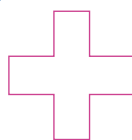
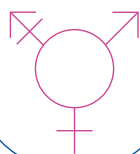


# **Economics, Politics and Governance During COVID-19: Experiences of the Global South**

Jenny Chesters, Christian Suter,  
and Sandra Fachelli (eds.)



LIT

Jenny Chesters, Christian Suter, and Sandra Fachelli  
(Eds. for the World Society Foundation)

Economics, Politics and Governance  
During COVID-19:  
Experiences of the Global South

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LIT

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Jenny Chesters, Christian Suter, and Sandra Fachelli  
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## About the World Society Foundation

The World Society Foundation (WSF) was established in 1982 by Peter Heintz with the aim of encouraging and supporting research on world society, that is, its emergence and historical evolution, its structure, its dynamics, and current transformation. Until 2003, the main purpose of the Foundation's sponsoring activities was to finance entire research projects focusing on the various processes of social integration and disintegration within worldwide systems—world culture, world economy, world politics, and intergovernmental systems—and on how global processes affect the perceptions and actions of individual and collective actors worldwide. Its current sponsoring policy is to provide award programs for research papers and to support international conferences on world society topics. In accordance with this new policy, the Foundation has introduced its WSF Award Program for Research Papers on World Society and held a series of international conferences (2007, 2008, 2010, 2013, 2015, 2016, 2017, 2018, 2019, 2021, 2022, 2023, 2024) in order to maintain a network of excellent scholars interested in transnational and global research topics. The World Society Foundation Award honors outstanding research papers on world society that address a specific topic announced by the Foundation in its Award Program. The World Society Foundation also publishes the book series *World Society Studies*. The World Society Foundation is domiciled in Zurich, Switzerland. The current members of the Board are: Mark Herkenrath, Hans-Peter Meier-Dallach, and Christian Suter (President). Former members of the Board included: Peter Heintz, Karl W. Deutsch, Hans-Joachim Hoffmann-Nowotny, Bruno Fritsch, and Volker Bornschier. More detailed information on past research projects sponsored, the topics and recipients of the 2007–2022 WSF Awards, the WSF book series *World Society Studies*, and the call for papers of the current WSF conferences (2025–2027) can be found on the Foundation's website at [www.worldsociety.ch](http://www.worldsociety.ch).





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## Preface

In June 2023 the Research Committee 55 on Social Indicators (RC55) of the International Sociological Association (ISA) organized together with the Faculty of Education at the University of Melbourne an international pre-conference to the ISA World Congress in Melbourne on the topic of *The Impact of the 2020–2022 Pandemic on World Society*. The conference, supported by the World Society Foundation took place at the University of Melbourne, hosted by the Faculty of Education. This volume includes a selection of contributions assessing the impact of COVID-19 on economics, politics and governance, focusing on countries from the Global South presented and discussed at the Melbourne conferences, both the RC55 pre-conference and the RC55 sessions of the ISA World Congress.<sup>1</sup>

The World Society Foundation (WSF) was established in 1982 by the Swiss sociologist Peter Heintz with the aim to support and strengthen scientific research on global structures and transformations. The pandemic with its profound economic, political and social impacts all over the world has been one of the most important global events triggering new dynamics at all levels of world society. Insisting on promoting diverse voices, the WSF aims to gather researchers from different parts of the world and different cultural, historical, and academic contexts who represent different social science disciplines and use a variety of theoretical and methodological backgrounds. Importantly, the World Society Foundation seeks to bring these different perspectives and voices into dialogue, and this book and the 2023 Melbourne conferences have significantly contributed to this core mission.

The 2023 pre-conference brought together 36 researchers from 22 different countries, including Australia, Bangladesh, Belgium, Estonia, France, Germany, Hong Kong, Indonesia, Israel, Italy, Japan, Lebanon, Mexico, Mongolia, Nigeria,

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<sup>1</sup> The present volume is the second conference publication. A first volume with 12 contributions focusing on the impact of the pandemic on well-being (edited by C. Suter, J. Chesters, and S. Fachelli) has been published under the title *Well-being During the Pandemic: Comparative Perspectives from the Global North and South* by Springer in 2024 in the Social Indicators Research Series (<https://link.springer.com/book/10.1007/978-3-031-63440-6>).

Philippines, Poland, Switzerland, Timor Leste, the United Kingdom, and the United States. The presenters included highly regarded professors, scholars from outside the academy, postdoctoral researchers, and PhD students representing countries from both the Global North (58%) and the Global South (42%). With respect to academic rank 47% of participants were faculty members, i.e. assistant, associate or full professors, 31% were lecturers, research fellows or postdocs, 8% were doctoral students, 14% came from non-academic institutions. The gender distribution was quite balanced: 55% of participants were males and 45% were females.

The conference was officially opened by Prof. Jim Watterston, Dean of the Faculty of Education. The conference program proceeded with the keynote lecture on “Managing Crisis After Financialization: Reflecting on “novel” responses to COVID-19 and the 2008 Financial Crisis” presented by Ben Spies-Butcher from Macquarie University Sydney (included as chapter 3 in this volume) and eight sessions, each of which was dedicated to a particular theme: the pandemic, crisis management and policies, and their impact; the pandemic and its impact on subjective well-being and life satisfaction; the pandemic, mental health, and social cohesion; impact of the pandemic on children and youth; the impact of the pandemic on vulnerable and marginalized groups; the pandemic and social inequalities: class, race, ethnicity, and gender; and the pandemic, health, shift work, and addiction. Each of the researchers was selected to present at the conference after a rigorous selection process. The Organizing Committee, composed by the editors of this book, read more than 50 abstracts and invited the authors of 40 abstracts to submit their full paper, from which 25 were selected for presentation at the conference.

Many people have contributed to the realization of this volume and the 2023 Melbourne conference. First and foremost, the editors would like to thank the authors for their stimulating contributions and their patience during the reviewing and copyediting process. A large thank-you is due to Nadishka Weerasuriya, a PhD student in the Faculty of Education, for all of her work during the pre-conference, and to our colleagues from RC55 who contributed to the conference as session chairs and discussants. We would also like to thank the Faculty of Education and the University of Melbourne for their support of the conference and for providing the necessary infrastructure and conference facilities. Finally we are grateful to Louis Hua for the cover image and the conference poster, and to Diana Luna and Patrick Ziltener for editing, proofreading, and layout.

Melbourne, Neuchâtel and Zurich, and Seville, May 2025

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# Responses to the COVID-19 Pandemic: Global Perspectives and Experiences from the Global South

Jenny Chesters, Christian Suter, and Sandra Fachelli

When the World Health Organization (WHO) declared the COVID-19 pandemic on March 11, 2020, governments around the world took immediate action to curb the spread of the COVID-19 virus by closing their national borders, implementing restrictions on travel within their borders, shutting down all but essential services and requiring large sections of their populations to remain at home. Although there is general agreement that these restrictions saved millions of lives, they also impacted on other aspects of health and on the economic, social and political conditions experienced by people around the world. Restricting movement between, and within, countries, shutting down “non-essential” businesses and closing schools isolated people from their extended families, friends and peers. Although governments implemented policies to alleviate some of the economic impact of the pandemic-related restrictions, little attention was paid to the impact that isolation would have on social relationships and the mental health of their populations. This chapter reflects on how the pandemic played out globally and then provides a brief overview of the eight contributions to this volume.

## Responding to the Global COVID-19 Pandemic

On March 11, 2020, the World Health Organisation (WHO) declared a global pandemic due to the rapid spread of the COVID-19 virus. Governments across the world reacted by closing their national borders and implementing restrictions on movement within their countries by closing schools, workplaces and public transport, restricting public gatherings, and directing people to stay home as much as possible. Although these measures were effective in reducing the spread of the virus and pressures on healthcare systems, saving millions of lives, they impacted the livelihoods, mental health, and well-being of billions of people across the world (OECD,

2020c; UNSDG, 2020; World Bank, 2021a). Consequently, the COVID-19 pandemic affected the economic and social lives of everyone regardless of their contact with the virus. This chapter provides an introduction to the present volume; it reflects on how the pandemic played out globally and then provides a brief overview of the eight contributions to this volume.<sup>1</sup>

The WHO (2023) estimates that, based on excess mortality figures, 3.4 million of those who contracted the virus, died during 2020. Excess mortality is defined as the increase in mortality (due to any cause) over the expected mortality based on historical trends (WHO, 2023). Excess mortality is regarded as a more reliable estimate than national reports of deaths due to COVID-19. Not all countries were equipped to track deaths due to COVID-19 and there is also debate about deaths directly related to the virus and deaths from other causes among people who had contracted the virus. For example, if a person with COVID-19 had a heart attack and died, it may not be clear if COVID-19 directly contributed to the person's death. Therefore, using the excess mortality rate provides a clearer picture of the number of people who died during the pandemic. Across the OECD, a comparison of the 2015–2019 average death rate and the total number of deaths between March 11, 2020 and early May 2021 indicates that COVID-19 contributed to a 16 percent increase (OECD, 2021a).

Although the pandemic impacted on every country, in this volume we focus on how the COVID-19 pandemic was experienced in the Global South. The term Global South refers to a group of countries that, although geographically diverse, share common historical and socio-economic characteristics. It is a term used in global studies that groups together countries with an interconnected history of colonialism and neocolonialism. From a structuralist perspective, with its focus on global (capitalist) accumulation and global stratification (e.g. Chase-Dunn, 1989; Heintz, 1982; Heintz and Obrecht, 1977; Suter, 1992; Wallerstein, 1974) the Global South includes the peripheral and semi-peripheral countries of world society. These countries tend to have lower levels of wealth (per capita income, level of wages) and great inequalities in terms of income, access to resources and quality of life. Although many of them are located in the southern hemisphere, the term is not strictly geographical; for example, countries such as Turkey or India, which are in the northern hemisphere, are also considered part of the Global South. Countries across the Global South were already experiencing socio-economic challenges such

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1 The present volume is the second publication including contributions originally presented in 2023 at an international conference at the Faculty of Education of the University of Melbourne on the topic of the *Impact of the 2020–2022 Pandemic on World Society*. A first volume with 12 contributions focusing on the impact of the pandemic on well-being has been published in 2024 (see Suter et al., 2024). The conference and the two publications have been sponsored by the World Society Foundation (WSF), Zurich (Switzerland). More details on the 2023 conference and the publications are available on the WSF website at <https://www.worldsoicety.ch/>.

as high rates of unemployment, informal employment, poverty and hunger as well as a lack of clean water, housing and healthcare (Al-Ali, 2020). Living in overcrowded homes increased the chances of contracting the virus due to the difficulties associated with isolating infected family members from the remainder of the family. In OECD countries, almost 11 percent of families were living in overcrowded homes prior to the pandemic, thus, increasing their risk of infection (OECD, 2021a). Overcrowding was particularly dire in Mexico where 35 percent of households were regarded as being overcrowded prior to the onset of the pandemic (OECD, 2020d).

During the early stages of the pandemic, before vaccines became available, disparities in rates of infection according to location were evident with cities recording higher rates than regional areas. These regional disparities have been linked to the challenges of implementing containment and mitigation measures such as lockdowns in areas with large concentrations of poor households, typically in densely populated urban areas (OECD, 2020a). Due to overcrowding and the inability to effectively quarantine at home, COVID-19 quickly spread within and between families (OECD, 2020a). In a majority of countries, governments accepted that the consequences of their health directives were their responsibility, however, social policy responses varied according to existing national welfare programs with governments being reluctant to fundamentally change existing economic hierarchies (Dorlach, 2023).

## **Restrictions Implemented to Contain COVID-19**

In March 2020, governments across the world implemented travel bans effectively closing their borders and preventing their citizens from leaving the country or returning home, for an initial period of six weeks. In a majority of countries, governments also restricted travel within their borders. For example, in Nigeria, state governments banned interstate travel and imposed local lockdowns (Oladejo and Jack, 2022). Some countries also mandated the wearing of face masks, physical distancing and the tracking of movements outside of the family home. Governments also closed (non-essential) workplaces and schools. People were encouraged to stay home unless they were classified as being an essential worker. Essential workers are those employed in health and social care, food, essential goods, public services, transport, utilities, public safety and national security (OECD, 2021c) such as doctors, nurses, delivery drivers, garbage collectors, police officers and fire fighters (Martucelli, 2021).

Globally, 188 countries imposed countrywide school closures, affecting the education of 1.5 billion children and young people (UNSDG, 2020). The average duration of these closures during 2020 for OECD countries were 54 days for primary schools, 63 days for lower secondary schools and 67 days for upper-secondary schools (OECD, 2021d). However, in Mexico, 80 percent of educational institutions were closed from March 2020 to June 2021 (OECD, 2021a). During these closures,

teaching and learning were conducted online therefore, access to digital resources became integral to education. Consequently, students without access to computers and stable internet were severely disadvantaged (OECD, 2021d).

## **Economic Impact of the COVID-19 Restrictions**

Closing national borders restricted trade between countries, severely disrupting global supply chains (Callens and Verlet, 2024). Countries reliant on imports experienced shortages of essential goods such as pharmaceutical drugs and personal protective equipment. Countries that relied on exports experienced a dramatic halt to their income streams. The World Trade Organization (WTO) estimated that, in 2020, global trade fell by between 13 and 32 percent (ECLAC, 2020). The economic impact of the pandemic was particularly acute in low-income countries in the Global South that were heavily dependent on export income generated by labor intensive industries and remittances from workers based in other countries. In 2020, 70 percent of low-income and lower middle-income countries received fewer remittances, severely damaging national budgets and impoverishing larger sections of their populations (WTO, 2020).

According to the World Bank (2021), between 2019 and 2020, the global economy contracted by approximately 4.3 percent. This average masks differences between regions and countries within regions. For example, the GDP of low-income countries located in six of the regions in the Global South contracted: Sub-Saharan Africa (-3.7%); South Asia (-7.7%); Middle East and North Africa (-5%); Latin America and the Caribbean (-6.9%); and Europe and Central Asia (-2.9%); whereas GDP increased marginally by 0.9 percent in the East Asia and Pacific (including China) region. Almost all low-income countries (91%) were dependent on commodity exports making them particularly vulnerable to the global contraction in trade (World Bank, 2022). Declining GDP was due to the complex interplay between conditions before the onset of the pandemic, the restrictions imposed by governments to slow the spread of COVID-19, and the disruptions to global supply chains. For example, in Nigeria, growth in the agriculture sector slowed due to the challenges associated with transportation (World Bank, 2021a). The weakening of oil prices also contributed to the decline in Nigeria's GDP (World Bank, 2021a). Other low-income countries were also disadvantaged by contractions in the economies of their major trading partners. For example, Mexico was particularly disadvantaged by the contraction of the US economy, the fall in oil prices and the reduction of remittances from migrants working in countries such as the US (ECLAC, 2020). Around 80 to 90 percent of remittances to Mexican households cover basic living costs such as food, health and housing (ECLAC, 2020).

This severe global economic downturn resulted in significant job losses in every country (Callens and Verlet, 2024). Globally, the world economy shed 114 million jobs between 2019 and 2020 (OECD, 2021c). Across the OECD, 22 million jobs



were lost leading to a sharp increase in the unemployment rate from 5.3 percent to 8.4 percent between January and May 2020 (OECD, 2020c). Between 2019 and 2020, the labor market underutilization rate across the OECD increased by five percentage points (from 12.3% to 17%) due to increases in unemployed workers and employees working fewer hours (OECD, 2021a). The labor market underutilization rate includes people who are unemployed and people who are employed on a part-time basis and want to work additional hours. Between the second quarter in 2019 and the second quarter in 2020, total hours worked declined by 15 percentage points across the OECD and by 35 percentage points in Mexico (OECD, 2021c).

Across the OECD, the unemployment rate for 15–24-year-olds increased from 11.3 percent to 18.9 percent between February and May 2020 due to young people in employment losing their jobs and new entrants to the labor market being unable to find entry-level jobs (OECD, 2021b). Between the second quarter of 2019 and the second quarter of 2020, working hours for those aged 15–24 declined by 26.3 percent (OECD, 2021a). Opportunities to combine part-time work and study or engage in work-based learning also ceased to exist, severely disadvantaging young people seeking to enhance their human capital.

The economic impact of the restrictions implemented by governments depended on the social, cultural, political and economic context prior to the onset of the pandemic and the level of financial support provided by governments during the pandemic. In countries with well-established social welfare regimes, governments were able to introduce new welfare payments and to enhance existing programs dispensing cash transfers to the most vulnerable. Social protection measures such as cash transfers were implemented in over 200 countries between March 2020 and May 2021 (Gentilini et al., 2022; Leisering, 2021). During this period, spending on social protection measures equaled 2.9 trillion US dollars across 156 countries (Leisering, 2021). For example, in the Philippines, the government introduced a new program, the Emergency Subsidy Program, aiming to support 83 percent of the population (Ramos, 2021) and in Indonesia, the government provided food assistance, cash transfers, family support even though they had to borrow from the World Bank in order to do so (Sumato and Ferdiansyah, 2021)

Many governments introduced job retention schemes, subsidizing the wages of employees and saving the cash flow of businesses. Across the OECD, job retention schemes supported around 60 million jobs in 2020 (OECD, 2021c). These cash transfers and wage subsidies coupled with other forms of support for businesses (e.g. tax exemptions and deferred tax payments) led to increasing levels of national debt (OECD, 2021a). National debt increased by 14.4 percentage points, on average, between the fourth quarter of 2019 and the fourth quarter of 2020 (OECD, 2021a). The World Bank (2022) estimated that across low- and middle-income countries, the average total debt burden increased by around 9 percentage points of GDP between 2019 and 2020, significantly higher than average yearly increases of 1.9 percentage points. GDP contracted by 2.2 percent in Indonesia; 4.1 percent in Nigeria;



5.2 percent in Mongolia; 6.8 percent in Timor-Leste; 8.1 percent in the Philippines; and 9 percent in Mexico (World Bank, 2021).

In some countries, the deprivations associated with suddenly losing one's job were exacerbated by the reluctance of governments to provide financial support (Martínez Hernández and Martínez, 2021). Becoming unemployed during the pandemic was particularly devastating as businesses were either shut down or struggling to survive and therefore, formal job opportunities ceased to exist. In some countries, such as Mexico, governments were reluctant to take on extra debt by increasing spending on welfare programs simply maintaining the social policy programs that were already insufficient (Velazquez Leyer, 2021). Therefore, workers engaged in informal employment were unable to stay at home and comply with the restrictions implemented to contain the spread of the virus. The International Labor Organization estimates that around two billion workers were engaged in informal employment in 2020, typically working for extremely low wages, in low skilled jobs with no social protection (Jaga and Ollier-Malaterre, 2022).

## **Social Impact of the COVID-19 Restrictions**

Apart from the economic impact, the restrictions on movement implemented to contain the COVID-19 virus led to lower levels of civic participation and sociability by restricting opportunities for social interactions with friends, colleagues, peers, and members of extended families and by restricting access to public spaces. The daily lives of young people were severely disrupted by the closure of schools, in some cases for up to two years (Saravi, 2024). Furthermore, the suspension of recreational activities in public and private spaces had severe implications for young people's well-being and their ability to gain their independence from adults (Saravi, 2024). The ability of young people to leave school and become independent was also stymied by the severe contraction in employment opportunities (see previous section).

As governments focused on controlling the spread of the virus, cleavages within countries related to social class, ethnicity, location, gender and age deepened (Lustig et al., 2020; OECD, 2021c; Oxfam, 2021). Vulnerable groups such as women, young people, migrants and low-skilled workers were severely impacted by the crisis (OECD, 2020c) as employment opportunities in tourism, food services and sales shut down immediately (OECD, 2021c). Furthermore, these sectors took longer to recover once the crisis passed. Apart from being more vulnerable to job loss and reduced incomes, frontline workers in low-wage occupations were also more likely to contract the virus (OECD, 2021c). During the first months of the pandemic, 42 percent of women and 31 percent of men stopped working (World Bank, 2022). This gender disparity is largely due to women being more likely to be employees or owners of businesses in the services, hospitality, or retail sectors, that is, the sectors severely affected by lockdown and social distancing measures (World Bank, 2022).

Although the COVID-19 pandemic negatively impacted on the health, social and material well-being of all children, those living in the poorest households were particularly hard hit. School closures and being confined to home increased the risk of poor nutrition and reduced access to care services. Being denied access to schools meant that poor children were denied the midday meals provided by national programs (Jaga and Ollier-Malaterre, 2022). Children living in the poorest households were also the least likely to have access to good home-learning environments with computers and stable internet connections, thus further disrupting their education when schools closed (Jaga and Ollier-Malaterre, 2022; OECD, 2020a). For example, education in Mexico was severely disrupted with 80 percent of educational institutions closed between March 2020 and June 2021 (OECD, 2021a). One-third of young people in Mexico did not have place to engage in home learning and in many homes, parents and children were sharing devices (OECD, 2020a). Prior to the pandemic, only 60 percent of households in Mexico had access to broadband internet services (OECD, 2020b), an essential element of home schooling. Furthermore, as Wang et al. (2021) note, the social development of young people was severely negatively impacted due to being isolated from friends and missing out on school-based opportunities to develop social skills.

## **Impact of the COVID-19 Restrictions on Mental Health**

The COVID-19 pandemic and the measures implemented to constrain its spread had major impacts on the mental health and wellbeing of populations of many countries. According to the World Health Organization (WHO, 2022), the COVID-19 pandemic led to a 27.6 percent increase in cases of major depressive disorder and a 25.6 percent increase in cases of anxiety disorders worldwide. The WHO report (2022) listed several reasons for this sudden surge in depressive illnesses including social isolation, financial hardship, fear of contracting COVID-19, grieving for friends and family members who passed away, exhaustion, and loneliness. Young people were particularly vulnerable to experiencing poor mental health due to disruptions in the rhythm of their lives as their daily activities lost temporal order and spatial differentiation (Panarese and Azzarita, 2021; Saravi, 2024). In other words, young people lost the ability to differentiate between days, weeks and months due to being confined to their homes, having no physical contact with their friends and having no social activities scheduled. Larrea-Schiavon et al. (2021) report that in Mexico, 40 percent of young people aged 15–19 years experienced moderate to severe symptoms of depression and 31 percent experienced moderate to severe symptoms of anxiety during the lockdowns.

The closures of educational institutions weakened protective factors, such as daily routines, social and emotional support, social interactions and a sense of belonging to a community that may have mitigated the impact of the COVID-19 measures and helped to maintain good mental health. Furthermore, these closures

severely disrupted mental health support for young people, particularly those from disadvantaged backgrounds who were unable to access private mental health services (OECD, 2020a; OECD, 2021b).

## COVID-19 in the Global South

This volume includes case studies of six countries (Indonesia, Mexico, Mongolia, Nigeria, Philippines, and Timor-Leste), all located in the Global South. The case studies focus on various aspects of the COVID-19 pandemic in economic, social and cultural contexts. As Fachelli et al. (chapter 2) note, some of the less developed countries (such as those in Africa) experienced the lowest rates of infections per capita whereas some of the most developed countries (such as the United States) experienced the highest rates of infections per capita. The GDP per capita and COVID-19 cases per million people for selected countries located in the Global South are listed in Table 1.

**Table 1: GDP per capita, COVID-19 cases, and Gini coefficient of selected Global South countries**

Country	GDP per capita (2020 international dollars)	COVID-19 cases (cases per million, 2021)	Gini coefficient (2020)
Mexico	18,640	17,500	0.75
Indonesia	11,516	5,300	0.53
Mongolia	11,667	1,500	0.56
Philippines	7,773	6,000	0.60
Nigeria	4,865	700	0.55
Timor-Leste	4,862	250	0.59

Source: *Our World in Data* (2025).

As shown in Table 1, in 2020, Mexico recorded the highest GDP per capita of the six selected countries and also recorded the highest number of deaths per million during the first year of the pandemic. In 2020, Mexico also recorded the highest level of inequality with a Gini coefficient of 0.75. High rates of infection were also recorded in other Latin American countries: Peru (46,000/million), Brazil (56,500/million) and Ecuador (17,441/million). These high rates can be partially explained by the high proportions of informal workers in these countries. As Batthyány (2021) notes, 130 million workers in Latin America are informal workers with no mandated conditions or wages. They live day-to-day, thus, for these workers and their counterparts across the Global South, not going to work means not eating therefore, quarantine was not an option; they had to continue working regardless of the risk of contracting COVID-19.

Although initially the pandemic overwhelmed healthcare systems globally, providing adequate healthcare in low-income countries was particularly challenging due to problems associated with accessing clean water and sanitation (Osama et al., 2021). Prior to the pandemic, the WHO (2019) estimated that low-income countries spent, on average, just \$41 per person on healthcare whereas high-income countries spent, on average, \$2,397 per person.

## Overview of Chapters

This edited collection includes eight chapters examining the impact of the COVID-19 pandemic. Although the COVID-19 virus continues to mutate, its effects are now less severe due to the development and distribution of vaccines. Countries continue to experience waves of infection but are now more focused on the economic and social consequences of the measures implemented during the pandemic. The next two chapters of this volume focus on the pandemic from a global perspective, the fourth chapter develops a theoretical perspective to understand how the pandemic influenced governance and the following five chapters present case studies of selected countries located in the Global South.

In Chapter 2, *Fachelli, Chesters, and Suter* develop a typology to categorize 218 countries across the world according to the impact of the COVID-19 pandemic. Their analysis of eight indicator variables suggests that although countries can be classified into five distinct groups, the impact of the pandemic did not appear to align with expectations. Countries with relatively lower GDP (Gross Domestic Product), reported lower levels of impact than countries with relatively higher GDP. Nevertheless, the development of this typology provides a useful tool for measuring impact according to GDP, under 5 years mortality rates; percentage of the population over 65 years; health expenditure as a percentage of GDP; the stringency index (a measure of the level of controls implemented to curb the spread of COVID-19). Therefore, policy makers may find this typology a useful tool when considering the development of new policies during times of crisis.

Chapter 3, authored by *Ben Spies-Butcher*, reflects on policy responses to the COVID-19 pandemic with a particular focus on the economic impact of these policies. This chapter reflects on the long-term implications of the policies enacted during the Global Financial Crisis to demonstrate how the management of the health crisis generated by COVID-19 may influence economic policies and outcomes over time. By drawing on the lessons from previous financial crises, Spies-Butcher examines how rapid financialization combined with the added complication of the health crisis impacted on the plausibility of traditional measures to soften a recession generated by the deliberate shutdown of large sections of economic activity. The chapter concludes by reflecting on how government interventions in the form of cash payments impact on the depth of recessions and the ensuing inflationary pressures that need to be managed.

The chapter authored by *Ilán Bizberg*, Chapter 4, develops a theoretical argument based on observations of the exercise of political control during the COVID-19 pandemic. Bizberg argues that COVID-19 strengthened the individualization of control due to the fear. Individuals adopted defensive attitudes due to fear of the other as a source of infection and possible death. Bizberg examines how some governments strengthened control whereas other governments maintained democracy despite declaring a state of emergency. Bizberg identifies four political forms: (1) dictatorial/totalitarian systems that implemented extreme measures to restrict the movements of the population in an effort to control the spread of the virus; (2) democratic systems that imposed highly restrictive measures on individual liberties during the pandemic; (3) democratic governments that did not impose drastic control measures based on the population's trust in government and its authority; and (4) populist governments that did not take the health emergency seriously and had little faith in the institutions that service their populations.

The following five chapters focus on experiences of the pandemic in six countries located in the Global South: Mexico, Indonesia, Philippines, Nigeria, Mongolia and Timor-Leste. Chapter 5, authored by *María Cristina Bayón* examines how the measures implemented to slow the spread of the COVID-19 virus impacted on the daily lives of young people in Mexico City. Bayón questions the suitability of the harsh lockdown measures that were universally applied with little thought given to their impact on socio-emotional well-being of particular groups of vulnerable people. She argues that the measures were applied to everyone, everywhere regardless of the differences in living, studying and working conditions between the wealthy and the less fortunate. The chapter explores how sociability and urban co-existence within urban spaces were impacted by the pandemic through empirical research based on the experiences of adolescents living in Mexico City.

In Chapter 6, *Maria Angelika Tolentino Balungay and Melissa Lopez Reyes* examine the impact of the pandemic on the mental health of survivors of the earthquakes in Cotabato, Philippines which occurred in October 2019. The survivors had been relocated to evacuation camps therefore, when the pandemic hit, they were already exceptionally vulnerable. The chapter reports the results of a survey completed by 121 residents of the evacuation camps. The analysis focused on both the negative and positive effects of the twin traumatic events: the earthquakes and the pandemic. Balungay and Reyes show that providing a supportive environment alleviates post-traumatic stress and promotes post-traumatic growth.

Chapter 7, authored by *Dabesaki Mac-Ikemenjima*, examines the effects of the pandemic on subjective well-being of young people in Nigeria. Although a national lockdown was not implemented, several states implemented lockdowns. Prior to the onset of the pandemic, Nigeria was already experiencing escalating economic, social, and political challenges with an impending recession, heightened insecurity, and high unemployment rates. In this chapter, Mac-Ikemenjima focuses on how the lockdowns affected levels of subjective well-being. Drawing on data generated by an

online survey conducted during the later stages of the pandemic, Mac-Ikemenjima reports that positive affect levels increased slightly after the lockdown and that negative affect levels declined slightly after the lockdown. In other words, using affective assessments, levels of subjective well-being were relatively stable despite the pandemic.

Chapter 8, authored by *Titik Harsanti*, explores the impact of the COVID-19 pandemic on levels of stress experienced by students engaged in online learning in Indonesia. Across Indonesia, government strategies implemented to lower transmission rates impacted severely on students. Being confined to home and unable to travel to educational institutions increased the importance of the home environment on the ability of students to complete their studies. Without access to stable internet or quiet spaces at home to study, some students were severely disadvantaged. Harsanti's analysis of data generated by a survey of almost 1,700 students studying with the STIS Statistics Polytechnic, found that having a home environment that was not supportive was the biggest stressor. Other stressors included environmental situations, friendships, and decreased parental income.

In Chapter 9, *Manlaibaatar Zagdbazar and Dolgion Aldar*, compare policy measures in two small emerging economies: Mongolia and Timor-Leste. Zagdbazar and Aldar focus on the response and recovery measures implemented by the governments of these two countries to support micro, small and medium sized businesses. Both Mongolia and Timor-Leste are young democracies with similar vulnerabilities due to their dependence on mineral resources, susceptibility to external shocks, and limited economic diversification. Both countries implemented comprehensive economic stimulus packages with tax reductions, cash transfers, and loan programs to lessen the impact of the pandemic on the private sector. Zagdbazar and Aldar compare the different approaches taken by the governments of Mongolia and Timor-Leste to examine the effectiveness of different government support measures. Their analysis indicates that the financial policies aimed to alleviate the economic burden associated with the pandemic were ultimately ineffective due to improper targeting and a lack of transparency in implementation.

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# Comparative Perspectives on the Impact of the COVID-19 Pandemic

Sandra Fachelli, Jenny Chesters, and Christian Suter

This chapter examines the global impact of the COVID-19 pandemic, focusing on its differentiated effects across countries. Using data from 218 nations collected by *Our World in Data*, we develop a typology based on eight key indicators: GDP per capita, health expenditure as a percentage of GDP, percentage of population aged 65+ years, under-5 mortality rate, internet use, cases per million, deaths per million, and stringency index. Our analysis reveals five distinct groups of countries: severely affected countries, moderately affected countries, and three subgroups of less affected countries, which comprise 67 percent of the sample. Initially hypothesizing that poorer countries might experience a greater impact compared to wealthier nations, our research question explores whether COVID-19 had a differentiated effect by country. Contrary to expectations, our findings indicate the presence of uncorrelated axes, necessitating independent consideration of country wealth-poverty aspects and the pandemic's impact. This lack of empirical support for a direct relationship between a country's wealth/poverty and the pandemic's impact challenges our initial hypothesis.

## Introduction

When COVID-19 became a global pandemic in 2020, it affected the health and well-being of people in every country in the world. Aptly named a novel coronavirus, COVID-19 was the first of a new generation of viruses. Although it was in some respects similar to SARS, its novelty and virulence created panic among governments and people across the world. Researchers collaborated to identify the genetic makeup of the virus and to develop vaccines to protect against the virus and drugs that could alleviate the symptoms of those infected.

Although the COVID-19 generated a global pandemic, not all countries were impacted in the same way. Some countries were severely impacted in terms of the number of cases and deaths attributed to the virus during the first wave in 2020 whereas other countries were less affected. We take a global approach by conduct-

ing analysis of data collected by *Our World in Data*<sup>1</sup> from 218 countries to develop a typology that may be used when examining the lasting impacts of the COVID-19 pandemic. To develop our typology, we focus on eight indicators: GDP per capita; health expenditure as a percentage of GDP; percentage of population aged 65+ years; under 5 mortality rate; internet use; COVID-19 cases per million; COVID-19 deaths per million; stringency index. Using these eight indicators, we constructed a typology with five groups: Severely affected countries, moderately affected countries, and the less affected countries, that we divide into three groups in order to differentiate within less affected countries, since 67 percent of countries have been classified as being less affected.

The remainder of this chapter is structured as follows: After providing an overview of the context and the extant literature, we introduce the data and analytical strategy before presenting the results of our analysis. The discussion and conclusion provide an insight into the implications of our findings.

## Context

The World Health Organisation (WHO) declared the COVID-19 pandemic on March 11, 2020. The first cases of COVID-19 were detected in Wuhan in China in December 2019 and within just a few months, the virus had spread across the globe. Apart from being a new type of virus that was unlike any other virus that infects humans, COVID-19 is also highly infectious. Fear and panic characterised the reactions of governments and populations to the declaration by WHO. To control the spread of the virus, many countries closed their borders and restricted entry to citizens and enforced periods of quarantine for those returning home. Furthermore, governments implemented various restrictions on the movements of people within countries including closing schools, workplaces and public transport; restricting public gatherings; and requiring people to stay home as much as possible. These restrictions resulted in significant job losses in every country impacting on the global economy (Callens and Verlet, 2024). Economic activity contracted in 2020 in about 90 percent of countries, exceeding the number of countries seeing such declines during the two world wars, the Great Depression of the 1930s, the debt crises of Global South countries during the 1980s, and the 2007–09 global financial crisis. In 2020, the first year of the COVID-19 pandemic, the global economy shrank by approximately 3 percent, and global poverty increased for the first time in a generation (World Bank, 2022).

Closing the borders resulted in not only the cessation of population movements, it also restricted trade between countries and severely disrupted global supply

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1 *Our World in Data* is a project of the Global Change Data Lab, a registered charity (1186433) in England and Wales produced by Oxford University: <https://ourworldindata.org/>.

chains (Callens and Verlet, 2024). Countries reliant on imports experienced shortages of essential goods such as pharmaceutical drugs and personal protective equipment. Countries that relied on exports experienced a dramatic halt to their income streams. In some countries, the decline in export income was exacerbated by their expat populations having to return home when their jobs unexpectedly ceased to exist. For example, in Bangladesh, the closure of the garment factories and mills and the cessation of remittances from workers based overseas severely impacted on the economy spurring a return to business as usual after a short period of lockdowns (Goswami et al., 2024).

School closures added to the burden of parents working from home as they were expected to supervise their children's learning at the same time as completing their work tasks (Chan et al., 2024). For example, in the United States, the closures of schools and daycare centres resulted in mothers leaving the workforce to care for their children, forgoing their incomes (Berheide et al., 2024). This increased financial stress on families and, combined with other factors unique to the pandemic, resulted in extra pressure and lower levels of satisfaction with work-life balance during the lockdowns (Berheide et al., 2024). A similar result was documented for Switzerland where Heers and Lipps (2022) found that parents with young children were especially overwhelmed by their increased responsibilities during the pandemic.

In some countries, schools were closed for more than a year. For example, in Mexico, schools were closed from March 2020 until September/October 2021 when they reopened for some grade levels for a few days a week (Saravi, 2024). In Australia, schools in all states and territories were closed during the initial 6-week lockdown, however, due to outbreaks of COVID-19 in Victoria, schools and child-care centres in that state were closed for months, prolonging the pressure on parents (Chesters, 2024). As Saravi (2024) notes, the restrictions implemented to control the virus were difficult for people in the most precarious sectors of the population. Confinement to their homes impacted on the ability of the precariously employed in non-formal sectors of labour markets to generate an income.

The success of the lockdowns in curtailing the spread of the virus in some countries undoubtedly saved many lives. For example, the harsh lockdowns in Australia resulted in the number of COVID-19 related deaths being constrained to just 910 during the first 12 months of the pandemic (Department of Health, 2021). There is, however, evidence that mortality rates were associated with socio-economic status and ethnic background. For example, in the UK, research conducted by Platt and Warwick (2020) found that, after controlling for age, members of the white British majority were less likely to die from COVID-19 than members of ethnic minority groups. This may be partly related to the types of jobs that workers from ethnic minorities are concentrated in such as essential services that continued to operate during the pandemic. Workers employed as cleaners and security guards and those

employed by supermarkets and public transport were exposed to COVID-19 on a daily basis increasing their risk of contracting the virus.

Another health implication related to the pandemic was its effect on mental well-being. According to the World Health Organization (WHO), the incidence of major depressive disorders and anxiety disorders increased sharply during the COVID-19 pandemic (WHO, 2022). Furthermore, the Organization for Economic Cooperation and Development (OECD, 2021a; OECD, 2021b) reports that the percentage of young people in Belgium, France and the United States experiencing anxiety and depression more than doubled during the pandemic. The WHO report (WHO, 2022) listed several reasons for this sudden surge in depressive illnesses including social isolation, financial hardship, fear of contracting COVID-19, grieving for friends and family members who passed away, exhaustion, and loneliness. Research conducted by Chan et al. (2024) found that, in the United Kingdom, levels of mental well-being declined during lockdowns and improved during the periods in between the lockdowns. Therefore, although the lockdowns suppressed the transmission of the virus, their adverse impact on the mental well-being on the population cannot be underestimated. Research conducted by Cheng et al. (2022) found that apart from the negative impact on mental well-being, the lockdowns severely impacted on the physical well-being of people who did not contract the virus. Restrictions to mobility resulted in less physical activity, increased sitting time and increased consumption of unhealthy foods.

## Method

Our aim is to develop a typology of countries that may be used to assess the implications of the COVID-19 pandemic. To that end, we conduct analysis of data from 218 countries included in Our World in Data.<sup>2</sup> This dataset includes various indicators that are useful for the development of an appropriate typology. Typologies can be applied to different social phenomena and allow a large amount of information to be obtained in a synthetic way: the categories obtained locate sets characterised by the similarity of their conditions within a multidimensional space that has a very high predictive capacity in exchange for a relatively low cognitive effort (i.e. relatively little information is needed to determine the position of each country in that space).

Typologies came from the theoretical perspective of “Bourdieuian social space” (Bourdieu, 1987; Bourdieu, 1988; Bourdieu, 1989). Bourdieu (1987, 6) uses this perspective to carry out a seminal analysis of social classes which can be characterised in a certain way as sets of agents who, by virtue of occupying similar positions in social space (i.e. in the distribution of powers), are subject to similar conditions of existence and conditioning factors and, consequently, are endowed with similar dis-

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2 See note 1.

positions which impel them to develop similar practices. In that sense, a typology identifies a recurrent form of social science thinking and methodology where various classificatory principles delimiting a space of attributes are combined and reduced to generate, intensively or extensively, a set of categories or types with which to conceptualise, typify and measure social phenomena (López-Roldán, 1996; Lozares, 1990; Marradi, 1990).

In operational terms, it is a matter of constructing a multidimensional measure as a composite indicator that gives rise to a variable measured on a synthetic categorical or qualitative scale. For this work we methodologically adopt the conceptualisation of structural and articulated typology (López-Roldán, 1996, 15).

### **Analytical strategy**

The analysis design we follow combines two multivariate analytical techniques: Factor analysis and classification analysis. With the first, through a principal component analysis with quantitative variables, we seek to reduce the information by combining the original variables into a reduced number of new variables that are the main differentiating factors of the countries. In the process, we lose some information but we gain in significance by generating factor variables that are characterised by being quantitative, standardised and linearly independent (uncorrelated). These are ideal conditions recommended for the subsequent performance of a classification analysis. This second technique effectively generates the typology by clustering into groups those countries that are simultaneously the most similar to each other and dissimilar to the other groups in the typology. Among the diversity of algorithms that act as classificatory methods, we chose Ward, a hierarchical method applied in a bottom-up manner and based on the principle of minimum (intra-group) inertia loss in the clustering process. For this, we use the Euclidean distance dissimilarity measure and construct the distance matrix on which the method operates.

The analytical process is accompanied and completed by the necessary validation of the results, both theoretically and technically through various indicators that help establish the best solutions for the results obtained. The result is a categorical variable that typifies the different countries according to the incidence of COVID-19, differentiating the most significant groups or types of the socioeconomic and health space and thus managing to organize said reality, a task that makes it easier for us to structure the phenomenon studied. In this sense, we speak of an objective that, from a methodological point of view, is located between descriptive and explanatory analysis, and that we identify as a structural explanation (López-Roldán and Fachelli, 2016).

