

RE OPEN ING THE WORLD



■ **How to Save Lives and Livelihoods**
John R. Allen and Darrell M. West, Editors

CORONAVIRUS [COVID-19]

BROOKINGS

REOPENING THE WORLD



BROOKINGS

TABLE OF CONTENTS

Preface	
List of Authors	
1 01 Firsthand reports on how countries are reopening <i>Amanda Sloat</i>	
8 02 City leadership is fundamental to reopening the economy <i>Tony Pipa</i>	
12 03 Coordinating the international distribution of medical goods <i>Geoffrey Gertz</i>	
16 04 How the pandemic is reinforcing authoritarianism <i>Shadi Hamid</i>	
21 05 The WHO, international institutions, and the COVID-19 response <i>Bonnie Jenkins and Bruce Jones</i>	
26 06 Walling off Mexico will not work <i>Vanda Felbab-Brown</i>	
32 07 Reopening Muslim religious spaces <i>Madiha Afzal</i>	
36 08 Reopening Iran <i>Suzanne Maloney</i>	
41 09 Israel reopens, but the risks persist <i>Natan Sachs</i>	
45 10 How to deal with an invisible enemy: South Korea's war on COVID-19 <i>Seong-ho Sheen</i>	
49 11 China recovers first—with what lessons? <i>David Dollar</i>	
53 12 Lessons from China's economic reopening <i>Cheng Li and Jian Chen</i>	
59 13 The fastest route to ending this crisis involves China <i>Ryan Hass</i>	
63 14 To prevent zoogenic pandemics, regulate wildlife trade and food production <i>Vanda Felbab-Brown</i>	
69 15 Is Russia avoiding blame and getting by on the cheap? <i>Steven Pifer</i>	
73 16 Britain bungled its lockdown and garbled its reopening <i>Amanda Sloat</i>	
78 17 Reopening Germany <i>Constanze Stelzenmüller and Sam Denney</i>	
83 18 The day France reopened <i>Célia Belin and Agnieszka Bloch</i>	
88 19 Italy's reopening <i>Giovanna De Maio</i>	
92 20 Reopening schools: Insights from Denmark and Finland <i>Emiliana Vegas</i>	
96 21 As the country normalizes, COVID-19 strains Turkey's economy and politics <i>Kemal Kirişçi</i>	
101 22 Responsibly reopening Greece <i>William J. Antholis and Filippos Letsas</i>	

#COVIDREOPENING

PREFACE

COVID-19 has shattered economies and societies around the world, upended government plans and business operations, and challenged the fabric of many communities. The effects are far-reaching, and leaders are seeking to understand how they reopen their countries and what are the lessons from other nations.

In this publication, we discuss reopening in several different countries and offer insights regarding how things have gone and what we have learned so far. In reviewing the situations in other places, our scholars examine the non-U.S. experience and present a number of ideas for protecting people's health, restarting whole economies, and promoting social reintegration.

Several individuals provided valuable help on this volume. Emily Horne and Andrea Risotto offered tremendous assistance in terms of project vision, communications, and outreach. Fred Dews copyedited the entire manuscript in a speedy fashion. Soren Messner-Zidell, Katie Merris, and Abigail Kaunda did a great job on the project's design and layout. Eric Abalahin efficiently handled the web production process. We also are grateful to the scholars and communications staff who worked hard to develop and present ideas on what to think about as the world reopens.

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Firsthand reports on how countries are reopening

AMANDA SLOAT



This piece originally was published by [Foreign Policy](#) on May 9.

Leave it to the Germans to come up with a sinuous, unpronounceable, and entirely perfect word to describe the slew of debates over how and when to reopen economies locked down due to the coronavirus: [*Öffnungsdiskussionsorgien*](#), or opening discussion orgies.

These orgies have been unfolding in just about every country that has shut restaurants and schools, grounded flights, and required citizens to stay home. Despite general agreement with lockdown decisions, there are now heated debates about what the new normal should be—and how to get there.

That debate varies, of course, with the progress of the virus. [China](#), where the outbreak originated, has slowly reopened Wuhan. [New Zealand](#) says the virus is “currently eliminated” there and is talking about [resuming flights](#) to Australia. [Brazil](#) locked down its first major cities this week, while other countries, such as [Canada](#), [Japan](#), and [Sri Lanka](#), also tightened rules. And Africa, which was largely spared during the initial wave, is now facing a [rising](#) number of cases with only limited medical [resources](#).

Over the last two weeks, I emailed and texted friends, former colleagues, and acquaintances

around the world—a network I’ve developed over two decades working in foreign policy—to learn how their societies were preparing to reopen. I heard from more than 70 people in 65 countries, who sent me anecdotes and press clips that provided a snapshot of life under COVID-19 in early May.

EVERYONE MISSES GRANDMA ...

People are universally missing their extended families, especially older relatives, who faced the most severe restrictions in some countries given their vulnerability to the virus. [Switzerland](#) recently allowed children under 10 to hug their grandparents again, and [France](#) eased its restrictions on nursing home visits. But folks in [Britain](#) were told to wait.

... BUT PARENTS ARE FATIGUED BY HOUSE-BOUND KIDS

Spare a thought for parents who have been trapped indoors with their children for weeks. A frustrated American expat in Colombia said dogs can go outside for 20 minutes several times a day but kids across the country have [not been allowed](#) to leave the house for any reason at all. A little relief is coming: Starting May 11, children over 6 will be [allowed](#) outside three times a week—but only with an adult and only 30 minutes each time.

Parents in Spain, who were under strict lockdown with their children since March 14, recently received a reprieve but in a rather bumbling fashion. On April 21, the Spanish government [announced](#) that kids aged 14 and under could go outside beginning April 27—but only to accompany a parent on an errand. Parents revolted, and hours later, the policy was [amended](#) to allow kids outdoors once a day for one hour and within less than a mile of home.

THERE IS DISAGREEMENT OVER REOPENING SCHOOLS

Some countries (such as [France](#), [Israel](#), and [Slovenia](#)) are starting to send little kids back to school, whereas others (like [Germany](#), [Greece](#), [Portugal](#), [Senegal](#), [South Korea](#), and [Vietnam](#)) are focusing on older ones. [Sweden](#) kept young kids in school the entire time, while neighboring [Denmark](#), [Finland](#), and [Norway](#) are only now allowing them to resume their studies. Several (such as [Pakistan](#) and [Turkey](#)) will make decisions at the end of May, while others (including [Paraguay](#) and [Peru](#)) have scrapped in-person classes until December.

Given health concerns, some parents prefer to keep their children at home. In [Australia](#), their right to do so varies by state. In [Northern Ireland](#), the government closed schools until September, as its modeling showed that less than 10 percent of parents would return their kids sooner. [Nicaragua](#) has not closed schools, though some 40 percent of students are absent. In Sweden, two friends shared anecdotes about nervous neighbors who wanted to keep their children at home; in both cases, principals warned that failure to comply with mandatory attendance would have consequences.

The pandemic has prompted the Japanese government to consider overhauling its schedule entirely: The academic year traditionally begins in April, but there is now a [debate](#) about shifting the start to September.

Safety remains a priority, though some are promoting dubious methods. In Madagascar,

the country's president gave returning students face masks and [bottles of herbal extract](#) that he promised would protect them.

PEOPLE ARE CRAVING FRESH AIR ...

Confronted with stay-at-home orders, creative minds have sought ways around the rules. In Australia, people wore costumes to wheel their [trash cans](#) to the curb. An American expat in Spain promised her teary tween that for her 12th birthday she could help take the trash 50 yards to a communal receptacle across the courtyard; that special gift was scrapped after a police car parked nearby. To take advantage of exemptions allowing owners to walk their pets, one person in Romania took his [fish on a walk](#), while a young woman put her cat in a bag to justify a trip to the mall. In Uganda, essential workers received [stickers](#) for their cars to bypass checkpoints; an expat said some people bought stickers from corrupt officials or printed their own, while others hired pregnant women to accompany them on errands under the guise of driving them to the hospital.

Many are savoring fresh air after weeks in quarantine. [South Africans](#) are allowed to exercise outside again, while [Israelis](#) can now venture a third of a mile for sports or prayer. [Serbs](#) over 65 can take daily one-hour walks and shop for groceries from 4 a.m. to 7 a.m. A Bulgarian friend said parks have opened designated routes for pregnant women and accompanied children. In [Colombia](#), people between the ages of 18 and 70 can exercise outside between 5 a.m. and 8 a.m. New guidance in Spain is so complicated that residents need [graphs](#) to determine who is allowed outside when.

A Belgian friend said her compatriots were perplexed by the inclusion of [kayaking](#) on the list of newly allowable activities, with many preferring to line up for hours after the McDonald's drive-thru reopened. Perhaps they were following the advice of the local potato industry, which urged Belgians to [eat](#) more french fries given excess supply.

... AND LONG FOR A HAIRCUT

A Greek friend shared a [poll](#) showing haircuts topped the list of most desirable activities when lockdown ended. Swedes benefited from salons that remained open, with a friend in Malmö joking that his compatriots could be distinguished from their Nordic neighbors based on their tidy heads. In Germany, hair salons reopened on May 4—but with so many manes that need tending, wait times of one month or more for appointments are common. (Little tip from the Germans: Get on the waitlist now.) In Ireland, where salons aren't slated to open until late July, a [black market](#) has emerged.

SOME SIMPLY WANT A STIFF DRINK

South Africans haven't been allowed to [buy alcohol](#) since the lockdown began on March 26. A friend said vineyards in the Cape region are going bust, many of their workers are starving, and sober locals are trying to extract alcohol from hand sanitizer or make pineapple beer at home. Cigarettes were supposed to be available by May 1, then became [off-limits again](#). When Indians were allowed to purchase alcohol this week after 40 days of lockdown, there were [chaotic scenes of excited crowds](#) that led local governments to [close stores](#) and [impose a special alcohol tax](#). When an Australian friend's husband tried to buy gin, champagne, and beer, the shop clerk told him to put one bottle back due to [sales limits](#) to prevent panic-buying. [Finns](#) did not face such restrictions, as they continued their practice of *kalsarikännit*—getting “pantsdrunk” at home in their underwear.

Pubs in [Ireland](#) are expected to be shuttered until Aug. 10. And although bars remained open in [Sweden](#), a friend admitted that the prime minister's admonition to “use common sense” when social distancing was more challenging after a few pints.

BELIEVERS ARE ANXIOUS TO WORSHIP TOGETHER

In Cuba, the coronavirus led the government to [relent](#) on its decades-long opposition to televising

Mass. In Greece, churches will reopen in mid-May with social distancing restrictions, but even the most open-minded archbishops are [reluctant](#) to deviate from the traditional practice of sharing the communion cup. In Croatia, churches can resume Mass with [no limit](#) on attendance, even though businesses and secular institutions must restrict their numbers. Italian priests are [furious](#) at the government's refusal to reopen churches for anything other than small funerals.

COVID-19 restrictions are hampering Muslim celebrations of Ramadan. A Jordanian friend said working at home has made fasting easier this year. An Iraqi friend said his compatriots are frustrated by their inability to organize and afford traditionally large iftar dinners. Several countries (such as [Niger](#) and [Tunisia](#)) relaxed curfew restrictions to allow extra time for shopping.

Saudi Arabia continues to face questions about pilgrimages to holy cities. The kingdom partially [lifted](#) the daily curfew on April 26, but 24-hour restrictions remain for Mecca. The annual hajj is due in late July, but the government has [warned](#) against purchasing plane tickets. According to a longtime Saudi Arabia watcher, it is torn between responsible medical practice and the loss of revenue and prestige.

Meanwhile, Tanzanian President John Magufuli remains an outlier in Africa by [resisting](#) a nationwide lockdown, though he did fire the head of the national laboratory after imported test kits returned [positive results](#) on a goat and a pawpaw. Instead, he is telling citizens that prayer can fight the virus and keep the economy moving.

OTHERS SIMPLY WANT TO EAT ...

While some people in Western countries lament missing ingredients on grocery shelves, many in less developed places worry about starvation. [Press reports](#) have described desperate Kenyans stampeding for flour and cooking oil, Indian workers lining up across their country to receive bread and vegetables, and poor Colombians



“

Those living in countries with previous traumas have generally followed official instructions, including Bosnians who survived a war and Mexicans who experienced earthquakes and the H1N1 outbreak.

hanging red flags from their windows to signify hunger.

Social distancing and reduced demand are hitting the [service sector](#), which comprises over half of Latin American GDP. In Mexico, an expat said nearly half the population lives off the informal economy with day-to-day earnings: If they don't work, they don't eat. A Peruvian student living in the United States said his government introduced strict quarantine measures but [markets](#) remained filled with people and the number of cases soared to the region's second highest. According to a Cuban American friend, the [difficulty](#) of finding basic goods means Cubans have little choice but to make daily trips to the grocery and wait in long lines.

There are similar challenges across Africa, compounded for East Africans by the wave of [locusts](#) threatening livelihoods and food security. There is growing debate, according to several friends across the continent, about the appropriateness of the Western-influenced lockdown model for [African economies](#). As millions of urban poor subsist hand to mouth under cramped living conditions, continued income and [social safety nets](#) can save lives too.

... AND STAY ALIVE

Libya is struggling to prepare for a COVID-19 outbreak amid an active war, reports a humanitarian friend. [Warring groups](#) are targeting medical facilities and cutting water supplies, with artillery hitting a hospital last month that was designated for treating coronavirus patients. Doctors and nurses are torn between treating those with the virus and treating war wounds. An Afghan friend said his government's response to the pandemic is [hindered](#) by a poor health care system, rising food prices, a worsening security environment, and porous borders with hard-hit neighbors (including Iran and China).

PAST EXPERIENCES HAVE SHAPED COMPLIANCE WITH RESTRICTIONS

In countries like Norway, the Czech Republic, and Japan, friends said negative experiences in the 1930s created an aversion to heavy-handed policing. British friends said compatriots follow rules from a sense of politeness and aversion to social shaming, with some pleased to see their [former prime minister](#) lining up at the grocery. A South African friend said some people are *gatvol* (local slang for "fed up") but have continued to comply.

Those living in countries with previous traumas have generally followed official instructions, including Bosnians who survived a war and Mexicans who experienced earthquakes and the H1N1 outbreak. Israelis have an undying belief that Jewish people will survive this crisis, as they have so many before. Since the pandemic struck during Passover, a friend said many are reciting a line from a famous [1990s pop song](#): "We overcame Pharaoh, and we'll overcome this."

Despite their reputation as rule breakers, Greeks have largely complied. After 10 years of outsiders telling them to reform, a friend said his fellow citizens are basking in [international praise](#) for limiting the number of cases and deaths.

AUTHORITIES ENFORCED RULES WITH VARYING DEGREES OF ENTHUSIASM ...

In Israel, [police forces](#)—including a helicopter and Jet Skis—pulled a surfer out of the water near a Tel Aviv beach after he violated the lockdown. [Parisian officers](#) shut down a spontaneous dance party, while authorities in [South Africa](#) arrested a couple getting married on the beach with friends. Police in [Spain](#) bleached a beach to sanitize it for children's use, and an American expat in Valencia reported low-flying helicopters with bullhorn-wielding officers warning that rooftops were for drying laundry, not family recreation. Meanwhile, a [police helicopter](#) in Canada took pictures of six women having a socially distanced dance party and tweeted their gratitude for obeying the rules.

[El Salvador](#) is struggling to enforce its stay-at-home order, with police and armed forces detaining over 4,000 people for violating the order and throwing them in quarantine centers; this has resulted in a constitutional crisis, as the president has ignored Supreme Court orders to stop. In Uganda, people are wary of the heavy-handed approach of the [Local Defense Unit](#), an armed paramilitary group recruited to help enforce the quarantine.

... WHILE DANCING POLICE OFFICERS PROVIDED SAFETY TIPS WITH A SMILE

In [Bogotá](#), police blasted dance tunes to encourage citizens to exercise. Police in [Mallorca](#), Spain, played guitar to entertain the homebound. Officers in [Cajamarca](#), Peru, danced with a coffin on their shoulders to remind people to stay home. Dancing pallbearers in [Ghana](#) similarly conveyed the seriousness of the outbreak. Police in the Indian state of [Kerala](#) made a dance video about hand-washing; their counterparts in [Chennai](#) wore “corona helmets” to remind people to stay home.

SOME CITIZENS HAVE PROTESTED FROM THEIR WINDOWS ...

In [Brazil](#), some people are banging pots and pans every evening to protest the president’s refusal to back a more stringent lockdown, as advocated by opposition politicians. In [Serbia](#), citizens make noise from their windows every evening at 8:05 p.m. Despite rigid quarantine measures, the country has suffered more infections and fatalities than others with fewer restrictions. In Spain, residents have continued [applauding](#) health workers at 8 p.m., but an hour later they bang *caceroladas* (casserole dishes) to protest the government’s response.

... WHILE OTHERS HAVE RETURNED TO THE STREETS

Lebanon took [early steps](#) to lock down the country, resulting in a low number of COVID-19 cases.

Yet protesters recently [returned](#) to the streets to protest the failure of the new government, formed in January, to address economic woes. France, rocked by yellow vest protests since late 2018, has seen people defy the strict lockdown to protest the government’s [inadequate](#) handling of the health crisis and its adverse [effect](#) on working-class families.

Meanwhile, some [Syrians](#) in areas loyal to the government demonstrated in support of the regime—but against local efforts to disinfect communities.

PEOPLE ARE CONFLICTED ABOUT TECHNOLOGICAL SOLUTIONS ...

Asia was quick to employ technology. South Korea created a publicly available “[travel log](#)” that let citizens determine whether they crossed paths with infected people. Some countries (like [Australia](#), [Singapore](#), and [Vietnam](#)) have developed voluntary contact tracing apps, while others (such as [China](#) and [Hong Kong](#)) are using mandatory devices.

Europeans are debating whether to temporarily cede privacy for health protection. A Swiss friend said his compatriots are unhappy about surveillance from major telecommunications operators but said a recent [poll](#) found two out of three people surveyed would be open to an app that would anonymously track their movement. In [Germany](#), an American expat reported discussions over whether contact tracing apps should gather data in a [centralized](#) or [decentralized](#) way. [Britain](#) and the [Czech Republic](#) are rolling out pilot projects.

There is little debate in places accustomed to government surveillance. A Serbian friend said the government hinted it can track the phones of quarantined people but few believe it is actually happening. An expat in Romania said locals are used to—or ignore—state monitoring. An expat in Vietnam said surveillance is “pretty much expected” in the single-party communist state.

She said one foreigner who escaped quarantine was tracked down via security cameras while another was caught when he checked into a hotel that reported his presence to a central registry. In Israel, a friend reported general acceptance of state surveillance, within limits. The domestic intelligence service initially tracked everyone's cell phones after the initial outbreak, but then the highest court [ordered](#) it to stop after the curve began to flatten.

... YET THEY TRUST THEIR OWN ANTHONY FAUCI

Malta has Gauci—[Charmaine Gauci](#), the superintendent for public health, whose daily updates provide information and reassurance. Malaysia's hero is [Noor Hisham Abdullah](#), the director-general of health, who has risen above the political fray to provide sensible medical advice. [Ana Lucía de la Garza Barroso](#), Mexico's director of epidemiological research, delivers smart daily briefings yet has set off an entirely different debate. Attracting attention for her Scarlett Johansson-esque [good looks](#), she has created

frustration among Mexican [feminists](#) over the objectification of powerful women.

Uganda's health minister, [Jane Ruth Aceng](#), went viral after smacking down a foreigner at the airport who challenged the government's quarantine measures. Greek Health Ministry spokesperson [Sotiris Tsiodras](#) has approval ratings over 94 percent. Norwegian Prime Minister Erna Solberg held a special virtual [press briefing](#) for children, while New Zealand Prime Minister Jacinda Ardern has provided folksy [Facebook live updates](#).

The German virologist [Christian Drosten](#) hosts a top-rated daily podcast, yet he has received death threats as people accuse him of destroying the economy. And Australians are tuning into *Coronacast*, a daily podcast by Norman Swan, who had his moment of global internet fame after explaining how [farting](#) could spread the virus.

As countries begin to reopen, the moment of truth has come.

City leadership is fundamental to reopening the economy

TONY PIPA



U.S. cities have been at the forefront of the national response to COVID-19, as global connections and high density make them especially vulnerable. Local decision-makers banded together early on and also looked to their global networks to exchange knowledge, share experiences, and support each other in managing through the crisis. For example, Mayor Eric Garcetti of Los Angeles, chair of C40 cities, convened a [virtual assembly](#) in late March of 45 mayors from every part of the world, and the consensus was clear from counterparts whose cities had already been affected: act aggressively and quickly.

The cooperation has been paying off. U.S. mayors and local officials are receiving high marks for their response. [In a recent Economist/YouGov poll](#), a majority (55 percent) said their local governments are doing a good or excellent job, while about two in five (38 percent) placed the same faith in the federal government. The most [recent Edelman Trust Barometer](#) shows local governments in the U.S. enjoying a level of trust 20 percentage points higher than the federal government.

On the one hand, reopening represents a complicated technical challenge. As [Brookings](#) and other [experts](#) have suggested, it requires getting a sequence of steps right, based on the best available evidence, and balancing public health

with economic and social considerations amid uncertainty. At a deeper level, though, reopening presents a serious leadership challenge. Municipal leaders are likely to allow activity among certain groups of people, businesses, and neighborhoods before others, which may be perceived as unfair. Subsequent flare-ups of the disease may mean restrictions are quickly reintroduced.

Amid the urgency to restart the economy and restore jobs, these dynamics create high risk of increased anxiety, tensions, and social division. At the same time, mayors are more convinced than ever of the need to reduce vulnerabilities exposed by COVID-19. And they are faced with doing this as they are experiencing severe budget shortfalls. These local leaders recognize that the effects of the virus on their cities' physical and economic makeup may be long-lasting. COVID-19 is yet another example of the extent to which their local realities are tied to global phenomena that ignore political boundaries: global health threats, climate change, migration. Their counterparts from across the globe have additional lessons to share.

COMMIT TO "BUILDING BACK BETTER"

As they emerge from lockdown, local leaders worldwide see reopening as an opportunity. The mayors of Milan, Helsinki, Bristol, and several other global cities whom we contacted are

determined to reduce their cities' vulnerabilities, and not just as they relate to COVID-19; they see a chance to build a healthier, more sustainable future that improves their cities' resilience to a wide range of shocks and shifts. This means addressing the economic inequities and environmental stresses that make their cities susceptible—and doing so now.

As the city reopens, the government of Milan made a [commitment](#) to raise its ambition for the future of the city. It is starting to rethink community patterns and plans to construct expanded pedestrian and bicycle access on 22 miles of streets in the city this summer, reducing availability for cars. These throughways will follow subway routes to provide greater mobility for those reliant on public transportation and incentives for those who are not. Milan anticipates this will not only help lessen car usage and air pollution—its metro region has one of the highest in Europe—but create more space for commerce outside its restaurants and shops, which may be important in the era of social distancing.

Successfully anticipating global trends and integrating these transformations into reopening and recovery was a recurrent theme among these city leaders. None has set aside their city's prior plans to address climate change, build cleaner infrastructure, and reduce inequality among their residents and neighborhoods. Helsinki, for example, has continued with its [Helsinki Energy Challenge](#), a global competition to reduce its dependence on coal, which now heats half the city. Bristol remains committed to its [One City Climate Strategy](#), launched in February, and is framing its model of economic recovery on the [Sustainable Development Goals](#). COVID-19 may be a disruption, but it is not a moratorium; if anything, it has provided greater urgency for these leaders to accelerate their plans.

MAKE EQUITY THE CENTERPIECE OF YOUR CITY'S PLANS

COVID-19's widespread economic dislocation lays bare the implications of inequality. For these

mayors, social equity matters now more than ever, and they have elevated their city's commitment to reaching their city's most vulnerable and maximizing economic opportunity for all their residents.

The mayor of Milan launched a [Mutual Aid Fund](#) for private donations to augment a special appropriation from the City Council, both to provide grants to the newly unemployed and, as the city reopens, to offer assistance to small businesses and entrepreneurs. To develop an equitable approach to enhance safety, the city is considering the possibilities of augmenting "social distancing" with "time distancing," staggering openings and closings or the start of shifts to space out the use of public transportation.

Bristol's mayor has also committed to an [inclusive re-opening](#), and the city is providing emergency grants to small businesses. Its Economic Board is focused on reducing intractable inequality in the city by creating suitable job opportunities out of its recovery plans and implementation of the climate strategy.

This emphasis is becoming a widely shared view. Social equity and local economies were the top priorities for COVID-19 recovery planning in a [recent survey of the cities](#) participating in the Rockefeller Foundation's Global Resilient Cities Network, which launched a coalition of Cities for a Resilient Recovery based on the results.

USE CITY GOVERNANCE AS A PLATFORM FOR PROBLEM-SOLVING

It may seem counterintuitive to remain steadfast about a city's ambitions as uncertainty and disruption continue to define its daily realities. These leaders recognize that success will require resources and leadership that extend beyond their budgets and capacity, and pursue a model of governance that is as much community organizer and advocate as producer of public services. As one senior representative from Helsinki remarked, the mayor's office is well-positioned to help the



“For these mayors, social equity matters now more than ever, and they have elevated their city’s commitment to reaching their city’s most vulnerable and maximizing economic opportunity for all their residents.

city build its collective leadership, acting as the connective tissue among many different sectors seeking to solve their problems.

[Bristol's Economy Board](#), for example, is one of six boards created before the crisis to involve a diverse range of stakeholders in developing and leading the implementation of its [One City Plan](#). Activated immediately to develop a post-COVID-19 economic recovery plan, its membership has swelled to over 40 representatives from businesses, unions, universities, civil society, and gateways such as its port and airport. Its overlap with the city's other boards and participatory nature is positioning the city to develop a strategy and shovel-ready projects that will have community-wide support and meet the city's post-COVID-19 priorities.

COMMUNICATE OPENLY AND TRANSPARENTLY

Such consultation is an example of the type of regular and transparent communication these leaders see as essential to building support from constituents and the general public. Seoul, applying lessons from the MERS outbreak of 2015, has [made transparency a core principle](#) of its reopening strategy, offering real-time data on the number and location of cases to mitigate public fear, reduce the spread of fake news, and increase trust in government officials. Buenos Aires retooled its existing municipal [WhatsApp chatbot for coronavirus communications](#) and has achieved a response rate five times quicker than its traditional telephone emergency response.

UNIFY THE CITY AROUND ITS CULTURAL IDENTITY

It is one of the iconic images of the COVID-19 crisis, seen by 22 million people as it streamed: [Andrea Bocelli, standing in the empty Piazza del Duomo in Milan](#) on Easter Sunday, singing “Amazing Grace.” As Milan embraces its own commitment to open communication with its residents, it is unveiling a campaign that echoes

that image to show how the piazza and the city will reopen “step by step.” In similar fashion, Bristol is using its [#WeAreBristol](#) campaign, launched in 2019 to define its diverse culture as one of the city’s hallmarks, to sign up volunteers for COVID-19 relief.

Such reminders of their city’s shared identity are useful as a way to build a sense of solidarity and togetherness. The crisis has had a deep economic impact on the cultural and creative sectors, and intentionally acknowledging the central role cultural institutions play in the life of their city signals the commitment by the communities to work toward their renewal. As U.S. leaders embark upon reopening and the first steps toward recovery, such goodwill will be important to sustaining their efforts—and remaking their cities for the future.

Max Bouchet contributed excellent research assistance to collect these lessons.



Coordinating the international distribution of medical goods

GEOFFREY GERTZ



Like other countries around the world, the U.S. is beginning to re-open while coronavirus transmission persists in many communities and before a vaccine has been discovered. This suggests demand for key medical goods—including medicines, coronavirus tests, ventilators, and crucial personal protective equipment (PPE) such as N95 masks—will remain high, both as precautionary measures and to respond to localized flare-ups or a possible second wave of the virus. Supply of such goods has and will continue to increase. But even with an aggressive push to increase production, supply is unlikely to be sufficient to meet the [20-fold increase in demand](#).

