



Preparing democracies for pandemics, emerging questions in view of COVID-19

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The coronavirus pandemic has not, so far, been an advertisement of the healthful effects of democracy. Several of the countries that initially acted quickly to contain the coronavirus, SARS-CoV-2, are democracies, such as New Zealand, South Korea, Germany and Uruguay. Yet, the same is true for many of the countries that have struggled mightily to respond to and mitigate this pandemic, including Brazil, India, the United Kingdom, and the United States.

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Health benefits of democracies

The mixed performance of democracies in the coronavirus pandemic represents a departure from their success in confronting other health challenges, relative to other forms of governments. Over the past 25 years, many studies have identified links between democracy and lower mortality rates in infants or children younger than 5 years, or with longer average life expectancy at birth.¹ More recent research has extended these findings, concluding that democracy is associated with longer adult life expectancy (at age 15) and reduced mortality from the diseases such as cardiovascular diseases and transport injuries that have not been heavily targeted by foreign aid and require healthcare delivery infrastructure.² Wigley et al. conclude that ‘autocratizing’ nations—those undergoing democratic erosion—have made less progress on universal health coverage and had higher out-of-pocket spending per capita than would have occurred absent ‘autocratization’.³

¹ McGuire JW. Democracy and population health. Elements in the politics of development. Cambridge: Cambridge University Press. June 2020. <https://doi.org/10.1017/9781108778725> (accessed 14 Jun 2020).

² Bollyky TJ, Templin T, Cohen M, et al. The relationships between democratic experience, adult health, and cause-specific mortality in 170 countries between 1980 and 2016: an observational analysis. *The Lancet* 2019;393:1628–40. doi:10.1016/S0140-6736(19)30235-1.

³ Wigley S, Dieleman JL, Templin T, Mumford JE, Bollyky TJ. Effect of autocratization on universal health coverage: a synthetic control study. *BMJ*.

Explaining the different performance of democracies during the pandemic

So what explains the underperformance of many democracies in this coronavirus pandemic? Part of the answer may start with a breakdown of the mechanisms by which democracies improve health.

The standard explanation for the healthful effects of democracies is that, when enforced through regular, free, and fair elections, governments have a greater incentive than autocracies to provide health-promoting resources and services to the wider population.⁴ Yet, a survey conducted by Acharya and colleagues of voters in India, the United Kingdom, and the United States found that the respondents did not assign blame to the incumbent government for the spread of the pandemic, even though most considered health to be an important policy area and felt that the government bore some responsibility for health generally.⁵ This result suggests that the public in these countries may not have held governments accountable for containing and responding to a pandemic to the same degree as chronic health challenges, which perhaps reduce the incentives of governments to invest in pandemic preparedness. Perhaps the lived experience of this pandemic and the differences in nations' successes in confronting the pandemic will shift public expectations in this regard, now that many Western democracies have experiences living with outbreaks.

Another explanation for the links between democracy and health generally is the greater freedom of expression that exists in this form of government. Democracies are more open to feedback from a broad range of interest groups, more protective of media freedom, and might be more willing to use that feedback to extend and improve effective essential health services. Yet, Wilson and Wisongye suggest that social media disinformation campaigns may be exploiting openness of democracies and eroding their health benefits.⁶ Findings on the effectiveness of social media misinformation and disinformation campaigns in increasing the vaccine hesitancy suggest that a similar phenomenon may be contributing to public opposition in some democracies to mask-wearing, social distancing, and other non-pharmaceutical interventions.

In addition to these structural challenges, many countries outside of Asia, including many democracies, did not have prior exposure to previous coronavirus threats (e.g., SARS and MERS) and responded late to the World Health Organization (WHO) declaration of public health emergency of international concern at the end of January 2020. Most of the nations in the regions that were hit after the pandemic spread beyond Asia (Europe, North America, and South America) did not begin to take the virus seriously until mid or even end of March, after the WHO Director General described the situation as a pandemic and cases in Italy began overwhelming an overburdened health system. By this point, community transmission of the virus had been established in much of these regions. Once leaders realized the scope of the health and economic threat, they were forced to act quickly and without a clear road map.