Although the COVID-19 pandemic was intrinsically a phenomenon associated with health, as sociologists we examine the relationship between socioeconomic level and the effect of the pandemic on health at the macro-social level. An initial hypothesis with which we conducted this exploratory analysis is that poorer countries



may have experienced a greater impact compared to wealthier countries. Therefore, the research question guiding our analyses is: Did COVID-19 have a differentiated effect by country? Our aim is to develop a typology of countries according to the level of impact of the pandemic ranging from hardly affected to very affected.

## Variables

From a broader set of variables, collected and homogenized by *Our World In Data*, we select eight variables to measure at two different times (before and during COVID-19). The variables of interest are:

1. Total deaths per million: The number of confirmed total COVID-19 deaths per million population as of December 31, 2020 (WHO, 2020);
2. Stringency index: A composite measure of nine of the response metrics. The nine metrics used to calculate the stringency index are: school closures; work-place closures; cancellation of public events; restrictions on public gatherings; public transport closures; stay-at-home obligations; public information campaigns; restrictions on domestic travel; and international travel controls (Hale et al., 2021);
3. New cases per million: The number of new COVID-19 cases per million population as of December 31, 2020 (WHO, 2020);
4. GDP per capita in PPP: The gross domestic product per capita, expressed in constant 2017 international dollars at purchasing power parity (World Bank, 2020);
5. Health expenditure per capita in PPP: The domestic general government health expenditure per capita expressed in current international dollars (of 2019) at purchasing power parity (World Bank, 2019);
6. Individuals using internet (% of population in 2019): The percentage of population using internet in 2019 (World Bank, 2019);
7. Population by broad age group: 65+: The percentage of population aged 65+ in the year 2021 (United Nations, 2022);
8. Mortality rate, under 5 years (per 1,000) 2019 minus 2021: This indicator measures the probability per 1,000 that a newborn will die before the age of five, taking into account age-specific mortality rates for 2019 and 2021 (UN IGME, 2024; Estimates developed by the United Nations Inter-agency Group for Child Mortality Estimation, based on figures published by UNICEF, WHO, World Bank, UN DESA Population Division in 2019 and in 2021).

## Results

The application of the aforementioned analytical techniques to the selected indicators allows us to initially present the configuration of the inequality space, from which the latent variables that demonstrate the impact of the Coronavirus can be extracted. Subsequently, countries are grouped according to the axes formed by the Principal Component Analysis, through the implementation of Cluster Analysis.

## Configuring the inequality space impact of COVID-19

We conducted a Principal Component Analysis of the eight variables selected for analysis to produce a significant model composed of two factors that accumulate an explained variance of 67 percent (see Table 1). The Kaiser-Meyer-Olkin Measure for this model is 0.84.

Table 1: Eigenvalues and variance explained by each factor

Com- ponent	Eigenvalues		Sums of loads squared by extraction		Sums of loads squared by rotation	
	Total Value	Variance %	Total Value	Variance %	Total Value	Variance %
1	4.342	54.271	4.342	54.271	3.237	40.467
2	1.011	12.635	1.011	12.635	2.115	26.438
3	0.760	9.505				
4	0.629	7.869				
5	0.474	5.927				
6	0.395	4.932				
7	0.228	2.854				
8	0.161	2.008				

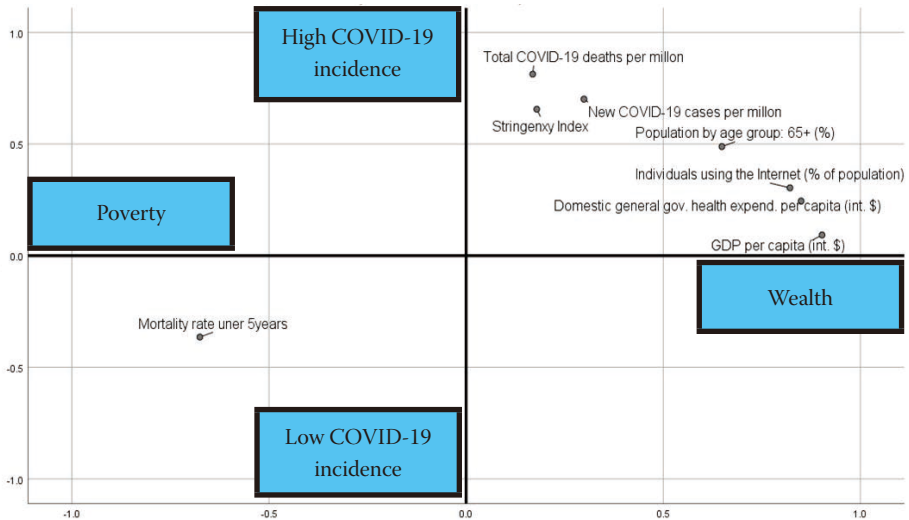
*Notes:* Principal Component Analysis.  
*Source:* Results from the authors' analysis of *Our World in Data* (2022).

Analysis of the socio-economic and health domains indicates the presence of two independent factors. The first (horizontal) factor reflects the wealth-poverty continuum that extends from greater wealth on the right-hand side to greater poverty on the left-hand side (see Figure 1). This factor explains 40.4 percent of the variance. The importance of each indicator in factor space is variable, exerting a greater or lesser influence on the determination of the first axis. In this section, we will focus on five key indicators that play a significant role in shaping the first factor.

The first factor is significantly influenced by GDP per capita, which correlates at 0.9 (see Table 2). This indicator gauges the average wealth of each country and is pivotal for the configuration of the social space under construction. It is crucial to consider GDP when assessing a country's capacity to effectively manage the pandemic. It is assumed that factors such as the efficiency of control measures, vaccination logistics and public health policies will play a crucial role in the management of the health crisis. Therefore, it is necessary to take this issue into account.

**Table 2: Contributions to components of the 8 variables**

Variables (rotated component matrix)	Contributions to components	
	1	2
GDP per capita (int. \$)	0.903	0.093
Domestic general government health expenditure per capita (int. \$)	0.850	0.245
Individuals using the internet (% of population)	0.821	0.304
Mortality rate under 5 years	-0.675	-0.365
Population by age group: 65+ (%)	0.649	0.489
Total COVID-19 deaths per million	0.169	0.813
New COVID-19 cases per million	0.299	0.701
Stringency index	0.179	0.656
<p><i>Notes:</i> Extraction method: Principal Component Analysis. Rotation method: Varimax with Kaiser normalisation (rotation has converged in 3 iterations). See methods section for details on variables and variable constructions.</p> <p><i>Source:</i> Results from the authors' analysis of <i>Our World in Data</i> (2022).</p>		

**Figure 1: Distribution of the variables in the socio-economic and health space**

Source: Results from the authors' analysis of *Our World in Data* (2022).

The second most influential indicator, with a correlation of 0.85 in the first factor, is the health expenditure indicator. This indicator, expressed in terms of purchasing power parity (PPP), suggests that it plays a pivotal role in a country's capacity to cope with the impact of the COVID-19. Higher levels of health spending are typically associated with enhanced health infrastructure, an expanded workforce of health professionals, and greater resources being allocated to research and development, all of which collectively contribute to a more effective response to health emergencies. Evidently, countries with higher levels of health spending are better positioned to implement more effective containment measures, maintain essential services, and facilitate faster access to vaccines and treatments.

Thirdly, the first factor is also configured by the percentage of people using the internet, with a correlation of 0.82, as an indicator of digital penetration in a population. This proved to have a significant relationship with adaptive capacity and resilience in the face of the COVID-19 pandemic. It seems reasonable to posit that countries with greater internet access are better placed to implement telework, distance learning and telemedicine measures, thereby mitigating the economic and social impact of confinement and facilitating the dissemination of crucial information and the maintenance of social connections during isolation.

The fourth indicator "Population by broad age group: 65+," which represents the percentage of the population aged 65 and over in 2021, has a correlation of 0.64

with the aforementioned axis. It is significant to note that countries with a higher proportion of older populations generally experienced higher mortality rates during the pandemic. This is due to the fact that this age group was at a higher risk of severe complications and death from the disease.

Ultimately, the space of factor 1 is delineated by a fifth indicator, “Mortality rate under 5 (per 1,000),” which exhibits an inverse correlation with the level of GDP per capita in the countries under consideration. O’Hare et al. (2013) conducted an analysis of estimates pertaining to the relationship between GDP and a measure of child mortality in 24 eligible studies, and their findings revealed a negative relationship between these two indicators (see Figure 1).

The second factor (vertical axis) accounts for 26.4 percent of the variance and indicates a high incidence of COVID-19 infection in the northern section of the graph. Conversely, the southern section demonstrates a low incidence of infection. The northern region of the graph demonstrates a heightened impact of the COVID-19 disease, as evidenced by the correlation coefficient of 0.81 in factor 2 and the elevated number of deaths per million individuals on the final day of 2020. Conversely, the region with the lowest mortality rates is situated to the south. It is to be expected that this area will also be accompanied by higher rates of occurrence of new COVID-19 cases per million people (to the north) in contrast to the lower rates to the south. This indicator correlates with 0.7 on axis 2.

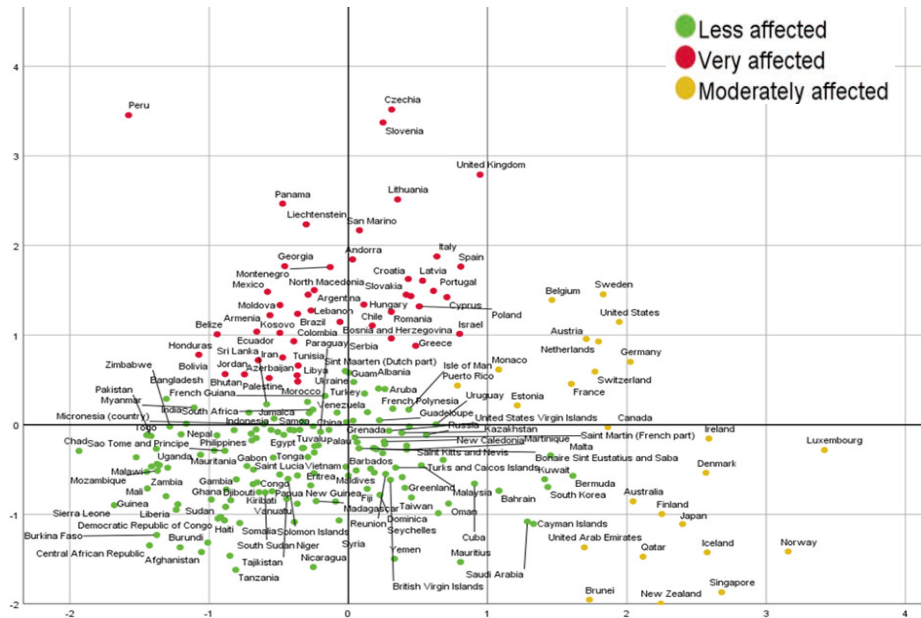
Thirdly, we would also like to highlight the space denoting a higher stringency index (north) with a correlation of 0.65. The stringency index is a composite measure that synthesizes various situations experienced in each country such as: school closures; workplace closures; cancellation of public events; restrictions on public gatherings; public transport closures; stay-at-home obligations; public information campaigns; restrictions on domestic travel; and international travel controls. The application of these factors enables the countries to be projected in order to facilitate the observation of a typology that allows the most affected countries to be identified and differentiated from those that experienced a lower level of impact.

### **Grouping countries according to COVID-19 impact**

In order to group the countries according to the aforementioned independent factors, a cluster analysis was employed. The results of this analysis, shown in Figure 2, identified three groups of countries, which are characterised as follows:

The first group comprises 146 countries, representing 67 percent of the total, and is located in the lower centre-left quadrant (countries in green). These countries are associated with a relatively lower impact on health outcomes, as evidenced by a lower mortality and incidence rate of novel coronavirus infections, as well as a lower GDP per capita.

Figure 2: Cluster analysis of 218 countries in 3 groups



Source: Results from the authors' analysis of *Our World in Data* (2022).

Table 3: Variable means by group of countries

Variables	Less affected			Moderately affected	Very affected	Total
	Less	Less+	Less++			
Total Covid-19 deaths per million	25.5	130.6	242.4	427.1	826.7	321.6
Stringency index	42.5	51.0	63.4	60.2	72.3	56.9
New Covid-19 cases per million	10.4	43.2	85.5	273.7	423.3	151.4
GDP per capita (int. \$)	3984.8	27702.3	10981.1	58345.2	21026.6	19794.7
Health expenditure p.c. (int. \$)	78.3	1108.3	405.9	3847.6	1311.0	1055.0
Individuals using the internet (%)	28.4	81.6	58.7	92.0	73.3	60.6
Population by age group: 65+ (%)	3.4	11.0	8.3	17.9	13.9	9.8
Mortality rate under 5 years	3.7	0.3	1.1	0.2	0.6	1.5

Notes: See methods section for details on variables and variable constructions.

Source: Results from the authors' analysis of *Our World in Data* (2022).

The second group comprises 25 countries, representing 11.5 percent of the total, and is situated on the right (countries in yellow). These are the countries with the highest levels of economic prosperity, coupled with the highest expenditure on healthcare and the most extensive coverage of the internet.

The third group comprises 47 countries, representing 21.6 percent of the total, and is situated in the northern quadrant of the graph (red countries). These countries exhibit the greatest health impact (in terms of deaths and new cases of COVID-19). It is important to note that, as illustrated in the graph, these countries exhibit a considerable range in terms of wealth, with those on the right side of the vertical line being relatively wealthy and those on the left side being relatively poorer.

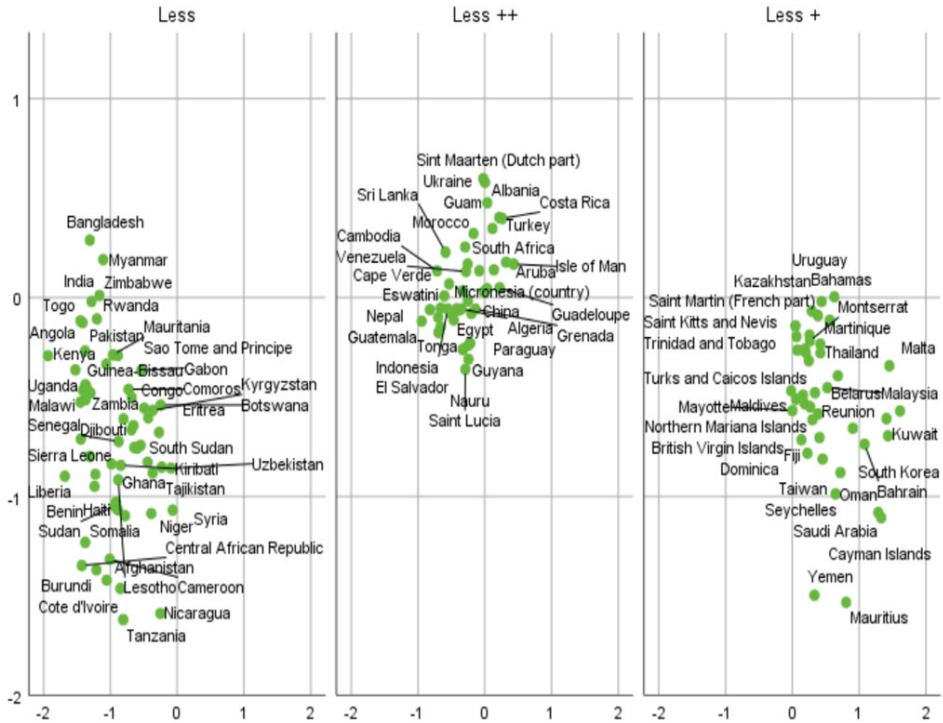
The group designated as “less affected” comprises two-thirds of the countries in question. In light of the aforementioned considerations, this group is divided into three internal aggregates: least affected (Less), somewhat affected (Less +); and slightly more affected (Less ++). The least affected group comprises 60 countries, the somewhat affected group 43, and the slightly more affected group 43. Figure 3 illustrates this classification from left to right.

The analysis of the means of the variables enables the description of the characteristics of each group. The less affected have a rate of deaths from COVID-19 that is half that of the moderately affected (427.1 per million) and the highly affected (867.7 per million; see Table 3).

In economic terms, countries that have been less severely affected have a lower Gross Domestic Product (GDP) and lower health expenditure than those that have been more severely affected (countries with intermediate development) and those that have been moderately affected (which are the richest countries). The under-five mortality rate correlates with these indicators, with higher mortality rates in the poorest countries and lower mortality rates in the moderately and very affected countries.

Figure 4 includes all five groups of the typology. The countries coloured red had the highest incidence of COVID-19 infection, while those coloured yellow had a moderate incidence and those coloured green were less affected. This group is divided into three as previously explained. The detailed country-by-group analysis is shown in Table 4. Therefore, based on the pattern shown by our analysis, our hypothesis that poorer countries may have experienced a greater impact compared to wealthier countries is refuted. We will discuss this result in the conclusion.

Figure 3: Division of less affected countries in 3 subgroups



Source: Results from the authors' analysis of *Our World in Data* (2022).

## Discussion and Conclusion

The global economic and health impact of the Coronavirus Disease 2019 (COVID-19) pandemic has been unparalleled, resulting in the most significant economic downturn since the Second World War. This study has revealed a complex interaction of factors that extend beyond the straightforward relationship between national wealth and the severity of the crisis. This emphasizes the necessity of considering a range of variables when evaluating the resilience of countries in the context of global health crises.

The factor analysis yielded two principal axes. The initial factor establishes a correlation between wealth and poverty, with GDP per capita and health spending serving as key indicators. This factor demonstrates that although per capita health spending by countries is an essential indicator of wealth and a key aspect of pandemic preparedness, it does not necessarily guarantee superior outcomes. Resource efficiency and other contextual factors also exert a significant influence on the management of the crisis. Furthermore, inequalities in health spending between coun-



tries at different income levels accentuate disparities in responsiveness, affecting both the management of the health crisis and the speed of subsequent economic recovery.

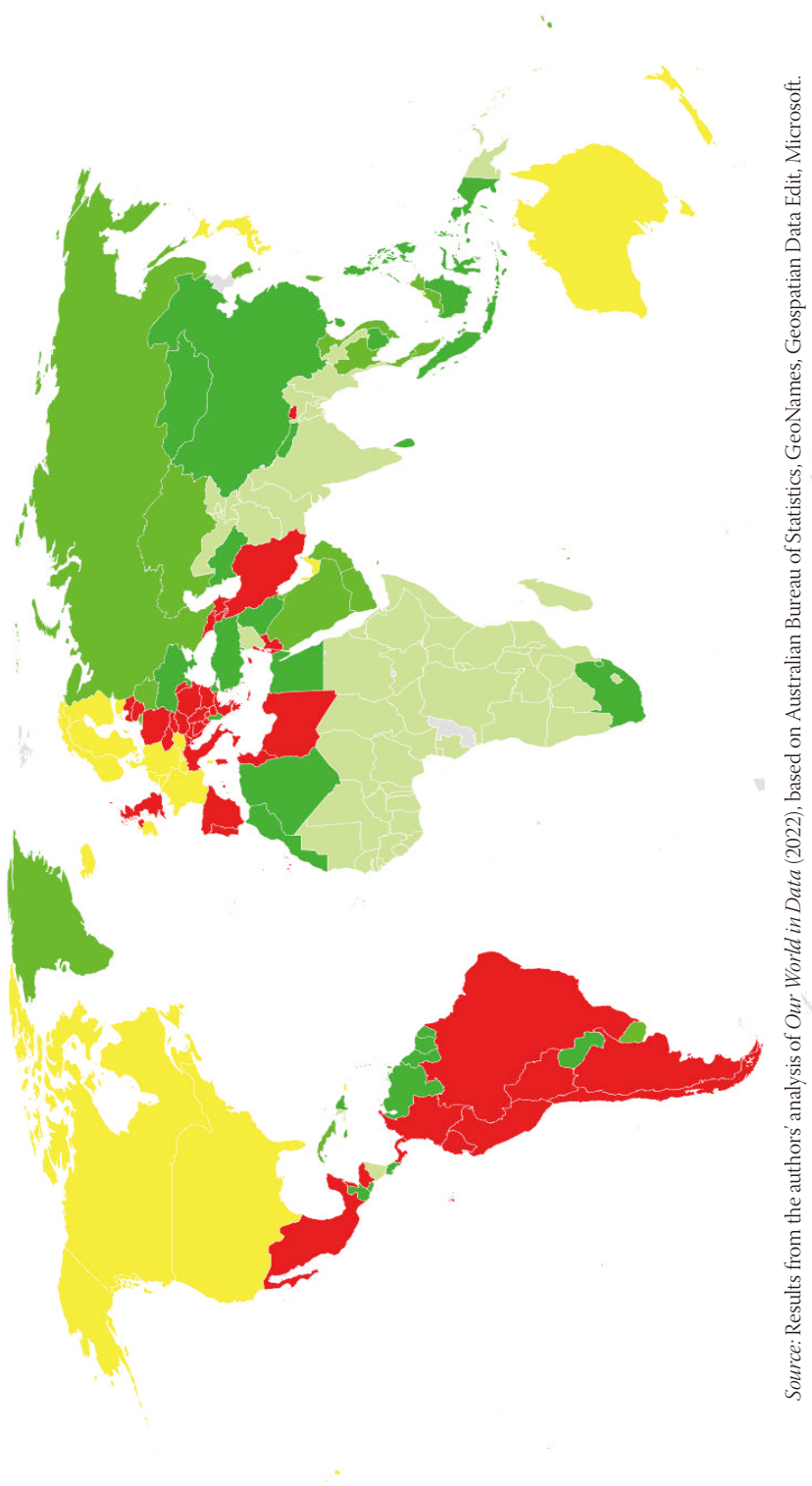
A notable inverse correlation exists between the relationship of GDP per capita and the under-five mortality rate. Takefuji (2023) demonstrated that the impact of the COVID-19 pandemic on mortality in this age group was inconsequential. Effectively, the distribution of countries in the factor space evinces that inequality between countries and high mortality in poor countries are contributing factors. This underscores the influence of pre-existing economic and inequality conditions on health outcomes that extend beyond the specific context of the pandemic. The analysis of the first axis also revealed the importance of internet access as an indicator of socio-economic resilience. This element facilitated the continuation of economic activities through e-commerce and the adaptation of business models, as well as enabling the dissemination of crucial information and the maintenance of social connections during isolation. However, the health crisis accentuated pre-existing digital inequalities, with groups with less access to information technologies being disproportionately affected.

The second factor, which accounts for 26.4 percent of the variance, reflects the impact of the pandemic on public health (mortality rate and new cases of COVID-19 per million people) and the intensity of the control measures adopted in response. This factor demonstrates a high prevalence of COVID-19 infection in the northern section of the graph. Furthermore, a positive correlation is observed with higher values on the stringency index in the north, reflecting the implementation of more stringent restrictive measures in response to the pandemic.

The typology of countries resulting from the analysis reveals three distinct groups, one of which is further divided into three subgroups: The *first group* (11.5%) comprises wealthy countries with high health expenditures and superior digital infrastructure, which exhibit a moderate impact with regard to the spread of the novel coronavirus. The *second group* (21.6%) comprises countries with both high and low income levels and demonstrates the highest impact in terms of mortality and incidence. A *third group* (67%) of countries with a lower GDP per capita exhibited a comparatively lower impact of the pandemic. This group is subdivided into three categories according to the intensity of the impact.

This distribution suggests that economic wealth is not the determinant of responsiveness to health crises, underscoring the necessity to consider additional factors. The findings of this study are consistent with those of Lassard Rosenthal et al. (2021), who investigated the relationship between the COVID-19 scoring system and GDP performance. The absence of a statistically significant correlation between COVID-19 score and GDP per capita in the countries analysed lends further support to the view that the relationship between pandemic management and economic impact is more complex than was initially assumed. This may be attributed to the fact that the economic activities in each country exert a disparate influence

Figure 4: Typology of countries according to COVID-19 incidence using socio-economic and health indicators



Source: Results from the authors' analysis of *Our World in Data* (2022), based on Australian Bureau of Statistics, GeoNames, Geospatial Data Edit, Microsoft.

**Table 4: Countries by typology group (incidences of COVID-19)**

Less affected			Moderately affected (25 countries)	Very affected (47 countries)
Less (60 countries)	Less+ (43 countries)	Less++ (43 countries)		
Afghanistan, Angola, Bangladesh, Benin, Botswana, Burkina Faso, Burundi, Cameroon, Central African Republic, Chad, Comoros, Congo, Cote d'Ivoire, Dem. Rep. of Congo, Djibouti, Equatorial Guinea, Eritrea, Ethiopia, Gabon, Gambia, Ghana, Guinea, Guinea-Bissau, Haiti, India, Kenya, Kiribati, Kyrgyzstan, Laos, Lesotho, Liberia, Madagascar, Malawi, Mali, Mauritania, Mozambique, Myanmar, Namibia, Nicaragua, Niger, Nigeria, Pakistan, Papua New Guinea, Rwanda, Sao Tome & Principe, Senegal, Sierra Leone, Solomon Islands, Sudan, Syria, Tajikistan, Tanzania, Togo, Uganda, Uzbekistan, Vanuatu, Zambia, Zimbabwe	American Samoa, Antigua & Barbuda, Bahamas, Bahrain, Barbados, Belarus, Bermuda, Bonaire, Sint Eustatius & Saba, British Virgin Islands, Cayman Islands, Cuba, Curacao, Dominica, Fiji, Greenland, Kazakhstan, Kuwait, Malaysia, Maldives, Malta, Martinique, Mauritius, Mayotte, Montserrat, New Caledonia, Northern Mariana Islands, Oman, Palau, Reunion, Russia, Saint Kitts & Nevis, Saint Martin (French part), Saudi Arabia, Seychelles, South Korea, Taiwan, Thailand, Trinidad & Tobago, Turks & Caicos Islands, United States Virgin Islands, Uruguay, Vietnam, Yemen	Albania, Algeria, Aruba, Cambodia, Cape Verde, China, Costa Rica, Dominican Republic, Egypt, El Salvador, Eswatini, French Guiana, French Polynesia, Grenada, Guadeloupe, Guam, Guatemala, Guyana, Indonesia, Iraq, Isle of Man, Jamaica, Marshall Islands, Micronesia (country), Mongolia, Morocco, Nauru, Nepal, Paraguay, Philippines, Saint Lucia, Saint Vincent & the Grenadines, Samoa, Sint Maarten (Dutch part), South Africa, Sri Lanka, Suriname, Tonga, Turkey, Turkmenistan, Tuvalu, Ukraine, Venezuela	Australia, Austria, Belgium, Brunei, Canada, Denmark, Estonia, Finland, France, Germany, Iceland, Ireland, Japan, Luxembourg, Monaco, Netherlands, New Zealand, Norway, Puerto Rico, Qatar, Singapore, Sweden, Switzerland, United Arab Emirates, United States	Andorra, Argentina, Armenia, Azerbaijan, Belize, Bhutan, Bolivia, Bosnia & Herzegovina, Brazil, Bulgaria, Chile, Colombia, Croatia, Cyprus, Czechia, Ecuador, Georgia, Greece, Honduras, Hungary, Iran, Israel, Italy, Jordan, Kosovo, Latvia, Lebanon, Libya, Liechtenstein, Lithuania, Mexico, Moldova, Montenegro, North Macedonia, Palestine, Panama, Peru, Poland, Portugal, Romania, San Marino, Serbia, Slovakia, Slovenia, Spain, Tunisia, United Kingdom

*Source:* Results from the authors' analysis of *Our World in Data* (2022).

on GDP, necessitating a bespoke assessment at the geographical level. Furthermore, the pandemic has brought to light the particular vulnerability of specific demographic groups, notably older adults. The concentration of older people in residential care settings contributed to the rapid spread of the virus in this demographic group, thereby exposing structural deficiencies in health and social care systems. The protective measures implemented, such as social isolation, had a disproportionate impact on the physical and mental well-being of older adults. This influenced public health strategies, the allocation of health resources and vaccination policies prioritised for this age group. This is in line with the findings of Cheng et al. (2022).

In conclusion, this study has demonstrated the presence of uncorrelated axes, which necessitates the consideration of the wealth-poverty aspects of countries independently of the impact of the pandemic in their territories. This leads to the assertion that there is no empirical support for establishing a direct relationship between the wealth/poverty of countries and the impact of the pandemic. Consequently, our initial hypothesis is not supported.

Nevertheless, it is evident that the crisis has intensified economic disparities between and within countries, with a particular impact on specific demographic and socio-economic groups. This represents a clear limitation of our work, insofar as it does not address the situation within individual countries, where inequalities are also significant. As Pleyers (2024) posits, the experience of the pandemic differs significantly between the middle classes of European welfare states and countries and working-class neighbourhoods, where the majority of workers rely on the informal economy. In this regard, Batthyány (2021) reflects on the situation of 130 million workers in Latin America who live from day to day and for whom quarantine is not an option. This is due to the fact that not going out to work means not eating, and job instability translates into low incomes and a lack of essential protection mechanisms in a crisis such as the pandemic. Furthermore, the author bases this reflection on ILO data which indicates that 53 percent of employment in Latin America is informal. A similar situation is observed in many of the countries analysed in Asia and Africa.

Furthermore, the absence of a straightforward correlation between national wealth and the severity of a pandemic highlights the necessity for a multifaceted approach to preparing for and responding to future global health crises. These findings have significant implications for future policy-making and crisis management. They suggest the necessity for more holistic strategies that consider not only economic capacity, but also health infrastructure, public policies, equity in access to resources and technologies, and country-specific demographics. They also highlight the importance of strengthening international cooperation and knowledge sharing to improve global resilience to future pandemics and health crises.

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# **Managing Crisis After Financialization: Reflecting on “Novel” Responses to COVID-19 and the 2008 Financial Crisis**

**Ben Spies-Butcher**

The COVID-19 pandemic was a truly global event. The nature of the virus, combined with contemporary patterns of travel and transportation saw a rapid escalation in the scale of the challenge. State responses were also unusually global. Similarities extended beyond public health measures to a range of fiscal and monetary responses that might ordinarily be understood in more distinctively national terms. This chapter traces these economic responses, identifying similarities with lessons learned from the earlier financial crisis and the growing importance of managing global finance and asset prices. Together these trends saw states expand the use of cash payments on an unprecedented scale. As the crisis receded, older economic norms of austerity, and global differentiation, re-emerged. Yet, the success of the pandemic response raises ongoing questions for economic orthodoxy and highlight the growing use of new policy tools.

## **Introduction**

The COVID-19 pandemic had a global reach that few events in recorded history have managed. Unlike wars and financial crises, which have far reaching consequences but are centered on specific regions, the speed, scope and scale of COVID-19 was distinct. After initial outbreaks in China and Italy, a broader and truly global set of border closures and lock downs begun in earnest in March 2020. In April the International Monetary Fund (IMF) reported that the world was entering a sudden and global recession. By June it had substantially downgraded its forecasts, estimating global growth would contract by 4.9 percent that year in what it described as “a crisis like no other” (IMF, 2020). The year saw 95 percent of national economies simultaneously shrink, something that had never happened before (Tooze, 2021a, 5).

Pandemics create distinct policy challenges. While there had been a series of serious disease outbreaks both amongst people and animals in recent decades, all had been somewhat contained. SARS, MERS and other outbreaks caused human tragedy in many countries and regions, but none had required the kind of global action seen in response to COVID-19. It required a much longer view to comprehend what was unfolding. Not since the (inappropriately named) Spanish flu in the wake of the



First World War had such strict and far-reaching health restrictions been enacted at anything like this scale. For many countries the policy response directly echoed earlier contagions, as laws written for previous pandemics, and which had since laid dormant, were brought back to life.

The human toll of COVID-19 was immense. In 2020 alone, 2.2 million people were killed and tens of millions made seriously ill (Tooze, 2021a, 1). Most of the global population had their daily lives impacted by travel restrictions and stay at home orders. Education, work and home lives were significantly disrupted. The ongoing toll on health is still to be fully understood, as the impacts of “long COVID” and the mental health impacts of lock downs continue to be studied. These direct effects were unevenly distributed. Professionals were much better positioned to adapt to working from home than were the “essential” workers needed to keep life functioning. The impacts of overcrowded or inadequate housing became more acute, as did the gendered division of care within the home.

The pandemic brought into stark relief the interdependencies of social reproduction. Where political and policy discourse has increasingly been trained to focus on the economic relations of price and trade, COVID-19 revealed a different set of social relationships essential to survival. The sharp change in focus did not make the economy irrelevant. Instead, it created a disjuncture between economic policy norms focused on constraining the role of public finance and both the health and economic imperatives created by contagion. The complex of financial relationships that increasingly mediate global economic activity struggled to cope with the sudden loss of certainty engendered by the pandemic. Uncertainty created a secondary economic crisis, not of health or production directly, but of liquidity.

As the scale of the crisis became clear in late February and early March, even before the more serious health measures were enforced, financial markets were already in crisis (Bradley and Stumpner, 2021). In response, governments around the world embarked on a second set of dramatic policy interventions. Like the restrictions on travel and movement imposed through half-forgotten emergency health provisions, the economic policy response to COVID-19 also seemed from a different era. Governments, long contained by fiscal hawks, spent at an unprecedented rate. Much of the spending was focused directly on households, and far from resisting the fiscal splurge, the bastions of fiscal rectitude, central banks, urged it on.

This chapter focuses on the response to the economic impacts of COVID-19, particularly through social spending. Not only was the scale of that spending unprecedented in peace time, internationally there were remarkable similarities. Across the globe governments favored sending cash directly to households, often facilitated by “novel” monetary policy that lowered interest rates and absorbed public debt. Examining the fiscal response across countries the chapter seeks to set the COVID-19 crisis in the context of shifting policy norms, particularly since the Global Financial Crisis (GFC), or Great Recession, of 2008.

The chapter begins by setting out the social spending response and contrasting this with economic orthodoxy, the so-called Washington Consensus, that has dominated policy thinking for several decades. It reflects on the popularity of cash payments, and links this to existing trends prior to COVID-19 and lessons from the earlier financial crisis. It analyses the response against the background of financialization and the economic importance of asset values, asking how this might inform our understanding of crisis management in the future. Finally, it reflects on the “temporary” nature of social expenditure and the subsequent return of inflation. Again, drawing on the experience of the Financial Crisis, it asks what we might learn from COVID-19 as a moment of economic crisis management.

## **COVID-19 and State Finances**

The fiscal response to COVID-19 was both large and global. Early in the crisis, Oliver Blanchard (2020) identified three purposes for the fiscal efforts states were making across the globe. The first was to fight the virus. Additional resources were needed to expand health and quarantine facilities and to support scientific research into vaccines and other preventative and curative measures. Second, governments needed to provide funds to “liquidity-constrained households and firms” (Blanchard, 2020, 16). Unlike many other crises, where weakening confidence gradually sees an increase in unemployment and fall in incomes, the pandemic involved an abrupt fall in incomes. In most countries households did not have sufficient savings to sustain themselves through such a loss of income. Likewise, COVID-19 initially led to a similar shut down in global credit markets, creating significant challenges for business. The final focus of fiscal effort, Blanchard (2020) argues, was as a more traditional stimulus to aggregate demand.

As the crisis unfolded both the World Bank and IMF provided useful insight into the fiscal response. The two organizations had a somewhat different focus, but both highlight the scale of public action. According to the IMF Fiscal Policies Database, by April 2021 direct fiscal support averaged almost 10 percent of GDP (IMF, 2021). Less than 15 percent of this total was dedicated to Blanchard’s first purpose, expanding spending related to health care. Instead, the spending was largely in response to the economic consequences of the pandemic and government health measures. Overwhelmingly those efforts focused on the short-run liquidity constraints, given other lock-down measures were consciously shutting down much service related economic activity. For business, that often took the form of public lines of credit, or guarantees of private credit. For households, the measures emphasized liquidity by expanding cash payments to facilitate household spending.

An impressive team of global researchers at the World Bank, led by Ugo Gentilini, identified a remarkable 3,856 social protection and labor market measures across 223 countries. The spending in response to COVID-19 was global, however, the scale of spending was uneven. The Global North consistently deliv-

ered much greater support, not only in absolute terms, but also in proportionate terms (IMF, 2021). The United States committed a remarkable 25 percent of GDP. In Africa, few countries managed direct fiscal support above 5 percent of GDP. This partly reflects differential impacts, with Africa having a relatively smaller disease and death burden (Maeda and Nkengasong, 2021), but it also reflects the varied fiscal capacities of states. As Martin Wolf suggested, this pandemic was different in part because wealthy countries could afford a scale of economic disruption rarely seen before. However, fiscal support extended well beyond the countries of the economic core (Tooze, 2021a, 8).

## Reversing Economic Course

These global responses mark a sharp break with decades of fiscal constraint. Fiscal discipline topped the list of policy principles outlined in the so-called Washington Consensus (Williamson, 2009). Emerging from the broader economic crisis of the 1970s, this fiscal orthodoxy reflected a critique of democratic institutions, which had purportedly become overburdened by demands for public resources. The Trilateral Commission claimed that democratic governments had increasingly sought to appease internal constituencies through fiscal expansion and regulatory protections (Crozier et al., 1975).

Alongside this institutional critique, pro-market economists identified an emerging demographic challenge. Where post-war population growth had facilitated an expansion of the workforce in most Western countries, population ageing had less sanguine economic consequences. The success of democratic movements following the War had seen the expansion of welfare states, which emphasized the needs of older citizens. Social insurance schemes increased the incomes of retired workers, while universal healthcare was disproportionately used by older people (Pierson, 2001). Longer life expectancies and declining productivity rates reinforced the fiscal challenges of population ageing, leading to calls to limit social entitlements and even privatize social provision (Pierson, 2001).

The neoliberal remedies suggested by proponents of democratic overreach and population ageing were advanced globally by international institutions. The International Monetary Fund (IMF) applied the Washington Consensus when assisting countries, overwhelmingly in the Global South, facing currency crises after the US led a dramatic increase in interest rates in the late 1970s. IMF Structural Adjustment Programs (SAPs) required dramatic decreases in public spending alongside privatizations (Kentikelenis and Stubbs, 2023). The World Bank championed welfare state reform, particularly pension reform, through its embrace of the perils of population ageing (World Bank, 1994).

These international institutions reinforced domestic moves, especially in the Anglosphere and Europe, to limit political control over national economies. An important element of this domestic agenda was independent central banking (Saad-

Filho, 2019). Alongside the deregulation of national currencies and liberalization of capital controls, monetary policy was increasingly taken out of the direct control of governments and Treasuries. Instead, central banks were granted greater autonomy or formal independence, and charged with creating monetary certainty by prioritizing the targeting of low inflation. The changes, exemplified in the conditions of the Maastricht Treaty in Europe, not only prioritized “fighting inflation first,” they significantly transformed how public borrowing was operationalized, shifting control from public bureaucracies to private credit agencies and financial institutions (Lemoine, 2017).

The result was a shift in fiscal politics (Spies-Butcher and Bryant, 2024). Prior to the twentieth century state finances in most countries tended to be relatively stable as a proportion of GDP, other than during times of war. The two World Wars during the mid-twentieth century had seen a massive expansion of fiscal power in the belligerent countries to support the model of total war. Following the Second World War democratic demands imposed a new pattern, where state finances continued to steadily expand in support of social policy, a model Claus Offe (2018) described as a kind of “peace formula” in response to growing class conflict.

From the 1980s the expansionary trend stalled. The state may not have “shrunk” as New Right proponents advocated (Pierson, 1998), but the expansion of public finance halted. This fiscal history can be seen in the experience of high-income countries (see IMF, 2024). Despite ageing populations and new demands for publicly provided care to facilitate women’s entry into paid work, state spending stopped expanding. Following the Financial Crisis fiscal constraints in many countries intensified as the enormous private liabilities that had triggered the crisis were transferred onto public balance sheets (Streeck and Schäfer, 2013).

The COVID-19 response marks an important break from this longer-term fiscal constraint. The scale of fiscal spending is significantly larger than that associated with the 2008 financial crisis. While the financial crisis impacted a smaller set of mainly high-income countries than did the pandemic, the composition of spending within those countries also differs considerably from 2008. The financial crisis saw governments focus on tax cuts over spending (OECD, 2009), alongside asset guarantees and other balance sheet moves. The pandemic also saw governments use their balance sheets to manage private sector liquidity, but the dominant policy responses involved public spending directed to households. While the consistency of lock-down measures aimed at protecting health and preventing disease spread reflects a longer standing policy consensus and legal architecture, the global embrace of cash payments against the background of fiscal austerity is remarkable.

## The Ubiquity of Cash Transfers

Cash transfers are the most striking feature of the fiscal policy response to COVID-19. As Gentilini's team at the World Bank have documented, over 200 countries implemented some form of cash transfer in response to the pandemic, most implementing multiple schemes (see Table 1). Cash transfers were made to over 1.3 billion people, or 1 in 6 of the global population, a scope without precedent. With the potential exception of Europe, where existing forms of social insurance played a larger role, social assistance, particularly cash transfers, were the dominant fiscal pandemic measure in every world region. Of course, the scale of fiscal support varied considerably, reflecting global inequalities in fiscal capacity. Spending in North America was more than 150 times that in Africa (Gentilini et al., 2022).

Alongside the expansion of cash transfers, countries also sought to ease the liquidity pressures facing households from liabilities. Not only were cash transfers the primary policy tool globally, utility bill and other waiver programs were established across a similar number of countries. Governments also facilitated payment deferrals within the private sector, particularly within high income country housing markets (Gentilini et al., 2022). Mortgage and rent deferrals were a necessary corollary of stay-at-home orders, which were in turn often supported by public balance sheet measures of various kinds.

