

Essay

Crimes against Community: The Therapeutic Politics of South Korea's COVID-19 Public Health Surveillance

Minkyu Sung

Ulsan National Institute of Science and Technology, South Korea $\underline{\text{minkyusung@unist.ac.kr}}$

Abstract

This essay argues that the success of South Korea's COVID-19 responses—called "K-Quarantine"—is symptomatic of the country's liberal politics in crisis. The therapeutic politics of K-Quarantine is enacted by an amalgam of moral guilt and legal liabilities for damages to the community, framing the COVID-stricken public as potential criminals against community. In this political context characterized by potential guilt, the public feel culpable if they resist the overshadowing power of public security. This essay offers a critique of the public security rhetoric, examining the case of an LGBTQ South Korean charged on violations of the Infectious Disease Control and Prevention Act amid the outbreak of the pandemic in 2020. A critical evaluation of invasive and punitive measures found in the case demonstrates that the K-Quarantine strategy contradicts its own underlying liberal ideal of the autonomous subject because its public health deliberation reproduces a guilt mandate by constructing a perpetrator/victim binary.

Embracing "K-Quarantine"

South Korea has been touted as one of the few successful countries for effective coronavirus measures since the outbreak of the COVID-19 pandemic. This praise derives from the success of its three ET methods— Early Testing, Early Treatment—in taming the novel coronavirus with far lower numbers of confirmed patients without any lockdown, in a stark contrast to other advanced North American and European countries. In spite of public concern for the intrusion into its citizens' privacy, however, the South Korean government promptly deployed high-tech contact tracing surveillance through its digital media services and telecommunications infrastructure.

Critics expressed disapproval of the South Korean pandemic measures as an authoritarian approach to civil liberties (Koo 2022). This critique typically relies on a Western-centric lens that labels South Korean a Confucian democracy. This label implies that South Korean people are too submissive, effeminately willing to sacrifice their civil liberties to the cause of the nation's survival and prosperity. South Korean intellectuals, domestic and abroad, critically responded to this characterization of the nation as an orientalist stereotype that otherizes non-Western political governance (Kang 2020; Park 2020). In a vein of rhetorical modification tinged with nationalism, the South Korean public's cooperation with the government's pandemic measures is hailed by liberal critics as indisputable evidence of the civic maturity of participatory democracy for a "world-class country" (seonjinguk) in a hyper-competitive sphere of globalization (e.g., Park 2021). The South Korean government accepted this rhetorical framing to expand the strategies of the nation's post-coronavirus growth. In July 2020, for example, the government announced the "South Korean New Deal," a blueprint for economic development and global leadership in coming post-COVID-19 years

fraught with a global climate crisis. The plan showcases strategies of strengthening its capabilities in digital economies and green environmentalism. Resonating with the liberal national imaginary, in January 2021, President Moon's annual new-year speech invoked the nation's successful coronavirus containment, termed "K-Quarantine" and named after the state's global public relations strategy for its culture industries such as K-Pop (Choe 2020a), as a demonstration of the potential of an "inclusive welfare state" (Moon 2021).

Contrary to this populist embrace of South Korea's K-Quarantine, this essay takes issue with the putative success of the K-Quarantine strategy as a prominent case of political crisis. I argue that unequal social relations are being justified, exacerbated, and entrenched in political economic and legal measures to counter the pandemic. In K-Quarantine, people vulnerable to unequal and unstable market mechanisms continue to be deprived of their capacities to cope with the impact of the pandemic. Discriminatory public health measures placed on minority groups, such as LGBTQ persons and migrant labor workers, are promoted as protecting a social majority from the threat of their mere existence. In this essay, I outline how the liberalleft leaning Moon government's K-Quarantine measures rely on mechanisms that reproduce current social inequalities. I argue that the success of K-Quarantine is symptomatic of South Korea's liberal politics in crisis. In the politics of moral guilt, the public feel culpable if they resist the overshadowing power of public security. This essay offers a critique of public security rhetoric during the COVID-19 pandemic outbreak in 2020, examining the case of an LGBTQ South Korean charged with violating the Infectious Disease Control and Prevention Act (IDCD Act) (2021). The critical evaluation of invasive and punitive measures found in the case demonstrates that the K-Quarantine strategy contradicts its own underlying liberal ideal of the autonomous subject. Public health deliberation in South Korea reproduces a guilt mandate by constructing a perpetrator/victim binary in which patients infected with the coronavirus are presumed to have wronged their community.