During the first wave of the coronavirus outbreak, the federal government struggled to get medical goods to the people and places that needed them. It initially left distribution to market mechanisms—sparking price spirals and accusations of gouging by profiteers as state governments and hospital systems bid against one another, desperately seeking supplies. More recently, the government began blocking the export of certain medical goods, cutting off trade flows to countries in need.

Looking forward, the U.S. needs to avoid the pitfalls of both the wild west of unfettered markets and the threat of every-country-for-themselves

economic nationalism. To reopen while preventing the price spirals, trade restrictions, and shortages that have so far plagued medical goods markets, the U.S. government should cooperate with other countries around the world to better organize and coordinate the procurement and international distribution of key medical goods. By establishing communication channels and coherently planning the demand and supply of such products, governments can build trust in each other and lay the foundation for more effective management of global health.

FROM MARKET PANDEMONIUM TO ECONOMIC NATIONALISM

Through the early months of the coronavirus pandemic, the U.S. government largely refrained from intervening in markets for medical goods. The [result was chaos](#): governors and hospitals found themselves competing against one another, struggling to evaluate a dizzying array of offers from amateur brokers while bidding up prices to astronomical levels. [Ambitious middlemen and profiteers cashed in](#) while [doctors and nurses scrambled to make do](#) with what they could find. As economists often note, one virtue of market mechanisms and price signals is to allocate goods where demand is highest. Yet price signals conflate both willingness to pay and ability to pay—and in the current context, allocating COVID-19-related

medical goods to those [who can best afford it](#) does not necessarily align with public interests.

Partially in response to such market failures, more recently the federal government has stepped in—but in ways that are sometimes counterproductive. In early April, the government announced [it would restrict exports of certain PPE goods](#). To be sure, the United States is not alone in taking such actions: in the face of stark shortages and spiraling prices, many governments have attempted to prevent medical goods from leaving their country. Based [on data collected by the International Trade Centre](#), as of May 10, around 95 countries have introduced some form of temporary export restrictions related to COVID-19. Though these limits may boost domestic supply, they simply shift the costs of supply shortages on to other countries; and as the escalating number of countries implementing such restrictions suggests, they risk spiraling protectionism that leaves everyone worse off.

Thankfully, governments have begun to correct some of their earlier missteps. The European Union, which was one of the first to impose an export licensing regime, [has since revised its policy](#) to limit the number of goods facing restrictions, include further humanitarian exceptions, and ensure transparency of all licensing decisions. Similarly, the United States has [eased some of its licensing restrictions](#), allowing for continued exports to Canada and Mexico and for exports donated by nonprofit agencies.

COOPERATIVE MANAGEMENT OF MEDICAL SUPPLY CHAINS

While these corrections are welcome, we are still far from what is needed: international coordination to promote a more orderly distribution of medical goods. Calling for global cooperation during a crisis may seem farfetched, yet [history shows that it is precisely during emergencies](#) that the need for cooperation to achieve public goods can spur government action. For instance, during World War I, Western Allies

initially found themselves bidding against one another on crucial agricultural commodities, namely wheat. Just as is the case with medical goods today, [the result was spiraling prices and further shortages](#). In the face of this challenge, the United Kingdom, France, and Italy came together in 1916 to found the [Wheat Executive](#), a centralized body that coordinated all wheat purchases for the three countries. This cooperation expanded the following year with the formation of the [Allied Maritime Transport Council](#), which brought together the U.S., UK, France, and Italy to oversee the allotment of shipping tonnage to ensure transport capacity was available where it was most needed, rather than relying on decentralized market distributions. These examples show how, in the face of politically salient shortages, government leaders can strike creative agreements to avoid both the tyranny of markets and beggar-thy-neighbor economic nationalism. Similar efforts are needed today.

Coordination of procurement is essential for the world's poorest countries, which otherwise will be battered by either a market distribution system ([as they will be outbid by richer countries](#)) or an economic nationalist approach ([as they depend on imports for meeting domestic medical supply needs](#)). But it is also squarely in the United States' more narrowly defined national interest. Given existing chaos, price spikes, and shortages in the U.S. medical goods market, the American healthcare system would directly benefit from a more orderly and coordinated distribution system. Greater coordination at the international level also would complement greater coordination at the domestic level, [as the House of Representatives is currently pushing for](#). Similarly, the fact [that the U.S. imports five times more PPE than it exports](#) underlines that the U.S. stands to lose out overall if every country were to block medical trade.

Moreover, leading a coordinated international response to shortages in COVID-19-related medical goods could help restore America's international reputation, which has been [marred by accusations of "piracy" in seeking to amass](#)

A photograph of a woman with dark hair tied back, wearing a white surgical mask. She is standing in what appears to be a hospital or medical facility, with a ventilator machine visible in the background. The machine has several circular dials and a screen displaying "biyovent". The overall lighting is warm and slightly dim.

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PPE. In a recent [survey of American foreign policy experts](#), only 3 percent of respondents rated U.S. leadership in coordinating the international response to COVID-19 as either somewhat or very effective, with over 80 percent rating the response as “not effective at all.” Facilitating a coordinated distribution system could begin to recast such perceptions, and simultaneously help counter [China’s “mask diplomacy” efforts](#).

What might such a coordinated program look like in practice? Ideally, governments would enter a cooperative arrangement to oversee the distribution of PPE and other medical goods, minimizing any hoarding and allocating goods to the people and places where they’re most needed. Crucially, this could include pooled procurement: rather than competing against one another and bidding up prices, governments would jointly purchase needed medical goods, taking advantage of their buying power to negotiate fair prices. Pooled procurement can also allow buyers to commit to large future purchases, based on their combined forecast demand, incentivizing the investments needed to increase supply. Similar pooled procurement mechanisms have been [used for years in acquiring pharmaceutical products](#), particularly for developing countries; there are certainly lessons from these experiences that could apply to purchases of PPE today.

Achieving such levels of cooperation can be difficult, however, particularly given low levels of trust between national governments at present. Indeed, it was a full two years into the First World War before the Wheat Executive was created, which suggests developing such mechanisms can take time. Thus, if governments are unable or unwilling to enter into an arrangement for coordinating the distribution of COVID-19-related medical goods, a possible intermediate step is to improve information sharing and transparency in policymaking. Simply put, governments should inform one another of their supply and demand for specific medical goods, their purchasing plans, and especially any trade policies or export restrictions that will influence global markets.

The [Agriculture Market Information System \(AMIS\)](#), created by the G-20 in the wake of food price spikes in 2007–08 and 2010, provides a potential model. AMIS is an information clearing house where governments share market and policy guidance for key agricultural crops and a forum for informal coordination among policymakers, particularly during times of crisis. A similar mechanism for sharing information and discussing policy developments for COVID-19-related medical goods could improve outcomes even without governments ceding any decision-making power to a cooperative body.

PREPARING FOR A VACCINE

There is a pressing immediate need for better coordination of existing COVID-19-related medical goods. Looming on the horizon, however, is an even more challenging international distribution problem: [allocating doses for a coronavirus vaccine, once one is discovered](#). Competition for the vaccine will undoubtedly be stark, and without coordination rival bids will send prices skyrocketing. Efforts today to build trust and establish communication channels in distribution of PPE and other medical goods will lay the groundwork for future cooperation on a potential vaccine. Just as during WWI efforts to coordinate wheat distribution led to the broader program on coordinated shipping, mechanisms developed now can potentially evolve into a system for allocating vaccines in the future.

How the pandemic is reinforcing authoritarianism

SHADI HAMID



Authoritarianism, in theory, and authoritarian regimes, in practice, were already gaining ground before the spread of the novel coronavirus. During—and after—the pandemic, governments are likely to use long, protracted crises to undermine domestic opposition and curtail civil liberties through increased surveillance and tracing. It will be challenging to assess the exact degree of deterioration in countries that were *already* extremely authoritarian, such as China and Egypt. In countries where the U.S. enjoys considerable leverage, as in the Middle East, the goal should be framed as pressuring autocrats to be *less* repressive than they might otherwise be, rather than engaging in false pretenses of “political reform” or “democratization.”

In still-democratic countries like Brazil, Israel, and India or in hybrid contexts where strongmen had successfully constrained electoral competition and parliamentary oversight, such as Hungary, ambitious populists will push the limits, testing the levels of both domestic and international resistance.

HOW MUCH DOES REGIME TYPE MATTER?

The pandemic is both reopening and intensifying one of the most vital debates of the post-post-

Cold War era: that over whether democracy or authoritarianism is best suited to deal with new and unprecedented threats. In a [perceptive essay](#) from March, Francis Fukuyama argued that state capacity and trust in government were the crucial determinants, not regime type. If this is true, it still raises the question of what kinds of countries and societies are more likely to enjoy greater state capacity and trust.

With its apparent success in reducing new infections and deaths, China has presented itself as a model for aggressively mobilizing state resources to fight the coronavirus. It has also taken advantage of the absence of U.S. global leadership to project soft power and provide aid—including through so-called “[mask diplomacy](#)”—to struggling countries, including Western democracies themselves. The Chinese regime is, in effect, making an argument about regime type, and one that authoritarian regimes are likely to appreciate, regardless of the merits.

Then there’s the reality that the largest Western democracies (but not East Asian democracies) have suffered the most in terms of total cases and per capita deaths. This has led a growing number of Americans and Europeans to doubt not only their governments, which is only natural, but their own political systems. How, after all, could the world’s oldest, most advanced

democracies end up with countless dead from the coronavirus?

Responding to China’s authoritarian challenge as well as the continued erosion of democratic confidence at home will be critical over the coming years. This requires American and European recovery and leadership, of course, but it also requires that Western democracies resist the urge to make permanent the temporary mobilization of state power and institution of overbearing surveillance systems. The temptation to be in perpetual state of emergency will only grow in the absence of a vaccine or cure. The deployment of [wartime language](#)—considering that wars against enemies, seen and unseen, have invariably been used to restrict individual freedoms—is as understandable as it is dangerous.

For established democracies as well as hybrid regimes still holding somewhat competitive elections, there are three pandemic-specific risks worth highlighting: delayed elections, “democracy without protests,” and incumbent advantages.

Postponing elections is obviously problematic (particularly when it’s seen to benefit one party over the other) but holding elections where the risk of transmission is significant creates its own legitimacy deficit. Turnout will be depressed, particularly among older voters. In either scenario, losers may be more likely to either challenge the outcome or claim the results do not accurately reflect popular sentiment. And that is precisely why elections, however flawed, are preferable to the alternatives; they remain the best way to gauge public preferences at regular intervals.

Despite, or perhaps because of, countries becoming “[less free](#)” over the past decade, protests have proliferated across the globe, culminating in 2019—an [unusually active](#) year for demonstrations and mass action. With the economic fallout from the pandemic, coupled with government missteps, the reasons to be angry are only likely to grow. The problem, though, is that it’s not easy to organize, at least not in proximate physical space, in an

age of social distancing and public gatherings limited to 500 citizens or less. Relatedly, the lack of freedom of movement and access to public space exacerbate the incumbent advantages. In countries like Hungary and Turkey, where media space is dominated by ruling parties, challengers will have even less visibility than usual.

While “reopening” can create its own authoritarian temptations around tracing and surveillance regimes, it at least removes emergency restrictions and, in due time, avails political parties, protestors, and grassroots movements to communicate their platforms and grievances to larger audiences.

THE DURABILITY OF REGIMES

The earliest phase of the coronavirus threat, in March and April, saw the disease exacting a devastating toll on Western democracies in particular. But judgments about the relative success of (some) democracies versus (some) autocracies will be made in months, if not years. And this is where democracies can claim a more encouraging medium- to long-term outlook.

Authoritarian regimes are only good at responding to crises when they’re good, and when they’re not—which is most of the time—there is no obvious way to course correct. Correcting errors is entirely dependent on the very people who made the blunders in the first place. There are no strong or autonomous power centers that can counter or even temper the decisions of the authoritarian executive. Undemocratic regimes have a vested interest in suppressing information that reflects badly on senior officials, which is precisely what hobbled China’s response in the critical, early days of the virus. As Martin Gurri, author of [The Revolt of the Public](#), puts it, “The first question that governments ask in response to a crisis is not how to stop it, but how to frame it in a way that makes them look as good as possible.” Since authoritarian regimes, particularly the few successful ones, are overly reliant on “performance legitimacy” rather than popular legitimacy, state authorities need to



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RA BOLSONARO

go into overdrive to sustain narratives of success, effectiveness, and paternalistic wisdom. After all, that's the implicit social contract imposed upon citizen-subjects: they may have to forego their freedom, but at least they [get something in return](#).

Democratic governments may try to suppress information and spin or downplay crises as well—as the Trump administration did—but they rarely get away with it. If anything, the intent to suppress on the part of the government can provoke an unusually intense desire to expose its mistakes on the part of the press, the legislative branch, and civil society. Even within the executive, experts and bureaucrats, as with the White House Coronavirus Task Force, can temper and balance the instincts of elected officials, including the president—and they can do so without fearing for their livelihoods or freedom.

Over the long-term, questions around “legitimacy,” however difficult to quantify, grow more, rather than less, important. A general rule is that, in democracies, governments are unstable while regimes are stable. In autocracies, it is often the reverse: governments appear stable while regimes are unstable. For example, Italy’s coalition governments are [notoriously fractious](#) and seemingly always on the verge of collapse. But few Italians call for overthrowing the political system and replacing it with something entirely different. Italians can generally sleep at night knowing that the risks of regime change—or some sort of coup—are slim. In autocracies, on the other hand, there is permanent, structural uncertainty. If the current dictator happens to be effective or “benevolent,” then such benevolence only persists while he or she remains in power. After he or she is removed or dies, a radically different leader, in terms of skills and temperament, may emerge.

FAILURE AND IDEOLOGICAL COMPETITION

As long as the coronavirus remains a threat, in either human or economic terms, every failure and

every victory is a mark, however misleadingly, for or against particular political systems.

The Singaporean diplomat Kishore Mahbubani, author of [Has China Won?](#), has already reached a conclusion about others’ conclusions, [noting](#): “Many thoughtful leaders and observers in strategically sensitive countries around the world have begun making preparations for a world where China may become number one.”

There’s only one way to truly find out: with the passing of time. But whatever the verdict, the stakes are high, not merely for a sometimes esoteric debate about the nature of political systems, but for the people who live under them.

Even in regions where the coronavirus hasn’t hit as hard as many feared, such as the Arab world, the economic fallout will be tremendous. The region had a relatively mild recession after the 2009 financial crisis. There will be no such good fortune this time around, with plummeting oil prices, perhaps irreversible blows to tourism, and [steep cuts](#) in government benefits. This isn’t good news for what little hope there may have been for even the most minimal reforms. If some citizens respond to the economic fallout with protests, after fears around mass gatherings subside, Arab autocrats—in crisis mode and as nervous as ever—are likely to ramp up authoritarian measures and use (or misuse) emergency powers to further limit what political parties and civil society can say or do.

This is the dark side of “performance legitimacy”: Even when autocrats are relatively competent, performance can never be quite guaranteed. Economic crisis cannot be staved off by mere expertise and force of will. Performance legitimacy, then, is always up for debate, at least eventually.

Democracies aren’t looking great now, to be sure, but democracies have the virtue (or weakness) of generally being better than they look. As the political theorist David Runciman argues

in *The Confidence Trap*, at any given moment democracies appear chaotic, ineffective, slow, and inelegant. They tend to look more appealing only in retrospect with the passage of time and the accumulation of insight and evidence.

One option is to wait and hope. Until then, it is possible to take some solace in what we know empirically about democratic durability even when that durability is in tension with short-term effectiveness. This shouldn't be an argument for resting on laurels. It should be the opposite: if the citizens of democracy believe in it, then they are best served by remaining vigilant. Whether the matter of regime type is the right or best debate to be having—as Fukuyama said, other variables may ultimately be more instructive—it is a debate that many will have and many are already having. Certainly, autocrats themselves are eager to press their case, and they seem to believe that theirs is a strong one. However strong it may seem, for now, that doesn't make it right. If only there was someone to make the counterargument.

The WHO, international institutions, and the COVID-19 response

BONNIE JENKINS & BRUCE JONES



One of the more important changes in international affairs over the past decade has been the onset of a reality where the most important “rising” power, China, is increasingly vying for influence in what had long been a domain of American dominance: international institutions. That new reality been reflected into the COVID-19 crisis. The World Health Organization (WHO) has emerged as a Rorschach test of a changing international order.

Since the onset of the pandemic, a lot of heat has been generated by critiques of the international health agency, and by the Trump administration’s effort to focus blame for the slow American response on excessive Chinese influence at the WHO. Some critiques, focused on early missteps by the international organization, were legitimate even if they often misunderstood where the balance of power lies in the relationship between major powers and international organizations, while others were simply political.

Across the board, the critiques reflected pre-existing world views. For those who see in a globalized world a need for strong international cooperation, the obvious response to COVID-19 is to *strengthen*, not weaken, the WHO. For those who see China’s growing influence in international affairs as the central contemporary challenge, this episode has been proof of their pernicious

influence. For those who focus on the role of democracy in international affairs, Taiwan’s limited-access status at the WHO is the focus of concern. And for those inclined to distrust globalization itself, the spread of COVID-19 is a cause célèbre for the case of reversing the globalization of supply chains.

A VITAL OPERATIONS ROLE

The WHO is playing a vital operational role in the response. Most countries rely on it for information and analysis about the disease itself—especially those countries (the large majority) that do not have their own equivalent to the U.S. Centers for Disease Control and Prevention (CDC). The WHO Secretariat is a repository of several of the world’s leading epidemiologists (many of them American or former CDC employees), and an information hub for the world’s leading epidemiology and infectious disease research centers. It has helped governments train rapid response teams to deal with contact tracing; helped governments retool their hospitals and emergency care centers to deal with the specific features of the COVID-19 outbreak; and supplied testing kits and equipment to more than 120 countries worldwide.

The WHO is also playing a key role in coordinating rapid-pace scientific work to generate progress toward treatment of the disease itself. Its most

important effort in that domain is what's referred to as the Solidarity Trial, in which scientific institutions from 100 countries have joined together in an effort to rapidly test four different sets of drugs for their potential to treat the disease. By pulling countries together, the joint trials enable larger sample sets, pooled data, and access to treatment courses from manufacturers in several different countries—in short, faster progress. And in March 2020, the WHO published the [first roadmap for coordinated efforts](#) to develop a vaccine—a key function that will allow for more efficient allocation of testing and trial efforts to fast-track vaccine development.

The WHO, though, is only one part of a wider set of national and multinational institutions involved in the response to the crisis. Several other actors have mobilized to respond. That includes the World Bank, which has mobilized more than US\$14 billion for the response both to help countries navigate the economic consequences of the crisis, but also to help them finance surge capacity in their public health sectors. (The Bank's targeting of loans and grants is largely driven by WHO assessments of countries' public health capacity—another key role for that agency.)

As we shift from the immediate “lockdown” phase to efforts to develop treatment and vaccines, there are also important efforts underway from the wider set of international institutions involved in global epidemic health response. That includes GAVI, the Vaccine Alliance, whose original name—the Global Alliance for Vaccines and Immunization—did a better job of representing its mission; CEPI, the Coalition for Epidemic Prevention Innovation, which funds research into vaccines to deal with new viruses; and the Global Fund to Fight AIDS, Tuberculosis, and Malaria, which has important expertise in combating infectious diseases. Regional organizations like the African Union have stepped up their effort to backstop member states struggling with the response, and even the North Atlantic Treaty Organization stepped into the breach, airlifting emergency supplies of protective equipment to needful members.

PROBLEMS OF COORDINATION

When the world was confronting the widespread Ebola outbreak in West Africa and its incipient global spread, it became abundantly clear that the kind of wider, multi-dimensional response needed to deal with a phenomenon like the 2014 Ebola crisis was well beyond the remit and capability of the WHO. That's for two reasons: the WHO is designed to be a scientific monitoring and advisory body, not an operational one; and even in its monitoring and advisory roles, its capacity had been weakened, not strengthened, during the previous decade. To deal with the Ebola outbreak, two unorthodox methods were used: the United Nations established a variant on a peacekeeping force to deploy into the affected countries (the UN Mission for Ebola Emergency Response, UNMEER); and the United States—with the backing of over 190 countries at the UN—sent just over 3,000 troops to West Africa to bolster the UN mission and the West African governments.

That combination of responses helped West Africa cope with Ebola and limit its global spread. But it's not a model that offers a solution to COVID-19, because the UN can't deploy that kind of response to more than 140 affected countries simultaneously, and even the United States doesn't have the bandwidth to perform “national guard” functions at the scale the current crisis would warrant. A more diffuse, localized and country-specific set of responses is going to have to suffice.

That puts a premium on efforts to orchestrate the response, to make sure that it is efficiently targeted, streamlined, not duplicative, and anchored in sound policy and science. If this were any similar crisis during the past 50 years, we would expect one singular actor to be the most important voice playing that role: the U.S. Centers for Disease Control and Prevention. The combination of the CDC's reputation for excellence, the scale of its resources, and the wider resources of the U.S. government that it could bring to bear have made it the world's go-to source for advice and leadership in previous cases of

epidemic response. It is one of the most dispiriting parts of the American response to COVID-19 to see how weakened that institution has become, hobbled by politicization of science and decision-making at the White House, and by funding cuts. The combination of a weakened CDC and the White House's universally panned decision to hold back funding for the WHO in the midst of this crisis have resulted in the United States forfeiting its capacity to lead the response to this crisis—at great cost.

WHO ELSE CAN LEAD?

If the United States steps back from a leadership role in the global public health architecture, can China step in? Briefly, it seemed like it would vie for that role, and it did record some early successes—in Italy, for example, early Chinese generosity showed in stark contrast to America's effort to kick everyone else off the lifeboat, and public opinion polls in Italy show that that has had an effect on [perceptions of the two competing powers](#); how enduring an effect, it remains to be seen. But China has squandered whatever opportunity it might have had by defaulting to pressure tactics to deter independent investigation into its early missteps or those of the WHO, and by launching a [propaganda campaign](#) to blame the United States for the pandemic. That the United States has also engaged in some loose blamesmanship has not diluted other countries' distress at China's pressure diplomacy (though it has reinforced countries bewilderment at America's response).

To date, the closest thing we've seen to the kind of leadership this moment is crying out for is coming from Europe. The United Kingdom announced that it was co-hosting a Coronavirus Global Response Summit on May 4, bringing together key governments like Germany and Japan, key philanthropies like the Wellcome Trust and the Gates Foundation, and the critical institutions—especially the WHO and CEPI—to pump up international efforts to find a vaccine. That [Summit](#) was actually led by the president of the European

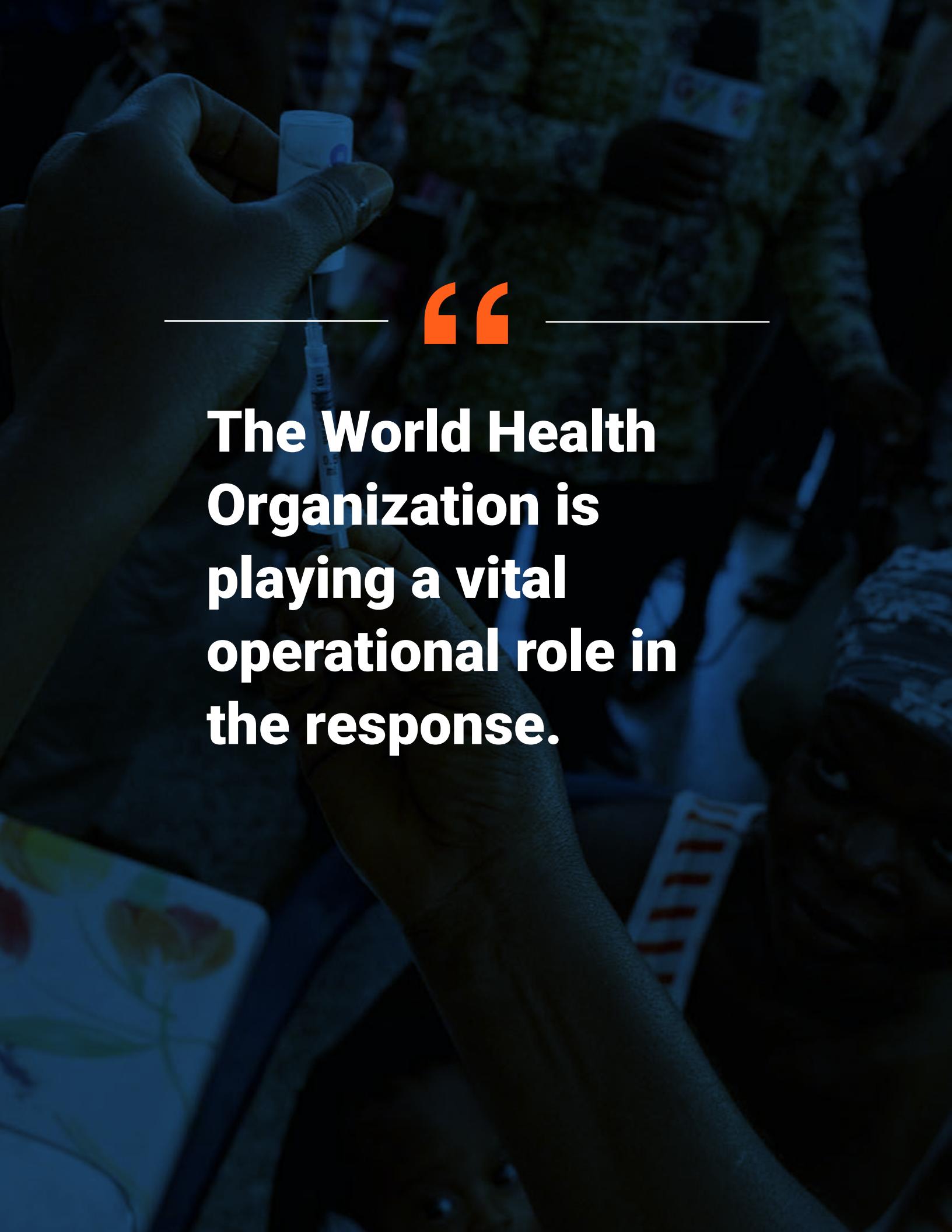
Commission, Ursula von der Leyen, and raised €7.4 billion for the response effort. That the United States chose not to participate in that conference was widely noted.

The Europeans could take this further. In the absence of focused leadership from the White House, the best case for sustained, coordinated effort in the response is a tactical alliance from key European leaders like von der Leyen and the UK, and key Asian leaders like those of South Korea and Japan, working together to orchestrate the international response and drive the WHO and other international institutions in the right direction. They might even appoint a joint special envoy, or similar, who could play the kind of “singular voice” role that in the past we would have expected the CDC director or an American task force head to play.

THE NEED TO LEARN LESSONS

Over time, as the severity of this crisis recedes, it's going to be important to learn lessons from what did and didn't work in the international response. The Trump administration has called for an evaluation of the WHO's early performance, and both it and other governments (like Australia) have called for an evaluation of China's early missteps. Properly done, both could add value. But a real evaluation of the response requires a more comprehensive assessment to include more than the WHO. There is plenty of blame to go around, and there are more positives than the critics allow.

A serious evaluation should look backward, first, to understand the disagreements between governments over the WHO's role in monitoring infectious disease outbreak over the preceding decade (and in particular the U.S.-China tussle over the 2005 revision to the International Health Regulations). It should examine the early actions of several key governments, including China and the United States. It should examine the wider panoply of international institutional responses. It should not be conducted by governments, but by independent institutions capable of driving



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The World Health Organization is playing a vital operational role in the response.

hard-hitting conclusions and making cogent recommendations about how to strengthen the international architecture for response. There's precedent in both the [Brahimi Report](#) on UN peacekeeping failures and the [Joint Evaluation of the international response](#) to the Rwanda genocide—both of which carefully weighed the balance of responsibility between institutions and the governments that seek to shape them. Above all it should reinforce an essential lesson: that investing in the international capacity for rapid response to a breaking crisis is a sustained, ongoing effort that requires vigilance and muscle.