Behind both public and private efforts to manage contracted payments was the extraordinary effort of central banks, led by the United States Federal Reserve, to provide liquidity across national economies. The dominance of cash payments, waivers and monetary policy measures, and the relative lack of traditional demand management measures like public works, demonstrates how dominant the liquidity goal was within international economic policy responding to the crisis. It was not the loss of effective demand per se that governments feared, but a crisis similar to the one experienced in 2008, where a sudden liquidity freeze collapses confidence and asset prices.

Unsurprisingly, there are important similarities between the measures used in response to COVID-19 and those adopted, particularly in rich countries, in response to the Great Recession. However, the structure of financial support for liquidity shifted. Novel monetary policy came more quickly and was more broadly based, particularly through the European Central Bank, in addition to the Federal Reserve (Tooze, 2021a). The scope of support also expanded beyond the needs of businesses for liquidity, to directly include households. Where the Great Recession saw households default on mortgages, and government focus policy attention on dampening the broader economic implications through the banking system, during COVID-19, governments defended the banking system by supporting households to stay on payment (Spies-Butcher, 2020).

**Table 1: Social protection and job responses to COVID-19**

Sub-component	No. of measures	No. of countries
Cash transfers (conditional and unconditional)	962	203
Social pensions	61	48
<i>Sub-total (all cash-based measures)</i>	<i>1,023</i>	
In-kind food/voucher schemes	393	151
School feeding	93	74
<i>Sub-total (all in-kind measures)</i>	<i>486</i>	
Utility and financial obligation support (waiver/postponement)	764	187
Public works	76	48
<b>Total</b>	<b>2,349</b>	<b>218</b>
<i>Source: Gentilini et al. (2022).</i>		

The shift in focus onto households is perhaps less surprising given the nature of the crisis. Once governments began to institute health directives, they were also accepting a degree of responsibility for the economic consequences of shut downs. Similarly, governments could not afford the social dislocation and mobility caused by a housing crisis, which would directly undermine the intent of the stay-at-home measures. Even so, it is important to note the implications of the shift in policy direction, which saw the incomes of many low-income households, especially in the global north, rise even as the economy contracted (e.g. Davidson, 2022).

## The Pre-Pandemic Rise of Cash Transfers

Cash payments sit at the center of the shift in approach. The ubiquitous use of cash payments in COVID-19 may have been unprecedented, but the turn towards cash followed earlier policy trends. At least three distinct international policy trends anticipated the rise of cash during the COVID-19 crisis. First, cash payments had emerged as a successful center-left policy tool in an era of fiscal constraint and neo-liberal governance. Second, cash had become the focus of elite policy networks, particularly in international development, and the subject of expanding policy experimentation. And finally, cash had emerged as a successful crisis management tool from the previous crisis.

The recent expansion of cash payments as an anti-poverty and redistributive tool began in earnest in Latin America in the wake of the debt crisis of the 1980s and 1990s and the structural adjustment programs imposed by international financial institutions. Mexico introduced its pathbreaking conditional cash transfer (CCT) program, *Progresa*, in 1997, in part replacing more conventional developmentalist



policies such as price controls and food subsidies (Jäger and Zamora Vargas, 2023, 153). However, the approach gained broader attention and a more explicit political orientation in Brazil, where *Bolsa Familia* became both a centerpiece of Lula's successful parliamentary strategy and an exemplar for other Latin American countries experiencing the "pink tide" (see Lavinas, 2013).

The expansion of CCT programs across Latin America, and then more globally, is revealing of the dynamics of global policy networks. As Jamie Peck and Nick Theodore (2015) argue, CCTs became an archetype of a model of "fast policy." Mexico's initial scheme was effectively co-designed with international financial institutions, who then sought to apply the model internationally. It is not unfair to read this, at least in part, as a radical form of liberalization, where cash replaces deeper and more complex models of development (Jäger and Zamora Vargas, 2023, 153). Cash is potentially easier for central administrations to enact, and a relatively cheap way to compensate for the impacts of liberalization. However, as CCTs spread they also mutated, reflecting the intersection of global prescriptions and local conditions.

Brazil's model of *Bolsa Familia* developed in quite different circumstances to Mexico's. Its administration was far less centralized. Its conditionality was less strict and structured to engage social support rather than provide economic sanction. It also accompanied a different social and economic model, one less committed to economic liberalization (Peck and Theodore, 2015, 138–139). As Peck and Theodore argue, this suggests a greater degree of contestability, variegation and local agency in what might initially appear as simple policy transfer from international policy elites onto low and middle income countries. Some advocates of the Brazilian model have since expressed disappointment, as the payments became integrated into global financial flows rather than evolving towards genuinely unconditional forms of basic income (Lavinas, 2018). However, these experiences suggest the expansion of cash payments should not only be understood quantitatively, but also qualitatively, with similar policies potentially reflecting different interests and fostering different outcomes.

Cash payments did not only gain popularity within international financial institutions, they also became the subject of what Jäger and Zamora call "technopopulism" (Jäger and Zamora Vargas, 2023, 164–179). Following the financial crisis and the wave of austerity that swept much of Europe, basic income emerged as a surprisingly popular policy model—a "utopia for realists" (Bregman, 2018). Cash payments were increasingly the subject of policy experimentation. The political context for the experiments ranged considerably. Some communities in the Global South partnered with researchers and mainstream aid organizations to run pilots, for example in India (Davala, 2019). Most notably in Finland, a basic income-like trial was introduced through post-election negotiations over government formation (De Wispelaere et al., 2018). And outside government tech-industry sponsored pilots

were rolled out as an alternative to traditional development and aid, exemplified in Give Directly (see Lassak and Schmidt, 2023).

None of these models has yet successfully transitioned from trial to permanent policy (Chrisp and De Wispelaere, 2022). However, reflecting a consistent theme, the experimentation that took off globally post-GFC seemed to be reinforced in the wake of the pandemic. Here the most prominent example is the United States, where federal pandemic funding to municipalities facilitated local basic income schemes. The success of those models in reducing poverty and economic insecurity fostered a broader political movement, Mayors for a Guaranteed Income (n.d.), which has since signed up over 100 mayoral members.

The more obvious continuity between the two crises came through the coordination of fiscal and monetary policy. The GFC saw the monetary strictures imposed through the Washington consensus unwound. In the United States the Federal Reserve sharply dropped interest rates in the second half of 2008. The federal funds rate ended the year close to zero, a level it had not hit since the 1950s (Federal Reserve, 2024a). Alongside the slide in rates, the Federal Reserve also began to use its balance sheet to directly manage the liquidity freeze caused by the financial crisis. In less than two months the Reserve's balance sheet more than doubled, expanding by over a trillion dollars (Federal Reserve, 2024b). The Bank of England followed suit. The balance sheet moves facilitated quantitative easing, expanding liquidity while also absorbing questionable assets onto public books.

Over the next decade the Federal Reserve and other central banks sought to unwind these positions, and to sell down the financial assets acquired during the crisis, however their efforts were largely unsuccessful (Federal Reserve, 2024a). The expansion of public debt during the crisis led many governments, especially in Europe, to impose strict austerity. The European Central Bank consistently resisted calls to use its balance sheet to continue to resolve the acute financial pressures on member governments, particularly in southern Europe (Streeck and Schäfer, 2013). Sustained austerity led to a political and economic crisis in Greece and contributed more broadly to a rise of political populism (Gabriel et al., 2023). Austerity hampered recovery, frustrating efforts to unwind the initial quantitative easing. By the beginning of 2015 the Federal Reserve's balance sheet had doubled yet again. It had modest success reducing its holdings in 2018 and early 2019, but had already begun to reverse this position, alongside the funds rate, before the pandemic (Tooze, 2021a).

Well before the pandemic had hit the headlines, economic orthodoxy was shifting. Sluggish growth and persistently low inflation after the GFC saw economists and central banks change their approach. The Washington Consensus had sought to discipline state finance through the technocratic machinery of independent central banks designed to be narrowly focused on preventing inflation. The persistence of low inflation led central banks to be far more adventurous. Politically, the rise of populism in the face of persistent inequality saw moderates radicalize.



The timing of this shift is perhaps best captured by Paul Krugman's (2020) *Arguing with Zombies*, released just weeks before lockdowns began. As Adam Tooze (2021b) outlines, Krugman reflected a shift in center-left American thinking that re-embraced Keynesian expansion and came to see the economic orthodoxy as a significant threat to social cohesion and political stability. While that shift was initially gradual, the GFC cemented Krugman's radicalization. Stagnation already meant a growing need for fiscal and monetary aggression. When COVID-19 hit, Europe and the US responded by radically expanding on their 2008 efforts.

The shifting consensus in global financial institutions was also reflected in lessons learned more directly from the GFC. While Krugman and the US Democrats learned a negative lesson from the financial crisis, concluding that the Obama stimulus was far too little and the subsequent austerity misguided, Australia had learned the lesson in advance (Henderson et al., 2024). Its experience of the 1990s recession had led the Australian Treasury to a new crisis mantra—go early, go hard, go households. Australia had one of the largest stimulus packages during the GFC, and where tax measures dominated elsewhere, its stimulus included the largest spending component within the OECD (OECD, 2009). At its center were cash payments to households. Stimulus cheques were sent to most households, with many low income households receiving more than one. Kevin Rudd, the then Prime Minister, proudly declared himself a Keynesian (Rudd, 2009). While controversial in 2008, the Australian response was subsequently lauded by the IMF and World Bank (Henderson et al., 2024). Cash payments were a solution to crisis.

## **Crisis in the Age of Financialization**

The Financial Crisis highlighted the growing importance of finance and money to the operation of the global economy. The “guardian” role of central banks was crucial to this shift, as they oversaw the subjugation of inflation alongside the rise of asset values. As investment in housing and pension systems was redirected through financial instruments, the expansion of financial markets has increasingly stood on social foundations (Bryan and Rafferty, 2018). The pandemic made clear these connections between social needs and financial values, and saw a shift in how those connections were managed. Households were now supported alongside asset values (Spies-Butcher, 2020). But the support was temporary. Unlike older Keynesian policy models, which remained effective in the face of the 2008 crisis, protections quickly faded and an attempt to reassert monetary austerity returned.

The policy liberalization associated with the Washington Consensus saw a shift in the distribution of income in many countries. But following the financial crisis, growing inequality gained increased attention and was understood in new terms (Piketty, 2014). The origins of the crisis were quickly linked to a reorganization of the economy, particularly the world's largest economy, the United States (Foster, 2008). Liberalization had seen a shift in the Global North from production indus-

tries to finance. The reorganization of financial relations, however, had not led to a sustained expansion of real output. Growth rates since the 1980s have been significantly weaker in the Global North than in the immediate post-war period.

Instead, the financial crisis brought into sharp relief a shift in the organization of incomes and wealth. Martijn Konings (2011) argues this reflects a shift in the broader political economy. In response to the stagnation of the 1970s, central banks imposed a new financial discipline alongside attacks on the fiscal and industrial pillars of the welfare state. Stagflation reflected a distributive struggle. Rising commodity prices drove broader inflation, which was met by industrial conflict to maintain real wages. Internationally, the nonaligned movement proposed a new economic order. Both struggles, however, faded in the face of aggressive monetary policy. Central banks, led by the “Volker Shock” in the US, dramatically lifted interest rates, collapsing demand and raising unemployment. Given international finance continued to be denominated in US dollars, rising rates also triggered debt crisis across the Global South (Bello, 2006).

The liberalization that occurred during the 1980s and 1990s reflects the consequences of these monetary moves. Higher unemployment and deindustrialization contributed to significant losses in union density in the North, while debt crises facilitated structural adjustment in the South. Growing real output did resume, but centered on China, where a truly historic process of industrialization, urbanization and rising money incomes was taking place. In the Global North, a new growth model developed centered on the FIRE industries—finance, insurance and real estate (Foster, 2008). Private financial models increasingly supported what had been public investment, through blended finance, such as Public Private Partnerships, and the marketization of social services. The rise of new financial products, like derivatives, also reshaped corporate accounting practices. Intangible assets have steadily grown as a proportion of the market value of traded companies. Fair value models of accounting facilitate restructuring and emphasized the current market value of assets, rather than their long-term depreciation (Zhang and Andrew, 2014).

The financial crisis revealed this model of financialized capitalism did not only facilitate corporate restructures, it increasingly entangled household finance. The crisis itself centered on financial derivatives linked to the housing market (Tooze, 2018). As interest rates fell, households in many countries used cheaper finance to bid up house prices, leading house prices and mortgage debt to rise together. Fiscal fears towards population ageing saw governments financialize the life course, and especially retirement. Private pension schemes funded privatization of infrastructure, while housing insecurity fueled household debt. Households played an increasingly leveraged role within financial markets, often encouraged by domestic tax systems that treated capital gains more favorably than waged income (Adkins et al., 2020). Contracted payments from households, especially mortgages, but also utility bills, credit card payments and health insurance, underpinned new finan-

cial products, while asset ownership, again especially housing, became increasingly central to life changes and social stratification (Adkins et al., 2020).

Importantly, financial restructuring did not make older Keynesian models of social protection obsolete. Instead, social insurance began to play a new role in managing liquidity rather than demand (Bryant et al., 2024). Leading into the crisis, Danish households ranked above US households on common metrics of over indebtedness. Denmark had liberalized credit markets and seen a significant housing boom, despite higher levels of social housing. Yet, the catastrophic social consequences of the crisis that faced US mortgagees were largely avoided in Denmark. Social insurance schemes ensured Danes could continue to meet mortgage commitments and make other contracted payments, even though the rise in unemployment was proportionally higher in Denmark than the US (Bryant et al., 2024). As economists at the Federal Reserve put it, “Danish mortgages embed less implicit insurance than U.S. mortgages, although that is partly made possible by the extensive social safety net offered in Denmark” (Berg et al., 2018, 3). Rather than stimulating demand, social insurance now provided a guarantee of liquidity.

The same principle underpinned many of the pandemic measures. The shift in policy, from protecting financial institutions directly through asset purchases, to assisting financial institutions indirectly through cash payments to households, was significant. However, in virtually every instance, government action was explicitly temporary (Chrisp and De Wispelaere, 2023, 922–923). The exceptionalism is two-fold. Not only were payments confined to a period of crisis, they were also *ad hoc*. Throughout the crisis governments continued to make decisions to maintain, increase or decrease social support. Each act was a new decision, rather than an ongoing framework that might manage crisis. Emergency cash payments looked very different to the automatic stabilizers of the Keynesian welfare state. The pandemic brought remarkable fiscal firepower, but did so without creating new social rights.

It is possible that repeated crises will create a more durable framework. As I have argued, the pandemic response partly built on the experience of the financial crisis. The pandemic also revealed that financial crises can be the result of non-financial shocks. If future crises engender a similar response, even if that response is again couched as temporary, it will likely entrench social and political expectations, making emergency cash payments normative. The politicization of inequality, itself a product of the financial crisis, has a reinforcing logic, evident in the shift in climate politics towards forms of explicit industry policy that seek to build electoral support by providing economic security (Mackenzie and Sahay, 2023). Even so, in the short run at least, the most conspicuous policy legacy of pandemic aid has been the reassertion of monetary discipline and the need to prioritize inflation.

## Contesting Money After the Crisis

The temporary nature of the pandemic response was reinforced by the shift in economic conditions and global economic debate through 2021 and 2022. The shift stood in stark contrast to the slow, uneven post-2008 recovery. While asset prices did recover, in many countries prices and wages did not, reinforcing growing concerns over inequality and financialization (Streeck and Schäfer, 2013). All of this was compounded by efforts to enforce austerity, despite the weak recovery. The pandemic led to a very different outcome. Stagnation was replaced by a rapid increase in inflation, although this again left wages behind (ILO, 2022). By the end of 2021, as inflation rose above central bank target settings, New Zealand began a global trend to reassert the older monetary orthodoxy and raise interest rates (see OECD, 2023).

Monetary policy may have replaced fiscal austerity across the two crises, however, both reflected the reassertion of older economic norms. International economic institutions quickly focused on the dangers of inflation, and its potential to lead to a sustained wage-price spiral. Echoing Michael Kalecki's (1943) famous paper, the Bank of International Settlements (2022, 51–54) seemed more concerned with the political consequences of tight labor markets, fearing rising prices would lead workers to organize, than the uncertainty produced by sustained inflation. As with the Volker Shock, the sharp tightening of interest rates in the US, in particular, began to place similar pressures on debtor countries in the Global South, reinforced by the sudden rise in energy and food prices associated with the Russian invasion of Ukraine.

It is hard to disentangle the various forces at play in the return of inflation. The pandemic caused significant supply chain disruptions. The social and labor market policy response significantly expanded public finance, stabilizing incomes but also inflating savings and asset prices. Supply chain problems continued well after many countries had begun to lift health restrictions due to the more aggressive approach taken by China, and its pivotal place in global supply chains. The Russia Ukraine conflict intensified just as the pandemic response was fading and policy was normalizing. Given this complex economic picture there was always significant uncertainty over the causes of inflation and the ability of monetary policy to adequately respond. What is more significant is the priority afforded monetary policy given that uncertainty, as central banks sought to assure markets of their 'credibility' as much as executing appropriate policy.

The contestation of monetary policy is likely one of the most significant longer term policy implications of the pandemic. The reassertion by central banks of their "guardian" role within the economy has come under surprisingly effective critique. Isabella Weber's profit-led inflation thesis crystallized an alternative explanation of inflation, and an alternative remedy. Her critique drew on her pathbreaking analysis of Chinese economic policy during the period of liberalization (Weber, 2021). Her analysis, in turn, reflects a broader historical shift within economics itself reflect-

ing the impact of crisis. As orthodox economic accounts struggle to explain the financial crisis, secular stagnation and pandemic response, and as policy remedies increasingly resemble the emergency measures from earlier crises then policy orthodoxy, so interest in history has returned.

Weber argues the post-pandemic inflation is best understood as being led by the monopolistic power of producers (see Weber and Wasner, 2023). The crisis created short-term monopolies via supply chain disruptions. As some prices began to rise the norms that keep relative prices in check were also disrupted, giving more scope for those with price-setting power to not only pass on costs, but increase margins (even if this is sometimes defensive, in anticipation of further supply price rises). Unlike the 1970s, labor largely lacks the power to increase wages proportionally. Central banks sometimes acknowledged this, but maintained wages must still be moderated to prevent a second-round effect (see Bank of International Settlements, 2022). Instead, Weber looked to history when similar conditions had prevailed to argue for strategic and short-term price controls and strengthening anti-trust and pro-competition regulation.

The profit-led inflation thesis has gained a surprising degree of coverage and agreement (see Grothe, 2023). Central bankers and international financial institutions have become less confident in their understanding of the relationship between monetary policy and inflation (Grothe, 2023). Much like the 1970s, the assumed relationships between macro policy and macro outcomes have come into question. That uncertainty coincides with a significant change in economic policy orientation from the USA, with implications across much of the world. The Inflation Reduction Act signaled a move away from the Washington Consensus orthodoxy, embracing active industry policy and labor rights (Mackenzie and Sahay, 2023). It also ensured the fiscal taps stayed on, although in a new configuration, after the pandemic response receded. Of course, it is not long since the crisis, and policy can change. But the absence of a strong austerity narrative and the active debate over the role of monetary policy signal a significant shift from the previous crisis.

There remain continuities across these changes. Just as the popularity of cash payments during the pandemic reflected earlier policy trends, so the mechanisms of the Biden administration's Inflation Reduction Act (IRA), which rely heavily on tax credits to reshape private investment, echo earlier forms of financialization (Spies-Butcher and Bryant, 2024). Alongside measures the USA and others adopted during the crisis, this is not a simple continuation of financial liberalization, instead state power and financial logics advance together, as public finance is reorganized to incorporate financial logics within public finance while socializing risk. These forms of "hybridity" were already evident in the state's growing use of credit, underwriting and balance sheet operations, and reflect the increasing importance of liquidity to economic management (Spies-Butcher and Bryant, 2024). The shifting policy environment may mark a sudden break, but more likely it opens the door to an evolution of policy, where the state's use of financial logics to "de-risk" investment and markets

politicises these decisions, reshaping which risks are managed and on what terms (Gabor, 2021).

The ubiquity of cash payments during the pandemic is consistent with these broader trends. The use of cash to support households during the pandemic signals a shift in the management of liquidity crises, where financial flows are guaranteed via supporting households to make payments. That shift was always temporary, however, it opens up new possibilities. It demonstrated the capacity of states, at least middle and high income states, to act. Just as the financial crisis demonstrated the ongoing role of the state as the risk manager of last resort, the pandemic response revealed risks can be managed in different ways, and prioritize different interests. Contesting the structure and permanence of cash payments, and the terms of the “de-risking” state, may become key to negotiating how countries negotiate the next crisis.

## Conclusion

The pandemic was a truly global experience. As contagion moved around the world, so too, is seemed, did policy. While the experience echoed earlier historical periods, the response was grounded in more recent developments. Governments seemed to learn from their experiences of financial crisis a decade earlier, while the rise and integration of financial markets facilitated greater policy efforts through the coordination of expansionary monetary policy. As the crisis receded, so too did the initial policy innovation. Central banks reversed course, seemingly reasserting the austerity. It is too early to judge exactly how COVID-19 changed world governance. However, Weber’s challenge to monetary orthodoxy and the Biden Administration’s expansion of novel fiscal policies in support of climate adaptation and more secure supply chains suggests we have not simply returned to neoliberalism. Instead, the pandemic may signal new strategies to manage increasingly global crises.

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## Political Control, Authority, and the Pandemic

Ilán Bizberg

During 2020 and 2021, the COVID-19 pandemic impacted every country in the world. The population control mechanisms implemented by national governments resulted in the pandemic being referred to as a Foucauldian moment. However, in this chapter, I argue that it was an Arendtian moment because it exposed the importance of authority. Analysis of how various governments strengthened control and became more authoritarian or maintained their democracy during the health crisis indicates that there are at least four contemporary political forms: dictatorial, democratic, populist, and authoritative.

### Introduction: Health and Political Crisis

The pandemic of coronavirus that impacted the world from 2020 to 2021 has been called a Foucauldian moment by numerous analysts due to the implemented population control mechanisms. The main idea of this chapter is that it is also possible to call this event an Arendtian moment because, in contrast, the pandemic also exposed the importance of one of the central concepts of this author: authority. In effect, the health crisis caused by the coronavirus put governments around the world to the test, and how they reacted revealed the principle that moves them, as Montesquieu wrote, and is in many respects also defining their future; in some, it revealed the centrality of control, while in others that of authority.

Agamben (2020) has written that in times of fear, the population accepts restrictions that, in everyday situations, it would not. Before the pandemic, the attack on the Twin Towers in New York led the government of the United States to impose extraordinary measures that remain normal; the same happened in most occidental countries when confronted with terrorist attacks (see also Bizberg, 2021). Agamben proposed that facing a new threat, this time a virus, will permit governments to impose new control measures on the population. He argued that when the population is faced with the choice between health and freedom, it will choose the first: "...the

state of fear that has evidently spread in recent years in the consciousness of individuals and that translates into a real need in situations of collective panic..." [leads to] "...a perverse vicious circle: the limitation of freedom imposed by governments is accepted in the name of a desire for security..." [and has] "...induced by the same governments that now intervene to satisfy it..." [reinforcing] "...a growing tendency to use the state of exception as a normal paradigm of government" (Agamben, 2020, 2).

As Foucault (1991) has written, this control over the population is not centralized by the king or the State; as Machiavelli thought, the modern forms of control are exercised by diffused power. Starting with the invention of the police, capitalist economy, state administration, and statistics, the population is administered by apparatuses focused on each individual, defining what is expected and abnormal, regulating what is allowed and not, and our obligations. Modern states have increasingly sophisticated mechanisms to ensure individuals internalize these norms and abstain from external pressure to comply with them (Foucault, 1991).

Foucault's main idea is that in modernity, external domination carried out by political power, centralized in the State, becomes "internal" domination driven by language, classification, and money. Domination is no longer exercised in a restrictive way by an external prohibition; it is deployed from within freedom itself; the freedom that modern man enjoys is his domination. According to Foucault, "...the freedom left to the population is used by power for control purposes, there is thus discipline in the freedom that modern governmentality grants us" (Foucault, cited in Grenier and Orlean, 2007, 1178, own translation).

Foucault's sociology is based on the concept of the individual who faces "...forms of incentives instead of coercion..." (Jeanpierre, 2006, 90, own translation). "While the law prohibited, discipline prescribes, biopolitics cancels, slows, favors, or regulates" (Jeanpierre, 2006, 92, own translation). This explains why Foucault was so interested in liberalism and neoliberalism as the final phase of a self-regulated society based on the freedom of all and self-regulation through liberty. Liberalism is defined as the government by the economy: "...liberalism values the preservation of life, the freedom to move, to take risks; on the other hand, it limits these freedoms at the same time that it makes them possible" (Jeanpierre, 2006, 93, own translation). "Liberalism and neoliberalism move away from the disciplinary society insofar as they are not based on restrictions, even self-imposed, but on individual freedom. In a society based on Foucault's approach, conflict is internal to the control mechanisms, and resistance gives rise to new control measures and a greater capacity for domination. Now everything is being played amid the individual and the system" (Jeanpierre, 2006, 93, own translation). Agamben writes that fear has become another way of controlling populations, an emotion reinforced by the war against terrorism, and that threatens to be fortified with the contention of the pandemic (see Bizberg 2021 for a more detailed discussion).

The pandemic strengthens this individualization of control that the neoliberal economy has already maximized. Harari (2020) and Agamben (2020) consider fear an even more powerful factor than the neoliberal economy, as it is more subjective. While neoliberalism pushes the human being to enhance his capacity to succeed in the market and privatizes the social policies that were allocated by the State and social organizations, in the current pandemic, fear of death leads the individual to adopt an even more defensive attitude. This situation further strengthens individualism, and as we fear the other as a source of infection, it may extinguish any social action.

Naomi Klein (2020) considers that, in the final count, there is a real threat that the measures imposed during the exceptional situation may lead to a world of control that will destroy democracies and individual rights. Something that may be achieved through an association between politics and capital in the presently democratic countries and centered on the State in the dictatorial or totalitarian countries. In the democracies, the information technology devices, business, and government would “permanently integrate technology into every aspect of civic life, not as a painful necessity to save lives, but as a living laboratory for a permanent—and highly profitable—no-touch future...a future in which our every move, our every word, our every relationship is trackable, traceable, and data-mineable by unprecedented collaborations between government and tech giants” (Klein, 2020, 2).

This chapter will analyze how the different forms of government identified in today’s world have strengthened control or maintained democracy during the state of emergency. How governments responded to the health crisis has revealed at least four political forms. On the one hand, the dictatorial/totalitarian systems, which China can exemplify, managed at the beginning to effectively tackle the health crisis with extreme measures to restrict the movements of the population. This country had been perfecting its population control mechanisms to establish a political system dominated by one party for several years. It is turning it into a totalitarian system to the extent that these mechanisms allow it to accumulate centralized information about its population; this will enable it to exercise control over each individual not only to recognize political opponents but even to determine acceptable standards of behavior. But, although this model was successful in dealing with the pandemic at the beginning when the aim of the government became more the control of the population than the pandemic in itself and continued with its zero-COVID strategy for almost three years, the situation became economically and socially untenable. Although it seemed to help the government to perfect its control mechanisms, it finally displayed itself as frail because a health crisis cannot be managed only through control; it needs a certain acceptance from the population to take care and to accept being vaccinated, as we can see from the example of the democratic countries.

There is a second form of government, the democratic, that imposed highly restrictive measures on individual liberties during the pandemic, measures that would have been impossible a few weeks earlier. These measures may reinforce oth-

ers that had been applied facing the terrorist risk and increased since the destruction of the Twin Towers in New York. This form of government was fragilized during the pandemic, as it was obliged to impose anti-democratic measures, which, as we discussed above, may poison their regime from the interior.

Two alternative forms evidenced themselves during the pandemic: The populist form, a type of democracy that nevertheless rests on a relation between the leader and the people, that does not repose on institutions but on the faith the people have in their governor, and the faith he has in the people who support him. This governmental form did not take the health emergency seriously. It could not act efficiently due to its posture and the lack of faith in the institutions that mediate between the population and their government. Finally, a democratic government that did not impose drastic control measures founded its reaction to the crisis based on its authority and the population's trust in its government. This form may have been the most effective in managing the crisis and preserving and even deepening democracy and individual liberties. The latter a democratic model based on truthful information, the confidence of the population in its leadership, and the voluntary acceptance of all measures to preserve the population from the virus.

## The Dictatorial Forms

Since before the outbreak of the current pandemic, two contrasting models were being offered to global society, but especially for underdeveloped countries: The dictatorial, exemplified by China, a country that had been rapidly developing its economy, expanding its infrastructure, upgrading its industry to achieve high technological standards, extracting 600 million of its inhabitants out of poverty, and ensuring that the emerging new middle-class could access the comforts of the developed world. It has also reacted against the tremendous pollution generated by growth: China has been heading towards the ecological transition faster than much of the rest of the world, as this country has become the world producer of solar panels. All of this in just 30 years.

In political terms, this country can be considered as the one that has advanced the most in Foucauldian terms: It has perfected the mechanisms of control/administration of its population; it has achieved this through the State's capacity to threaten its citizens credibly and to make use of various control instruments that have included: Supervision of mass media, censorship of social networks, access to cell phones and other private press, access to electronic payment data, and facial recognition. The information that results from the fact that cash has practically disappeared and that all commercial transactions are carried out electronically allows the government to tell what individuals buy, if they pay their debts on time, if and where they travel, etc. In fact, the government can uncover each person's interactions by matching individual data with other consumers (something that has been perfected in the pandemic to detect the contacts of those infected). Since before the current

health crisis, the central government has been using these mechanisms not only to prevent crime, as in democratic countries but also to uncover political opponents. Using these surveillance instruments, the Chinese government had begun to rank individuals based on their observance of social rules, allocating “social credits” to individuals to give discounts on public transportation, hotels, and other types of activities to those positively ranked and, on the contrary for those negatively ranked, oblige them to pay more for those events, or barred them from going to the theater, travel somewhere on vacation, etc. (Han, 2020).

The leaders and partisans of this model claim that democracy and individual freedom, as we know it in the West, would jeopardize the State’s ability to continue the impressive growth process. The majority of the population accepts this premise: the social compromise is such that democracy and individual rights can wait in exchange for the fast development of a country that, until recently, was poor. The values at the base of democratic societies could be delayed in exchange for economic growth. Some who have disagreed with this premise were the youth of Tiananmen at the end of the 1980s and those from Hong Kong today (see Bizberg, 2021 for a more detailed discussion). The latter have been seeing the rights they have enjoyed while the central communist government is gradually dismantling the “one country, two systems” model.

Until the beginning of 2023, the health crisis seemed to confirm this idea and the efficacy of the regime. At the pandemic’s start, Byung Chul Han (2020) wrote that what democratic countries and their populations consider an intrusion on their privacy allowed Asian countries to fight the health crisis with less human, social and economic costs. Nonetheless, we finally grasped the frailties of this system. The control mechanisms continued and were even reinforced without relation to the pandemic. What had worked well initially was repeated, even though it did not make sense regarding health. As it was demolishing the second element of the social compromise that the dictatorial state had with its population, economic growth through the continuous lockdowns, the authoritarian system reached its limits: Its incapacity to be critical of its methods, in the first place and in the second, its lack of capability to convince the population to do what had to be done at some moment of the pandemic: To accept being vaccinated. Although the people accept authoritarianism in exchange for economic growth, they do not have confidence in their government; the result was a low rate of vaccination, which elevated the difficulty and the risks that accompanied the opening of the society, of social life, as it happened in occidental countries, even with the circulation of the virus.

In this manner, dictatorship found the limits that Hannah Arendt described in her writings: While violence and control are instrumental, they are contrary to both power and authority. In fact, what we call authoritarian governments should not be named so, but tyrannies, dictatorships, police regimes, or totalitarianism; they lack both power and authority, as they are based on control and violence. While power is “...the aptitude of man to act in a concerted manner” (Arendt, 1972a, 140, own



translation) and thus the antinomy of violence and control, according to Arendt, authority is a sort of “specter of power” and, hence as with power, “...where force is used, authority has absolutely failed” (Arendt, 1972b, 123, own translation), as “...authority implies an obedience in which men preserve their liberty...” (Arendt, 1972b, own translation). Thus, although the Chinese government has control and violence mechanisms, it lacks authority and power. The most solid political regimes are not the most violent but those that rest on trust and authority. So, although the population administration instruments will be reinforced in the future due to the technical expertise perfected during the pandemic, they are inherently weak. And this is not only the main flaw of authoritarianism and totalitarianism but also of the theory of Foucault, which considered that control mechanisms can suffice and reinforce themselves until they totally destroy freedom and democracy.

## **Democratic Forms Imposing Intruding Surveillance Mechanisms**

The situation of the democratic forms of government is both similar and different. Similar because the pandemic obliged almost all countries to impose restrictions that would have been unthinkable in other circumstances. They were different in that they were imposed on countries with democratic governments and populations accustomed to an extensive array of individual freedoms. Democratic countries implemented movement limitations that a few months before were unimaginable: They forced citizens to stay home, to need a safe-conduct to go to the pharmacy, the corner store, exercise, and even defined a limit to the distance they could move away from their homes. In some countries, police were allowed to fine or even arrest individuals if they did not justify being outside (see also Bizberg, 2021). In addition, most measures were defined through decrees that did not pass through Congress and did not result from a consensus between parties and the population.

Next, in de-confinement, some countries imposed the mandatory use of masks. Although the idea was abandoned, in some countries, the possibility of prohibiting older adults and people with comorbidities from going out was raised, even when the end of the quarantine had been declared. Cell phone apps were designed to serve as an epidemiological alarm that warns users if they have encountered someone infected. In France, for example, the decision to confine was voluntary, so the percentage of the population using the app was very low. On the other hand, the French Council of State had decided that the use of its contents should be temporary because a large amount of information can accumulate that, if not regulated, can be harmful to individual liberties.

France, like many other countries in Europe, was not well prepared to face the health crisis due to the lack of face masks, ventilators, and hospital beds (Germany had twice as many), and there was a delay in imposing the measures to curb infections. However, the hospital system managed to resist without having to make

decisions about who to give access to ventilators, as happened in Italy and Spain. However, in this country, rigorous and mandatory confinement was imposed in a centralized and dirigiste way. A notable speech by President Macron symbolized this imposing attitude, which increased his popularity, which was at a low after more than a year of demonstrations by the gilets jaunes, in which he described the fight against the virus as a “war against an invisible enemy” and called a sacred alliance to face it. According to Pascal Perrineau from Sciences Po, France is rooted in a political culture accustomed to directives from above, from the State, and a bureaucratic attitude. In contrast, in Germany, in Merkel’s equally notable speech, there were no references to war terms, nor were the measures imposed compulsorily, but rather the cooperation of the population was requested to apply the guidelines for social distancing, as we will discuss below.

The fact of constraining individuals to limit their movements and other measures applied during confinement, as well as the fact that citizens accept being monitored by the State in a crisis, has led philosophers and sociologists to wonder if this will not be one of the characteristics of the new normality after the pandemic. Agamben (2020) reminds us that after the attack on the Twin Towers and other terrorist attacks in Europe, all countries have equipped themselves with cameras that monitor a large part of the cities; they have imposed surveillance and police control measures that have become permanent even when the threat subsided. It is legitimate to wonder if what the population has accepted due to fear of the coronavirus is not going to be something that will be perpetuated. Democratic countries may be tempted not to disarm all the authoritarian mechanisms put in place temporarily, with the justification that they can be used for other crises. Authors such as Agamben, Klein, and Harari consider that there is a real danger that population control will try to be made compatible with democracy, which would ultimately ruin it. On the other hand, in the face of the epidemic, this author has stated that it reinforces a “...rise to a true militarization...of the municipalities and areas where the source of transmission of at least one person is unknown or where there is an unknown case” (Agamben, 2020, 1).

The same can be said about using electronic means of population control, which, according to Harari (2020), are increasingly used among democracies. He mentions the case of Israel:

Prime Minister Benjamin Netanyahu recently authorized the Israel Security Agency to deploy surveillance technology generally reserved for fighting terrorists to track coronavirus patients. When the relevant parliamentary subcommittee refused to approve the measure, Netanyahu implemented it with an “emergency decree.” One could, of course, make the case for biometric surveillance as a temporary measure taken during a state of emergency [that] would be removed once the emergency is over. But temporary measures have a nasty habit of surviving emergencies, especially since there is always a new emergency lurking on the horizon... Israel, for example, declared a state of

emergency during its 1948 War of Independence, which justified a series of temporary measures, from press censorship and land confiscation to special regulations for making puddings (no kidding). The War of Independence was long won, but Israel never declared an emergency and did not abolish many of the “temporary” measures of 1948 (Harari, 2020, 3).

Naomi Klein (2020) believes that there is a real threat, which does not derive from the central State, as in China, but from an alliance between political power and big capital, in this case from information technology companies, that would permanently maintain the measures imposed during this exceptional situation and could lead to a world of control that destroys democracies and individual rights. The danger would come from:

[P]ermanently integrating technology into every aspect of civic life...not as a painful necessity to save lives, but as a living laboratory for a permanent—and highly profitable—no-touch future...[as]...Humans are biohazards; machines are not. This would be a future where, for the privileged, almost everything is home delivered, either virtually via streaming and cloud technology or physically via driverless vehicle or drone, then screen “shared” on a mediated platform. It’s a future that employs far fewer teachers, doctors, and drivers. It accepts no cash or credit cards (under the guise of virus control) and has skeletal mass transit and far less live art. It’s a future that claims to be run on “artificial intelligence” but is actually held together by tens of millions of anonymous workers tucked away in warehouses, data centers, content moderation mills, electronic sweatshops, lithium mines, industrial farms, meat-processing plants, and prisons, where they are left unprotected from disease and hyperexploitation. It’s a future in which our every move, our every word, our every relationship is trackable, traceable, and data-mineable by unprecedented collaborations between government and tech giants (Klein, 2020, various paragraphs of the article).

According to Habermas (2020), it is possible, however, that the old democracies manage to resist this trend:

The restriction of many significant freedom rights must naturally remain within a limited duration. But as I have tried to show, this exception is required by the protection, as a priority, of the fundamental right to life and physical integrity. There is no reason to doubt the leadership’s loyalty to the Constitution in France and Germany. The fact that the Prime Minister of Hungary, Viktor Orban, is taking advantage of the health crisis to silence his opposition definitively is explained by the long-standing authoritarian development of the Hungarian regime... (Habermas, 2020, own translation).

We may suppose that democracies have mechanisms that can resist this trend. On the other hand, it should not be forgotten that in democratic countries, an or-

ganized civil society is always alert to reject any attempt by the State to extend the collection of personal information.

For example, the investigative newspaper *Mediapart* has drawn attention to the fact that the information collected by the Stop-COVID application is more widespread than what is needed to control the pandemic. In this same country, several opposition parties have already announced that they would oppose some of the measures the government intended to include in the law defining the state of health emergency.

## **Two Alternative and Contrary Models: Populism and Authoritative Democracy**

### **Populist forms**

In contrast to the two political forms we have analyzed in the first part of this chapter, populist governments failed to combat the pandemic efficiently, as can be seen by its evolution in the United States, Brazil, Great Britain, and Mexico, among others. In this discussion, we are going to limit our definition of populism to its most common and “external” characteristics; we will thus not make the necessary distinctions between left and right, popular and elitist populisms, or national-popular and proto-fascist forms of government as we have previously (Bizberg, 2020). We will circumscribe this form of government to its definition of politics as the struggle between friend and foe, its demagogic discourse focused on the leader and his speaking in the name of the unprotected sectors of society against the privileged strata, the oligarchs, the rich, or of the national group against the immigrants and foreigners. According to Hermet (2001, 49–50, own translation), “...populism aims to abolish the distance, the barriers, and even the existing differences between government and the governed, between those above and those below. It is an anti-political movement that rejects traditional political mechanisms because they delay the resolution of fractures and social injustices. It also denies the temporality of politics, demands and promotes an instantaneous response to problems and to the aspirations that no governmental action has the power to resolve.” Targuieff (2007, 285) adds that, in this manner, the time of populism is mythical, and its action highlights the magic of politics. Populism is the opposite of representative or participative democracy since it calls for a direct and voluntaristic policy that both deepens and purifies democracy and that strips it of what it considers to be “...its false institutional and constitutional limits” (Hermet, 2001, 70, own translation).

Facing the pandemic, most populist leaders began questioning its gravity, thereby significantly delaying the adoption of measures to deal with it. The main reason these governments acted belatedly is that as they are based on a very close relationship between the leader and the people (actually part of the people, his followers), they depend very closely on performance, which is basically measured in economic

terms. This is why they hesitated long before being convinced (if they ever were) that there were scientific reasons to shut down the economy to save lives. On the other hand, while economic performance is measured month by month, avoiding deaths is not quantified precisely in the context of a pandemic affecting the whole world and where data are missing. The economic slowdown has evident and immediate harmful effects, while the avoided deaths cannot be accounted for precisely. In fact, populist governments try to hide the death toll, something which was possible in Brazil, Mexico, and Turkey but not in the United States or Great Britain.

