinions of parents and teachers. As of June 8, all schools in Korea have reopened. The dates of school reopenings were staggered for each grade to minimize student contact, taking into account the specific circumstances of each region and school, and schools are currently running a combination of on-and off-line classes.

In order to systematically support international students, as opposed to imposing an entry ban, the Korean government introduced a comprehensive set of measures to manage international students and provide supervision and assistance before, during, and after arrival. The government also organized a pan-governmental team consisting of officials from the Ministry of Education,

the Ministry of Health and Welfare, the Ministry of Justice, the Ministry of Foreign Affairs, and the Ministry of the Interior and Safety and worked together with local governments and universities to provide systematic support to international students.

1. Introduction of Online Classes

1.1. Postponement of School Openings and Providing Online Classes

1.1.1. Decision to Postpone School Opening

After the infectious disease risk alert level was raised to "Level 4 (Highest)" on February 23, education authorities decided to postpone the starting date of the new semester from March 2 to April 9 as a preemptive measure to control the spread of the disease in consultation with the government, city and provincial education offices, and public health authorities and experts.

1.1.2. Decision to Offer Online Classes

The government decided to offer online classes to students as a means of ensuring continuity in learning and protecting the health and safety of all students. Consequently, as of April 9, 860,000 middle and high school students started taking online classes, and by April 20, all 5.34 million students of elementary, middle and high schools nationwide took online classes as part of the official curriculum.

- * Starting dates of online classes
 - April 9: 3rd graders of middle school and 3rd graders of high school
 - April 16: 4th to 6th graders of elementary school, 1st and 2nd graders of middle school, and 1st and 2nd graders of high school
 - April 20: 1st to 3rd graders of elementary school

1.2. Systematic Preparation for Online Classes

1.2.1. Expanding Infrastructure

The Korean government decided to use online classes as part of the official education curriculum and expanded necessary infrastructure and released guidelines to minimize confusion at schools.

Two sets of the Learning Management System (LMS) platforms (KERIS e-Learning Site for elementary school students and EBS Online Class for middle and high school students) were established, each allowing the concurrent access of 3 million students. For the stable operation of the public platforms, a related task force (TF) to manage online class operation was jointly organized by the public and private sectors and real-time on-site situation rooms were created at local government agencies to ensure stable online courses.

Considering that lower graders in elementary schools could have difficulties in accessing online classes, the Korea Educational Broadcasting System (EBS) increased the number of its TV channels from seven to 12.

- KERIS e-Learning Site: a seven-fold increase in maximum user capacity (470,000 → three million) in two weeks (March 23 → April 8)
- EBS Online Class: a 300-fold increase in maximum user capacity (10,000 → three million) in one month (March 2 → April 8)

1.2.2. Connecting and Expanding Online Content

Approximately 50,000 content materials (43,000 for EBS Online Class and 5,500 for the e-Learning Site) were secured to ensure diversity in online classes. Through public-private cooperation, content from the private sector was

made available on public platforms free of charge. Also, the public platforms were linked so that popular content could be shared across different platforms and students, teachers, and parents could have easy access to education materials.

1.2.3. Encouraging Teachers to Create Content

In consultation with the Ministry of Culture, Sports and Tourism, the Korean government temporarily relaxed copyright rules* to allow teachers to produce online class content using existing content materials.

* Photos, videos, and passages in textbooks, in whole or in part, can be used to make online content. Music and video content available on the market can also be used as long as there is no inappropriate infringement on the benefits of copyright holders.

Furthermore, a website called "School-On" was established to provide a platform for teachers to exchange and share self-created online class content and class information.

- Sources used to create online class content
 - Self-created: 58.4%
 - Private sector materials such as YouTube videos: 43.3%
 - EBS materials: 42.1%

(Source: April 2020 survey on 225,000 teachers conducted by the Ministry of Education)

1.2.4. Improving Related Systems

Education authorities announced guidelines for online classes in elementary, middle, and high schools on March 27 and provided additional guidelines on managing attendance, evaluation, and school records on April 7 to ensure that the same administration, attendance, and achievement assessment rules apply to online classes.

* These guidelines contain details about different types of online classes and processes for tracking attendance, evaluating student performance, and drawing up school transcripts.

1.2.5. Enhancing Teachers' Competency

Before the initiation of online classes, education authorities shared best practices with 495 online class pilot schools; created a volunteer group consisting of 181 teachers named "Teacher-On"; provided support through the Community of 10,000 Representative Teachers and other teacher learning communities in order to help teachers improve their ICT competency.

1.3. Measures to Narrow the Gap in Online Access

1.3.1. Subsidies for Devices and Internet Subscription Fees

To ensure no student is left behind in taking online classes as part of the official school curriculum, the Ministry of Education provided free smart device rental services and subsidies for Internet subscription fees in cooperation with the Ministry of Science and ICT; Statistics Korea; local governments; 17 city and provincial education offices; and private sector companies such as Samsung and LG.

* The Ministry of Education worked together with the Ministry of Science and ICT and the three major Internet providers (KT, LGU+, and SKT) to provide students with unlimited Internet access until the end of August.

Schools lent smart devices to all those who applied. The applicants were mostly students from low-income families that are on education subsidies or from families with multiple children, families of which the primary caregivers are grandparents, single-parent families, and multicultural families (approximately 280,000 or 5.3% of all students as of April 16).

1.3.2. Providing Customized Support for Disadvantaged Students

For students that may have difficulty in taking regular online classes, education authorities provided customized online classes suited to the different situation of schools and students.

Since lower graders in elementary school are still early in their development stage, classes were provided not via online but via EBS TV programs and learning packets. For students from multicultural families, interpretation and translation support and guidebooks in foreign languages were provided.

For students with disabilities, a special online education platform was put in place to provide customized online classes in addition to home-visit classes, learning packets, and educational materials and tools.

Disability Type	Type of Support	
Visual disability	EBS online class materials in braille	
Hearing disability	Subtitles for EBS online classes and subsidies for educational content offering sign language or subtitles	
Physical disability	Online classes using assistive tools	
Developmental disability	Customized online classes, one-on-one home-visit classes, learning packets, and special materials provided by each school or class	

1.3.3. Emergency Childcare Service

The government provided support to ensure that the children of working parents and children that need to be put in emergency childcare receive both childcare services and online classes.

For the elementary school students in emergency childcare, extra-curricular instructors were designated as helpers to assist them receive online classes at school computer labs. For families that cannot send their children to school for childcare, the authorities provided home-visits or online classes at local childcare centers by utilizing 7,000 child caregivers from the Ministry of Gender Equality and Family, 497 academic instructors from the Ministry of Gender Equality and Family, and 181 ICT instructors from the Ministry of Science and ICT.

1.4. Status and Types of Online Classes

1.4.1. Participation Status

Out of the 5.34 million elementary, middle, and high school students in Korea, 98.9% attended online classes as of April 20. Teachers can choose the platform that best suits the class environment and conduct interactive or one-way classes.

* Platforms used for online classes include public platforms such as EBS Online Class (35.1%), KERIS e-Learning Site, and Wedorang (31.8%); Korean private platforms such as Naver Band, Kakao Talk, and Schoolbell-e (18.2%); and global private platforms such as Google Classroom and MS Teams (14.9%).



1.4.2. Common Types of Online Classes

Content-oriented classes (40.9%) and the combination of more than two class types (43.3%) are the most common forms of online classes in Korea. Of the combined types, 82.1% are a combination of task- and content-oriented classes.

1. Real-time interactive class	teachers use real-time online class platform to conduct classes → immediate feedback via discussion and interactive communication
2. Content-oriented class	students watch video \rightarrow have discussions using the comment function and receive feedback from teachers
3. Task-oriented class	teachers give tasks for student-led learning \rightarrow provide feedback on the task outcomes
4. Other types	classes accepted as official courses by the superintendent of education or school principal

1.5. Progress and Future Tasks of Online Classes

Online classes played a significant role in ensuring students' right to learn while protecting their health and safety by providing all students with a stable learning environment. However, there is room for improvement in terms of access gap and quality of classes.

The Ministry of Education will work on areas that need improvement in the current online education system and develop a new learning and disease prevention and control system for schools in preparation for future infectious disease outbreaks.

2. Return to School

2.1. Decision to Reopen Schools

2.1.1. Deciding on the Method and Timeline of School Reopening

The safety and health of students was a top priority and the opinions of KCDC officials and health experts were reflected as much as possible when the government was deciding when and how to reopen schools. Before making the final decision, the government sought the opinions of teachers, teachers' groups, education offices, and parents and carefully reviewed multiple return-to-school options.

2.1.2. Staggered Timeline for Physical Attendance

In particular, 3rd graders in high school were allowed to return to school first as attending school is critical as they prepare for higher education. The return-to-school for preschoolers and 1st and 2nd graders of elementary school was decided after considering the fact that they have difficulty taking online classes and the gap among children in access to online education depending on parents' support as well as the burden of childcare on families.

Outline of	f 2020 Sc	:hool Reo	pening
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Phase	Timeline (Plan)	Target		
		High	Middle	Elementary
Priority	May 20 (Wed.)	3 rd	-	-
Phase 1	May 27 (Wed.)	2 nd	3 rd	1 st & 2 nd + preschoolers
Phase 2	June 3 (Wed.)	1 st	2 nd	3 rd & 4 th
Phase 3	June 8 (Mon.)	-	1 st	5 th & 6 th

^{*} The same applies to special schools.

2.2. Preparation for School Reopening

2.2.1. School Reopening Methods

As the virus infection trend and the population size of school-aged children vary for each region and/or school, the Ministry of Education decided to allow autonomy to local governments and schools when deciding the specifics of managing staggered school start times by grade/class, operating online and offline classes in parallel, splitting each class into morning and afternoon groups, and implementing flexible school hours.

2.2.2. Disinfection before School Reopening

In preparation for school reopening, the Ministry of Education issued IPC guidelines for schools and students to follow before coming to school, after school, and during school meals. The ministry also provided guidelines on how to deal with suspicious or confirmed cases to minimize confusion at schools in emergency situations.

In accordance with the guidelines, schools carried out measures to thoroughly prepare for reopening by securing disease prevention supplies such as face masks and hand sanitizers and sanitizing surfaces that are frequently touched such as door knobs. In the week before school reopening, students were requested to monitor their health conditions every day using a health check system and those who showed symptoms or were in danger of transmission were requested not to come to school.

Monitoring was conducted every week to make sure all schools had completed the preparations for reopening, which include conducting special disinfections, rearranging the layout of classes, and securing a sufficient supply of face masks.



Carrying out disinfection measures



Checking disinfection measures in school

2.3. School Disinfection

2.3.1. Disinfection after School Reopening

After school reopening, schools were advised to ventilate classrooms, have staggered break times, and disinfect surfaces and objects that are touched frequently. Also, all students and teachers were required to wear face masks at all times and check their body temperature.

If an individual has a body temperature of over 37.5°C, shows respiratory symptoms such as shortness of breath, and/or displays other suspected symptoms, he/she needs to be sent to a health clinic or a screening station to get tested for COVID-19.

2.3.2. Occurrence of Confirmed Case

If a confirmed case occurs, the school needs to request all students, teachers, and staff members to go into self-quarantine, replace all classes with online classes, and carry out measures to identify suspected cases in cooperation with health authorities.

In order to provide school meals safely, schools need to carry out necessary measures* to minimize contact between students as much as possible, and all school cooking and cafeteria staff need to check their health condition two times a day.

* Examples of such measures are staggered school meal hours by grade and class, keeping distance between students, and installing physical barriers such as sneeze guards.

If schools operate school buses, the health condition of bus drivers and assistants needs to be checked in advance, and students need to have their temperatures checked before boarding. Students are requested to wear face masks at all times when using school buses or public transportations.