That makes the Trump administration's decision amidst this crisis to seek to hold back U.S. funding of the WHO all the more self-defeating. It's been roundly rejected by America's closest allies and served only to isolate the U.S. at a key moment for shaping the response to COVID-19 and the structure of global health cooperation as a whole. German Chancellor Angela Merkel spoke for most of the world when, on a G-7 call, she soundly [rejected the U.S. approach](#): "she emphasized that the pandemic can only be defeated with a strong and coordinated international response," and "expressed her full support for the WHO and numerous other partners," her spokesperson said.

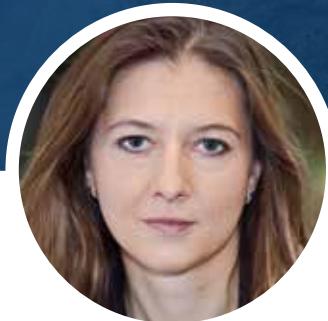
The United States has some uncomfortable choices ahead. It can have weak international institutions that don't stand up to pressure from major governments; or it can have stronger institutions that can resist that kind of pressure. But like it or not, China is a major power now, and all but the strongest international institutions are going to be as reluctant to criticize China as they historically have been to criticize the United States. Most of the world understands that. For the U.S., it's an uncomfortable new reality after several decades of being able to shape the action of international institutions without great power pushback. That world is gone.

We live now in a world where multilateral institutions are not simply instruments for cooperation; they are zones of struggle over ideas

and policy between competing major powers. How the United States and China behave inside multilateral institutions takes on major import. In the near term, on the coronavirus, most countries will seek to find ways to work within the existing structure of the WHO and other parts of the global health architecture to find solutions, while the Trump administration is focused on cutting funding pending a putative review of WHO actions. If it sticks with its current course, the U.S. risks losing ground as China gains it, losing relative influence on international system working to address what happens after COVID-19.

Walling off Mexico will not work

VANDA FELBAB-BROWN



The COVID-19 pandemic dramatically re-confirms that the United States is a member of a global community of countries and cannot isolate itself from global dynamics, trends, and threats. A retreat into an America First mentality will not insulate the United States from the spread of infectious pandemics or allow its own economy to thrive. As America reopens, it will have to take into account the needs and interests of its neighbors and foster crucial collaboration beneficial to all. U.S. relations with Mexico are a prime example of the need to deepen collaboration and harmonize policies from integrated supply chains to public health issues and develop harmonization procedures and structures that last beyond the first wave of COVID-19.

HARMONIZING SUPPLY CHAINS

The different timing of the spread of COVID-19 in the United States and Mexico, and thus the different anticipated timing of reopening the economies of each country, dramatically exposes the need to urgently coordinate and harmonize the management of integrated supply chains between Mexico and the United States, taking into account their public health dimensions. As the United States reopens its economy many U.S. manufacturing companies, such as automakers, as well as the Trump administration, including the Department of Defense, have

pressured Mexico to reopen the foreign-owned maquilas (factories) in the north of the country that supply the United States with product components for everything from automobiles to specialized medical equipment to television sets.

Yet, the maquilas that are not automated like in the United States, and employ hundreds of thousands of Mexicans who [work shoulder to shoulder](#) on assembly lines, have been declared as key sources of infection by [Hugo López-Gatell Ramírez](#), Mexico's deputy health minister. Maquila workers themselves have expressed grave concerns about risks of contracting COVID-19 on the assembly lines and complained about the [inadequate provision](#) of social distancing opportunities, protective equipment, and paid leave when they become infected. In a Lear Corporation factory [producing car seat covers](#) in Ciudad Juárez, 13 workers have died of COVID-19. These complaints have been seized upon by Mexican politicians who have conducted health-inspection raids on maquilas, dramatically shutting them down in front of TV cameras. Most U.S. and other foreign maquila owners have rejected the complaints, claiming that the COVID-19 protections they provide on the assembly lines are adequate. As of May 14, Mexico had [40,186 confirmed cases](#) of COVID-19 infection and 4,220 deaths attributed to the illness, both numbers widely believed to be [significant undercounts](#) but both rising rapidly.

As of mid-May, the pandemic is far from under control in Mexico.

Under pressure from the United States and facing a dramatic economic downturn that eviscerates [its social redistribution objectives](#), the administration of Mexican President Andrés Manuel López Obrador (AMLO) flip-flopped in response. It first resisted U.S. pressure for public health reasons, then agreed to open the maquilas and mining and construction industries on May 18, then shocked the Trump administration and U.S. companies by backing away from the reopening. As of May 15, it intends to start reopening those industries and production facilities on June 1.

The United States government and U.S. manufacturers cannot be indifferent to health of Mexican workers and, due to COVID19's spread, to the health of all the country's population. Mexican lives matter to the United States—not just for humanitarian reasons but because the U.S. will not be able to maintain much needed collaboration with its vital neighbor and partner on a wide range of issues if it acts with utter selfishness toward the deaths and disasters in Mexican communities. The need for concern by the United States is urgent, since the AMLO administration has been [egregiously slow](#) in adequately responding to COVID-19 and locking down the country.

U.S. indifference would also be myopic: U.S. citizens travel to Mexico for a wide variety of reasons—not just for tourism, but also for access to cheaper healthcare and to visit their families, some of whom may well work in the maquilas. If Mexico's COVID-19 infection festers and Mexico keeps suffering waves of reinfection as a result of premature reopening without adequate safeguards, the chances are high that the pandemic will spill back into the United States, compounding health and economic suffering here. If, with U.S encouragement, Mexico had not shut down the country in 2009 as the H1N1 swine flu was spreading—a [shutdown that cost Mexico \\$9 billion](#)—U.S. H1N1 deaths would likely have been [far higher](#) than the 10,000 Americans who died from the epidemic.

But the North American Plan for Avian and Pandemic Influenza that enables coordination among the United States, Mexico, and Canada on viral pandemics like COVID-19 (of which neither the Trump nor AMLO administrations took adequate advantage), however, does not address economic issues, such as harmonizing supply chain production and restarting during times of pandemics.

RECOMMENDED ACTIONS

To enable a healthy restart of the economies of both the United States and Mexico and to ensure both countries are better prepared to withstand further disruptions to supply chains, such as in following waves of COVID-19, the following measures should be undertaken:

- 1) Both countries need to agree on a strong emphasis of significantly improving health-protection measures in the maquilas to limit the spread COVID-19 beyond wave one of the pandemic, mitigate the spread of future infectious diseases in the maquilas, and address other health concerns in the maquilas. Binational inspection teams of health and technical experts should conduct the inspections, so that they become neither politicized nor persist in their current state of allegations and dismissals. Live close-circuit TV feeds can be mandated to be made available to the health inspection technical teams for constant monitoring beyond one-time unannounced visits.
- 2) Rapidly, the United States and Mexico should establish a joint decision-making team composed of government officials, technical experts, and industry representatives to determine what industries and what types of production are genuinely vital and essential and need to come online fast. Such a committee would be able to assess the validity of claims that [maquila pencil production](#)

#MEXICO FUERTE
#ALTO LAS AGRESIONES A ENFERMIERAS
#MURALEANDO EL BARRIO

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At a time when 33 million Americans have lost their jobs so far as a result of the COVID-19 pandemic, spending \$30 million on a single mile of pointless, ineffective, and counterproductive fencing is an egregious waste of money.

is “vital” (because nurses and doctors use pencils). The joint team would also evaluate existing stockpiles to determine whether any shortage of supply is imminent and thus whether a maquila can remain shut down. Since there may well be situations where both countries will not agree what an essential industry is—for example, Mexico may not agree that parts of U.S. weapons manufacturers should be deemed essential to risk Mexican lives—each country could have the right to deem up to three industries as essential beyond the those jointly agreed upon.

- 3) Such a joint decision-making body, comprised of a significant number of technical experts, would reduce the political controversies and resentment that the tone and form of U.S. pressure has taken—from tweets by U.S. Ambassador to Mexico Christopher Landau, widely interpreted in Mexico as threats, to the fact that the U.S. Defense Department took the lead in pressuring Mexico to reopen maquilas—which have reignited Mexican sensitivities about American imperialism.
- 4) Clearly, Mexican maquilas producing medical supplies, such as ventilators and personal protective equipment (PPE), should continue operating—with proper necessary health precautions. Those must include sick pay for maquila workers who become infected so they do not feel forced to continue working in order not to lose pay or employment. If they continue working, they will only infect more workers in essential industry sectors
- 5) But the United States must also take into account Mexico’s needs and the flows of people and products from the United States to Mexico. It must allow an

adequate supply of medical equipment and PPE to go to Mexico, and not cynically insist that all of it go to the United States while Mexico’s need to save lives is ignored.

- 6) Mexico must also be assured that it will get critical—and safe—food supplies from the United States, such as meat processed in ways that prevent the spread of infection to dairy products. That requires that the United States guarantees it will keep adequate food supplies flowing to Mexico but exercise strong health-control measures at U.S. food production places and during transport. Three major U.S. meat producers have experienced significant outbreaks of COVID-19 among their staffs and across their plants around the country, with at least 3,300 workers sickened by April 25 and at least 17 dying from the disease. Like in Mexico’s maquilas, many workers in the meat plants, some of whom are immigrants, have raised concerns about the lack of guaranteed sick leave, PPE, and other necessary health measures. And as with the maquilas, inadequate public health measures expose not only the workers themselves and their families to grave risks, but entire communities.
- 7) Finally, the United States and Mexico must coordinate their policies on the flow of people from the United States to Mexico by land. While air traffic is limited and includes health controls, and while the U.S.-Mexico border has shut down northbound travel by land for non-essential personnel such as nurses living in Mexico and working in the United States and non-essential cargo, the southbound travel remains open and uncontrolled. That means that infection can continue spreading from the United States to Mexico. Serious health control measures need to be implemented on the southbound traffic.

WHY THE WALL DOES NOT HELP PUBLIC HEALTH

Neither public health, nor public safety, however, will be enhanced by the border wall that the Trump administration has sped up building. In fact, the wall—in actuality, tall steel bollards—[undermines both public health and U.S. national security](#) while failing in its stated objectives of minimizing the flow of drugs, crime, and undocumented migrants into the United States.

With the U.S. presidential election approaching, the Trump administration is making a renewed push to fence off the 2,000-mile U.S. border with Mexico, promising to add more than 500 miles of new barriers by early 2021. As of April 23, 170 miles had been built, mostly [replacing previous fencing](#) in other parts of the country. Another 480 miles of border barriers were built by previous administrations.

Building the wall is a massive economic drain amidst the dire state of the U.S. economy. [Adding one new mile of the bollard wall](#) in southern Texas where border land is mostly privately owned, and the Rio Grande river forms the line of separation, costs some \$30 million. At a time when [33 million Americans have lost their jobs](#) so far as a result of the COVID-19 pandemic, spending \$30 million on a single mile of pointless, ineffective, and counterproductive fencing is an egregious waste of money. Spending the money on economic assistance to the unemployed and small and mid-size businesses that can be drivers of renewed employment would be far wiser. Beyond the \$18 billion the current version of the wall is projected to cost, President Trump wants to spend an additional \$500 million to \$3 billion on painting the wall black so that those who attempt to scale it get their hands burned. But that brutality would once again be an egregious waste of money badly needed for post-COVID-19 recovery since it would be easily defeated by wearing gloves.

Dangerously, the Trump administration continues to fund the wall with money commandeered

from the Department of Defense against the explicit wishes of the U.S. Congress representing taxpayers' interests. This year alone, the administration plans to [divert an additional \\$7.2 billion](#) from the military budget, having already diverted \$6.1 billion before. These seized funds have come not only from the [Department of Defense's counternarcotics accounts](#), but also from vital national security programs, such as ballistic missile and surveillance planes programs for keeping the United States safe from actual grave security threats.

Nor will the new fencing prevent the flow of drugs and undocumented workers into the United States. In just one month last fall, [smuggling crews](#) using ordinary and easily accessible battery-operated tools, costing as little as \$100, cut 18 holes through the bollards large enough to allow adults to crawl through. Since they push back the separated bollards to hide their entry points, the actual number of smuggling points may be far larger. Although COVID-19 has temporarily [disrupted both legal and illegal logistical chains](#), both drugs and people are smuggled into the United States, most frequently hidden in legal cargo containers. Smugglers have many other methods available, from tunnels to boats to drones, that render the wall useless.

Meanwhile, the construction processes of building the wall often do not follow proper social distancing and other health protective measures, thus raising the risk that the wall will contribute to the [spread of the COVID-19 infection](#) among local communities. Among the most vulnerable are [Native American communities](#) on both sides of the border. Even before COVID-19, the construction of the wall caused irreparable damage to their homelands, cultural and spiritual heritages, burial grounds, economies, and local environment.

I note in my reopening piece on wildlife trade and conservation that, at a time when the COVID-19 pandemic and the deaths, health damage, and economic calamity it causes globally should prompt us to preserve natural habitats and

protect biodiversity, the wall causes immense environmental damage. From drying up precious surface water and aquifers in New Mexico, to leveling century-old saguaro cacti in Arizona, to threatening to destroy the National Butterfly Center in Texas, the wall fragments and imperils habitats and threatens tens of endangered species, such as jaguars, ocelots, and the Mexican wolf as well as pollinators vital for U.S. food production.

The COVID-19 pandemic poignantly highlights that increasingly the health of U.S. communities and our economy and natural habitats cannot be separated from the health of our neighbors and indeed the world. Building collaborative relations with neighbors such as Mexico and emphasizing mutual interests in developing harmonized policies is essential for achieving public health and economic recovery.

Reopening Muslim religious spaces

MADIHA AFZAL



At precisely the time when many faithful would otherwise turn to prayer, a public health emergency without precedent in our times has made the very act of assembling for prayer hazardous. Religious congregations in the Muslim world have become especially fraught. Large gatherings at a pilgrimage site in Qom, Iran, and meetings of the Tablighi Jamaat—an international proselytizing group—in Pakistan, Malaysia, and India in February and March became vectors for the initial spread of the virus in those countries, and from there traveled to others. In India, this led to [ostracization](#) against Muslims; in Pakistan, to [finger-wagging](#) and mass quarantine for Tablighi Jamaat attendees.

But while those huge gatherings were shut down—and it is unlikely that such events will be able to resume in the coming year, perhaps longer—the question of how to handle regular communal prayer in mosques remains. On Friday afternoons in particular, but every day of the week, five times a day, Muslims (mainly men, but in some countries, women as well) stand shoulder to shoulder in mosques and prostrate before God. While some Muslim-majority states—Egypt, Morocco, and Saudi Arabia, among others—lost no time in shuttering mosques during the pandemic, in others, congregational prayers have persisted; in some cases, including Bangladesh, in defiance of government orders, and in others, such as

Pakistan, because the government was unable to shut them down, even during its nearly two-month long lockdown.

THE INTERPLAY OF RELIGION AND POLITICS

It is not a state's religiosity that has determined whether its mosques have shut down, but the particular interplay of religion and politics in each context. That dynamic will also define how these spaces reopen and look to their future in this pandemic. Where politics and religion are both in the hands of the state—whether in ultra-rigid and fundamentalist Saudi Arabia or in Morocco, which has institutionalized a tolerant Islam from the top down—mosques were shut down quickly. In Saudi Arabia, the king is the custodian of the two holy mosques and in alliance with the kingdom's Wahhabi clerics—religious authority answers to the king. Saudi Arabia also halted the Umrah pilgrimage, and has encouraged Muslims to cancel hajj plans, indicating that it will be canceling the hajj for the first time in the modern kingdom's history.

In Morocco, on the other end of the spectrum from Saudi Arabia in espousing a tolerant version of Islam, the king is the *amir-ul-momineen*, the commander of the faithful. Mohammed VI [asked](#) the head of Morocco's Supreme Council of the

Ulema to issue a fatwa to close mosques. When the country's religious right objected, the king had them arrested.

In Pakistan, Prime Minister Imran Khan's government has been weak on a lockdown and weaker on mosques. The federal government essentially wrung its hands, meekly asking people to pray at home while keeping mosques open. Each of its provinces stepped in to impose limits on congregations. But in the run up to Ramadan, amid reports of defiance on these limits at individual mosques, the religious right—unwilling to give up higher mosque attendance and donations during Ramadan—pressured the federal government to reallow mosque congregations. The government issued 20 "standard operating procedures" for Ramadan congregations: keeping masks on; staying six feet apart; not talking while in the mosque, even during extended *Taraweeh*, or evening, prayers; performing ablutions at home. Crucially, it did not put a cap on the maximum number of congregants allowed. Compliance to these guidelines is nearly impossible to monitor, even harder to enforce. The rules, to no surprise, haven't been widely followed.

Pakistan's doctors have raised alarm bells about mosques becoming a vector for the spread of the virus. But so far in Pakistan, the mullahs have held sway over science. Pakistan's politicians have long given in to the demands of its religious right, which functions as a separate political actor in the country; and they have done the same in this pandemic.

A BETTER PATH

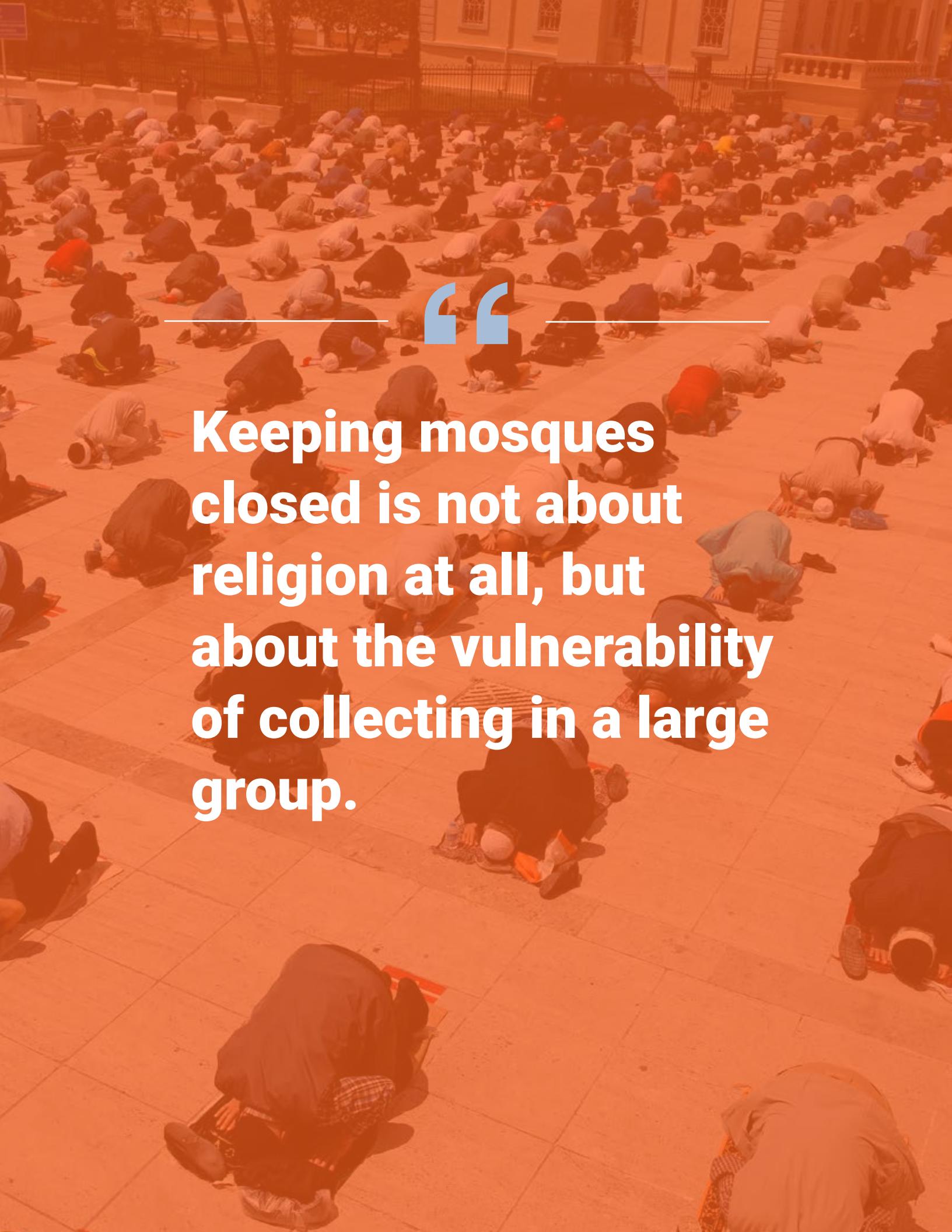
There could have been a better path. The government could have convinced clerics that whatever power they had before the pandemic would not diminish by closing down mosques; that the shutdown would be temporary; offered them economic relief for monetary losses that they feared; coopted and deployed them for public messaging on the necessity of social distancing and praying at home ([research](#) shows that

information coming from a trusted source is better at inducing behavioral change in epidemics); and helped them stream online prayer. In Malaysia, mosques are livestreaming worship. Alms, or *zakat*, are being collected online and at drive throughs.

Instead, the brief window Pakistan had to shut down mosques while the country was in lockdown was squandered. And in some ways, Pakistan's opening up mosques led the way to its lockdown unraveling across the country across sectors—from mosques to markets and even malls. Alarmingly, huge processions that the Shia sect holds annually to mark the death anniversary of Ali, the son-in-law of the prophet, also went ahead in parts of Pakistan. Amid rising cases, Pakistan's government is now warning that it may have to reimpose a lockdown after Eid; going by the past, its mosques are likely to remain open.

With all the sensitivities of religious and frightened publics, and given their perceptions of the importance of prayer in a pandemic and belief that God will save them from the virus, it is harder to convince them of the necessity for rules in mosques than it is to enforce limits on work, leisure, and school. Put another way, rules on religious spaces are more difficult to institute than lockdowns in general. In Aceh, Indonesia, for example, mosques have been gathering congregants despite a lockdown and a fatwa from the country's ulema council asking people to pray at home. And as a Pakistani religious leader who leads a network of more than 20,000 mosques and religious schools [told](#) Al Jazeera: "Essential services have been reopened, and offering prayers as part of a congregation is also an essential service." (This, of course, is nearly identical to Donald Trump's argument in America.)

States need to convince their populations that gatherings—closed-door ones in particular—must be the last activities religious or otherwise to resume in this pandemic. Keeping mosques closed is not about religion at all, but about the vulnerability of collecting in a large group.



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Keeping mosques closed is not about religion at all, but about the vulnerability of collecting in a large group.

COOPTING CLERICS

Religious clerics—feeling threatened by a loss of power, control, and income—should be coopted as partners by governments, and they should take the lead in encouraging people to pray at home. Where trust in government is limited, mosque imams can convince their own congregants to not attend prayers at mosques. And, as much as possible, states can assist in technology acquisition for mosques so that these imams can stream services and connect with their congregants online rather than via prayer in person.

Much as different countries' abilities to shut down mosques have differed, so too will their reopening. Paradoxically, Saudi Arabia will likely find it easiest to keep mosques closed and religious gatherings suspended. It reimposed a strict curfew during Eid al-Fitr among rising COVID-19 cases during its loosened lockdown during Ramadan. The Moroccan and Egyptian states, too, will be better able to keep mosques closed and to stamp down on dissent. When they reopen, those countries will find it easier to enforce and implement rules on limited congregations—including imposing fines on mosques if they see violations.

When and where mosques do reopen across the Muslim world, it must be with severely limited numbers. We know that holding activities in outdoor spaces reduces chances of the virus spreading. Prayers should be held outside as much as possible, and mosques that do not have outdoor courtyards or other spaces near them should be provided access to parks, if available. Congregation limits can be based on mosque size, allowing for a six-foot distance between congregants.

Once antibody testing is widely available, congregants should be limited to those who have acquired “immunity passports.” Before that, to keep numbers to a minimum, mosques should allow multiple batches of congregants in allocated prayer times, with time to disinfect in between, and turn away anyone over the limit. It will be a

new environment and a major readjustment for these religious spaces for the foreseeable future. This much was evident during Eid al-Fitr, which marks the end of Ramadan, this year. It was a somber affair across the Muslim world, with varying levels of lockdowns and social distancing in mosques—if prayers were held at all. Such adaptation is no attack on religion, but the road to salvation from this pandemic for us all.

Reopening Iran

SUZANNE MALONEY



The first major outbreak of the novel coronavirus outside of East Asia struck Iran. Already reeling from severe American sanctions, Iranian leaders initially failed to appreciate the magnitude of the threat posed by the pandemic and struggled to mount an effective response. For pragmatic as well as ideological reasons, Tehran sought to balance economic exigencies with the imperatives of containing the virus, opting for a relatively short-lived shutdown and a steady effort to reopen. But the Iranian experience underscores the inherent complexity of managing these trade-offs, as its limited closure and swift reopening generated new waves of infection in cities around the country and may only set back Iran's prospects for durable economic recovery.

A SLUGGISH START

From the start, Iran's handling of the novel coronavirus was marked by denial, opacity, and a scramble to catch up with the contagion. The government ignored early warnings. In late January, Health Minister Saeed Namaki requested a ban on travel with China and quarantine for Iranians returning from Wuhan. In fact, an Iranian airline continued flights to China for at least another six weeks. Namaki's concerns were not the first. His predecessor claims that he had alerted President Hassan Rouhani as early as

December 2019 about the spread of the novel coronavirus.

Tehran's early indifference reflected complacence and distraction. Like much of the rest of Asia, Iran had experienced prior epidemics, including significant outbreaks of bird flu and other coronaviruses, without sustained disruptions or significant casualties. And, as this latest virus began to spread, Iranian leaders were grappling with other urgent crises—fallout from internal unrest in late 2019 and escalating tensions with Washington that culminated in January with the U.S. assassination of Iran's most prominent military commander. Iranian retaliatory attacks injured more than 60 U.S. troops in Iraq and accidentally downed a civilian aircraft, killing 176 passengers and crew.

Already on edge, Iran's leadership sought to avoid unsettling its relationship with China—increasingly essential for trade and diplomacy due to U.S. sanctions—and hoped to preserve February parliamentary elections as an opportunity to rally public support. But shortly before that ballot, Iran revealed its first COVID-19 casualties, and by the time the election results were announced, viral images of mass graves were circulating social media and an MP accused the government of concealing dozens of deaths. COVID's arrival in Iran could no longer be swept under the rug. After

coughing and sweating through the [government's first public briefing](#) on the virus, where he scoffed at the utility of quarantines, Iran's deputy health minister acknowledged that he himself was infected.

Iran's coronavirus outbreak first erupted in Qom, 90 miles south of Tehran and the site of the country's most renowned seminaries. Its role as a hub for Shia pilgrims and clerical students, as well as for a high-speed rail network under construction by a Chinese firm, facilitated the [rapid spread throughout the country](#), including among the highest ranks of the Iranian government. The Islamic Republic is a unique hybrid of elected and theocratic authority, but the virus' spread among the senior leadership underscored the continuing centrality of religious legitimacy for the leadership. Within weeks, the [list of confirmed cases](#) included two dozen members of parliament, military officials, and cabinet members such as Vice President Masoumeh Ebtekar, best known as the spokesperson for the students who seized the U.S. Embassy in 1979. Most recovered, but among the casualties were several influential advisors to Iran's top leadership.

TEHRAN'S PARTIAL LOCKDOWN

COVID-19's direct hit to the heart of the revolutionary system quickly galvanized a more serious effort to contain the spread. In late February, Iran put schools and universities on hiatus, closed movie theaters and cultural sites, and suspended in-person convening of the parliament as well as official travel. By mid-March, the restrictions were tightened, including the cancellation of public Nowruz (New Year) celebrations and the first-ever cancellation of Friday prayers since the 1979 revolution.

Iranian mitigation measures intensified as the scale of the pandemic became evident. Tens of [thousands of prisoners](#) were furloughed in hopes of mitigating the virus' spread, while streets, mosques, and public buildings were [disinfected using drones](#) as well as the water

cannons more infamous in Iran for repression of street demonstrations. Roadblocks were set up to facilitate random screening, and industrial production of [masks, ventilators](#), and other vital protective and medical equipment was put into high gear.

Some draconian measures generated controversy. [Scuffles erupted](#) when worshippers attempted to reopen several religious sites by force. The government resisted the pushback and mounted a campaign to socialize the new restrictions. Athletes, actors, and other public figures were enlisted to reinforce government messaging, senior officials modeled masks, and for the first time in more than four decades, [drive-in movies were permitted](#).