⁴ Sen A. *Development as Freedom*. New York: Anchor Books 1999.

⁵ Acharya A, Gerring J, Reeves A. Is health politically irrelevant? Experimental evidence during a global pandemic. *BMJ Global Health*.

⁶ Wilson SL and Wisongye CS. Social Media and Vaccine Hesitancy. *BMJ Global Health*.

These circumstances exacerbated the pre-existing deficiencies in many political systems and their leaders, democracies and autocracies included. As Prah Ruger writes, a responsive government elected in free and fair process is not enough in a pandemic: “Deep core values underlie nations’ policies and practices during and between times of crises. Just structures that foster security and express care and compassion are essential.”⁷ Governments and leaders that have been unable to encourage public trust and social solidarity have struggled.

Difficult balancing act

Even in good times, the role of public health involves a difficult balancing act between safeguarding the health and safety of individuals and communities, while not restricting individual rights and freedoms more than necessary to fulfill those health objectives. Often, the debates become politicized along party lines. In a pandemic, the balance shifts to respond rapidly to the increased danger to public health and general welfare and must adjust to incorporate emerging scientific evidence, particularly in the present case. In a period of scientific uncertainty regarding a novel virus, strategies had to be implemented with speed and adapted, sometimes several times. Few nations had planned or prepared the public for the possibility of an extended lockdown in a pandemic. Freedom of movement, the right to demonstrate in the streets, to meet up with others, and to remain anonymous, was curtailed in many nations. How much for granted citizens have taken these rights only became clear when they were restricted—no holidays abroad, no restaurant visits, no family get-togethers, no worship. In many countries, an important debate about human rights emerged—especially as governments introduced the increased use of digital tracking measures, expected citizens to leave their contacts with shops and restaurant owners, and had the police control quarantine measures. Political communication and building of trust became central as extreme measures as well as changes in approaches had to be communicated to an increasingly sceptical public.

But the issues went even deeper—beyond individual freedom to social solidarity. As the pandemic highlighted the inequalities present in many societies, questions of legitimacy and lack of trust arose in relation to a political system that had allowed such disparities to fester over decades. Ingrained racism, gender inequalities, and ethnic discriminations were brought to the fore with stark clarity. Wealthy countries like Switzerland and Germany, as well as the established Nordic welfare states, have provided for their citizens and kept unemployment and poverty at bay. Not so for some of the nations in which social protections had never fully recovered from the consequences of the 2008 financial crisis.

The very processes of democratic governance came to a halt: In some countries, elections and referenda were postponed, and there was increasing concern about the sidelining of parliaments in decision-taking. Most seriously, the pandemic has been an entry point for autocratic governments to change laws and introduce restrictions. Populism and nationalism have fed off the threat of the virus, and many recommendations on how to protect oneself and others were politicized—the approach being to question the reliability of science and information.

⁷ Ruger JP. Democracy, Health and Justice. *BMJ*.

Democracy remains, according to polls, the preferred form of government on all continents, but measures must be undertaken to better “pandemic proof” these political systems.⁸ This is critical because the COVID-19 pandemic is testing our democratic way of life.

Making democracies "pandemic proof": No silver bullet, but hard work

There is little empirical support for a single characteristic of government or societies—neither women leaders, populism, more equal economies, nor universal health coverage—being a potential silver bullet that ensures democracies will perform better in a future pandemic.^{9,10} German Chancellor Angela Merkel in her television address on March 19, 2020, emphasized that she was speaking as the head of a democratic government in which its citizens “do not live by coercion, but by shared knowledge and participation.”¹¹ This vision of democracy only works in crisis if it is promoted in normal times. Our freedom, our democratic constitutionalism, and our democratic way of life do not come free of charge. The pandemic reminds us that personal responsibility and private initiative can only thrive if we mutually recognize each other as free and equal, which also means that all citizens in a democracy protect each other against existential risks.¹²