2.3.3. Temperature Check

Upon arrival at school, students are tested for fever at the school playground or at the building entrance, and those with suspicious symptoms are sent to a special observation room before being sent to a screening station to receive treatment or, if necessary, a diagnostic test.

2.4. Support for School Reopening

2.4.1. On-site Support

The Ministry of Education published guidelines to ease the additional work-load on school staff caused by increased disinfection and administrative work and to minimize confusion surrounding school reopening. To ensure smooth operation of in-person school classes, the ministry created the Central Response Team for School Reopening for a swift, around-the-clock response to emergency situations at schools. Since most schools were scheduled to reopen in June, it was designated as the "Month of School Reopening," and school staff was advised to refrain from participating in training programs or events that are not directly related to classes.

The ministry also minimized or postponed its projects to avoid creating extra burden on school teachers and staff and secured 30,000 people as support staff for disinfection activities and for operating split classes. To prepare schools for any unexpected situations, such as the possibility of operating a mix of both online and offline classes, the ministry released guidelines on May 7 on how to track student attendance and assess student achievement.

2.4.2. Emergency Response

As preemptive action to prevent unexpected developments and mass infections in local communities after 3rd graders in high school return to school on May 20, education authorities announced measures for minimizing density at schools on May 24 and enhanced measures for the Seoul metro-politan area on May 29. With these measures, only two-thirds of students were allowed to attend school for high schools and one-third for kindergartens and elementary and middle schools.

As there was a risk of mass transmission in the Seoul metropolitan area, as of August 26, education for all students, except for the third-year high school students and those who needed assistance with basic academic skills, was shifted to online. Following the decision of disease control authorities to ease the social distancing measure from "enhanced" level 2 to level 2 in the Seoul metropolitan area, on September 21, physical school attendance resumed.

In addition, city and provincial education offices and disease control authorities worked together closely to take additional preemptive measures such as adjusting school reopening schedules for schools with confirmed or suspicious cases. The authorities will respond swiftly and adjust the school reopening schedule accordingly if there is a heightened risk of COVID-19 transmission in local communities.

3. Protection for International Students in Korea

Recognizing that international students should be protected by the government in a pandemic situation just as domestic students, the Korean government took measures to protect the health and safety of international students in Korea. Despite concerns over further spread of COVID-19, the government



Deputy Prime Minister and Minister of Education's visit to universities



Korean universities providing face masks to international students

did not impose an entry ban and allowed international students to enter Korea, and measures were developed for every step of the entry process to systematically protect their health and ensure a safe learning environment.

When the new coronavirus first broke out, the Korean government's international student protection measures were mainly focused on those who had come from China. However, after it turned into a global pandemic and all those entering Korea were put through the Special Entry Procedure at the airport, all international students were subject to the government's protection measures. In particular, the Ministry of Education took steps to protect international students after the Special Entry Procedure at airports and the 14-day quarantine by making sure universities check the health condition of international students every day and disinfect their dorms. Korean universities also provided face masks to their international students and encouraged domestic and international student unions to work together to increase understanding and voluntarily participate in disease prevention and control practices.

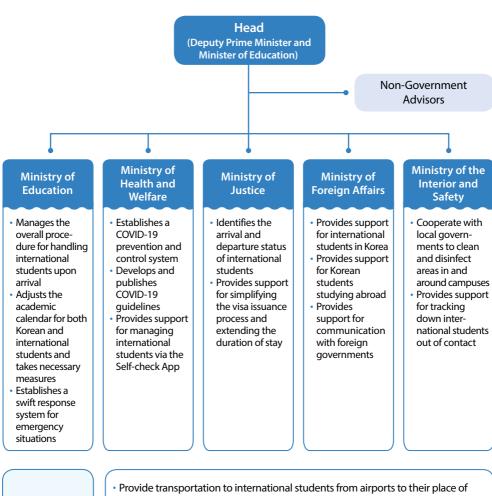
3.1. Cooperation between Domestic Institutions and with Foreign Institutions

3.1.1. Cooperation within Government & Cooperative Efforts by Local Governments

The Korean government created a whole-of-government team led by the Ministry of Education and consisting of officials from the Ministry of Health and Welfare, the Ministry of Justice, the Ministry of Foreign Affairs, and the Ministry of the Interior and Safety to swiftly provide support for international students. Local governments also joined hands with universities to provide transportation for international students when they go to their place of residence from airports; offer temporary accommodations to those who do not

have a fixed place of residence; conduct cleaning and disinfection in areas around campuses; and assign personnel to closely monitor international students.

International Student Support Team



Local Governments

- residence and offer temporary residence for those who do not have one
- Monitor the international students who do not live in dorms and disinfect areas in and around campuses
- Set up screening stations on campus and supply preventative equipment

3.1.2. Cooperation with Foreign Governments

The Korean government also made active efforts to cooperate and exchange information with foreign governments. In particular, the Ministry of Education established a cooperation system with the Chinese Ministry of Education to work closely in addressing international student affairs, and an agreement was reached on February 28 on advising students to refrain from going to each other's country. Around 5,000 Chinese students had been entering Korea every week in February, but after the agreement went into effect in March, the number was reduced to fewer than 2,000 a week, which allowed room for the Korean government to provide stronger support for the well-being of international students.



3.2. Systematic Protection and Management at Each Stage

The Korean government provided universities with step-by-step guidelines covering the entire student arrival procedure, including the 14-day quarantine, to help universities provide systematic protection for their international students. In accordance with the guidelines, universities established a comprehensive response system together with local governments and local health care centers to manage international students, take appropriate measures when suspected cases occur, and prevent the spread of the disease. The Ministry of Education also set aside KRW 4.2 billion (USD 3.6 million) as an emergency fund for providing support to international students and allowed universities to use government subsidies for responding to COVID-19, if necessary.



International Student Protection & Management System

Before arrival	Advise students to adjust their entry timing	Ensure flexibility in school operation by encouraging online education Provide support for students taking the semester off due to delays in visa issuance ** Prior check on entry date, contact, place of residence
At the airport	Implement enhanced screening	Strengthen quarantine enforcement via the Special Entry Procedure Manage international students upon arrival by operating special information desks Have universities and local governments provide transportation for international students
	Focus on monitoring	Conduct thorough monitoring on the students staying at school dorms or off-campus
After arrival (for two weeks)	Conduct thorough monitoring	 Have monitoring staff contact international students at least once a day via phone or visit Conduct cross examination using the Self-Check App Work together with local governments to identify the whereabouts of those out of contact Monitor students at all times via the international student management system Conduct on-site inspections at major universities
	Cooperate with local governments	 Continue to secure temporary residential facilities if needed by universities Provide support for disinfection in and around campuses and in areas much frequented by foreigners Strengthen communication with local residents

3.2.1. Before Arrival

In order to prevent international students from entering Korea in a concentrated period of time, the Korean government paid close attention to their entry schedules even before their arrival. The government checked the entry information of international students who were planning to enter Korea, such



Information desk at the airport for students from China

as their entry date and place of residence, and provided them with guidelines on school schedules and the 14-day quarantine. Universities were advised to relax their rules on leave of absence so that students without a fixed date of admission, place of residence in Korea, or a visa can take online courses without having to leave their country or take the semester off if they want to. Thanks to such measures, Korea was able to protect the health of international students and prevent the spread of the disease by dispersing the international student population to a level that is manageable by its health authorities and universities.

3.2.2. At the Airport

After going through quarantine inspection and the Special Entry Procedure at the airport, international students were advised to go to the information desk exclusively set up for them so they could receive assistance from their schools immediately upon arrival. In addition, universities and local governments worked together to provide international students with transportation from airports to their place of residence, and on the way, they were informed about disinfection measures for protecting their health and safety and about the readjusted academic calendar.

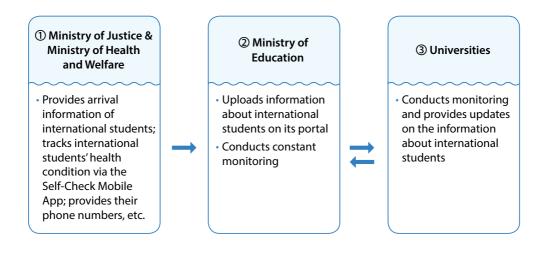
3.2.3. After Arrival

The Korean government sought to prevent international students from being exposed to the virus and curb local transmission by limiting contact between and among domestic and international students after international students' arrival in Korea. International students were not allowed to attend lectures for 14 days after their arrival, and each student was assigned to a room on their own in a dorm or in their own place of residence. Universities were also responsible for monitoring the health condition of international students to see if they display any symptoms of COVID-19. The government required international students to check their physical condition at least two times a day, and universities designated staff to monitor the health status of international students, trace their whereabouts, and visit their place of residence in cooperation with local governments.

When a suspected case was found, universities isolated the person immediately and reported the case to the local health authorities. The place where the person had been isolated was thoroughly cleaned and disinfected under the direction of the health authorities. Those who did not show any COVID-19 symptoms after completing the 14-day quarantine were allowed to attend classes and return to their daily life.

The Korean government established a pan-government information-sharing system to enable universities to monitor the entry and departure information of international students at all times and to help them provide assistance to their international students from the moment they arrive at airports.

Information-Sharing System on International Students



3.3. Around-the-Clock Management for COVID-19 Prevention

From the beginning of the COVID-19 outbreak, the Korean government took active steps to educate students and school staff about COVID-19 and disease prevention and to provide them with information about quarantine measures such as the Special Entry Procedure and university rules on suspension of student attendance. Moreover, public places such as dorms, libraries, and cafeterias as well as frequently used facilities and equipment were thoroughly cleaned and disinfected. During the process of establishing guidelines for the protection and management of international students, the government closely communicated with domestic and international students, university staff, parents, and local residents to encourage their voluntary participation in developing public health strategies.

In addition, the Ministry of Education created a support team to monitor the international student protection and management status of universities and to quickly identify and address problems. Thanks to such measures, Korea

was able to protect the health and right to education of both domestic and international students and prevent the transmission of the virus in universities and local communities.

For more information				
Part	Organization	Division	Email	Contact
General information	Ministry of Education	International Education Cooperation Division	hyewon78@ korea.kr	+82-44-203-6817
Introduction of Online Classes	Ministry of Education with the cooperation of Ministry of Science and ICT	(COVID-19) Distance Education Infrastructure Support Division/ Network Policy Division	swhan90@ korea.kr/ nyeop@korea.kr	+82-44-203-6371/ +82-44-202-6426
Returning to School	Ministry of Education	Teaching and Learning Evaluation Division	cwh0718@ korea.kr	+82-44-203-6471
Protection for International Students in Korea	Ministry of Education	Educational Internationalization Division	zzzkkk25@ korea.kr	+82-44-203-6795

06 Economy







The COVID-19 outbreak had a significant impact not only on public health and society as a whole but also on the economy of Korea and other countries around the world. The IMF predicted that the global economy would contract by 5% and that the global trade volume would fall by 11%. The World Bank lowered its global growth forecast by 7.7 percentage points, from 2.5% in January to –5.2% in June this year. These predictions showed that the outbreak brought about the worst economic recession since World War II and would have an unprecedented impact on the global economy.

Because of its high dependency on international trade, Korea is highly susceptible to external factors as well as to the shocks caused by the COVID-19 outbreak. Many predict that Korea's economic growth would shrink by 1% in 2020. To minimize the negative impact of COVID-19, strengthen economic resilience, and prepare for the post-COVID-19 era, the Korean government developed and implemented various economic measures since February.