Still, Tehran balked at the type of nationwide lockdown that helped contain the virus in several countries with early outbreaks. Instead, it availed itself of the Nowruz interlude, appealing for Iranians to stay home and expanding or extending already scheduled holiday breaks. Tehran rejected [appeals by some local authorities](#) to institute a stricter quarantine. An initial plan to deploy 300,000 contact tracers to go house-to-house was shelved out of concern that it might accelerate the virus' spread, and an [inter-city travel ban was imposed](#) only after millions of Iranians had already taken to the nation's roads for Nowruz in defiance of official advice.

In early April, parliament briefly debated a bill that would have mandated a more ambitious national lockdown—a month-long closure of all government offices and business, closure of public transportation, and provision of two months' salary, free utilities, and financial support to the poor. But lack of resources doomed the legislation.

IRAN CAN'T AFFORD TO CLOSE

Iran's [economic precarity](#) explains the government's reluctance to extend tougher measures to limit the spread of the virus. The pandemic exacerbated the calamitous economic

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From the start, Iran's handling of the novel coronavirus was marked by denial, opacity, and a scramble to catch up with the contagion.

impact of Washington’s “maximum pressure” campaign. Over the past two years, since the Trump administration withdrew from the 2015 nuclear deal and reimposed tough financial and trade sanctions, [Iran’s oil exports](#) fell by 80 percent, the [value of its currency](#) cratered, and living standards for ordinary Iranians deteriorated as a result of rising inflation and unemployment.

Complicating Tehran’s response to the pandemic was the [wider economic context](#): the succession of border closures by Iran’s neighbors, meant to stem the contagion, curtailed a vital lifeline of non-oil regional trade that had buffered the country’s loss of oil revenues. And as countries around the world imposed lockdown measures, the collapse of energy demand sent oil prices tumbling, accelerated by a [spectacularly ill-timed price war](#) between Saudi Arabia and Russia.

The result was a perfect economic storm for Tehran, with millions more added to the already sizeable rolls of under- and unemployed.

“Doctors say the coronavirus becomes more fatal when there is an underlying condition,” Iranian presidential advisor Hesamoddin Ashena tweeted in February 2020. “Sanctions are that underlying condition which makes coronavirus more ominous and more fatal.”

To offset internal hardships, Tehran will withdraw [up to 1 billion euros](#) from its sovereign wealth fund to sustain the economy through small subsidies, low interest loans, and modest [advances](#) to the 23 million Iranians who receive government cash handouts. Iranian leaders welcomed assistance from the World Health Organization and other international donors (with the exception of Washington), and for the first time since 1979 sought a capital injection from the [International Monetary Fund](#). Tehran also launched a concerted campaign, which the State Department [branded as a scam](#), to [elicit U.S. sanctions relief](#) or at least erode international compliance with U.S. restrictions on trade and investment in Iran.

FALLOUT FROM A RUSHED REOPENING

None of these measures are sufficient to sustain the battered Iranian economy through a long closure, or to insulate the Iranian leadership from the kind of fierce public resentment that sparked violent demonstrations, most recently in late 2019 over gasoline price hikes. And so Iranian leaders began preparing for reopening almost immediately after implementing a lockdown.

This was not just an economic or political decision; it was an ideological one. From the beginning, Iranian leaders saw the outbreak as a deliberate attempt to devastate the country’s economy, the latest in a continuum of American–orchestrated attempts to strangle the revolutionary regime. Iran’s supreme leader [Ayatollah Ali Khamenei](#) and [senior Iranian military officials](#) have accused the United States of engineering the novel coronavirus as an offensive weapon. For a leadership steeped in suspicion and habituated to American economic pressure, the virus’s early, intense emergence in Iran confirmed the [“counter-revolutionary conspiracy.”](#) “Since the first day that we faced this virus, I realized a threat at the very first moment, in addition to this threat affecting people’s health,” Rouhani [noted in mid-May](#). “I felt this threat through foreign media. I saw that it wanted to have the country shut down using the excuse of this disease and to distort affairs.”

The conviction that Washington may have deliberately unleashed the virus as part of its “maximum pressure” policy only reinforced the need for a rapid reopening, despite prospective risks and costs. Reviving the economy is more than a domestic requirement for Tehran; it’s an essential part of deterring the schemes of Iran’s adversaries. Iranian officials have [repeatedly invoked](#) the central historical episode that frames their worldview—the 1980 Iraqi invasion and the eight-year war that followed—to implore a heroic national effort to overcome the virus and maintain national unity. “We cannot accept death by COVID-19, [but] we do not believe in death due to

hunger and poverty either,” [Rouhani emphasized](#) in early April.

As a result of these ideological and economic imperatives, only a few weeks after imposing the toughest measures to contain the spread of COVID-19, Iranian leaders began relaxing them. Under the banner of “smart social distancing,” Rouhani announced the reopening of low-risk businesses on April 11 for most of the country, with an extra week for Tehran. Most government employees went back to work on the same timeline, inter-city travel restrictions were lifted, and medium-risk businesses and shops quickly followed.

As the reopening unfolded, Iranian officials adapted their approach to incorporate regional differentiation based on hospital utilization, with each area of the country assigned a classification—white, yellow, red—but in reality, the differentiation was minimal. [Schools resumed](#) in areas with low infection rates in early May, and the rest of the country joined two weeks later, although families could opt to continue remote learning. A similar pattern held for mosques and religious institutions: Friday prayers resumed in 132 “white zone” areas in early May, and while the large weekly services held in major cities remained on hiatus, by the end of the month the courtyards of Iran’s venerated shrines in Qom, Mashhad, and elsewhere around the country [welcomed worshippers](#). With the resumption of restaurant service in late May—water pipes remained off-limits—Iran had only the lightest official restrictions still intact.

As with most aspects of Iranian policymaking, the rapid reopening of the country’s economic life has not come without contestation. Public health experts have [feuded openly](#) with their counterparts who oversee the country’s trade and industry, warning of [dire outcomes](#) from reopening. Early signs suggest those fears were justified; even as the reopening expanded, [infection rates surged](#) in at least eight of Iran’s 31 provinces. Officials [implored Iranians](#) to follow

health protocols, including a new requirement to wear masks on public transportation, the source of more than [one-fourth of all COVID-19 infections](#) according to government statistics. Still, the [group “selfies”](#) at the inauguration of the [newly-elected parliament](#) in late May highlighted the futility of moral suasion as a response to the pandemic. Amidst dark warnings that the official data on infections and death drastically underestimate the scale of the contagion in Iran, [Rouhani insisted](#) that Iran has no choice but to chart a path forward for normalcy while continuing the fight against COVID-19, adding that “everyone must be ready for life with the coronavirus.”

Israel reopens, but the risks persist

NATAN SACHS



Israel reopened its economy in May to a general sense of success. The interim “bottom” line of the COVID-19 crisis was under 300 deaths nationally of a population of close to 9 million—a relatively contained provisional outcome in comparison to other countries. Israel had responded early and with stringent measures to the global pandemic. It had, moreover, successfully cooperated on health issues with both the Palestinian Authority in Ramallah and, separately, indirectly, and quietly, with the Hamas authorities in Gaza, where the risks of a full-blown outbreak are immense. The apparent success was uneven, however. One sector of society suffered the brunt of the pandemic, such as the Haredi (“Ultra-Orthodox”) community.

But the apparent early success spurred a debate among some scientists as well as the public about the appropriate response to the crisis, given the economic toll of the effort. Some have argued that the country’s low mortality rate was due more to its relatively young population than to the near shutdown of the economy. There is, in fact, a risk that the perception of early success may itself be a cause for subsequent complacency. Israelis and Palestinians emerged from the closure only to see early signs of upticks in infections, and a crisis contained in the spring may yet become a greater one by the fall.

EARLY MEASURES

Israeli authorities [confirmed](#) their first case of COVID-19 on February 21. By the first week of March, an outbreak was identified in the West Bank town of Beit Jalla, between Jerusalem and Bethlehem, and the latter city was closed to outside travel. The Israeli government banned all air travel from highly infected countries, a list that grew quickly to include European as well as East Asian countries. It ordered self-quarantine on those returning from all foreign destinations. By mid-March the government [ordered](#) the closing of kindergartens, schools, universities, and restaurants, and declared a general ban on congregations of more than 10 people. By April, the country was largely shut down, with strict limits placed on most people exiting their homes.

As the pandemic arrived in Israel the country was in the midst of a year of political crisis. The first confirmed case was identified less than two weeks ahead of a national election on March 2, the third such election in less than 12 months. A country well-versed in security crises—indeed a country technically still in a legal state of emergency since the first week of its existence—it was far less versed in handling a health crisis.

The ministry of health, which took the lead, was later joined in a command center east of Tel Aviv

by other ministries as well as the military, police, the Mossad (the external security service, which precured equipment abroad from unnamed sources, likely among Arab Gulf states), and the Shin Bet (the internal security service, ISA or Shabak). The latter, with broad technical capacity in surveillance, usually of Palestinians, was [deployed](#) to the surveille Israeli citizens, tracking via cellphone data the movement of anyone infected. The measures were extreme, but in a medium-sized country accustomed to emergencies, they were met with relatively little complaint, aside from a warranted [concern](#) for a lack of parliamentary oversight over these measures during the political crisis.

With all that Israel was doing, it conspicuously hesitated to take a step its experts recommended: a travel ban on flights from the United States, where the crisis had already emerged, including among Orthodox Jewish communities in the greater [New York](#) area who have closed ties to sister communities in Israel. It emerged before long that Prime Minister Benjamin Netanyahu had [overruled](#) his experts for fear of angering President Trump. Indeed, when the travel ban was eventually put in place, it was instated as a then-still unnecessary global travel ban, in order not to single out Trump's United States. One study in Israel [suggested](#) the link to the United States was the source of perhaps 70 percent of early cases in Israel.

COOPERATION BETWEEN THE PALESTINIANS AND ISRAEL

Despite the fraught relations between Israel and the Palestinian Authority in Ramallah, and the intermittent warfare between Israel and Hamas in Gaza, the sides managed to [cooperate](#) effectively during the crisis. Medics from Gaza—a territory under varying degrees of closure for 13 years—[were brought](#) in to Israel for training. A host of other quiet measures were taken to support the efforts, including the transfer of supplies and the relaxing of restrictions on exports, fueled by a fear of a catastrophic outbreak in Gaza, a [crowded](#),

enclosed area of about 140 square miles with nearly 2 million inhabitants. In the West Bank, where Israeli-Palestinian technical cooperation is far more routine, the efforts were likewise pragmatic.

If Israel benefits in this crisis from a young population, with about [42.5 percent](#) under the age of 25, that is even more the case with the Palestinians. In the West Bank, more than half ([56 percent](#)) are under 25, and in the Gaza Strip, the figure is a staggering [64 percent](#). The three economies are also integrally linked. By far the largest destination for Palestinian exports is Israel, and the latter controls nearly all border crossings (with the exception of the Gaza-Egypt border). As a result, the three territories are linked in health crisis even more than in normal times. The same will be true as the crisis unfolds further.

THE TRIBES OF ISRAEL

The most senior Israeli official infected in the pandemic was the minister of health himself, Yaakov Litzman. It was lost on no one that he came from the Haredi community, the worst hit by the pandemic for reasons both demographic and societal. Along with hospitals, synagogues and religious boarding schools were the primary [hotbeds](#) of the pandemic in Israel. The Haredi community is one of the poorest in Israel. It has the largest average family size of any major population sector, and very strong habits of communal prayer and study (Orthodox Jewish prayer generally requires the presence of 10 Jewish men). A highly conservative community, it also looks to authority figures other than the government or the health and science community for guidance. One of the most important rabbis in the Haredi community, Rabbi Chaim Kanievsky, continued to issue [instructions](#) to continue communal religious study long after the government had ordered otherwise. Considered to be the preeminent Litvak rabbi, his instructions carry weight among many Haredim. By April 2, the government [ordered](#) a specific closure on Bnei Brak, a largely-Haredi city east of Tel Aviv.

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Despite the fraught relations between Israel and the Palestinian Authority in Ramallah, and the intermittent warfare between Israel and Hamas in Gaza, the sides managed to cooperate effectively during the crisis.

The spread of the virus among Haredim, and their longstanding communal isolation among Israelis, contributed to their stigmatization during the crisis, but also to newfound solidarity between Israelis of different stripes. Forces deployed to help in Bnei Brak during the closure were [supplied](#) with Hebrew-Yiddish translation cheat sheets, to help soldiers dealing with a community where some converse in the Ashkenazi Jewish-German language. Tel Aviv, the real and symbolic center of secular Israel, [projected](#) on its town hall the words “Bnei Brak” in a sign of solidarity with its Haredi suburb.

Indeed, the pandemic also created some real soul searching within the Haredi community. Arieh Der'i, political leader of the largest Haredi party, Shas, spoke of the need for internal accountability. With the authority of an insider who is also a cabinet minister privy to the official data. A majority of the cases in Israel were among Haredim, he [claimed](#), calling for soul searching within the community itself.

Larger than the Haredi community, another relatively poor sector in Israel came through the crisis with high marks: Arab (or Palestinian) citizens of Israel. Despite early fear that a lack of infrastructure and resources, and a history of suspicion between security forces and the large minority group (about 21 percent of the Israeli citizenry), the toll in the community inside Israel was contained. This owed, [likely](#), to a combination of pragmatic cooperation of the authorities and the community, and to widespread civil society mobilization in a common effort.

THE DANGERS OF APPARENT SUCCESS

On April 20, the rate of recovery in Israel [first outpaced](#) the mortality rate, and the government announced the first measures to reopen the economy. These grew to include the opening of stores, malls, schools, and kindergartens. By late May, the country was mostly reopened, if still under orders toward precautions such as face masks and avoidance of major crowds.

Some institutions, including some universities, may not open yet, despite the leeway to do so, and early signs emerging from the reopening suggest caution is warranted. By the end of May, an uptick in infections was [recorded](#), including one in a Jerusalem high school. In the Gaza Strip, the first death was [reported](#), as the total number of cases reached 55, and the Palestinian authorities in Gaza again shut the crossings to Israel. Israel has already announced that specific “signposts” would entail a return to national shutdown, [including](#) 100 new cases in one day, a 10-day doubling of cases, or 250 severe cases, nationally.

Of greatest concern, however, is the preparation for the possible next wave. Some Israelis may have learned the wrong lesson from the apparent success: that the crisis was simply overblown. The Israeli shutdown of the economy, like that in other countries, bought the state time to prepare—with widespread testing, random sampling of the population, and targeted rather than nationwide procedures. Israel’s battle with the first wave of the coronavirus pandemic appeared successful, if extremely damaging to the economy. The whole costly effort could turn out to be a waste if the country’s approach to a second wave was merely a replica of the first.



한국일보

한국일보

How to deal with an invisible enemy: South Korea's war on COVID-19

SEONG-HO SHEEN



This year marks the 70th anniversary of the start of the Korean War. Ever since then, South Korea has prepared for confrontation with its northern enemy as the two Koreas remains technically at a war with armistice agreement, not a peace treaty. South Korea is fighting a war now, but the enemy is not the North Korean military. It is the invisible novel coronavirus. South Korea has become a subject of international media coverage for its success in handling the epidemic crisis.

A SHAKY START

In fact, South Korea had a shaky start due to sudden spike of outbreak after the Shincheonji (New Heaven) Church of Jesus, a secretive Korean religious organization, became a source of rapid infection with tens of thousands of members. The city of Daegu, a hub for the megachurch as well as major industrial and transportation hub for the southeastern part of South Korea, became a center of battle against COVID-19 in February and March.

Yet Daegu did not become a Wuhan, a Chinese city that went through months of complete lockdown after the outbreak was reported in January; neither a New York, which plunged into a medical crisis with more than 15,000 deaths as of mid-May. There was no lockdown order of Daegu and its death toll is 181, which accounts for about

70 percent of 262 nationwide total deaths in the same period. The capital city Seoul with 10 million residents has four deaths. This is such a contrast with the U.S. death toll of over 100,000 since January 20, when both South Korea and the United States reported their first confirmed coronavirus cases. What is the South Korean secret?

LESSONS FROM SOUTH KOREA

The lessons from South Korea's success story are as follows. First, early, efficient, and creative measures taken by the government made a difference. Second, government efforts were led by science and expert opinions. Third, notwithstanding some controversy over personal privacy, transparency in government policy combined with open information sharing all helped nationwide policy implementation with people's trust over government efforts. As a result, South Korea has managed the epidemic without any physical lockdown in peoples' lives. People are enjoying their normal lives with freedom of movement, job activities, and social lives.

Asked about South Korea's success during her interview with ABC News, Foreign Minister Kyung-wha Kang pointed to mass testing, contact tracing, and aggressive treatment (the three Ts) as the main strategies. But those measures are not new. It was from the U.S. Centers for Disease Control

and Prevention that South Korean experts learned about the same measures to deal with a similar epidemic back in 2015 when MERS (Middle East Respiratory Syndrome) killed 38 out of 185 Korean patients. Since then, South Koreans took the lesson seriously, and when the second virus attack came this year, they were ready.

The real differences are speed and efficiency that South Korean authorities adopted throughout this crisis. Since the major outbreak in Daegu, the government has conducted an average of 10,000 diagnostic test per day nationwide, with creative measures like drive-through testing, which confirmed 5,000 cases out of 200,000 Shincheonji members at the early stage. Once infections are confirmed, detailed travel histories of confirmed patients and potential contacts are instantly made public through a sophisticated “contact tracing” technique using closed-circuit camera footage, credit card histories, cellular geolocation, and GPS data. Anyone who passes nearby will be alerted with an instant smartphone message.

The government also made public access to healthcare easy by covering the financial costs for related testing and treatment while reimbursing medical facilities for losses incurred from imposed quarantines. And all these measures and messages were delivered with great [transparency and openness](#) in what the government calls “a dynamic response system for open democratic societies.”

CASH RELIEF

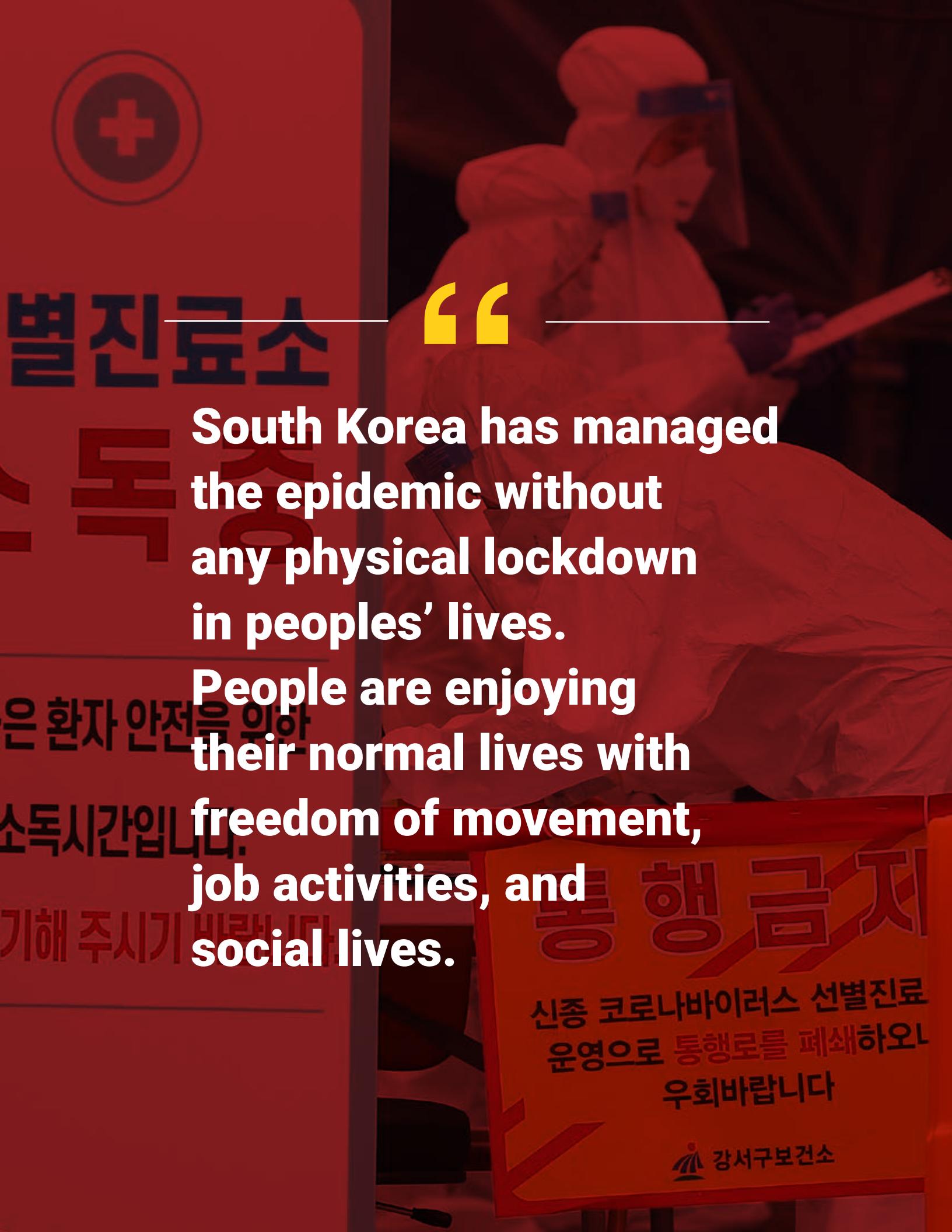
Such efficiency was also on display with government efforts for cash relief for Korean households. Since the government announced the plan to distribute up to \$800 per family of four on April 30, 80 percent of households had received the funds as of May 19, and 2.8 million Korean families got payments automatically wired to their bank accounts without even an application. The government runs a dedicated website on the program, offering quick search links that show how much families can receive and ways to apply—either online, via websites or credit card apps, or

in person at banks or municipal offices. Each time the recipients use their credit card, the mobile app pings them an update of how much of the [cash handout](#) remains.

What is more, the authorities still tried to keep the balance between individual freedom and public health as much as it could. Whenever information regarding confirmed cases became available such as movement of confirmed patients, the identity of the patients was protected from the public. For this the authorities relied on an established [legal infrastructure](#) that “endows the government with highly specific levers to allocate resources and mobilize various actors in a whole-of-society effort to combat the spread of infectious disease.” When there was a recent outbreak in nightclubs in the busiest district of Seoul, the government encouraged whoever visited those places to take a virus test anonymously and free of charge. Authorities were able to conduct 60,000 tests related to the case in just 10 days with voluntary participation so that they could prevent secondary infection to family, friends, colleagues, and local communities.

The results are quite stark. Not only has South Korea had very low death and infection rates among its some 50 million population, life and the economy are quickly getting back to normal. Despite the latest nightclub outbreak, the government is easing broader restrictions by reopening national parks, public facilities, sports centers, religious gatherings, and public schools.

South Korea’s economy, largely dependent on export trade, is no exception in being affected by worldwide recession. Yet, compared to other countries, South Korea is poised to face a global downturn in a relatively better shape. The International Monetary Fund predicts South Korea’s economic growth in 2020 will be -1.2 percent, far better than -6.1 percent average for advanced economies with countries like the U.S. at -5.9, Japan at -5.2 and the eurozone at -7.5 percent.



별진료소

독

은 환자 안전을 위한

소독시간입니다.

기해 주시기 바랍니다.

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**South Korea has managed
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in peoples' lives.**

**People are enjoying
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freedom of movement,
job activities, and
social lives.**

신종 코로나바이러스 선별진료
운영으로 통행로를 폐쇄하오니
우회바랍니다

NEW OPPORTUNITIES

At the same time, South Korea is reaping certain benefits from its success. South Korea is widely praised and recognized by the world media and other governments, promoting its global standing. While South Korean K-pop groups like BTS and movies like *Parasite* have led the “Korean-wave” in the U.S. and the world, now, K-health is another contender for the K-wave phenomenon, providing South Korean companies with unique business opportunities. Seegene, one of the major vendors for a virus test kit, was able to secure emergency FDA approval for American users in March and saw its stock price go up 300 percent in the first quarter this year. Many unknown small and medium South Korean bio companies like SolGent, LabGenomics, and Kogene Biotech are having a similar boosts while more ambitious giants like Celltrion and Samsung Biologics are gearing up for leading the Korean biotech industry in the world market. Most recently, Americans are watching and enjoying the Korean Baseball League on ESPN Live. And they are finding new attractions like the “bat flip” and movie-like camera work of the Korean players while most of America’s sports events are on hold, including Major League Baseball, until July.

The crisis is creating new opportunity for South Korea’s diplomatic front as well. President Moon was invited to give an opening speech for the World Health Organization annual meeting in May while world leaders, including President Trump, are rushing to ask for South Korea’s medical gear, equipment support, and various joint collaborations. China and South Korea agreed to a special waiver for businessmen traveling without quarantine measures as President Xi praised the two countries’ [close cooperation](#) in the epidemic. Meanwhile, Japanese media is urging its government to lift the export ban imposed last summer over history disputes while asking Seoul to provide medical support for Japan’s struggle with the pandemic.

And the pandemic crisis could provide a new opportunity for inter-Korean dialogue as well.

North Korea has claimed it is free from the pandemic after the country swiftly declared a travel ban with China as early as January. Still some experts argue that there might be hidden cases of coronavirus, pointing to the possibility of Kim Jong-un putting himself in quarantine, given his recent disappearance from public view in April and early May. Back in March, President Moon offered to help the North’s prevention efforts. Later Kim Jong-un sent a letter expressing his best wishes for South Korea’s pandemic situation. And the coronavirus diplomacy was joined by Mr. Trump who sent a personal letter to Kim expressing his willingness to help with “anti-epidemic work.” It would be an interesting twist if the coronavirus gave a new life to U.S.-North Korea dialogue.

While many countries and U.S. states postponed their own elections, South Korea managed to have a five-year term national general election in mid-April, with the highest turnout—66 percent—in modern history. Voters rewarded President Moon with the biggest win for the governing party, and he is enjoying over a 70 percent job approval rating, the highest ever for a single five-term presidency entering its fourth year in office.

Most of all, South Korea is better prepared for the next waves or shock from the virus. As Foreign Minister Kang told an ABC reporter, the world needs to learn to live with the coronavirus as there will be no going back to life before COVID-19.

China recovers first—with what lessons?

DAVID DOLLAR



China was the first country hit by the coronavirus pandemic and the first country to go into recession in response to the health shock. Now, it is the first major economy reopening and getting back toward normal. It faces the challenge of reopening safely while the U.S., Europe, and others are in major recessions. The situation is still very uncertain and could go south very quickly so no one should be declaring victory at this stage, but are there any lessons so far that might be relevant to other countries, especially the U.S.? I see three lessons that are relevant for other places.

THE IMPORTANCE OF TESTING, TRACING, ISOLATING, AND QUARANTINING

Getting the virus under control is the key to economic recovery. China [delayed and covered up](#) for several weeks at the beginning of the health crisis, which likely made the pandemic worse than it would otherwise have been and contributed to its spread to the rest of the world. But after that delay, China [locked down](#) a province of 50+ million people. Less well publicized is that local communities all over China took measures to limit coming and going and to take temperatures and test people who were traveling. As it got the virus under control, China continued to test, contact trace, isolate, and quarantine. Since then, there

has been no major spread of the disease in the past month. China's data, like the information from every country, probably understates the true number of cases and deaths. But if there were a major new hot spot, social media would be all over the story, even if posts were later taken down. We would know if there were major new outbreaks.

Some of the details of China's response are worth emphasizing. In Wuhan, after the chaos of the first few weeks, people who suspected they had the virus were not directed to hospitals but rather to temporary drive-through testing sites so that they did not go unprotected into the hospitals. They waited for their results and if they tested positive, they were isolated in special makeshift hospitals for minor symptoms or ICUs for serious cases. Up until April 30, anyone returning to Beijing from elsewhere had to go into [two-week quarantine](#) in a hotel—they could not shelter at home and infect family members. Where cases have emerged, there is contact tracing with testing and, if necessary, isolation of the contacts. As China opens up, there is [mandatory](#) wearing of face masks at work and on public transportation.