Government trust and social protection during a crisis such as a pandemic are built over time through the hard work of ordinary democratic processes. It requires sustained investment in: civil society and community-based organizations; science literacy and public education on the role of science in policymaking; and adequate and representative participation in advisory committees for public health and regulatory decision-making. Corporate social responsibility standards on disinformation and misinformation must be established to promote sufficient self-regulation by social media companies. If these investments are first made during a pandemic, it will be too late. As Dhatt and colleagues argue, the need for representative participation in health decision-making extend to global health generally.¹³

The coronavirus has demonstrated that addressing inequalities in health and social protection is not just a matter of justice, it is matter of security and pandemic preparedness.¹⁴ Pandemics expose the failures of a government that does not invest in the health of its constituents or address the collective risks that arise when vulnerable groups lack health protections. Bolstering the access to primary health coverage and social safety protections will lead to

⁸ Wike R, Simmons K, Stokes B, et al. Globally, broad support for representative and direct democracy. Pew Research Center. October 16, 2017. <https://www.pewresearch.org/global/2017/10/16/globally-broad-support-for-representative-and-direct-democracy/> (accessed October 2020).

⁹ Bosancianu CM, Dionne KY, Hilbig H, et al. Political and social correlates of COVID-19 mortality. June 11, 2020. https://wzb-iji.github.io/corona/WD_paper.pdf (accessed October 2020)

¹⁰ Crosby S, Dieleman JL, Kiernan S, Bollyky TJ. All bets are off for measuring pandemic preparedness. Think Global Health. June 30, 2020. <https://www.thinkglobalhealth.org/article/all-bets-are-measuring-pandemic-preparedness> (accessed October 2020).

¹¹ Novak B, Eddy M, Bennhold K, et al. Locked-down Europe faces closed borders, economic wounds and dire warnings. New York Times. March 18, 2020. <https://www.nytimes.com/2020/03/18/world/europe/hungary-borders-europe-coronavirus.html> (accessed October 2020)

¹² Van Rahden T. Making democracy safe for an age of pandemics. Graduate Institute of Geneva. May 4, 2020. <https://www.graduateinstitute.ch/communications/news/making-democracy-safe-age-pandemics> (accessed October 2020).

¹³ Dhatt R, Maleche A, Were N, Pace L. Investing in Civil Society for Better Democracy, Better Health. *BMJ*.

¹⁴ Burwell SM, Townsend FF, Bollyky TJ, et al. Improving Pandemic Preparedness: Lessons from COVID-19. Council on Foreign Relations Independent Task Force Report No. 78. New York: Council on Foreign Relations 2020.

better, more equitable outcomes in future pandemics. The health of vulnerable and marginalized groups must be monitored on an ongoing basis in data surveillance and reported publicly on a disaggregated basis.

The broad exercise of emergency powers in a pandemic thwarts the main mechanism through which democracy improves health: accountability enforced through voting and independent parliamentary and judicial oversight over the executive branch actions. More robust democratic processes must be better ensured in future pandemics. Easier and safer channels for voting, whether by mail or online, are prerequisite to ensure accountability of democratic leaders in a pandemic.¹⁵ As the International Parliamentary Union has highlighted, “Parliamentary scrutiny over the government has never been so critical to ensure that emergency measures to prevent the spread of the coronavirus are proportionate, temporary, and that they don’t infringe on fundamental human rights.”¹⁶

The most important lessons learned in this pandemic concern less the coronavirus itself but rather what this microscopic organism has revealed about the political systems that have responded to it. Democratic government must begin the hard work of responding to those lessons before the next pandemic threat arises, as it inevitably will.

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¹⁵ Belin C, De Maio G. Democracy after coronavirus: five challenges for the 2020s. Washington, DC: Brookings Institution 2020, https://www.brookings.edu/wp-content/uploads/2020/08/FP_20200817_democracy_covid_belin_demaio.pdf.

¹⁶ Cuevas Barron G, Bastida X, Calhoun C, et al. COVID-19 and democracy: can parliaments come to the rescue? Inter-parliamentary union. Event. September 15, 2020. <https://www.ipu.org/event/covid-19-and-democracy-can-parliaments-come-rescue> (accessed October 2020).



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