On the other hand, insofar as the leader concentrates power and decisions, occupies the totality of the political scene, and thus depends significantly on public opinion, he is hesitant to stop the economy, as he quickly reaps successes but also failures. This also prevents him from speaking clearly and transparently about the challenges, the problems, and the mistakes. And just as they hesitated long before sacrificing the economy, they tried to open it as soon as possible. All of this led to the fact that the countries led by populist leaders, mainly Brazil, the United States, and Britain, have had the highest number of infections and deaths (Galindo, 2020).

We have many examples of how, in all the countries where such a leader governed, there were significant delays in declaring the pandemic. In the case of the United States, in January 2020,

...the head of the Food and Drug Administration (FDA), Stephen Hahn, asks the Department of Health if he can start contacting companies about the supply of protective equipment staff. They tell him no. According to *The Wall Street Journal*, they responded that this could alarm the industry and make it appear that the Administration was unprepared. Trump settled in denial for weeks and downplayed COVID-19, going as far as to say that it would disappear like a 'miracle' (February 27) and equated it with the common flu (March 9)... For two months, he gave erroneous information about vaccines and treatments. He publicly contradicted all his experts and his official recommendations, such as when he encouraged the country's reopening on Easter Sunday, encouraged the most aggressive demonstrations against the confinement, and assured that he was not planning to wear a mask (*El País*, 2020, own translation).

In the case of Mexico, shortly before the health emergency was declared, President López Obrador declared the following:

There should be no alarm, it is believed that this virus called coronavirus is not so harmful, so fatal; It is not, according to the information available, something terrible, fatal. It's not even equivalent to the flu; Look, the coronavirus thing, that you can't hug; you have to hug, nothing happens; The protective shield is like the detente... The protective shield is honesty, that is what protects, not allowing corruption (*El Economista*, 2020, own translation).

In Great Britain, “...the health minister, Matt Hancock—who would test positive for COVID-19 a couple of months later—told a group of reporters gathered around Downing Street, the official residence of the prime minister, that the threat of the virus was low to the British people” (*BBC News Mundo*, 2020).

In Italy, at the start of the epidemic, “...Conte and other senior officials wanted to play down the threat, which created confusion and a false sense of security that allowed the virus to spread. They attributed the high number of infections in Italy to excessive testing of people who did not have symptoms in the north, which, according to them, only caused panic and damaged the image of the country abroad.” As coronavirus infections in Italy exceeded 400 cases and deaths reached the dozens, the leader of the ruling Democratic Party published a photo in which he toasted “an aperitif in Milan” and invited people to “not change our habits” (*New York Times*, 2020).

Finally, the most dramatic case was, without any doubt, that of Brazil, whose President Bolsonaro never stopped opposing the point of view of doctors, promoting the idea that confinement was a mistake, making statements contrary to those of his health ministers, and even promoting demonstrations against the confinement measures of his government. He fired three of his health secretaries for not accepting his ideas and finally appointed a general with no experience in the field as interim minister.

Jorge Galindo (2020, 1) takes stock of the performance of populist leaders in the face of the health crisis in this sense: “Populism presents itself as the savior of majorities in extreme situations. It lives by providing simple solutions to complex problems...the last few weeks prove that the ghosts it conjures up easily vanish: when the moment of truth arrives, when a truly global and incomprehensible challenge knocks on the doors of humanity, populisms then run out of resources, longing for the return of their manageable ghosts.” The balance of infected and deaths in the three countries of which we have spoken most directly: The United States, Great Britain, and Brazil were so negative compared to the other countries in their geographical area that it is possible to affirm that their management of the crisis was a failure, in addition, the three leaders of these countries lost their elections or posts.

### **Political Forms based on democratic values and authority**

The health crisis has revealed a fourth form of government, a democratic type that does not aspire for greater population control but is based on democratic authority and values. How this political form tackled the health crisis exposed the basis on which it rests: truth, authority, and a democratic and civic culture of the population. The message the government addressed to its citizens was focused on the sheer necessity of radical measures and the need to be respected individually and collectively. This political form was not only the most democratic but also the most successful in tackling the pandemic.

Some of the most exemplary cases were those of Germany, Taiwan, New Zealand, Finland, Iceland, and Norway, but also Portugal, Uruguay, and the province of Kerala in India; several of them governed by women, something which should arouse more attention but is out of the reaches of this chapter.

Contrary to the attempts by the dictatorial and populist governments to hide or withhold information on the gravity of the pandemic, an action that eroded the confidence of the population and, therefore, the effectiveness of the measures once they were decided, in the German case, the severity of the situation was recognized and communicated from the very beginning. In the case of these countries, the measures were applied through authority, as defined by Arendt. Hannah Arendt (1972b) describes two fundamental characteristics of authority: in the first place, it is the result of neither force nor conviction, and in the second place, freedom is preserved within authority. This means that it is unnecessary to convince the population of the correctness of the actions to be taken but that they are accepted because they trust the government and its decisions. In contrast, where there is no authority, everything is questioned, and it is either necessary to impose the measures forcefully or fail to enforce them with dire consequences. Arendt also says that the use of force reduces both authority and freedom. There is a vicious circle between the imposition of force and the decline of authority.

The counterpart of authority is civic culture, which is well known as the most essential characteristic of democracy for Tocqueville (1981). He wrote that the habitude of living in a democracy is more important than the laws themselves; democracy is essentially a tautology insofar as its possibility depends on the existence of democrats. Laws and their authority can only be imposed on citizens willing to follow them; if they are not, you would then need a (non-corrupt) police officer behind every one of them. In the cases we are analyzing, authority and civic culture made it unnecessary to impose sanctions to ensure that individuals respect confinement, social distancing, and the use of masks. In Japan, Taiwan, South Korea, and Germany, these measures were implemented without the need for fines or arrests, or even (in Japan, Taiwan and South Korea) without stopping the economy entirely, as was the case in Italy, France, Spain, and Argentina, among others.

Although Han (2020) considers that, in the case of Taiwan, South Korea, and Japan, the success against coronavirus was aided by an authoritarian mentality, which derives from their cultural tradition, we consider it rather a democratic or civic mentality based on an attitude of care for the other, a stance that limits individualism, that orients individuals' will to the common good. The very use of masks is proof of this as in these countries, their use is widespread, not so much as a way to prevent being infected, but rather the contrary, to avoid infecting others when sick. Going out in public without a mask when sick would be perceived as disinterest by others; in the West, on the contrary, walking around with a mask is seen with suspicion (Han, 2020). In addition, some of these countries were better prepared, as they had already lived through SARS and MERS, and they based their strategy



on carrying out many tests to identify the contacts of those infected, to ask them to isolate and take care of their families.

Although Hannah Arendt (1972b) wrote that authority is not based on conviction, it is interesting that the pandemic has permitted us to understand that it can, nevertheless, be reasserted by specific consultation mechanisms. On the one hand, the fact that the Parliament was always involved in these countries gives additional legitimacy to the decisions. On the other hand, as several authors have affirmed, federal governments appeared to be better equipped to handle the pandemic as there was an understanding between the federal government and the federations, which generates trust. This is especially important as implementing concrete measures is the task of the local governments. The deliberation between the different levels of government facilitated an agreement on general measures, which were then applied at the regional level.

Angela Merkel's speech is a clear example of founding the government's response to transparency, authority, and civic culture. There was no talk of war, as in President Macron's speech, but of the individual and collective experience of a health crisis:

The coronavirus is changing daily life in our country dramatically at the present. Our idea of normality, of public life, social togetherness—all of this is being put to the test as never before...part of what open democracy is about: That we make political decisions transparent and explain them. That we justify and communicate our actions as best we can, so that people are able to understand them...this is serious. Please also take this seriously. Since German reunification, no, since the Second World War, there has not been a challenge for our country in which action in a spirit of solidarity on our part was so important. I would like to explain where we currently stand in this epidemic and what the Federal Government and the state levels are doing to protect everyone in our community and to limit the economic, social, and cultural fallout. However, I also want to tell you why all of you are needed here and what each and every individual can do to help. Every individual counts. We are not condemned to accept the spread of this virus as an inevitable fact of life. These are not just abstract numbers in statistics, but this is about a father or grandfather, a mother or grandmother, a partner—this is about people. And we are a community in which each life and each person counts (Merkel, 2020, own translation; see also Bizberg, 2021).

New Zealand's Prime Minister Jacinda Ardern took a very similar stance to Merkel's, declaring:

I'm speaking directly to all New Zealanders today to give you as much certainty and clarity as we can as we fight COVID-19. Over the past few weeks, the world has changed. And it has changed very quickly. In February it would have seemed unimaginable to close New Zealand's borders to the world, and now it has been an obvious step as we



fight COVID-19. This is because we are experiencing an unprecedented event—a global pandemic that, in New Zealand, we have moved to fight by going hard and going early. I understand that all of this rapid change creates anxiety and uncertainty. Especially when it means changing how we live; that's why today I am going to set out for you as clearly as possible what you can expect as we continue to fight the virus together. For now, I ask that New Zealand does what we do so well. We are a country that is creative, practical, and community-minded. We may not have experienced anything like this in our lifetimes, but we know how to rally, and we know how to look after one another, and right now, what could be more important than that? So thank you for all that you're about to do. Please be strong, be kind, and unite against COVID-19 (Ardern, 2020).

These speeches revolve around the fact that the government intends to be totally transparent and that the population is asked for its collaboration to stop the pandemic while respecting democratic principles and the civic responsibility of the citizens. The acts of government are not an imposition on individuals of instructions that the central state has decided. Nor are these measures to be implemented through the intensification of the control mechanisms of the government, the end of deliberation between the different political powers and levels of government as some other governments in central Europe did. On the other hand, these speeches also make it clear that the main goal was to save lives, that no other principle prevails, that no utilitarian compromise may predominate, and that the government was not looking for a compromise between the economy and health as populist governments attempted. The president of Argentina was equally clear about this fact when he declared: "The economy has gone through a lot of bad times, and we've recovered, but we will not recover our dignity if we let our countrymen fall into illness and death" (Fernández, 2020, own translation).

This attitude generated a context of trust in what the government said and rendered dictatorial measures useless. In contrast, in China, given the lack of confidence generated by the attempt to silence the doctors who first warned of the existence of an unknown disease, the government had to impose extremely dictatorial measures. For the most part, to the extent that the populist countries did not have the support of the population because they began by ignoring the gravity of the situation, the measures taken have been much less effective.

## Conclusions

Although one may be led to think that the two first forms of government we have described, the dictatorial and the democratic that impose surveillance mechanisms, go in the same direction of population administration that Foucault described, how a country like China and Western democracies tackled the pandemic by imposing more and more controls on the population are not equivalent. The first case is that of a dictatorial government that uses new technologies' capacity to advance toward

a totalitarian government à la Arendt or Orwell. In contrast, both Klein (2020) and Harari (2020) describe a democratic government that effectively imposes population administration mechanisms. In one case, we are in a pre-Foucauldian situation, in which power and control are being centralized and concentrated on the State; in this case, the continuation of the restrictions on the population attained a limit that exhibited the frailty of the regime. The second form of government is a situation in which individuals voluntarily accept the restrictions and even internalize the rules within the Foucauldian scheme, but that seems to be recuperating freedom after the end of the pandemic.

It is possible that, as Agamben (2021) thinks, fear has become another way of controlling the population in democratic countries that will be reinforced, as Klein and Harari believe, putting democracy and individual freedom at risk. Fear was the source of the imposition of control mechanisms at the onset of the war against terrorism, and there was a risk that they be reinforced after the struggle against the pandemic. This author has drawn attention to the fact that our existence cannot be restricted to “naked life,” as he calls survival (Agamben, 1997). Unlike the viruses that colonize our cells, human beings’ essential goal is not simply to survive but to pose an aim that each individual defines and projects into the future through our aspirations, desires, and dreams. To emerge triumphant from the struggle for survival, abandoning everything to the power of the State or to control mechanisms would defeat not only democracy and freedom but the essence of life itself.

However, the main argument of this chapter is that democratic governments, based on truth, authority, and empathy, as well as on democratic/civic culture, did an outstanding job in preserving lives, democracy, and freedom.

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## Widening the Gaps in Times of Pandemic: Confinement, Public Space and Experiences of Inequality in Mexico City

María Cristina Bayón

This chapter explores the alterations produced by the pandemic on urban coexistence, sociability, and the relationship between public and private spaces, examining how these dimensions are shaped by social inequality gaps. Based on the case of Mexico, in particular on Mexico City's disadvantaged peripheries, we privilege a sociological perspective which highlights the quality of social relations, the practices of encounter with others, and the uses and articulation of public-private spaces. After describing some of the particularities of the Mexican experience regarding the management of the pandemic and the measures implemented, the experiences of confinement of underprivileged adolescents are analyzed on the basis of the results of participatory research conducted during the pandemic. In this research they share their own experiences, their homes, and neighborhoods, through diverse audiovisual and written techniques. Finally, conclusions emphasize the need to reduce the abysmal social gaps expressed in confinement experiences, and the importance of re-valuing sociability and public space to achieve an urban coexistence based on social justice, solidarity and respect.

### Introduction

The COVID-19 pandemic and the different measures taken since the beginning of 2020 to deal with it, radically altered the daily lives of millions of people around the world. Many of them, prior to the availability of vaccines, consisted of diverse and changing care recommendations linked to confinement that disrupted deeply rooted habits in different spheres of life. Work and education as well as family life are some of the most important spheres explored in the emerging literature on the pandemic experience. Among these spheres, however, one no less important, but less explored, is what we might call *life in the city*. If the pandemic had a salient feature, it was its initial concentration in large urban centers, then its spread to intermediate and small cities, and finally to rural areas (Nathan, 2021).

These care measures, in a context of generalized uncertainty in the face of an unknown virus, deeply transformed the forms of consumption, urban mobility, forms

of presentation and encounters with others, communication, practices of habitability and use of public space, leisure activities and free time, among many others. In most parts of the world, restrictions also included the closure of economic activities considered non-essential, the suspension of face-to-face classes at all educational levels, limits on circulation and use of public space (that with variants and different names encouraged #StayAtHome). All these measures also had a direct impact on daily urban life, and to some extent, *emptied* the city.

Based on the case of Mexico, and in particular Mexico City and its conurbation area, this chapter explores the alterations produced by the pandemic on a specific and central dimension of urban life: Sociability and urban coexistence, examining how do social inequality gaps shape sociability, coexistence, and the relationship between public and private spaces, in the context of confinement. These experiences are illustrated with empirical results coming from participatory research conducted with adolescents during the pandemic.

Experiences of the pandemic and confinement were crossed by multiple inequalities, such as social class, ethnicity, place of residence, gender, age, and domestic roles, among others. Moreover, as several studies suggest, the pandemic even deepened these social inequality gaps (Lustig et al., 2020; Oxfam, 2021). However, the analysis of the social dimensions of care and restrictive measures were relatively scarce, and there was even an underestimation of its centrality from the “techno-expert” vision that initially dominated the management of the crisis (Martuccelli, 2021). The priority was to maintain productivity over the quality of labor relations, comply with the curriculum over the socio-emotional well-being of students and teachers, preserve physical integrity over the social isolation of the elderly, or to discourage physical encounters over the mental health of adolescents and young people, to mention a few examples that demonstrate this underestimation of the socio-emotional dimension of pandemic. In contrast, the sociological perspective we privilege here, highlights the quality of social relations, the practices of encounter with others, uses and articulation of public-private spaces, as essential dimensions of urban life and social and individual wellbeing.

This chapter is organized in four main sections. In the next section, we discuss the concepts of sociability and urban coexistence, its main characteristics in Latin American cities, and how they have been affected by confinement in pandemic times. The second section describes some of the particularities of the Mexican experience. Specifically, we refer to the management of the pandemic and the measures implemented, which were relatively lax in some areas—such as mobility and economic activity—and much less flexible in others, such as education. The third section, on methods and data, describes the youth participatory research conducted with adolescents during the pandemic in Mexico City. The last of these four sections, analyzes some of the changes and tensions observed in urban coexistence, exploring the use and articulation of public and private spaces, especially in low-in-

come groups. We focus on the narratives of adolescents from disadvantaged neighborhoods in the periphery of Mexico City who investigated their own experience of the pandemic and confinement, their homes, and neighborhoods, through diverse audiovisual and written techniques. Finally, the conclusions raise some reflections to think about sociability and social coexistence in the city of the future, and the urgent need to reduce the abysmal social gaps if we do not want to perpetuate the existence of parallel lives and cities between privileged and disadvantaged classes.

## Pre- and Post-Pandemic Patterns of Sociability. The Marks of Inequality

As pointed out previously, the pandemic mainly affected densely populated cities with an intense urban life. Hundreds of thousands of people moving around in different means of transportation, interacting in a plurality of spaces, receiving visitors from different regions, interacting fluidly with other city dwellers known and unknown. To a large extent, this urban dynamism was one of the main drivers of the rapid spread and virulence of the pandemic, and various measures were applied to minimize the “intensity” of urban life, closely linked to sociability and urban coexistence.

According to Giglia (2001), urban sociability refers to the forms of coexistence and face-to-face interaction in the urban environment that regulate encounters between inhabitants (or visitors to the city) in the public space, conceived as the essence of the city. Thus, urban sociability tends to be associated with a particular form of interaction or encounter marked by the recognition of the other (stranger) but, at the same time, maintaining a certain distance and indifference that preserves the anonymity and privacy of everyone; “a *sui generis* mixture of remoteness and proximity, of interest and indifference, that makes possible the peaceful coexistence of different beings” (Giglia, 2001, 803).

However, it is worth noting that public space does not always imply diversity and equality, trust, and respect, associated with forms of encounter and interaction equivalent to civility. Therefore, urban sociability would be better understood as a form—without a predefined or prescriptive content—as the atmosphere or climate shaping the encounters and interactions in public space. In other words, while public space can be characterized by simultaneous recognition and indifference towards the other in certain situations, it is crossed by negative emotions such as distrust, rejection, contempt, and fear, in others. In short, sociability tells us about the quality of social relations.

On the other hand, the notion of co-existence—meaning “living in the company of others”—leads us to question about how people interact in their daily lives, how they treat and relate to others (Bayón, 2017). Its affinity with sociability is remarkable, but this definition presents some nuances that should not go unnoticed. As Segura (2019) points out, social coexistence is a descriptive category that seeks to



objectify, describe, and understand the effective and situated ways in which interactions, negotiations and conflicts occur in heterogeneous and unequal contexts. In other words, coexistence refers to the *ways of being together*, emphasizing a more substantive, physical, and material dimension of interaction; it is affected by the different forms of sociability that permeate interactions, but is not limited to it. It includes conflicts, tensions, solidarities, negotiation, adaptation or subordination, enjoyment, and other practices referred to co-presence itself, to the forms of being together.

In Latin America, as numerous studies have shown, both sociability and urban coexistence have undergone substantial transformations in recent years (Bayón and Saraví, 2013; Carman et al., 2013; Carrión, 2012; Giglia, 2001; Link et al., 2017; Rodgers, 2004; Segura, 2019). In general terms, these transformations are related to a process of social fragmentation in different spheres, that has one of its most eloquent expressions in urban life. Fragmentation implies the weakening, and even the extinction, of shared experiences between different and unequal social sectors and, in their place, the growing conformation and consolidation of differentiated, and socially homogeneous spheres of interaction and coexistence (Bayón, 2017).

In cities, this fragmentation process has been driven by new urbanization patterns characterized by the gentrification of central areas, the emergence and proliferation of gated communities for the upper middle and upper classes in suburban areas, as well as the expansion and densification of increasingly distant deprived peripheries. This residential pattern was also accompanied by a new urban landscape dominated by highways, shopping malls, and different forms of privatization of public spaces. Simultaneous to these patterns that brought many Latin American cities closer to other global cities, urban insecurity also became a distinguishing feature. These processes deepened the weakening of public space, shaping new patterns of encounter and/or avoidance of strangers. Public space became dominated by a sense of fear and insecurity that accentuated the tendency to privatize it, where strangers were viewed (and treated) with fear, distrust and even contempt, opting for withdrawal or the search for socially homogeneous spaces for interaction.

Thus, prior to the pandemic, and associated with the neoliberal turn, Latin American cities had already been experiencing a marked process of fragmentation expressed in the weakening of public space, and new forms of social coexistence (less diverse, more distant, and tense) under new patterns of sociability. In this way, a sort of vicious circle developed: urban changes led the middle and upper classes to withdraw from public spaces to a growing dependence on private transportation, and to socialization in socially homogeneous spaces. This increased social isolation, distrust, othering (i.e., the stigmatization of “others,” associated with the most disadvantaged groups residing in poor peripheries), and the perception of the city as a dangerous space. The city came to be seen as a source of fear: “fear of the other, fear of chaos, fear of the unexpected” (Giglia, 2001, 811).

Previous analysis attempts to highlight that measures of confinement, social distancing, and even isolation, implemented in pandemic times occurred in a context already characterized by separation, fragmentation, and isolation, or in other terms, by the constitution of *parallel lives* between privileged and disadvantaged groups (Bayón, 2017). As Carrión (2012) has observed, in the neoliberal city, public space became a residual space that was configured from the spaces left over once private activities were located. While this weakening of public space meant, at times (not always), the loss of its centrality in urban policies in peripheral areas, it was also eroded in the face of the interests of real estate capital in areas of the central city. However, this weakening did not mean its emptying, as is usually interpreted.

The increasing abandonment of middle and upper middle classes from public space did not mean its emptying, but, on the contrary, made the presence of underprivileged sectors more evident and homogeneous. In the face of privatization, commodification of most spheres of life, and the widening of inequality gaps, public space became even more relevant for working classes. Thus, what increasingly disappeared from public space was its ideal character of coexistence of the heterogeneous, diverse, and even unequal, and, as pointed out in reference to Mexico City, two cities became consolidated: the *open city* of the disadvantaged groups and the *closed or privatized city* of the more affluent sectors (Saraví, 2015).

The pandemic and the measures implemented to contain it represented an urban shock that, at the beginning radically disrupted urban coexistence and sociability and, later, deepened previous trends, although endowing them with new features and nuances. Carrión and Cepeda (2021) point out that the COVID shock gave rise to a *city without citizens*:

...convention centers without meetings, empty soccer stadiums, universities without students, courts without judges, churches without parishioners, stores without shoppers, shopping malls without visitors, buses without passengers, closed airports, stopped constructions, closed factories, abandoned squares and empty streets. They are ghost cities or “non-cities” (Carrión and Cepeda, 2021, 74).

This emptying of the city was one of the first and most striking results of the confinement measures taken in different cities. If in the pre-pandemic period there was a gradual abandonment of public space by the privileged classes, confinement led to a much more generalized and radical abandonment. Cities were empty, they were non-cities. This initial emptying, however, was configured differently as the pandemic spread and prolonged. In other words, although the pandemic meant a sudden break with the previous “normality,” the “new” forms assumed by sociability were intertwined with previous trends associated with urban inequality and fragmentation.

Thus, the emptying of public space (beyond its initial radical nature) was the visible surface of a “ghost city” behind which, little by little, some of these ghosts

became visible. Thus, for example, although the public space was empty, numerous meetings and gatherings of various kinds were identified among the wealthier classes in semi-public or private spaces, continuing the trend towards the privatization and social homogenization of their living spaces. On the other hand, while the central city seemed deserted, lower classes were still present in the local public spaces of their neighborhoods in the periphery of the city, confirming an open city.

In this regard, as previously mentioned, the anti-sociological assumptions of the techno-expert management of the pandemic that prevailed in the world, showed little sensitivity to local contexts (Martucelli, 2021). Generalized measures were applied to the entire population, ignoring, among other aspects, modes of sociability, the difficulty of public institutions to reach certain sectors, the absence of public resources to provide sustained support to informal and independent workers, precarious housing, loneliness or, conversely, overcrowding in reduced spaces, and the different psychological needs of individuals. Behind these measures, a profoundly disembodied conception of individuals prevailed, assuming that the same measures could be applied in the same way everywhere, ignoring the enormous gaps in living, studying, and working conditions between the haves and have nots.

On the other hand, the pandemic triggered what Florida et al. (2021) identify as a widespread trend in urban contexts that they call *social scarring*, a kind of trauma with the social. This phenomenon refers to fears that have been acquired during the pandemic, the most important of which is fear of crowds, fears that can drive citizens to distance themselves and avoid crowded spaces even after the pandemic.

Previously, we referred to the city, and to the pre-pandemic public space as characterized by fear of the other, fear of chaos, fear of the unexpected; now, we should add, fear of contagion. Once again, a general tendency overlaps with others that had already been sedimented in Latin American cities. The pandemic added a new factor of fear of public space and the encounter with strangers, deepening the perception of the city as a dangerous and feared space; “in this time of pandemic public space becomes a cursed space” (Carrión and Cepeda, 2021, 75). Again, the marks of social inequality shaped this fear of the city. Privileged sectors, in terms of employment, income and housing, effectively withdrew from public space, and took refuge in the private sphere, but also in the virtual space for work, education, consumption or entertainment. Lower classes, however, had to face this fear and go back to the streets on which, for many, their livelihood depended. Moreover, the retreat of the middle and upper classes sent to the streets a contingent of precarious workers, considered “essential,” mainly young people, who dared to travel on motorcycles and bicycles (at the service of an application), through a space of danger and contagion, bringing and carrying food, and a wide range of products and various services.

Paradoxically, in the context of #StayAtHome, one of the defining features of many essential jobs was the need for physical co-presence. As Martucelli (2021) observes, the “essential” was precisely what the techno-expert imaginary sought to eradicate during the pandemic, and which somehow seeks to prolong as an ideal of

sociability. Among the “essentials” there was an ample variety of jobs with very different remunerations, qualifications, and status (doctors, nurses, assistants, delivery drivers, garbage collectors, essential businesses, pharmacies, policemen, firemen, etc.). However, beyond this diversity, what was common was precisely the face-to-face character of the activity. It was a great moment of public confession: Many of the lowest paid, most interchangeable, least protected workers, whose jobs were defined—erroneously—as low-skilled, became essential. The proof, as the author points out, that something is wrong in labor hierarchies (Martucelli, 2021, 13).

## Pandemic, Inequality and Urban Fragmentation in Mexico

The management of the pandemic by the Mexican government presented some particularities that must be considered when exploring its impact on cities and urban life in general, and specially on urban disadvantaged sectors, which are the focus of our analysis. In general terms, the policy followed was characterized by a more flexible management of social confinement—with respect to other countries in the region—that relied more on individual willingness to comply than on coercive control by the authorities (starting with the #StayAtHome program), little or no public support to medium and small businesses, and workers to face confinement, and a prolonged suspension of face-to-face activity in public administration, especially in the educational system. Taken as a whole, these measures had uneven effects on social coexistence and public space.

The General Health Council, the highest health authority for the management of the pandemic, was installed on March 19, 2020, and from there the first measures were taken, such as the #StayAtHome program that established social confinement, the suspension of face-to-face classes, and non-essential activities, the cancellation of mass events, while stipulating certain hygiene and care recommendations. Social confinement was implemented as the voluntary limitation of mobility, urging people to remain as long as possible at home, and avoid public spaces; its application was strict only for the elderly and people with comorbidities. Contrary to many other countries, national and international flights were never suspended, nor were controls on local transportation implemented. In contrast, in the educational system, face-to-face classes were suspended as of March 23, 2020, at all levels (from pre-school to university education), affecting close to 33 million children, adolescents and young people. Since then, Mexico has had one of the longest school closures in the world, partially resuming, with irregularities (and resistances), a limited presence only from the school year beginning in August-September 2021. Classroom attendance was replaced by the continuity of distance education (through the #AprendeEnCasa [#LearnAtHome] program in its three versions for the three semesters of suspension), relying mainly on the Internet and the technological platforms and devices available to teachers and students.

In the Latin American context, Mexico had a very peculiar response: on the one hand, it chose not to impose coercive measures and instead preferred to urge the population to voluntarily comply with the proposed measures of social confinement. But on the other hand, no governmental support was implemented to make confinement a viable option for disadvantaged workers. Unlike what happened in other countries in the region, in Mexico, the government refused to increase public spending in 2020 beyond what had already been budgeted, and no public policies were implemented to enable poor or informal sector workers to be confined. Nor was fiscal support implemented to preserve jobs in private companies, or to compensate families who lost their jobs (Barba, 2021; Moreno-Brid, 2020). No new support or income transfer programs were implemented, nor were the existing ones modified to assist those who lost their jobs or suffered severe income reductions beyond advances in payments, for example, in public pensions for the elderly. In fact, the only measures that were taken were: Advance payments for some social programs, loans for micro and small businesses, advance funds to the states for public works in a way that the entire budget could be used, and lower interest rates. In other words, in Mexico, the government did not increase social spending during the pandemic, as many other countries did, and it was considered that the social programs that had been implemented before the arrival of COVID-19 were already sufficient, which denotes a certain relativization of the extraordinary nature of the pandemic (Martínez Hernández and Pérez Martínez, 2021).

One effect of this strategy was that the impacts of the pandemic were markedly unequal in the different social classes, demonstrating conclusively that the most disadvantaged suffered the most intensely. The material dimensions of poverty and inequality are certainly not limited to income levels, but entail access to water and sanitation, health and social protection, food security, housing, and education. Prior to the pandemic, Mexico's social protection system—which includes infrastructure, laboratories, specialized doctors and nurses, and medical supplies—was already fragmented and far from universal coverage. In addition, there is a high prevalence of diabetes and obesity—risk factors for COVID-19—and a shortage of decent housing with sufficient space. In turn, not only does nearly half of the economically active population work in the informal sector without social protection, but most of them are unbanked, which, together with the lack of initiative and political will to implement them, made it difficult to apply temporary basic income schemes for citizens during the health emergency (Moreno-Brid, 2020).

In general terms, despite the enormous gaps in living conditions and opportunities, the government response was dominated by epidemiological considerations that were insensitive to the needs and vulnerabilities of the most disadvantaged population. Therefore, socio-structural factors became strong predictors of the probability of contracting and dying from COVID-19. Indeed, poorer households are more likely to have previous comorbidities, are more exposed in their jobs to

greater physical proximity, to being employed in precarious jobs considered “essential” and to overcrowding in their houses, which makes physical distancing difficult.

In this context, it is not surprising that, when analyzing the sociodemographic profile associated with the risks of COVID-19 in Mexico, Hernández Bringas (2021) finds that low schooling, precarious employment, lack of access to timely medical care, and other markers such as age, gender, and comorbidities, introduce significant distinctions that show a close relationship between structural vulnerabilities and the probability of death. In the logistic regression analysis of risk factors for death from COVID-19 among those infected, the author observes that being male increases the risk by 80 percent; being over 70 years of age multiplies it by 24; being indigenous increases the risk by 53 percent; being hypertensive, by 51 percent; being diabetic, by 89 percent; and being treated in public institutions such as IMSSs or ISSSTE, by 380 percent (Hernández Bringas, 2021).

The lockdown reaffirmed the value of housing as a marker of the social position of its inhabitants in the urban social space, basically through the combination of its physical characteristics and its location in the metropolitan order. In a large metropolis like Mexico City, deprived peripheries, increasingly extended and far from the center, are also far from basic services, such as health services; there is a great shortage of drinking water, and it does not provide its inhabitants with the same security with respect to a “well located” house. The pandemic evidenced the relevance of the neighborhood, that space of proximity in which to satisfy the basic needs of supply, health, security, education, socialization, and recreation. Not only to allow being outside the home and maintaining contact with others, which is an essential element of urban life, but also to avoid the long and exhausting transfers—in conditions of agglomeration—that characterize the experience of the metropolis for most of its inhabitants (Giglia, 2020).

## Methods and Data

Empirical data used in the fourth section comes from a youth participatory research conducted with adolescents during the pandemic in Mexico City. This kind of research is conducted “with” youth around the issues they find most important in their lives, in collaborative, action-based projects that reflect their knowledge and mobilize their desires, attempting to capture the textured realities of young people’s lives (Cammarota and Fine, 2008). Our research intended to explore adolescents’ experiences of the pandemic through their own voices in their own languages and in different products. It was conducted between the end of 2020 and August 2021, when students remained at home taking online classes because schools were closed. Our first contact was a teacher from a high school whom we had met during previous research, which allowed us to build rapport with teachers and school authorities, facilitating the realization of this new project. This high school is located in a municipality on the eastern periphery of Mexico’s City, where about 40 percent



of the population of the metropolitan area resides, which mostly belong to lower-middle and low-income groups.

We conducted several sessions with students from the groups taught by our contact using youth-friendly and accessible digital platforms—generally the same ones they used for their classes, such as Google Meet, WhatsApp, and e-mail. Finally, 61 male and female adolescents, young men and women between the ages of 17 and 19 decided to participate. They voluntarily organized themselves into different teams to develop their research, which was organized in three stages: the selection of a research topic, questions and techniques, the collection and analysis of the material obtained, and the design and elaboration of a final product in which they would express the results in their own languages. Participants addressed various topics related to their social life, emotions and moods, and the experience of the non-face-to-face classes during the pandemic, among others. This chapter is focused on their experiences, family relationships, and the use of public space during the period of confinement in their homes, to account for how urban inequality and fragmentation is expressed in adolescents' everyday life. While participants used various techniques (such as recorded interviews, digital surveys, individual letters, and photographs), which resulted in products such as videos, podcasts, drawings, diaries, stories, photographic exhibition, and rap composition I focus here on the thematic analysis of written materials, basically interviews, letters (from the same participants or requested from others), and rap lyrics, which followed the guidelines of grounded theorizing, starting from some initial basic categories and creating new categories from the empirical information itself in the process of codification. All the names of the adolescents cited in this article are fictitious to ensure confidentiality and anonymity.

## **Urban Coexistence and Public Space in Pandemic Times. Experiences of Adolescents from Disadvantaged Neighborhoods in Mexico City**

Previous sections allow us a better understanding and contextualization of adolescents' experiences. During the first months of the pandemic, when the suspension of classes, of non-essential activities, and of face-to-face work for the elderly or people with comorbidities was decreed, and the government urged voluntary confinement, there was a notable and generalized emptying of public space and social coexistence beyond the private sphere. However, the class fractures that characterize the experience of urban life, that for a short time were less visible in the face of the fear of an unknown virus, slowly began to emerge. In fact, in a profoundly unequal society, and without substantive government support to help alleviate the deprivation not only of the most vulnerable but of the working classes in general, this situation could not last for long, and the subterranean cracks of inequality began to emerge.

All in the same sea, but in a different boat  
Some go by yacht and more than half of them rowing.  
With great need and little money in the bank  
Everyone with cough and flu, and it's not even snowing.

The above lyrics, belongs to the rap *Tardes Grises* (Gray Afternoons), written by an adolescent male from a neighborhood in the eastern periphery of the Metropolitan Zone of Mexico City (ZMCM), eloquently illustrates the profound inequality with which the pandemic was navigated, *some on yachts and others rowing*. More than an emptying, what took place was a reconfiguration of public space.

Among upper and upper-middle classes, the experience of the pandemic was settled down on the pre-existing trends mentioned previously, reinforcing the perception of the city and coexistence with strangers as a danger as well as deepening their strategies of withdrawal from public space, urban life, and even life in the city itself. One of these strategies was a shift from the physical-material city to the virtual city or tele-city (Carrión and Cepeda, 2021). The education of children, adolescents and young people was organized virtually through various platforms; access to the most diverse goods through e-commerce; the consumption of beverages, meals and food through delivery also provided by diverse platforms, which were also used to move around the city; the management of personal finances through home-banking. Even work itself was brought to the home, using ICTs to take the form of teleworking or telecommuting. Again, class inequalities were decisive in making this move to the virtual city possible.

In this regard, some data on the gaps of living conditions of the population in Mexico are compelling: less than a quarter of the employed population (30% in Mexico City) is engaged in activities that can be carried out remotely (Monroy-Gómez-Franco, 2021); online consumption requires mostly credit cards, but 53 percent of adults in Mexico do not even have a bank account and a much higher percentage do not have a credit card (according to data from the Mexican Association of Banks). In addition, access to quality internet and the availability of appropriate devices for carrying out various activities online is far from universal, especially among the poorest: only 44.2 percent of all households have a computer and 4 out of 10 lack internet connection (National Survey on Availability and Use of ICTs in Households, INEGI, 2020). Regarding mobility, it is worth noting that 78 percent of the population in the Metropolitan Area of Mexico City uses public transportation to move around (INEGI, 2017), which suggests that only a minority was able to access safer forms of mobility.

In this sense, the emptying of public space meant an accentuation of its abandonment by the privileged classes that had the means to do so. As in other large cities (Florida et al., 2021), many of them even abandoned the city, moving to their weekend homes in suburban or vacation areas, for shorter or longer periods, making use of the virtual city to study, work, and communicating with family and friends.



In sharp contrast to the advantages available to the privileged groups, lower-income sectors had to face the pandemic in unfavorable conditions that increased the probability of contagion in the absence of governmental support to allow the confinement of precarious workers. We refer to a context in which more than half of the Economic Active Population (57%) is employed in the informal sector, and most of them need to carry out their activities in person. For these sectors, the pandemic and staying at home meant losing their jobs or seeing their income significantly reduced. Some of the adolescents who took part in our participatory research pointed out the tensions and concerns brought about by the pandemic and the consequent precariousness and economic uncertainty it generated in their homes:

Well, at the beginning of the pandemic it was still calm for me and my family, but after 3 months it started to affect us because my grandfather got sick—although he recovered. The problem was that my family began to have economic problems and from there came many more problems and this caused me too much anxiety, sadness, and anguish (Viridiana, 19 years old, letter, February 2021).

During that time of quarantine there were losses in the family, my grandmother and one of my uncles passed away. When I saw my father sad about it, I also felt bad, because we didn't know what else to do to help him to accept things. My parents have been *tianguistas* (street market vendors) for as long as I can remember and they were also affected by this pandemic, because the *tianguis* (street markets) were taken away, we had expenses, pressures because the money was no longer enough (Virginia, 19 years old, letter, January 2021).

...right now, almost nobody has the money or the means to support themselves well, that is, we are just surviving because we have to do it... (Valeria, 18 years old, interview, February 2021).

According to a survey conducted during the pandemic (ENCOVID-19, 2021), the unemployment rate in the informal sector reached 18.7 percent in May 2020, while in the formal sector it was 11.3 percent (by December 2020 it had dropped to 8.1% and 6.2% respectively). Survey results also showed that 47 percent of low-income workers lost their jobs or source of income during the pandemic. This economic situation made it practically unsustainable for broad sectors of the population to leave the public space.

Therefore, pre-existing inequalities shaped changes in urban sociability with strangers, especially with this very large segment of essential and precarious workers. On the one hand, adolescents highlighted the “respect” deserved by those who risked continuing to work to earn an income to support their families. On the other hand, during confinement, upper-middle and upper classes, became extremely distrustful and fearful (of contagion and of their care measures) of strangers who con-

tinued to work, even of those who worked for them providing different services: from domestic workers to deliverers of all kinds of products. In gated condominiums, for example, control and distancing measures were extreme for the personnel providing different services.

Another survey, conducted in January 2021 (Urbina and Mora Salas, 2021) in low-income neighborhoods in two Mexico City municipalities, found that almost 60 percent of those interviewed spent more than seven hours away from home, and concern about the possible economic damage of the pandemic generally prevailed over fear of contagion. However, for residents in disadvantaged neighborhoods, public space is not only associated with income generation. The pandemic, and in particular those measures that urged the confinement of individuals and families in their homes, showed the complexity and diversity that the relationship between public and private space can assume for different segments of the population, and cannot be defined abstractly for the entire city (Carrión and Cepeda, 2021).

Once again, this is a process that builds on previous trends. While the upper and upper middle classes (and some segments of the middle class) had been experiencing a process of disembeddedness from the local territory, the opposite was occurring for the subaltern classes (Bayón and Saraví, 2013; Rodgers, 2004). The local public space, such as streets, corners, squares or soccer fields of the neighborhood, but also public spaces of the central city, constitute areas of sociability and coexistence in the daily life of disadvantaged groups, particularly for young people. It allows us to understand the difficulties that a measure of confinement in the private sphere entailed for the underprivileged. The #StayAtHome meant sacrificing their main spaces for coexistence, recreation, and the development of diverse activities in their daily lives; open public space is, for disadvantaged youth, a space for sociability, entertainment, and enjoyment.

Well, stress, I stress too much... Well, at the beginning when they told you "You can't go out" it was... I am used to walk a lot in the street because... I used to go to high school and see my friends, go out and hang out with them.... then at work I'm used to coexist with a lot of people, too many people, so when this happens and they tell you "You can't go out" "ok, that's fine," but it was weird because if I could go out just for the tortillas or for the water... and it was very weird for me, I felt like a caged lion (Agustín, 17 years old, interview, April 2021).

Agustín's account leads us to reflect on the implications of confinement given the conditions of habitability of low-income housing and its relationship with the public sphere. For affluent classes, the withdrawal from public space and confinement were not only favored by a growing privatization of their spaces of sociability, but also by the facilities and comforts of their housing conditions. In contrast, the precariousness and residential limitations of low-income sectors, public space, especially at the local level, operates as a continuity of private space or an alternative

to counteract its deficiencies. In fact, low-income housing is usually characterized by its small size (especially in apartments and public housing), which implies overcrowding and few possibilities for autonomy among household members, but also, and no less important, by the absence of green areas (gardens or patios), appropriate lighting and ventilation, and furniture and other implements to facilitate the stay at home.

