

PANDEMIC GOVERNANCE

Re-Thinking Rules and Institutions in Post Pandemic World

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Abstract

From time immemorial the epidemics affected the fate of states and their powers both short-term and long-term. How do leaders approach contagious diseases and protect people is a crucial test of governance: a tyranny can become emboldened during pandemics, increase its central power and control and make people obedient in fear of mass death; but also a democracy can dramatically fail addressing the emergency, letting many people die, and/or lock down businesses and produce long-term negative economic consequences. This article lists five tests that COVID presented, discusses whether democratic states did better, or worse, during the pandemic, and whether female leaders did better than male leaders. It argues that key factors to assess pandemic governance are competence and willingness to listen to scientists, quick and flexible decision-making, capacity and effectiveness of the bureaucratic machinery, and solid trust in the citizenry.

HISTORICAL VOYAGE

The Antonine Plague (165-180 AD) hit severely the Roman Empire. A high death toll (60-70 million) reduced the number of taxpayers, army recruits, businessmen, farmers. The increasing expenses and needs for the military could not be paid because of revenue decline, less production, fewer farmers, a lot of uncultivated land. Scarcity of crops caused steep price increase. Fewer craftsmen and shortage of workforce led to higher wages for survivors. Less merchants, traders and financiers caused profound economic disruptions and these, together with weakened army, contributed long-term to the decline of the Roman Empire.

The Justinian Plague (541-542 CE) weakened the Byzantine Empire militarily and economically. By 568 CE the Lombards defeated the Byzantine army in Italy, fracturing the peninsula, remaining split until the 19th century. In North Africa and Middle East the Empire could not stop the Arabic invasions. Decrease in population impacted economic and administrative structures. Less people meant fewer farmers to produce grain, causing prices to soar. Trade was disrupted, agriculture was devastated, resulting in decrease of tax revenues.

The Black Death (1346-1353) was highly lethal, about one-third of Europe's population died. The population in England in 1400 was half of 1300. 1,000 villages disappeared, trade suffered, wars were temporarily abandoned. Many workers died and their families lost means of survival. Landowners who used tenant farmers were also affected. Anti-Semitism intensified: Jews were blamed, many were killed or burned publicly by mobs. Wages for artisans increased, the Renaissance evolved, and the fine art was initially preoccupied with the tragedies and afterlife.

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The Russian Flu in 1889 was the first global pandemic for only four months hitting all parts of the world, a direct consequence of globalization: the railroads and transoceanic steamships were perfect for the spread of the disease. More than a million people, out of 1.5 billion on Earth, died only in the first wave.

The Spanish Flu (1920-1922) was very lethal, even for healthy 20-40 yr. old. No antibiotics existed to help. Control efforts included isolation, quarantine, personal hygiene, disinfectants, limitation of public gatherings, applied unevenly. It was detrimental to businesses, many were forced to shut down. Even basic services - mail delivery, garbage collection - stopped due to sick workers. Not enough farm workers to harvest crops. Even state and local health departments closed, hampering efforts to chronicle the spread and inform the public.

The Asian Flu H2N2 started in China in 1956, spread to Singapore in February 1957, reached Hong Kong by April, and the U.S. by June 1957. Estimates of worldwide deaths vary between 1 and 4 million, with WHO figure of about 2 million. Death toll in the U.S. about 70,000. Elderly were particularly vulnerable. In the last quarter of 1957 the economic growth on an annualized basis was -4% and in the first quarter of 1958, -10%, the largest decline in the post WWII history. A vaccine was introduced in 1957 and the pandemic slowed down. After a second wave in 1958 the H2N2 became part of the regular seasonal flu.

The HIV/AIDS was first recorded in 1981. No vaccine could be found, but successful treatment was developed to sharply reduce the mortality and the total death toll has been kept at below 35 million people worldwide. The COVID-19 started in Wuhan, China in December 2019 and spread quickly. At the time of writing (December 2020) 1.75 million died globally, but with several vaccines developed time-efficiently due to a new RNA technology and a high number of volunteers in trials, the virus has been successfully contained. Its economic and political effects are still to be estimated.