There has been a lot of commentary about whether the measures implemented in China could be used in a democratic society like the U.S. South Korea has [used the same basic playbook](#), with extensive testing, contact tracing primarily through the use

of cell phones and electronic media, isolation, and quarantine. [South Korea's measures](#) were less restrictive but more hi-tech than China's, and it was able to control the virus quickly. As of mid-May, there have been more than 50 times more deaths in the U.S. than in South Korea, relative to population. That is 96,000 extra deaths in the U.S. because we have bungled the basic recipe of testing, contact tracing, isolation, and quarantine. Without that foundation, reopening the American economy could potentially be a disaster.

DEALING WITH AN UNEVEN ECONOMY

A second lesson from China is that it is hard to restart the economy, more so in some sectors than in others. As to be expected, the [decline of the Chinese economy](#) was breathtaking in February, as people all over the country were told to stay home. GDP declined 6.8 percent in the first quarter, compared to the year-before. Major activity indicators were all negative; for example, exports were down 17.2 percent in January–February; retail sales were off 20.5 percent; industrial production down 13.5 percent; and fixed asset investment down 24.5 percent. The Chinese economy was already starting to reopen in March, but the data that month were still quite negative, only less so than in January–February. For example, exports were down 6.6 percent, retail sales were off 15.8 percent, and industrial output fell just 1.1 percent. The fact that exports and industrial output were less negative than retail sales indicates that it is easier to restart factories than to get consumers to return to their old behaviors concerning travel, restaurants, movies, and shopping. Even with the virus apparently under control, and ubiquitous mask wearing, people are still nervous about going to places where large numbers of people congregate. Also, the whole experience is a reminder of the uncertainties and risks in life with the result that [young people](#) in particular are vowing to save more and spend less.

A variety of micro-indicators confirm this gradual and uneven recovery of the economy. The [transportation congestion index](#) for 100 cities

showed that the halt in transportation during Chinese New Year, which is normal, continued for four weeks after the holiday. In mid-February the index was down 21 percent from the year before; but by mid-March the gap had narrowed to 11 percent. Coal use by five big power groups in coastal provinces was down to one-third of the pre-coronavirus level in mid-February; now it is back up to two-thirds the pre-crisis level. Small- to mid-sized enterprises (SMEs) are not faring as well, however. A big [data study of SME revenue](#) by the PBC School of Finance at Tsinghua University found that even at the end of March, revenue was down by about 60 percent compared to the year before. All of this is consistent with big manufacturing firms getting back close to normal, whereas SMEs in service sectors are struggling.

While the export and industrial production numbers were relative bright spots in the March data, the economy is likely to face what the Chinese are calling the "[second shock](#)" as export orders dry up in the face of deepening recessions in the U.S. and Europe. The April data are showing a drop in new export orders worse than during the global financial crisis. Containers full of Chinese goods are piling up at ports around the world. So, now, both large-scale manufacturing and small-scale service provision face problems of demand. Local governments are handing out [consumption coupons](#) to entice consumers to get back to restaurants, movies, and malls, but it is hard to get people to return to old behaviors.

HANDLING SPENDING CHANGES AND HOLES IN THE SOCIAL SAFETY NET

Third, and more speculatively, it is important to distinguish between the immediate drop in demand resulting from the shock to the economy, spending changes, and holes in the social safety net. The former requires a Keynesian stimulus in response. China's fiscal stimulus so far has been less than that of the U.S. or Japan, but still amounts to a 5 percent of GDP [fiscal impulse](#) according to the International Monetary Fund. But as the economy returns toward normal, it is likely



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As it got the virus under control, China continued to test, contact trace, isolate, and quarantine. Since then, there has been no major spread of the disease in the past month.

that people's consumption habits have changed permanently or at least for the foreseeable future. There will be less travel, leisure, restaurant meals, even mall shopping—overall there will be less private consumption than on the prior growth path.

On the other hand, people want more of various government protections and services. In China, there are obvious weaknesses in the safety net and addressing them could be a new source of demand. In shaping the immediate stimulus, it is smart to think ahead to what new patterns of demand will look like. In China, there is a division between the education, health, and pension systems for the registered urban population (about 40 percent of the country) and the rural registered, about one-third of whom live in cities but without a full slate of urban benefits. The coronavirus crisis has revealed weaknesses in public health systems, care for the elderly, and education—all of which could be addressed through government programs. In switching to online classes, for example, [rural areas](#) have been disadvantaged by inferior internet connections. And there are probably many more cases of the virus in rural areas than we know about because there is not sufficient capacity for testing and treatment.

CONCLUSION

Every country, including the U.S., has its own weaknesses and challenges. The crisis has revealed the lack of preparation in the U.S. public health system and holes in the safety net. Even aspects of our infrastructure have come up short, such as internet connectivity in rural and poor areas. As the immediate economic crisis is overcome, and as seen in places like China, it makes sense to address these deficiencies both for social and economic reasons. Given low interest rates and the economic crisis, it makes sense for the American federal government to borrow whatever it takes to overcome the crisis. But somewhere down the road we will have to raise taxes if we are to have more public services on a sustainable basis, which is likely what people want. We may well

look back in future decades and see the pandemic as the moment we realized that the era of small government is over. Going forward there is likely to be less demand for private consumption and more demand for public services.

Lessons from China's economic reopening

CHENG LI & JIAN CHEN



This piece was originally published by [Caixin](#) on May 16.

Any comparative analysis of China and the United States--and any lessons or experiences that either country may learn from the other--should recognize the profound differences between these two nations in terms of their political systems, economic structures, social fabric, and cultural norms. Yet, as the world's two largest economies, with vast territories and substantial populations, China and the United States often confront similar challenges. When it comes to the impact of the novel coronavirus, both countries have been devastated by its outbreak and the searing speed of its spread, though the developments have been experienced at different time intervals.

THE CHINESE EXPERIENCE

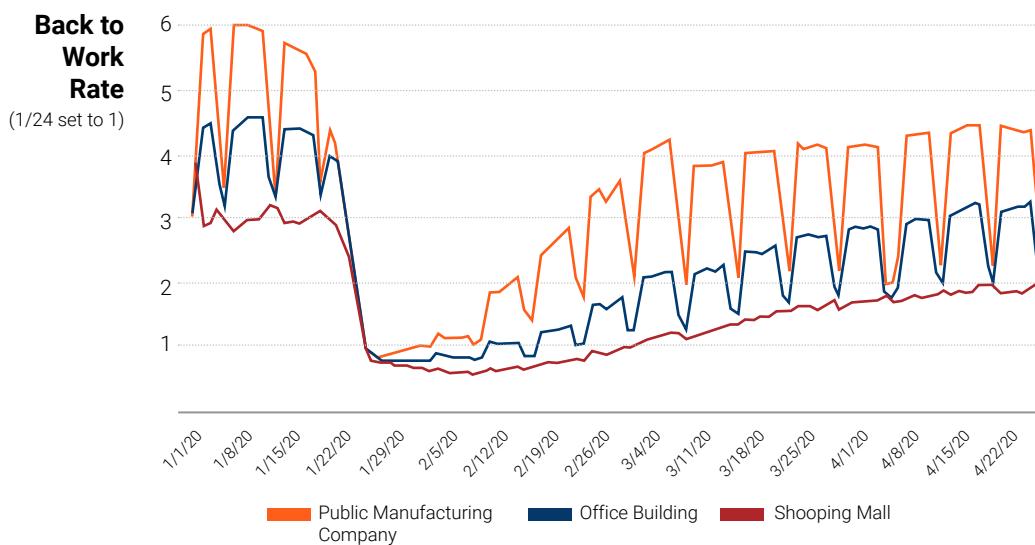
The spread of coronavirus in China began to plateau around mid-February when the country [reported](#) 75,567 confirmed cases and 2,239 deaths. At that time, only 1,152 cases had been diagnosed outside of China, resulting in eight deaths. At the time of this paper in late May, the number of recorded cases in the United States has [accounted for](#) around one-third of infections and 28 percent of COVID-19 deaths globally. These are astonishingly high proportions considering

that the United States constitutes only around 4 percent of the world population.

All 31 province-level entities in China reported infections, as did all 50 states in the United States, which were simultaneously [placed under](#) a federal disaster declaration for the first time in history. The closures in China began during the week of January 20, including a tight lockdown across the Wuhan metropolitan area and nearby regions beginning January 23. Facing significant growing pressure to combat a negative growth rate, the rapid rise of unemployment and the potential disastrous resulting domino effects, both China and the United States have been striving to reopen their economies. It should be noted that as a result of the continuing growth in infections and deaths in the United States, the U.S. economy had been [shut down](#) for a longer period than China's economy. But a series of premature reopenings in the United States could potentially have catastrophic health and economic outcomes.

Given the currently widely held perception that the outbreak of COVID-19 in China occurred a few months earlier than in the United States, an empirical analysis of the measures China pursued throughout its economic reopening in March and April could be helpful to understanding the possible situation in other nations. No country, especially those with economies as colossal

CHART 1: AN OVERVIEW OF THE RETURN-TO-WORK RATE IN MANUFACTURING FACILITIES, OFFICE BUILDINGS AND SHOPPING MALLS IN CHINA (WITH JANUARY 24, 2020 AS THE CONTROL)



as China and the United States, could expect to completely reopen overnight. Therefore, the regional variations and sectoral priorities employed—either intentionally or spontaneously—in the economic reopening of China deserve particular attention.

Table 1 provides an overview of the return-to-work rate in all of China's 31 provinces and first-tier metropolises. It arranges localities by their share of national GDP, reflecting their respective economic weight. The table also provides relevant information about the population of each province/city, the reported number of infections and the number of people infected per million. The highlighted columns compare the return-to-work rates on average in March and April 2020, with January 24, 2020 serving as the control. The return-to-work rate is [retrieved from](#) the Mastercard Caixin BBD China New Economy Index—compiled by Caixin Insight Group—by recording the daily flow of people across the virtual perimeters around manufacturing facilities, office buildings, and shopping malls.

There are three important observations that can be made based on the data.

A CORRELATION BETWEEN THE SEVERITY OF REGIONAL INFECTION RATES AND RETURN-TO-WORK RATES

In examining the return-to-work rate across different provinces and first-tier cities, we found that the rate is negatively correlated with infected case numbers (per million people): this signifies the higher the infection rate, the lower the subsequent rate for workers who return to work. For example, Hubei and Beijing, the two localities that had the highest infection rates, also had the lowest return-to-work rates in March (with the exception of shopping malls in Tianjin). Yet, the correlation between these two variables in April is lower than it had been in March, which indicates that, over time, the infection rate has a declining impact on the return-to-work rate. This indicates that the gradual improvement in the COVID-19 situation over these two months enabled people to return to work at increasing rates.

**TABLE 1: AN OVERVIEW OF RETURN-TO-WORK RATE IN CHINA'S PROVINCES
(IN MARCH AND APRIL 2020)**

Provinces	GDP Share (2019)	Population (million) (2018)	Infected People*	No. of People Infected Per Million	Manufacturing Firm Return-to-Work Rate		Office Building Return-to-Work Rate		Shopping Mall Return-to-Work Rate	
					March	April	March	April	March	April
Guangdong	10.87%	113.46	1588	14.0	80%	73%	68%	75%	54%	59%
Jiangsu	10.06%	80.51	653	8.1	82%	86%	64%	76%	62%	69%
Shandong	7.17%	100.47	788	7.8	76%	94%	66%	71%	64%	68%
Zhejiang	6.29%	57.37	1268	22.1	93%	101%	71%	84%	59%	58%
Henan	5.48%	96.05	1276	13.3	64%	64%	58%	73%	46%	60%
Sichuan	4.70%	83.41	561	6.7	75%	72%	56%	67%	63%	68%
Hubei	4.63%	59.17	68128	1151.4	44%	67%	39%	59%	46%	48%
Fujian	4.28%	39.41	356	9.0	83%	99%	81%	93%	62%	75%
Hunan	4.01%	68.99	1019	14.8	87%	77%	70%	77%	58%	74%
Shanghai	3.85%	24.24	657	27.1	76%	80%	68%	81%	62%	78%
Anhui	3.75%	63.24	991	15.7	73%	67%	72%	83%	68%	79%
Beijing	3.57%	21.54	593	27.5	51%	76%	41%	54%	39%	43%
Hebei	3.54%	75.56	328	4.3	63%	82%	61%	69%	48%	59%
Shaanxi	2.60%	38.64	308	8.0	72%	85%	70%	75%	58%	69%
Liaoning	2.51%	43.59	146	3.3	74%	82%	76%	81%	71%	71%
Jiangxi	2.50%	46.48	937	20.2	80%	66%	70%	76%	49%	63%
Chongqing	2.38%	31.02	579	18.7	70%	131%	58%	78%	61%	88%
Yunnan	2.34%	48.01	185	3.9	72%	76%	69%	76%	61%	71%
Guangxi	2.14%	49.26	254	5.2	64%	82%	59%	85%	56%	69%
Neimenggu	1.74%	25.34	201	7.9	70%	86%	86%	94%	59%	63%
Shanxi	1.72%	37.18	198	5.3	59%	77%	62%	72%	46%	55%
Guizhou	1.69%	36.01	147	4.1	76%	94%	71%	78%	80%	80%
Tianjin	1.42%	21.54	190	12.2	78%	76%	50%	61%	34%	47%
Heilongjiang	1.37%	37.73	944	25.0	69%	86%	52%	65%	60%	66%
Xinjiang	1.37%	24.87	76	3.1	66%	88%	71%	74%	75%	72%
Jilin	1.18%	27.04	112	4.1	73%	80%	90%	81%	61%	62%
Gansu	0.88%	26.37	139	5.3	78%	93%	51%	63%	56%	63%
Hainan	0.54%	9.34	168	18.0	75%	75%	65%	71%	71%	80%
Ningxia	0.38%	6.88	75	10.9	74%	103%	57%	58%	60%	62%
Qinghai	0.30%	6.03	18	3.0	75%	84%	65%	63%	59%	56%
Tibet	0.17%	3.37	1	0.3	111%	172%	97%	150%	61%	65%

Sources and Notes: *As of May 6, 2020, the numbers of infected people are based on Tencent's latest data on the novel coronavirus pandemic. GDP share in 2019 is based on preliminary data from the China National Bureau of Statistics, April 15, 2020. Population data is based on 2019 rankings of China's provincial population and GDP, <http://www.chamiji.com/2019chinaprovincepopulation>. Data on return-to-work rates are based on Mastercard Caixin BBD China New Economy Index, May 2, 2020.

This gradual trend toward increasing economic activities is particularly evident in Chart 1, which provides nationwide information on a daily basis from the government's order of closure of work around January 24 to the last week of April when a considerable number of manufacturing factories resumed, office clerks returned to work, and shopping malls reopened. The deep v-shaped valleys reflected weekly on the chart represent the drop in work over weekends. In a sense, this chart—which some might find reminiscent of an echocardiogram—has graphically tracked the “heartbeat” of a recovering economy.

SECTORAL PRIORITY AND ONLINE SHOPPING

These data, as presented in Table 1 and Chart 1, show that manufacturing firms have the highest return-to-work rates, followed by office buildings, and subsequently shopping malls with the lowest rates. This observation reflects a clear priority order in the approach to reopening the economy: high-impact, low-risk businesses are reopening more quickly (indicating their higher priority), while low-impact, high-risk business are reopening at a slower speed. The nationwide changes in the return-to-work rate between March and April 2020 reaffirm the sectoral priority order. By late April, the flow of people at manufacturing firms and office buildings had already reached 81.3 percent and 74.7 percent, respectively, of their pre-lockdown peaks in early 2020.

In comparison, the recovery rate of shopping malls was relatively low at 65.8 percent in April despite some expectations that Chinese domestic consumption would have a “strong rebound” after consumers had been sequestered at home for two months, especially considering that they [had largely missed](#) the spring festival shopping season. The relatively low rate of shopping mall traffic observed in this study is very much in line with a *Financial Times* report that customer traffic in Chinese cities [was about half](#) of its normal levels for both small brick-and-mortar stores and large Walmart stores during the same period.

Two factors may have contributed to this phenomenon. First, Chinese urban dwellers have remained cautious after the pandemic, and they have tended to reduce nonessential activities. And second, with the world’s most advanced e-commerce systems, China has a much higher number (but lower percentage) of internet users than the United States. In 2020, [China had](#) 904 million internet users (64.5 percent of China’s population) while the United States had 313 million users (89.8 percent of the U.S. population). Similarly, 583 million [people used](#) mobile payment applications in China last year, almost 10 times the number using similar applications over the same time in the United States (62 million). It has been widely noted that, during China’s battle against the coronavirus, “stores had to [quickly adjust](#) their ideas about e-commerce in order to stay afloat.”

HEALTH CONCERNS BEFORE GDP CONCERNs

The Chinese emphasis on the reopening of manufacturing facilities is clearly driven by concerns about economic growth and unemployment. But this does not necessarily contradict the government’s pronounced position and more general sentiment that public health should be the most important priority. A review of the GDP share of China’s 31 provinces and first-tier cities and their return-to-work rates does not show any significant correlation. For example, in terms of their share of national GDP, those provinces with the highest share (Shandong, Zhejiang, and Fujian), mid-range share (Chongqing), and lowest share (Gansu, Ningxia, and Tibet) all experienced a high return-to-work rate in the manufacturing sector in April. Some provinces with a relatively high share of national GDP—such as Henan, Hubei, Anhui, and Jiangxi—had the lowest return-to-work rate (see Table 1).

It is widely known that, out of fear of a possible “second wave” of COVID-19 and an increase in imported cases from overseas, Chinese authorities [implemented](#) far more restrictive rules and requirements than U.S. local governments during

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**It is still too early to
forecast the degree of
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of China's economic
recovery.**

both the lockdown and economic reopening periods. Also, China's local governments and manufacturing enterprises, especially in coastal regions such as Guangdong and Zhejiang, have also adopted multi-step guidelines to gradually move toward full-scale reopening. However, more recently, given the continuing decline of infections, the country has begun to promote domestic tourism, including to Hubei province during the May holiday season, reflecting a new phase in China's reopening.

It is still too early to forecast the degree of success and limitations of China's economic recovery. The expected drastic decline in exports, the uncertain nature of global supply chains and industrial realignment, the potential for a large-scale exodus of foreign companies, and U.S. export controls and other restraints on China constitute some of the new challenges that China will likely confront. Unemployment pressures will continue to be a primary concern for the Chinese leadership. It was officially reported that only roughly 5 million people lost their jobs during the first two months of 2020, with an urban jobless rate of 6.2 percent in February. These figures are remarkably lower than those in the United States at present. However, within both countries it is likely that the real rate of unemployment is significantly higher than reported.

China's promotion of domestic consumption, strengthened by the new drive for urbanization, a growing middle class, advantages in e-commerce, and an ongoing emphasis on innovation, green development, public health, social welfare, and financial opening will likely make China even more competitive in the global economy in the years to come. It is in the interest of Washington to have an accurate and balanced assessment of this tremendously important economic competitor and partner.



The fastest route to ending this crisis involves China

RYAN HASS



The deadly global spread of the COVID-19 pandemic has coincided with a period of diminishing capacity among multilateral institutions such as the G-7, the G-20, and the United Nations to mount a coordinated international response. It also has occurred amidst a period of deteriorating relations between the world's two most capable powers, the United States and China.

Instead of serving as a shared threat that catalyzes a coordinated response, COVID-19 has [intensified frictions](#) between the United States and China. This has manifested in a “narrative war” between Washington and Beijing over the source of the virus and the apportionment of blame over its global spread. Leaders in both countries have each calculated the impacts of the pandemic on their political fortunes and decided that their best path forward is to blame the other and stoke nationalistic impulses in the process.

A PERIOD OF RECIPROCAL RANCOR

This dynamic of reciprocal rancor is both unnecessary and unlikely to stop any time soon. It is unnecessary because it is not a source of uncertainty as to where the virus originated and what led to its global spread. No one who has been closely watching the unfolding of the pandemic outside of China could be confused that the virus

emerged anywhere other than China, or that China's negligent initial response to the outbreak did not contribute to its spread. China appears to have sought to muddy this picture by having one of its spokespeople [spread a conspiracy theory](#) that the virus may have originated in the United States. China's propaganda services similarly have been energetic in efforts to deflect blame and instead promote China's response to the outbreak as a model for the world. But as [Joseph Nye](#) has observed, influence and power on the international stage rest on credibility, and when governments are perceived as pushing propaganda, their credibility is undermined.

Prior to this crisis, there had been precedent for the world's two leading powers to stand at the core of international efforts to galvanize global responses. This pattern was visible during the Cold War, when the United States and the Soviet Union [rallied](#) global action to eradicate smallpox. It also was seen more recently when the United States and China [coordinated actions](#) to rescue the global economy during the 2008–09 global financial crisis and then [halt the spread](#) of Ebola from Africa in 2014.

Sadly, it likely already is too late to revive such a pattern of national-level coordination between the United States and China during this crisis, given the ill will that has been generated in [both](#)

[countries about the other](#) in recent weeks. China's recent efforts to tighten control over Hong Kong have further poisoned U.S.-China relations. This is an unfortunate outcome. If it was possible to set aside politics and look at the COVID-19 problem through a narrow interest-based lens, there would be a clear rationale for both countries to collaborate to save lives, stop the spread of the virus, and hasten a global economic recovery.

The simple reality is that neither country will be able to stamp out the virus in every corner of the world on its own. There are no multilateral institutions with the capacity and the credibility to do so without the strong backing of the United States and China. Unless the virus is eradicated everywhere, citizens in both countries will remain at risk, both countries' economies will suffer, and the international reputations of both will be tarnished for failing to exercise leadership amidst a global crisis.

If somehow the relationship between the United States and China were in a better spot, and the political calculations of both countries' leaders were different, there is much that could be done at little cost to either. Such collaboration could be driven by dispassionate self-interest.

PRACTICAL STEPS TO SHORTEN THE PERIOD OF SUFFERING INDUCED BY COVID-19

Initial steps that both countries could take to hasten the process of getting COVID-19 under control and create conditions for reopening the global economy could include:

- reaching a reciprocal understanding on expediting visas for medical personnel and encouraging other countries to follow suit so that health experts can travel quickly to where they are most needed to contain the spread of the virus;
- announcing a joint decision to remove all tariff barriers on medical equipment and

urging other countries to follow suit; ■ jointly agreeing to refrain from export bans on life-saving medical equipment and to coordinate efforts to stabilize global supply chains for manufacture of such goods; ■ convening a [virtual summit](#) between both US and Chinese leaders to affirm that both countries commit to:

- support—and not to impede—coordination among sub-national actors, including at the state, city, scientific, philanthropic, and corporate levels;
- offer full support for accelerating clinical testing of any vaccine, without regard for where it is first developed;
- refrain from any form of traditional or non-traditional espionage to attempt to subvert progress or steal information from the other on research toward a vaccine;
- pool funds now to construct a [constellation of facilities](#) around the world for rapid manufacture of a vaccine. Because it is not yet known what equipment will be needed to manufacture the vaccine that ultimately emerges, facilities will need to be built to specification for mass producing a range of potential vaccines, accepting that some will never get used;
- coordinate delivery of medical and financial aid to the developing world in order to avoid redundancy and maximize impact.

A more ambitious effort could include jointly standing up teams composed of leading international medical experts to fan across the global south and get ahead of the next wave of the



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Instead of serving as a shared threat that catalyzes a coordinated response, COVID-19 has intensified frictions between the United States and China.

virus, which is already starting to hit the [Southern Hemisphere](#). These expert teams could share best practices with local health leaders for protecting medical staff, patients, and medical systems, provide resources and best practices for testing and tracing, and share lessons learned from various treatment models.

Washington and Beijing also could jointly boost the efforts of a [global group](#) convened by the European Union to coordinate funding for vaccine research, development, and production. If the United States and China each were to make significant contributions to this fund, it could mobilize other countries to elevate their support for the effort.

THE NEED FOR A CEASEFIRE

Creating diplomatic space for such a constructive agenda, though, likely would require some sort of ceasefire in the promulgation of incriminating theories about the source of the virus. One way for both sides to set down their rhetorical sticks would be for Washington and Beijing simultaneously to commit to support an international investigation led by scientific experts into the causes of the outbreak and rapid spread of the virus. President Xi made a rhetorical step in this direction during his [May 18 address](#) to the World Health Assembly. Washington should test Beijing's intentions by pushing for a firm Chinese commitment to support a science-based, UN-led after action review to identify lessons learned, mistakes made, and best practices to be emulated for preventing a recurrence of this crisis.

Some may counter that China is America's foremost rival and, as such, the United States should be seeking to use this moment to weaken China's standing rather than lift it up to peer status in the fight against COVID-19. Others may see such a collaborative approach toward China as unwarranted due to China's negligent initial response to the outbreak, which contributed to its global spread. Still others may argue that Washington should work with its allies, not Beijing, to fashion a global response.

All these arguments deserve a hearing. The Trump administration is justified in weighing risks and rewards of working with China on COVID-19 response. Ultimately, though, COVID-19 is indifferent to national borders and American feelings about China's culpability for the pandemic. America's prestige on the world stage at the end of this crisis will be determined by its performance in stopping the spread of the virus, saving lives, and restoring the American and global economies to health. For the moment, all other considerations must be subordinated to these objectives.

If there is a more efficient and effective way for addressing challenges presented by COVID-19 than by taking measured steps with Beijing to galvanize global action, now is the time to hear them. There should be a robust debate about the costs and benefits of working with China versus attempting to work around China on global efforts to create conditions for reopening. Rosy assumptions—either about China supporting America's lead or about the G-7 or G-20 falling in line to advance an American agenda—should be interrogated. The crisis has imposed an urgency for the best ideas to come to the surface. There is no time to waste.

To prevent zoogenic pandemics, regulate wildlife trade and food production

VANDA FELBAB-BROWN



The global public health and economic devastation caused by the coronavirus outbreak dramatically reinforces the urgent imperative to minimize the chances of another zoogenic pandemic. Reducing the likelihood of another viral spillover sweeping the world requires minimizing human interface with wild animals and wild spaces; eliminating transmission points where the likelihood of viral spillover to humans is high, such as unhygienic commercial markets in wild animal meat and live animals; diligently suppressing illegal and unsustainable trade in wildlife; and conserving natural habitats. Conserving natural habitats in turn requires profound changes in human food production and human encroachment on remaining natural habitats.

However, the necessary measures to prevent another pandemic should not entail banning all trade in wildlife. Such a policy would be deeply counterproductive since it would eliminate economic incentives for [preserving critical natural ecosystems](#). Nor should the measures involve eliminating livelihoods of the hundreds of millions of people dependent on hunting for basic food security and subsistence.

In order to preserve habitats and wildlife and keep them away from humans to minimize a zoogenic viral spillover to humans, global demand for some

wildlife products, not just wild meat, but also aspects of Traditional Chinese Medicine (TCM), also needs to be reduced.

Adopting such smart, tailored, and essential pandemic prevention measures is crucial for maximum policy effectiveness. Unless the necessary policy approaches are adopted, another pandemic will emerge with similar or even more severe consequences. Policies based principally on defensive reactive responses, such as strengthening health care systems or reshaping global production and logistical chains, will be overwhelmed.

KEY CAUSES AND TRANSMISSION LOCALES

The COVID-19 pandemic exploded in a so-called wet market in Wuhan, China, and entailed the meat of wild animals. In 2003, China experienced the emergence of another epidemic, the Severe Acute Respiratory Syndrome (SARS), once again containing meat from wild animals. Across East and Southeast Asia, open-air markets with wild animals often illegally caught and kept in appalling and dangerously unhygienic conditions, and markets selling wild animal meat without proper hygienic measures in place, pose high risks of severe zoogenic pandemics.

But such pandemics can also emerge elsewhere as a result of improper husbandry of domestic or wild animals that fails to separate wild animals from domestic livestock, or from veterinary failures.

Such [regulatory deficiencies](#) are pervasive around the world and persist also in the United States. The H1N1 swine flu that killed 10,000 Americans emerged in North America as a result of packing thousands of domestic livestock together in a cramped space for food production.

