Political science and COVID-19

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Abstract

The COVID-19 pandemic has created a ramifying political, public health and economic crisis throughout many countries in the world. While globally the pandemic is at different stages and far from under control in some countries, now is the time for public health researchers and political scientists to start understanding how and why governments responded the way they have, explore how effective these responses appear to be, and what lessons we can draw about effective public health policymaking in preparation of the next wave of COVID-19 or the next infectious disease pandemic. However good the science, it won’t tackle a pandemic alone – you need good politics too. Policy decisions are inherently complex and require a huge number of factors to be synthesized into a course of action. With COVID-19 this might be the science of containing the virus with the long-term health, social and economic consequences of an extended lockdown, and judgements on the extent to which the public will tolerate restrictions. These aren’t questions that have a definite answer. They can be informed, but not determined, by science. This review highlights about the importance of political science and COVID-19.

Keywords: COVID-19, political science, politics, public health, health

Introduction

Governments around the world have responded very differently to the pandemic because of the political ideologies of their leaders, because of the structure of their political systems and because of the capacity of governmental actors and the health systems they have created. Political science research has an important role in understanding how best to tackle pandemics like COVID-9 by rigorously analysing these different governmental responses internationally and the interplay of ideology, systems and capacity. It helps us to understand what policy measures governments have adopted and why, and what their socio-economic as well as epidemiological impacts have been. [1-3] This knowledge is essential if we are to optimise government policies to future pandemics, because good policies need to take account of not only the characteristics of viruses and how they spread, but also how they intersect with the capacities of governments, and the impacts of those policies on populations. Political science research includes not only comparative cross-national studies but also detailed ‘area studies’ of a single country’s policies and politics. While comparative studies show cross-national similarities and differences, deep area studies trace policies in detail and explain governmental responses and their impacts. They are particularly important for understanding countries unfamiliar to us or those whose policies are less accessible due to language barriers. [4,5-10]

COVID-19 Politics, Public Health and Policies

COVID-19 is a dramatic global public health challenge, and in many countries has created a ramifying public health, economic, and political crisis. The numbers involved are stupefying, whether they speak of infection and mortality, the scale of public health measures such as mobility restrictions, or the economic consequences for unemployment and public sector spending. Entire economies have been put into medically induced comas, unthinkably tough public health measures have become widespread with levels of public compliance or noncompliance that often surprise, and health care systems as well as states are being put to tests many have not recently seen. There will be no way to understand the different responses to COVID-19 and their effects without understanding policy and politics. Authors [1] identified four broad hypotheses for research on COVID-19 political responses: [1-5,6,7]
Social policy matters to crisis management as well as recovery: It is tempting, but wrong, to think that social and economic policy is only an issue for recovery. It is also an issue for emergency response. Relatively authoritarian public health measures (such as physical distancing or temporary economic shutdowns) depend on societal compliance. That is the case even in authoritarian regimes. Compliance requires not just things like good communication and trust, but also a political economy that permits people to stay at home without starving. The pre-existing social policies of the country as well as the ones enacted specifically to respond to the COVID-19 challenge will shape the extent of compliance with public health measures as well as life after the pandemic.

Regime type matters: ‘Regime’ is political scientists’ term for the basic cluster of institutions in a state, more than any one kind of politician, e.g. democratic, monarchial, or authoritarian. Comparative research on democratic, hybrid, and authoritarian regimes in particular has sharpened some of our expectations about regime effects and some surprising patterns. We suggest that the most promising hypothesis for understanding COVID-19 politics comes from comparative authoritarianism: Authoritarian regimes are bad at maintaining the internal and external flow of good information, but only some are good at forceful action.

Formal political institutions matter: Institutions are the level of specific political institutions below the level of the regime. So far, two stand out. One is federalism – the presence of powerful general purpose elected governments that shape politics in, among others. Despite the deficiencies of these countries’ overall responses, it is precisely the lack of a hierarchy and tight coordination that produced state-level responses that likely saved lives. The other is presidentialism – the presence of a directly elected president in charge of the executive. Presidentialist countries tend to be less stable and have a propensity to authoritarian actions and stalemates. The evidence is less clear with regard to political parties. There is no clear pattern across countries during the first wave, though we might hypothesise that there was poor performance by politicians of the populist radical right. Parties’ effects strengthen over time as they take clearly redistributive decisions (e.g. about social policy or income replacement) and privilege some interests over others. We can therefore expect that political parties matter more and more as time goes on and governments make decisions that shape health and social outcomes.

State capacity matters: State capacity, including control over health care systems as well as public administration, matters to all elements of response and shapes what policymakers perceive as available options. Investment in state capacity to deliver services and enforce rules matters, even if it often happens in ways that defy outside advice. It is too early in most cases to identify the effect of policy decisions on the course of the ongoing pandemic, but it is not too early to start understanding why governments make the decisions that they do. A research agenda to address the COVID-19 pandemic that takes politics as a serious focus can enable the development of more realistic interventions in policies and shape our broader understanding of the politics of public health.

References
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