FIVE TESTS OF COVID-19

The sudden challenge of the COVID-19 pandemic presented simultaneously: (1) a test of leadership; (2) a test of international co-operation, (3) a test of medical capacity; (4) a test of human-human relationship and (5) a test of human relationship with nature. The first test will be addressed in detail further in this paper, but before that let's briefly go through the other four tests.

The second test – international co-operation - has been problematic and even well-established organizations, such as the European Union, struggled to agree on a common approach. To control a pandemic both domestic and international actions are needed and the two should be coordinated and exorcized complementary. Some organizations (G-20, Médecins sans Frontières) made an excellent effort, but the World Health Organization (WHO) – the United Nations organ specifically entitled to tackle exactly public-health emergencies – came under criticisms for delays and inconsistencies² further aggravated by the US Administration's decision to stop financing it, significantly jeopardizing the global health governance. The WHO has broad responsibilities, its key guiding document is the International Health Regulations, revised substantially in 2005, covering 196 countries and aimed to prevent, protect against, control and provide a public health response to international spread of diseases in ways that are commensurate with public health risks, and without unnecessary interference with international traffic and trade. Under these regulations, the WHO is

² Those are not new, concerns have been expressed over several years, see Francesco Checchi et al., 'World Health Organization and Emergency Health: If Not Now, When?' *British Medical Journal*, 2016, <https://www.bmj.com/content/352/bmj.i469.long>.

responsible for deciding when a particular situation should be declared a public-health emergency of international concern.

The third test - medical capacity – proved insufficient in many countries,³ but it is worth acknowledging the amazing effort of many laboratories around the world to undertake innovative research, apply the latest technological advances, develop, produce, test and approve safe and accessible vaccines in a remarkable short time of less than a year. The speed of doing fast within a year what usually takes two or more years can be explained with three factors: innovative methods and technology used; huge number of volunteers ready to participate in trials; and international agreements to share data and experimental results. This remarkable scientific achievement needs to be followed with governance measures how to transport, store, distribute and apply vaccines to billions of people.

The fourth test – human-human relationship – presented some incredible stories of empathy, solidarity, volunteerism and human assistance. Successful synchronized efforts to fight the virus and maintain the health and wellbeing of people have been undertaken, and one can praise and commend the heroic commitment of medical staff to work tirelessly around the clock. Many doctors and nurses lost their life fighting the new disease, and these sacrifices will be remembered. It is also worth noting large donations of money, protective equipment, medicines, food, etc. People around the world, students in particular, volunteered their time and skills in the difficult circumstances. Many individuals donated blood to produce plasma to treat those in need. However, COVID-19 also exposed the ugly side of human behaviour, exacerbating economic, political and social inequalities, discrimination and injustices towards vulnerable and marginalized. Conspiracies have spread, tensions increased in places where populism, xenophobia, nationalism and hatred thrived. Some infected faced a stigma attached to contracting the virus, as if a direct result of their carelessness. Minorities suffered disproportionately, for example the African American community in the U.S.A. was heavily hit. In sum, COVID-19 became a test of human-human relationship with both instances of solidarity and instances of cruelty. The entire breadth of human behaviour from the highest high to the lowest low was on display during the pandemic.

The fifth test - the human relationship with nature – is twofold: on one hand, people need nature to exercise and improve their physical and mental health, crucially important against diseases; on another hand, through improper interaction with nature, humans alter ecosystems, encroach into wildlife and contribute to emergence of zoonotic diseases, such as COVID-19. This author has already written on this test⁴ and how land-clearing for agriculture and human settlements resulted in squeezing and mixing species from different habitats, creating excellent opportunities for viruses to pass from one animal to another, and to humans. Biodiversity losses and forest fragmentation reduce diversity of vertebrates and abundance of generalist species. On the opposite, biodiversity gains improve human health because of the ‘dilution effect’ reducing both the relative density of animals serving as natural reservoirs for pathogens, and the population density of pathogen vectors, resulting in fewer encounters between vectors and animals they infect⁵. Some governments – Gabon - banned the