Human encroachment on natural habitat, in the tropics in particular, poses another severe threat of zoogenic disease emergence. With more habitat lost and fragmented due to deforestation, more animals crowd together in small places where the chance of a [viral spillover](#) among species significantly increases. When humans and their domesticated animals enter such shrunk places for logging, mining, hunting, road construction, or building of residences, the chance that the new zoogenic disease jumps to humans goes severely up.

In response to COVID-19, Vietnam—a large source, transshipment, and destination country for both legal and massive illegal trade in wildlife—has [banned its live wild animal markets](#). China has declared a [ban on consumption](#) of wild meat in an updated law on “Comprehensively Prohibiting the Illegal Trade of Wild Animals, Eliminating the Bad Habits of Wild Animal Consumption, and Protecting the Health and Safety of the People,” and appears to be [shutting down some wildlife markets](#) and wildlife farms, while others persist. In China, wildlife farming involves 20,000 facilities and is worth \$57 billion annually. While wildlife farming has been crucial for alleviating poverty in China, improperly maintained farms are prime areas of zoogenic disease emergence.

Such farms exist around the world. Not all should be shut down—as long as they are not in fact stocked with animals poached from the wild, preserve natural habitats, and do not set off an unsustainable demand for the same species caught in the wild. U.S. farming of alligators is a prime

example of major conservation and economic success. But the hygienic and veterinary practices of wildlife farms around the world need to be radically improved.

And all legal trade in wildlife—a massive global business involving millions of live specimens of wild animals annually—needs to be systematically monitored to prevent disease spread to native animal species, domestic livestock, and humans. Dangerously, the overwhelming majority of the global legal trade in wildlife is not subject to any disease monitoring. This critical regulatory gap posing an enormous risk of zoogenic disease emergence also exists in the [United States where most imports of wild animals do not require a health certificate nor are tested for disease](#).

China’s and Vietnam’s actions are very important steps, but their value will be diminished if their enforcement weakens as the memory of the COVID-19 devastation wanes and a vaccine becomes available. Such dangerous weakening of law enforcement, in fact, happened within three years of China’s [prohibition of wildlife markets](#) in the wake of SARS. Bans without persistent enforcement are completely ineffective. Dangerously, enforcement of national policies is left with [Chinese municipal and provincial authorities](#) who mostly prioritize economic interests such as employment and revenue generation over public health and are highly susceptible to capture by vested economic interests.

THE RISKS OF REGULATORY OVERREACH

A ban on commercial markets in wild meat is imperative, but such an approach on all wildlife trade would undermine conservation and increase the chance of another pandemic. A lot of wildlife products in various animal parts, such as skins and furs, are traded for souvenirs and curios, clothing, and many other uses. Such trade does not pose a risk of a pandemic. If the offtake from the wild is well-regulated to preserve sustainability

A photograph of a woman with short dark hair, wearing a blue and pink floral patterned shirt. She is seated at a table covered with a red cloth, looking down and to her right with a thoughtful expression. The background is slightly blurred.

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Whether and how fast another zoogenic pandemic emerges will be determined not only by sound regulations and their diligent enforcement that avoid both policy underreach and overreach, but also, crucially, by continuing reminders to the world’s publics of why those regulations are necessary.

and is devoid of corruption—no doubt, often a challenge—it critically augments conservation. It gives landowners and local communities a [powerful economic stake](#) in preserving natural habitats and wildlife and allowing converted landscapes to revert to their more natural state, thus resurrecting ecosystems.

In the absence of economic value of biodiversity preservation, both governmental and private landowners starved of revenues will be susceptible to powerful economic pressure to deforest land for timber and agricultural production—and thus augmenting chances of zoogenic disease emergence. Without economic revenue from natural spaces and wild animals, the economic pressure from powerful vested interests promoting logging for timber and land, mining, cattle ranching, agricultural production and deforestation—including for African oil palm—and poaching for the illegal wildlife trade may become irresistible to governments, businesses, and local communities starved of money due to COVID-19 and facing recessions, bankruptcies, and lack of livelihoods.

COVID-19 is causing a [critical drying up of vital ecotourism funding](#) for local communities, rangers, landowners, and protected area administration. [Poaching](#) is increasing and will continue to rise as ecotourism remains diminished easily deep into 2021. Pressures to convert land will also rise. Elsewhere, ecotourism never brought sustained and sufficient funding to make biodiversity preservation viable. Thus, it is crucial to diversify funding beyond ecotourism, whether by [pricing biodiversity](#) and creating private markets in habitat conservation or augmenting financial transfers from developed to developing countries for habitat preservation—in essence, with government, industries, and businesses buying themselves pandemic prevention by preserving habitat.

The important and necessary bans on commercial wild meat markets need to avoid two kinds of regulatory overreach. First, hundreds of

millions of people around the world depend on hunting for protein access. A [ban on wild meat](#) should not undermine their food security, and local subsistence markets should be exempted. However, increased efforts are needed to generate alternative sources of protein for them, such as from poultry, even when it requires changing a preference in taste, by explaining the risks of wild meat consumption. Where alternative protein livelihood efforts are not feasible, testing kits need to be available to local communities to test for dangerous pathogens in meat (and even fruit), such as those that cause outbreaks of Ebola and other dangerous pathogens.

Second, consumption of wild meat may *enhance* conservation by improving habitat quality (a result of consumption of overpopulated deer in the United States or of wild boar in Europe); or the preservation of quality habitats (such a result of the consumption of particular antelope species in Africa); or by enabling restoration of a species in the wild (such as a result of bison husbandry in the United States). In such cases governments can allow exceptions from bans on wild meat. The exceptions can be given if the species is not endangered or threatened or carries high risk of pathogen transmission; and its slaughtering is conducted according to strict hygienic rules that minimize the chance of zoogenic disease emergence. Hunting for personal subsistence should not be affected in forest-dependent communities or developed countries, though the meat should be tested for pathogens.

Wet markets in China and Asia should not be banned because [most do not sell meat](#) from terrestrial wild animals where zoogenic disease can emerge. Indeed, they provide access to [food for large numbers of people](#) in Asia and around the world, sometimes as much as 30–40 percent of the population. However, diligent monitoring and enforcement need to be implemented, such as through the use of CCTV cameras, as these markets do not in fact sell meat from wild terrestrial animals, as happened in Wuhan

Wet markets should not be conflated with the dangerous bird and wildlife markets in Asia and elsewhere in the world where thousands of species of many families are crammed together in tiny spaces, often with hundreds of specimens in the same cage, including dead animals rotting unremoved from the cage, and with inadequate food, water, and protection from weather. Such markets should be banned and the ban diligently enforced even though it will affect the livelihoods of traders. Poor traders may have to be compensated for their losses. To the extent that governments give permission to sell animals in stores, the licensing and inspection processes need to ensure that proper care and hygienic conditions are maintained to minimize the likelihood of zoogenic disease emergence.

A diligent effort needs to be mounted to [enforce such bans](#), anticipating that it will push trade in wild animals and meat underground or online. Monitoring and shutting down such clandestine markets pose challenges, but law enforcement forces can overcome them with undercover operators posing as fake buyers. But any time barriers to entry are put up for a market, demand goes down—as some buyers will not invest in seeking out hidden private online platforms or locating an underground market. The less demand, the fewer customers, the smaller chance of a disease jumping to humans. It is imperative to achieve sufficient and substantial prevalence of effective identification and prosecution of violators to create deterrence effects against clandestine offenses. Such a robust prosecution rate in turn requires resources for adequate wildlife enforcement and the monitoring of legal wildlife and food markets.

THE RISKS OF REGULATORY UNDERREACH

There are also multiple risks of regulatory underreach. If the ban on commercial markets selling meat from wild animals or on unhygienic wildlife markets remains confined only to China and Vietnam, the chances of zoogenic disease

emergence will remain high in other Southeast Asian countries with extensive unhygienic wildlife markets and high risks of pathogen transmission—namely Indonesia, Laos, and Myanmar. If these persist and demand in China and elsewhere in Southeast Asia is not dramatically reduced, consumers of wild meat and end-use buyers of wild animals will merely outsource the risk of pathogen transmission to developing countries unprepared for dealing with a zoogenic pandemic. Chinese traders could simply arrange the poaching of pangolins in Africa—not just for scales but for their meat—and have it frozen. The viral spillover then occurs among poor hunters abroad while Asian traders and consumers do not necessarily see their profits and habits affected.

Such markets are also growing in Peru, Brazil, and elsewhere in Latin America as well as among the affluent in Africa, increasingly involving domestic tourists buying luxury wild meat or animal parts, or Chinese and Asian traders facilitating wildlife trade and trafficking abroad. This growing demand for such products needs to be stamped out. The more it grows, the more difficult it will be to mount effective demand reduction and supply suppression measures. It is imperative to suppress the illegal hunting, sale, and transportation of animals and animal parts in Latin America and around the world by shutting down markets selling animals illegally, and focusing on the apprehension of the crucial operational [middle-layer of trafficking networks](#), and enhancing in situ law enforcement.

In addition, [severe risks to human health](#) are often the best motivators of environmental policies—viz. regulations emerging in response to severe health effects of acid rain or ozone depletion. COVID-19 provides a tragic but important opportunity to reduce global demand for the consumptive use of animals which has been producing unsustainable exploitation and extinction. Global efforts are needed to reduce such dangerous and increasing demand by emphasizing the risks of dangerous wildlife products. Beyond reducing demand for wild meat, it is imperative to suppress demand

and supply of those aspects of so-called TCM that produce such unsustainable offtake and poaching, which has been driving to extinction tigers, rhinoceros, hornbills, and a vast scope of other endangered or threatened animals and plants.

Effectively regulating and curbing the excesses and dangers of the TCM industry will be challenging, as the TCM industry in China is politically powerful. It provides large economic revenues to China's government and employment to many people. It will resist any regulation. During and after the SARS epidemic, it [pushed TCM as a cure](#). Since then, it orchestrated the [imprisonment of Chinese doctors](#) who warned against the many TCM health risks. For years, the government of China has strongly embraced the TCM industry and worked to advance its interests abroad. In 2019, China succeeded in cajoling the World Health Organization into including a chapter on TCM in its International Classification of Diseases, a highly influential document that categorizes and assigns codes to medical conditions, and is used internationally to decide [how doctors diagnose conditions](#) and whether insurance companies will pay to treat them. The Chinese government is already promoting—without any proof—the [use of TCM to cure COVID-19](#) and is encouraging the export of such unproven COVID-19 TCM cures to highly vulnerable countries with critically [inadequate health systems](#) such as Afghanistan and Pakistan.

Adopting and maintaining crucial changes will not be easy. Banning dangerous wildlife markets and commercial markets in wild meat is a first step. But as memory of COVID-19 wanes and a vaccine becomes available, enforcement will weaken. Dangerous habits in eating wild meat or keeping wild animals as pets will rise again. Vested interests such as logging, mining, agricultural, and TCM industries will push back against needed regulation and its enforcement. Whether and how fast another zoogenic pandemic emerges will be determined not only by sound regulations and their diligent enforcement that avoid both policy underreach and overreach, but also, crucially, by

continuing reminders to the world's publics of why those regulations are necessary. The United States must be at the forefront of such global efforts, leading also by example in reducing its food production footprint, improving public health practices in animal husbandry and legal trade in wildlife, preserving and augmenting U.S. natural habitats and species conservation, and strengthening, instead of weakening, key legislation with global impact such the U.S. Endangered Species Act.

Is Russia avoiding blame and getting by on the cheap?

STEVEN PIFER



For a period in May, Russia held second place after the United States in number of COVID-19 cases. The virus spoiled Vladimir Putin's plans for the spring, and he now has to deal with a pandemic and its grim impact on the Russian economy. After a six-week "non-working period," Putin encouraged steps to begin reopening the country on May 11, leaving many decisions—and the responsibility—to regional governors and mayors. It remains to be seen how proactive the central government will be in getting Russia back to "normal" and what impact the crisis will have on Putin's popularity and the Russian approach to its conflict with Ukraine.

SPRING PLANS FRUSTRATED BY COVID-19

At the start of the year, the Russian president had big plans for the spring. First, constitutional amendments would give him an opportunity to retain authority after his presidential term concluded in 2024, either as an empowered prime minister or head of a new state council. In mid-March, Russia's rubber-stamp legislative bodies rushed through a surprise additional amendment that would nullify term limits for Putin and allow him to remain president until 2036.

The Kremlin scheduled a nationwide referendum on April 22 to approve the amendments. The

constitution provides no requirement for such a vote, but a public referendum would further legitimize the constitutional changes and presumably undercut any future challenge should Putin decide to run for reelection in 2024.

Topping off the spring would be the May 9 commemoration of the 75th anniversary of V-E Day. The celebration would remind Russians of the Soviet Union's part in defeating Nazi Germany and reinforce themes of nationalism and Russia's place as a great power on the world stage—themes that Putin has perpetuated since he returned to the presidency in 2012.

Alas for Putin, COVID-19 intruded. The number of COVID-19 cases became noticeable in mid-March. The Russian government reported going from 30,000 cases in mid-April to more than 300,000 on May 20, briefly holding second place until Brazil surpassed it. By June 1, the official count had surpassed 400,000.

Russia's surprisingly low official fatality rate—0.9 percent compared to 4.6 percent in Germany and 6.0 percent in the United States—drew considerable attention and raised eyebrows, especially given questions about the health infrastructure outside of Moscow, St. Petersburg, and other large cities. One-third of doctors polled reported "adjusting" COVID-19 statistics, and

the fatality rate among frontline health providers reportedly amounted to 16 times that in other countries, suggesting something was amiss. The Kremlin heatedly denied cooking the books.

On March 25, the Kremlin announced postponement of the April 22 referendum. Three weeks later, it postponed the V-E Day commemoration. Much of the country went into a “non-working period” for April and the first 10 days of May.

Putin’s approach showed some similarity to that of Donald Trump’s. Like his American counterpart, Putin responded slowly to the burgeoning health crisis, leaving matters largely to regional governors and mayors to manage. Self-isolating and working from his residence outside of Moscow, he began raising his public profile through online meetings in April. Passing some decisions down to regional and local authorities makes sense in a country that spans 11 time zones, but it also appears that Putin wants to leave the bulk of the responsibility to them should things go badly.

Putin called for the country to begin to reopen on May 11, though regional governors had the authority to decide how fast. Two weeks later, about half of the country’s regions had begun lifting COVID-19 restrictions. Moscow, an early epicenter, expected not to start a broad reopening until mid-June.

A GRIM ECONOMIC PROGNOSIS

The virus and resulting lockdown took the Russian economy, which had experienced at best lackluster growth (1.0 to 1.5 percent per year) since 2014 and plunged it into recession. Cabinet ministers in early May said that economic activity had fallen by 33 percent since the pandemic’s start. The International Monetary Fund projected that the economy would contract by 5.5 percent in 2020; other economists think the contraction could reach 10 percent.

COVID-19 had another negative economic impact for Russia. It crashed global demand for oil. Some

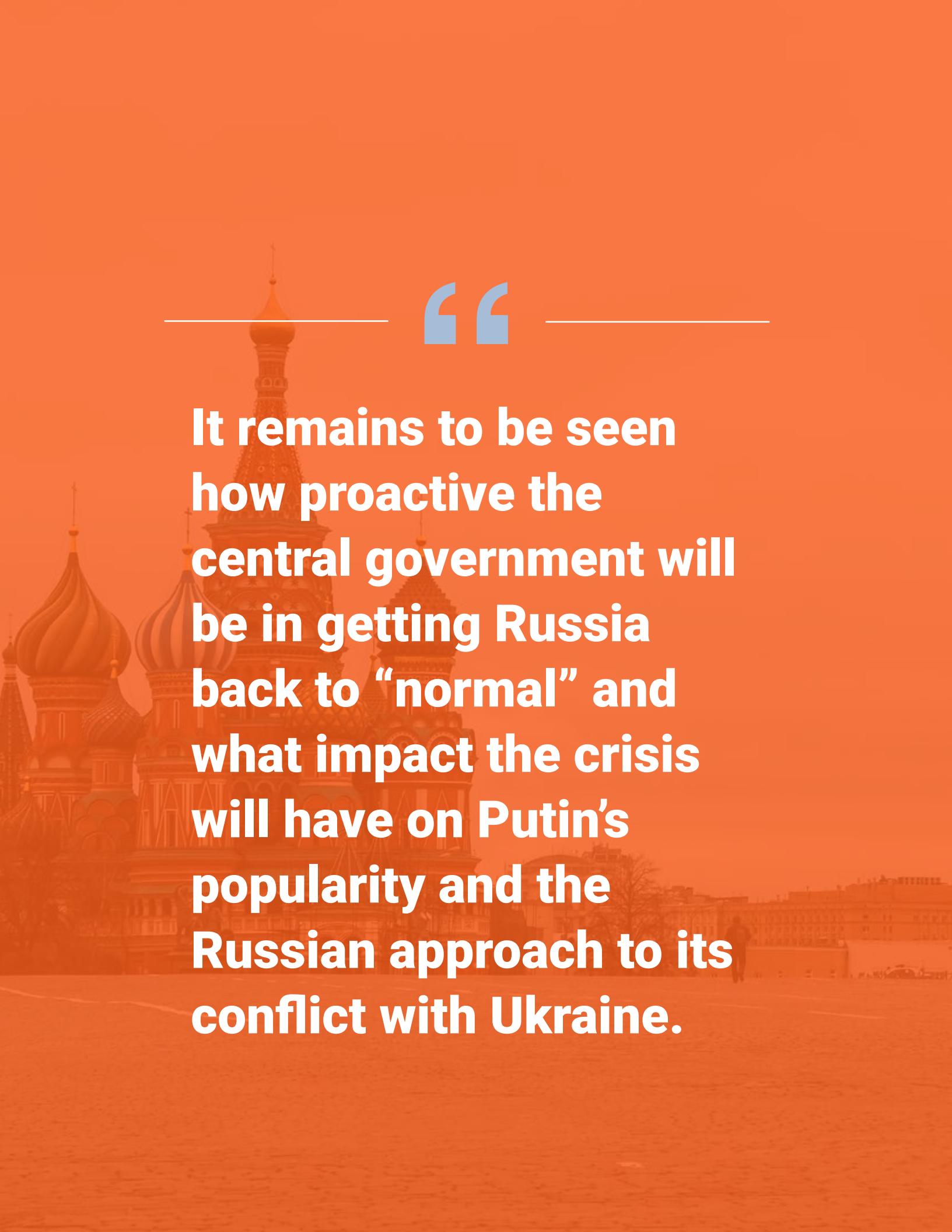
60 percent of Russian exports are hydrocarbons, and the oil and gas sector provides nearly 40 percent of government tax revenues. The Russians inadvertently contributed to the collapse of the oil price in early March when they did not agree to an OPEC proposal to reduce production. Saudi Arabia responded by boosting output, and on March 8, the price fell 30 percent.

In early April, Russia and OPEC agreed to cut production by about 10 million barrels per day, though global demand had dropped by 20–25 million barrels per day. Russia’s share of the cut came to some 2 million barrels per day. By late May, the price had recovered to about \$35 per barrel, still considerably down from \$68 per barrel at the beginning of the year.

The Kremlin thus far has devoted modest resources to stimulating the \$1.7 trillion economy, resources that amounted to about 2.6 percent of gross domestic product by late May. That is especially modest compared to programs implemented by the United States, Germany, Britain, and other industrial countries, many of which have implemented financial stimulus programs equivalent to 10 percent or more of GDP.

The Russian government certainly could do more. While tax revenues in April fell by 31 percent, the government has built up \$165 billion in a National Wealth Fund, and the Bank of Russia holds some \$550 billion in reserves. However, Putin regards these funds as key assets and has seemed reluctant to dip into them. Governors and mayors have limited reserves in a system in which federal structures control the bulk of government monies. They can do relatively little on their own to spur economic activity or fund enterprises to help them sustain employment.

Small and medium business likely will take a particular hit. Comprising only about 20 percent of the Russian economy, the sector does not appear a priority for Putin, who favors larger state-owned and para-statal enterprises.



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**It remains to be seen
how proactive the
central government will
be in getting Russia
back to “normal” and
what impact the crisis
will have on Putin’s
popularity and the
Russian approach to its
conflict with Ukraine.**

The Kremlin will closely track public attitudes as the crisis continues. The respected independent Levada Analytical Center released a poll on May 6 showing Putin's approval rating at 59 percent, his lowest rating since first becoming president in 2000. This number causes nervousness in the Kremlin, as Putin's approval ratings typically run in the 70s and sometimes exceed 80 percent. If the approval rating continues to fall, he may revisit the question of a greater stimulus.

Putin has rescheduled the V-E Day parade for June 24 and will use it to help draw public attention from COVID-19. Still, he has to be careful: public gatherings to honor the veterans and civilians who suffered through World War II could prove tricky for those being honored, as most are in their 90s and thus constitute a particularly vulnerable group. The referendum has been rescheduled for July 1, which may be a “non-working” day to boost turnout.

WAR WITH UKRAINE

Another question is what COVID-19 and its economic consequences might mean for Moscow's conduct of the low-intensity conflict against Ukraine in Donbas. Most of the more painful U.S. and EU sanctions on Russia—whose economy, according to many economists, suffers a loss of 1.0 to 1.5 percent of GDP as a result—are linked to the conflict in Donbas as opposed to Russia's illegal seizure of Crimea. They could be lifted if there was a settlement.

Some analysts (the author included) thought that the prospect of eased sanctions and the ability to focus on COVID-19 and its economic consequences might—not would, but might—lead the Kremlin to adjust its policy regarding a Donbas settlement. As of late May, however, there was no discernible change in Moscow's approach, suggesting that the Russian government continues to consider the benefits of the conflict in terms of destabilizing and distracting Kyiv to outweigh the costs. At a December summit in Paris, Putin met with his Ukrainian, German, and French

counterparts on the Donbas situation. The summit produced little. The leaders talked of a possible second meeting in April, but nothing has come of that.

A SECOND WAVE?

Putin cautioned his countrymen on May 21 that they should brace for a second wave of the virus in October–November. Should COVID-19 indeed return, he likely will continue the pattern he adopted in April and May, maintaining some degree of public management of the health and economic crises but positioning himself so that any public blame falls on those below. Trends in his public approval standing may prove the determining factor in whether the Kremlin opens up the purse strings to provide a more impactful jolt to the economy. As for a change in course on Donbas, do not rule it completely out, but keep expectations modest.

Britain bungled its lockdown and garbled its reopening

AMANDA SLOAT



By early May, the United Kingdom achieved the dubious distinction of surpassing Italy to have the [highest death toll](#) in Europe from the novel coronavirus. Its losses were second globally to the United States, which has a population five times greater. Surveys suggested the British were among the [most pro-lockdown](#) in the world, more reluctant to reopen businesses before the virus was fully contained than people in similarly affected countries.

Favorability ratings for Prime Minister Boris Johnson, who was slow to implement a lockdown then nearly died from the virus himself, [were initially high](#). However, his efforts to reopen the country on May 10 were marked by mixed messages and public skepticism. Public support for Johnson plummeted 20 points and backing for his government fell 16 points over the late May holiday weekend, after news emerged that [Dominic Cummings](#)—Johnson's controversial advisor who spearheaded the Brexit campaign and guided the COVID-19 response—had flouted lockdown rules by driving his wife and son 260 miles for childcare assistance from relatives after his wife became ill.

Britain's reopening was also marked by significant regional variation. Responsibility for major public services (such as health and education) are devolved to governments in Scotland, Wales, and

Northern Ireland—all of which declined to follow Johnson's guidance for England.

SLOW START

The UK [lagged](#) behind its continental neighbors in introducing measures to slow the spread of the coronavirus, leading [critics](#) to blame the government for doing too little too late. Johnson relied on [scientific advisors](#), who recommended against beginning social distancing measures too quickly lest people become fatigued and advocated “[herd immunity](#)” (though [one advisor](#) later denied this was the strategy). On March 12, Johnson [announced](#) a move from the “contain” to the “delay” phase. He advised anyone feeling unwell to stay home, people over 70 to avoid cruises, and students not to travel abroad. However, he did not shut schools or ban large gatherings. Hours after Scotland and Wales closed schools on March 18, Johnson announced their [shuttering](#) in England; Northern Ireland soon followed. On March 23, Johnson introduced a [national lockdown](#) that prevented people from leaving home for anything other than essential work, medical care, grocery shopping, and once-daily exercise.

THE PRIME MINISTER'S NEAR DEATH

Four days later, Johnson said he had [tested positive](#) for the coronavirus. His health secretary,

chief medical officer, and other senior officials (including Cummings) also fell ill. Johnson was hospitalized for a week, including three nights in intensive care on oxygen. There was [widespread goodwill](#) for the prime minister during his illness, despite some head shaking over his boast several weeks earlier about [shaking hands](#) with hospitalized COVID-19 patients.

British institutions calmly carried on, as Foreign Secretary [Dominic Raab](#) temporarily filled in for Johnson, Queen Elizabeth II [rallied](#) the nation in a televised message, and the Labour Party elected a capable [new leader](#). The prime minister was [released](#) from the hospital on April 12.

Two weeks later, his fiancée—who suffered her own bout of coronavirus—[gave birth](#) to their first child.

REOPENING PLANS

Johnson's near-death experience made him more sober about the seriousness of the virus. Yet he is a libertarian by nature, having [lamented](#) that restrictions were “taking away the ancient, inalienable right of free-born people of the United Kingdom to go to the pub.” He also faced pressure from some Conservative Party members, who warned about the [financial consequences](#) of the closures. [Chancellor Rishi Sunak](#) said in mid-May it is “very likely” the UK is already in a “significant recession,” as the [economy](#) had contracted at the fastest pace since the 2008 financial crisis. The [Bank of England](#) warned it could shrink by 14 percent this year. Nearly 2 million people have applied for [unemployment benefits](#), a six-fold increase from normal rates. The British government was quick to implement economic measures in mid-March, including a \$38 billion [fiscal stimulus](#) to provide welfare and business support.

On May 10, Johnson [offered](#) general parameters for reopening the country in a televised address. The following day, his government published a 60-page [recovery strategy](#), which he discussed with a “virtual parliament.” During the intervening 24

hours, there was widespread confusion about the guidance. A snap [YouGov poll](#) during this period found only 44 percent of respondents wanted restrictions eased while 43 percent were opposed, with Conservative voters twice as likely to support lifting them (61 percent) as Liberal Democrats (37 percent) and Labour voters (32 percent). There was particular criticism of the government’s decision to [replace](#) its initial message (“stay home, protect the NHS [National Health Service], save lives”) with a muddled one (“stay alert, control the virus, save lives”). Although 91 percent of those polled felt the first one was clear, only 30 percent said they understood the new one. Critics also lamented the lack of specific instructions, with Johnson repeatedly [telling](#) legislators that the public should rely on “good, solid, British common sense.” Days later, a [YouGov poll](#) showed those who believed the government was handling the crisis well dropped below 50 percent for the first time.

The reopening rules, which only applied to England, followed a phased approach. From May 13, those able to work from home should continue to do so; those who cannot (including workers in manufacturing, logistics, scientific research, and food production) were “actively encouraged” to return to their jobs with appropriate safety measures. The government recommended wearing masks when taking public transportation or shopping. People were allowed to leave home to exercise for an unlimited period of time and meet one person from a different household in public. Travelers from abroad are required to self-isolate for 14 days, with the exception of Ireland (given the shared border with Northern Ireland). In late May, Johnson announced that [schools](#) could begin a phased re-opening on June 1 and [non-essential shops](#) could resume business on June 15. Bars, restaurants, hair salons, and cinemas may reopen after July 4, if infection rates have not increased.

The government created a new monitoring system. “[COVID-19 Alert Level](#),” a 1-to-5 grading system like the terror threat level, will use input from a new joint biosecurity center to determine the pace of reopening. In addition, five [ministerial](#)

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The UK lagged behind its continental neighbors in introducing measures to slow the spread of the coronavirus, leading critics to blame the government for doing too little too late.



[taskforces](#) are looking at pubs and restaurants, non-essential retail, recreation and leisure (such as tourism, libraries, sport, worship), and air travel. The government's plans depend on keeping the reproduction number (how many people the average infected person infects) below 1, yet [critics](#) noted the UK struggled to develop large-scale testing and numbers vary widely across the country.