Emergency economic council meetings chaired by the President were held since March 2020. The meetings were attended by officials from the Ministry of Economy and Finance, the Ministry of Trade, Industry and Energy, the Ministry of Employment and Labor, the Ministry of SMEs and Startups, the Office for Government Policy Coordination, and the Financial Services

Commission to fully leverage the power of the Korean government for responding swiftly to risks and boosting the economy. Under the overarching goal of setting up a comprehensive plan for responding to the economic downturn, the participants discussed ways to stabilize the financial and foreign exchange market, improve people's livelihoods, manage external risks, support low-income families and vulnerable groups, stimulate domestic consumption, create jobs, and boost local economies.



Fifth Emergency Economic Council Meeting, April 22

The Korean government developed economic policies, held meetings for whole-of-government coordination, and sought the opinion of the public sector to carry out various economic policies to alleviate the COVID-19 shock, facilitate economic recovery, and emerge as a leading economy in the post COVID-19 era. These economic policies are referred to as 3P Economic Policies

(protecting, preserving and preparing).³² As a part of such efforts, the Korean government drew up supplementary budgets of KRW 66.8 trillion (USD 57.4 billion) in total, in four intervals from March to September.

Protecting (employment opportunities and vulnerable groups)	employment stabilization, support for vulnerable groups, protecting local economies	
Preserving (economic resilience)	stimulating domestic consumption, revitalizing exports, support for the supply chain, customized measures for each industry, monetary policies, support for the special entry of businesspeople	
Preparing (for the post COVID-19 era)	the Korean New Deal, innovating industrial and economic structures, building the foundation for an inclusive society	

1. Protecting: Policies to Protect Employment Opportunities and Vulnerable Groups

1.1. Policies to Stabilize Employment

The COVID-19 outbreak caused disruptions in economic activities as well as in the employment market. According to Korea's employment statistics announced in April, approximately 476,000 jobs had disappeared since last year. This was the biggest drop since February 1999, when 658,000 jobs were lost due to the 1997 Asian financial crisis. To stabilize employment, the Korean government announced Emergency Measures for Employment Stabilization on April 22 and Measures for the Public Sector Employment Shock on May 14.

³² For more details, go to www.mofa.go.kr/eng, click the popup titled "KOREA'S RESPONSE TO COVID-19," and look for "Safeguarding Economic Resilience" post on the "Other policy measures" board.



Fourth Meeting of Central Economic Response Headquarters, May 20

Measures for stabilizing employment during the COVID-19 outbreak could be categorized into two groups: measures for employment retention and measures to increase support for those with decreased income due to temporary layoffs or low demand.

To strengthen job security, the government increased employment retention subsidies to help businesses with their labor costs and keep their employees. Also, the government greatly expanded the subsidies for businesses that reduced the working hours of their employees. To financially support low-income workers and job seekers, the government provided KRW 500,000 (USD 430) a month (up to three times) to the low-income job seekers participating in the employment success package program and actively seeking employment. The low-interest loan program for low-income workers was also expanded to provide livelihood support to more people.

1.2. Policies to Support People in the Low-Income Bracket

The prolonged COVID-19 outbreak caused great economic damage, especially to those in the low-income bracket and small business owners, and the Korean government implemented policies to support low-income people along with the abovementioned measures for employment retention.

Meanwhile, the Korean government provides four social insurance programs — national pension, national health insurance, employment insurance, and industrial accident compensation insurance — as a social safety net against major life risks such as elderly poverty, disease, unemployment, and occupational injury. To make sure that low-income families benefit from these social insurance programs, the Korean government lowered the insurance premiums. In the wake of the outbreak, the Korean government put in place additional programs to ease the burden of insurance costs for business owners facing closure or bankruptcy and for people with low-income struggling to maintain their livelihoods.

This was the first time that the Korean government carried out such large-scale programs to lower the burden of social insurance premiums and utility bills, and no precedent can be found even during the 1997 Asian financial crisis and the 2008 global financial crisis.

1.3. Measures to Stabilize the Financial Market and Support SMEs and Micro-Business Owners

Due to the prolonged COVID-19 pandemic, there were concerns that the liquidity crisis of SMEs could be transmitted through the financial market and send shock waves to vulnerable sectors. In response to such concerns, the Korean government rolled out a relief package to stabilize people's livelihoods and the financial market by providing SMEs and micro-business

owners with sufficient financial support and by proactively responding to market volatility. The package included nationwide programs prepared and implemented by the Korean government, the Bank of Korea, financial policy institutions, and banks, and a total of KRW 135 trillion (USD 116 billion) was injected into carrying out the wide range of programs in the package.

Firstly, for the financial market, the bond market stabilization fund was reactivated as a way to provide liquidity to companies suffering from temporary financial difficulties. This 10 trillion-won fund was first launched in December 2008 to ensure a stable supply of capital and support the intermediary function of the stock and bond markets. Also, utilizing on the joint funds between banks, securities companies, and insurance companies, large investments were made on high-quality corporate bonds to quickly provide liquidity. Primary collateralized bond obligations were also issued to stabilize the corporate bond market and help companies with financing, and a securities market stabilization fund was set up using joint investments of financial institutions to serve as a safety valve for the stock market.

Meanwhile, SMEs, micro-business owners, and the self-employed facing financial difficulties due to the pandemic were provided with ultra-low interest loans and other forms of financial support to help address their urgent capital needs. Other measures, such as the extension of maturities, loan payment deferrals, and credit recovery support, were also taken to ease the financial burden of vulnerable groups.

1.4. Measures to Protect Local Economies

In a bid to contain the spread of the coronavirus across the country, the Korean government actively carried out social distancing policies, which could cause local economies to contract. To reduce the damage on local economies, the Korean government took a wide range of economic measures.

First, the Korean government front-loaded KRW 137 trillion (USD 118 billion), which accounts for 60% of municipal budgets, in the first half of the year to minimize the risk of shrinking local economies. In addition, local governments issued more regional gift certificates this year as these certificates can only be used within a region and will directly help the recovery of local economies, and the additional costs were supported by the central government.

Along with these efforts, COVID-19 damage report centers were launched in 17 provinces and cities to help local SMEs and micro-business owners address difficulties. Emergency liquidity programs, including local governments' management stability funds and special guarantees, were put in place in an effort to minimize damage on local companies.

2. Preserving: Policies to Safeguard Economic Resilience

COVID-19 had an adverse impact on the domestic market. In March, Korea saw a 95% fall in its inbound travelers compared with the previous year. Output in the services sector also recorded the biggest drop since January 2000, with a significant decline especially in industries like lodging, restaurants, arts, and sports. Moreover, Korea's Consumer Sentiment Index continued to decline, marking the steepest drop since the 2008 financial crisis. In order to preserve economic resilience in such a crisis situation, the Korean government developed and carried out a wide range of policies that include measures to stimulate domestic demand and exports and support start-ups and ventures.

2.1. Stimulating Domestic Consumption: Emergency Disaster Relief Funds

The Korean government has provided emergency disaster relief funds to stabilize the livelihoods of people who are suffering from COVID-19 and

boost consumption. The funds were paid out to a total of 21.71 million households nationwide regardless of income: KRW 400,000 (USD 344) for single-person households, KRW 600,000 (USD 516) for two-person households, KRW 800,000 (USD 688) for three-person households, and KRW one million (USD 859) for households with four or more members. The head of each household was eligible to apply for the funds. To prevent excessive applications for the funds in the early days of the system, the government implemented a 5-day rotation system, through which applicants can only register on designated days based on the last digit of their birth year.

As a result of close cooperation among Korea's central and local governments and private companies for the rapid payment of the relief funds, most households (98.2 percent as of May 31) were paid within a month from April 30 when the budget was finalized at the National Assembly. According to an analysis of the use of credit and debit card points, which account for the largest portion of the payment methods, approximately 91 percent of card points were spent in the regions as of the end of June. The total sales of the eight credit card issuers surged by 21.2 percent in the fourth week of May compared to the first week of the same month. And, the sales of traditional markets went up by 20 percent over the same period. The Korean government also conducted a campaign on active spending to encourage people to spend all of their emergency relief funds by the end of August this year.

2.2. Revitalizing Exports

Amid rising concerns over the rapid decrease in global demand and supply chain shocks caused by the COVID-19 pandemic, Korea, as a global trade

Press release of the Ministry of the Interior and Safety (June 11) – The emergency disaster relief funds have been spent mostly on dining and grocery shopping.

powerhouse, rolled out a series of plans for revitalizing international trade while upholding international trade rules.

In a bid to assist the government's plan to support the companies affected by the COVID-19 crisis, the Export-Import Bank of Korea and the Korea Trade Insurance Corporation launched financial assistance programs worth more than KRW 20 trillion (USD 17.2 billion) and KRW 36 trillion (USD 31 billion), respectively, to help affected companies overcome their difficulties. They also extended the maturities of debts up to one year, maintained existing loans with no adjustments, and offered loans at prime interest rates.

The Korean government also worked hard to boost non-contact based exports. Working together with the Korea Trade Investment Promotion Agency (KOTRA) and other relevant organizations, the Korean government took steps to enable the entire export process online — from consulting to contracts, customs, and logistics — and to expand the infrastructure for online communication services. To this end, the Online Korea Exhibition, a web-based trade exhibition that can be attended from any part of the world, will be held 60 times.



A businessperson communicating online with foreign buyers through virtual devices at KOTRA

2.3. Supporting the Supply Chain

The Korean government also strived to resolve the difficulties caused by COVID-19 in the customs clearance process and minimize the impact on the supply chain. Customs Clearance Support Centers for COVID-19 are currently in operation at major customs offices across the country, providing a wide range of help to companies that are experiencing difficulties in securing or exporting raw or subsidiary materials due to the shutdown of overseas factories. Throughout the process, the government pays close attention to the concerns of affected companies and makes active efforts to address them. For example, to companies that need to import key car parts by air as an emergency measure, the Korean government is applying shipping charges instead of air freight charges to lessen their tariff burden.

2.4. Supporting Affected Industries

The spread of COVID-19 around the globe disrupted the global supply chain, wreaking havoc on a range of Korean industries. In order to address the situation, the Korean government provided customized support depending on how severely these industries were hit by making early purchases for the public sector, allowing associated tax cuts or tax payment deferrals, injecting emergency liquidity, and launching a campaign to promote sales. The government also carried out customized support strategies for the key industries — such as automobiles, airlines, shipping, oil refining, and shipbuilding — as they accounted for about 20% of Korea's GDP and about 30% of total exports as of 2018.

For the automobile industry, a series of measures was adopted to help fully mitigate the difficulties faced by automobile companies. These measures included making early purchases of vehicles for use in the public sector (about 8,700 units in 2020), paying up to 70% of downpayments in the contract phase

to support domestic demand, and extending the due date for import duties on car parts and VAT up to 12 months. For the airline industry, the exemption and postponement of airport facility usage fees for airliners and ground handling companies from March to May were extended by another eight months until December. The government also prepared other supportive measures, such as providing emergency liquidity worth KRW 300 billion (USD 258 million) for low-cost carriers. Emergency liquidity will also be injected into the shipping industry, spearheaded by the Korea Ocean Business Corporation. Depending on the extent of the damage inflicted by the COVID-19 pandemic, additional measures, if needed, will be considered to help different industries and areas in need.

2.5. Supporting Essential Business Travel

The global spread of COVID-19 prompted some countries around the world to impose entry ban measures — such as entry prohibition, 14-day quarantine upon arrival, and/or suspension of visa issuance — on Korean nationals. As a result, Korean businesspeople had difficulties in going on business travels abroad, which took a serious toll on corporate activities. The situation was further aggravated by the suspension of international flights after WHO declared COVID-19 a pandemic.

In response, the Korean government created a task force consisting of officials from relevant ministries to conduct a survey on companies that needed to travel abroad and to establish a system for issuing a Health Condition Report to prove the person tested negative for the novel coronavirus. Through the diplomatic missions of Korea, the Ministry of Foreign Affairs negotiated with other countries on easing entry restrictions in a way that does not jeopardize systems and minimizes the inconvenience to businesspeople: for example, exempting them from quarantine upon arrival or reducing the quarantine period. As a result of these efforts, group business travels of large companies

were approved in a number of countries, including Vietnam, China, Czech Republic, Hungary, and Kuwait.