Straitjacketing Public Health Deliberation

In the liberal nationalist rhetoric, South Korea's K-Quarantine boasts about how much public health governance has positively evolved from the nation's past response to the Middle East Respiratory Syndrome (MERS) outbreak in 2015. However, research shows that this evolution is further characterized by neoliberal transformations in public health that privatize disease management and intensify the responsibilization of individuals for public health burdens. In recent years, South Korea has also expanded its for-profit healthcare service and giant tertiary hospitals (Lim and Sziarto 2020; Lee et al. 2017). Long before and during the COVID-19 pandemic, public health advocates have continued to bring to the fore the insufficiency of South Korea's public health system, including the persistent shortages of public hospitals, which are responsible for only ten percent of the nation-wide health facilities and service. This is far below most Organization for Economic Cooperation and Development (OECD) member countries, such as the UK (64%), France (26%), Japan (25%), and the US (25%) (Kim, Lee, and Lee 2020; Cha 2020).

The effects of this transformation were felt deeply by frontline public health professionals. From the very beginning of the pandemic, the burnout of frontline public health professionals drew critical attention. The seriousness of their physical and emotional exhaustion (an unsurprising consequence of the neoliberalization of South Korea's public health services) was veneered by the government. Public campaigns of medical doctors and nurses hailed as the "corona hero(in)es" for their dedication and sacrifice were utilized for the nation's soft power branding in public diplomacy (see YonhapNews 2021; Lee and Kim 2021). Yet these heroes and heroines were plagued with guilt and worry. In a memoir from April 2020, a Korean medical doctor in the Masan Public Hospital writes, "I am not the only one who sacrificed here. All my colleagues here deserve attention... I'd feel guilty if I'd be the first person who puts them in grave danger for COVID-

_

¹ In early 2021, several local governments ordered mandatory COVID-19 PCR testing for migrant labor workers if they were to be considered for employment. The National Human Rights Commission of Korea decided that the mandatory public health measure was to "discriminate [against] foreign workers without reasonable grounds as COVID-19 [effects] anyone regardless of their nationality" and must be withdrawn immediately (National Human Rights Commission of Korea 2021).

19.... Recently, a new patient told me about the same thing for her family and neighbors" (Choi 2020). The doctor knows medically that if he got sick it would not actually be his fault, given his constant exposure to the virus. However, if he was the first to contract it at his workplace, he would feel moral guilt anyway because he would have put his workplace community in "grave danger." This is because moral guilt manifested in the therapeutic K-Quarantine politics blames individuals' pandemic-induced hesitancy, anxiety, fear, and humiliation on their negligence in the legal duty-to-report requirements. Contracting the coronavirus means failing to safeguard the community's interests. Under the moral-legal guilt framings, COVID-19 patients—pitted against the community's interests—are "found culpably responsible for wrongdoing and [are] thus deemed guilty by an authority that is acting in the interests of civil society" (Wilson 2021: 107). In sum, despite the acknowledged uncertainty in medical evidence and responses to the pandemic and many health-related issues (Veit, Brown, and Earp 2020; Aronowitz 2015), public health deliberation in South Korea during the COVID-19 pandemic is straitjacketed by a binary understanding of perpetrator and victim in which patients infected with the coronavirus are presumed to wrong their community.

Safeguarding the Community's Interests

Inclusive liberalism conveys a powerful post-neoliberal reckoning teeming with the polysemy and oxymoron of liberalism (Porter and Craig 2004; Fischer 2020). Inclusive liberalism claims that a society caught in the ruin of neoliberal disintegration must make it possible for the poor and the economically precarious to restore their inclusion into the market society via community-based responses, such as participation, social capital, and social investment. However, Andrew M. Fischer (2020: 384) observes that inclusive liberalism's reluctance to adopt "strong redistributive and labor-protecting policies" is programmed with the mandate of austerity in public provisioning "reinforcing the scapegoating of particular groups or individuals, and making popular resentments susceptible to racist and misogynist messages of right-wing populists."