³ See the review of how lead countries according to the newly (2019) created Global Health Security Index performed during the first wave of COVID-19 pandemic in: Krassen Stanchev, Health Security, in: Human Security in Central Europe, edited by: Marcin Zaborowski, Co-authored by: Spasimir Domaradzki, Kerry Longhurst, Krassen Stanchev and Marcin Zaborowski, A Visegrad Insight Report @visegradinsight <https://visegradinsight.eu/human-security-in-central-europe/>

⁴ Vesselin Popovski, *Covid-19 and Environmental Sustainability*, Special Article 4, Japan Spotlight, November-December Issue, 2020, https://www.jef.or.jp/journal/pdf/234th_Special_Article_04.pdf

⁵ Pearson, R. M.; Sievers, M.; McClure, E. C.; Turschwell, M. P.; Connolly, R. M. "[COVID-19 recovery can benefit biodiversity](#)" in *Science* 368 (6493), 22 May 2020, pp. 838–839

consumption of bats and pangolins to stop the spread of zoonotic diseases. Others – Myanmar - deregulated wildlife hunting and breeding, and this may create new zoonotic diseases. In Pakistan the unemployment caused by COVID-19 facilitated the recruitment of labour for ‘Ten Billion Tree Tsunami Campaign’, aimed to plant 10 billion trees, estimated global annual net loss of trees, over next 5 years⁶. Strengthening environmental protection of green spaces will be vital, but only if a healthy balance is found between using resources and protecting nature. The argument for biodiversity conservation and recreation is easier to communicate, if the full range of benefits are considered, including the contributions to human health. This author assessed also the initial impact of COVID-19 on climate change⁷ and advocated a strategy to ‘build back green’, prioritizing the implementation of sustainable development goals and combating climate change in parallel with public health and economic recovery. Doctors say ‘better to do two surgeries with one anaesthetic’: we should treat public health and climate change as a joint task, we cannot afford the luxury of a temporary halt on climate change mitigation during the post-pandemic recovery.

The first test – leadership – has been similarly problematic, as the other four. Mitigating pandemics is first and foremost a task for governments. Fareed Zakaria observed that ‘conflict made governments increasingly powerful and effective’.⁸ Adam Roberts wrote that ‘history reveals protection from epidemics as an evolved attribute of statehood’.⁹ The state responsibility for pandemics dates back to the fourteenth century, when city states in the Italian Peninsula and the Adriatic began to develop systems for taking administrative measures against plagues. Samuel Cohn in his book ‘*Culture of Plagues*’ observed that weakening of state formations is not a consequence of largescale mortalities, and exemplified this with 16th century Italy, where during the bubonic plagues some of the measures taken included preparation of adequate resources, ascertainment of clergy and health workers to risk their lives for aiding the communities. This led to unfolding of the Counter-Reformation church and the emergence of secular states. The pandemic governance of the 16th century, by laying down reasonable and effective policies for containing plagues, resulted in exaltation of leadership and encouraged absolutist authorities¹⁰.

Curiously, in the 21st century we continue to use medieval methods to overcome plagues, such as quarantining, lockdowns, social distancing, face masks and sanitization. While viruses do not respect borders, their spread and their chances of survival have long depended greatly on the laws, policies and acts of states. However, not all states are up to the job. Their effectiveness in addressing pandemics does not appear to turn on what position they occupy on the democratic– authoritarian divide. The key factors are rather the competence of leaders, their capacity to make quick decisions, willingness to listen to scientists, effectiveness of their bureaucratic machinery and the degree of trust they continue to enjoy from the citizens.