Confinement meant a substantial change in terms of daily routines and family dynamics. The schedules and activities outside home of all members of the household were restricted or altered (especially for children and adolescents without face-to-face classes), which in turn implied new experiences (and negotiations) of coexistence. In large urban conglomerates such as Mexico City, in addition to the long working hours usually experienced by the working class, distance and exhausting commuting hours, force them to leave home too early and return too late, so in their pre-pandemic daily life, family gatherings at home during weekdays were scarce. Confinement altered these daily dynamics, imposing an intense coexistence in reduced spaces for multiple activities.

Well, the truth is that living together with my family has been a little strange because we did not use being together that much, it was not common to see each other every day... at the beginning, yes, it did affect but then it started to be something common (Valeria, 18 years old, interview, February 2021).

It is a bit stressful because there are many of us. In normal times the house was calmer; now it is difficult to live with everyone inside at the same time (Aritz, 17 years old, interview February 2021).

The desynchronization of daily urban rhythms of family members, added to the shortages and limitations of private space, intensified the coexistence at home, generating conflictive atmospheres, boredom, and loss of intimacy.

Being locked up for so long, there are times when living together so much overwhelms you... there are fights and many things... I think that what has affected me the most has been my tolerance... I think it is because of being with the same people all year long and not being able to go out and see other people... it is like being together so much has overwhelmed me (Naomi, 17 years old, interview, April 2021).

In fact, greater coexistence at home, the lack of differentiation of areas for activities of different kinds (i.e., sleeping, studying, dining, or watching TV) and overcrowding, on the one hand increased family tensions and conflicts (including domestic violence) and, on the other, had impacts on the mental health of the members of the household. "There are times when I just go up to the roof to breathe for a while and think about all this," Jennifer told us in one of the interviews, highlight-

ing the importance of having at least a small open space “to breathe.” It is worth mentioning that, paradoxically, the homes and neighborhoods where informal and self-construction predominates, usually have more of this type of space than more recent, and extensive social housing developments, built by private large real estate developers, whose spaces are markedly reduced and designed from a logic of efficiency and profit maximization rather than the welfare of its inhabitants. This possibility of alternating between internal (closed) and external (open) spaces was decisive for coexistence during confinement (Preece et al., 2021) and forces us to rethink future social housing policies and the conditions of habitability needed to guarantee the welfare of its dwellers, beyond having a roof over their heads.

As noted by Giglia (2020), it is necessary to rethink local public space and its relationship with housing. The author highlighted the need to dignify public space in deprived peripheries, locating them closer to housing, designed as meeting spaces where inhabitants can see each other, walk, and talk. Small neighborhood parks, however, are almost nonexistent in Mexico City, as evidenced by the stories of the young people analyzed above.

At the same time, as we have already pointed out, large segments of the lower classes were forced to take to the streets despite the risks of contagion. However, it is also relevant noting that for many of those who were able to remain in their homes, the pandemic gave more visibility to the precariousness and daily hostility of the public space in which they must move daily in megacities such as Mexico City. Thus, despite the multiple economic, housing and socio-emotional difficulties that confinement implied, it had some advantages, basically linked to distances, mobility, and its deficiencies. In this way, staying at home allowed many workers and students to avoid long commuting hours, the costs of transportation, eating outside home, insecurity on public roads and, especially, in public transportation in the periphery. The public space (in certain areas and at certain times) is also particularly hostile to children and adolescents, women, and gender minorities. Thus, confinement resulted, for some of these groups, in the temporary suspension of these tensions. In this regard, far from extolling the virtues of confinement or virtual sociability, this highlighted the weaknesses and precariousness of public space and our practices of coexistence, which can be very hostile for many groups and for different reasons.

## Conclusion

The anti-sociology of confinement presupposed that everyone had the material conditions of habitat to stay at home; that for everyone home is a place of refuge (neglecting domestic violence, but also the multiple difficulties of coexistence of the very different family configurations); that during confinement everyone had the same competencies to occupy their time (erasing different needs and capacities between adolescents and adults, between workers accustomed to more or less sedentary activities, etc.); that everyone could telework or study from home.

In contrast, previous analysis shows that the use of public and private space during the pandemic, as well as its socio-emotional implications, far from following a homogeneous pattern, was deeply marked by the social inequalities that characterize our cities. In this sense, it is worth highlighting two main findings. On the one hand, it has been shown how the pandemic accentuated previous trends and processes related to urban sociability: a growing disembeddedness of urban space and privatization of daily activities by the privileged sectors, and in parallel the growing presence and dependence of the lower classes on public space. On the other hand, we demonstrated the heterogeneity and specificity of the relationship and boundaries between the public and the private spaces in different (micro) scenarios, that in the pre-pandemic imaginary of “normality” were thought as opposing spheres, and which the pandemic made more porous.

These two aspects reflect a deepening of processes already observed in the specialized literature. However, the pandemic and confinement measures also introduced new processes or made them more apparent due to emerging dynamics. Beyond urban inequalities, profound spatial inequalities arose, with significant implications on the forms of coexistence in the city. Previous analysis also revealed profound inequalities between social classes in the virtual space. The possibilities of wealthier classes to move to a “virtual city” to carry out multiple daily activities (education, work, consumption, finance, entertainment, etc.) not only contrasts with the constraints experienced by the lower classes, but also deepens social distancing and disrupts urban coexistence. Many of these virtual practices, initiated or fostered by the pandemic, have been incorporated as “habitual” practices by certain classes in the post pandemic, accentuating the withdrawal from public space.

The pandemic also gave more visibility to inequalities in the private space, specifically of household conditions. These conditions do not refer exclusively to the gaps in housing conditions between the haves and have nots—which proved to be profound and decisive in the experience of the pandemic—but also to intra-class inequalities, in the middle and even lower classes (i.e. having or not an open space, a room of one’s own, a computer at home, natural lighting and ventilation, and so on).

The pandemic and confinement left us both a record of a global and historical crisis marked by anguish and tensions in a context of uncertainty, and many challenges for the future of our cities. This chapter highlighted the importance of revaluating sociability and public space to achieve an urban coexistence based on social justice, solidarity and respect. Policies that favor meeting spaces, empathy with others, and respect for diversity, that ensure public safety and promote a sense of security, that facilitate mobility and at the same time revalue local spaces, and that promote spatial justice, are essential for a better quality of urban life for all.

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# The 2019 Earthquakes in Cotabato, Philippines, and the COVID-19 Pandemic: Consequences of Compounding Traumatic Events on Survivor-Evacuees' Mental Health

Maria Angelika Tolentino Balungay and Melissa Lopez Reyes

This study is contextualized in the compounding traumatic experiences of survivor-evacuees: the destructive earthquakes in Cotabato, Philippines in October 2019, the sudden evacuation from permanent residences, the protracted stay in evacuation camps, and, less than a year after the earthquakes, the COVID-19 pandemic. One hundred twenty-one survivor-evacuees, majority of whom are women and belong to the Manobo indigenous people, answered psychological scales on (a) the post-traumatic stress and growth they experienced and attributed to the earthquakes and evacuation, (b) the ill consequences of the COVID-19 pandemic on their health, livelihood, and living conditions, and (c) their current state of mental health. Results of hierarchical regression analysis indicate that posttraumatic stress and growth predict, respectively, poorer and better mental health. After accounting for the effects of stress and growth, the impact of COVID-19 on the survivor-evacuees' lives predict poorer mental health. This chapter discusses how the monitoring of survivors' sequential and differentiated experiences of compounded disasters can inform the design of mental health intervention in post-disaster operations.

## Introduction

In October 2019, a series of strong earthquakes hit the southern part of Mindanao, Philippines, including the Cotabato Province (Philippine Institute of Volcanology and Seismology, 2019). Among the severely affected areas is Barangay<sup>1</sup> Ilomavis, Kidapawan, a remote community located at the foot of Mount Apo and within the ancestral domain of the Manobo indigenous people. As have usually been experienced by families and individuals living in remote areas, resources for the essentials

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1 The lowest political unit in the Philippines is called "barangay," where government projects and activities are implemented at the community level.



of daily living continue to be scarce in the first years after a severe natural disaster (Geremia, 2019; National Disaster Risk Reduction and Management Council, 2019; Reyna, 2015; Ydstie, 2006).

Even long after a disaster, survivors often find it difficult to reclaim their pre-disaster, economically better living conditions (Freedy et al., 1992; Hobfoll et al., 2007). Survivors displaced from their homes, still with no new stable residence long after the earthquakes, continue to experience shortages of food, water, and necessities and are unable to secure their families' physical security and safety (Ritchie and Tierney, 2011). Prone to natural disasters and with high poverty incidence, the Philippines lacks safety nets and resources for disaster preparedness and post-disaster mitigation and rebuilding and, thus, is unable to assist survivors with their needs (Garcia and Hernandez, 2017; Philippine Statistics Authority, 2019; Reuters, 2016; Zorn, 2018).

The strong tremors left the residents' homes severely if not completely damaged, displacing residents to evacuation camps and forcing them to live temporarily in makeshift houses with some of these mere tents made of tarpaulins (Cadelina-Manar, 2020; Ecosystems Work for Essential Benefits, Inc., 2021). As the earthquake survivors continue to live in evacuation camps, their safety and comfort are compromised. Rates of crimes such as abuse and theft continue to increase; flooding and landslides sometimes occur due to strong winds and heavy rains (Plan International, n.d.; United Nations High Commissioner for Refugees, 2020). Distanced from their places of employment and from the town center where there is easier access to commodities, residents in evacuation camps still have their basic needs unmet (International Federation of Red Cross and Red Crescent Societies, 2021). Unfortunately, the survivors' stay in evacuation camps has become a semi-permanent situation, because their former places of residence have been declared to be disaster-prone and risky for habitation, and permanent housing provisions in government relocation sites have been delayed (Cayon, 2020).

Most of the earthquake survivor-evacuees belong to the indigenous Manobo tribe that inhabits areas of Cotabato (Ethnic Groups Philippines, 2021) and is one of the populous groups of indigenous peoples in the Philippines (Masendo, 2015). Originally from the uplands, the Manobos have adapted to various environments ranging from coastal areas to mountain highlands. They practice animism, have traditionally been warriors, and currently are slash-and-burn farmers and hunters (Ethnic Groups Philippines, 2021). Many Manobos also work as laborers in nearby power plants and construction sites and the women mostly work as househelp. The Manobos' evacuation from their residences brought about significant changes in their daily living, most significantly, the loss of or decrease in income. Already lacking access to most basic living needs even before the earthquakes, the Manobos find it even more difficult to make ends meet in the aftermath of the disaster.

Then, unfortunately, amid their stay in evacuation camps and not long after the earthquakes occurred, the COVID-19 was declared a pandemic. The pandemic and

the consequent lockdowns added to the difficulties they had been facing due to the earthquakes. In this chapter, we analyzed the extent to which survivor-evacuees' mental health was affected, on the one hand, by the posttraumatic stress and growth they acknowledged experiencing after the earthquakes and evacuation and, on the other hand, by the COVID-19 pandemic's ill effects on their health, financial, and social situations.

### **The mental health of earthquake survivor-evacuees**

A substantial number of disaster-exposed individuals experience various mental health problems (Foa et al., 2006; Goldmann and Galea, 2014). A review of studies shows that up to 38 percent of individuals who had experienced disasters developed stress-related and adjustment disorders (North and Pfefferbaum, 2013). Another review of 160 studies shows that depressive and anxiety disorders are common among disaster survivors (Norris et al., 2002). Evacuees have been known to experience clinically significant psychological symptoms, including insomnia, depression, anxiety, and substance abuse (Belleville et al., 2021). Earthquake survivors in residential relocations have experienced depressive symptoms and cognitive deteriorations (Fergusson et al., 2014; Hikichi et al., 2021; Patacca et al., 2021).

### **Posttraumatic stress as a predictor of survivor-evacuees' mental health**

Posttraumatic stress, that is, stress experienced due to and after a traumatic event, has been well-documented (e.g., Norris et al., 2002), including among survivors of earthquakes and other natural disasters (Flynn and Norwood, 2004; Meewisse et al., 2011; Norris et al., 2002) and displaced individuals living indefinitely in evacuation sites (Labarda et al., 2020; Munro et al., 2017; Schwartz et al., 2018; Tsujiuchi et al., 2016).

Posttraumatic stress covers a range of negative yet normal reactions (Flynn and Norwood, 2004; Weiss and Marmar, 1997). Among evacuees, posttraumatic stress is commonly manifested in sleep disturbances, repeated disturbing memories, and feelings of being upset when reminded of the disaster (Belleville et al., 2019). For many survivors of disasters, stress reactions are temporary, lasting for days, weeks, or months (Bonnano, 2004); for some survivors, stress reactions reemerge fleetingly months or even years after the disaster (Hobfoll et al., 2007); still for some other survivors, the experience of stress is much prolonged (Meewisse et al., 2011; Norris et al., 2002). Research shows that posttraumatic stress has occurred among evacuees in temporary shelters some for three months (Belleville et al., 2019), some for twelve months (Belleville et al., 2021; Munro et al., 2017; Tsujiuchi et al., 2016), and even some for 24 months post-disaster (Mills et al., 2007).

The risks associated with posttraumatic stress are heightened when the experience of a series of earthquakes and permanent damage to lands is compounded by

displacement from one's home to live indefinitely in an evacuation camp, where one struggles to meet even the most basic of needs for oneself and one's family (Altindag et al., 2005; Cao et al., 2018; Gray et al., 2004; Harigane et al., 2021; Labarda et al., 2020; Oe et al., 2016; Yzermans et al., 2005). Specifically, survivor-evacuees with posttraumatic stress symptoms face higher risk of experiencing mental health problems, including depression, anxiety, and very low levels of psychological well-being (Chung and Hunt, 2014). Indeed, symptoms of posttraumatic stress have been shown to be predictors or covariates of conditions that lead to, indicate, or aggravate mental health problems: drug use (Kessler et al., 1995), interpersonal problems (Sareen et al., 2014); aggravated pre-disaster family and social issues (Fothergill and Peek, 2004); fear, hopelessness, and worthlessness (Makwana, 2019).

This chapter examines whether the posttraumatic stress that survivor-evacuees attribute to their experiences of post-earthquakes displacement compromises their current state of mental health. It is hypothesized that:

*H1: Survivor-evacuees' posttraumatic stress predicts their current state of mental health, with the direction of the relationship being negative.*

### **Posttraumatic growth as a predictor of survivor-evacuees' mental health**

Even as survivor-evacuees experience posttraumatic stress, their experience of compounded disasters can lead to posttraumatic growth in the form of positive personal changes, such as a keener sense of personal strength, greater appreciation of life, openness to new possibilities, development or strengthening of spirituality, and improved relationships with other people (Cann et al., 2010; Lindstrom et al., 2013; Tedeschi and Calhoun, 2004). Such a positively transformed state may even surpass the person's pre-trauma state (Jackson, 2007).

How could positive personal changes result from untoward, adverse events? It is through people's thinking about their struggles with the traumatic event they have experienced that help them gain a better perspective of themselves and their situation (Joseph and Linley, 2006; Murphy and Joseph, 2013; Schubert et al., 2016). According to posttraumatic growth theory (Calhoun et al., 2010; Linley and Joseph, 2004; Tedeschi et al., 2018; Tedeschi and Calhoun, 2004), traumatic events create the occasion for individuals to question their capacities and even their beliefs and values. It is the re-evaluation and re-appraisal of the meaning of their lives in the face of traumatic events that make posttraumatic growth possible.

Notably, posttraumatic growth is an outcome not of having overcome the trauma itself, much less posttraumatic stress, but of finding meaning in the traumatic event. Achieving posttraumatic growth does not hinge on becoming resistant to the negative psychological outcomes of disasters or on having managed one's survival. What leads to posttraumatic growth is the process of working out crises and hard-

ships and not the success in overcoming them (Calhoun et al., 2010; Tedeschi and Calhoun, 2004).

In this chapter, it is underlined that although growth follows the traumatic event, it does not require the dissipation of posttraumatic stress. The essence of posttraumatic growth is not the alleviation of stress but the new and uplifting sense of personal meaning. Arriving at a positive re-orientation of life is a positive experience that would likely be manifested in improved mental health.

Indeed, posttraumatic growth has been shown to lead to better mental health as evidenced in studies (Gianinazzi et al., 2016; Holtmaat et al., 2017; Yun et al., 2010), albeit there are contrary findings of greater posttraumatic growth associated with poorer mental health (Lowe et al., 2013; Nishi et al., 2010), or of the absence of a relationship (Cormio et al., 2015; Feder et al., 2008). The equivocal evidence that posttraumatic growth leads to better mental health, compared to the consistent evidence that posttraumatic stress leads to worse mental health, could be explained by the fact that the re-evaluation leading to posttraumatic growth centers around a traumatic event. The re-evaluation entails processing the same negative experiences that have been responsible for posttraumatic stress.

Nonetheless, the processing of negative experiences does not fully discount improvements in one's state of mental health. With the potential for growth also comes the possibility of a better state of mental health. For example, individuals who continue to have unmet physical and safety needs have been shown to nevertheless experience a positive sense of well-being (Tay and Diener, 2011). The internal processes that lead to growth may themselves elicit positive affect or emotions. Having good mental health in materially dire situations may occur due to posttraumatic growth.

In addition to examining posttraumatic stress as a predictor of mental health, this chapter examines whether the posttraumatic growth that survivor-evacuees attribute to their experiences of post-earthquakes displacement enhances their current state of mental health. It is hypothesized that:

*H2: Survivor-evacuees' posttraumatic growth predicts their current state of mental health, with the direction of the relationship being positive.*

### **The impact of the COVID-19 pandemic as another predictor of the survivor-evacuees' mental health**

The lives of people around the world have been adversely affected by the COVID-19 pandemic in many ways (Kolahchi et al., 2021; Torales et al., 2020; UNDP, 2020). To prevent the spread of COVID-19, from which a staggering number of people took ill or died, lockdowns and stringent control, quarantine, and health protocols were implemented worldwide. These measures resulted in drastically limited and difficult access to health, education, and other essential needs. Livelihoods were lost

and businesses were bankrupt. Families and communities were forced to live apart or to isolate.

There have been numerous studies on the negative psychological impact of the COVID-19 pandemic on general populations (Cullen et al., 2020; Serafini et al., 2020; Shah et al., 2020; Talevi et al., 2020). A review of these studies (Vindegard and Benros, 2020) has shown that, compared to pre-pandemic levels, there has been a significant decrease in people's levels of psychological well-being and a significant increase in their levels of anxiety and depression.

Compared to studies on the general population, there have been fewer studies on populations that have been experiencing adversities and disasters even before the pandemic started. These compounding disasters, that is, a preexisting one followed by the COVID-19 pandemic, have all the more made these populations vulnerable. They may also have become more marginalized, if both their prior needs and COVID-19-related needs were not being addressed as much as in other sectors (García et al., 2021; Gersons et al., 2020). According to García et al. (2021), the ill consequences of compounding disasters in Puerto Rico, of the pre-COVID-19 economic crisis and the COVID-19 outbreak, worsened adults' health and well-being. The COVID-19 pandemic has even been considered compounded: in itself a disaster, it has given rise to a so-called "second disaster" characterized by financial problems, day-to-day practical challenges, psychosocial difficulties, and emerging complex community concerns (Gersons et al., 2020).

The COVID-19 pandemic started nearly five months after the 2019 earthquakes in Cotabato, the Philippines, when the survivor-evacuees were still living in semi-permanent camps. Two years after the earthquakes (at the time of the study), the survivor-evacuees continued to struggle with poor living conditions in the camps and were experiencing disaster-induced stress and growth in varying degrees. Additionally, the survivor-evacuees had to face the ill effects of the COVID-19 pandemic on health, access to essential needs, and employment. Could the COVID-19 pandemic's ill effects, on top of the disaster-attributed posttraumatic stress and growth, predict mental health? It is hypothesized that:

*H3: The ill consequences of the COVID-19 pandemic on survivor-evacuees' living conditions predict their current state of mental health, with the direction being negative.*

## **The Significance of this Study**

This study is significant in two ways. First, this study can show whether survivor-evacuees' state of mental health in the post-disaster timeline can be enhanced, or at least arrested from worsening. In the wake of a traumatic event, many individuals experience posttraumatic stress, negative yet normal physiological and emotional reactions to the memory of the traumatic event. Even as survivors struggle with stress in the post-disaster timeline, they also try to come to terms with their situ-

ation, finding the underlying meaning in their experience and re-appraising their capacities, beliefs, and values. According to posttraumatic growth theory (Tedeschi and Calhoun, 1996; Tedeschi and Calhoun, 2004), these processes enable survivors to experience growth, evident in positive life outcomes such as appreciation of the adverse things that they have overcome, gratitude for the good things, and a renewed sense of the meaning of life.

This study extends the scope of numerous studies on the COVID-19 pandemic in the general population to a particular or unique population: communities that collectively have been experiencing compounded, continuing adversities with the COVID-19 pandemic being only the latest. This study examines the COVID-19 pandemic not as a singular event but as one more of a series of traumatic events. The compounded adversities may have compromised people's mental health to an extent so marked, it would be of interest to determine whether the pandemic would result only in negligible effects or would exacerbate existing ill effects on mental health.

## Method

The current study was part of a larger study on assessing the survivor-evacuees' perceived needs during the protracted period that they were staying in evacuation camps after experiencing a series of earthquakes.

### Respondents

The participants in the survey-interviews were 121 residents of Barangay Ilomavis, Kidapawan, Cotabato. The participants chosen to participate in the survey-interviews were those who had been residing in the earthquake-hit areas for at least three years prior to the October 2019 earthquakes and who moved to the evacuation camps in the Barangay, where they were still residing at the time of this study (August 2021). One member from the sampled household who was home at the time of data-gathering was invited to participate. If there was more than one household member at home at the time of data-gathering, the respondent was chosen randomly.

The majority of the respondents was female (79%), married or cohabiting (84%), and from the Manobo indigenous people (90%). The mean age of the respondents was 34.5 (SD=12.0). Of the respondents, 53 percent had some secondary education; 33 percent had some elementary education; and 14 percent had some tertiary education. Sixty-seven percent had no jobs; 21 percent had irregular jobs; and 12 percent had regular jobs. Half had a household size of four to six members; 44 percent had a household size of one to three; 6 percent had a household size of seven or more members.



## **Materials**

Originally in English, the scales were translated to Filipino, the language understood by the respondents, with a large majority being adept at it. Translation was done by a public high school teacher and a state university professor, both experts in the Filipino language and proficient in both oral and written English. A collaborative committee approach for evaluating and finalizing the translations (Douglas and Craig, 2006) was used to achieve conceptual equivalence more than literal equivalence (Colina et al., 2017). The review and adjudication of the translations were done together by the authors, consistent with the specification of the collaborative committee approach that these be done by persons familiar with the concepts in the material being translated (Douglas and Craig, 2006).

A scale score is the average of the item scores. For scales with subscales, each subscale score was obtained by averaging item scores; subscale scores were then averaged to obtain the scale score. Higher scores indicate having more of the quality or characteristic being measured by the scale. Item scores of negatively worded items were reverse scored.

### **Mental Health Inventory (MHI-18)**

Mental health was measured using the Mental Health Inventory-18 (Veit and Ware, 1983), a commonly used measure of mental health in general populations, including Filipino samples (Antazo, 2020). The MHI-18 consists of 18 items along four subscales. The psychological distress component has the anxiety, depression, and loss of behavioral control subscales; the psychological well-being component has the positive affect subscale. Respondents indicated how often they experienced a given situation in the past month. They answered on a 4-point Likert-type scale (from 0: "None of the time" to 3: "All of the time").

The MHI-18 shows good reliabilities with a Filipino sample: 0.91 (psychological well-being, 0.91 (psychological distress), and 0.93 (Antazo, 2020). The validity, internal consistency, and cross-cultural applicability of the MHI-18 are supported by the study of Meybodi et al. (2011) of a Farsi version and by the study of Yuvaraj et al. (2016) with medical students in India. The reliability of the MHI-18 is acceptable (Cronbach's Alpha = 0.79) in the present study.

### **Impact of event scale-revised (IES-R)**

Posttraumatic stress was measured using the Impact of Event Scale-Revised (IES-R) (Weiss and Marmar, 1997), a longer version (22 items) of the original 17-item IES (Horowitz and Alvarez, 1979). The IES-R is a commonly used measure of subjective posttraumatic stress but is not meant for diagnostic purposes. It has been administered to individuals who have experienced natural disasters, including floods



and mudslides in Taiwan (Chen et al., 2011) and an earthquake in China (Wu et al., 2015; Xu and Liao, 2011). The IES-R consists of items describing memories, feelings, thoughts, reactions, and adaptive difficulties as a result of an indicated adverse event. It has three subscales: intrusion (i.e., intrusive thoughts), avoidance (i.e., needing to avoid thoughts about the adverse event), and hyperarousal.

Respondents indicated if they experienced in the past seven days the indicated condition as a result of their evacuation and continuing stay in the camp after the October 2019 earthquakes. Respondents answered on a 4-point Likert-type scale (from 0: "Not at all" to 3: "Extremely"). The internal consistency of the IES-R is excellent with a Cronbach's Alpha of 0.91 in this study.

### **Posttraumatic growth inventory-short form (PTGI-SF)**

Posttraumatic growth was measured using the Posttraumatic Growth Inventory-Short Form (PTGI-SF) (Cann et al., 2010), a short form of the original inventory by Tedeschi and Calhoun (1996). The PTGI-SF has been administered to flood-affected individuals in Pakistan (Aslam and Kamal, 2019), earthquake-affected individuals in Chile and Latin America (García and Włodarczyk, 2016), and earthquake-affected health care workers in Japan (Nishi et al., 2016). The PTGI-SF consists of 10 items from five subscales (relating to others, new possibilities, personal strength, spiritual change, and appreciation of life) measuring the positive changes following adversity. Respondents indicated if they experienced the changes indicated as a result of their evacuation and continuing stay in the evacuation camp after the October 2019 earthquakes. Respondents answered the items on a 4-point Likert-type scale (from 0: "Not at all" to 3: "Extremely"). The internal consistency of the PTGI-SF is good with a Cronbach's Alpha of 0.86 in this study.

### **Coronavirus Impact Scale (CIS)**

The impact of COVID-19 was measured using the Coronavirus Impact Scale (CIS) (Stoddard and Kaufman, 2021). The CIS consists of 11 items that describe: untoward changes in one's routine, employment and income, access to food, access to medical and health care, and access to or connection with close relatives and friends; experiences of pandemic-related stress, misunderstanding in the family; and severity of outcomes of COVID-19 illnesses in the family (self, family, close relatives). In the present study, the item on access to mental health treatment was excluded as respondents in the trial run reported the unavailability of mental health services in the area.

Respondents indicated how severely they had experienced the situation as a result of the COVID-19 pandemic. Respondents answered on a 4-point Likert-type scale (from 0: "No change" to 3: "Severe"). The response labels "slightly," "moderate," and "a lot" were followed by a description of the commensurate situation.

The CIS has not been earlier validated due to the rapidity with which it was developed to respond to clinical and research needs due to the COVID-19 pandemic, but it has been used in numerous studies (Stoddard and Kaufman, 2021). In the present study, the reliability of the CIS is low (Cronbach's Alpha = 0.59), which can in part be attributed to the likelihood that a number of the items are not correlated with each other, that is, experiencing an untoward situation does not necessarily mean that the other untoward situations tend to also be experienced (e.g., loss of employment vs. being gravely sick with COVID19 vs. disruptions in routine).

## Procedures

Permission to conduct the study was obtained from the Barangay Ilomavis government, the Kidapawan City government, and the National Commission on Indigenous Peoples. Preliminary visits to the evacuation camps were done by the first author to consult the camp manager regarding the conduct of the survey-interviews and to establish rapport with prospective respondents.

All survey-interviews were done face-to-face by the first author. Since the study was conducted amidst the COVID-19 pandemic, the public health standards set by the Philippine Government's Inter-Agency Task Force for COVID-19 (Provincial Government of Cotabato, 2021) were strictly followed. To the researcher's knowledge, there had not been any incidence of COVID-19 associated with the data-gathering nor had there been a noticeable increase in COVID-19 transmission shortly after the data-gathering.

The informed consent form was explained to and signed by the respondents before the survey-interview, a survey-interview protocol was followed by the researcher, and a debriefing form was used afterward. A distress protocol was also prepared if, during or immediately after the interview, a respondent exhibited acute distress, or had safety concerns, or was likely to pose an imminent danger to oneself or others. None of the respondents expressed distress during or immediately after the interview. Respondents were interviewed individually, with each interview lasting from 30 to 45 minutes. On average, ten respondents were interviewed each day.

The interviewer read the instructions and survey items to the participant, the participant verbally gave the responses, and the interviewer marked these on the survey form. To more readily remember and refer to the response options, respondents were presented with a card where the response options were printed. Interviews were conducted in Filipino as most respondents are fluent in it, although they speak other languages or dialects (Ilocano, Manobo, Bisaya). There were only two instances that the researcher needed to seek the aid of the stand-by local resident to translate some of the terms to Bisayan dialect. The researcher made a follow-up visit to check on and assure the safety and well-being of the respondents. No untoward incidents were reported or observed.

## Results

Double data entry was done to ensure accurate transcriptions of responses from the filled-out survey forms to the spreadsheet. There were no discrepancies between the double entries. The correlations between variables along with their means and standard deviation are shown in Table 1.

**Table 1: Correlations among mental health, posttraumatic stress, posttraumatic growth, and impact of COVID-19**

Variable	<i>M</i>	<i>SD</i>	1	2	3	4
1 Mental health	1.70	0.40	—			
2 Posttraumatic stress	1.46	0.62	-0.34	—		
3 Posttraumatic growth	2.04	0.63	0.26	0.43	—	
4 Impact of COVID-19	1.30	0.31	-0.26	0.46	0.39	—
<i>Notes:</i> <i>M</i> =mean, <i>SD</i> =standard deviation; sample size: <i>N</i> =121; all correlation coefficients are significantly different from 0 at $p < .01$ . <i>Source:</i> Own survey of evacuation camps residents of Barangay Ilomavis, Kidapawan, Cotabato, 2021.						

The study's hypotheses were tested with a hierarchical regression model with mental health as the outcome variable. In the first step of the hierarchical regression, the predictors entered were posttraumatic stress and growth. In the second step, impact of COVID-19 was added as a predictor. Preliminary analyses showed no significant model effects of sex, age, household size, educational attainment, and employment status; thus, these variables were excluded from the model.

### The effects on mental health of posttraumatic stress and growth

The standardized regression coefficients of the predictors at the first and second steps are shown in Table 2.

**Table 2: Regression coefficients of the hierarchical regression model**

Variable	$\beta$	SE	t
Step 1			
Posttraumatic Stress	-0.56**	0.05	-6.69
Posttraumatic Growth	0.50**	0.05	5.93
Step 2			
Posttraumatic Stress	-0.47**	0.06	-5.27
Posttraumatic Growth	0.53**	0.05	6.38
Impact of COVID-19	-0.21*	0.11	-2.46
Notes: $\beta$ = standardized regression coefficients, SE=standard error, t=t-test; sample size: N=121; significance levels: * $p<.05$ , ** $p<.01$ .			
Source: Own survey of evacuation camps residents of Barangay Ilomavis, Kidapawan, Cotabato, 2021.			

As shown in Step 1, posttraumatic stress has a significant, negative effect on mental health,  $\beta=-0.56$ , indicating that greater posttraumatic stress is associated with poorer mental health. Thus, the data support *H1: Survivor-evacuees' posttraumatic stress predicts their current state of mental health, with the direction of the relationship being negative.*

As shown in Step 1, posttraumatic growth has a significant, positive effect on mental health,  $\beta=0.50$ , indicating that greater posttraumatic growth is associated with better mental health. Thus, the data support *H2: Survivor-evacuees' posttraumatic growth predicts their current state of mental health, with the direction of the relationship being positive.*

The percentage of variance in mental health accounted by both posttraumatic stress and growth is significant ( $R^2=32.2\%$ ,  $F(2,118)=28.08$ ,  $p<.01$ ).

### **The effect on mental health of the COVID-19: Impact on living conditions**

The percentage of variance in mental health accounted by posttraumatic stress, posttraumatic growth, and impact of COVID-19 is significant ( $R^2=35.6\%$ ,  $F(3,117)=21.54$ ,  $p<.01$ ). The difference in  $R^2$  between Steps 1 and 2, that is, the percentage of variance in mental health uniquely explained by the impact of COVID-19 is significant ( $R^2=3.4\%$ ,  $F(1,117)=6.04$ ,  $p<0.05$ ). The impact of COVID-19 has a significant, negative effect on mental health ( $\beta=-0.21$ ). Thus, the data support *H3: The ill consequences of the COVID-19 pandemic on survivor-evacuees' living conditions predict*

*their current state of mental health, with the direction being negative.* Thus, *H1*, *H2*, and *H3* are supported by this study's data.

## Discussion

The present study tested whether survivor-evacuees' current state of mental health is predicted, first, by the stress and growth attributed by the survivor-evacuees to their post-earthquakes evacuation and continued stay in the camps and, second, by the health, financial, and social consequences of the COVID-19 pandemic that emerged after. The results of this study suggest that posttraumatic stress and growth compromised and fostered, respectively, the survivor-evacuees' mental health two years after the series of earthquakes and while the COVID-19 pandemic was ongoing. The ill consequences of the COVID-19 pandemic further compromised the survivor evacuees' mental health.

### Posttraumatic stress and growth in the post-disaster timeline

When natural disasters are compounded by displacement from one's home, the risk of posttraumatic stress is heightened (Altindag et al., 2005; Cao et al., 2018; Gray et al., 2004; Labarda et al., 2020). The survivor-evacuees still reported posttraumatic stress even as the recurrence of earthquakes was no longer imminent. The thought of not being able to go back to a home declared as uninhabitable and of staying indefinitely in a camp prolonged the experience of trauma or, at least, served as a lingering marker. Because the living conditions in the camps had not improved even two years after the earthquakes, it is all the more understandable that the survivor-evacuees continued to experience stress.

The Impact of Event Scale-Revised (IES-R), the scale used in this study to measure posttraumatic stress, asks about intrusive thoughts and feelings, irritability, difficulty in concentrating, and the like (Weiss and Marmar, 1997). If not alleviated, these manifestations of stress can elevate to symptoms of anxiety, depression, and psychological distress, all indicative of a poor state of mental health (Veit and Ware, 1983).

As posttraumatic stress has compromised the survivor-evacuees' mental health so has posttraumatic growth helped improve it. While we hypothesized the positive relationship between posttraumatic growth and mental health, we have not hypothesized on the processes through which untoward, adverse events lead to positive psychological changes supportive of mental health. The posttraumatic growth theory posits that after experiencing a traumatic event, the self possesses a keener sense of personal strength developed from an insightful understanding of the impact of the traumatic event on one's life (Lindstrom et al., 2013; Tedeschi and Calhoun, 1996; Tedeschi and Calhoun, 2004). What is important to examine in future studies are the internal processes that lead to survivor-evacuees' posttraumatic

growth. Determining the internal strengths that people develop in enduring adversities would show concrete ways of enhancing mental health.

### **On the temporal sequence of posttraumatic stress and growth**

That stress and growth can happen simultaneously or in close succession is a finding in extant empirical literature (Cao et al., 2018; Chen et al., 2015; Mesidor, 2019). In its assumptions, this study has not specified the temporal much less causal sequence of posttraumatic stress and growth. It has not, for example, specified that stress necessarily happens first and growth second. Rather, this study has taken on the more relaxed assumption that stress and growth both happen post-disaster regardless of temporal sequence. This assumption in itself is sufficient for determining the combined effects of stress and growth on the current state of mental health.

Admittedly, posttraumatic stress may hinder posttraumatic growth and only after stress has been overcome can growth be achieved. With diminished stress, people can better harness their cognitive and psychological capacities to reflect on the traumatic event and appraise their reactions to it, thereby deriving meaning and insight toward growth. Yet, the reversed sequence also is possible: posttraumatic growth leads to overcoming posttraumatic stress and only after growth can stress be definitively reduced. As individuals come to make sense of traumatic events, they resort to newer, better, more adaptive behaviors appropriate to their changed circumstances (Tedeschi and Calhoun, 2004).

This study is not meant to ascertain which is more likely: that posttraumatic stress needs to be overcome for posttraumatic growth to occur or that posttraumatic growth leads to the lessening of posttraumatic stress. The sequences possibly are only two of more variants. With people's differing circumstances and inner capacities, there can be differing temporal sequences and causal pathways involving stress and growth.

How stress and growth play out in the post-disaster timeline can be examined further to determine whether the eventual state of mental health will turn out to be better (or worse). The mechanisms through which stress and growth occur in parallel or in succession, or influence each other, are not evident in this cross-sectional study, but can be revealed in research using longitudinal and cross-lagged panel designs.

### **The COVID-19 pandemic consequences on mental health**

The results of this study indicate that the health, financial, and social ill effects of the COVID-19 pandemic aggravated the survivor-evacuees' state of mental health, suggesting that alleviating these effects would help address survivor-evacuees' mental health concerns. Still, the pandemic's effect on the survivor-evacuees' mental health is small if the effects of posttraumatic stress and growth, emerging earlier

in the post-disaster timeline, are first accounted for. While the COVID-19 impact uniquely accounts for a significant 3.4 percent of the variance in mental health, posttraumatic stress and growth together uniquely account for 28.8 percent of this variance. Thus, even though the COVID-19 pandemic was more recent than the earthquakes and discussed widely in communities and media, when the pervasive effect on mental health of the disaster-attributed stress and growth are considered, the effect of the COVID-19 pandemic becomes less considerable.

This finding suggests that with compounding traumatic events, the effect of the more recent event is not necessarily weightier than that of the earlier event. In the case of the survivor-evacuees in this study, even though the COVID-19 pandemic was much less prevalent in the evacuation camps than in other areas in Cotabato and the rest of the country, the lockdown (travel restrictions, closing of businesses and livelihoods) was not more relaxed. The restrictions in living conditions may not have been perceived by the survivor-evacuees as severe (compared to the general population), because they already had been experiencing such or similar restrictions pre-pandemic in the evacuation camps. Moreover, the survivor-evacuees were already in poor living conditions that the pandemic's impact on the survivor-evacuees' mental health could not have been much more intense.

### **Implications of the study's results to mental health intervention during compounding traumatic events**

This study presents a distinctive context of the literature of trauma: that of compounding traumatic events. In the successive, overlapping traumatic experiences of long duration, the earthquake survivor-evacuees had hardly overcome an earlier adversity, when other adversities came along. The COVID-19 pandemic was only the latest of compounding traumatic events: the severe earthquakes, evacuation, and relocation. That the earthquake survivor-evacuees continued to experience posttraumatic stress nearly two years into the post-disaster timeline was another compounding factor. Another compounding factor was the long-term poverty experienced by the survivor-evacuees on the outset, even before the earthquakes.

Compounded traumatic events are not rare. In developing countries, for example, the frequent occurrence of droughts is compounded by the pandemic, taxing the already scarce resources to address economic stress and malnutrition (Mishra et al., 2021). Gersons et al. (2020) call "the second disaster" the adverse economic, community, and personal adversities that came as a result of the pandemic and that persisted even after the COVID-19 cases had drastically decreased and the lockdown and restrictions were lifted. This "second disaster" was a constellation of problems: health, economic, social, family and community, and, more directly pertinent to mental health, psychological problems of sadness and grief; and lack of sense of safety, collective efficacy, and hope (Gersons et al., 2020).



It is not necessarily the case that the more recent the traumatic event, the greater its effects on mental health. In fact, the ill effects of an earlier event, when not addressed or overcome, may still be the predominant source of survivors' mental health problems. Intervention for the more recent traumatic event should continue to address concerns issuing from the earlier traumatic event. Indeed, it is important to consider the separate effects of the compounding traumatic events, regardless of which is earlier or later. In addressing survivors' stress, for example, it is important to acknowledge its primary source and its multiple or overlapping sources. What can inform the objective and design of intervention programs is to separate and differentiate the psychological effects of the different disasters, including their accompanying circumstances and the survivors' differentiated perspective of and reactions to them. For timely and appropriate intervention, it would be good if its design is informed by the assessment and monitoring of the overlapping mechanisms through which the different disasters influence survivors' mental health.

In addition, this study's conduct of a post-disaster assessment after a long period had elapsed since the first disaster (i.e., the earthquakes) can be evaluated vis-à-vis the extant literature on immediate post-disaster assessment to assess how long mental health support is needed and how it is to be modified over time. That the psychological effects of disasters end as quickly as the disasters end is definitely not a tenable assumption. As efforts to address the effects of compounding traumatic events may not continue over the long haul and may not always be successful, achieving posttraumatic growth likewise may not easily or immediately happen. In the protracted post-disaster timeline, interventions that help people reevaluate the impact of adverse events, use appropriate cognitive and emotional coping strategies, and provide an environment supportive of their psychological needs give the promise of posttraumatic growth and optimal mental health (Yeung et al., 2016).