In contrast to the idealized picture of a post-neoliberal, inclusive liberal society, the K-Quarantine strategy adopts an exclusive precept towards those who must be sacrificed, punished, or compensated, facilitating the so-called "bottom 90%" people's subjugation to unequal social relations (Chancel et al. 2021). The liberal-left Moon government's inclusive liberal post-COVID development scheme arguably verges upon the thrust of *chaebol* (conglomerates)-centered economic growth that reinforces a polarized labor market, maintaining the status quo of income disparities and job stability between regular and irregular workers (Yoon 2020). The Moon government's facile COVID-19 relief package was also still marked by austerity in social provision, harkening back to the neoliberal denunciation of budget deficits (J.S. Kim 2020). The relief package consisted of short-term financial loans and ad-hoc small subsidies that insufficiently compensated for small businesses' damages (Shin and Mah 2020). South Korean small business owners and self-employed individuals took to the streets for a protest across the country, calling for substantial government compensation for closures of bars, curbs on indoor eating in restaurants, and revenue losses related to limits on public gatherings such as weddings and public transit services (Lee, Lee, and Ko 2021). When these business owners and self-employed individuals testified in a recent Congressional hearing, the rhetoric they used displayed the deep guilt they felt, even as they tried to resist being scapegoated for violating government mandates about public gatherings (Lee and Jang 2022). They testified to feeling this guilt while simultaneously disavowing the obligation of self-sacrifice for the nation's survival during the pandemic.²

This emotional ambivalence illuminates the therapeutic politics of K-Quarantine, in which members of the public are pitted against one another to safeguard the community's interests through self-sacrifice and

-

² The self-sacrifice rhetoric can similarly be observed in major national crisis events, including the South Korean public's participation in the gold donation campaign to pay off the country's debt to the International Monetary Fund (IMF)—the so-called IMF crisis—in winter 1997–1998 and the human egg donation campaign exploited in Korean scientist Hwang Woo-suk's stem cell fraud in the early 2000s (see, for details, Kim and Finch 2002; Kim 2008).

mutual blaming. For example, when the country's first large-scale COVID-19 outbreaks occurred at a megachurch in Daegu in February 2020, it was publicly dealt with as essentially a religious issue rather than as a public health issue (Choe 2020b). The churchgoers were portrayed by the government and news media as religious fanatics who were extremely selfish to disregard the community's interests. In the public discourse, the community spread of COVID-19 occurred because members of the church community did not sacrifice their individual commitment to the collective public health mandate. Mutual blaming ensued from this contradictory formation of the liberal subject. Public health surveillance ferreted out the church members across the country, invoking the idea of infection as wrongdoing. In the early stages of the outbreaks, the Moon government's war on the virus was directed at virus-infected individuals. This made people extremely anxious about being blamed for their presumed careless lifestyles (Cho-Han 2020). The government's risk management strategy heavily relied on charging a fine, billed as indemnity for the state's loss, implying individuals had so damaged the State that they owed it money if they failed or refused to report to the government about their symptoms. The therapeutic politics of K-Quarantine is enacted by an amalgam of moral guilt and legal liabilities for damages to the community, framing the COVID-stricken members of the public as potential criminals against community.

Criminalizing the Infected to Combat COVID-19

In early May 2020, the Korea Disease Control and Prevention Agency reported thirty-five COVID-19 positive cases across the country, out of which twenty-nine contracted persons were found to be linked to nightclubs and bars in Seoul's Itaewon district. Because Itaewon is known as a popular area for the LGBTQ community in South Korea, the number being reported was a symbolic vehicle of dismay among South Korean people. Many South Korean people became extremely scared to be contaminated with the virus by gay people, who they saw as engaging in "hedonist lifestyles" and "immoral practices" in the middle of the world-wide public health crisis (Gitzen and Chun 2021). Importantly, this public distress intensified at a time when the South Korean government was poised to ease its social distancing rules starting on May 6, since the outbreaks from the Daegu megachurch were under control by late April. The identity politics surrounding the Itaewon outbreak seemed to be somewhat alleviated as President Moon, ruling and opposing parties, news media, and civil organizations delivered concerns about the naming/blaming discourse in a united manner (Borowiec 2020).