A question arises whether to judge effective leadership based on policy measures implemented in unusual, even abnormal, times of pandemics; because if so, this can make an absolutist authority the preferable choice. A pandemic can be seen as a conflict with nature that a state has to deal with, revealing whether it transforms either into a state with strong governments, or a state with diminishing governments, that lose the trust of its subjects. From Thucydides in 400 BC into the present days epidemic governance has affected significantly the fate of states, both short-term and long-term, and the danger of leadership becoming

⁶ ["As a 'green stimulus' Pakistan sets virus-idled to work planting trees"](#) in *Reuters*, 28 April 2020

⁷ Vesselin Popovski, “Missing Climate Action: Unfulfilling Sustainable Development” in Vesselin Popovski and Narinder Kakar (eds), *Fulfilling Sustainable Development Goals* (Taylor & Francis, 2021)

⁸ Fareed Zakaria, *Ten Lessons for a Post-Pandemic World* (W. W. Norton & Company 2020) 39.

⁹ Adam Roberts, ‘Pandemic and Politics’, in *Survival*, Volume 62, Issue 5, 2020, p. 13 <<https://doi.org/10.1080/00396338.2020.1819641>> accessed 11 December 2020.

¹⁰ Samuel K. Cohn Jr., *Cultures of Plague: Medical thinking at the end of the Renaissance* (Oxford University Press 2010) 299-301.

emboldened during pandemics, increasing central state intervention and making people obedient in fear of mass death.

DOES DEMOCRACY MATTER?

It is not easy to ascertain which particular political regimes are better or worse at containing plagues. One of the reasons is that in the present time countries cannot be classified into sharply defined categories. While we do have different versions of democracy, parliamentary and presidential types, we also have democracies that have taken shape of semi-democracies or illiberal democracies¹¹.

Plato in *The Republic* delineated five basic types of political regime in the order of their efficiency and competency in various aspects of holding a strong government for the betterment of people. **Aristocracy**, he believed, to be the finest of regimes, led by philosopher-king, who would be scholarly cultivated to lead a state following the best interests of its subjects. Such a leader would not own property for any kind of personal gain and would only govern for the furtherance of the society. When such an aristocracy is debased, it may turn into a **timocracy** wherein only land-owning men could vote and men that were in power would not be as well-educated as they would be in an aristocracy. Due to its egocentrism, a timocracy would be degenerated into an **oligarchy**, the rule of the rich. Oligarchy will then degenerate into a **democracy** where freedom is both a supreme good, but can also be a slavery, and as the lower classes get bigger and more powerful, they can break the law and lead to anarchy. Plato considered aristocracy to be the best regime, and oligarchy and democracy to be menacing regimes as such governments act purely in furtherance of own interest and advantage rather than the greater interest of the society. While Plato believed democracy to be volatile, the worst kind of regime that it can deteriorate into would be **tyranny**. Plato's view on political regimes can be an understanding of how political regimes are unstable and are always susceptible to change¹².

Martin Loughlin discussed the degradation of political regimes in the context of constitutional democracy and noted that although constitutional democracy culminated in 2006-2011, it has only deteriorated since.¹³ The idiosyncrasy of such deterioration is that constitutional democracies are not 'being overthrown by *coup d'état* or other type of fundamental collapse'... they have being degraded and 'such deterioration is due to an increase in 'defective democracies', defined as 'regimes that retain the formal institutional trappings while flouting the norms and values on which constitutional democracies are based'.¹⁴

There is a nexus between Plato's explanation of degradation of political regimes and the concept of 'defective democracies', moreover in the present context for the purpose of determining the interests of the political leaders while dealing with pandemic crises. Researchers have placed governments within the spectrum of democracy or tyranny for the purpose of understanding how a particular state dealt with Covid-19, even if accepting the difficulties to define sharply these categories. While a political regime in itself may not be a definitive parameter, the leadership roles executed within these regimes would have significant effect on the management of the pandemic. The reason behind such a postulate is the observation that while some democracies have battled the pandemic impressively and effectively, others have managed it in the worst possible manner. Yet the COVID-19 crisis

¹¹ Fareed Zakaria, *The Future of Democracy: Illiberal Democracy at Home and Abroad* (W.W. Norton 2007); Yascha Mounk, *The People v. Democracy: Why our Freedom is in Danger and How to Save It?* (Harvard University Press 2018)

¹² For further details and analysis: Steven Cahn, *Classics of Political and Moral Philosophy* (Oxford University Press 2002)

¹³ Martin Loughlin, 'The Contemporary Crisis of Constitutional Democracy' in *Oxford Journal of Legal Studies* Volume 39, Issue 2, 2019.