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In the meantime, SMEs faced greater difficulties than large companies as they were unable to charter flights or negotiate with the respective foreign government that they do business with when they had to go on business trips to collect due export payments or operate local factories.

To solve the situation, the Korean government held talks with Vietnam's authorities in April to ease entry restrictions on Korean nationals and prepared a package of measures that cover the entire entry process, from entering on chartered flights to local testing upon arrival (including tests for COVID-19) and local quarantine. Thanks to such efforts, 345 people from 144 Korean companies were allowed to enter Vietnam on April 20, 2020.

Furthermore, the Korean government agreed with its Chinese counterpart on establishing a "Fast Track Procedure" as of May 1 to allow a streamlined entry approval process and reduced quarantine period for Koreans and Chinese nationals on business trips. Later, the Korean government has further established the "Fast Track Procedure" with the UAE (August 5), Indonesia (August 17), Singapore (September 4), and Japan (October 8) respectively.

A total of 20,188 Korean nationals were thus assisted in entering 21 countries on business as of September 22, 2020. As highlighted by President Moon Jaein at the G20 Extraordinary Virtual Leaders' Summit on March 26, it is vital that countries maintain the flow of essential economic exchanges, including the necessary movement of businesspeople, to ensure the quick recovery of the global economy. This notion was reconfirmed in President Moon's speech at the High-Level Meeting marking the 75th anniversary of the UN and General Assembly in September. The Korean government will continue to promote essential economic exchanges by engaging in intensive negotiations on allowing business travels, utilizing the diplomatic network it has built with other countries.

3. Preparing: Post COVID-19 Era

The goal of the Korean government's future economic policies will be to overcome the crisis sparked by the COVID-19 pandemic while laying the foundation for Korea to become a leading economy. The government plans to put Korea on a secure footing for becoming a leader in the post COVID-19 era with a variety of measures, including the following:

- Quickly implementing the Korean New Deal,
- Pushing for bold innovation in the industrial and economic structures, and
- Expanding the foundation for building an inclusive country that protects the lives of its people.



Sixth Emergency Economic Council Meeting, June 1

3.1. Korean New Deal

The Korean New Deal is a package program launched by the Korean government to achieve its vision of transforming Korea into a first-mover economy from a fast-follower economy, into a low-carbon economy from a carbon-intensive economy, and into a more inclusive society. It is a two-fold program consisting of the Digital New Deal and the Green New Deal, and the government will be injecting KRW 160 trillion (USD 137.5 billion) into jump-starting economic growth based on a stronger safety net.

Firstly, a total of 12 projects aimed at strengthening Korea's competitive edge in digital performance will be rolled out under the Digital New Deal. Drawing on Korea's strength as an ICT powerhouse and its world-class e-government infrastructure and services, the Korean government will seek to create an ecosystem for data, networks, and AI technologies; promote non-contact industries; and digitalize SOC to speed up Korea's transition to a digital economy.

Secondly, the Green New Deal will be carried out in eight projects for converting Korea into a carbon-neutral economy, with its carbon emissions at a near net zero level, and for building a low-carbon and eco-friendly economic structure. Through the Green New Deal, the Korean government will focus its investments on promoting green infrastructure, new renewable energies, and green industries to strengthen Korea's response to climate change and achieve an eco-friendly economy. The final goal is to make Korea into an advanced green country that strikes a balance between its people, the environment, and economic growth while faithfully fulfilling its duties as a member of the international community.

Lastly, the Korean government will be implementing eight projects on reinforcing the social safety net in order to alleviate job insecurity; bridge the income gap; and help people adapt to the uncertainties caused by reconfigurations in the economic structure. In preparation for uncertainties arising from economic restructuring, these projects will help eliminate the blind spots in the employment and social safety nets and boost the resilience of all economic players by providing stronger employment and social safety nets as well as expanding investment in human capital and in training professionals for a digital and green economy.

Through the Korean New Deal, the Korean government will invest KRW 67.7 trillion (USD 58.2 billion) to create around 887,000 jobs by 2022. By 2025, the total amount of investment will reach KRW 160 trillion (USD 137.5 billion) and 1.9 million jobs will be created.

3.2. Innovating Industrial and Economic Structures

In preparation for the post-COVID-19 era, the Korean government will innovate the industrial and economic structures by improving relevant regulations and systems and actively utilizing digital technologies such as big data. In order to strengthen Korea's competitiveness and increase the use of smart and eco-friendly technologies in the core industries, the Korean government is planning to conduct R&D projects aimed at building smart factories, smart industrial complexes, smart ports, and smart cities — all of which is enabled by ICT technologies, big data, and AI — and has been carrying out relevant measures in phases.

In addition, the Korean government will utilize the newly-built R&D big data platform that connects regional smart farm data centers to existing government agency database to systematically collect research data on the agri-food industry and use it for smart farms. Moreover, for the home appliance sector, plans are underway to encourage the use of big data platforms for IoT home appliances to strengthen national competitiveness and, while doing so, solidify the social safety net. This means that society



Hydrogen car charging station in Mapo-gu, Seoul³⁴

should be geared toward inclusiveness and seek to leave no one behind.

In Sum, the Korean government plans to lay the foundation for global and local industrial convergence. The Korean government also announced the 2050 Long-Term Low Greenhouse Gas Emissions Development Strategies³⁵ to proactively address climate change issues and successfully make the transition to a low-carbon society.

³⁴ Safeguarding Economic Resilience (June 11), Ministry of Economy and Finance

³⁵ Long-Term Low Greenhouse Gas Emissions Development Strategies

3.3. Building the Foundation for an Inclusive Country

The Korean government's economic policies described above, including the Korean New Deal, demonstrate its commitment to implementing growth-oriented economic policies while promoting social policies for reinforcing the employment and social safety net. This is also the goal and direction of the Korean government's national development strategies for building an "innovative and inclusive country." The COVID-19 crisis has made clear that this indeed has to be our direction. We will pave the way for building an inclusive country by adopting a national employment support system, launching a Community Youth Safety-Net team, and reducing the burden of childcare so that those who are in the blind spots of the employment safety net can also receive support.

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7 Assistance for Korean Nationals Overseas







The Korean government's efforts to protect its people from COVID-19 have not been confined to inside Korea. Around 30 million Koreans go overseas every year and there are Koreans in every part of the world. The Korean government has exerted steadfast efforts to repatriate Koreans stranded overseas and protect Koreans abroad from the danger of contracting the coronavirus.

1. Support for the Repatriation of Korean Nationals Overseas

With the ongoing spread of COVID-19, an increasing number of countries around the world decided to stop operating flights and impose travel restrictions, resulting in a spike in the number of Koreans stranded around the world and wanting to return home.

(Task force to support the repatriation of Korean nationals overseas) Under such circumstances, the Korean government mobilized various methods to help people come back home. Under the direction of President Moon Jaein and Prime Minister Chung Se-kyun to actively support all Korean nationals who wish to return home, a task force led by the Second Vice Minister of

Foreign Affairs was set up on March 19 to bring Korean nationals back from overseas. The task force identified Korean nationals wanting to return home and sought ways to bring them back to Korea in a safe and swift manner.

Thanks to such efforts, a total of 48,948 Koreans from 119 countries were assisted in various manners to come back to Korea as of September 22. Furthermore, the Korean government provided temporary residential facilities where the returnees can stay in quarantine upon their arrival.

1.1. Chartering Flights and Other Measures to Support Repatriation

1.1.1. Chartering Flights

(Wuhan) As of January 23, when the Chinese city of Wuhan was under lock-down to contain the spread of the novel coronavirus, more than a thousand Koreans were unable to leave the city. Until that point, there had not been a single case of chartering flights to evacuate Koreans from the threat of an infectious diseases. Also, since the number of confirmed cases in Korea was posting single digits around that time, many voiced concern that the novel virus could spread from people coming into the country.

Nevertheless, the Korean government decided to send chartered planes to repatriate its nationals in Wuhan. After negotiating with the Chinese government, the government sent chartered planes to Wuhan three times — on January 30, January 31, and February 11 — and brought 848 Koreans back home. Although some were identified as confirmed cases while going through immigration or while in quarantine at related facilities, the Korean government assigned the National Medical Center, the Central Infectious Disease Hospital to designate care units and thoroughly carried out necessary measures, thereby dispelling the public's initial concerns about the transmission of the virus within the country.

(Yokohama) As there was an outbreak of COVID-19 aboard the Diamond Princess cruise ship docked at Yokohama Port, the Korean government decided to dispatch the presidential plane with five members from the Rapid Deployment Team on February 19 and helped 14 Korean passengers and sailors on the ship disembark and return home. Although it was a small number of people, the Korean government took action to bring back the seven people wishing to return home as the virus was spreading on the ship.

(Iran) With the ongoing spread of COVID-19, Iran was suffering from the challenges of poor healthcare services and severe shortages in hygiene products, including face masks and hand sanitizers, in part because flights to and from neighboring countries had virtually stopped and the country had been placed under lockdown for an extended period. At the time, however, Korea was also struggling with the spread of the virus. Some with severe symptoms died, and the number of confirmed cases was surging, mainly in Daegu and North Gyeongsang Province.

On March 18, the Korean government decided to send chartered flights to evacuate 80 nationals from Iran. First, 80 nationals who wanted to return home were transported from Teheran to Dubai on a local flight and then flown to Incheon on a chartered flight. Two officials from the Korean Embassy in Iran accompanied the returnees on the Teheran–Dubai flight, while nine members from the Korean government's Rapid Deployment Team were on board on the Dubai-Incheon flight to prevent in-flight infection. This showed the Korean government's dedication to bringing its nationals back home safely.

(Peru) Due to the continued spread of COVID-19, countries around the world started to take measures to restrict the entry of travelers, such as closing their borders and suspending international flights, which meant more and more Korean nationals were unable to leave these countries. Even in countries in Latin America, which had been considered as relatively safe, the spread of







(left) Koreans returning from Wuhan (center) Koreans returning from Yokohama (right) Koreans returning from Iran

COVID-19 was accelerating as the temperatures fell. The Peruvian government declared a state of emergency and sealed all its borders to try and stop the spread of COVID-19.

Since all international flights into Peru were suspended and movement within the country was also prohibited, Korean nationals traveling in Peru ended up stranded across many parts of the country. The Korean government consulted with the Peruvian government on bringing Korean nationals back home and decided to first transport Korean nationals from different parts of the country to one place in buses and then transfer them to Lima, the capital of Peru, on a local chartered flight. On March 26, 198 Korean nationals were able to fly back home from Lima to Incheon assisted by two officials from the Korean Embassy in Peru and KOICA.

(Italy) As the risk of infection was growing in Italy, many Koreans residing in Milan and Rome wished to return to Korea. Led by the Korean community, the Koreans in Italy had been making preparations to return to Korea, but domestic airliners were reluctant to sign a contract directly with the Korean community without the mediation of the Ministry of Foreign Affairs due to the risk of in-flight infection and complexities in quarantine measures upon arrival.

To solve the situation, the Korean government directly contacted a Korean airliner to support the repatriation of its nationals in Italy. A team consisting of seven members from the government's Rapid Deployment Team was dispatched to bring back 309 nationals on March 30 and 205 nationals on March 31 (113 from Rome and 92 from Milan).

(Iraq) In the middle of July, 40% percent of the Korean workers who had returned home from Iraq tested positive for COVID-19. By that time, two Korean workers died from coronavirus in Iraq.

In an attempt to help Koreans who remained in Iraq to work at construction sites safely return home and prevent them from causing secondary infections on their way home, the Korean government decided to deploy special aircrafts to Iraq.