One case from the Itaewon outbreak is particularly noteworthy. Described as a "twenty-six-year-old male cram school tutor from Incheon" in the South Korean media, an LGBTQ person visited nightclubs in the Itaewon district on May 2, 2020. Upon testing positive for the virus on May 8, in fear of being outed and losing his job and career paths, he lied to contact tracing investigators regarding his current employment status and whereabouts on that night and thereafter. The Incheon Provincial Court sentenced him to six months in jail on October 8. However, the social impact of this case resists any easily transparent prediction for an inclusive, tolerant South Korea full of individual freedom and mutual respect. On paper, the criminal punishment was not for his sexual orientation. But it should be noted that his motive for lying would have been differently perceived in the contact tracing investigation if the reality of low LGBTQ acceptance in South Korean Society was seriously addressed. In the South Korean news media at the time, the young cram school tutor was framed as guilty for putting his neighborhood and community in fatal danger of the virus by refusing to share knowledge about his visit to Itaweon with his students and neighbors. He became a victim not only of the virus but also negative public sentiment.

The IDCD Act (2021) bans the infected from "refusing, obstructing, or evading the epidemiological investigation without good cause; making a false statement or presenting false materials; intentionally omitting or concealing any fact" in epidemiological investigations (IDCD Act, 2021, Article 19, Section 3). Those who violate the law "shall be punished by imprisonment with labor for no more than two years or by a fine not exceeding twenty million won" (IDCD Act, 2021, Article 79). According to Korean legal scholar Kim Doosik (2021: 128), it is a rare and aggressive public health law in an advanced rule-of-law society that requires the victims of an infectious disease to sacrifice their privacy to the efficiency of contact tracing. Yet this potential unconstitutionality was rarely discussed in the wake of the outbreak. The double perils of

being socially stigmatized and legally penalized prevented many LGBTQ people from coming forward and admitting their visit to Itaewon, reinforcing intrusive state intercessions and mass surveillance strategies directed at the targeted group.

Once the coronavirus-infected persons were reported from Itaewon, authorities identified and notified more than 5,500 persons visiting Itaewon's nightclubs and bars. They were able to do so by accessing data such as phone numbers collected from the cell towers in the Itaewon district, as well as credit card use and other location-based service information. They also were granted access to public and private CCTV cameras in the streets and cars' DVR-recorded footage (M.J. Kim 2020). The data fusion surveillance was possible because South Korea created an exception in the IDCD Act (2021) that permits authorities to immediately access personal location information without a court warrant and the prior consent of the subject suspected of contracting an infectious disease (IDCD Act, 2021, Article 76-2, Section 2). Critical discussions of the criminalization of disease reveal that people infected with a contagious disease are confined to the penalizing space of social segregation to protect an uninfected, normal majority (Hoppe 2018; Peckham 2014; Dollar 2019; Weait 2019; cf. Jobin 2014). In these respects, the social impact of the cram school tutor's story is enabled first by the state of exception that justifies aggressive mass surveillance and second by the assumption that the LGBTO community as the abject subject deserves to be punished for merely existing. The therapeutic strategy of K-Quarantine requires their exposure for public security, thereby implausibly ensuring a virus-impenetrable discursive guard for the majority. The cram school tutor's act of lying cannot be properly contextualized as an autonomous speech act against self-incrimination codified in the Constitution of the Republic of Korea, only as an unacceptable act of virus transmission liability (Kim 2021; McNaughton 1960).