¹⁴ *Ibid* pp. 436-437.

continued to have illiberal consequences, in over 60 countries and territories, it was the basis for postponing national and local elections¹⁵. In some places, the emergency legislation suspended a range of constitutional procedures and citizen rights, Adam Roberts presented in detail two instructive examples - Hungary and Hong Kong¹⁶.

In a study at Oxford University, Frey, Chen and Presidente examined the correlation between policy measures taken by governments across 111 countries and levels of geographic mobility in these countries respectively. Various methods were used, the basic dataset being the Oxford COVID-19 Government Response Tracker to compare the policy responses of governments of selected countries, and using Google's Community Mobility Reports to retrieve data on movement and travel. The study found that policy responses of governments of autocratic regime were more stringent than that of democratic governments, as the former imposed stricter lockdowns and depended more on contact tracing. However, the findings also reveal that while autocratic governments did lay down comparatively stringent policies, they governments did not succeed in reducing mobility. In fact, it was observed that democratic governments were more effective in reducing geographic mobility despite having less stringent policies than autocratic governments. It is important to note that, at the same level of policy stringency imposed, democratic governments were more effective in reducing geographic mobility.¹⁷ The study acknowledged the many variables that come into play and one such variable is the state capacity to impose lockdowns and implement policy measures in response to a crisis being crucial. Analogously, deep-rooted cultural traits of a particular state can also act as a variable in assessing the effectiveness of policy measures imposed.

Another study, *Corona politics: The cost of mismanaging pandemics*¹⁸ helps to understand how decisions, taken by leaders for managing the pandemic, serve as a test for respective governments. While the Oxford study examined the correlation between stringency of policy responses and level of geographic mobility, this one broadly examined how policy responses affect approval ratings. A comprehensive, high-frequency dataset of 35 countries included looking into the growth rate of the infection, policy stringency and government approval rate. One finding was that increase in number of infections did act as an important variable, people were more affected by the increase in infection rate compared to resulting deaths. What is interesting is that approval rates of governments reduce not only because of high number of cases, but rather by poor policy choices to manage the pandemic. The relationship between case growth and approval is only significant when rising infection numbers coincide with loose policies. This suggests that leaders are evaluated by their policy choices, and not only by the consequences of the pandemic. Another finding was that higher political support from public was lent to governments that prioritize health outcomes over economic outcomes. Hence, various factors, such as quality of policy measures levied, effort made by governments to contain the infection spread and their priorities determine the quality of political leadership in managing the pandemic.

In sum, there are various factors, including but not limiting to leadership, policy decisions and cultural traits, that play role; and the pandemic did act overall as a crucial test of political leadership. Although every country is facing the same crisis, it is the policy measures laid down by the leaders to deal with the pandemic that affect the infection rate and the death rate. Furthermore, the course of action for implementing the policy measures is also acting as a test

¹⁵ See International IDEA Institute for Democracy and Electoral Assistance, 'Global Overview of COVID-19: Impact on Elections', 18 March 2020, <https://www.idea.int/news-media/multimedia-reports/global-overview-covid-19-impact-elections>.

¹⁶ Adam Roberts, note 7 above, pp. 34-35

¹⁷ Carl Benedikt Frey et al, 'Democracy, culture, and contagion: Political regimes and countries' responsiveness to Covid-19' (2020) 18, Covid Economics: CEPR Press 222.