## Concluding Comments

On the outset, compounding traumatic events may incite in people greater expectations of negative effects; if they experience such effects indefinitely or gravely, then they may be oblivious to positive effects or would not proactively work out their growth. The results of this study, however, underline the tenet of posttraumatic growth theory that despite experiencing adversity and, consequently, posttraumatic stress, individuals can still experience posttraumatic growth and achieve optimal mental health. Individuals in the middle of compounding traumatic events are particularly vulnerable to stress at the same time that they are faced with stark realities that, although seemingly insurmountable, open to the survivors' possibilities for growth and its consequent outcome of enhanced mental health. That mental health can be as good as it can be and even better than one thinks is a helpful consideration in designing and implementing post-disaster intervention.

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# The Effects of COVID-19 Lockdown on Subjective Well-Being in Nigeria

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The aim of this study is to explore the effects of the COVID-19 lockdown on subjective well-being (SWB), in two of three places subjected to federal lockdowns in Nigeria: Lagos and Abuja. A cross-sectional online survey was conducted following the partial lifting of the lockdowns, using a battery of instruments composed of an adapted version of the positive and negative affect scale, satisfaction with life scale, and two general happiness questions. A total of 86 respondents completed the questionnaire. A majority of the respondents (61%) are female, 61% have a postgraduate and 39% have an undergraduate degree. The analysis shows that during lockdown the mean score for negative affect was 12.4 (range: 5 and 25), and positive affect was 17 (range: 5 and 25). The post-lockdown mean score for negative affect was 10 and positive affect was 17.8. There were no statistically significant differences across sex and level of education. The results show that overall levels of SWB in the sample were not affected by the lockdown in the two affected areas. Although post-lockdown's negative effects slightly reduced (2.4%) while positive effects slightly increased (0.7%), the overall mean scores do not reflect a major change in subjective well-being during the two periods.

## Introduction

The outbreak of the coronavirus (COVID-19) and pandemic declaration by the World Health Organization (WHO) in early 2020 led to a slew of containment strategies including hygiene measures, quarantines, self-isolation, mask mandates and, eventually, lockdowns across the world (Ammar et al., 2020). Following weeks of primarily hygiene and masking measures in the country, the Nigerian government announced a farther-reaching response that included the closure of air traffic, ban on interstate travel, compulsory masking in public places, and a federal lockdown in three areas: Abuja (the federal capital), Lagos state (Nigeria's commercial hub) and Ogun state (where the index case was recorded) (Abubakar et al., 2020; Dan-Nwafor et al., 2020). Following this, several state governments across the country also voluntarily declared lockdowns. While intended to reduce the spread of the virus, these restrictive measures also raised concerns about human rights, livelihoods,

mental health, and psychological well-being (Foa et al., 2020; UNDP, 2021; UNECA, 2020; World Bank, 2021). There were also other concerns about the relationship between the lockdowns and reported increases in domestic, and other forms of gender-based, violence (Fawole et al., 2021). Furthermore, the lockdowns were declared during a period of escalating economic, social, and political challenges in the country and an impending recession, heightened insecurity, and high unemployment rates—all of which signaled a potentially severe impact of the lockdown on people's lives (World Bank, 2021).

The impact of the COVID-19-related containment strategies has been of interest to scholars across disciplines and geographies (Abubakar et al., 2022; Greyling et al., 2021; Long, 2021). In Nigeria, lockdown measures had important implications for people's lives because they resulted in restricted economic activities, which affected people's incomes and, in many cases, resulted in job losses and a lack of social connections (UNDP, 2020; UNDP, 2021). It also had reported effects on psychological outcomes such as loneliness, depression, fear, anxiety, and stress (Ibigbami et al., 2021). Research on the impact of COVID-19 has shown varying results across contexts. Surprisingly, but also interestingly, concerns about human health, other objective conditions, and subjective well-being gained significant attention in both the grey and scholarly literature throughout the period since the pandemic (Akorede et al., 2021; Hu et al., 2020). As COVID-19 is a relatively new phenomenon, the literature on its impacts on various aspects of life is still developing. However, an area of interest is the relationship between COVID-19 lockdowns or other restrictive measures and people's perceptions of their well-being.

Various studies have highlighted the impact of lockdown measures on the economic, psychological, and social well-being of individuals and families (Satıcı et al., 2023), food security (Huizar et al., 2020), and livelihoods (Maliszewska et al., 2020) in different countries. These analyses extend beyond the academic literature to include policy analyses, particularly given that much of the focus of governments beyond curbing the spread of the virus was largely economic. For example, there have been discussions on the "recovery" of countries in Africa (World Bank, 2020), which essentially refers to restarting or reinstating economic activities. The emphasis on the economic domain is partly due to the heightened risk of recession globally and within specific countries and regions, especially countries in sub-Saharan Africa where the risk is thought to be greatest due to countries' dependence on primary commodity exports, the associated collapse in prices and the debt profile of countries (World Bank, 2020). Further, studies have also looked at the effect of COVID-19-related restrictions on other aspects of life such as mental health (Olaseni et al., 2020).

While there has been a great deal of interest in the economic and social consequences of these restrictions in Nigeria, there has been limited focus on how the lockdown has affected people's perception of their lives, especially subjective well-

being (SWB), in the affected regions and different population groups within those regions. As countries discuss measures for effective economic recovery, an understanding of the effects that COVID-19 lockdown measures had on subjective well-being is important to enable the development of effective responses that mitigate such effects. Exploring the impacts of the lockdown is also important for understanding its consequences and could aid the development of appropriate policies in response to future public health and other emergencies. This chapter is therefore a contribution to the discourse on the impact of COVID-19 and wider conversations around appropriate, contextually relevant, responses to epidemics, pandemics, and other health emergencies taking into account the varied outcomes that such responses could have beyond health outcomes (Agbo et al., 2012; Farmer, 2020). This chapter is focused on two of the three areas affected by the federally mandated lockdowns in Nigeria from March 30 to May 3, 2020. The chapter will explore the question: *How did the COVID-19 lockdown affect subjective well-being in Abuja and Lagos, Nigeria?*

## COVID-19 Lockdown and Subjective Well-Being

An important area of research in the context of COVID-19 has been psychological well-being. Various studies have been conducted across the world to understand the effects of COVID on mental health, as well as psychological and subjective well-being. These studies have taken a range of approaches including qualitative and quantitative designs like longitudinal and cross-sectional studies and captured timelines that cut across periods before, during, and post-lockdown in different countries. Across these studies, findings are mixed. Some studies found that lockdowns had negative effects on subjective well-being and/or mental health (Akorede et al., 2021; Zhou and Khan, 2021). However, other studies found that subjective well-being was unaffected or improved during lockdown (e.g., Foa et al., 2020). In this section, the relevant literature on COVID-19 and subjective well-being is reviewed.

*A priori*, it is important to define subjective well-being. There are as many definitions of subjective well-being as there are measures of it (Das et al., 2020). In their review, Das and colleagues (2020) found four types of theoretical frameworks used to study the concept namely: fulfilment and engagement theories, personal orientation theories, evaluative theories, and emotional theories. Of these, the most dominant theories are evaluative and emotional or mood theories (see also Proctor, 2014; Tov et al., 2022). Advancing this point of view, subjective well-being is defined as “people’s cognitive and affective evaluations of their lives” (Diener, 2000, 34). Cummins et al. (2009) define it as a normally positive state of mind that involves whole life experience. While sometimes combined, as suggested by Diener’s definition above, the cognitive and affective domains are also individually explored as measures of subjective well-being. From a cognitive perspective, studies have explored people’s level of satisfaction with their lives and measure them using life or

domain satisfaction measures (Pavot and Diener, 2009). An affective view on the other hand explores people's mood states and is assessed using measures of mood states at a given point in time (Das et al., 2020; Watson et al., 1988). An affective perspective is supported by Cummins et al. (2009, 2), who view subjective well-being as "a normally positive state of mind that involves the whole life experience." They further argue that "This implies that it is normal to feel positive about one-self and that such feelings of positivity are not directed to any specific aspect of one's life, but to the experience of life as a whole." For the purposes of this chapter, an affective view of subjective well-being, which explores people's self-reported mood states, is taken.

Several scholars suggest that the COVID-19 lockdown measures had negative effects on different aspects of people's lives. Zhou and Kan (2021) for example found that lockdowns affected income, time use, and subjective well-being across social groups, gender, ethnicity, and educational levels across the three episodes of lockdowns in the United Kingdom. A Nigerian study (Akorede et al., 2021) found that loneliness, depression, and stress were statistically significant factors affecting psychological well-being in the context of the lockdown. Ammar et al. (2020) explored the effects of confinement measures on subjective well-being in an international sample of over 1,000 participants across Africa, Asia, Europe, and the Americas. The study found that these measures had a negative effect on mental health as well as moods and emotions during the lockdown compared to the period before. The authors also reported statistically significant findings across a variety of affective dimensions including feelings of unhappiness, restlessness, loneliness, and lack of composure (Ammar et al., 2020). At an individual item level, lower scores were recorded on positive emotions such as happiness, optimism, feeling useful, feeling close to people, and feeling relaxed (Ammar et al., 2020). Furthermore, Hu et al. (2020) found that the COVID-19 outbreak resulted in lifestyle changes in individuals in China, which in turn affected their subjective well-being levels. A study of middle-aged and older Singaporeans reported large declines in overall life satisfaction and domain satisfaction except for satisfaction with health (Cheng et al., 2020). The study found evidence of heterogeneous effects, with some differences by household wealth and health literacy levels. However, no differences were found by age, gender, or the presence of chronic health conditions (Cheng et al., 2020).

Contrary to the studies cited above, a few found that COVID-19 lockdowns had weak or no effect on subjective well-being. Foa et al. (2020) found that while the pandemic had a negative effect on mental health, the introduction of lockdowns resulted in improvements in subjective well-being and mental health in developed countries. In a study on the effects of COVID-19 on subjective well-being, Shavit et al. (2021) found that people's cognitive assessment of their lives was stable, while negative feelings increased, and positive feelings declined. The papers reviewed for this study included relatively few studies that reported stable or higher subjective well-being, which may indicate that this is an area where further inquiry could benefit the field.



Demographic factors were also observed to affect the relationship between COVID-19 and subjective well-being. For example, Möhring et al. (2021) found that changes in work arrangement to remote and short-term work had lower effects on the subjective work satisfaction of fathers compared to mothers and persons without children. This finding is similar to Zhou and Khan (2021) who reported that women and parents experienced declines in subjective well-being and stress levels during lockdown that were higher than pre-pandemic levels. In Spain, Hidalgo et al.'s (2020) analysis of a panel study of 6,789 participants found that women were more affected by mood changes than men, and a greater increase in mood changes was observed in young people. According to the study, these changes included sadness, depression, anxiety, rage, feelings of unreality, worry, and feelings of happiness, among others. Abreu et al. (2021) explored the correlates between the dimensions of subjective well-being among 10–16-year-olds in an online self-report survey of satisfaction and affective domains in Brazil, Germany, and Luxembourg. The results showed that socio-demographic and intrapersonal factors such as schoolwork and relationships with adults were predictors of subjective well-being and that girls and low-income adolescents were more susceptible to secondary impacts of COVID-19 (Abreu et al., 2021). One study conducted in Australia by Isaac et al. (2021) concluded that factors associated with happiness were older age and having a postgraduate education. Metin et al. (2021) found significant differences according to gender, age, and job status.

Secondary factors including economic and social outcomes were also found to exacerbate subjective well-being and mental health levels during the pandemic and lockdown. Muoghalu and Eboiyehi (2021) found in a qualitative study that many of the interviewees experienced pain and weakness which resulted in despondency and low well-being. Furthermore, the inability of the participants in their study to engage in economic activities contributed to feelings of anxiety, distress, mental exhaustion, insomnia, feelings of uncertainty, fear, panic, depression, and mental disturbance (Muoghalu and Eboiyehi, 2021). Long et al. (2021) found that the degree of stringency of the COVID-19 response was inversely related to health-related quality of life (HRQOL) and mental well-being. Understandably, higher HRQOL was observed in the healthy population compared to those who were ill as illustrated by small positive HRQOL and a strong negative relationship with mental health. One study examining associations between well-being, the impact of COVID-19, psychological distress, and perceived social support by Ibigbami et al. (2021), found that individual psychological characteristics such as low self-perceived impact of COVID-19 were associated with well-being. However, other external factors were also found to affect well-being. In a South African study, Greyling et al. (2021) found that the ban on alcohol sales, a fear of becoming unemployed, and a greater reliance on social media contributed to lower levels of happiness.

While the research on the relationship between COVID-19-related lockdown and subjective well-being is relatively new and growing, it is related to more es-



established research that explores the impact of life events on subjective well-being. Indeed, scholars have been split on the effects of major life events on subjective well-being (Luhmann et al., 2012). Here, while some scholars, under the rubric of hedonic adaptation or set point theories, argue that life events do not have a lasting effect as people revert to the status quo or adapt, other studies (such as Lucas, 2007) have found that significant life events do in fact have lasting effects. COVID-19 can be seen as a never-before-experienced, once-in-a-generation, event. Therefore, should the pandemic and restrictions associated with it be expected to have a lasting effect on people's subjective well-being? The literature on this specific relationship is somewhat unexplored explicitly. Moreover, the lasting effects of COVID-19 and associated lockdowns would only become clearer as scholars explore the topic further. However, the research on life events suggests that given the severity of COVID-19 pandemic, it could have multiple effects on people's lives, including their subjective well-being.

In a study of the effect of 18 different life events on affective and cognitive domains of well-being, Kettlewell et al. (2020) found that injuries, ill health, and monetary loss had an effect on both cognitive and affective domains of well-being, while marriage, retirement, and childbirth had a positive effect on cognitive but not affective well-being. The references to negative outcomes linked to illness, death, and financial loss are central to an understanding of subjective well-being in the context of a major global outbreak such as COVID-19 in Nigeria. Moreover, age differences have not been found to affect the relationship between subjective well-being and life events (Grob, 1995). A further exploration of COVID-19 and its effects on subjective well-being could therefore be theoretically relevant in understanding the impact of life events on subjective well-being and guide the development of appropriate remedies. While the study is focused on the relationship between subjective well-being and COVID-19-related lockdown, the findings would be relevant for studies of life events and related claims on adaptation. It could also have some bearing for a related concept, resilience, which has been used by other scholars to explore the effect of COVID-19 and people's response to it (El-Sahli and Alsamara, 2023).

## **Methodology**

### **Context of COVID-19 in Nigeria**

Nigeria has an estimated population of over 200 million people who are distributed across 36 states and the Federal Capital, Abuja. These states are further grouped under six geopolitical zones namely: North Central, North East, North West, South East, South South, and South West. As previously mentioned, in the wake of the COVID-19 pandemic, a federally mandated lockdown was declared in the Federal Capital (Abuja), and, initially, in two states, Lagos and Ogun, and later a third, Kano. Two of these states, Kano and Lagos, have the highest populations in the country.

Lagos, in the South West, has the highest population at an estimated 22 million people. It is also the gateway to Nigeria, hosting its busiest air and sea ports and serving as the nerve center of commerce and industry. In 2014, during the Ebola disease outbreak in West Africa, the index case arrived in Nigeria through the Lagos airport as was the case with COVID-19 in 2020. The diagnosis of the index case of COVID-19 was however first reported in Ogun state. Ogun is Lagos' neighbor and a major cultural hub in Nigeria. Kano is the second largest state in Nigeria, with an estimated population of 14 million people. Kano is also the nerve center of trade and commerce in northern Nigeria, and it also has an international airport, although with much limited regional and international flights, compared to Lagos and Abuja. Abuja, the federal capital, has a population of approximately four million people. Nigeria has a relatively young population, with 70 percent of its population under the age of 30 and 42 percent below the age of 15 (Akinyemi and Mobolaji, 2022). Scholars have written extensively about Nigeria's relatively young population and its potential to contribute to the country's long-term development if the right investments are made in education and other facets of human development (see Akinyemi and Mobolaji, 2022). Nigeria has over the years been affected by major epidemics, including HIV/AIDS, Ebola and recently a cholera epidemic. Consequently, the population may have developed some kind of resilience or numbness to major pandemics such as COVID-19.

### **Sample and sampling**

Participants were recruited via Twitter, the micro-blogging social media platform, between July 28 and August 4, 2020, using the author's Twitter handle and then reshared or retweeted by several others on the platform. Although the sampling method is self-selective, and included only a certain demographic (urban, upwardly mobile, educated, and young) and therefore homogenous, the aim of the study was not to generate a representative sample or generalizable results, but to produce an exploratory analysis on the effects of the COVID19 lockdown on the respondents' subjective well-being, as a possible indication of how at least a segment of the population of the cities in focus: Lagos and Abuja, had experienced the period of the lockdown.

### **Instruments**

Data were collected using a battery of instruments comprising two general happiness questions, the Positive and Negative Affect Scale (PANAS) (Watson et al.,

1988)<sup>1</sup> and the Satisfaction with Life Scale (SWLS) (Diener et al., 1985). In preparing the instruments for data collection, an initial pilot was conducted with 40 participants that were invited from other cities in Nigeria using the Twitter platform, excluding residents of Lagos and Abuja where the main study was focused. Based on the pilot, some changes were made to the initial questionnaire. For example, the global happiness question was changed from “All things considered, how happy are you with your life?” to “All things considered, how happy are you with your life as a whole these days?” Furthermore, an initial item in the PANAS “guilty” was removed and replaced with “lonely.” The instrument was administered online using Google Forms to design and administer questionnaires.

#### *Positive and negative affect scale*

The PANAS instrument is one of the most widely used measures of affective domains of subjective well-being and was originally developed and validated more than three decades ago (Watson et al., 1988). The instrument consists of a set of mood states representing positive and negative affect. Respondents selected from a five-point scale ranging from 1: “Slightly,” 2: “A little,” 3: “Moderately,” 4: “Quite a bit,” and 5: “Extremely.” While the PANAS manual (Watson and Clark, 1994) contains 60 items equally divided between negative and positive affect, the most widely used is a ten-item version (see for example Thompson, 2007). The authors of the instrument welcome adaptation and use. However, for ethical reasons, this author sought and received permission from the authors in July 2020 to use an adapted form of the instrument, which comprises 10 items equally divided between positive and negative affect items. When completed, subjective well-being scores are computed by summing positive and negative affect items respectively and comparing the scores. Where the positive affect scores are seen to be higher, the individual is reported to have higher levels of subjective well-being (Watson and Clark, 1994).

Respondents in this study were invited to retrospectively complete the PANAS items indicating how they felt during the lockdown and thereafter, how they were feeling at the time of the survey. In the battery of instruments used, only the PANAS items were used in this way, whereas the other instruments were completed at one time point. While a retrospective approach may be subject to recall bias, it was the only option available at the time and is consistent with other studies reviewed (Blome and Augustin, 2016).

#### *Satisfaction with life scale*

The satisfaction with life scale is one of the most widely used measures for assessing satisfaction with life as a whole (Diener et al., 1985). It is a measure of global life

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1 The PANAS instrument was used with the written permission of Watson and colleagues, and the American Psychological Association (APA), who hold the copyright for the scale.

satisfaction and has been used across the world and found to be a valid measure of satisfaction with life (Pavot and Diener, 2009). The measure consists of five questions, developed using a seven-point scale, from 1: “Strongly disagree,” 2: “Disagree,” 3: “Slightly disagree,” 4: “Neither agree nor disagree,” 5: “Slightly agree,” 6: “Agree,” and 7: “Strongly agree.” The satisfaction with life scale has previously been validated among university students in Nigeria and found to possess appropriate psychometric properties (Oladipo and Balogun, 2012). To complement the satisfaction with life scale, two general happiness questions that were included in the initial pilot: “All things considered, how happy are you with your life as a whole these days?” and, “Compared to this time last year, how happy are you with your life?” were included in the survey instrument.

## Results

### Demographic characteristics of respondents

As shown in Table 1, a total of 86 individuals completed the battery of instruments. A majority (60.5%) of the respondents have a postgraduate education, and the remainder have an undergraduate degree. A high proportion of the respondents (60.5%) were female and most respondents were between the ages of 21–30 (45.3%) and 31–40 (44.2%).

**Table 1: Demographic characteristics of respondents**

Characteristic		Frequency	Percentage
Education	Postgraduate	52	60.5
	Undergraduate	34	39.5
Gender	Female	52	60.5
	Male	34	39.5
Location	Abuja	32	37.2
	Lagos	47	54.7
	Other (Abroad)	2	2.3
	Other (Nigeria)	5	5.8
Age	21–30	39	45.3
	31–40	38	44.2
	41–50	8	9.3
	51 and above	1	1.2

Notes: Sample size: N=86.

Source: Own online survey on COVID-19 lockdown and subjective well-being in Lagos and Abuja, Nigeria, 2020.

### Positive and negative affect scale scores

The results presented in Table 2 show the descriptive statistics for individual items contained in the PANAS instrument. As mentioned in the methodology section, the respondents completed the instrument both retrospectively and at the time of the survey. The mean scores for all five negative affect items (distressed, upset, irritable, lonely, and scared) during the lockdown are high, at an average of 2.5 across the five items, indicating an average mood state for the sample. On the other hand, the positive affect items (strong, enthusiastic, inspired, determined, and active) for the period of the lockdown were relatively higher, with an average score of 3.4 across all five items indicating a higher-than-average positive mood. In contrast, the negative affect scores after the lockdown decreased to 2.02 across all items indicating a weak negative mood. The post-lockdown positive affect scores slightly increased to 3.6 across all five items indicating a small improvement in positive mood and a small decrease in negative affect. Results show that across the two time periods, respondents had a higher positive affect on average.

**Table 2: Descriptive statistics of the Positive and Negative Affect Scale (PANAS) items**

PANAS items	During lockdown				After lockdown	
	N	Range	Mean	Standard Deviation	Mean	Standard Deviation
Distressed	86	1–5	2.57	1.203	1.94	1.033
Upset	86	1–5	2.65	1.253	2.00	1.208
Irritable	86	1–5	2.41	1.358	2.01	1.163
Lonely	86	1–5	2.17	1.465	2.02	1.283
Scared	86	1–5	2.73	1.296	2.15	1.223
Strong	86	1–5	3.53	0.942	3.80	1.061
Enthusiastic	86	1–5	2.93	1.225	3.26	1.108
Inspired	86	1–5	3.33	1.297	3.51	1.272
Determined	86	1–5	3.79	1.228	3.90	1.218
Active	86	1–5	3.64	1.126	3.57	1.143

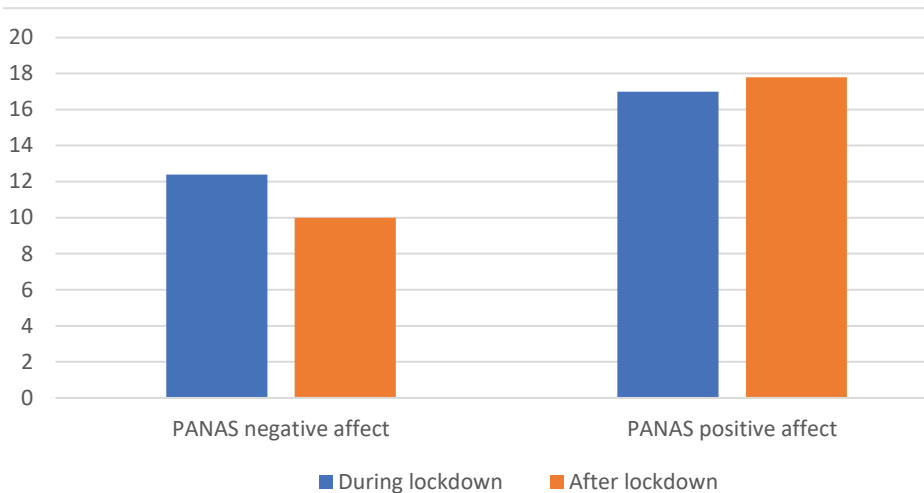
*Notes:* The PANAS items consists of a five-point scale from 1 = “slightly,” 2 = “a little,” 3 = “moderately,” 4 = “quite a bit,” and 5 = “extremely.”

*Source:* Own online survey on COVID-19 lockdown and subjective well-being in Lagos and Abuja, Nigeria, 2020.

### Aggregate scores for positive and negative affect scale items

The above results are further illustrated in Figure 1, which shows the aggregate mean negative affect score during the lockdown was 12.4 (range: 5–25). On the other hand, the aggregate mean positive affect score was 17 (range: 5–25). Furthermore, the aggregate mean negative affect score post-lockdown was 10 (range: 5–25) and the aggregate mean positive score was 17.8 (5–25).

**Figure 1: Aggregate Positive and Negative Affect Scale (PANAS) mean score during and after lockdown**



Notes: Sample size: N=86.

Source: Own online survey on COVID-19 lockdown and subjective well-being in Lagos and Abuja, Nigeria, 2020.

### Effects of lockdown across sex and level of education

There were no statistically significant differences for sex between female and male PANAS aggregate scores during lockdown.<sup>2</sup> Similarly, there were no statistically significant differences for sex during post-lockdown.<sup>3</sup> Furthermore, no statistically

2  $t(-0.590)=74.80, p=.407$ , between females ( $M=29.48, SD=5.61$ ) and males ( $M=30.17, SD=5.16$ ).

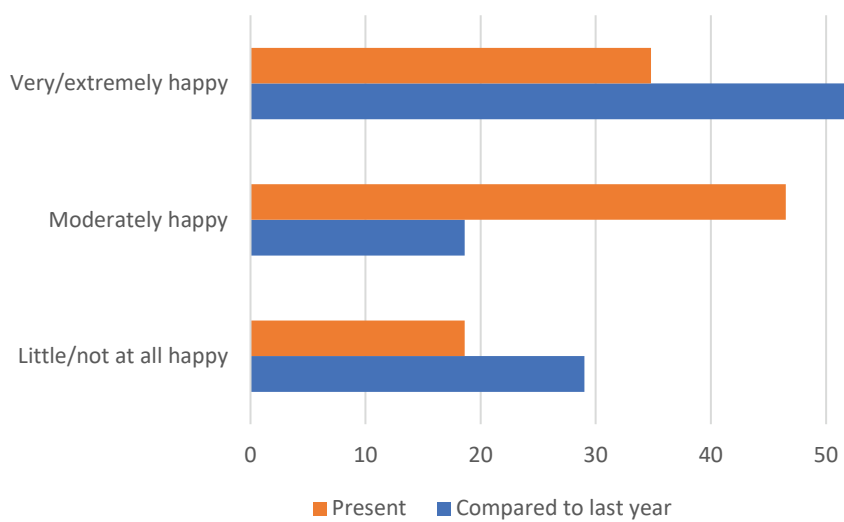
3  $t(-0.995)=72.89, p=.451$ , between females ( $M=27.71, SD=5.34$ ) and males ( $M=28.85, SD=5.11$ ).

significant differences were found for education during the lockdown.<sup>4</sup> Results for the post-lockdown period also show no statistically significant differences for education.<sup>5</sup>

Global happiness

Figure 2 shows the results of the global happiness questions. Almost half (46%) of the respondents at the time of the survey were moderately happy with their lives, 34 percent were very or extremely happy, and 19 percent a little or not happy at all. The proportion increased to 52 percent very or extremely happy and 29 percent a little or not happy at all when compared to the previous year.

Figure 2: Global Happiness Scores (percentages)



Notes: Sample size: N=86.  
Source: Own online survey on COVID-19 lockdown and subjective well-being in Lagos and Abuja, Nigeria, 2020.

4  $t(-0.958)$ ,  $p=.961$ , between respondents with undergraduate ( $M=30.44$ ,  $SD=5.24$ ) and post-graduate ( $M=29.31$ ,  $SD=5.53$ ) qualifications.  
5  $t(1.76)=80.71$ ,  $p=.303$ , between respondents with undergraduate ( $M=29.38$ ,  $SD=4.57$ ) and postgraduate ( $M=27.36$ ,  $SD=5.61$ ) qualifications.



## Satisfaction with life

Aggregate mean life satisfaction was 21 out of a possible 35 points. As shown in Table 3, the mean scores for almost all satisfaction with life scale items are above average, the only exception being the item “If I could live my life over, I would change almost nothing.” The percentage of responses also indicate that across all five items, the majority of respondents slightly agree, agree, or strongly agree with the statements.

**Table 3: Percentage responses for satisfaction with life scale items**

Satisfaction with life scale item	SD (%)	D (%)	SID (%)	NAND (%)	SIA (%)	A (%)	SA (%)	Item Mean
In most ways my life is close to my ideal	4.7	11.6	4.7	9.3	31.4	31.4	7.0	4.7
The conditions of my life are excellent	3.5	9.3	19.8	8.1	33.7	20.9	4.7	4.4
I am satisfied with my life	11.6	9.3	5.8	10.5	30.2	23.3	9.3	4.5
So far I have gotten the important things I want in life	11.6	17.4	11.6	18.6	20.9	17.4	2.3	3.8
If I could live my life over, I would change almost nothing	20.9	15.1	22.1	5.8	17.4	14.0	4.7	3.4

*Notes:* Responses were elicited using a 7-point scale: 1=“strongly disagree” (SD), 2=“disagree” (D), 3=“lightly disagree” (SID), 4=“either agree nor disagree” (NAND), 5=“slightly agree” (SIA), 6=“agree” (A), and 7=“strongly agree” (SA); Sample size: N=86.

*Source:* Own online survey on COVID-19 lockdown and subjective well-being in Lagos and Abuja, Nigeria, 2020.

## Discussion and Conclusions

This study explored the impact of COVID-19 lockdown measures on subjective well-being in Nigeria. The study specifically explored subjective well-being from the perspective of affective states, using the PANAS instrument to retrospectively explore respondents’ moods during lockdown as well as after. The study’s main finding is that positive affect levels were relatively high during the lockdown and increased slightly after the lockdown: although the overall levels of positive affect remained relatively comparable. On the other hand, negative affect levels were low during the lockdown and declined slightly after the lockdown. This indicates that the sample of this study had a high level of subjective well-being during the lockdown and after. This finding is consistent with a study in Israel which found stable assessments of

subjective well-being during the pandemic (Shavit et al., 2021). The finding is interesting, and somewhat counterintuitive, considering, as Shavit et al. (2021) claim, that mood states tend to decline when significant events occur.

The finding offers an opportunity to explore potential explanations for why subjective well-being levels, using affective assessments, are stable in the sample for this study despite the lockdown, whereas, and as shown in the literature review, there were reports of worsening mood states and mental health in Nigeria (e.g., Akorede et al., 2021). In the rest of this section, three potential explanations are offered, in light of the data and the wider literature.

The first is a demographic explanation. The demographic explanation posits that the results are an artefact of the nature of the sample and sampling strategy. As shown earlier in Table 1, the majority of the participants had at least an undergraduate degree, lived in urban areas, or were relatively young. In addition, the sampling process itself ensured that only a certain profile of respondents could be reached: people with access to the internet who either own or have access to a smartphone or laptop that is connected to the internet. This sample already begins to paint the picture of a middle-class respondent pool, who may also have possibilities to work from home in the context of the lockdown and whose jobs may not have been terminated or affected or suspended as a result of the uncertainty associated with the lockdown. If this picture represents reality, it should be, at the least, expected that the conditions that made the lockdown difficult to bear, such as poor living conditions, and the lack of basic amenities and supplies, would not have been a problem for the respondents, thereby reducing their levels of anxiety and concern. Another factor that may be relevant here is age—given the majority of the respondents were relatively young.

The second is a “comfortability” explanation. This explanation stems from the view that the containment measures associated with the lockdown assured respondents of a reduced risk of contracting the virus, which might have been considered by most people to be a greater risk to their well-being (Long et al., 2021). In their analysis, Long et al. (2021) found a positive relationship between lockdown and health-related quality of life and argued that the observed relationship was a reflection of a perception that infection rates decline overall due to lockdown measures. The perceived severity of the pandemic might have been moderated by the lockdown measures taken to contain it or a result of adjusting to the events of the moment. In a study on life events, Kettlewell et al. (2020) suggest that ill health is one of a handful of life events, including loss of money and widowhood, that can have long-term effects. Furthermore, while the overall number of infections was increasing during the lockdown, the containment measures were conveyed as the most effective way to prevent and eventually reduce infection. This might have had an effect on the respondents’ moods at the time of the lockdown and after.

The third is the duration explanation. The duration explanation is based on the length of the lockdown period in Nigeria which was relatively shorter than lock-

downs in some other regions of the world which had much longer periods of severe restrictions—a case in point being Australia. Unlike many other regions, particularly in Europe, Australia and New Zealand, the period of six weeks during which the most severe restrictions were imposed on the regions covered by this study, was significantly curtailed. While overall, some restrictions such as international travel, were extended over several months, the weight of the period following the total lockdown was much less restrictive, particularly following the reopening of interstate travel in July 2020 and the airspace later in the year.

While specific to COVID-19-related lockdown measures in selected cities in Nigeria, the findings of this study have wider implications for the analysis of the relationship between life events and subjective well-being. As the results show, not only were positive affect levels relatively higher, negative affect levels were also much lower than might have been intuitively expected under the circumstances. The post-lockdown results for the positive and negative affect are supported by the scores of the satisfaction with life scale and the general happiness questions, which showed respondents' satisfaction with their lives.

In conclusion, it is worth noting that the findings of this study may be somewhat limited by the methodology, the sampling approach, and the sample. Furthermore, the retrospective responses to the PANAS items may have been affected by recall bias and may limit the generalizability of the findings even within the specific sample. Moreover, this is not a longitudinal study, otherwise, it might have helped to provide data at different time points, including a baseline against which to compare the findings. Another limitation is the absence of data for the satisfaction with life scale or happiness items measuring the period of the lockdown. This might have offered the opportunity to have a study that captures both the cognitive and affective domains of subjective well-being. Nevertheless, the study is consistent with the findings of other researchers both in the context of COVID-19 and wider studies of life events, that major health events may not negatively have an impact on subjective well-being throughout the population. This finding therefore lays the groundwork for further research that may exclusively focus on either the affective or cognitive domains of subjective well-being or a combination of both, in the context of public health and other emergencies.

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# Socioeconomic Stressors Experienced by Students in the Online Learning Process During the COVID-19 Pandemic in Indonesia

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By June 2021, COVID-19 had infected 1.8 million people and caused the death of 50.7 thousand people in Indonesia. Of the many strategies to slow the spread, reducing community mobility and interaction, especially in areas with high transmission rates, was implemented. These strategies impacted on student groups during the pandemic as they had to carry out learning activities from their own homes online. This study aims to look at social stressors in distance learning during the COVID-19 pandemic for 1,691 STIS Statistics Polytechnic students from across the 34 provinces in Indonesia. The results show that most students felt more stressed when they had to do learning activities online rather than offline. Among the 12 provinces in Eastern Indonesia, there are only five provinces where students reported low levels of stress. Based on Binary Logistic Regression analysis, environmental situations, friendships, and decreased parental income are problems that significantly affected student stress in online learning during the COVID-19 pandemic. The situation of the home environment that was not supportive during the COVID-19 pandemic was the biggest problem that was felt during online learning.

## Introduction

As of June 1, 2021, COVID-19 had infected 1.8 million people in Indonesia and caused the death of 50,700 people. With a relatively high spike in cases in some areas since mid-June 2021, the government strengthened policies to reduce the spread of COVID-19, one of which was through reducing mobility and community interaction, especially in areas with high transmission rates (Badan Pusat Statistik (BPS), 2021). The government chose to implement PPKM (Implementation of Restrictions on Social Activities or *Pemberlakuan Pembatasan Kegiatan Masyarakat*) over lockdowns because PPKM pays attention to the conditions of various layers of society in Indonesia, for example, there are groups of poor/vulnerable and rich people in urban and rural communities with different economic capabilities (Mulyadi, 2021).

One part of society that has been affected by the impact of COVID-19 are students, who during the pandemic, carried out learning activities from their homes in

various locations throughout Indonesia. Jannah and Santoso (2021) concluded that when there was a rapid spread of COVID-19 on a large and deadly scale, students experienced stress when learning tasks had to be carried out remotely from their homes. This burden increased when the family's financial situation was affected by government policies in the economic sector. The imposition of restrictions on economic activities for certain hours, work in the non-essential sector being carried out at home and the closure of public areas, public parks, tourist attractions, places of worship, and certain activities that could generate crowds resulted in decreasing income for some and layoffs for others.

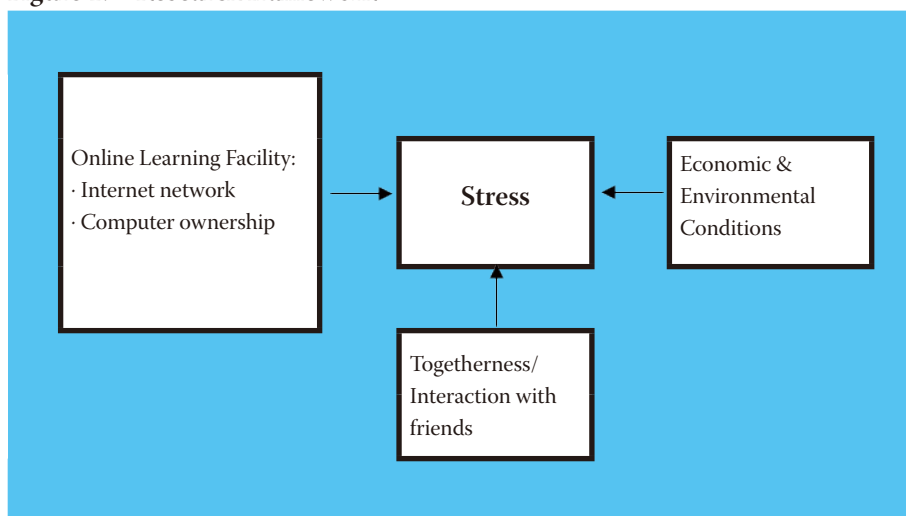
Distance learning has several advantages including flexible study time, and being able to study anytime and anywhere. Nonetheless, there are many challenges faced by students during online distance learning as a result of the spread of COVID-19 including, challenges that are instructional, technical, and technological, environmental limitations at home, emotions, and psychology (Malik and Javed, 2021). Several studies show that online learning caused stress for students compared to traditional classroom learning. There are three factors that triggered stress, namely physiological stressors (illnesses that are difficult to cure or physical disabilities), psychological stressors (jumping thoughts or frustration), and social stressors (relations between individuals, society, or families that are not harmonious) (Siswanto, 2007; Yusuf and Nurihsan, 2006). Stress can affect health by releasing several hormones and increasing heart rates and breathing rates, stress can cause headaches and insomnia, as well as the risk of hypertension, and even digestive disorders.

Many online learning problems can cause stress to students. The problems that are usually experienced are due to not having a suitable place at home to carry out effective learning, not having access to hardware, and not having adequate internet when they are learning at home (Malik and Javed, 2021). Based on the research of Musabiq and Karimah (2018), students generally have more than one stressors with their financial situation having the biggest impact. Stressors faced by students apart from changes in learning methods include economic worries, concerns about the health of their families and themselves, academic delays, limited social interactions, reduced job opportunities, and other factors in students' personal lives (Fauziyyah et al., 2021).

Another problem that arises in distance learning is the lack of interaction with friends and lecturers. During online learning, students can interact with lecturers using a variety of e-learning applications such as Google Classroom, video conference, Zoom, or Whats App, but the online learning system has disadvantages such as a lack of interaction between lecturers and students as well as interaction between students (Bayuningsih and Sidiq, 2022). Long-term distance learning can have psychological impacts, such as social network constraints, difficulty doing group assignments, etc. Stress on students arises when expectations for academic achievement increase, assignments do not match student abilities, problems with

friends, and learning boredom (Riyandi et al., 2018). One of the problems that arose is related to the building of relationships with fellow students through communication and interaction during distance learning. This problem is important because the friendships of teenagers improve their welfare. By adolescence, they believe they need each other to clarify their feelings and ideas (Youniss and Haynie, 1992). At a certain point in friendship development, individuals begin to realize how much they rely on each other for information, critical feedback, and validation (Selman and Schultz, 1990). In distance learning, the sense of togetherness and closeness that exists between students becomes less intense than when lectures are conducted offline and communication takes place physically closer. Therefore this study aims to determine the causes of student stress in the form of social stressors during the COVID-19 pandemic. The causes of stress in this study consist of distance learning facilities, a sense of togetherness with friends, environmental, and financial conditions in the family. The framework of this research is shown in Figure 1.

**Figure 1: Research framework**



Source: Author.

Indonesia consists of two development areas namely the Western Region of Indonesia (KBI) and the Eastern Region of Indonesia (KTI). Based on Regional Infrastructure Development Agency (BPIW, 2017), KBI consists of the islands of Sumatera, Java, and Bali, while KTI consists of the islands of Kalimantan, Sulawesi, Nusa Tenggara, Papua, and Maluku (BPIW, 2017). KTI is a developing area with a relatively low Gross Regional Domestic Product (GRDP) level compared to KBI.

The division of regions in this study is related to the COVID-19 policy when the Java-Bali area was densely populated and the rate of spread of COVID-19 was very high. This is related to the condition of the living environment when there were different mobility restrictions between the West and East Regions.