REGIONAL VARIATION

Britain's constituent nations and regions [coordinated their shutdown responses](#), including the creation of a UK-wide action plan in early March and similar messaging about restrictions later that month. Yet the devolved administrations opted not to follow Johnson's reopening guidance, leading to [variable rules](#) across the country and [charges](#) that he had become prime minister of England only.

Scotland: First Minister [Nicola Sturgeon](#) criticized Johnson for retiring "stay home" as the official message. She said adopting the same strategy in Scotland would be [playing "Russian roulette"](#) with people's lives, given "the risk of the virus potentially running out of control again." She extended the lockdown until May 28, [encouraging](#) Scots via Twitter to "Please continue to #StayAtHome." In late May, Sturgeon [announced a relaxation](#) of restrictions; this included the reopening of garden centers, outdoor cafes, and drive-through restaurants as well as permission to visit parks and meet friends outdoors. Non-essential shops, pubs, and restaurants will remain closed for at least three more weeks, with no set reopening date. [Schools](#) will open in mid-August with a "blended model" of regular and online learning.

Wales: First Minister [Mark Drakeford noted](#) "some differences in the messaging between England and Wales which I am concerned may cause confusion," [encouraging](#) people to "please continue to stay at home." Although Wales has not yet reopened the economy, it passed a law

requiring employers to ensure workers can stay six feet apart. [Garden centers](#) can reopen, people can exercise outside more than once a day, but gatherings in public places remain prohibited. Drakeford said he has [not seen sufficient evidence](#) to require masks. The government planned to announce further changes in late May. [Schools](#) will not open in early June.

Northern Ireland: The region, which shares a border with the Republic of Ireland, has faced [political strains](#) from differing approaches by the British and Irish governments. Although hardline unionist politicians eschewed differences during Brexit debates, First Minister Arlene Foster acknowledged "[slight differences](#)" in Northern Ireland's position and said its moves would be "nuanced." The power-sharing government retained the [Stay Home slogan](#). It published a [five-stage plan](#) for easing lockdown, though without a timetable. The first step included re-opening places of worship for private prayer, "drive-through church services," and permission for four to six people who do not share the same household to gather outside at an appropriate distance. Those unable to work from home were allowed to return on a phased basis if infection rates remain low. [Schools](#) will remain closed until September. The government is creating its [own contact tracing app](#), which will be compatible with a version being developed in Ireland.

English regions: Although England does not have a regional assembly, some local leaders raised concerns about Johnson's approach. The [mayors of Manchester and Liverpool](#) sent him a letter, which warned that removing the "Stay Home" message was premature in the badly affected northwest and called for reproduction numbers to include local breakdowns.

BREXIT IMPLICATIONS

Despite the coronavirus, Brexit looms large. When the UK left the EU on January 31, it began an 11-month transition period. During this time, the two sides planned to determine their future

relationship, including a free trade agreement. The outbreak of COVID-19 [hampered](#) talks, given social distancing restrictions and ill negotiators. When the third round [resumed](#) via videoconference in mid-May, significant gaps remained. Either side could ask to extend the transition period by one to two years. [Polling](#) shows over two-thirds of Britons support an extension, which would allow the government to focus on the pandemic. Yet Johnson has long opposed remaining bound by EU rules and financial obligations longer than necessary. In the days after this negotiating round, British [civil servants](#) detailed to work on the coronavirus returned to no-deal planning. Although leaving the EU without a trade deal would create an economic shock, some argue its effects would be [masked](#) by the coronavirus-induced recession. Time is short, as any extension must be agreed before July 1.

CONCLUSION

Five months after Boris Johnson won a decisive election with a pledge to “[get Brexit done](#),” thousands of citizens have lost their lives to COVID-19, the economy is in recession, devolved governments rejected his initial reopening plans, and post-Brexit arrangements are far from done. Although he planned to remake the UK’s relationship with Europe, he must now [remake Britain](#) itself after the pandemic. The challenge of reunifying a country [polarized by Brexit](#) could become even harder if Cummings retains his position and regional divergences over the coronavirus continue. Johnson’s decisions in the coming months will be critical to Britain’s health and economy, as well as its domestic unity and foreign relations.

Reopening Germany

CONSTANZE STELZENMÜLLER & SAM DENNEY



For Germany, the “reopening” phase of the coronavirus pandemic presents two challenges. The first is finding and maintaining the delicate balance between saving lives and saving the economy. The second is preserving the ability to treat the country’s pre-existing conditions, notwithstanding its [much-praised](#) resilience in the first two months of the crisis: a political order in transition, an economy that despite its wealth faces significant structural and technological hurdles, and an increasingly unfavorable strategic environment. Because of Germany’s relative political weight and its importance as a large anchor economy in the middle of Europe, the consequences of its success (or failure) extend well beyond the country’s borders.

SAVING LIVES VERSUS SAVING THE ECONOMY

Germany’s nationwide pandemic shutdown began with an [announcement](#) of “radical measures” by Chancellor Angela Merkel on March 16, followed by even more restrictive [rules](#) on March 22. This emergency management framework received a great deal of [praise](#) at home and abroad for being decisive, evidence-based, and judicious. Arguably, it was key in flattening the German infection curve. But the decision-making process reflected both the weaknesses and the strengths of the country’s

federalist culture: mayors, state leaders, and the federal government bickered in public over who was responsible while the infection curve vaulted upward in late February and early March. In the end, careful closed-door negotiations between Merkel’s Chancellery and the governments of the *Länder*, Germany’s sixteen states, led to a dependable political consensus.

By early May, Germany had [recorded](#) just over 160,000 COVID-19 infections, 127,000 recoveries, and nearly 6,500 deaths (a mortality rate of 4.0 percent). The reproduction factor (which measures how many people are infected by each new case) had dropped below 1. Across the country, 2.7 million [tests](#) had been administered, at a rate of more than 330,000 per week. On May 6, Chancellor Merkel [announced](#) a carefully controlled restarting of public life, nearly two months after decreeing a nationwide [shutdown](#). “We can afford a little audacity,” she said.

According to the [statement](#) agreed by the federal and state governments, social distancing rules are to be maintained (with masks still obligatory in many places) in slightly looser form until June 29. Large gatherings remain [prohibited](#) until at least August 31. But schools, stores, restaurants, tourism, cultural centers, and outdoor recreation spaces are to gradually reopen; and the Bundesliga, Germany’s soccer league, began

playing games to empty stadiums from mid-May. The [details](#) of implementation, however, are left to the states. Local health agencies (often working through call centers staffed by students) are tasked with tracing. An emergency mechanism now requires states to reinstate restrictions in reaction to new coronavirus flare ups (defined as 50 new infections per 100,000 inhabitants over a week). All this pushes decision-making to the local level, permitting a differentiated response to significant regional variances in infection levels.

Still, Merkel [noted](#) that the country remains at the beginning of the pandemic, and “we will have to deal with this virus for a long time.” German districts in several states have since reported outbreaks in senior care homes, refugee centers, and in meat-packing plants, triggering a local return to stricter rules. The Robert Koch Institute, Germany’s equivalent of the Centers for Disease Control and Prevention, warned sternly that it would be “necessary to observe the development very closely over the coming days.” Some German epidemiologists [weighed](#) in, calling the trigger threshold of 50 per 100,000 inhabitants arbitrary and probably too high. In mid-May, the Bundestag (the federal legislature) took the precaution to mandate more testing (especially for those working with at-risk groups), greater transparency in reporting test results, and more financial support for care-workers tending to the elderly. Clearly, audacity will have to be tempered with prudence and patience. In late May, the outlook seemed more hopeful than not: Germany’s COVID-19 deaths were nearing 8,000 (4.6 percent), but the number of new cases was flattening, and the reproduction factor was less than 1.

As for Germany’s economy, the federal government [tore up its fiscal rule book](#) with the most comprehensive package of salvage measures in Europe on March 25. It is unparalleled in the country’s postwar history, and even the measures taken in the context of the global financial meltdown of 2009 pale in comparison. Funding for *Kurzarbeit* (short-time work), a scheme whereby the state compensates employers for

keeping furloughed employees on the books by paying two thirds of their wages, was massively expanded. The government also announced €400 billion (\$433 billion) in liquidity guarantees for larger firms and direct grants for 3 million small companies and freelancers, totaling around €700 billion (\$834 billion)—the equivalent of two annual national budgets. To accomplish all this, the government had to invoke an emergency clause to that most sacred of all sacred German cows: the *Schwarze Null* (black zero) [constitutional debt brake](#). Bureaucracies across the country went into overdrive to ensure that companies and individuals got their money within days.

However, economic reality quickly overtook the government’s actions. By late April, German companies had [registered](#) a “breathtaking” (in the words of Detlef Scheele, the head of the federal labor agency) 10.1 million employees for *Kurzarbeit*. Companies have to pre-register their employees for this scheme based on very rough estimates, so the actual number of workers furloughed in the end may be smaller. By comparison, 3.3 million workers were registered during the global financial crisis of 2009, and 1.4 million received furlough compensation. At the time, this enabled big industrial plants to call their workers back in and ramp up production again quickly. Yet many of the registrations came from small and medium enterprises, many of whom might not survive the crisis at all, ultimately leaving their workers jobless despite the protective measures. Job [losses](#) surged by more than 300,000 in April to a [total](#) of 2.64 million, pushing the unemployment rate to 5.8 percent.

Meanwhile, the Federal Statistical Office [reported](#) that while consumption of disinfectant, soap, toilet paper, and condoms has jumped, production of key German export goods—chemicals, machine tools, cars, and car parts—fell to levels comparable to those of the financial crisis. The private Statista consumer confidence [index](#) has plummeted. Surveys conducted in April by the Ifo Institute for Economic Research show production expectations across German [industry](#),

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Given that experts and politicians in Germany are warning that the pandemic may last until the end of the year, it is perhaps too early to speculate about the post-coronavirus order.

but in the [auto](#) industry in particular, at historic lows.

The government is reportedly [mulling](#) an economic stimulus package of up to €150 billion, but has [said](#) it won't decide before June. The automotive lobby, specifically, has [called](#) for purchase premiums or scrappage bonuses, which are supported by the minister presidents of Lower Saxony, Baden Württemberg, and Bavaria, where hundreds of thousands of jobs depend on car and car parts manufacturers. But the German Council of Economic Experts, an independent group that advises the federal government, [foresees](#) a recession with a GDP drop in 2020 between -2.8 and -5.4 percent; the IMF's [prediction](#) is even more dire at -7.0 percent. Tax revenue estimates, [according](#) to reports from an expert advisory group to the finance ministry, are down €100 billion (\$108 billion) — and possibly a total of €300 billion (\$335 billion) over the next four years.

PRE-EXISTING CONDITIONS

Given that experts and politicians in Germany are warning that the pandemic may last until the end of the year, it is perhaps too early to speculate about the post-coronavirus order. Nonetheless, some developments are worth noting.

Pre-pandemic Berlin was obsessed with the slump in the polls of Merkel's fourth and (according to her) last coalition government, and with the surprise resignation in February of her heir presumptive, defense minister Annegret Kramp-Karrenbauer as leader of Merkel's center-right Christian Democratic Union (CDU). In a nation-wide [poll from early May](#), however, the CDU's approval rating shot up by more than 10 percentage points to 39 percent (its coalition partner, the Social Democrats, continues to languish at pre-pandemic levels of 16 percent). Merkel herself leads the personal popularity rankings with 68 percent, followed by her vice chancellor and finance minister Olaf Scholz at 59 percent. The man preferred by respondents as her successor, however, isn't even an official

candidate: Bavarian minister president Markus Söder (53 percent), who has been [praised](#) for managing the situation in his hard-hit state effectively and judiciously. Majorities of 54–56 percent dislike the three official candidates: Armin Laschet (minister president of North Rhine-Westphalia), Friedrich Merz (ex-parliamentarian and businessman), and Norbert Röttgen (chair of the foreign policy committee in the Bundestag).

The same poll suggests that Germans overall approve of the federal government's crisis management (satisfied/very satisfied: 67 percent), are optimistic that they will keep their jobs (84 percent), and that the restrictions on their freedoms are temporary (60 percent). While 54 percent want restrictions loosened, 41 percent would prefer the status quo.

Yet the voluntary self-discipline exercised by politicians and citizens alike in March when the country went into shutdown mode has visibly eroded; and this despite the fact that Germany's restrictions were much more liberal than those in France, Italy, or Spain, and were initially successful in flattening the infection curve. State minister presidents have [competed](#) to present the earliest and most liberal opening rules, and opposition politicians and pundits inveighed against "government by epidemiologists." Even the usually calm Merkel briefly lost her temper at what she [called](#) "*Öffnungsdiskussionsorgien*" (roughly: self-indulgent debates about loosening the rules).

The hard-right Alternative für Deutschland (AfD) party, which before the crisis had had some success in splitting and infiltrating the right-wing fringes of the CDU, has largely been [sidelined](#) during the first months of the crisis and has sunk in the polls. But on the weekends after the gradual opening policy was announced, several German cities saw thousands of people [demonstrating](#) angrily against the shutdown, including some well-known far right populists and conspiracy theorists. Will the AfD manage to turn this mood to its political advantage, as it did during the refugee crisis of 2015? Federal President Frank Walter

Steinmeier was careful to [emphasize](#) the right of citizens to criticize government handling of the pandemic. But an unnamed former minister [told](#) the daily *Süddeutsche Zeitung* that the protests seemed like a *déjà vu* to him, with a huge open-ended crisis, highly complex issues, a growing need for simple answers, and the radical right attempting once more to profit from the situation. “The only difference,” he said, “is that the problems today are even bigger.”

Pre-pandemic economic policy debates had centered on the question of whether the wealth and trade surplus of Europe’s largest economy were politically and economically sustainable, given a growing list of risks: the Trump administration’s trade war threats, a decade of underinvestment in physical and digital infrastructure, and the failure of key industries (the car industry foremost among them) to adapt to new trends and technologies. As one of the world’s largest exporters, Germany is also uniquely exposed to disruptions of its global supply chains, or in cross-border labor movements, and these vulnerabilities remain.

In geopolitical terms, Germany has yet to adapt to the stark climate change in international relations: the increasingly predatory behavior of the great powers China and Russia, and a United States that under the Trump administration has become recklessly volatile and often [hostile](#) toward its European allies. All these are arguments for reinforcing the strategic sovereignty of European nation states as well as of the European Union. But pre-pandemic Germany tended to zigzag between hard-edged national self-interest and hand-wringing appeals to multilateralism. Nationalist reflexes led it to prohibit exports of medical goods and close its borders at the outset of the pandemic. Since then, it has [lifted](#) the exports ban, [flown](#) in patients from other European countries, and [pledged](#) to take part in a global vaccine effort; [borders](#) are scheduled to open again by mid-June. The May 5 constitutional court [ruling](#) questioning the legality of the European Central Bank’s monetary policy was widely criticized as a major

blow to the unity of Europe. Chancellor Merkel’s May 18 [announcement](#), made together with French president Emmanuel Macron, of a €500 billion European recovery fund, was all the more sensational. One test of Germany’s EU presidency in the second half of 2020 will be persuading skeptical member states—the so-called “Frugal Four” (Austria, Denmark, the Netherlands, and Sweden)—to go along.

AN UNCERTAIN OUTLOOK

The elements of Germany’s successful initial management of the pandemic are well-known: early, rigorous testing and tracking, large quantities of ICU beds and ventilators, a functioning civil service, considerable public trust and solidarity by citizens, political elites willing to put emergency action before partisan politics, a functioning social welfare economy with near-total insurance coverage, and a healthy national budget surplus.

Yet its failures have been equally visible: a combination of federalism and fractious politics meant time for political action was lost in the first weeks of the outbreak; early nationalist reflexes cost Germany political credit. And efforts to develop a German tracing app are still ongoing; according to media [reports](#), it will not be available before mid-June.

The jury is still out on the long-term political, economic, and social [consequences](#) of the pandemic; some of the [scenarios](#) are relentlessly bleak. Yet there is proof that miracles do happen in Germany: the new BER international airport on the outskirts of Berlin, much derided for construction delays and design flaws that set it back by nearly a decade, is set to [open](#) in October. If this pig can fly—perhaps others can, too.

The day France reopened

CÉLIA BELIN & AGNESKA BLOCH



Two months after the beginning of the COVID-19 lockdown, with a death toll among the top four in Europe (along with the U.K., Italy, and Spain), France began to reopen gradually. Over April, the numbers of case related hospitalizations and patients in intensive care had started to [decrease](#) regularly, allowing the country to enter a new normal on May 11. Yet, the [strict eight-week lockdown](#) will undoubtedly leave a trace. A series of controversial decisions and communications blunders, fueled by a general fear of what's ahead, have nourished public mistrust of President Emmanuel Macron and his government. In the long run, the challenge for the French executive is to learn to manage a deeply apprehensive public and convince the French people to accept a degree of uncertainty in the scope, geographic distribution, and evolution of the reopening.

AVOIDING COLLAPSE

As Prime Minister Édouard Philippe stressed in [an April 28 address](#) to the National Assembly, reopening the country was critical to avoid “collapse.” With its vibrant tourism and entertainment industries shuttered, France’s economy suffered acutely under lockdown. Its GDP [contracted](#) by 5.8 percent in the first quarter of 2020, compared to 1.9 percent in

[Germany](#), and roughly 5 percent in [Italy](#) and [Spain](#). Many professional sectors, home to most small- and medium-sized enterprises such as shops, hotels, restaurants, construction, and car rentals, closed almost entirely. In March and April, they alone [accounted](#) for 64 percent of requests for partial unemployment benefits. The lockdown also took a heavy social toll: domestic violence [increased](#) by 30 percent, remote education left many behind (5–8 percent of students were “[lost](#)” to teachers who couldn’t reach them), and after two months indoors, most could not wait to visit their loved ones.

Thanks to a robust healthcare sector and unemployment support, however, confinement under the coronavirus has proven an acceptable evil for the French. Only 13 percent reported finding their lives “[unpleasant](#)” under lockdown and they were, among Europeans, the second least concerned (after Germans) about the consequences of COVID-19 on their individual [employment and economic prospects](#). Reopening amid an active pandemic is a dangerous endeavor, and fatal mistakes are bound to occur. Yet President Macron and his government persevered, all the while pleading to the French for flexibility. Indeed, the only way forward, as Philippe [repeated](#) on May 7, is to learn to live with the virus.

REOPENING SCHOOLS AND WORKPLACES

To prevent a second wave of infections, the government announced a threefold reopening [strategy](#): protect (with masks and social distancing), test (massively), and isolate (COVID-19-positive people and their contacts). But that is only the public health part. For everything else, the question is what to open, how quickly, and how safely.

In a country where employment of both parents is very high (74 percent of [parenting women](#) and 87 percent of parenting men work), the priority is to reopen schools. Teachers [returned](#) to the classroom on May 11, followed by a gradual reopening of nursery schools, kindergartens, and primary schools on May 12.

The virus has spread unevenly across France, as the strict lockdown [protected](#) large parts of the west and southwest from severe outbreaks. A map classifying the country's *départements* as [red or green](#) depending on the level of infections was thus released by the government, and reopening measures differed accordingly. Middle schools in green *départements*, for instance, reopened on May 18, while those in red areas had to wait. The government also accepted that mayors fine tune their own reopenings according to situations on the ground, in coordination with prefects, who represent the state. Yet differences across the territory prove challenging for a country of Jacobin tradition that stresses unity of the Republic.

Even since reopening, life has been nothing like the status quo ante. In the [first phase](#) of deconfinement, telework and “differentiated schedules” remain strongly encouraged. In the Paris region, written justification is [needed](#) to ride public transportation at peak hours. Travel beyond 100 kilometers is permitted only in exceptional situations with the proper justification, and the country stays closed to international travel. Hotels, restaurants, and cafés, as well as high schools will not reopen until further notice. All these decisions

will be closely re-evaluated at every turn over the summer, when phases two or three of reopening are reached, depending on the rate of new infections.

Seeking to strike a delicate [balance](#) between civil liberties and public health, the French government largely refrained from imposing the most drastic health measures. Wearing a mask is not required in the street despite being [compulsory](#) on public transportation, in elementary schools (only for staff and teachers), in middle schools, and in any business that so chooses. In a much-anticipated decision, the government authorized the French to travel for [summer vacations](#) within the country in July and August. A contact tracing app, “StopCovid,” is set to be [released](#), but only after having been debated in the national parliament. And although President Macron had once [suggested](#) that vulnerable people might have to stay home longer, he and the government ultimately opted to defer to citizens to exercise their sense of civic duty and responsibility.

PREEMPITIVE ANXIETY

What might seem like excessive caution on the part of the government can be explained by the fact that, coming out of lockdown, the mood in France has been somber and apprehensive. [Surveys](#) in April showed that the French were consuming more sleeping pills, anxiety medication (+7 percent) and alcohol (+30 percent) than usual. One-fifth reported problems with self-esteem, while a third said they couldn't concentrate. And yet, because mitigation mechanisms sheltered many from acute pain, it is the future that the French especially dread. In public opinion [studies](#), some confided they were terrorized by the prospect of reopening; many worried that life would feel abnormal and dangerous. Compared to Italians, Spanish, Britons, and Germans, the French were the [most fearful](#) that either they (54 percent) or a loved one (71 percent) would catch the virus.

Unlike in the U.S., where protests [erupted](#) in favor of opening the economy, many in France

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In the long run, the challenge for the French executive is to learn to manage a deeply apprehensive public and convince the French people to accept a degree of uncertainty in the scope, geographic distribution, and evolution of the reopening.

worried that the government's decisions were premature. In April, a [majority](#) of French (57 percent) expressed their support for a reopening date beyond the one set by the government. [Polls](#) also showed support for more drastic measures than those proposed by the executive: 70 percent favored longer stay-at-home orders for at-risk people; 60 percent wanted an obligatory contact tracing app; and 57 percent supported restrictions of movement within the country. Three out of four [wanted](#) masks to be compulsory outside the home at all times. These fears translated into demands by professional sectors, whose representatives worried employees faced unnecessary risks: major transportation unions, for instance, [demanded](#) access to hospital-level personal protective equipment.

As for school reopenings—as fervently [awaited](#) as they were [feared](#)—the public expressed [outrage](#) over the Élysée's decision: in fact, six in 10 French [were](#) opposed. This sentiment was only exacerbated when press reports revealed that the government's guidelines [diverged](#) from the [recommendation](#) of Macron's scientific council that schools remain closed until September. The president tried to backtrack, insisting that his [goal](#) was to ensure all children who needed to go back to school could. But in choosing the political middle ground between strict health experts' recommendations and laissez-faire, Macron took the risk of leaving everyone unhappy.

PUBLIC MISTRUST AND ANGER

At the heart of post-confinement anxiety lies a deeper problem: low public confidence in the government. In mid-April, 45 percent of French felt "[angry](#)" about the situation, and a staggering 62 percent were [dissatisfied](#) with the government's management of the crisis, up [16 points](#) from March. In this regard, the French stood out among Europeans: while 60 percent of Germans, 41 percent of Italians, and 29 percent of Britons [said](#) at the end of April that their governments had "managed the coronavirus better than most other countries," only 12 percent of French agreed.

Indeed, for many, the government's original sins lie in the early stages of Macron's "[war](#)" [against the coronavirus](#): first, for allowing the first round of [municipal elections](#) to take place in mid-March although the pandemic was already gaining momentum across France; and second, for the confusion and [lack of transparency](#) over masks and testing. Indeed, weeks of reporting closely monitored by the homebound French revealed frontline health professionals with inadequate equipment while the government appeared to minimize the importance of masks and large scale testing. At best, inconsistencies in official discourse [laid bare](#) the executive's lack of preparedness and internal tensions. At worst, [political extremes](#) and others accused the government of spreading "[State lies](#)" to cover up the shortage of medical supplies.

Although the government reassured the public that masks would be widely available and that testing capacity would [reach](#) 700,000 per week by May 11, skepticism solidified. After the prime minister's first [speech](#) on "de-confinement," only 46 percent [believed](#) that he was "telling the truth." A majority (55 percent) [said](#) they did not trust the government to successfully reopen the country. Trust was highest among supporters of Macron's La République en Marche (89 percent), and lowest among far right Rassemblement National and far left La France Insoumise voters (21 percent and 31 percent, respectively). This underlines persistent polarization between Macron's camp and the populist extremes, demonstrating that [entrenched biases](#) held before the crisis have only been reinforced.

Although Macron [initially](#) benefitted from a small "rally around the flag" effect, his approval ratings then [plummeted](#), especially compared to other European leaders. With a meager 38 percent approval coming out of confinement, the French president trailed German, Italian, and British leaders by 20 to 30 points. This reality, though, should be put into perspective: Macron is still faring [better](#) than during the dark days of the yellow vest crisis, and the French have been

structurally unhappy with their presidents for some time.

Nonetheless, with locally tailored reopenings and myriad guidelines to design, implement, and follow, France's future remains blurry at best. The government, like the president, is disliked when it appears to exercise power vertically. The public appears more responsive to an apologetic and humble Macron, like the one who [addressed](#) them on April 13 at the height of the crisis, and was briefly rewarded with a subsequent [bump](#) in the polls.

As the executive asks the French for flexibility and benevolence as it moves forward with deconfinement, it is learning to refrain from imposing top-down solutions. Building on lessons learned from the yellow vest protests, Macron and his government—often described as “elitist” and “out-of-touch”—should continue to empower local authorities like mayors, [trusted](#) by 75 percent of French, to implement recommendations appropriate to their municipalities, as well as trust citizens to act responsibly in following guidelines. Only by demonstrating faith in its own citizens will Macron's government, in turn, begin to win back their trust.

Italy's reopening

GIOVANNA DE MAIO

PRONTO



Early two months after Italian Prime Minister Giuseppe Conte imposed a national lockdown that restricted personal mobility to essential trips such as pharmacies and grocery stores, he [announced a plan for reopening](#). Compared with the series of decrees that escalated coronavirus-related restrictions, the government's reopening plan—called Phase 2 and starting from May 4—has created uncertainty about which activities are allowed and shifted responsibility for appropriate social distancing and behavior in public settings to individuals. Italy's coronavirus experience has ignited political debate regarding coordination between states and regions, unhealthy political and economic pressure on the government, and clarity of communication.

LIVING WITH THE VIRUS

The Phase 2 plan, also known as the “living with the virus phase,” is meant to reopen the country starting from the activities in the manufacturing sector, construction, real estate, and wholesale trade. Starting from May 4, Italians will be allowed to visit their relatives living in the same region or to return to their residence. Funeral ceremonies are the only religious services to be reinstated, with restrictions on the number of people allowed to attend. Retail sales are scheduled to restart on May 18, along with

beauticians, hair salons, restaurants, and bars, although there will need to be a one-meter distance between tables.

Unlike in other European countries, such as Germany and France, Italian schools will remain closed until September. A rotating schedule of online and in-person classes will be instituted to keep a one-meter distance between students and to protect the teachers, whose average age is 50 years old.

Wearing face masks is mandatory for all these activities, as well as for riding public transportation. For this reason, the Italian government established a fixed price of €0.50 per mask and offered incentives for the purchase of bikes.

Many people have complained about the unclear phrasing of the decree, especially pertaining to the definition of “relatives.” The decree used the word *congiunti*, literally meaning “related,” which is not defined in the Italian civil code. Conte [clarified](#) later that relatives are “people with whom you have family relations. Or, stable emotional relations.” But aside this clarification, many doubts persisted around what is allowed or not and where, because of the discretionary power left to the regions in the application of such guidelines.



“Without a more coordinated path for differentiated reopening among the Italian regions that puts public health realities ahead of political pressures, Italy risks experiencing an uncontrolled coronavirus resurgence and even greater economic damages.

PROBLEMS OF COORDINATION, GOVERNANCE, AND COMMUNICATION

On the heels of a disastrous [GDP forecast for 2020](#) (-9.1 percent according to the International Monetary Fund) combined with the emotional cost of keeping 60 million people at home for two months, reopening certain economic activities and lifting some of the strict restrictions are seen as economic and social necessities. But if Italy's track record is any guide, there are at least three challenges ahead.