The government dispatched two KC-330 air refueling tankers and a Rapid Deployment Team.

On July 25, a total of 293 Korean workers safely arrived at Incheon International Airport and were transported to temporary quarantine facilities for diagnostic testing and 14-day quarantine.

1.1.2. Other Measures to Repatriate Korean Nationals Overseas

After WHO declared COVID-19 a pandemic, many Korean nationals overseas hoped to return home. In a situation where an increasing number of countries were suspending flights and imposing entry bans as a way to curb the spread of the virus and it became challenging for governments to fully operate chartered flights. The Korean government continued to come up with a variety of measures to help Koreans return from places at risk of COVID-19 infection. Some of the measures are detailed as follows.

(Negotiating to operate and expand non-regular commercial flights or change the type of aircrafts) In order to ensure the safe repatriation of nationals from other countries, it was essential to reopen international flights. Therefore, the Korean government strived for resumption of temporary commercial flights that had been suspended. Specifically, the Korean government held negotiations with other governments and commercial airliners to discuss ways to operate and expand non-regular commercial flights or change the type of aircrafts.

As a result, 24,237 nationals from 32 countries were brought back to Korea as of September 22. During the process, the Korean government closely consulted with its counterparts about the operation of temporary flights and also about associated procedures, including overflight approval of such commercial flights, issuing movement permits to allow people to go to the airport, and speedy issuance of transit visas.

(Providing support to use chartered flights of other countries) As part of the efforts to repatriate Korean nationals from countries where it was almost impossible to obtain flight tickets and extremely difficult to charter flights due to the small number of people wishing to return home, the Korean government actively consulted with other governments to allow Koreans to use the chartered flights arranged by other governments. As a result, 871 nationals flew back home from 54 countries as of September 22.

(Utilizing flights used for international cooperation) The Korean government made an agreement with other governments to allow using airplanes that are sent to receive or import medical supplies from Korean companies — such as testing kits, face masks, and personal protective equipment — or to invite Korean medical professionals for bringing Koreans back home. This was indeed a continued effort made by the Korean government to repatriate its nationals using the opportunities created when collaborating with other countries on disease control and prevention. As a result, 1,881 Koreans

returned home from nine countries as of September 22.

(Utilizing flights used for the special entry of Korean businesspeople) In addition to supporting the repatriation of nationals overseas, it was also a key task of the Korean government to obtain special entry permits for Korean businesspeople who need to travel on business. To this end, the Korean government negotiated with other governments to allow special entry for Korean businesspeople, while seeking ways to bring Koreans back home on the return flights. Through such efforts, 3,613 nationals from seven countries came back to Korea as of September 22.

(Using the occasion of the dispatch of the Hanbit unit) Korea has been actively deploying its troops for United Nations peacekeeping operations in other nations. The Korean contingent, named the Hanbit unit, has been assigned to carry out UN peacekeeping operations in South Sudan. Plans were made to utilize the plane used to dispatch the 12th batch of the Hanbit unit to South Sudan for helping Korean nationals in Africa return home. On May 20, the Korean government was able to bring back 60 Koreans from African countries such as Ghana, Sudan, and Ethiopia using the return flight of the plane that took the 12th Hanbit unit to South Sudan.

(Supporting stranded sailors to disembark and return home) Due to the COVID-19 pandemic, an increasing number of Korean crew members and sailors ended up stranded on cruise ships and long-distance fishing vessels and were not able to disembark. Most countries did not allow sailors to disembark if they did not have a scheduled flight back to their home country.

However, because there is a high risk of contracting COVID-19 on ships, the Korean government decided to take action to help these people and actively sought ways to find flights to help them disembark and return home. As a result, 206 Koreans from 12 countries were able to come home as of September 22.







(left) Transporting stranded Korean nationals (center) Linking humanitarian assistance and repatriation efforts (right) Cooperation between countries





(left) Using the occasion of the dispatch of the Hanbit unit (right) Operating special flights

(Other forms of support) In addition to the abovementioned efforts, as of September 22, the Korean government brought back many more of its people from different countries: 4,749 Koreans from 54 countries by providing support for flight tickets and departure and 9,171 Koreans from nine countries by helping Korean communities overseas charter flights. The government also provided support to help 626 Koreans stranded in 16 countries move to other parts of the country where there is no lockdown.

1.1.3. Taking Care in the Repatriation Process

Furthermore, the Korean government took steps to address the difficulties that can occur when bringing back people to Korea or when transferring them to other regions and to ensure their safe and quick movement. They included:

- Consulting with other governments and commercial airliners to obtain licenses for operating chartered flights, and speedy issuance of domestic transfer permits and transit visas;
- Operating on-site support teams at airports, including help desks, and temperature checks and providing face masks to prevent possible infection in the process of evacuation, etc.







(left) Operating help desks (center) Supporting departure (right) Checks and providing face masks

1.2. Operating Temporary Residential Facilities

For Korean nationals returning from countries at high risk of infection, the Korean government put in place temporary residential facilities to help people stay in quarantine upon arrival. The majority of the people initially quarantined at these government-run facilities had arrived in Korea on chartered flights, but later, the policy was changed so that those entering

the country through the Special Entry Procedure would be put under selfquarantine. The following are examples of how these temporary residential facilities were run for Korean nationals returning from Wuhan and Iran.

1.2.1. Korean Citizens Evacuated from Wuhan

Korean nationals in Wuhan returned Korea on chartered flights arranged by the Korean government. At the time, many were concerned that the returning Koreans could spark the spread of the COVID-19 in the country at a time when the level of infection in Korea was relatively low. For this reason, the decision to designate temporary residential facilities to accommodate people from Wuhan was met with a considerable backlash from local governments and residents.

Furthermore, because it was the first case of evacuating overseas nationals due to an infectious disease, this matter required the relevant ministries to closely communicate and collaborate on how to operate the temporary residential facilities.

Despite these challenges, the Korean government made thorough preparations so that Korea's overseas nationals could stay in quarantine safely and effectively in these facilities³⁶ during the virus's incubation period of 14 days. In order to ensure the safety and convenience of people using these facilities, the Korean government provided support as follows:

 Mobilizing police officers and vehicles to support the movement between the airport and the facilities.

³⁶ The 'Police Human Resources Development Institute' (Asan, South Chungcheong Province) and the 'National Human Resources Development Institute' (Jincheon, North Chungcheong Province) were designated as the temporary residential facilities for Korean citizens evacuated from Wuhan.

- Providing meals and necessities,
- Providing translation services,
- Providing medical and psychological support,
- Disinfecting the facilities before and after quarantine,
- Maintaining order in and out of the facilities, and
- Disposing of the waste from the facilities in a safe and appropriate manner.

1.2.2. Korean Nationals Evacuated from Iran

Korean nationals in Iran were transported to Korea on chartered flights arranged by the Korean government and then to a temporary residential facility. Upon arrival at Incheon International Airport, these citizens first underwent entry procedure including border screening in a separate line from other passengers.

Those who showed no symptoms at the screening were sent to one of government-designated temporary residential facilities for specimen collection and diagnostic test. Those who tested positive were then transferred to hospital for isolation, while those who tested negative stayed at the facility for 14 days.

Seeking cooperation from the local residents, the Korean government held two rounds of briefing for resident representatives on March 13 and 18, respectively, to explain the government's efforts for the repatriation of Korean nationals from Iran as well as its plans to safely manage and operate the temporary residential facility to contain the spread of the virus.

2. Support for Korean Citizens Residing in Foreign Countries

As of September 22, the number of countries and regions that had declared a state of emergency or public health emergency stood at 48. The COVID-19 situation was relatively stabilized in Korea, whereas the transmission of the virus unabated around the world, putting overseas Koreans at higher risk of COVID-19 infection. Some overseas Koreans stayed in foreign countries because they did not wish to return to Korea or were unable to do so due to their livelihoods or academic pursuits.

The Korean government extended medical support to ensure the safety of these citizens in virus-hit countries. Moreover, the government made various efforts to secure the release of overseas Koreans placed in isolation by foreign governments or public health authorities and provided consular assistance to overseas Koreans who had been subjected to hate crimes linked to the COVID-19 pandemic.

2.1. Medical Support and Counseling

The Korean government worked to provide a wide range of support to ensure the safety of its overseas nationals, especially those residing in a poor medical environment. The importance of precautions against COVID-19 including personal hygiene was highlighted through posts on all diplomatic mission websites and social media accounts. Also, the government sent face masks abroad to overseas Koreans with the approval of the task force dedicated to stabilizing the domestic mask supply. A total of 1 million masks have been delivered through diplomatic missions of Korea by September.

The Korean government also strived to help its overseas nationals who had contracted the virus receive appropriate medical care. In consultation with the authorities of their host countries, the government worked to ensure

that they could gain access to the health system there. With 705 Korean nationals infected in 68 countries as of September 22, the Korean government serviced video medical consultations to support them. As of September 22, 95 overseas Koreans in 28 countries made requests for this service and all requests were served. In addition, the National Fire Agency stationed medical professionals at its Central 119 Emergency Management Center and offered emergency medical counseling on COVID-19 infection to overseas Korean nationals around-the-clock.





Central 119 Emergency Management Center

2.2. Efforts to Release Korean Nationals from Isolation

Globally, the surges in the COVID-19 cases prompted countries to tighten screening at their borders to prevent further spread of the virus. In the early stage of the COVID-19 pandemic when the virus was more rapidly spreading in Korea than in other countries, a growing number of foreign governments and airlines announced entry bans on Koreans and refused to allow Koreans to board. Furthermore, a large number of Koreans were forced into isolation facilities, upon arrival. A total of 9,226 Koreans had been isolated in 33 countries over the course of the past months.

The Korean government raised concerns about such decisions made by foreign governments to deny the entry of Koreans or forcibly put Koreans under isolation without prior consultation and actively provided necessary consular assistance to help affected citizens return to Korea as quickly as possible. Respecting the sovereignty of each country and based on the principle of reciprocity, the Korean government engaged in consultations with foreign governments through diplomatic channels to discuss ways to minimize difficulties for not only Korean nationals entering other countries but foreign nationals entering Korea.

Furthermore, the Korean government took every opportunity to explain the many aspects of its COVID-19 strategy to foreign governments. For example, two rounds of briefing were held for the diplomatic corps in Korea on February 25 and March 6. The government also arranged an on-site visit for the diplomatic corps on March 13 to the point-of-entry screening site at Incheon International Airport, in an effort to communicate its strong commitment to stringent quarantine measures.



Meanwhile, against an increasing number of countries placing blanket entry restrictions on travelers departing from Korea, the government endeavored to point out that they needed to be proportionate and based on evidence of risk. It also made sure to advise outbound travelers of up-to-date information on such restrictions. Overseas Korean diplomatic mission monitored changes in the measures taken by each host country against Korean travelers in real-time and updated travel notices on the Overseas Safe Travel website of the Ministry of Foreign Affairs at least once a day. The Korean government also sent out public safety alert messages to Korean nationals who arrive at Incheon International Airport for departure informing them of each country's situation.

2.3. Consular Assistance Regarding Hate Crimes

Fueled by the spread of misinformation on COVID-19, known as "the coronavirus infodemic," hate crimes have been frequently committed against Asians, including Koreans, in some parts of the world. As of September 22, 35 cases of hate crime against Korean citizens related to COVID-19 were reported. Hate crimes have been on the decline since stronger preventive measures were taken in March, but they still occur.

While hate crime typically involves physical or verbal assault, other forms of hate crime such as sexual harassment or intimidation against someone nearby also happen. The Korean government has actively dealt with the issue by urging relevant foreign authorities to thoroughly investigate and provided consular assistance to Korean victims such as legal support by advisory lawyers at diplomatic missions of Korea in accordance with local laws.