¹⁸ Helios Herrera and others, 'Corona Politics: The Cost of Mismanaging Pandemics' (2020) 50 Covid Economics: CEPR Press 3, 5.

of political leadership. Fareed Zakaria in his book *Ten Lessons for a Post-Pandemic World*, wrote: ‘What matters is not the quantity of government but the quality of leaders, their policy decisions and measures to deal with a crisis that shape the government and the trust of people’¹⁹. Within democracies, countries that dealt with the pandemic effectively comprised of some big governments and some small governments. If the size does not matter, the common elements were how competent, well-functioning and trusted were these governments. Zakaria also deliberates as to why did some of the biggest democracies with leading economies like the U.S. and the U.K. fail to deal with the pandemic effectively. The paradox is that the U.S. is one of the richest countries with leading industries and resources that many countries would have been fortunate to have while dealing with a pandemic, but all these advantages by the time the virus hit the U.S. ‘seemed like a cruel joke’.²⁰ He explained that part of the responsibility of mis-handling the pandemic does fall on President Trump, but part of the blame also falls onto the entire government. There were missteps across various agencies of the government, and ‘these ills of government are an American, not a democratic disease’.²¹

Many democracies managed the pandemic effectively: New Zealand, Germany, Taiwan, South Korea and Australia. Curiously Greece managed the pandemic comparatively well despite being known for its bureaucracy and lack of trust in government. Zakaria stated that Greece ‘was led by an able, technocratic leader who believed in science and good management. Sometimes the tone from the top makes all the difference.’²² This ‘tone from the top’ is crucial in managing the pandemic – and this includes: adequately communicating the risks of the infection; gaining trust of public for diligently following particular course of actions; respecting medical staff and all individuals risking their lives to aid the rest of the people; being a role model to follow necessary protocols. The leaders should have set in motion not just robust statements and economic consequences of their decisions, but also exemplary roles and cautionary tales of learning the lessons and ability to lead in a post-pandemic era.

Democracy does matter, but it is not everything that does matter. The bureaucracies of the democracies, their economies, deep-rooted cultural traits, the nature of the markets, the ideologies, each and every layer of these, and most importantly the leaders of these democracies - all of them do matter in pandemic governance.

DOES GENDER MATTER?

Why were the female leaders more effective and successful in managing and containing the COVID-19 pandemic? There has been many discussions on the policy responses and the method of execution of these policies taken by female leaders and it has been covered to a great extent on media and in popular debates. The Chancellor of Germany, Angela Merkel, and the Prime Minister of New Zealand, Jacinda Ardern, have primarily been the focal point of this discussions.

As female national leaders led their states into effective managing and controlling the COVID-19 pandemic, researchers examined whether gender matters while dealing with the crisis. Garikipati and Kambhampati²³ carried out a study to determine how does gender affect the COVID-19 outcomes in terms of adopted policy measures and managing the spread of the

¹⁹ Zakaria (note 8) at 28.

²⁰ Ibid. 33

²¹ Ibid 34.

²² Ibid 35

²³ Supriya Garikipati & Uma Kambhampati, ‘Leading the Fight Against the Pandemic: Does Gender ‘Really’ Matter?’ (2020) <<https://www.reading.ac.uk/web/files/economics/emdp202013.pdf>> accessed 3 November 2020.

infection effectively. They started with all countries that ‘Worldometer’ provides data on, but some fell out because no matching data from other sources was found. The study ended up with 194 countries of which 19 have female leaders. These countries were very different - as small as Aruba and Saint Martin, and as big as Bangladesh and Germany. The basic dataset for the study included population size, number of cases over the age of 65, population in urban agglomerations and baseline estimated GDP. In addition, health expenditure, tourism numbers and gender-inequality index were also included. The authors added the gender-inequality index because according to them, if a country is liberal and progressive as far as gender roles go, then it might have a different attitude towards the ways in which it would deal with a pandemic. As the number of countries led by female leaders are comparatively low, a modelling technique of nearest-neighbour matching was used, based on the dataset of each female led country being matched with its nearest neighbour male led country.