Conclusion

The years of the pandemic have witnessed the intensification of unequal social relations across the globe. Damages caused by the virus are not uniform to all members of a society. The highly polarized labor market in South Korea demonstrates that disease can never be isolated from societal questions. According to a recent survey (Park 2022), the rate of South Korean workers without paid sick leave is nearly triple that of workers in European Union countries; one out of three wage earners in South Korea worked remotely while they tested positive for COVID-19. COVID-19 cannot merely be thought of as a fatal contagious disease, but it is "a combinatory cascade of socio-viral co-pathogenesis that we call neoliberal disease" (Sparke and Williams 2022: 16). The case of the LGBTQ cram school tutor suggests that K-Quarantine must prove itself to be a form of health governance for those who have been economically precarious and socially vulnerable.

References

Aronowitz, Robert. 2015. *Risky Medicine: Our Quest to Cure Fear and Uncertainty*. Chicago, IL: University of Chicago Press. Borowiec, Steven. 2020. How South Korea's Nightclub Outbreak Is Shining an Unwelcome Spotlight on the LGBTQ Community. *Time*, May 14. https://time.com/5836699/south-korea-coronavirus-lgbtq-itaewon/ [accessed August 2, 2022].

Cha, Sangmi. 2020. South Korea Needs More Public Hospitals to Fight Infectious Diseases. *Reuters*, July 16,. https://www.reuters.com/article/us-health-coronavirus-southkorea-idUSKCN24H15X [accessed July 7, 2022].

Chancel, Lucas, Thomas Piketty, Emmanuel Saez, Gabriel Zucman, eds. 2021. *World Inequality Report 2022*. World Inequality Lab. https://wir2022.wid.world/www-site/uploads/2022/03/0098-21 WIL RIM RAPPORT A4.pdf.

Cho-Han, Jin-hee. 2020. Wae Corona-19 ro apeun saramdeuli joaesonghaeya hana (Why Do COVID-19 Patients Have to Be Sorry for Their Sickness?). *SisaIN*, March 30. https://www.sisain.co.kr/news/articleView.html?idxno=41554 [accessed April 6, 2020].

Choe, Sang-Hun. 2020a. New Covid-19 Outbreaks Test South Korea's Strategy. New York Times, September 2. https://www.nytimes.com/2020/09/02/world/asia/south-korea-covid-19.html [accessed July 13, 2022].

——. 2020b. Shadowy Church Is at Center of Coronavirus Outbreak in South Korea. *New York Times*, February 21. https://www.nytimes.com/2020/02/21/world/asia/south-korea-coronavirus-shincheonji.html [accessed July 11, 2022].

Choi, Won-ho. 2020. Hyeonjang euisa eui corona19 ilji (A Doctor's Memoir on Daily COVID-19 Treatment). SisaIN, April 1. https://www.sisain.co.kr/news/articleView.html?idxno=41653 [accessed May 5, 2020].

Dollar, Cindy Brooks. 2019. Criminalization and Drug "Wars" or Medicalization and Health "Epidemics": How Race, Class, and Neoliberal Politics Influence Drug Laws. *Critical Criminology* 27: 305–327.