Apart from being based on regional divisions, this study also compared stress levels based on study programs in the Politeknik Statistika STIS (STIS Statistics Polytechnic), namely the Diploma IV Computing Statistics Study Program, the Diploma IV (D4) Statistics Study Program, and the Diploma III (D3) Statistics Study Program. The difference between the three is that the D3 Statistics program is designed to produce the statistical staff needed by the Indonesian Statistics Center, to be placed in the Eastern Region and other remote areas in the Western Region. At present, the need for graduates of the Politeknik Statistika STIS who have statistical abilities in the Eastern region is very high, but the number of graduates who were born in regions of Eastern Indonesia is still low. Currently, the need for statisticians in Eastern Indonesia is filled by D4 Statistics graduates and D4 Statistical Computations graduates. However, usually, they will propose to move to their home region in the Western Region of Indonesia after working for about four years. This has left the scarcity of statistics graduates in Eastern Indonesia unresolved. One solution is to produce D3 Statistics Program graduates from Eastern Indonesia who will later return to work in their place of origin.

## Methods

The data in this study were obtained from the results of the 2021 Distance Learning evaluation survey conducted at the Politeknik Statistika STIS to determine preferences for types of lectures and problems experienced by students during the COVID-19 pandemic. The characteristics of respondents in this study were active students in semesters one to eight who filled out the questionnaire. A total of 1,691 students from across 34 provinces in Indonesia completed the survey. They were divided into 3 study programs, namely 400 D4 statistical computations study program students, 1,027 D4 Statistics study program students, and 262 D3 statistics study program students.

Filling in the questionnaire was carried out using the Google form in May 2021. The questions were closed questions. This research divides questions into three groups according to research objectives, consisting of:

1. Student characteristics in the form of questions about
  - a. Study Program
  - b. District/city and province where they lived while attending on-line lectures
2. The question used to identify students' stress status, was "feelings of stress when participating in distance learning or online learning compared to face-to-face learning." This question is used to obtain the value of the dependent

variable in the form of Yes and No categorical data. This question measures whether students experience stress (Yes) or do not experience stress when learning online (No).

3. Questions about variables that hypothetically influence student stress when studying online, namely
  - a. facilities that support distance learning activities
    - Availability of laptops/computers, smartphones to support Online Learning,
    - The quality of the internet network at Student's place (Stable, Stable enough, Not Stable)
  - b. perception about parental income and jobs (Decrease, Stable, Increase)
  - c. work/help parents with their work during Online Learning (Yes or No)
  - d. a sense of togetherness with friends during Online Learning.

In addition, the research uses qualitative methods by conducting interviews with five students to obtain an overview of the conditions of students during distance learning.

This research is a mixed methods design consisting of quantitative and qualitative research methods. Quantitative research in this study included cross-tabulation data analysis, Chi-Square analysis, and Binary Logistic regression analysis. To make it easy to interpret the results of the data analysis, they are presented in the form of tables and graphs. Then, to strengthen the argument of the results of quantitative data analysis, we conducted in-depth interviews with several students purposively selected from the sample.

Quantitative analysis in this study uses crosstabulations to see the relationship between two variables. Next, the significance of the relationship was tested using the Chi-Square test. This study used the Chi-Square test to test differences in proportions between populations for certain characteristic values (Supranto, 2016). The next step is using regression analysis to examine the relationship between the independent variables and a dependent variable (Hosmer and Lemeshow, 2000).

Various types of analysis use the regression method, and this study uses binary logistic regression. Binary logistic regression is an analytical method used to explain the relationship between the response variable Y which scales the nominal data of two categories (dichotomous or binary) with the predictor variable X (Hosmer et al., 2013). This is an advantage of the logistic regression method because it can handle many variables with different measurement scales (Hosmer et al., 2013). The important results produced in the Binary Logistic Regression analysis is odds ratio. The odds ratio is a comparison between the odds of a certain category and the reference category in a certain variable (Azen and Walker, 2021). The odds ratio value can be used to interpret the logistic regression equation.

No.	Initials	Gender	Level	Study Program	Province of Origin	Region
1	Rj	Male	IV	D4 Statistika	Kalimantan Timur	Eastern
2	Rf	Male	III	D3 Statistika	Sulawesi Selatan	Eastern
3	Ez	Female	IV	D4 Statistika	Jawa Barat	Western
4	Ds	Female	IV	D4 Statistika	Jawa Tengah	Western
5	Ms	Female	IV	D4 Statistika	Yogyakarta	Western

*Source:* Author.

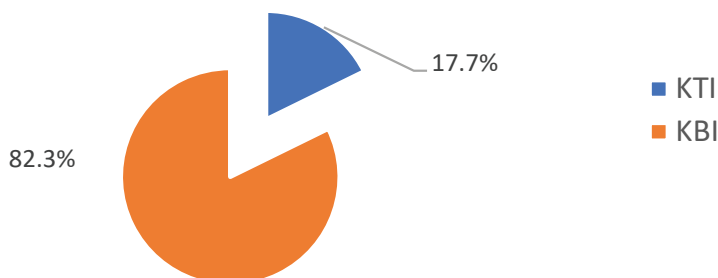


## Results and Discussion

### Residential area, study program and students' stress

The sample included 1,390 students from the Western Region of Indonesia or Kawasan Barat Indonesia (KBI), and 299 students from the Eastern Region of Indonesia or Kawasan Timur Indonesia (KTI). This is not surprising because the Western Region of Indonesia has a much larger population and a higher quality of public education and human resources compared to the Eastern Region of Indonesia. The student selection process is carried out based on the ranking of test scores held by the Politeknik Statistika STIS and it is difficult for high school graduates from Eastern Indonesia to compete with high school graduates from Western Indonesia. In addition, the location of the Statistics Polytechnic campus in Jakarta, West Indonesia is very far from Eastern Indonesia. Therefore, year to year, the number of students from Eastern Indonesia is very small. The graph in Figure 2 shows the percentage of Politeknik Statistika STIS students from KTI and KBI. Only 17.7 percent of participants were from KTI.

Figure 2: Percentage of students based on residence area



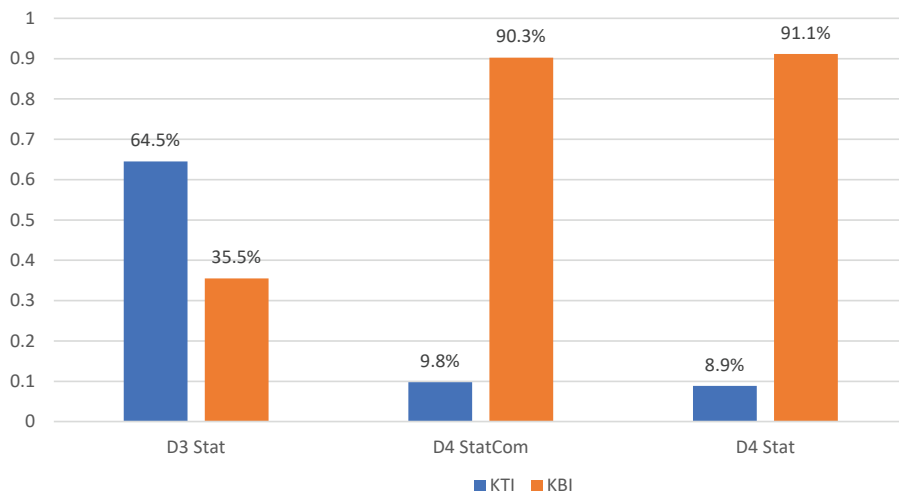
Notes: KBI: Western Region of Indonesia (Kawasan Barat Indonesia), KTI: Eastern Region of Indonesia (Kawasan Timur Indonesia); sample size: N=1,390.

Source: Processed from results of online learning evaluation data Politeknik Statistika STIS, 2021.

Following the government's program to advance the Eastern Region of Indonesia, the Politeknik Statistika STIS opened a Diploma 3 (D3) Statistics Study Program which is only intended for young people who have graduated from high school and are natives of the Eastern Region of Indonesia. Figure 3 shows that 64.5 percent of the D3 Statistics study program students are from the Eastern region of Indonesia. The remaining 35.5 percent of students live in remote or underdeveloped areas in the Western Region of Indonesia.

The proportion of D4 Statistical Computation and D4 Statistics study program students from Eastern Indonesia were very small, namely only 9.8 percent and 8.9 percent respectively. In addition to competition in the process of admitting new students at the Politeknik Statistika STIS, very few high school students from Eastern Indonesia appear to be interested in continuing and registering at the STIS Statistics Polytechnic.

**Figure 3: Percentage of students based on study program and residence area**



*Notes:* KBI: Western Region of Indonesia (Kawasan Barat Indonesia), KTI: Eastern Region of Indonesia (Kawasan Timur Indonesia), D3 Stat: Diploma 3 Statistics study program, D4 StatCom: Diploma 4 Statistical Computation study program, D4 Stat: Diploma 4 Statistics study program; sample size: N=1,390.

*Source:* Processed from results of online learning evaluation data Politeknik Statistika STIS, 2021.

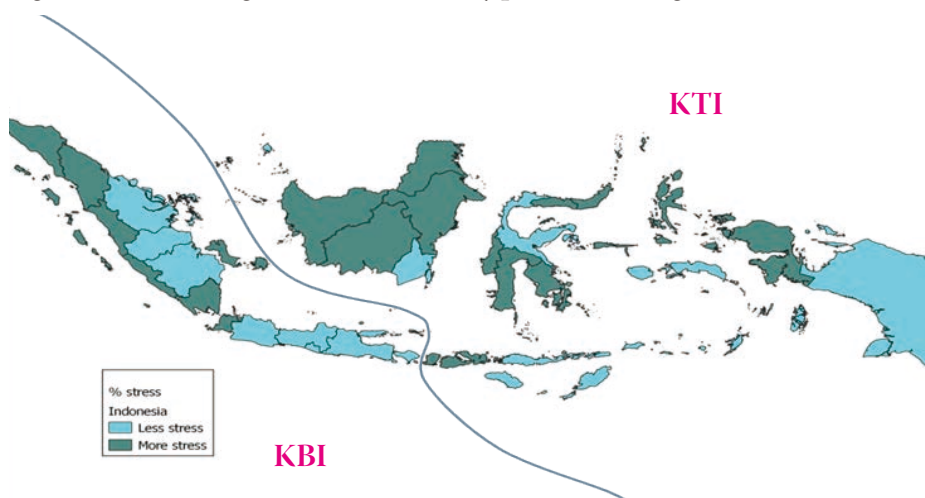
Based on data processing results, most students (66.1 percent) stated that they felt more stressed when they had to study online than when they studied offline. Figure 4 is a map illustrating the percentage of students experiencing stress by province. This map distinguishes the percentage of stress for each province. Provinces with a greater percentage of stressed students are categorized as more stressed and provinces with a smaller percentage of stressed students are categorized as less stressed.

This map divides provinces in Indonesia into Eastern Indonesia (KTI) and Western Indonesia (KBI) regions. Provinces in the Eastern Region of Indonesia have a large area and their population density tends to be lower than that of the Western Region of Indonesia. In addition, the level of development in Eastern Indonesia tends to lag that of Western Indonesia with a lower Human Development

Index (HDI). This has become one of the inhibiting factors for the distance learning process during the COVID-19 pandemic, which required fast adaptation to new activities. Difficulties in communicating with fellow students and with lecturers when experiencing learning problems meant that students in the Eastern Region of Indonesia were more likely to be stressed compared to students from the Western Region of Indonesia.

Almost 69 percent of students in the eastern part of Indonesia experienced stress, whereas 65.6 percent of students in the western region of Indonesia experienced stress. The map in Figure 4 shows that among the 12 provinces in Eastern Indonesia, only five provinces had lower levels of stress than the average, namely South Kalimantan, Papua, Maluku, Central Sulawesi, and East Nusa Tenggara (NTT). Meanwhile, for the West Indonesia region, the number of provinces that

**Figure 4: Percentage of student stress by province of origin**



*Notes:* KBI: Western Region of Indonesia (Kawasan Barat Indonesia), KTI: Eastern Region of Indonesia (Kawasan Timur Indonesia); sample size: N=1,390.

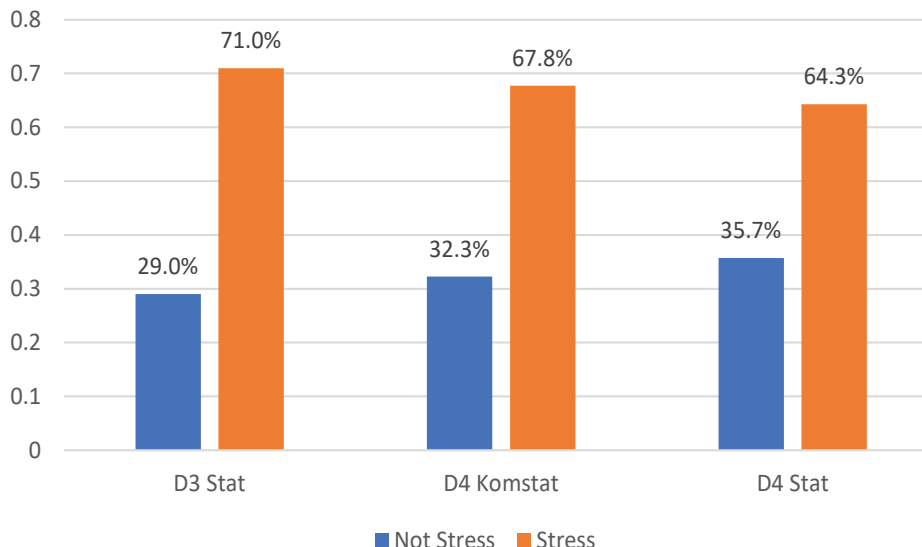
*Source:* Processed from results of online learning evaluation data Politeknik Statistika STIS, 2021.

had a higher level of stress is similar to the number of provinces that had a lower level of stress than the national level of stress.

If divided into a study program, the largest percentage of students who experienced stress studying online were students from the study program of D3 Statistics, 71.0 percent, then D4 Statistical Computation, 67.8 percent, and D4 Statistics, 64.3

percent. The graph in Figure 5 shows the percentage of students experiencing stress according to the study program.

**Figure 5: Percentage of students who feel stress studying online compared to offline during the pandemic period by study program, 2021**



*Notes:* D3 Stat: Diploma 3 Statistics study program, D4 StatCom: Diploma 4 Statistical Computation study program, D4 Stat: Diploma 4 Statistics study program; sample size: N=1,390.

*Source:* Processed from results of online learning evaluation data Politeknik Statistika STIS, 2021.

Figure 5 shows that the Proportion of D3 Statistics study program students experiencing stress is greater than that of the students in the D4 Statistics study program and the D4 Computational Statistics program. To find out whether the percentage or proportion of students experiencing stress is significantly different between study programs, a different proportion test is performed using the Chi-square method. Based on the results of the different proportions test using the Chi-Squares method, the calculation results show a p-value of 0.089 or 8.9 percent. It can be concluded that there is no significant difference in stress between students in each of the study programs. Therefore, it appears that situations that were not conducive to online learning were a stressor for all students. During an interview, a D3 Statistics Study Program student commented:

I feel more stressed when I have to study online at home because while studying, my parents give me assignments such as taking my younger sibling to school. I also con-

centrated less on studying because I was disturbed by loud noises at home. I hope to be able to go back to studying offline on campus so I can focus more on studying (interview with Rf).

There are lots of obstacles that can cause students to become more stressed when they must study online at home. Even though there are several advantages when they study from home such as closeness to their parents, saving money because they do not need to pay for boarding near the Polytechnic or transportation to and from the Polytechnic, more students choose to study offline than online. For some students who live in rural areas and/or are geographically far from cities, online learning facilities are a common obstacle and are often stressful. In addition, there are several problems that occur with online learning activities that create stress including learning facilities such as ownership of learning devices in the form of laptops, computers, cell phones, or poor signal constraints. In addition to the obstacles that students directly experience during online learning, there are problems that indirectly affect online learning during the COVID-19 pandemic such as parents' economic situation, the atmosphere of the living environment, and how they cannot enjoy campus life when they must study from home. The problems experienced during the COVID-19 pandemic added to the burden of students and triggered stress when learning online from home.

### **Online learning facilities**

The facilities needed for online learning activities include the availability of computers/laptops and cell phones. In general, almost all students, 97.2 percent, had personal computers or laptops, 2.6 percent (44 students) borrowed a device, and 0.2 percent (3 students) did not have one. All students have cell phones, so if they do not have personal computers or laptops, online learning activities can only be completed on their cell phones. Owning a personal computer or laptop is very important.

The students who do not have computers or laptops are more likely to experience stress when they have to study online. However, only one person from the D3 Statistics Study Program and two students from the D4 Statistics Study Program did not have a computer. As many as five percent of D3 Statistics Study Program students and two percent of D4 Statistics Study Program students use borrowed computers or laptops.

In addition to ownership of the device used, the condition of the device is also important for online learning activities. This quote is indicative those from several students who experienced problems with the devices they used during learning:

One of the obstacles in online learning is the inadequate quality of the laptop so that when sharing the screen it will result in broken sound (interview with Ds).

Another very important facility required for online learning activities is the availability of the internet. Table 2 shows that 86.7 percent of students had a network that was quite stable, stable, or very stable. While 12.1 percent of students had an unstable network and 1.2 percent had a very unstable network. Based on the study program, the status of the internet network is not very different. Even in Eastern Indonesia, only 11.4 percent of students experience network problems when conducting online learning. The following is a comment from one of the students:

Unable to understand in detail because there is no direct interaction, besides that sometimes it is hampered because the network is not good (interview with Rf).

**Table 2: Percentage of students based on study program and internet network status**

Internet network status	D4 StatCom (%)	D4 Stat (%)	D3 Stat (%)	Total (%)
Stable	35.0	34.7	40.5	35.7
Stable enough	52.0	51.4	48.1	51.0
Unstable	13.0	13.9	11.4	13.3
<b>Total</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>
<i>Notes:</i> D3 Stat: Diploma 3 Statistics study program, D4 StatCom: Diploma 4 Statistical Computation study program, D4 Stat: Diploma 4 Statistics study program; sample size: N=1,390. <i>Source:</i> Processed from results of online learning evaluation data Politeknik Statistika STIS, 2021.				

Even though the percentage of students experiencing network problems is not too large, it disrupts the process of teaching and learning activities and in the long term may make students stressed and lose motivation to study. The following comment was made by a student of the D4 Statistics Study Program who felt stressed during the online learning process when experiencing network problems:

In my opinion, studying online is more stressful. Where I live in the area it is still very difficult to get a good network, the wi-fi doesn't even arrive. So, when I'm online, I'm often out of zoom for long periods of time. Of course, it disturbed my concentration and enthusiasm. Moreover, this happened for about 2 years (interview with Ms).

At that time, I also tried to change providers and it was not uncommon for me to look for networks outside where I live, such as at a relative's house, a friend's house, or in a cafe. However, over time it feels very tiring. I feel like I'm wasting a lot of time and energy on the trip, and of course spending more money on transport and other expenses. Because it happened for quite a long time, I also feel very bored. Enthusiasm is also

reduced. What's more, my house is quite crowded, and the conditions are not calm, so it's hard for me to focus (interview with Ms).

### Parents' economic conditions

Between 12 and 17 percent of students' parents were either not working, had experienced layoffs, or had been laid off during the past week: 14 percent of D4 Statistics students, 16.8 percent of D3 Statistics students, and 12 percent of D4 Statistics Computing students. Job loss was associated with parental income decreasing during the pandemic. Almost half (47.8%) of the D4 Statistics students, 47.3 percent of D3 Statistics students, and 44.2 percent of D4 Statistics Computing students felt that there had been a decrease in their parents' income during COVID-19. This shows that COVID-19 greatly impacted the economic situation of parents. To help ease the family's economic burden, some students worked or helped their parents work during online learning. Just over one-third (34.3%) of D4 Statistics Computing students; 36.8 percent of D4 Statistics students and 43.5% of D3 Statistics students were either working or helping with their parents' work.

**Table 3: Percentage of students based on parents' income situation and students' work activities**

Parents' income	Student helping parents with work		Total
	% No	% Yes	
Not decreasing	61.5	38.5	100
Decreasing	54.9	45.1	100
Constant	65.7	34.3	100

*Notes:* Sample size: N=1,390.  
*Source:* Processed from results of online learning evaluation data Politeknik Statistika STIS, 2021.

To see the link between the impact of the COVID-19 pandemic on family income and the working status of students, a cross-tabulation between parents' income and the working status of students was constructed (see Table 3 for the results) and the Chi-square test was used to see if the relationship between parents' perceptions of income and student employment status is statistically significant at the 0.05 level.

The results of the Chi-square test with a p-value of 0.009 indicate that with  $\alpha < 0.05$  it can be concluded that there is a significant difference between students' perceptions of decreased parental income and student employment status. COVID-19 which hit the world including Indonesia caused many problems, not just on the health side. The impact of COVID-19 has been felt by Indonesian people who have low levels of income and purchasing power, including Politeknik Statistika STIS students. Due to declining incomes during the pandemic, some students worked or



helped their parents work to supplement their income. Based on Table 3, it can be concluded that D3 Statistics program students, most of whom come from Eastern Indonesia, were more likely than Western Indonesian students to be working to help their parents. The results of the independence test between parents' income and students' work activities show that these two variables are significantly related.

When we examined the association between helping parents with their work and levels of stress, we found that those who helped their parents were more likely than those who did not help their parents to report being stressed. Using the Pearson Chi Square Test, the resulting value was 0.047 and with an alpha of 0.05 it could be concluded that there was a significant association between student stress levels and student work status. This means that students who worked to help their parents financially during the COVID-19 pandemic tended to be more stressed than students who did not work.

### A sense of togetherness

One of the problems in distance learning is the lack of interaction with lecturers, friends, or the environment around the campus. One of the students gave the following statement:

Because learning is not carried out face-to-face with lecturers, understanding the material is a little more difficult and interaction is also limited. The environment also has an impact because studying online causes us to be more at home. In my area there are only a few friends from the STIS Statistics Polytechnic campus, so it is very difficult to study together. Whereas on campus all students are around the campus, so it is easier to study together and exchange ideas which create a sense of togetherness among fellow students (interview with Rf).

**Table 4: Percentage of students based on study program and sense of togetherness**

Study program	Sense of togetherness (%)	Environmental situation supports learning (%)
D4 Statistical Computation	51.5	88.5
D4 Statistics	53.8	89.8
D3 Statistics	76.3	90.5
<p><i>Notes:</i> D3 Statistics: Diploma 3 Statistics study program, D4 Statistical Computation: Diploma 4 Statistical Computation study program, D4 Statistics: Diploma 4 Statistics study program; sample size: N=1,390.</p> <p><i>Source:</i> Processed from results of online learning evaluation data Politeknik Statistika STIS, 2021.</p>		

When the survey asked whether students had a sense of togetherness with other students during distance learning during a pandemic. More than 55 percent (57.3%) of students agreed that they had a sense of togetherness and 42.7 percent answered that they did not agree. Even though in general, most students stated that they were together for the lectures during the pandemic, students in the three study programs had different perceptions. Table 4 shows that a larger percentage (76.3%) of D3 Statistics felt together with their fellow students during the pandemic, compared to 51.5 percent of D4 Statistical computations students and 53.8 percent D4 Statistics program students, even though all the lectures were conducted online.

### **Environmental conditions**

Environmental conditions are one of the factors that can support the success of teaching and learning activities. Because online learning activities are carried out at home, a conducive home environment can have an impact on student learning comfort. Ninety percent of students indicated that the environmental situation at home supported the online learning process and only 10 percent of students stated that environmental conditions did not support online learning activities. Based on the study program, D3 Statistics study program students gave the strongest statement regarding the existence of an environmental situation that supports online learning, even though the differences with other study programs are very small.

### **Binary logistic regression analysis**

Furthermore, inferential analysis was carried out to look at the factors that might cause stress to students during a pandemic using the binary logistic regression inference method. Binary logistic regression analysis was carried out with the following stages.

*Test the accuracy/suitability of the model:* The model accuracy or suitability test is used to determine whether the model formed is fit or appropriate to explain stressful events in students. The Chi-square value of the Hosmer and Lemeshow test is 6.610 with a p-value of 0.579. Therefore, the decision that can be taken is to fail to reject  $H_0$ , and it can be concluded that the model formed is fit.

*Simultaneous test:* To produce a statistical model that shows at least one independent variable that simultaneously influences student stress, Omnibus tests of the model were carried out. The results show a significance level of 0.001. So, the decision was taken to reject  $H_0$  with an alpha of five percent, and it can be concluded that there is at least one independent variable that affects the dependent variable. The results are shown in Table 5.

**Table 5: Omnibus tests of model coefficients**

		Chi-square	df	Sig.
Step 1	Step	89.600	5	.001
	Block	89.600	5	.001
	Model	89.600	5	.001
<i>Notes:</i> Sample size: N=1,390. <i>Source:</i> Processed from results of online learning evaluation data Politeknik Statistika STIS, 2021.				

*Estimation of regression:* The result of processing data on the logistic regression analysis consisting of estimation of regression coefficient, standard error, degrees of freedom and odds ratio are shown in Table 6.

The model formed based on the results of binary logistic regression estimation is as follows:

$$Y = -1.728 + 0.773 X_1^* + 0.455 X_2^* + 0.245 X_3 + 0.015 X_4 + 0.271 X_5^*$$

*Note:*

$X_1$  = Environment

$X_2$  = Togetherness

$X_3$  = Computer

$X_4$  = Internet

$X_5$  = Parents' Income

With an alpha of 0.05, the variables that significantly related with students' stress are environmental variables, togetherness, and parents' income. Meanwhile, computer ownership and access/signal to the internet network do not significantly affect student stress when learning online. The results of this research are different from related research which shows that there are differences in stress levels between students who have computers or laptops and students who do not have computers or laptops or access to the hardware (Malik and Javed, 2021). Another non-significant variable is access/signal to the internet network, meaning that there is no difference in students' stress levels whether they have a strong or weak internet signal.

*Odds ratio:* The odds ratio value is used to determine the tendency of each category of the significant variables compared with the reference category. In this study, trend values were only interpreted for significant variables. The following is an interpretation of the trend value of each significant variable.

**Table 6: Determinants of students' stress (estimation of regression coefficient, standard error, degrees of freedom and odds ratio)**

Independent Variable (1)	Category (2)	Coefficient (3)	Standard Error (4)	Wald (5)	Degrees of Freedom (6)	P-Value (7)	Odds Ratio (8)
Environment	Support <sup>(Ref)</sup> Does not support	0.773	0.116	44.154	1	0.001*	2.167
Togetherness	Yes <sup>(Ref)</sup> No	0.455	0.109	17.574	1	0.001*	1.577
Computer	Own <sup>(Ref)</sup> Borrow/ don't have	0.245	0.346	0.500	1	0.480	1.277
Internet	Stable <sup>(Ref)</sup> Not stable	0.015	0.08	0.036	1	0.849	1.015
Parent's income	Not decrease <sup>(Ref)</sup> Decrease	0.271	0.104	6.753	1	0.009*	1.311
Constant	—	-1.728	0.354	23.808	1	0	0.178
<i>Notes:</i> <sup>(Ref)</sup> Reference category in the variable predictor category; * significant on alpha 5%; sample size: N=1,390. <i>Source:</i> Processed from results of online learning evaluation data Politeknik Statistika STIS, 2021.							

### Environment

The coefficient on the environment variable is positive, this means that the lower the environmental support in online learning, the higher the stress level of students. The odds ratio value for the environment variable is 2.167. This value is the greatest odds ratio among others. This indicates the importance of living environments for supporting online learning activities. Non-supportive living environments increase stress two times more than supportive living environments. It also shows that supportive learning environments are very important for online learning activities among other variables. For example, problems with unsupportive living environments such as loud noises disturbing students when an online class is in progress, noises from people in the living home environment, both family and people around, room temperature, etc. One of the students explained the atmosphere in the family as follows:

I am not comfortable studying at home because I had to take care of my younger siblings to school while learning was in progress (Interview with Rf).

My concentration is disturbed because there is a little brother at home. My little brother is a boy, he is still 5 years old and always plays at home with his friends during the day. In addition, there are many distractions from family. When I study and am focused, my concentration is often disturbed because my parents order me around. It's not that I don't want to be ordered around, but there are times when I really need time to not be disturbed. Once during an exam, I was told to buy gas for cooking, so I left my work for a few minutes. There was also once during an exam when there was a guest at home and I was told to make tea in the middle of doing the exam (interview with Ez).

### *Togetherness*

The coefficient value on the togetherness variable is positive, meaning that there is a positive significant relationship between togetherness between students and student stress. Togetherness is important in supporting teaching and learning activities. The odds ratio value for the togetherness variable is quite large, namely 1.577 which indicates that the lack of togetherness will cause an increase in stress by one and a half times compared to if there is togetherness or friendship in teaching and learning activities that are felt when studying online due to distance and mobility restrictions during the COVID-19 pandemic. In online learning activities, some of the students interviewed indicated that a lack of a sense of togetherness caused stress. The following are some student comments about the sense of togetherness that they feel was impacted by online learning:

During the COVID-19 pandemic, the environment sometimes did not support online learning, because there were no campus friends close to home so there were no friends for discussion (interview with Rj).

In my area there are only a few friends from the STIS Statistics Polytechnic campus, so it is very difficult to study together. Meanwhile, if learning is carried out on a campus located in the center of the capital city of DKI Jakarta, all students are around the campus so that it is easier to study together and exchange ideas which create a sense of togetherness among fellow students (interview with Rf).

In my opinion, in terms of friendship during the COVID-19 pandemic, there was very little interaction, both in person and online. There are even friends who don't interact at all when learning online (interview with Ds).

I don't have friends to study or discuss directly when lectures are conducted online. The influence of this friend has a huge impact on me. Because I am the type of person who finds it difficult to concentrate. If my concentration while studying is disturbed, it will be difficult to restore this desire to learn. When I see friends studying diligently, my desire to learn also arises. The conducive conditions in the boarding house with friends

are very supportive for learning, plus if there is something that is not understood or is disturbing, you can immediately discuss it with your boarding house friends. Thus, after considering several things, I think offline learning is more efficient than online learning. Online learning feels heavier and there is a lot of pressure (interview with Ez).

### *Parents' income*

The existence of restrictions on population mobility during the pandemic caused a downturn in the economic sector in Indonesia. This resulted in a decrease in the incomes of student's parents during the pandemic. As explained in the descriptive analysis, the decrease in parents' income caused some students to work to help their parents when they should have been studying. Although this is not directly related to online learning, because students are at home they often cannot refuse when parents ask for help with their work.

I feel more stressed studying online than offline because I am busy helping my parents' business at home. Therefore, I feel I cannot focus on studying from home during the COVID-19 pandemic (interview with Rj).

Parents' income variable is positively significantly related to student stress. When parents' income decreases, there is a tendency for increased stress on students. There is a tendency for students whose parents experienced a decrease in income to experience stress. Students whose parents experienced declining incomes were 1.3 times more likely to experience stress compared to students whose parents did not experience a decrease in income. A student who had a perception that their parents did not experience a decrease in income and did not work to help their family's financial situation still had time to play games with friends every day.

In my opinion, during the COVID-19 pandemic my parents did not experience a decrease in income. I don't work during the pandemic COVID-19 and so my friends. I play games every day with other STIS Statistics Polytechnic friends (interview with Rf).

## **Conclusions and Recommendations**

The results of this study indicate that two-thirds or 66.1 percent of Politeknik Statistika STIS students felt stressed when they experienced prolonged online learning during the COVID-19 pandemic. A greater percentage of stress was experienced by Indonesian students living in the Eastern Region (68.8%) compared with students living in the Western Region (65.6%). This condition was triggered by an environmental situation that did not support online learning activities at their homes. This is in line with research by Jannah and Santoso (2021) which states that the influence of a learning environment at home that is less supportive, such as be-

ing busy, noisy and uncomfortable, also causes boredom in learning. In the long term, this will cause stress in online learning.

The existence of restrictions on mobility and lectures at home causes difficulties for students to interact with other students which is one of the causes of stress for students. In addition, the decline in incomes of student's parents due to restrictions on mobility and economic activities adds to the burden and stress for students. This result is in line with Fauziyyah et al. (2021), and Musabiq and Karimah (2018).

The internet network and ownership status of facilities such as computers, laptops or cellphones were not significantly associated with student stress, and neither was the internet signal. The results align with the research of Alifta and Martha (2023) which states that the data in the research does not show a relationship between the internet network and students' stress levels. Because online lectures have been used for several semesters, students have learned how to control situations that can cause internal stress such as problems with the internet network. Related to Malik and Javed (2021), the distance learning system using the internet has positive impact on distance learning.

Students' ability to adapt to internet technology can be utilized to gain knowledge from anywhere. This research recommends that online learning can be implemented and developed for some students who have home environmental conditions that are conducive to distance learning.

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# Comparative Assessment of the Impact of COVID-19 Pandemic Policy Measures on Small Businesses in Mongolia and Timor-Leste

Manlaibaatar Zagdbazar and Dolgion Aldar

This chapter analyzes the effectiveness of government responses to COVID-19 in Mongolia and Timor-Leste, particularly focusing on micro, small and medium-sized enterprises (MSMEs). We choose these two young democracies for comparison due to their shared vulnerabilities: dependence on mineral resources, susceptibility to external shocks, and limited economic diversification with weak private sectors. Mongolia implemented stricter restriction measures for a longer duration, encompassing most towns and provinces simultaneously. In contrast, Timor-Leste implemented stricter restrictions later and for a relatively shorter period, affecting a limited number of areas. Both countries implemented comprehensive economic stimulus packages which included tax reductions, cash transfers, and loan programs to cushion the private sector, including MSMEs. The comparative review of the effectiveness of pandemic economic stimulus packages on MSMEs' operations, financial situation and workforce suggests that while these financial policies aimed to alleviate the economic burden, they were ultimately ineffective due to improper targeting, a lack of transparency in implementation, and limited access and design of these packages. We emphasize the trade-off between prioritizing public health and mitigating socio-economic impacts. The more evidence-based, phased and targeted approach of Timor-Leste was more effective than the draconian style measures of Mongolia. The chapter also shows that young democracies with weak private sectors struggle more during pandemics.

## Introduction

Mongolia is a lower middle-income, landlocked country located between Russia and China. Mongolia's GDP was 15.3 billion USD and GDP per capita was 4,566 USD in 2021 (World Bank, 2023). In the 1990s, during the transition period, the economy collapsed, with increased unemployment and poverty and the flourishing of the informal economy. Economic and social difficulties lasted until the mid-2000s, when the economy began to recover due to the increase in foreign investment in min-

ing, especially, coal and copper. Unfortunately, the mining boom lasted only a few years, and the economic growth slowed down when commodity prices fell because Mongolia's economy was dependent on mineral resources (World Bank, 2020b). As a result, economic diversification worsened, market concentration increased, and Mongolia became volatile and more vulnerable to external shocks.

Timor-Leste is Asia's youngest nation gaining independence in 2002 after years of resistance and conflict to end the occupation by Indonesia. After more than 20 years of independence, the country has become a lower middle-income free and democratic country. GDP was 1.6 billion USD and GDP per capita was 1,295 USD (World Bank, 2022b). The country's economy, government revenue and expenditure are dependent on income from oil, namely the Petroleum Fund. As reported by the Asian Development Bank, the share of public spending in the annual Gross Domestic Product (GDP) averaged 75 percent between 2017–2021, making the public sector the main contributor to GDP. The public sector is the largest employer in the formal economy and formal jobs in formal businesses mostly cater to demand originating from public spending on infrastructure, transportation and construction (SEFOPE, GDS, and ILO, 2022).

The cases of Mongolia and Timor-Leste are chosen for this study due to their similarities and differences, allowing for qualitative comparative analysis of the COVID-19 policy measures. Similarities include both countries being significantly dependent on natural resources, having high levels of imports, having relatively smaller and younger populations, and having similar political systems, that is, a semi-presidential multi-party representative democracy. Their main difference is that Mongolia is a landlocked developing country while Timor-Leste is a small-island developing state. Each country has unique development challenges that were exacerbated during the COVID-19 pandemic. While sharing many macro-level similarities, the countries implemented contrasting COVID-19 restrictions and policy measures. In Mongolia, the cases per capita were high, citizens' satisfaction with government response was low and trust in government institutions declined. In Timor-Leste, the cases per capita were contained and citizens' satisfaction with the government's response was relatively high. Hence, qualitative comparative analysis will help to understand the main drivers of successes and failures of the COVID-19 policies across these two countries.

This chapter aims to compare the response and recovery measures taken by the governments of Mongolia and Timor-Leste to understand the effectiveness of government measures to reduce the negative impacts of COVID-19 on micro, small, and medium-sized enterprises (MSMEs). SMEs are the backbone of both economies, accounting for the vast majority of enterprises and generating significant formal and informal job opportunities. These jobs are a critical source of income for low-income households and vulnerable groups.

## COVID-19 Context

Since the outbreak of the novel coronavirus in December 2019 in Hubei province, China, the Government of Mongolia took early action by imposing stringent measures, including school closures, restricting public meetings, suspending international flights and closing its borders with China and Russia. These measures resulted in severe decline in international trade (NSO, 2023). Mongolia initiated COVID-19 restriction measures in early January 2020, before the World Health Organization (WHO) declared the outbreak a Public Health Emergency of International Concern on 30 January 2020.

The first imported COVID-19 case in Mongolia was detected on March 10, 2020. As of March 2023, despite the rapid introduction of COVID-19 vaccinations in February 2021 (WHO, 2023b), the country had reported a total of 1,007,900 cases and 2,136 deaths. Figure 1 illustrates the trends in COVID-19 cases, deaths,<sup>1</sup> vaccination progress, and stringency index. Prior to vaccination, daily cases and deaths remained low while the stringency index was high, reflecting stricter movement and activity restrictions. However, a significant rise in cases and deaths occurred in waves since March 2021, coinciding with a decline in stringency measures. This period likely reflects the competing forces of an intensive vaccination campaign and public exhaustion from prolonged restrictions.

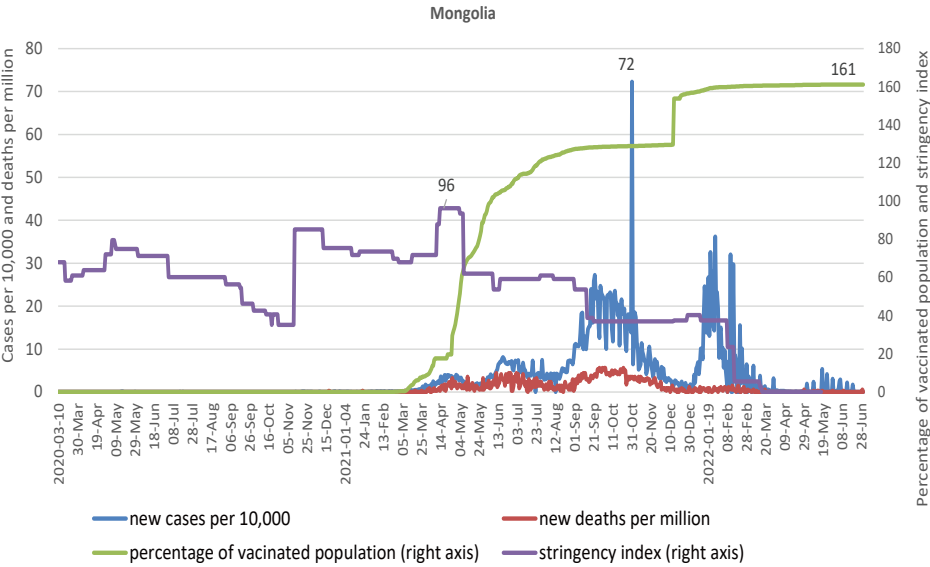
The emergency level was lifted on February 14, 2022, two years after the Government of Mongolia declared a heightened state of preparedness on January 27, 2020. During this period, due to the pandemic, many restrictions were taken, such as restricting interstate passenger and cargo transportation, intercity traffic, closing schools and kindergartens, limiting service office hours, and imposing strict curfews in urban areas. Between November 2020 and May 2021, there were four public lockdowns lasting between one and four weeks.

Timor-Leste had the first positive case of COVID-19 on March 21, 2020. A week later, the National Parliament of Timor-Leste declared a State of Emergency in response to the threat of COVID-19. Accordingly, the Government of Timor-Leste imposed various measures such as domestic and international travel restrictions, physical distancing and the closure of schools. The State of Emergency was continuously extended, one month at a time, until September 2021, with a total lockdown (a health fence) in the capital city, Dili, to curb COVID-19 cases. The nationwide vaccination program against COVID-19 started on April 7, 2021 with a goal of vaccinating the total population by the end of 2021.

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<sup>1</sup> To ensure comparability within the graph, new cases are shown per 10,000 people and deaths per million people. Therefore, although there were daily cases and deaths reported before March 2021, their numbers were very low and appear negligible on the graph.