In an effort to prevent further cases of hate crime against Korean nationals, the Korean government continued to advise its citizens to avoid conflicts by, for example, respecting local culture and refraining from visiting remote areas or going out late at night, and the notices were widely made available through the websites and social media pages of the Ministry of Foreign Affairs and its diplomatic missions, overseas Korean media, and Korean communities abroad.

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International Cooperation







1. Participation in International Cooperation Mechanisms

Korea has participated in a variety of international fora, including the United Nations, bilateral and minilateral cooperation mechanisms, and regional and international organizations, to share its experiences in responding to COVID-19 and express its readiness to cooperate with others. The Korean government has strengthened bilateral and minilateral cooperation through high-level telephone conversations and video conferences among heads of state and ministers.

President Moon Jae-in attended a series of international conferences and bilateral meetings that included the G20 Extraordinary Virtual Leaders' Summit on March 26, the Special ASEAN Plus Three Summit via video conference on April 14, and WHO World Health Assembly via video conference on May 18, exchanging opinions and adopting joint statements with global leaders, and ROK-EU Leaders' video conference meeting on June 30, calling for the solidarity to overcome COVID-19. At the World Health Assembly on May 18, the President announced that Korea would provide humanitarian assistance worth 100 million USD in 2020.



ROK-EU Leaders' video conference meeting on June 30

Korea's Foreign Minister has also participated in various video conferences, including with the women foreign ministers from nine countries on April 16. The Minister also attended the Coronavirus Global Response International Pledging Conference led by the EU on May 5, pledging Korea's contributions to the international community's efforts to fight COVID-19, such as sharing its experience in responding to the pandemic and the provision of testing kits to international health organizations and partner organizations for the global response system.

Meanwhile, Minister of Health and Welfare Park Neung-hoo attended various international meetings including the G20 Meetings of Health Ministers on April 19, the Special Video Conference of Tripartite Health Ministers' Meeting with Japan and China on May 15, and the 73rd World Health Assembly on May 18, to share Korea's experiences and policies on the COVID-19 prevention and control activities, and emphasize the importance of international solidarity and cooperation. Furthermore, the Minister also made appearances in the ADB Joint Ministers of Finance and Health Symposium and the G20 Joint Finance

and Health Ministers Meeting on September 17, stressing how investing in healthcare systems is vital for guaranteeing equitable access to healthcare for all.

The Korean government also led the establishment of the Groups of Friends on health issues at the UN, WHO, and UNESCO.

The current status of each Group is shown in the table below:

Group	[UN] The Group of Friends of Solidarity for Global Health Security (launched May 12)	[WHO] Support Group for Global Infectious Disease Response (launched May 20)	[UNESCO] Group of Friends for Solidarity and Inclusion with Global Citizenship Education (launched May 26)	
Agenda	[Overall Multilateral Agenda] COVID-19 impact on security, development, and human rights & response measures	[Public Health] Improvement of global governance related to responses and preparedness to infectious diseases	[Society and Culture] Importance of international cooperation and solidarity through global citizenship education to respond to hate crimes and discrimination related to COVID-19	
Composition	The Groups of Friends are basically an open platform in which any country expressing its willingness to join can participate and has flexible structure to meet the different needs of each international organization. • Co-chairs: ROK, Canada, Denmark, Qatar, Sierra Leone • Members: more than 41 countries • Chair: ROK • Core group: Currently 8 countries mainly those on the WHO Executive Board			
Activity Plans	Regular meetings at the ambassador level, Sharing of experience in responding to infectious diseases, Briefings and seminars with invited experts, Joint speeches & side events for major meetings, Declaration of joint statements			

2. Supporting Partners against COVID-19 and beyond

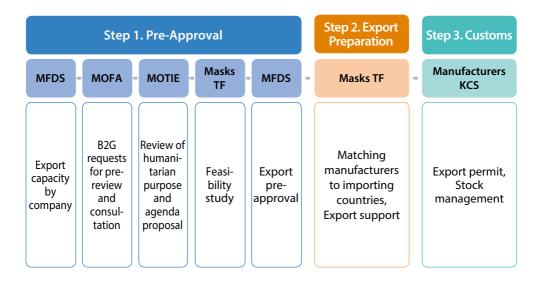
2.1. Exporting Equipments

The Korean government worked with foreign governments to identify demand for Korean-made equipments and provided support in information-sharing, contracts, and addressing delivery difficulties. To ensure that the efforts are in line with domestic supply and demand, an inter-ministerial task force for export of equipments has controlled the export volumes.

The government assisted in medical business-to-government (B2G) arrangements, linking the companies wishing to export and foreign governments wishing to buy. The Ministry of Foreign Affairs analyzed products in demand and the size of the demand in each country, and the Ministry of Food and Drug Safety (MFDS) and the Ministry of Health and Welfare came up with a list of potential exporters and their expected quantity of exports. Diplomatic missions of Korea and KOTRA trade centers collaborated to connect Korean companies to countries in need.

Various efforts were made for the exporting companies in this course, including support for video meetings and the overall process of export. Also, the Ministry of Trade, Industry and Energy (MOTIE) and the Ministry of SMEs and Startups were tasked with supporting Korean exporters, while the Ministry of Land, Infrastructure and Transport addressed logistics-related difficulties, and the Korea Customs Service supported customs clearance. Starting June 1, 10% of domestic production of protective face masks (KF face masks) has been available for overseas export; this was increased to 50% of monthly domestic production on July 12. The export of KF-Anti Droplet mask and surgical mask was also made possible as of September 15, as their supply and demand had stabilized.

B2G Export Procedure



Korea has been exporting mainly testing kits, so far. Export of some other products such as protective suits and ventilators are not encouraged as their domestic supply is not stable yet.

2.2. Humanitarian Assistance

On May 18 at the World Health Assembly, President Moon Jae-in pledged to provide USD 100 million in assistance to countries and people in the fight against COVID-19. As of September 22, the Korean government has provided humanitarian assistance to 109 countries. The government is providing essential supplies in combating COVID-19 such as testing kits and face masks. It also cooperates closely with international and regional organizations in humanitarian assistance.

The Korean government will continue to provide humanitarian assistance aligned to the trajectory of the COVID-19 pandemic as well as the severity of infections in other countries. The Korean government, while doing its best to extend bilateral assistance, is taking steps to provide assistance through multilateral organizations such as WHO, the Global Alliance for Vaccines and Immunization (Gavi), the Coalition for Epidemic Preparedness Innovations (CEPI), and the United Nations Secretary-General's COVID-19 Response and Recovery Trust Fund. The government will continue its effort to expand its assistance throughout 2020.

In addition, the Ministry of Foreign Affairs has launched "ODA KOREA: Building TRUST" to contribute to strengthening global Transparency, Resilience, Unity and Safety Together with partner countries. As the first step, the ministry launched the COVID-19 Comprehensive Rapid Response Program, providing USD 30 million in grants to strengthen partner countries' health system and their preparedness against infectious diseases by expanding health-care facilities and capacity building of health professionals. The Korean government will also support partner countries to mitigate the immediate social and economic impact on vulnerable groups and increase their resilience in areas such as education, sanitation and food security in partnership with the private sector, civil society, and multilateral organizations.

2.3 Contribution to the International Efforts on Vaccines for All

As President Moon Jae-in stressed at the 73rd World Health Assembly in May, global solidarity and cooperation beyond borders is needed to develop and ensure equitable access to vaccines. This was reconfirmed in President Moon's speeches at the UN High-Level Meeting on September 21 and the UN General Assembly on September 22. He proposed that, through global funding, we should facilitate the advance purchase of sufficient doses of vaccines for international organizations to ensure that developing countries

can also share the benefits.

Understanding the importance of rapid, fair and equitable access to vaccines, we are supporting global vaccine initiatives such as the COVID-19 Vaccine Global Access (COVAX) Facility under the Access to COVID-19 Tools Accelerator (ACT-A) framework led by WHO. As a recognition of Korea's advanced diagnostic kit technology and manufacturing capability, the Korean government is participating in the ACT-A as a Market Shaper. Minister of Health and Welfare Park Neung-hoo has attended the 1st High-Level Meeting of the ACT-Accelerator Facilitation Council on September 10, agreeing to the great significance the ACT-A holds, and expressing Korea's commitment to the development and fair distribution of vaccines, treatments and diagnostic kits.

We are also actively supporting the work of the International Vaccine Institute (IVI) located in Seoul, and actively assisting in its efforts to expand government membership. IVI is a unique international organization dedicated to making vaccines widely available and accessible to all, especially the vulnerable. As Foreign Minister Kang Kyung-wha emphasized at the Asia Society's virtual seminar on September 25, how much we succeed in these efforts will set the tone for the future of multilateral work not only in the global health sector but for multilateralism in general.

In parallel with our cooperation with global partners, the Korean government formed a Whole-of-Government Support Committee for COVID-19 Treatment and Vaccine Development to accelerate and assist the efforts of our domestic researchers and developers and mobilize the strengths of industry, government and academia.

We are also closely monitoring the latest global trends in vaccines development and procurement, and facilitating overseas clinical trials through the network of our diplomatic missions overseas.

3. Sharing Experience: Webinars on COVID-19

The Korean government has organized a web seminar (webinar) series to share its experience in the fight against COVID-19. The webinar was held nine times to discuss topics related to Korea's public health and response strategies and treatments. Around 3,780 people from 118 countries participated in these online seminars as of July 31. During the streaming of each seminar, participants could actively interact with presenters by asking questions in real-time through comments and presenters providing answers to those questions. Leading experts from the government, universities, hospitals, and academic societies joined the webinar as presenters and covered Korea's overall relevant policies. The topic of each seminar and the links are presented below.

No	Date & Time (ROK, GMT+9)	Торіс	Presenter (Moderator*)
1	May 4 15:00	National Policy on COVID-19 R Response and current status Diagnostic test Epidemiological analysis Clinical treatment	 Young-rae Son, Director General, Central Disaster Management Headquarters Hyuk-min Lee, Professor, Severance Hospital Jacob Lee, Professor, Hallym University Medical Center Joon-sup Yeom, Professor, Severance Hospital Soonman Kwon,* Professor, Seoul National University
2	May 13 17:00	National Policy on COVID-19 R Response and current Status Diagnostic test Response of countries with insufficient medical resources Clinical treatment	Young-rae Son, Director General, Central Disaster Management Headquarters Ki-ho Hong, Director, Seoul Medical Center Mo-ran Ki, Professor, National Cancer Center Eu-suk Kim, Professor, Seoul National University Bundang Hospital Soonman Kwon*

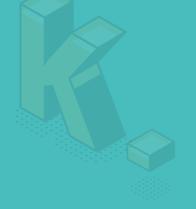
No	Date & Time (ROK, GMT+9)	Торіс	Presenter (Moderator*)
3	May 27 08:00	National Policy on COVID-19 R Response and current status Diagnostic test Patient transport system of the Korean Fire Agency Clinical treatment	 Young-rae Son, Director General, Central Disaster Management Headquarters Hyunk-min Lee, Professor, Severance Hospital Yong-man Jin, Division Chief, Korean National Fire Agency Pyoeng-gyun Choe, Professor, Seoul National University Hospital Soonman Kwon*
4	June 3 16:00	Immigration and Border Control Border control policies Visa and residence policies Immigration clearance measures Entry control measures	Bon-jun Koo, Director, Korea Immigration Service Myunng-hun Kim, Deputy Director, Korea Immigration Service Kih-eum Lee, Director, Korea Immigration Service Taejong Son,* Deputy Director, Korea Centers for Disease Control and Prevention
5	June 10 15:00	Response and current status Contact tracing of confirmed cases Use of ICT technologies Self-quarantine management Role of the National Police	 Young-rae Son, Director General, Central Disaster Management Headquarters Kunhee Park, Director General, Sangnoksu District Health Office in Ansan Chung Won Lee, Director, Ministry of Science and ICT Il-cheol Shin, Team Leader, Ministry of the Interior and Safety Beom-kyu Seo, Director General, Korean National Police Agency Soon-man Kwon*
6	June 17 15:00	Social distancing Online classes in Korea Baseball season without fans in the stands	 Young-rae Son, Director General, Central Disaster Management Headquarters Jin-sook Kim, Director, Korea Education and Research Information Service Jin-hyung Lee, Deputy Secretary General, Korea Baseball Organization Soon-man Kwon*