The first challenge is the coordination between the central government and the regional governments (which was already complicated before COVID-19), particularly with respect to healthcare and lockdown measures. Since the 2001 constitutional reform, regions have been entrusted with managing their own healthcare systems within the national framework, and this has created medical service disparities and competition between these levels. For example, Lombardy is known for its excellent healthcare facilities, especially for highly specialized procedures. However, in the past 10 years, this region has witnessed a surge of private clinics supported by public funds and a consequent shortage of public primary care providers, both in terms of physicians and facilities. As private clinics were not equipped with intensive care units, COVID-19 patients needed to be taken to hospitals where the contagion continued to spread, while some patients with symptoms were left alone in their homes, and medical personnel had trouble accessing testing. On the contrary, the Veneto region was able to offer better screening.

Therefore, [many argue that centralized management](#) of the National Healthcare System (Sistema sanitario nazionale) could have planned a more efficient use of budgetary resources and ensured better uniformity and coordination in the quality of healthcare, testing, and isolation procedures within regions and across the nation. When COVID-19 hit Italy, regional governors took different lockdown and screening measures

(some stricter than others) without coordinating with neighboring regions and sometimes in open contradiction with the central government. Recently, for example, the governor of the Calabria region (which has a contagion rate of zero) reopened outside seating for bars and restaurants, [a move that has been challenged](#) by Minister for Regional Affairs Francesco Boccia in the Legal Council of State given fear that this decision could affect the spread of the infection. Uncoordinated differences of interpretation of reopening norms, especially as inter-regional travel resumes, risk overwhelming the regions with weaker healthcare facilities.

The second challenge is the unhealthy state of Italian politics. Matteo Salvini, the leader of the League (right wing nationalist party), who expressed conflicting views on domestic and international lockdown measures throughout the crisis, put pressure on Conte's government and on Lombardy's governor, Attilio Fontana (League), to reopen the economic activities in the region despite higher infection rates than any other Italian region, let alone the southern ones, where economic activities have paused regardless of a zero-infection rate. Former Prime Minister Matteo Renzi (Italia Viva) also pushed for reopening, threatening to withdraw support for Conte's government in the Italian parliament.

More broadly, the hyper-politicization of the economic measures to be agreed with the European Union brought back a reinforced sovereigntist narrative from the League and Brothers of Italy (both on the far right of the political spectrum). Their confrontational approach toward the EU over the European Stability Mechanism and economic response to the crisis ([and the spread of false information](#)) are weakening Italy's position at the negotiating table, as they are blaming the government of being politically and economically [dependent](#) on aid from Brussels and Berlin.

The third challenge is political communication. In issuing the lockdown orders, Prime Minister

Conte relied on press conferences where he placed great emphasis on coordination with the National Institute of Health and provided clarity on the extent of the lockdown. Yet, for Phase 2, Conte's press conference lacked sufficient detail on what was allowed as well as scientific explanations of the logic behind the reopening of nonessential activities and the lifting of major restrictions.

While the contagion curve is declining, the number of new cases at the time of Conte's speech was still very high (over [2,000 new cases](#) detected). It is therefore unclear what conditions would allow for further relaxation of restrictions and what conditions would contribute to a second lockdown.

THE RISK OF AN UNCONTROLLED COVID-19 RESURGENCE

Indeed, healthcare facilities are no longer overwhelmed and are starting to operate at a more regular pace. However, as countries reopen and in the absence of a vaccine, an increase in the infection rate is most certainly expected and the main question is how to avoid a second peak and an economic collapse at the same time. Without a more coordinated path for differentiated reopening among the Italian regions that puts public health realities ahead of political pressures, Italy risks experiencing an uncontrolled coronavirus resurgence and even greater economic damages. Given the absence of clear communication from the government on the rationale for the reopening schedule, Italians will find it hard to accept and comply with the restrictions and those that might be reintroduced in the event of a second peak.

Reopening schools: Insights from Denmark and Finland

EMILIANA VEGAS



The COVID-19 pandemic has caused sudden and unprecedented changes to education around the world, impacting more than 1.5 billion students from preschool through higher-ed. In March 2020, for the first time in history, almost all the world's schools closed their doors, leaving millions of children without formal access to learning. The closure of schools is testing education systems' readiness and capacity to maintain student engagement and learning, and shedding renewed light on inequities that exist across and within countries that create barriers to quality education, especially for the most marginalized.

Throughout the world, the impact of school closures on student learning will vary by socioeconomic status and the extent to which schools and school systems have the capacity to provide quality education remotely. As I reported in a [recent analysis](#) of school closures and government responses to COVID-19, the learning gap between rich and poor will likely grow during the pandemic—not just between high- and low-income countries, but also between high- and low-income regions and communities within countries.

As policymakers plan to reopen schools, learning from other countries' experiences that have already reopened will be especially useful. In this

piece, I review the experiences of Denmark and Finland, two of the first countries to plan for a gradual reopening of K–12 schools. Rather than drawing specific lessons or recommendations at this early stage, my goal is to share insights and raise questions to guide policymakers as they plan to reopen schools after the COVID-19 closures.

WHAT FACTORS WERE MOST IMPORTANT IN REOPENING SCHOOLS?

In Denmark, the decision of when and how to reopen schools was made by the central government together with the Parliament. This allowed for municipal councils (similar to school districts in the U.S.) to develop their own plans, and school leaders and teachers to do the same for each individual school based on [guidelines from the National Board of Health](#). The legal right to quality education factored heavily in the decision to reopen. When announcing the reopening of schools, the government recognized that “[in current circumstances, schools and municipalities cannot guarantee that children receive the education in all subjects for which they are entitled](#).”

Finland had a similar decision-making process. Minister of Education Li Andersson tweeted that to extend the school closures, the government

would have to prove that opening schools would be unavoidable in the current situation and was “[a matter of weighing basic rights](#).” Given the country had contained the spread of COVID-19, the message was that children’s right to education outweighed the health risk of going back to school.

In addition, both countries’ governments considered the equity implications of school closures and reopening. In Finland, according to a [news report](#), the government emphasized that “the right to basic education is a subjective right laid down in the Constitution and belongs equally to everyone.” In Denmark, as secondary students spent much of the term learning remotely, end-of-year assessments were suspended for the school year. The main reason provided for suspending these assessments was to avoid increasing inequality between those students (many of whom are immigrants) who have not been able to get help from school or at home.

STAGGERING REOPENING: WHO SHOULD RETURN TO SCHOOL FIRST?

In reopening their economies, decision-makers are faced with the critical question of what services and sectors to open first. For education policymakers, a key decision is when and how to reopen preschools and primary schools, secondary schools, and higher education institutions.

In Denmark and Finland, the decision to gradually reopen included staggering by age, with schools for the youngest children reopening first. The main factor underlying the decision was the [emerging evidence indicating that children play a small role](#) in spreading the virus. In Denmark, preschools, early childhood care centers for the youngest children, and primary grades 0–5 (equivalent to K–5 in the U.S.) were reopened on April 15. In Finland, on April 29, the [government announced](#) the reopening of early childhood education and care, as well as primary and lower education (grades 1–9) on May 1 of this year. In Denmark, the central government announced that municipalities may open secondary schools (grades 6–10) on May 18.

WHAT HEALTH AND SAFETY MEASURES NEED TO TAKE PLACE IN SCHOOLS?

Once the decision on which schools to reopen first is made, a clear plan must first and foremost prioritize the health and safety of students, educators, and families. In both countries, a number of public health measures were put in place. Among these, schools prohibited the usual morning meetings held in classes at the beginning of the school day, forbade food sharing, and introduced new preventative practices like staggered student arrivals and much more frequent cleaning and handwashing practices throughout the day. In Denmark, where average class sizes were around 20 students prior to COVID-19, classes were divided into two to three smaller groups and, whenever possible, held outside. It is worth briefly noting that [the Copenhagen Teacher Association](#) raised significant concerns over dividing the classroom into smaller groups, as it increased teachers’ work hours and created staffing shortages.

More specifically, Denmark introduced new [health and safety measures](#) for schools, including: (1) In the classroom, students must be seated at tables that are at least two meters (6.5 feet) apart; (2) students must handwash every two hours; and (3) all educational materials and equipment must be cleaned twice a day. In some schools, additional toilets and sinks were installed. To minimize risk of contagion, many schools reduced their number of hours or remained closed some days. Parents now drop off students at staggered times, sometimes using different school entrances, and are not allowed inside school buildings. In addition, any child or parent who presents even minor symptoms must not attend school. Importantly, children, parents, and teachers at increased risk due to existing health conditions are asked not to attend school.

Given schools’ reduced capacity to serve students due to these health and safety measures, the

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Throughout the world, the impact of school closures on student learning will vary by socioeconomic status and the extent to which schools and school systems have the capacity to provide quality education remotely.

government of Denmark asked families to keep their children at home when at least one parent does not work. In addition, [other community resources](#) are being tapped: [Community parks](#) are now reserved for young children between the school hours (8 a.m. to 3:30 p.m.), and other buildings are made available to schools, including hotels, banks, conference centers, museums, and libraries.

WHAT TO EXPECT AFTER SCHOOLS REOPEN?

The decision to reopen schools needs to build in processes not only to monitor health outcomes but also to support school leaders and teachers as they gradually serve more students. Opening new communication channels to address questions as they arise is a first step. In Denmark, the Ministry of Children and Education established a [coronavirus hotline](#) for schools to receive direct support on education-specific issues, such as when and how to assess student learning and how to make use of public spaces for learning. This hotline is in addition to a general government coronavirus hotline. The Danish National Board of Health prepared a [guide](#) for school administrators and informational materials for teachers and students, including brochures, posters, and videos. Similarly, the Finnish National Agency for Education established [an email box](#) for education providers, schools, and organizations with international education programs to receive advice on the coronavirus and education services.

Another important issue for consideration is whether to require students to return to school once they reopen or to let families decide what is best given their specific circumstances. In Denmark, families are allowed to decide when to send their children back to school. To aid parents in the decision to send children to school, the Danish Pediatric Society issued [guidelines](#) explaining what underlying health conditions may put children at risk. But the Government of Denmark also mandated that students who stay at home must receive emergency education in the

form of remote education. By contrast in Finland, [Prime Minister Sanna Marin noted](#) that once schools reopen, local authorities and schools could not continue with remote education, and students wishing to stay home to complete the school year would need special permission.

In addition, given the likelihood that new breakouts of the coronavirus will happen in the near future, decision-makers need to provide support to better prepare schools to move to distance learning on short notice. School leaders, teachers, and students should reflect on what worked and what did not work well during the distance learning period and plan to make adjustments in the future. Governments should ensure that all students have access to devices and internet connectivity to access online learning while schools remain closed.

Finally, and to end with a more hopeful note, the gradual reopening of schools after the crisis provides an unparalleled opportunity to rethink the day-to-day experiences of students and teachers. With students having had to take a lead role in their own learning and teachers having had to adapt to remote teaching, we hope that upon returning to school the interactions between teachers and students will be more engaging, with teachers spending less time *teaching* and more time *facilitating* students' inquiry and problem-solving skills.

**I am grateful to Anne Sofie Westh Olsen for her support in accessing background information on Denmark.*

As the country normalizes, COVID-19 strains Turkey's economy and politics

KEMAL KIRIŞCI



Turkey has luckily managed to avoid the spike in the number of COVID-19 deaths faced by Italy and Spain. By late April, less than two months after the discovery of the first case on March 10, daily reported cases and deaths had peaked. This allowed President Recep Tayyip Erdoğan to [announce on May 4](#) the gradual and phased reopening of the country. The details and the timeline put forward reveal a continued unease between his priority to open the economy and the more cautious approach advocated by Health Minister Fahrettin Koca.

Like elsewhere in the world, getting Turkey back on its feet without triggering a second wave of the pandemic will be a challenge. But unlike some other countries, Turkey's political and economic weaknesses serve as further hurdles. This combination of a weak economy and an unending spiral of authoritarianism will make a robust recovery from the pandemic even more difficult. Instead, the path to normalization is likely to be marked by growing political instability and debates over the likelihood of early elections.

RESPONDING TO THE VIRUS

Both the Turkish people and the Turkish government were slow in recognizing the danger posed by the coronavirus. As late as mid-March, more than a week after the first case was

discovered, President Erdoğan continued to argue that Turkey would not be seriously affected and even predicted Turkey would benefit economically from it.

The initial response to the pandemic was hesitant, incremental, and even contradictory at times. There was also a degree of tension between the health minister's preference for policies shaped by science and the president's [political priorities](#). Nevertheless, Erdoğan did eventually lend his support to social distancing measures, closures of non-essential shops and schools, travel bans, and even a ban on those aged 20 and younger and 65 and older from venturing outdoors. Because the agricultural and industrial sectors were to be kept open at all costs, strict curfews were only imposed during weekends and holidays and were relaxed during the week to enable people to work.

As of May 25, total confirmed COVID-19 cases had [reached](#) more than 157,000 while deaths stood at almost 4,370. Since April 12, when 5,138 new cases were recorded, daily numbers of new cases have [trended](#) generally downward to 987 new cases on May 25. Turkey also has a strikingly low [confirmed](#) number of deaths per 1 million people—51.46—compared to much higher fatality rates in France (435), Germany (99), Italy (524), Spain (615), and the United States (295).

Several factors unique to Turkey could have led to this low death rate, including the youth of the [Turkish population](#), thought to afford some level of immunity to COVID-19, and the fact that Turkey's elderly are still mostly [looked after](#) by their families or by in-house caretakers, thus avoiding contagious environments in care facilities. This was backed by a relatively robust health system with [unusually large numbers](#) of intensive care units and well-trained personnel. Finally, in a change of pace from Erdogan's polarizing political style, the health minister's more constructive, inclusive, and relatively transparent manner helped facilitate compliance with restrictions.

OPENING THE COUNTRY

In speeches delivered on [May 4](#) and [11](#), President Erdogan put forward a phased normalization plan spread across three months. The stay-at-home requirement for seniors over 65 years old and youth under 20 years of age would be partially eased. Domestic and international travel restrictions would be lifted gradually. Universities could open their campuses and return to regular academic calendar from mid-June. However, the president warned that these measures required continued compliance with the normalization rules, especially social distancing and the continued wearing of masks in public spaces and reiterated how the government would be strictly guided by the advice provided by the Ministry of Health.

However, Erdogan's announcement that a range of businesses, including shopping malls, would open May 11 raised [question marks](#) about his commitment to scientific guidance over political and economic gain. The health minister appeared alarmed when [2.3 million people](#) crowded shopping centers during the first two days of their opening and [warned](#) of the danger of contagion. His criticisms were echoed by [academics and experts](#), including representatives from the Turkish Medical Association and Istanbul Municipality [Science Committee](#). Construction, in particular of shopping malls, has long been one of

the prominent [hallmarks](#) of the governing Justice and Development Party's (AKP) rule since 2002 and a critical part of Erdogan's current economic model. Their closures during the pandemic deeply hurt the commercial interests of companies managing these malls, placing Erdogan under [pressure](#) to reopen them.

With this decision, political expediency continues to trump science, causing policy inconsistencies and putting lives at risk. Thus, the odd inconsistencies that marked Turkey's attempts to throttle the virus appear set to characterize the country's normalization, too. For example, the government initially kept parks, open-air facilities, and mosques closed while allowing shopping malls to open. Furthermore, the practice of weekend-only curfews [remained](#) in place through the end of Ramadan and Eid in late May. The [effectiveness](#) of these intermittent curfews—a practice [unique](#) to Turkey—is questionable, as they are alleged to have generated increased traffic before and after the curfews. Much more importantly, [academics](#) and [scientists](#) complain that they do not have access to detailed data required to provide independent and informed assessments of government policies to reopen the country. The announcement by the health minister that Turkey's Ro ("R naught") value [stands at 1.56](#) suggests the virus is not under control. In sharp contrast, in late April, the heads of Germany's four major scientific research organizations [recommended](#) that Germany's social distancing measures and lockdowns remain in place because Germany's Ro value had approached 1.

This suggests that the Turkey's normalization will be precarious, and risks being further complicated by the economic and political challenges that have marked Erdogan's one-man rule.

ECONOMIC AND POLITICAL CHALLENGES

The pandemic in Turkey once more highlights the close link between politics and economics. Erdogan constructed his presidential system based

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on majoritarian rule, disregarding traditional separation of powers and [eroding](#) the gains from earlier reforms. In this system, winning elections provides Erdoğan the legitimacy to claim solely to represent the national will of the country. This legitimacy was undermined by his failure to prevent the economy from falling into a recession after a [currency meltdown](#) in August 2018 and a particularly polarizing campaign ahead of the local elections in March 2019, which resulted in AKP candidates [losing](#) important mayoral races including in Ankara and Istanbul.

COVID-19 arrived just after [Erdoğan's approval rating](#) had steadily declined to 41.1 percent in February 2020. Initially, the pandemic caused a rally around the flag effect, temporarily boosting his popularity to 55.8 percent. Since then, it has slipped back down to 52 percent as of April 2020 and will likely continue to decline due to the pandemic's economic toll. Ali Babacan, a former economy czar credited for Turkey's economic success a decade ago, [criticized](#) the government's response to COVID-19 and [warned](#) of a looming economic crisis. Travel bans and the contraction in international trade is damaging Turkey's tourism and export earnings, two important drivers of Turkish employment and economic growth. The International Monetary Fund [predicted](#) that the economy could shrink by 5 percent and that unemployment could reach over 17 percent by the end of 2020. This picture largely explains the urgency to reopen the economy, although there is no evidence that Erdoğan will adopt major reforms to address Turkey's deep-seated economic and political problems.

Instead, all the indications point to Turkey remaining an "[illiberal state](#)," as Erdoğan attempts to perpetuate his rule by returning to the populist's book of tricks. He has already [depicted](#) Turkey as being under assault from external and internal enemies, while describing the struggle against COVID-19 as a liberation war and his government's performance as the envy of the world.

Simultaneously, the "[aid diplomacy](#)" that Turkey has pursued during the pandemic, [including to the United States](#), is presented by the pro-government media as a sign of its global power status. In line with this self-ascribed status, Erdoğan has resisted any talks with the IMF to resolve Turkey's [dire external](#) financing problems and sought to resolve them through bilateral [currency swap deals](#) using the goodwill garnered by aid diplomacy.

As ever, Erdoğan remains intolerant of criticism and open debate. Since the pandemic, numerous journalists and social media users have been detained on grounds of disseminating "[provocative news](#)," while [media](#) outlets have been fined. The practice of replacing democratically elected mayors belonging to the People's Democratic Party, the third largest party in the Turkish parliament, with government appointed trustees due to alleged links to the outlawed Kurdistan Workers Party [continued](#) during the pandemic. The mayor of Istanbul, Ekrem İmamoğlu, of the Republican People's Party (CHP), the main opposition party, faces constant obstructionism. His calls for stricter measures in Istanbul to fight the pandemic have been largely ignored while [criminal investigations](#) have been launched against him. When Canan Kaftancıoğlu, the Istanbul chair for the CHP, remarked that she soon expected "a government change," Erdoğan [responded furiously](#) that the CHP had "fascist mindset" and "a desire to usurp the country's administration through a coup rather than coming to power through democratic means." He was similarly strident in his reaction to criticisms of the [homophobic sermon](#) delivered by the head of Turkey's Religious Affairs Directorate suggesting a link between homosexuality and the pandemic.

CONCLUSION

These policies are all too representative of President Erdoğan's rule. Their primary objective is to maintain his political alliance with MHP (the Nationalist Movement Party) and to consolidate the presidential system to ensure his own political survival. Other post-COVID-19 considerations are secondary.

With the next elections not scheduled until 2023, [commentators](#) do not expect Erdoğan to call early elections due to the continued erosion of his electoral base and instead [predict](#) that Turkish politics will become more and more deadlocked. By insisting on opening the economy and pushing forward with normalization, Erdoğan risks a second wave of the pandemic. Ironically, this may only aggravate Turkey's unresolved problems and make demands for an early election inevitable.

Responsibly reopening Greece

WILLIAM J. ANTHOLIS & FILIPPOS LETSAS



Greece surprised the world by emerging as a paradigm of crisis management in its response to the coronavirus. Despite a decade of contraction and austerity, an aging population (EU's second oldest after Italy), and a resource-constrained healthcare system (8 percent GDP spending vs. the EU's 10 percent), the government's strategy has been a textbook case of swift and responsible action against a public health crisis.

That same strategy should also guide Greece's efforts to reopen. With the summer season underway, critical questions emerge regarding tourism—a pillar of Greece's economy. Tourist activity will determine the size of the crisis's economic impact to the country. However, moving too quickly could not only pose health risks, but also undermine Greece's new sense of achievement.

WHAT WAS DIFFERENT ABOUT THE GREEK APPROACH

Trusting experts. The government appointed epidemiologist Dr. Sotiris Tsiodras to lead a team of public health experts. Prime Minister Kyriakos Mitsotakis prioritized science over politics and encouraged the team to communicate directly with the public. Dr. Tsiodras—a low-key, soft-spoken, fairly unknown figure until recently—quickly

became a household name and, for many, the most beloved face in the country. This was a dramatic turn after a decade where political leaders across the spectrum had accepted difficult economic policy choices but had played to populist emotions by publicly blaming experts—from Brussels bureaucrats to local finance and tax officials. In contrast, public health experts were trusted and elevated.

Speed. Following experts' recommendations, and seeing transmissions elsewhere, the government took rigorous [restrictive measures](#) early on. Italy suffered its first death on February 22, but waited to impose regional measures until March 8, and extended them nationally on March 10. In Spain, nationwide efforts were imposed on March 13—following over 100 deaths and after allowing over 100,000 people to march through central Madrid on March 8. Greece's first measures—canceling carnival festivities—were imposed on February 27, two weeks *before* its first death. When Greece announced a full lockdown on March 22, it had 624 confirmed cases and 15 deaths. The United Kingdom announced its lockdown on the same day after 6,650 confirmed cases and 335 deaths.

Transparency, clear communication, and enforcement. Through daily televised briefings held by Dr. Tsiodras and the civil protection minister, and frequent addresses by Prime

Minister Mitsotakis, the state achieved general public support. Authorities shared evidence-based analysis in a timely fashion and managed expectations with respect to next steps, while continuously updating the public on the spread of the virus and reminding them of imminent dangers. As important, Greek police enforced restrictions on those who failed to notify authorities when leaving their homes, even for essential errands such as trips to the grocery or pharmacy.

Strengthening public health. The Mitsotakis administration took drastic measures to strengthen the country's fragile public healthcare system. Between February and May, it recruited into the public health system over 3,500 medical professionals, many of whom were unemployed or recent graduates. It invested in ICU capacity by adding new units and mobilizing existing ones in private hospitals. It also improved testing capabilities, increased epidemiological surveillance, and helped advance clinical trials for a vaccine. Greek officials developed a robust monitoring and intervention mechanism, isolating anyone who entered the country.

Whole-of-society approach. The government worked with foundations, industry associations, and the private sector to secure much needed resources and to support the hardest hit communities. For instance, the government expanded the supply of personal protective equipment (PPE) by securing major philanthropic grants, encouraging companies to shift to PPE production, securing corporate donations, and working with local 3D-printing vendors to produce healthcare equipment.

Defying cultural norms. Determined to preserve public health, the government directly confronted the Greek Orthodox Church prior to Easter Week celebrations. The Church insisted that diseases could not be contracted from Holy Communion (which priests dispense using a common spoon). Doctors, scientists, and even Mitsotakis himself through an emotional televised address

called on them to listen to science. Ultimately, the government issued a decree ordering all Easter liturgies to resume behind closed doors, livestreaming them to the public.

Collectively, these coordinated actions resulted in a transmission rate (or Ro) of well below 1, which led to lower hospitalizations and fatalities compared to the rest of Europe—especially Italy, Spain, and Portugal. As an illustration, ICU cases reached less than 10 percent of its system-wide capacity at their peak in April, enabling health professionals to give their full attention to severe COVID-19 cases. The early procurement of PPE meant that very few healthcare professionals were infected—and not a single one at the main hospital for COVID-19 in Athens.

Not everything was perfect. As elsewhere, both government performance and public compliance improved as the crisis unfolded. Greece was aided by a smaller population and more centrally managed government than Italy, Spain, and the UK. But Greece also managed a very large and complicated geography, a history of public non-compliance, and an ongoing refugee crisis. On the whole, Greece demonstrated consistency in focus and resolve.

TURNING ON THE DIMMER SWITCH

On May 4, Greece embarked on a two-month phased journey to reopening. Mitsotakis has recognized that returning to social and economic activity cannot occur using an “on-and-off” switch; instead, it must be done through a dimmer switch, with the reinstatement of protective measures when necessary. Greek authorities have been updating projections daily and recommending adjustments as needed.

In 2019, Greece welcomed 34 million visitors (three times the country’s population) who directly contributed 18 billion euros in revenue (~10 percent of GDP) and supported 850,000 jobs (~22 percent of employment), with multiplier effects estimating GDP contributions of up to 25



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percent. But at a time of severe global uncertainty, Greece's overdependence on tourism could become its Achilles' heel. For 2020, the European Commission [estimates](#) revenue losses in Europe to be 50 percent for hotels and restaurants, 70 percent for tour operators and travel agencies, and 90 percent for airlines and cruise companies.

About 80 percent of Greece's tourism business profits are earned in July and August. The government plans to market Greece as a coronavirus-safe destination and to start welcoming tourists on June 15, initially opening to countries that have had relative success in containing the virus. Even so, according to the minister of tourism, in the best case Greece must expect a [50 percent hit](#) in tourism receipts—or 5 percent direct hit to its GDP. This best-case scenario will be difficult to achieve. Harder still will be responding to incidents that will invariably develop without risking a large-scale outbreak.

WHAT GREEK SUMMER 2020 COULD LOOK LIKE

Tourists will travel if they feel it to be safe. Safety will come from a combination of social distancing, effective and immediate treatment of those who become sick, and contact tracing.

Social distancing. Greek vacations would need to emphasize the residential and outdoor experience, minus the social mixing that has made it increasingly popular. The crowded and bustling streets of Greek cities, ports, and island towns—especially at night—would need to be significantly curtailed. The compulsory use of masks would help restore confidence among international visitors, protect local populations, and limit the risk of new infections. Key tourist areas would need to self-comply, including hotels, souvenir shops, restaurants, beaches, marinas, ferries, and public transport.

Effective and immediate treatment. Remote locations would need to have clear plans on how to treat patients with varying degrees of illness.

These would include on call doctors for all hotels, telemedicine options, and access to quarantined structures exclusively hosting COVID-19 cases. Such protocols should be accompanied by frequent checks to ensure compliance.

Tracing. Introducing health passports, providing visitors with electronic bracelets upon entry, and encouraging cellphone-tracing applications are all options worth exploring. Such initiatives may be expensive and complicated to implement on short notice, but they are achievable, especially if strict protocols are established early on at points of entry (airports, ports, and land borders).

Promotion. A public advertising campaign that builds on [#greecefromhome](#), a major outreach initiative created amid COVID-19 to enable people to explore Greece virtually, would help reassure potential visitors that their health is a top priority ([#safegreece](#) or [#healthygreece](#) are brands to consider).

TOURISM DIPLOMACY

The Greek government has explicitly requested from EU partners to work together on setting common standards for travel. The government hopes that best practices can be shared, creating common expectations among tourists. Initiatives such as the newfound nine nation [alliance](#) with Australia, Austria, the Czech Republic, Denmark, Israel, New Zealand, Norway, and Singapore—countries that have contained the spread of COVID-19 and are exploring partnerships to revive their economies—could be instrumental in harmonizing processes, boosting business ties, and reopening travel. With two-thirds of its tourism currently coming from EU member states and one-third from just four countries—Germany, the UK, France, and Italy—such efforts could help Greece diversify its tourist markets and countries of origin.

Promoting travel schemes with countries sharing a land border with Greece (and continue to have low infection rates), such as Bulgaria and North

Macedonia, should be prioritized. Facilitating road tourism would help revive the economies of cities in northern Greece. Keeping the private yacht industry alive would help attract high-end tourists seeking hygienic, controlled, and self-contained environments. Furthermore, encouraging those considering cancelations to rebook for off-season months would help extend the tourist season.

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BROOKINGS