

Democracy Against COVID-19



A new analysis provides insights into how democratic institutions play a significant role in the way countries mount quick policy response to existential threats, such as the COVID-19 pandemic (Shvetsova et al. 2020).

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When institutional systems allow redundancies in information channels and in policy-making, according to the study, this provides support to governments in making a rapid response to crises such as COVID-19.

In contrast, more streamlined systems under autocratic or totalitarian states do not have such redundancies or effective/reliable channels of communication. With weak institutional capacity, autocracies are less likely to adequately respond to crises.

"We find that democracies and liberal democracies responded to COVID-19 stronger and faster," study authors wrote. "Beyond their other acknowledged merits, democratic institutions have superior capacity to mount a quick policy response to unqualified threats."

These findings are based on analyses of an original dataset – constructed by the report authors – on stringency of COVID-19-related policy measures adopted by governments at different levels in 64 countries between January and May 2020.

The authors would like to emphasise that their study compared governments' efforts to respond to the COVID-19 crisis, not the health outcomes that those efforts might have brought about.

Specifically, this study focussed on the early, onset phase of the COVID-19 pandemic – the time between 24 January and 24 April 2020. It was during this early period when public health policy response to the health crisis was escalating globally. "The start of the onset period represents both the day of origin of the global crisis as well as the initial signal of the template for policy response," according to the authors.

To measure COVID-19 mitigation policy responses during the onset phase, the authors collected data on policies that national and subnational policymakers adopted within these 15 public health categories: state of emergency, self-isolation and quarantine, border closures, curbs on social gatherings, school closings, closure of entertainment venues, closure of restaurants, closure of non-essential businesses, closure of government offices, work-from-home requirements, lockdowns and curfews, public transportation closures, and mandatory wearing of personal protective equipment (PPE).

"Putting in stronger policies does not necessarily imply better outcome when information about effectiveness of the policies does not yet exist. This is why we look at what was believed to be strong policies in public health at the time, during the onset phase," the authors pointed out.

In essence, the study aimed to find the answer to this question: Who acted the earliest and the strongest – which level of government and which institutional agents – against the COVID-19 pandemic?

It should be noted that the amount of information available to decision-makers and redundancies in information channels are greatly influenced by the institutional framework in a particular jurisdiction. The study also highlighted the difference in the way information is obtained and processed in policy-making between democratic and autocratic countries. For instance, civil liberties (i.e. freedom of speech and association) help promote a free flow of information both in terms of how the information is acquired and how it propagates.

In conclusion, the authors say this study on rapid COVID-19 response provided an opportunity to assess political institutional systems on their baseline capacity for crisis response in low-information environment. "Our findings suggest that democracies and liberal democracies were ahead in this comparison. Their early responses were stronger," the authors added.

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