No	Date & Time (ROK, GMT+9)	Topic	Presenter (Moderator*)		
		K-Economy : Measures to Boost Economic Resilience			
7	June 24 15:00	 Overview of the K-Economy Measures for employment Measures for industries Measures for SMEs Measures for local economies 	 Il-yong Park, Director General, Ministry of Economy and Finance Hae-young Chung, Director, Ministry of Employment and Labor Soon-mok Kwon, Team Leader, Ministry of Trade, Industry and Energy Seung-uk Yang, Director, Ministry of SMEs and Startups Won-young Choi, Assistant Governor, Gyeonggi Provincial Government Soon-man Kwon* 		
8	July 1 16:00	Science, ICT and Education Response to COVID-19 with science and ICT SARS-CoV-2 assay development using ICT Antiviral therapy against COVID-19 Online classes in Korea	 Chung Won Lee, Director, Ministry of Science and ICT Dave Lee, Director, Seegene Institute of Future Technologies Wang-shick Ryu, Professor, Yonsei University Jin-sook Kim, Director, Korea Education and Research Information Service Hee Kwon Jung,* Director General, Ministry of Science and ICT 		
9	July 8 16:00	Voting procedure for confirmed patients Voting procedure for general voters Vote counting procedure and follow-up measures	 Hwa-young Shin, Deputy Director, Ministry of Interior and Safety Hye-jun Jeon,* Deputy Director, Ministry of the Interior and Safety 		

All videos and presentation materials can be found on www.mofa.go.kr/eng/brd/m_22741/list.do



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Taking Stock and Going Forward











- 01. Korea's Strengths in COVID-19 Response
- 02. Going Forward



1 Korea's Strengths in COVID-19 Response







Korea's Previous Experience with Infectious Disease Outbreaks

Korea's response to COVID-19 has been shaped in part by lessons learned from its response to similar emerging infectious diseases in the past. Fueled by the criticism it received for its insufficient initial response such as the lack of infection control professionals and delayed information disclosure during the MERS outbreak in 2015, the Korean government laid out a plan to reform the National Public Health Emergency Response System on September 1, 2015, which was aimed at preventing import of infectious diseases, ending them at the earliest possible stage, and minimizing related damage.

At the same time, this reform also involved a plan to reorganize Korea Centers for Disease Control and Prevention (KCDC), which was established in 2004 in the wake of the SARS outbreak in 2003. Under this plan, KCDC, the agency dedicated to fighting infectious diseases, underwent organizational restructuring to be able to lead national response efforts and independently exercise its authority. Coupled with this organizational restructuring, the continued revision of the Infectious Disease Control and Prevention Act for transparent and prompt information sharing, described in detail in Chapter 2, laid the foundation for the legal basis for information disclosure. Using

the information on confirmed cases disclosed based on this Act, the Korean government could provide guidance to its citizens in order to advise them to compare their routes to those of confirmed cases and, if their routes overlap, to voluntarily get tested and follow relevant procedures.

In addition, driven by the increased awareness of the importance of the initial response to infectious diseases after the MERS outbreak, the National Assembly's Special Committee for the Response to COVID-19 was formed in February. The Committee decided to increase the number of epidemiological inspectors and quickly revise the Infectious Disease Control and Prevention Act with the aim to authorize the heads of city, county, and district governments across the nation to appoint epidemic survey officers and epidemic control officers.

Based on these restructured administrative and legal systems, the Korean government was able to effectively carry out the strategy of 3Ts of testing, tracing, and treatment.

2. Public Health Infrastructure

Korea's successful response to the COVID-19 pandemic made the most of its advanced medical systems. In 2017, Korea's hospital beds reached 12.3 per 1,000 persons, the second-highest in the world, and 2.6 times¹ the OECD average of 4.7. In addition, Korea's per capita outpatient medical treatments is 16.6 a year, the highest² in the OECD, testifying to the excellent medical access that the people enjoy. The National Health Insurance Service has played an

¹ Press release of the Ministry of Health and Welfare, 'Korea's Health System based on OECD Health Statistics' (July 22, 2019).

² Press release of the Ministry of Health and Welfare, 'Korea's Health System based on OECD Health Statistics' (July 22, 2019).

important role in strengthening the country's healthcare system. All residents of Korea are obliged to enroll in the National Health Insurance (NHI). While contributions are based on individual income levels, insurance benefits are identical for the insured, making it easy for people to pursue and receive the medical care they need.



Webpage of the National Health Insurance Service³

Moreover, Korea's digitalized healthcare system played a significant role in the nation's response to the pandemic. The digitalized system of the National Health Insurance Service has been established over the years, and it enabled the smooth and quick processing of health insurance review, bill claims, and payment related to COVID-19. The use of this system for publicly-distributed face masks allowed mask sellers to effectively block repeat purchasers in a given day, and both sellers and buyers to check the inventory status in real-time.

3. Use of Cutting-Edge ICT Technologies

In controlling the highly contagious COVID-19 and effectively allocating resources, it has been extremely important to predict changes in the spread of the virus and the number of infected cases. Thus, major countries have conducted analyses to predict the spread of the virus under various circumstances by using scientific and technological data and utilized the results in policy decision-making. Korea has also undertaken this type of research to foresee the spread of the virus based on information using ICT technologies.

The Korean government collected telecommunications data for a public research purpose from private companies and used statistical data archived by government agencies for its modeling efforts to predict how the COVID-19 situation would unfold. The data showed that, if social distancing were not implemented on a nation-wide scale, the number of confirmed cases would surge in February when Korea was witnessing a sharp increase in confirmed cases. The modeling results were used as a basis for the public campaign for social distancing.

Meanwhile, Korea is the most wired country in the world with the highest internet penetration rate⁴ among OECD countries (in terms of optical cables, as of 2017). It also has one of the highest smartphone ownership⁵ among major countries. This has been instrumental in the country's response to COVID-19. Korea's IT network across the nation enabled the efficient use of video conference, leading to speedy decision-making among relevant organizations.

Also, the use of ICT technologies such as the Self-Check Mobile App, Self-Quarantine Safety Protection App, and apps to provide mask inventory data helped reduce administrative burdens and enabled Korean citizens to follow the country's response measures with ease. Notably, in the supply of publicly-distributed face masks, the Korean government collected the sales data of publicly-distributed face masks and converted it into open data for the private sector. More than 90% of the general public and pharmacists in Korea responded that such an information-sharing service helped to improve their experience in buying and selling publicly-distributed face masks.

The Drug Utilization Review (DUR) system and the International Traveler Information System (ITS) were also introduced to obtain travel history and quickly share information on confirmed cases. Even during the MERS outbreak in 2015, the DUR system served to provide real-time critical information about those entering Korea in relation to infectious diseases. An upgraded version of ITS was installed in the DUR system in 2018 to build a systematic platform for medical institutions to identify their patient's travel history from the stage of reception into the institution. These earlier efforts to strengthen its ICT infrastructure enabled Korea's swift response to COVID-19.

^{4 &}quot;The Ministry of Science and ICT: High-speed Internet will be available anywhere from 2020"

^{5 &}quot;Korea, No 1. smartphone ownership in the world... the lowest gap between generations" (*JoongAng Ilbo*, February 18, 2019)

Prompt contact tracing, the Self-Quarantine Safety Protection App, and the Safety Band also leveraged advanced ICT technologies to effectively manage those in quarantine. Last but not least, the COVID-19 Epidemiological Investigation Support System was launched to automate information research work that was previously done manually, dramatically reducing the research time required per case from 24 hours to less than 10 minutes.

4. Integration of Administrative Capacity

In the wake of the spread of COVID-19, all relevant government agencies and local governments have closely worked together to respond to the virus at the whole-of-government level. The Central Disaster and Safety Countermeasure Headquarters has served as a key platform that enabled close consultations and the clear division of roles among government agencies. Meetings between the Central Disaster Management Headquarters and the Central Disease Control Headquarters facilitated close communication and cooperation between ministries as well as between the central and local governments. (See — Part II. Chapter 1)

Underpinned by this integrated cooperation system, the Central Disaster Management Headquarters and the Central Disaster and Safety Countermeasures Headquarters have held meetings on a daily basis from the initial stage of the outbreak and continued their efforts to identify the characteristics of the new infectious disease and the corresponding measures. Such efforts led to the development of new response measures against COVID-19, and government agencies were able to avoid confusion thanks to the efficiency of the division of work.



President Moon Jae-in encouraging military medical personnel staff © YonhapNews



Prime Minister presiding the meeting in Daegu region

5. Sticking to the Principles

Korea's response to COVID-19 has been fine-tuned and rolled out in phases against the multiplying sources of risk so as to minimize the detrimental impacts on livelihoods, the economy and the interaction with the world. While doing so, Korea has remained fully committed to the main principles of Openness, Transparency, Civic Engagement and Innovativeness. Steadfast adherence to these principles won the public's trust in government action which is the key element in any crisis response.

5.1. Openness

In adherence to WHO recommendations, the Korean government has managed the risk associated with cross-border traffic not with blanket entry bans but with continuous adaptation of measures designed to control and keep track of the virus that some of the inbound travelers may be carrying in. These measures have been phased in, corresponding and proportionate to the location of and scale of the incoming risk.

The Korean government has also worked in close concert with civil society to preserve the openness in the daily life of the people with minimal interference in their freedom of movement and economic activities. So far, even at the height of the epidemic in late February and early March, the government has managed to do so without resorting to lockdowns, suspension of public transportation or other large-scale restrictions. Korea has also carried out nationwide parliamentary elections in April, and opened schools on-site for all grades after a period of online classes.

Central to this has been Korea's 3Ts strategy that consists of robust testing to confirm positive cases; rigorous tracing of their contacts to prevent further spread; and treatment of those infected at the earliest possible stage. Wide-

scale testing led to quick confirmation and isolation of positive cases. Epidemiological teams aided by tracing tools led to speedy identification and quarantine of their contacts. Early treatment of patients adapted to different levels of symptoms has led to high recovery and low fatality rates. Keeping society and borders open has entailed a tremendous amount of work for the government at central and local levels. But this has helped us avoid the pains and devastating socio-economic consequences of lockdowns, as many countries have experienced.

5.2. Transparency

The Korean government has remained fully committed to prompt and transparent sharing of information on developments in Korea's COVID-19 situation and government policy, both domestically and internationally. Korea's domestic law (Infectious Disease Control and Prevention Act) ensures the public's right to be informed on the latest developments and responses to outbreaks and infection control.

Full disclosure has also been made of the Korean government's actions and plans. The government did not waiver in this commitment to transparency even when faced with difficult issues that generated much public frustration and criticism, e.g. the shortage of face masks at the early stage of the epidemic. The full disclosure by the government has in turn rallied the public to join in the efforts to find better solutions.

Since day one, press briefings have been held twice a day, by the Minister/Vice Minister of Health and Welfare in the morning and by the Director of KCDC and Director of the Korea National Institute of Health (KNIH) in the afternoon.⁶

⁶ These briefings are live-streamed through the internet with simultaneous interpretation into English for international viewers (www.arirang.com at 11:00 am and 2:00 pm daily).