The findings of the study showed that COVID-19 deaths were significantly lower in female led countries. According to the authors, the difference is that female led countries went into lockdown significantly before male led countries, and their leaders were better at communicating specific measures, engaging with science in more details and having clear cut strategy.²⁴ The literature on behavioural differences between male and female leaders has established a general perception that female decisions are more affected in terms of risk aversion. When the decisions concern human lives, or the economy, female leaders are more risk averse, than males, respectively. Interdisciplinary research suggests that domain differences do matter in risk aversion. Neuroscience literature addresses how there are neurobiological underpinnings for the sex differences that we find in feelings of empathy. These cannot all be concluded as merely being a cultural corollary of socialisation, still females are more empathetic than males, and this characteristic explains why female led countries responded earlier and better to save lives as opposed to saving economies.

Only about nine percent of the countries worldwide are led by women, a rather small sample to conclude on definite findings, still a clear difference has been observed in the styles of leadership maintained by females and males. Female leaders seem to be much more communicative and adopted participatory style of leadership, compared to men. While men adopt more task-oriented type of leadership, women adopt much more interpersonal styles of leadership. Angela Merkel, Jacinda Ardern and Norwegian Prime Minister Erna Solberg are good examples of participatory style of leadership.

We are still in early stages of pandemic governance assessment, and it is better to refrain from stereotyping male and female leaderships through popular opinions. Still, it is possible to keep an open mind and promote communicative and participatory styles of leadership, be it under male or female leadership. Amartya Sen stated: “Tackling a social calamity is not like fighting a war which works best when a leader can use top-down power to order everyone to do what the leader wants – with no need for consultation. In contrast, what is needed for dealing with a social calamity is participatory governance and alert public discussion”.²⁵ Different communities may have different priorities and concerns, “some – the more affluent – may be concerned only about not getting the disease, while others have to worry also about earning an income (which may be threatened by the disease or by an anti-disease policy, such as a lockdown), and – for those away from home as migrant workers – about finding the means of getting back home. The different types of hazards from which different groups suffer have to be addressed, and this is much aided by a participatory democracy”²⁶.

²⁴ Ibid.

²⁵ Amartya Sen, ‘Overcoming a Pandemic May Look Like Fighting a War, But the Real Need Is Far From That’ *Indian Express* (India, 8 April 2020), <<https://indianexpress.com/article/opinion/columns/coronavirus-india-lockdown-amartya-sen-economy-migrants-6352132/>> accessed 16 October 2020.

²⁶ Ibid.

LEADERSHIP DOES MATTER

Francis Fukuyama observed “Major crises have major consequences, usually unforeseen. The Great Depression spurred isolationism, nationalism, fascism, and World War II, but also led to the New Deal, the rise of the United States as a global superpower, and eventually decolonization. The 9/11 attacks produced two failed American interventions, the rise of Iran, and new forms of Islamic radicalism. The 2008 financial crisis generated a surge in anti-establishment populism that replaced leaders across the globe”²⁷.

What will future historians say about the leadership during COVID-19? Policy responses adopted by leaders during the pandemic will define the progress of their economies, culture and the sustainability of all aspects pertaining to a healthy and prosperous lives of their people. It is apparent that while democracies do have a positive impact in the management of the pandemic, what matters more is efficient leadership and efficient bureaucracy. This explains why some of the biggest democracies of the world have failed to effectively take charge of the COVID-19. Three biggest democracies in the world – India, the U.S. and Britain - failed profoundly to protect their large countries, whereas China, a non-democracy, succeeded to contain the virus and protect its 1.4 billion people. Paradoxically, India and the U.S. for all these agonizing months in 2020 repeatedly tried simply to put all blame on China, instead of adopting effective strategies to stop the spread. Therefore, it would be inefficacious to glorify democracy amidst the pandemic over authoritarian regimes or any other kind of hybrid regimes as international cooperation is more crucial now than ever. Efficient leadership across all nations needs to steer the world towards a better and healthy future. One can only hope that the pandemic will bring the realisation of what kind of future leaders we need.