- Fischer, Andrew M. 2020. The Dark Sides of Social Policy: From Neoliberalism to Resurgent Right-wing Populism. *Development and Society* 51 (2): 371–397.
- Gitzen, Timothy, and Wonkeun Chun. 2021. Pandemic Surveillance and Homophobia in South Kore. *Items: Insights from the Social Sciences*, September 23. https://items.ssrc.org/covid-19-and-the-social-sciences/covid-19-fieldnotes/pandemic-surveillance-and-homophobia-in-south-korea/ [accessed July 2, 2022].
- Hoppe, Trevor. 2018. Punishing Disease: HIV and the Criminalization of Sickness. Berkeley, CA: University of California Press. Infectious Disease Control and Prevention Act (IDCD ACT). 2021. National Assembly of the Republic of Korea. :aw number 17920.
- Jobin, Paul. 2014. The Criminalization of Industrial Disease Epidemiology in a Japanese Asbestos Lawsuit. In *Disease and Crime:*A History of Social Pathologies and the New Politics of Health, edited by Robert Peckham, 259–303. London: Routledge.
- Kang, Jaeho. 2020. The Media Spectacle of a Techno-City: COVID-19 and the South Korean Experience of the State of Emergency. *Journal of Asian Studies* 79 (3): 589–598.
- Kim, Doosik. 2021. Gamyeombyeong sang eui idong kyeongro chujeok gwa yeokhakjosa geobujoe e daehan bipanjeok geomto (A Critical Review on the IT-based Korean Epidemiological Investigation Support System Focusing on the Criminalization of Refusing the Epidemiological Investigation). *Beophak yeongu (Law Review)* 62 (1): 121–156.
- Kim, Jeong-hoe, Jeong-myeon Lee, and Yong-gab Lee. 2020. Gonggong euiryo hwakchung eui pilyoseong gwa jeolryak (The Necessity and Strategy for the Expansion of Public Health Facilities)Ω. National Health Insurance Service. Seoul, KR: https://www.medric.or.kr/Uploads/BLibrary/건강보험연구원%20Issue%20Report 공공의료%20확충의%20필요성과% 20전략.pdf.
- Kim, Jin-Seok. 2020. Bokji bunya pyeongga (Evaluations of the Moon Government's Welfare Policy). Public Forum: Nugureul wihan Hangukpan New Deal inga? (A New Deal for Whom?). Seoul, KR: People's Solidarity for Participatory Democracy. https://docs.google.com/document/d/1B ynaLiVHCM9WyxaExDJCparKuHadNCsHAtIYs7fADo/edit.
- Kim, Leo. 2008. Explaining the Hwang Scandal: National Scientific Culture and its Global Relevance. *Science as Culture* 17 (4): 397–415.
- Kim, Min Joo. 2020. Tracing South Korea's Latest Virus Outbreak Shoves LGBTQ Community into Unwelcome Spotlight. *The Washington Post*, May 11. https://www.washingtonpost.com/world/asia-pacific/tracing-south-koreas-latest-virus-outbreak-shoves-lgbtq-community-into-unwelcome-spotlight/2020/05/11/0da09036-9343-11ea-87a3-22d324235636-story.html [accessed July 7, 2022].
- Kim, Seung-kyung, and John Finch. 2002. Living with Rhetoric, Living against Rhetoric: Korean Families and the IMF Economic Crisis. *Korean Studies* 26 (1): 120–139.
- Kim, Su-jin, and Gi-tae Kim. 2020. Nuga apado shiji mothalka (Who Can Never Rest When Sick). *Public Health and Welfare Issue & Focus*, September 14. http://repository.kihasa.re.kr/bitstream/201002/36101/7/이슈앤포커스%20391호.pdf.
- Koo, Jeong-Woo. 2022. Global Perceptions of South Korea's COVID-19 Policy Responses: Topic Modeling with Tweets. *Journal of Human Rights* 21 (3): 334–353.
- Lee, Dong-ju, and Hye-young Jang, eds. 2022. Korona 19 jungsosangin sonsil bosang mit geunyung jiwon bangan jean toronhoe (Congressional Forum on Financial Compensation for COVID-19 Small Business Owners and Their Damages). April 12. Seoul, KR: http://www.peoplepower21.org/StableLife/1875431 [accessed April 12, 2022].
- Lee, Jeong-hun, Woo-yun Lee, and Byung-cha Ko. 2021. S. Korean Small Business Owners Respond to Ratcheting Up of COVID-19 Curbs with Plans to Strike. *Hankyoreh*, December 17. https://english.hani.co.kr/arti/english-edition/e-national/1023794.html [accessed July 7, 2022].
- Lee, Sang-Yi, Chul-Woung Kim, Nam-Kyu Seo, and Seung Eun Lee. 2017. Analyzing the Historical Development and Transition of the Korean Health Care System. *Osong Public Health and Research Perspectives* 8 (4): 247–254.
- Lee, Seow Ting, and Hun Shik Kim. 2021. Nation Branding in the COVID-19 Era: South Korea's Pandemic Public Diplomacy. *Place Branding and Public Diplomacy* 17 (4): 382–396.
- Lim, So Hyung, and Kristin Sziarto. 2020. When the Illiberal and the Neoliberal Meet around Infectious Diseases: An Examination of the MERS Response in South Korea. *Territory, Politics, Governance* 8 (1): 60–76.
- McNaughton, John T. 1960. The Privilege against Self-Incrimination. *Journal of Criminal Law and Criminology* 51 (2): 138–154. Moon, Jae-in. 2021. New Year's Address. Korea.net, January 11. https://www.korea.net/Government/Briefing-Room/Presidential-Speeches/view?articleId=193771&categoryId=111&language=A020101&pageIndex=24 [accessed June 13, 2022].
- National Human Rights Commission of Korea. 2021. Mandatory COVID-19 Tests for Foreign Workers Constitute Discrimination against Non-Citizens. March 31. https://www.humanrights.go.kr/site/program/board/basicboard/view?currentpage=1&menuid=002002001&pagesize=10&searchcategory=policy&boardtypeid=7003&boardid=7606456 [accessed September 23, 2022].
- Park, Jeong-yeon. 2022. Corona-19 hwakjin doaedo 'K-jikjangin' 30% neun geunmu hatda (30% of the Korean Workers on Remote Work When Tested Positive with COVID-19). *Pessian*, August 28. https://www.pressian.com/pages/articles/2022082816314701980 [accessed July 7, 2022].
- Park, Nathan. 2020. Fostering Trust in Government During a Pandemic: The Case of South Korea. *The Asia-Pacific Journal: Japan Focus* 18 (10): https://apijf.org/2020/14/Park.html.
- Park, Tae-woong. 2021. Nun tteoboni seonjinguk (Now, We Are a World-Class Country). Seoul, KR: Hanbit Biz.
- Peckham, Robert. 2014. Pathological Properties: Scenes of Crime, Sites of Infection. In *Disease and Crime: A History of Social Pathologies and the New Politics of Health*, edited by Robert Peckham, 121–163. London: Routledge.
- Porter, Doug, and David Craig. 2004. The Third Way and the Third World: Poverty Reduction and Social Inclusion in the Rise of 'Inclusive' Liberalism. *Review of International Political Economy* 11 (2): 387–423.