Also in March, the Ministry of Health and Welfare, and Health Insurance Review and Assessment Service has decided to share de-identified nationwide COVID-19 patient data with both domestic and international researchers in the #opendata4covid19 project to support international collaboration.

Meanwhile, concerns on privacy were raised with regard to the contact tracing and information disclosure policy. To address such concerns, the government toughened the relevant guidelines on the time frame (maximum of 14 days) and scope of publicly accessible information by anonymizing personal information. These efforts were acknowledged by the UN human rights machinery.

Disease Pandemics and the Freedom of Opinion and Expression (A/HRC/44/49)

- 54. In the Republic of Korea, under the Infectious Disease Control and Prevention Act, public health authorities enjoy significant power to collect personal health data across the country during an epidemic. However, while the law enables substantial disease surveillance with privacy guarantees, it also requires government officials to share with the public basic information concerning its contact tracing efforts. In this way, the law appears to satisfy the government's health policy requirements and the public's right to information. It is imperative that, even where Governments permit the collection of data, such collection be accompanied by strict personal data protection guarantees and be time-limited while also promoting, as the Republic of Korea appears to be doing, the public's right to know the outcomes of such collection.
 - Report of the UN Special Rapporteur on the promotion and protection of the right to freedom of opinion and expression, April 23, 2020

5.3. Civic Engagement

Flattening the curve on COVID-19 epidemic in Korea has relied heavily on civic engagement, participation, and partnership with the people. The public as a whole adhered to personal hygiene measures such as wearing face masks, complied with self-quarantine measures, and maintained social distancing. The vast majority of those placed under mandatory self-quarantine fully complied with required guidelines. As of September 22, out of nearly 686,198 accumulate cases, only 1,139 have broken self-quarantine.

Public participation has also materialized into civic activism nationwide in the form of volunteering for response efforts in the hard-hit areas, as well as supporting vulnerable communities that are likely to be overlooked, such as undocumented foreign workers.⁷ In April, nearly 2 million face masks were distributed to undocumented foreign workers through 46 civic organizations.



Relief supplies from private sectors © YonhapNews

⁷ Addressing concerns of possible infections among undocumented foreign workers, the government put in measures to ensure their access to testing and medical services without fear of deportation.

The partnership between the public and the government led to the development of innovative response measures. The public provided a vast reservoir of expertise, creativity and innovation, and in turn the government mobilized, supported and institutionalized the public's inputs.

A notable example has been the drive-through and walk-through screening stations that were pioneered first by Korea's medical community, and then adopted, standardized, and scaled up by the government. When face masks were in short supply and the series of government measures to assure even distribution fell short of public demand, again the medical community came up with the idea of utilizing pharmacies, already equipped with national databases that can prevent repeat purchases. The idea was quickly adopted by the government to roll out a two-per-person-per-week purchasing scheme in early March.

Using open government data, developers and startups in the private sector have also mobilized to create hundreds of apps and websites that have helped to track the spread of the virus, alert users to potential risks areas, and indicate available stock of face masks in pharmacies and other retailers nationwide.

5.4. Innovativeness

The Korean government has pursued a twofold strategy against COVID-19: it continued to improve its system based on existing knowledge and the lessons learned from past epidemics, while also seeking creative problem-solving in countering the novel and unknown virus. It has promptly responded to new developments and the latest discoveries by adjusting its response measures.

In particular, a whole-of-government team was established to pursue and support proactive and enabling interpretation of existing laws and regulations and swift decision-making in relation to COVID-19 response. The work was instrumental, for example, in repurposing facilities of public training institutes into residential treatment center for COVID-19 patients with mild symptom or quarantine facilities for close contacts and overseas arrivals.

Efforts were also made to actively adopt expert and innovative ideas from the private sector and translate them into policies. As mentioned earlier, the drive-through and walk-through screening stations were the ideas proposed by the medical community, and then systemized by the government. The five-day rotation face mask distribution system was also developed from an idea suggested by healthcare workers and pharmacists as a way to prevent repeat purchases.

In addition, private companies and IT developers created a publicly available mobile apps showing the routes taken by confirmed patients and a website showing mask inventories in real-time. In turn, the public-private partnership further strengthened the public's trust as well as demands on government action, thus keeping unrelenting focus on government accountability.

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Going Forward







1. Call for Global Cooperation and Solidarity

The ongoing COVID-19 pandemic is a global crisis affecting politics, economies, and societies around the world. This crisis has put a halt on the movement of people and goods, disrupted the global supply and distribution network, and incited panic and fear in nearly every corner of the world. In the face of such daunting challenges, countries are employing a wide range of measures from maintaining to lifting controls, according to the severity of COVID-19 in their own region and its socio-economic repercussions.

Nevertheless, no country can put an end to the pandemic in its own, and no single country can provide a global solution in today's highly inter-connected world. Furthermore, any country's actions can have a significant impact on other countries, regions, and the entire world. This means that exchanges and cooperation among countries are imperative until the COVID-19 pandemic is overcome. It is essential to share the experiences and information of each country under the spirit of international cooperation and solidarity.

As of September 22, President Moon Jae-in has had over 43 bilateral telephone conversations with heads of state and high-level officials, actively



President Moon Jae-in delivering an address at 75th Session of United Nations General Assembly

sharing our experiences with other leaders and providing support for equipments related to preventing infectious diseases including through the export of testing kits and the supply of face masks as humanitarian assistance.

Cooperation at the multilateral level is also underway. President Moon attended the G20 Extraordinary Virtual Leaders' Summit and the Special ASEAN Plus Three Summit via videoconference and addressed the World Health Assembly (WHA) upon invitation, underscoring the importance of international cooperation and solidarity. During his speech at the WHA, President Moon called on the world to unite under the banner of mutual trust and inclusiveness in the face of this deepening crisis, and expressed strong support for vaccines and treatments against COVID-19 to be made global public goods.

President Moon further elaborated three ideas for enhanced global solidarity in his speech at the UN High-Level Meeting on September 21, such as guaranteeing equitable access to vaccines and therapeutics, restoring multilateralism to the international order, and pursuing the path of "Green Recovery". At the General Assembly on September 22, he also highlighted the importance of strengthening inclusiveness in international cooperation, so as to shape multilateralism in a way that makes everyone prosperous.

In a bid to expand cooperation within multilateral organizations, Korea took the lead in launching the UN Group of Friends of Solidarity for Global Health Security on May 12, the WHO Support Group for Global Infectious Disease Response on May 20, and the UNESCO Group of Friends on Global Citizenship Education. These groups have been serving as a platform to discuss the interlinkages of global health and security, peace, development, and human rights challenges.



Launch of the UNESCO Group of Friends on Global Citizenship Education



The First meeting of the Inter-ministerial Task Force for International Cooperation



The webinar on Korea's response to COVID-19

Korea, as one of the countries hit hardest by COVID-19 in the early stages of the spread of the virus, has endeavored to share its experiences and know-how related to its COVID-19 response. A task force dedicated to international cooperation on the prevention and control of COVID-19 was created at the whole-of-government level to systematically meet the needs of international cooperation.

At the onset of the COVID-19 outbreak, many countries adopted inward-facing policies such as imposing blanket bans on inbound travelers. This move created a chain reaction leading to many other countries deciding to block entry and impose bans on cross-border movement. The majority of these measures still remain in place as of today. Working against this tide, Korea has been working tirelessly to ensure least restriction on cross-border travel.

It is inevitable that countries will take different measures to respond to the COVID-19 pandemic to meet the specific needs of their society. Nevertheless, it is also clear that the current pandemic situation cannot be overcome unless countries work together. These circumstances require each country to share its experiences and information related to the measures it has taken to combat the pandemic, provide support for countries with weak public health systems, and collaborate across borders. Countries must collectively work together to end the COVID-19 pandemic and discuss ways to further strengthen the system of international cooperation to enable close cooperation in the early stages of a similar global health crisis in the future.

2. International Standardization

As described in this compendium, Korea's response to COVID-19 has been methodically rolled out based on innovative methods powered by its ICT technologies and its experiences of responding to similar infectious diseases

in the past. Encouraged by the positive reviews on this endeavor, we decided to seek international standardization for some of our key measures. We hope that the standards will provide useful references for countries in the event of a worldwide recurrence of a pandemic such as COVID-19.

For this purpose, the Korean government is taking steps to standardize a Korean model of infection prevention and control, which includes the operational procedure of the drive-through and walk-through screening stations, a standard operating model of the residential treatment center, and requirements for the Self-Check Mobile App and Self-Quarantine Safety Protection App. In particular, the Korean government seeks to standardize its procedures and techniques in the 3Ts.

Progress has been made in the international standardization of the Korea's response to COVID-19 model. The real-time polymerase chain reaction (RT-PCR), a method used in testing for the coronavirus, has been registered as the Final Draft International Standard (FDIS) in June 2020 and will be established as an International Standard (IS) in November this year. Moreover, the operational procedure of the drive-through screening stations and the operational procedure of walk-through screening stations were proposed as a New Work Item Proposal (NP) to the ISO and member countries adopted these items in August and September 2020. The standard operating model of the residential treatment center and Pandemic response - Self-symptom checker were also proposed as NP.

Going forward, the Korean government will collect ideas and opinions of experts from the private sector and widely reflect them in setting its policy direction for international standardization of Korea's response to COVID-19 and drawing up detailed plans accordingly. This public-private partnership is in line with the direction that the Korean government has taken throughout its fight against COVID-19. The effectiveness of such partnerships has been highlighted in Korea's response to COVID-19, particularly when the private

sector actively offered insights and expertise to the government and the public sector supported the widespread dissemination of those ideas both at home and abroad.

The Korean government will continue to carry out its standardization efforts in collaboration with other countries. In the fight against the COVID-19 pandemic, the world has witnessed the importance of standard guidelines for infection prevention and control that can be globally shared in the face of a common crisis. We strongly hope that countries around the world will collaborate in developing such guidelines and standardizing exemplary practices.

3. Preparing for Post COVID-19

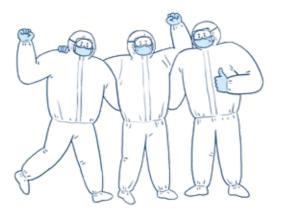
Much remains yet to be understood about COVID-19 and its effects on countries and the global community. Countries will emerge from this crisis in different ways. Already existing problems may exacerbate while new problems arise. Confirmed cases are decreasing in some countries and regions, but the pandemic's spread continues throughout the world as a whole; the total number of deaths worldwide surpassed 1 million at the end of September. Even countries and regions that seem to have the situation under control cannot rule out the possibility of a reversal in their downward trend. Perhaps borders and economies will open, only to be slowed again by subsequent waves of infections. What is certain is that no country will be fully safe before the world as a whole is safely protected from the virus. The global response must match the scale of the challenge.

The global economy is already in recession, and barriers to trade and investment is likely to slow future recovery. Cross-border movement of people and goods is bound to recover, but is likely to be more difficult, costly and subject to restrictions. When and how countries open their borders and economies are decisions for governments to make. The challenge ahead will be to figure out how to make the world free and open again, while rebuilding our own economies from the damages the pandemic has wrought.

To prepare for post COVID-19, the Korean government recently announced the 'Korean New Deal', a package of polices and projects that aims to structurally transform Korea's economy around technology and digitalization while reinforcing social safety-nets and promoting low-carbon green growth. We are ready to join forces with all countries and partners who share the same vision.

We remain hopeful that the current crisis will provide the opportunity and momentum to motivate action and reform where they need to happen, and expand the scope of global cooperation. Surely, the long-term legacy of COVID-19 should be one of global solidarity, better preparedness for the future and the international community coming together to tackle the biggest challenge of our time.

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ALL ABOUT KOREA'S RESPONSE TO COVID-19

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Publication Date _ October 7, 2020

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