Instead of dismissing the WHO, it needs to be fully supported and empowered as an indispensable multilateral public health institution. Recommendations of independent review bodies, such as the Global Preparedness Monitoring Board and the Independent Panel on Pandemic Preparedness and Response, need to be implemented. Governments must turn the disruption of economic, social and political models engendered by COVID-19 into a catalyst for wider pro-health reforms - including fresh approaches to transport, housing, employment and equality. COVID-19 has shown we are all only as safe as the weakest link in the human chain. It is only by embedding solidarity and justice in public health policies that the world can truly overcome the crisis and face the future with confidence.

One certain consequence of COVID-19 is that it brought the U.S. reputation to a major decline. The trend began long ago with the Vietnam Wars and gained momentum with the prolonged conflicts in Afghanistan and Iraq. But Trump’s willful alienation of allies and international institutions has accelerated and intensified the problem. With his serially idiotic involvements with COVID-19 he failed miserably to look after his own country and people. Simplistic verbal attacks on China and the WHO have shown an inability to temper disagreement with basic civility and attention to facts. In a long line of major missteps, Trump’s crowning failure arguably was his complete abdication of any domestic and international responsibility.

The long-term effects of epidemics have been huge. Dealing with them has always been difficult and remains so today. The history of epidemics suggests that the present crisis is

²⁷ Francis Fukuyama, ‘The Pandemic and Political Order’ *Foreign Affairs* (July/August, 2020) <<https://www.foreignaffairs.com/articles/world/2020-06-09/pandemic-and-political-order>> accessed 3 November 2020.

likely to have a long tail, and that other epidemics are to be expected. The scope of the threat is undoubtedly international – COVID-19 spread fast around the globe largely because of modern means of travel – and vigorous international collaboration among medical professionals has been one redeeming feature of this crisis. The specialised roles of international bodies such as the WHO remain essential. Yet the very scale and expense of the tasks faced, the continuing suspicion among states and the tendency of great-power disagreements to be dragged into such organisations make them unable to assume overall responsibility for managing pandemics.

CONCLUSION

The pandemic governance necessarily involve the hazard-strewn task of goal-setting. In the case of COVID-19, the capacity of the virus to stage a second rise in cases after it had been beaten in a particular area is one of many reasons for caution in promising and claiming successes. Complete worldwide elimination of the virus should of course be an ultimate goal, but is almost certainly unrealistic in the short or medium term. In the meantime, the main aims must be to use a wide range of measures to reduce the circulation of the virus among the population and minimise the susceptibility of the population to it. These include old-fashioned quarantines as well as the sophisticated modern development of vaccines.

Trust in leadership is essential because struggles against infectious diseases necessitate a degree of individual sacrifice for the social good. If people are required to stay indoors for months, to socially distance, to deploy their skills on the front line or to accept a vaccine despite a barrage of hostile internet propaganda, they need a sense that the advice they are getting comes from an honest source, is given for good reasons and contemplates a plausible goal. While the war analogy is tempting, it does not sit well with struggles against pandemics because the process of coping with virus-laden threats is necessarily de-centralised and unspectacularly administrative and social.

The process of ending pandemic lockdowns and other measures may yet prove more socially divisive than their initiation. It requires difficult and controversial judgements about whether and how to relax certain measures and risks involved. Within communities, care-home staff or schoolteachers may feel it is unsafe to resume their normal pattern of work without access to certain evidence, protective equipment, test procedures and other support. There may be fundamental disagreements as to how policies and institutions need to change in light of pandemic experiences. In the international context, disagreements may arise when one country's action, or refusal to act, poses risks for other states and their citizens. Notwithstanding the obstinacy of some leaders, there is no denying the pressing need to coordinate and harmonize policies between all levels of government and across borders.

COVID-19 brought a sense of shared understanding that mankind is not infallible and that nature cannot be abused. The humility and gratefulness for all that we have in times of adversity gives us an opportunity to build back better in a way that is just, kind and equal for all humans.

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