**Figure 1: COVID-19 cases, deaths, vaccinations and stringency index, Mongolia**

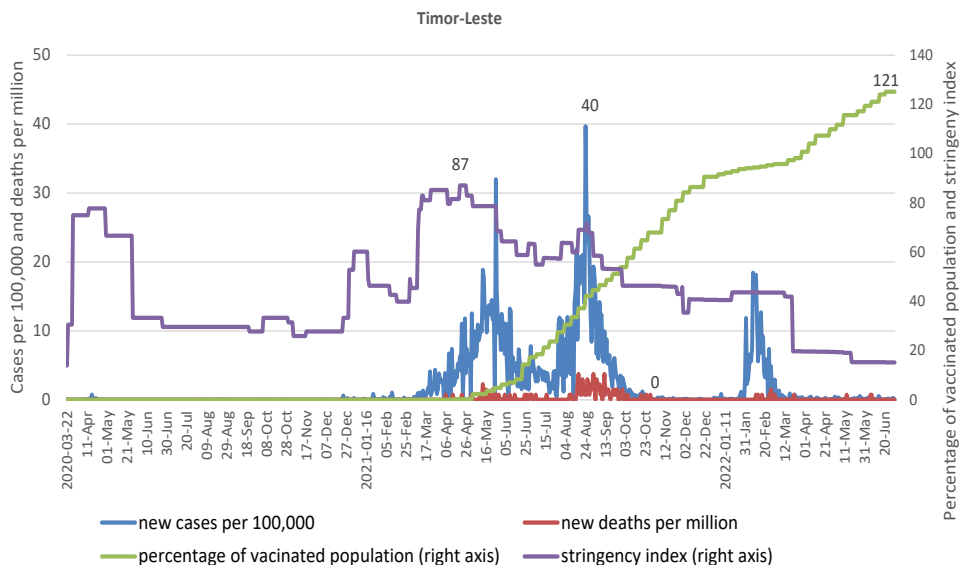


*Notes:* The stringency index varies between 0 and 100 that records the strictness of government policies regarding COVID-19 pandemic (0=lowest strictness, 100=highest strictness).

*Source:* Authors derived the graph from Hale et al. (2021), *Oxford COVID-19 Government Response Tracker*.

As of March 2023, Timor-Leste registered 23,3419 cases of COVID-19 and 138 deaths (WHO, 2023a). Similar to Figure 1 for Mongolia, Figure 2 presents the trends in COVID-19 cases, deaths, vaccination progress, and stringency index in Timor-Leste.<sup>2</sup> Prior to March 2021, the country experienced low levels of daily COVID-19 cases and deaths, with relaxed restrictions or stringency. However, a dramatic rise in cases and deaths followed from March 2021 onwards, with the virus surging in multiple waves. Moreover, compared to Mongolia, vaccination in the country began later and proceeded at a relatively slower pace. These prompted the government to tighten restrictions on movement and activity to control the spread.

2 To ensure comparability within the graph, new cases are shown per 10,000 people and deaths per million people. Therefore, although there were daily cases and deaths reported before March 2021, their numbers were very low and appear negligible on the graph.

**Figure 2: COVID-19 cases, deaths, vaccinations and stringency index, Timor-Leste**

*Notes:* The stringency index varies between 0 and 100 that records the strictness of government policies regarding COVID-19 pandemic (0=lowest strictness, 100=highest strictness).

*Source:* Authors derived the graph from Hale et al. (2021), *Oxford COVID-19 Government Response Tracker*.

In the midst of the pandemic in 2021, Timor-Leste was hit by Cyclone Seroja which caused flash floods and landslides across the country. As reported in the Post-Disaster Needs Assessment (Government of Timor-Leste, World Bank, and UNDP, 2021), a total of 178,621 people living in 31,337 households (including 13,099 households living below the national poverty line) were affected. There were 44 reported fatalities. The floods caused severe damage to critical infrastructure such as roads, bridges, water supply infrastructure, schools, and health facilities (including COVID-19 quarantine and isolation centers) as well as damage to houses, business establishments, and agricultural land. Furthermore, the country was dealing with a political impasse causing a duodecimal budget<sup>3</sup> in 2020 which slowed down public administration and essential services work to continue amidst the pandemic.

<sup>3</sup> This regime allows monthly budget appropriations of up to one-twelfth of the previous year's state budget.



Due to domestic outbreaks, Mongolia tightened its restrictions from the end of 2020 and Timor-Leste from the beginning of 2021. In Mongolia, the uptake of the COVID-19 vaccine was relatively fast in the first half of 2021, while in Timor-Leste, vaccinations started late and progressed slowly. However, during several waves of infections in both countries since mid-2021, the number of COVID cases and deaths per million people in Mongolia were much higher than in Timor-Leste.

## **The Characteristics of Micro, Small and Medium Enterprises in Mongolia and Timor-Leste**

Mongolia's Law on Supporting Small and Medium Enterprises and Service declares that a "small and medium-sized enterprise and service provider" is an enterprise with up to 200 employees and annual sales up to 2.5 billion MNT,<sup>4</sup> and operating in the fields of production, trade, and services. In this law, enterprises are classified as "micro" with up to 10 employees and annual sales up to 300 million MNT; "small" with 10 to 50 employees and annual sales between 300 million and 1 billion MNT; "medium" with 51 to 200 employees and annual sales between 1 to 2.5 billion MNT.

According to the Authority of Small and Medium Enterprises (ASME), in 2020, there were 64,253 MSMEs in Mongolia, accounting for 84.8 percent of all active entities. The MSME sector employed 614,346 workers, representing 52.5 percent of the total workers including public sector workers (ASME, 2022). The vast majority of MSMEs are micro enterprises (79.7% of MSMEs), employing 59.1 percent of the total MSME workforce. Most MSMEs operate in the trade (49.9%) and services sectors (25.7%), followed by construction (10.8%), manufacturing (8.8%) and agriculture (4.7%) (NSO, 2021).

Despite employing a significant number of people, the contribution of MSMEs to the Mongolian economy is relatively low. In 2020, the MSME sector accounted for only 6 percent of GDP and just 3.4 percent of total exports (NSO, 2022b). In rural and remote areas, the contribution of MSMEs is even smaller. This indicates, on one hand, that the productivity of MSMEs is much lower than that of larger enterprises. On the other hand, it shows that the public sector and state-owned enterprises play major roles in the economy, with most economic sectors being highly concentrated. Between 2010 and 2018, the informal economy in Mongolia contributed between 9.2 and 15.7 percent to GDP (NSO, 2020). The informal sector includes self-employed workers, taxi drivers and artisanal and small-scale miners, as well as hidden activities such as tax avoidance.

While in Timor-Leste, the definition of MSMEs remains unclear, with several definitions in use. The common approach is based on the number of employees and income or revenue. In this study, the World Bank definition of MSMEs for

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4 As of February 14, 2023, 1 US Dollar corresponds to 3510 MNT (Mongolian Tugrug).

Timor-Leste is used: Micro enterprises are defined as those with 1–9 employees, small enterprises with 10 to 49 employees and medium businesses have 50 to 100 employees. Large enterprises include those with more than 100 employees (UNDP Timor-Leste and GDS, 2021). According to the World Bank Enterprise Survey in Timor-Leste, the formal sector has been persistently dominated by small and medium firms, which represent 98 percent and 95 percent of all firms surveyed in 2009 and 2015, respectively (Logan et al., 2021). However, in terms of workforce, informal employment accounted for 77.3 percent of all employment. The informal employment rate was distinctly higher for women (80.4%) compared to men (75.3%) (SEFOPE, GDS, and ILO, 2022).

Formal and informal, MSMEs in both Mongolia and Timor-Leste faced vast challenges even before the COVID-19 pandemic. According to the Annual Survey of Mongolian National Chamber of Commerce and Industry (MNCCI, 2021), the most pressing challenges for MSMEs have been higher interest rates and shorter term loans, unstable government policies on business environment, widespread corruption, high tax rates (e.g. corporate income tax, value added tax), and bureaucracy in government agencies and poor service in public services. In Timor-Leste, MSMEs faced several pre-existing challenges before the COVID-19 pandemic. The legal system needs further development, and labor intensive sectors such as agriculture require modernization. The development of human capital and a skilled labor force remains a pressing issue. Promoting rural entrepreneurship and employment diversification, especially for women and youth, is crucial.

Rural entrepreneurship and employment diversification, especially for women and youth, should be promoted through the development of general skills such as running a business, accessing market information, and using information, communications, and technologies (ICT) (Inder et al., 2003). Access to finance, land disputes, lack of integration in the world market and a general lack of infrastructure including ICT, have impeded MSME development (UNDP Timor-Leste and GDS, 2021). Both countries are geographically isolated and have limited access to international markets. Mongolia is sandwiched between Russia and China and Timor-Leste is a small island developing state. Hence, due to geographic isolation coupled with a low productive sector, both countries rely heavily on imports. The retail sector had the greatest number of MSMEs in both countries. In 2019, prior to COVID-19, the imports to GDP ratio was 65.2 percent in Mongolia and 49.5 percent in Timor-Leste, significantly higher than the world average of 27.8 percent (World Bank, 2023). However, during the pandemic, this ratio dropped to 57.8 percent in Mongolia and 42.2 percent in Timor-Leste (World Bank, 2023).

## COVID-19 Response and Recovery Measures in Two Different Contexts

Countries in the Asia-Pacific region were relatively successful in controlling the COVID-19 pandemic compared to Europe and North America. They did so by keeping their economies out of crises and avoiding longer, harsher lockdown measures (Fukuda-Parr, 2022). According to Fukuda-Parr (2022), this success depended largely on “the effective implementation of non-pharmaceutical interventions.”<sup>5</sup> It is interesting to see where the cases of Mongolia and Timor-Leste fit in this overall picture. Did they implement appropriate response and recovery measures? What was the overall impact on the broader economy and the MSMEs within the countries?

### What are the response and recovery measures implemented in Mongolia and Timor-Leste?

During the pandemic, the Government of Mongolia and the Government of Timor-Leste implemented a series of measures to support households and businesses as summarized in Table 1. In Mongolia, after the declaration of the state of high alert preparedness, the Government suspended several taxes and fees between February 2020 and October 2020 to protect citizens’ livelihoods and to support businesses at the same time as containing the pandemic. These measures included an exemption from paying social insurance and fines, personal income tax, corporate income tax for businesses with annual revenues of up to 1.5 billion MNT<sup>6</sup> (i.e. micro, small and medium enterprises). Additionally, there was a reduction in tax on rental incomes for companies that had reduced their rent, and exemptions from customs duties and value-added taxes for diagnostic and medical equipment.

During the first six months of 2020, under these measures, 352 billion MNT (~5% of budget revenue) reached over 700,000 citizens (56% of the labor force) and 105,000 businesses (Ministry of Finance of Mongolia, 2020). As shown in Table 1, some of these subsidies were implemented only in 2020 but the remaining programs such as the top-up of Child Money<sup>7</sup> and food stamps continue until March 2023, the date of writing this chapter. These household subsidies supported domestic market

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5 He additionally highlighted the importance of strong institutional capacity, primary health systems, effective leadership and active public engagement.

6 In 2020, exchange rate was on average 1 USD=2813 MNT, and in 2021 on average 1 USD=2849 MNT.

7 Mongolia’s Child Money Programme is a universal monthly allowance for all children under 18, aiming to reduce poverty and improve child well-being.

demand for MSMEs through consumer purchases, as imported goods and services were heavily restricted.

In December 2020, the Government announced the "Comprehensive plan of 10 trillion MNT to protect citizens' health and recover the economy," a 3-year plan. The plan included 2 trillion MNT for job support programs and 0.5 trillion MNT for agriculture support programs. The difference between the interest rates on the discounted loans with 3 percent interest rate and financing costs of commercial banks were also subsidized. Of the 10 trillion MNT comprehensive plan, the largest lending activity was Job Support Loans. As of August 2021, 60,700 requests for a total of 6.3 trillion MNT had been received, and 1.7 trillion MNT in loans had been granted to 22,700 borrowers (Ministry of Finance of Mongolia, 2021).

After confirming the first locally transmitted case in November 2020, the Government of Mongolia approved another set of measures to support MSMEs. These measures included directing the activities of the Loan Guarantee Fund to revitalize businesses, loosening monetary policy, exempting borrowers from principal payments and postponing mortgage loan payments. In addition, the Government decided to cover the utility bills (electricity, heat, water, and waste) of households and MSMEs from December 2020 to July 2021, allocating 650 billion MNT for this purpose.

In the case of Timor-Leste, on 30 April 2020, the Government of Timor-Leste approved an economic stimulus and response package consisting of 19 strategic measures. The purpose of this package was to counteract the expected negative effects of the COVID-19 on the economy for a three-month period, from May to July 2020 to support households and businesses and to cushion the negative economic impact of the health emergency (Government of Timor-Leste, 2021b).

In August 2020,<sup>8</sup> the Government of Timor-Leste further approved a package of four short-term economic recovery measures to mitigate the impact of the crisis under the first phase of the Economic Recovery Plan (Government of Timor-Leste, 2020). This package included the Emergency Food Distribution Program (*Cesta Básica*), a Recovery Subsidy, a contributory exemption (social insurance) and special support for informal workers. The *Cesta Básica* was a critical part of the relief package, providing universal food subsidies for all citizens. The program aimed to stimulate agricultural production, support farmers and local traders and stimulate local economic dynamics through the inflow of financial resources necessary for business development. The *Cesta Básica* contained a specific set of essential food and personal hygiene shopping vouchers equivalent to 50 USD per basket for all citizens of the country.

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8 Government Resolution No. 28/2020 of August 19; *Approval of short-term measures for mitigation of Economic Crisis Impacts Resulting from the Pandemic of COVID-19 under the Economic Recovery Plan*.

In 2021, the General State Budget included funds to respond to the Cyclone Seroja that severely hit the country and to the impacts of COVID-19 (Government of Timor-Leste, 2021a). In 2022, the Government of Timor-Leste took additional measures to temper the increase in food and commodity prices. As reported in the World Bank Timor-Leste Economic Report (World Bank, 2022b), the second phase of the *Cesta Básica* program was implemented in 2022 costing 80 million USD to address the impact of the pandemic. Furthermore, the Government spent close to 70 million USD on a 200 USD “Christmas Bonus” to households with incomes less than 500 USD a month. As such, even beyond the general lockdowns, the food distribution and cash transfer programs continued (World Bank, 2022b).

Both countries have considered the socio-economic impacts of the pandemic alongside containment measures (Table 1). The funds allocated to support MSMEs and households were significant, especially given that Timor-Leste is a low-income country and Mongolia a lower-middle income country. The measures implemented highlight the importance of mitigating negative socio-economic impacts on MSMEs and on communities, particularly on vulnerable groups. Both countries have spent significant resources for these purposes.

However, common criticisms exist in both countries that these measures were unspecific and not sufficiently targeted. In Mongolia, the support measures for households and MSMEs were criticized for their lack of specificity and targeting. The timing of the COVID-19 supports measures coincided with parliamentary (June 2020), local (October 2020), and presidential election (June 2021) campaigns, suggesting potential political motivations behind these untargeted policies. For instance, significant cash transfers were made in April 2020 and April 2021, just before the elections. In Timor-Leste, the implementation of support measures also coincided with election periods, with the presidential election held in March 2022 and the parliamentary election in 2023. In December 2022, a one-off cash hand-out to households, called the Christmas bonus, was issued. Additionally, the second phase of the *Cesta Básica* program was rolled out, even though the country was not enforcing movement restrictions in late November 2021 or throughout 2022.

The financing of the economic stimulus packages and recovery measures mostly came from the two countries’ extractives industries. The mining sector accounts for 23 percent of GDP, 88 percent of total export and 24.5 percent of budget revenue in Mongolia (Ministry of Mining, 2022) while the petroleum sector in Timor-Leste accounts for nearly 70 percent of GDP, more than 90 percent of total exports, and more than 80 percent of the state’s annual revenue (Neves, 2022). In Mongolia, 1.1 trillion MNT (~380 million USD) of the package was paid for by Erdenet Corporation, a state-owned copper mine. Also, the 1 trillion MNT distributed in cash to all citizens during the last lockdown was financed by an advance tax payment from Rio Tinto which runs another copper mine in Mongolia. In Timor-Leste, the package implemented in 2020 was funded through the COVID-19 Fund which received 219.5 mil-

lion USD from the country's Petroleum Fund.<sup>9</sup> In 2020, the Government of Timor-Leste channeled all pandemic related response and recovery expenditure through a single consolidated COVID-19 fund (Jamal, 2021).

There was a lack of reporting on the implementation of COVID-19 measures in both countries. In Mongolia, there is no comprehensive report, assessment or evaluation of the government fiscal expenditure and implementation performance related to pandemic measures. There was only an aggregate amount of general spending announced during a government press release (Government of Mongolia, 2023), there were no national audit reports published as at the time of writing.<sup>10</sup> The Ministry of Finance reported on the overall spending but only in aggregate forms. Because all expenditure is aggregated with other existing spending, it is hard for civil society and media to track and monitor spending. This lack of openness and transparency in reporting created much confusion and distrust in Mongolia among the public (IRIM and ICNL, 2022). Various protests and demonstrations were organized demanding transparency as well as social media posts about potential corruption scandals amidst other ongoing grand corruption in Mongolia.

In Timor-Leste, a detailed annual report on the implementation of the COVID-19 Fund was published by the Ministry of Finance (Government of Timor-Leste, 2021c). As the economic recovery measures budget was spent through a single channel, it was possible to implement financial controls through the electronic integrated financial management information system. Starting from 2021, the programs to support MSMEs were primarily implemented through the line ministries (Ministry of Finance, Timor-Leste, 2021b). However, there has been no auditing of the Fund and a performance evaluation of the MSMEs programs (Jamal, 2021).

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9 The Petroleum Fund is Timor-Leste's Sovereign Wealth Fund and finances majority of Timor-Leste's state budget.

10 The report is not released although the National Audit Office mentioned they are in the process of preparing such a report as of 21 March 2023..

**Table 1: Comparison of COVID-19 economic recovery measures aimed at MSMEs and households in Mongolia and Timor-Leste**

Measures implemented	Mongolia	Timor-Leste
Duration*	March 2020–February 2022	April 2020–December 2022
Total amount of support (USD)	~7.7 trillion MNT (~2670 million USD in 2020, 2021 and 2022)**	~437 million USD*** (in 2020, 2021 and 2022)
Share in GDP or gov't expenditure	24% of gov't budget and 9% of total GDP (in 2020, 2021 and 2022)	17% of public spending, 17.7% of non-oil GDP (in 2020 and 2021)
Tax incentive support	Exempting SMEs from corporate income taxes	Through reduced obligations (e.g., social security, loan repayment)
Social insurance	Halving social security contribution of affected businesses	Exemption from social security contribution for employees and employers
Support for electricity and utilities	Energy, waste and water bills paid by the government provided the bills are no more than that in the same period the previous year	The value of 15 USD equivalent to 62.5 kWh for businesses; 50% exemption of the tariffs for electricity consumption for post-paid customers during the State of Emergency
Loan / credit	<p>For SMEs, providing a 3-year loan with an interest rate of 3% and grace period of 1 year to support jobs</p> <p>For agriculture sector, spring planting and cashmere preparation loan; 3% interest rate for 1-year; and herder loan with 3% interest rate and for 3-year</p> <p>Postponing payment of loans for individuals and businesses whose operations have been interrupted</p>	<p>Loan restructuring and partial payment of interest included 5 million USD on credit moratorium from 2020 and later extended in 2021 (Ministry of Finance 2021 cited in UNDP Timor-Leste and GDS, 2021):</p> <p>(1) Citizens and companies with existing loans from banking institutions or other deposit-taking institutions in Timor-Leste could apply for credit rescheduling. The moratorium postpones capital and interest payments by three months and includes an option for a credit moratorium of up to nine months for loans granted until 1 April 2021 (Government of Timor-Leste, 2021a)****</p> <p>(2) “Social business loan guarantee scheme” for SMEs (from agriculture, tourism, fishery, industry &amp; commerce sectors), offering loans with a 3% interest fee for a duration of 3-6 months, with loan amounts ranging from 1,000 to 25,000 USD</p>



Measures implemented	Mongolia	Timor-Leste
Employees	From April to June in 2020, MNT 200,000 (~70 USD) per month for 73,000 employees of enterprises which have ceased operations due to COVID-19 or revenue has decreased by more than 50% from the same period the previous year	For up to a duration of 3 months in 2021: 70% of salaries for employees of businesses forced to close; 50% of salaries for active businesses; 85% of income for entrepreneurs, self-employed domestic workers, managers, or administrators; unemployed contributing workers were eligible for some support (40% of conventional remuneration) provided they are registered with the National Social Security
Informal workers	Through general population scheme, lack of targeted schemes; Job Support Program in 2021 aimed to save jobs through subsidized lending. To be eligible for the program, informal firms and self-employed workers had to be registered with the Value Added Tax system	The “special support for informal workers” measure covered between October to December 2020 and had the objective to support informal sector workers or self-employed. To be eligible for a subsidy of 36.0 USD, workers had to register in the social security and had the obligations to maintain contribution for 6 months
Food support for households	In April 2020, monthly food stamp benefit has increased from 8,000 to 16,000 MNT (~6 USD) per child and from 16,000 to 32,000 MNT (~11 USD) per adult in poor families	<i>Cesta Básica</i> Emergency food distribution program for all households in Timor-Leste, equivalent to 50 USD per household; the distribution was made two times
Cash support for population and vulnerable groups	In April 2020, monthly child benefits increased fivefold to 100,000 MNT (~35 USD). It is a universal cash transfer program; during the last lockdown in April 2021, the government distributed 300,000 MNT (~100 USD) to each person.	<i>Uma Kain</i> (household) cash transfer 200 USD per household in 2020 for households with monthly income less than 500 USD; Christmas Bonus cash transfer of 200 USD for households with a monthly income below 500 USD in 2022.
<p><i>Notes:</i> *first date policy adopted and last effective date; **Government’s COVID related budgeted expenditure was 11.2 trillion between 2020 and 2022. It includes financing budget deficits and health-related measures (Government of Mongolia, 2023). Using press information, it is impossible to disaggregate the government support by the size of the enterprise as the official report is not disclosed. ***The allocation to the COVID-19 Fund for 2021 was 287.6 million USD, of which 117.7 million USD has been spent as of the 5th of November 2021 (Ministry of Finance of Timor-Leste, 2021a). In 2022, 80 USD million was allocated for the food basket program and 70 million for Christmas Bonus for households with income less than 500 USD a month. ****It should be noted that only a small percentage of firms use banks to finance working capital (5 percent), as reported in the World Bank Economic Report 2022 (World Bank, 2022b, 7).</p>		

**To what extent, the government response and recovery measures have been successful in mitigating negative impacts of COVID-19 on MSMEs?**

The World Bank Enterprise Surveys Follow-Up on COVID-19, the socio-economic impact assessment on MSMEs, conducted by various UN agencies including UNDP Mongolia (2020), the International Labor Organization (ILO, 2020), and National Statistics Office (NSO), used different criteria and indicators to assess the effectiveness and impact of the support measures. To answer the question, this chapter draws on the following indicators (Table 2) based on availability of data and relevance for comparison.

*Access to COVID-19 support measures*

There was no survey conducted to examine the extent that MSMEs had heard about the government of Mongolia's support measures. Although the Mongolian Census of Entities (NSO, 2021) covered 50,623 active businesses,<sup>11</sup> it did not inquire about business owners' awareness of these programs. In contrast, a UNDP survey conducted in Timor-Leste among 1,010 businesses (UNDP Timor-Leste and GDS, 2021) found that 57.0 percent of active MSMEs were aware of some government assistance initiatives, while 43.0 percent were unaware (Table 3). As shown in Table 3, a higher share of businesses received at least one type of government support in Mongolia compared to Timor-Leste. This could be partly explained by the larger total amount and higher proportion of Mongolia's support budget expenditure. However, it is important to note that the MSMEs receiving support were mostly concentrated in the capital cities of both countries.

This lack of targeting implies the programs disproportionately reached wealthier citizens and larger companies rather than informal workers and vulnerable groups. In Mongolia, for example, not only universal cash transfers (like Child money) but also other government support measures lacked proper targeting. Government support for household electricity and utility bills ended up favoring wealthier households with high consumption in urban areas. Similarly, wool and cashmere subsidies intended to support rural households became a policy benefiting wealthy herders with a large number of animals.

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11 Active entities, two years preceding the Census.

**Table 2: Criteria to assess COVID-19 impact on MSMEs**

Areas	Criteria
Access to support	1. Enterprises that have heard about the Government support (awareness of support) 2. Enterprises that have received the target support 3. Enterprises that have received support in a timely manner 4. Satisfaction with the adequacy of support
Effect on operations	5. Enterprises that remained open/closed/semi-closed during COVID-19 restrictions (between March 2020 and December 2021) 6. Disruptions in supply of materials 7. Changes to business model
Effect on finance	8. Change in sales and revenue 9. Change in operation cost 10. Impact on cashflow
Effect on MSMEs' workforce & informal workers	11. Small and medium enterprises that made changes to employee salaries 12. Small and medium enterprises that made changes to number of employees
Trade-off between health & economy	13. Whether the containment and economic recovery measures were balanced?
<i>Source:</i> Authors.	

The World Bank (2020a) highlights that these untargeted response measures proved costly and unsustainable. A more focused and targeted approach could have improved their effectiveness while reducing costs. This concern is echoed by the Timorese government's own assessment of the economic recovery measures presented in March 2021. Their findings showed that 71 percent of emergency relief subsidies were awarded to only 24 companies, and 48 percent went to entities located in the capital, Dili (out of a total of 13 municipalities) (Government of Timor-Leste, 2021b).

**Table 3: Proportion of MSMEs and informal workers that accessed government COVID-19 support measures**

Key results	Mongolia %	Timor-Leste %
<b>Awareness</b>		
1. Heard about COVID-19 support measures	n.a.	57.0
2. Informal workers heard about COVID-19 measures	n.a.	44.9
<b>Participation</b>		
3. Received at least one type of support	67.6	26.4
4. Informal workers that received any type of support	n/a	7.6
5. Subsidy for saving jobs	13.0	11.0
6. Exemption from tax	40.2	n/a
7. Exemption/postpone from social security	45.1	3.1
8. Exemption from utility bills	48.6	20.8
9. Loan support (e.g. subsidized loan, postponing payments and interest, loan guarantee)	16.7	1.9
<i>Source:</i> Census of Entities-2021, NSO, Mongolia and SEIA of COVID-19 in Timor-Leste, Round 2, 2021: MSMEs Survey, UNDP and GDS.		

*Effect on micro, small and medium enterprises' operations and financial situation*

In 2021, business activities in both Mongolia and Timor-Leste significantly deteriorated compared to 2020, as shown in Table 4. Rates of decline in production, revenue, and customer orders were high across both countries. According to Mongolia's Census of Entities-2021, 85.9 percent of enterprises reported negative impacts on their business operations due to the pandemic. The strictest restrictions (lasting for 6 to 18 months) were imposed on sectors like hotels, restaurants, tourism, entertainment, and education. Conversely, sectors like farming, animal husbandry, food processing, finance, communications, grocery stores, hospitals, pharmacies, and utilities faced minimal restrictions. Over 30 percent of enterprises permanently closed, and 44.4 percent operated with limited capacity. Maintaining worker jobs (37.5%), dealing with unclear government decisions (19.9%), and paying employees on time (17.5%) were the main challenges for Mongolian enterprises during lockdowns.

The financial situation of Mongolian entities worsened due to disrupted operations with 44.2 percent of businesses reporting a decrease in sales revenue in 2020 compared to 2021. Financial data from the Census reveals a decrease in assets for

25.3 percent of entities, while liabilities increased for 47.4 percent. Transportation and fuel expenses (55.3%) and raw material costs (41.7%) also rose in 2021. Loan repayments were a major difficulty, with over half of MSMEs reporting loan postponement measures as the most helpful government support (BEST, 2021).

**Table 4: Change in business activities in 2021, year-on-year**

Indicators	Mongolia			Timor-Leste		
	Increased %	Decreased %	Unchanged %	Increased %	Decreased %	Unchanged %
Revenue	18.1	44.2	30.1	12.7	63.9	9.5
Loss (MN)/ Operation cost (TL)	30.1	14.2	55.8	25.2	29.1	35.2
Customer order (MN) / Demand (TL)	12.1	39.4	48.5	—	75.7	—
Inventory (MN)/ Receiving time of supply of materials (TL)	13.4	21.3	65.3	56.9	20.9	22.2
<i>Source:</i> Authors derived the table from Census of Entity—2021, NSO Mongolia and SEIA of COVID-19 in Timor-Leste, Round 2, 2021.						

During the first lockdown period in Timor-Leste, 45.2 percent of MSMEs remained fully closed, with varying degrees of operational continuity for others (7.0% closed premises but partially operational, 21.3 percent reduced hours, and 26.0 percent remained fully open). When the government implemented sanitary fencing in August 2021, only 5.6 percent of MSMEs remained closed. Notably, the agriculture sector was least impacted, with 67.4 percent of businesses remaining open during the first lockdown.

Similar to Mongolia, financial situations worsened in Timor-Leste with 63.9 percent of MSMEs experiencing a decline in sales. While 29.1 percent managed cost savings through measures like remote work and reduced hours, 25.2 percent saw increased operating expenses, potentially due to investments in technology or safety protocols. Formal MSMEs and those located in the capital (Dili) were more likely to report increased costs. Sectors like information and communication, healthcare, consulting services, personal care, and wholesale reported the highest proportion of increased costs. Financial concerns were widespread, with around 80 percent of MSMEs expressing concerns about their financial sustainability (UNDP Timor-Leste and GDS, 2021).

*Effect on micro, small and medium enterprise's workforce and on informal workers*

The pandemic's impact on the workforce differed significantly between Mongolia and Timor-Leste. As shown in Table 5, Mongolia experienced a decline in formal employment, while Timor-Leste's labor market remained relatively stable.

**Table 5: Labor market indicators (modeled International Labor Organization estimate)**

Indicators	Mongolia			Timor-Leste		
	2019 %	2020 %	2021 %	2019 %	2020 %	2021 %
Labor force participation rate	63.0	60.9	58.7	66.8	66.2	66.3
Employment rate, 15+	59.5	56.9	54.1	63.8	63.0	63.0
Unemployment rate	5.4	6.6	7.8	4.5	4.8	5.0
<i>Source:</i> Authors derived the table from World Development Indicators (World Bank, 2023).						

In Mongolia, labor market indicators like workforce participation and employment rates declined in 2020 and 2021, with unemployment rising for two consecutive years. While initial job losses were limited in 2020, unemployment began to rise in late 2020. During the first three quarters of 2021, an average of 60,000 individuals were not working in the previous week, with around 20,000 citing COVID-19 as the reason (NSO, 2023). The government's economic recovery package, estimated to have protected 168,000 to 230,000 jobs (World Bank, 2022a), helped mitigate further losses. As restrictions eased in the third quarter of 2021, labor force participation and employment started to recover, though not reaching pre-pandemic levels.

In contrast, Timor-Leste's labor market indicators showed only moderate decline. While 52,700 individuals (6.5% of the working-age population) experienced some impact like reduced hours or job loss due to COVID-19 (SEFOPE, GDS, and ILO, 2022), the overall employment level remained relatively stable. Notably, men were disproportionately affected by the pandemic compared to women. To adjust to pandemic conditions, MSMEs in Timor-Leste primarily reduced working hours (44.2%) and temporarily shut down operations (23.9%) (UNDP Timor-Leste and GDS, 2021). A 2023 household survey by the General Directorate of Statistics further revealed that roughly 20 percent of households with non-farm businesses experienced temporary or permanent closures. Businesses that survived the pandemic coped by reducing employee numbers (32%), working hours (25%), or adjusting their business models (27%) (GDS MoF, UNDP and WB, 2023).

The pandemic significantly disrupted the activities of self-employed individuals in Mongolia, particularly those in trade and services sectors. A survey by the National Statistics Office found that 87.2 percent of self-employed individuals reported negative impacts like a decrease in customers, declining purchasing power, supply chain disruptions, and health issues affecting themselves or coworkers (NSO, 2022a). Nearly half (46.6%) were dissatisfied with government support measures during the pandemic. In Timor-Leste, the impact on self-employed individuals is less documented in the provided sources, but the household survey suggests a similar trend of business adjustments and potential income losses.

### *Trade-offs during the pandemic*

Mongolia's approach to COVID-19 containment involved a significant trade-off between public health and economic well-being. Initially, the government prioritized preventing the spread of the virus, implementing strict measures such as nationwide lockdowns, school closures, and an international travel ban. This strategy, reflected in a high average stringency index<sup>12</sup> (65.7) between January and July 2020 (compared to the world average of 50.5), effectively contained the pandemic, with no domestic infections reported by November 2020. However, these measures also caused economic strain, particularly for informal businesses (ADB, 2020). The impact was amplified by the halting of coal exports, a crucial source of foreign currency. Once the vaccination program began and general elections passed, restrictions were relaxed. This shift coincided with a rise in COVID-19 cases and deaths in the latter half of 2021, as reflected in the declining stringency index (45.9).

In contrast, Timor-Leste adopted a more targeted approach, relying on contact tracing, quarantines, mask-wearing, and "sanitary fence" policies to limit movement in specific areas. While a national lockdown was initially implemented in early 2020, it was followed by a shift to sanitary fences, resulting in a lower average stringency index (38.4 in the first half of 2020 and 29.8 in the second half). Delays in vaccine rollouts and global resurgences of the virus led to a rise in cases in 2021. The government responded by tightening restrictions, reflected in a higher stringency index (55.0). This targeted strategy appeared to balance public health and economic concerns. According to WHO data, Timor-Leste had significantly fewer COVID-19 cases and deaths per capita compared to Mongolia (1770 cases and 10 deaths vs. 30,748 cases and 65 deaths per 100,000 people). Additionally, Timor-Leste's economy outperformed Mongolia's in 2021, with growth of 5.3 percent compared to 1.6 percent (World Bank, 2023).<sup>13</sup>

In 2022, high inflation emerged as a major challenge for MSMEs worldwide, including those in Mongolia and Timor-Leste. Supply chain disruptions, labor short-

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<sup>12</sup> 0=lowest strictness, 100=highest strictness.

<sup>13</sup> World economy grew by 5.9% in 2021 according to the World Development Indicator of the World Bank.



ages, and declining sales revenue continued to pose difficulties. Globally, inflation surged due to a confluence of factors, including supply chain bottlenecks, post-pandemic demand surges, unprecedented government stimulus measures, the war in Ukraine, and natural disasters.

In Mongolia, inflation reached 15.2 percent in 2022, significantly impacting MSMEs due to rising raw material costs. Agricultural businesses in remote locations and those reliant on transportation were particularly affected by soaring fuel prices. Declining household purchases, especially for non-essential goods, further hampered sales (UNDP Mongolia and ERI, forthcoming). A survey by the Mongolian National Chamber of Commerce and Industry (MNCCI, 2022) found that inflation impacted businesses through rising prices for materials, goods, and services (70%), increased operating expenses (65%), higher labor costs due to wage increases (54%), and decreased sales due to lower demand (50%).

Timor-Leste experienced a lower inflation rate of 7.9 percent as of August 2022 (World Bank, 2022b). Just over half (52%) of households with non-farm businesses reported that input prices increased (GDS MoF, UNDP and WB, 2023). Despite Timor-Leste's low level of integration into the international economy and existing fiscal buffer from the Petroleum Fund, the country could not prevent a fall in GDP of nearly 7 percent,<sup>14</sup> the largest since independence in 2002. Government lockdown measures to prevent the spread of COVID-19, combined with the global economic slowdown and oil price uncertainty, plunged the local economy into a severe contraction. Real GDP per capita is expected to slip down to the 2009 level, significantly worse than the contractions experienced during the 2006 civil unrest and the 2017 political deadlock.

## Conclusions

Mongolia and Timor-Leste are two Asian countries with relatively young democracies and private sectors with an experience of three and two decades respectively. The existing vulnerabilities and lack of preparedness to shocks by communities, MSMEs and by governments were exposed and exacerbated by the COVID-19 pandemic. The comparison of responses to the COVID-19 pandemic reveals a significant trade-off between the socio-economic impacts and the containment of the virus. Timor-Leste, on the other hand, implemented relatively targeted measures such as contact tracing, which allowed for better economic performance. Overall, these examples illustrate the need for a balanced approach to addressing the pandemic,

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14 Even with limited global economic ties and a financial safety net from its Petroleum Fund, Timor-Leste experienced a significant economic downturn in 2020, with non-oil GDP contracting by 8.3 percent—the sharpest decline since its 2002 independence. Subsequently, the nation's non-oil economy began a recovery, rebounding by 2.9 percent in 2021. This recovery was largely driven by substantial government expenditure, amidst challenges from the COVID-19 pandemic and Cyclone Seroja's devastating floods (World Bank, 2022b).

which considers both the health and economic impacts and implements measures that are targeted and sustainable.

The conditions in the two countries during the pandemic and the level of restriction measures undertaken varied. Although both countries began taking restrictive measures to prevent the pandemic in early 2020, the stringency was eased immediately in Timor-Leste but only slowly in Mongolia. Mongolia imposed more general and nationwide lockdowns early on as it is a country that shares the largest land border with China (where the pandemic originated). Meanwhile Timor-Leste implemented more specific restrictions focused on municipal level sanitary fences and targeted quarantines. One of the lessons from the pandemic public health measures is, that strategic yet specific measure produces better results (Reddy, 2022).

Regardless of the levels of stringency, the restrictions coupled with the overall pandemic situation negatively impacted on MSMEs in both countries. The strictest restrictions were imposed on hotels, restaurants, tourism, entertainment, and education activities. As a result, many enterprises had to close permanently or operate with limited capacity. Maintaining workers' jobs and paying employees on time were some of the most challenging problems for enterprises during the pandemic. The financial situation of entities worsened as their business operations were disrupted, with sales revenue decreasing and liabilities increasing. Some MSMEs were able to achieve cost savings by implementing various measures, but many reported difficulty maintaining profitability and sustaining their businesses.

There are several similarities in the economic recovery measures undertaken by both countries to address these negative impacts and support MSMEs. Both Mongolia and Timor-Leste implemented generous economic stimulus packages and support measures in response to the COVID-19 pandemic mainly financed by the extractive industries (mining in Mongolia and petroleum in Timor-Leste). The support measures implemented by the government of Mongolia were broader and longer than those of Timor-Leste. The fact that the two countries undertook a relatively generous economic stimulus packages reveals that previously financial constraints (especially championed by neoliberal economists) to support business, households and individuals can be overcome, and that broad scale support is feasible and not undesirable.

In both cases the economic measures undertaken have not been well targeted and specific. The role of political motivation to implement programs that have more visibility and wider coverage within each country were highlighted ahead of elections. In Mongolia, these measures coincided with election campaigns in 2020 and 2021, suggesting potential political motivations, with significant cash transfers occurring just before elections. Similarly, in Timor-Leste, support measures were implemented around election periods, including a one-off Christmas bonus in December 2022 and the second phase of the Cesta Básica program, despite the absence of movement restrictions at the time.

Furthermore, support for the private sector was not focused on the most vulnerable and therefore left behind private businesses and informal workers. In Mongolia, the support provided benefited wealthier citizens and larger companies. Finally, the lack of targeted measures and transparency in reporting led to confusion and distrust among the public. In Timor-Leste, the implementation of measures through a single channel and financial controls helped to ensure transparency and accountability. While Timor-Leste provided more targeted support, there has been a lack of auditing and performance evaluation of the funds.

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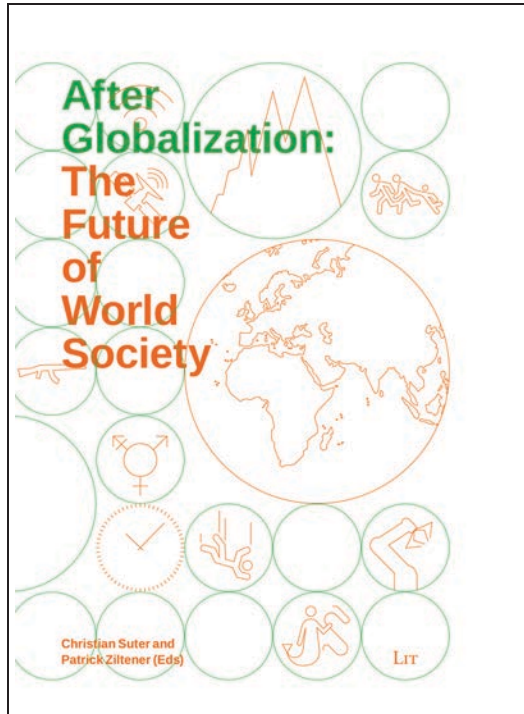
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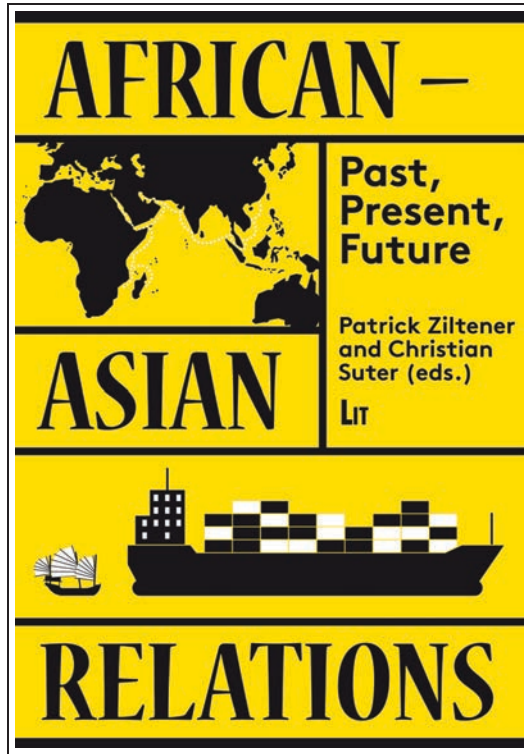
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