- Shin, Hyonhee, and Soohyun Mah. 2020. "Alone in the Dark": South Korea's Small Businesses Reel from New Virus Clampdown. *Reuters*, November 24. https://www.reuters.com/article/us-health-coronavirus-southkorea-idUSKBN2840GI [accessed July 7, 2022].
- Sparke, Matthew, and Owain David Williams. 2022. Neoliberal Disease: COVID-19, Co-Pathogenesis and Global Health Insecurities. *Environment and Planning A: Economy and Space* 54 (1): 15–32.
- Veit, Walter, Rebecca Brown, and Brian D. Earp. 2020. In Science We Trust? Being Honest About the Limits of Medical Research During COVID-19. *The American Journal of Bioethics* 21 (1): 22–24.
- Weait, Matthew J. 2019. Limit Cases: How and Why We Can and Should Decriminalise HIV Transmission, Exposure, And Non-Disclosure. *Medical Law Review* 27 (4): 576–596.
- Wilson, Amanda. 2021. Guilt Beyond Guilt: From Political Theory to Metaphysics with Herbert Morris. *The Modern Law Review* 84 (1): 89–117.
- YonhapNews. 2021. Doctors, Nurses, Volunteers Hailed as Hidden Heroes [sic] in Yearlong Fight against COVID-19. YonhapNews Agency, January 13. https://en.yna.co.kr/view/AEN20210113009600315 [accessed July 5, 2022].
- Yoon, Hong-sik. 2020. Roosevelt eneun itgo, Moon eui Hanguk pan New Deal eneun eopneungeot (What's in Roosevelt's New Deal, What's not in Moon's: A Critique of the Korean New Deal Project in Welfare State Perspective). Public Forum: Nugureul wihan Hangukpan New Deal inga? (A New Deal for Whom?). Seoul, KR: People's Solidarity for Participatory Democracy. https://docs.google.com/document/d/1B_ynaLiVHCM9WyxaExDJCparKuHadNCsHAtIYs7fADo/edit.