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Policy for temporary crisis or sustained structural change in an age of disasters, crises, and pandemics

Abstract

This paper employs cases to discuss the impact of information, disinformation, and the evolution of scientific data as part of public health policy development in the COVID-19 pandemic. The two areas of policy development center on (1) risk and public health precautions (e.g., mask mandates, cleaning protocols, and social distancing) and (2) risk and economic/travel policy (e.g., regional economic shutdown, travel restrictions, border closures). Key to the analysis is the understanding of social risk production and public trust in institutions and individuals within those institutions that craft emergency, interim, and long-lasting public policy. The paper concludes with recommendations for enhancing public trust in government institutions and the management of risks during times of disasters, crises, and pandemics.

Keywords: disasters, risk society, public policy, critical incidents, COVID-19

JEL Classification Codes: H12, H84, I18, Q54

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Polityka publiczna wobec tymczasowego kryzysu lub trwałej zmiany strukturalnej w dobie katastrof, kryzysów i pandemii

Streszczenie

W niniejszym opracowaniu wykorzystano studia przypadków do omówienia znaczenia informacji, dezinformacji i ewolucji danych naukowych w ramach rozwoju polityki zdrowia publicznego wobec pandemii COVID-19. Dwa obszary rozwoju tej polityki publicznej koncentrują się na 1) ryzyku i środkach ostrożności w zakresie zdrowia publicznego (np. nakazach noszenia masek, protokołach higienicznych i dystansowaniu społecznym) oraz 2) ryzyku i polityce gospodarczej/turystycznej (np. zamknięciu gospodarek regionalnych, ograniczeniu podróży, zamknięciu granic). Kluczowe w prezentowanej analizie jest zrozumienie procesu powstawania ryzyka społecznego i zaufania publicznego do instytucji i osób w ramach tych instytucji, które tworzą politykę publiczną z myślą o nagłych przypadkach, sytuacjach przejściowych i długotrwałych. Artykuł kończy się rekomendacjami dotyczącymi zwiększania zaufania publicznego do instytucji rządowych i zarządzania ryzykiem w okresach katastrof, kryzysów i pandemii.

Słowa kluczowe: katastrofy, społeczeństwo ryzyka, polityka publiczna, incydenty krytyczne, COVID-19

Kody klasyfikacji JEL: H12, H84, I18, Q54

Disasters, crisis incidents, and pandemics are phenomena which have impacted communities for centuries, since the flooding of the Nile River threatened Ancient Egypt (Bullock et al., 2021: 31). In the last 10 years alone (2011 through 2021), Emergency Events Database (EM–DAT) recorded 5,741 natural and technological disasters worldwide resulting in 511,642 deaths (The International Disaster Database, 2021). In late 2019, reports of a rapidly spreading infectious disease originating in Wuhan, China, which would come to be known as COVID-19, began to emerge and rapidly spread throughout the globe. On March 11, 2020, the World Health Organization declared COVID-19 a global pandemic (Miller & Davis Bivens, 2022).

As noted by many (Boin & McConnel, 2021), the coronavirus disease reached the transboundary pandemic status and continues to evolve (Boin et al., 2020; Capano et al., 2022). Early forecasts by the World Bank indicated that a pandemic could impact the global economy to the level of as much as $ 800 billion, and result in the loss of life in tens of thousands (Brahmbhatt, as cited in Garrett, 2007). COVID-19 fatalities in the United States, as of mid-July, 2021, totaled 603,880, with 4.1 million deaths globally (WHO, 2021), eclipsing natural and technological disasters as a significant hazard. Ultimately, COVID-19 would lead to disruptions to government and

industry in an unprecedented fashion. In essence, every aspect of life was disrupted from schools, family life, travel, supply chains, medical intuitions, workforce, and many other factors in society. Globally, approximately 90% of students in K-16 education across 192 countries, including the United States, transitioned to online learning according to the United Nations Educational, Scientific, and Cultural Organization (UNESCO) (as cited in Davis Bivens & Meade Byrd, 2020). Garrett (2007) predicted that some businesses would suffer revenue losses of as great as 50%. By May 2020, the leisure and hospitality industry, specifically accommodations and food services, had suffered job losses as a result of COVID-19, with 5.7 million jobs (roughly 40% of its workforce) lost from February to May 2020 (Bureau of Labor Statistics, as cited in Ettlinger & Hensley, 2020). Economies were also disrupted due to unemployment, corporate and governmental travel bans, decreased tourism, or overall fear (Baldwin & di Mauro, 2020; Robbins, 2020). As a result, governments worldwide were forced to create public policy to manage the pandemic best, not only to promote public health and safety, but also to jumpstart failing economies and promote public trust to gain wider acceptance of policy strategies to combat the COVID-19 pandemic. From the diagnosis of the first COVID-19 case in the United States in January 2020, over 35 million cases were documented as of mid-2021 (New York Times, 2021). Public officials in all jurisdictions found the health of their communities threatened for the first time in 100 years as global pandemics are such rare occurrences (Davis Bivens & Meade Byrd, 2020). Only four pandemics had impacted the United States prior to COVID-19; the 1918 Spanish Influenza, 1957–1958 Asian Flu (H2N2), and the 1968 Hong Kong Flu (H3N2) (Centers for Disease Control and Prevention, as cited in Davis Bivens & Meade Byrd, 2020). In essence, "we are also witnessing a political, economic, and social crisis the likes of which the world has not seen since the 1918 influenza pandemic and the Great Depression" (Rose-Redwood et al., 2020: 2).

The United States encountered similar disasters that fundamentally changed how government entities prepare, mitigate, respond, and recover from disasters, as evidenced by specific examples of policy formation to address crises in the wake of Hurricane Katrina and the September 11, 2001 terror attacks against the World Trade Center. Policy development and the management of social actors within and between policy institutions to ensure the maintenance of public trust, to avoid distrust, in responding to the coronavirus was unique in that it affected the entire country, which resulted in unique policy solutions to address these challenges in each state and territory among the individual states within the United States. Unlike the containment of the terror attacks of September 11, 2001 and Hurricane Katrina, which visibly defined boundaries, the COVID-19 pandemic became ubiquitous. For example, the September 11, 2001 terror attacks covered 16 blocks, and the casualties

and injured were those persons in or around the Twin Towers, the Pentagon, and Shanksville, Pennsylvania. In the Gulf Coast region of the United States, Hurricane Katrina affected approximately 90,000 square miles (Cutter & Gall, 2006). The city of New Orleans, which is 180.6 square miles and coterminous with New Orleans Parish, was left 80% under water (City of New Orleans Office of Homeland Security and Emergency Preparedness, 2015).

"Perceived loss of control leads the public to lose trust in regulatory agencies, government, and officials because citizens regard such disasters as emanating from the failure of these actors and agencies to do the job entrusted to them" (Scott et al., 2012: 45). Damage to the bonds of social trust and the public's perception of government policy institutions continues when secrecy and non-transparency create long-term uncertainty (Miller & Wesley, 2016). Microlevel households and individual citizens were left having to decide whether to trust science, the government, and assess their risk. According to Miller and Davis Bivens (2021: 235), "the assessment of risks rests on the assumption that people have accurate information to make a decision to protect themselves and others, in response to COVID-19 exposure." Because the pandemic required governments to develop and implement solutions in the middle of the crisis, this article will employ the role of social risk production and public trust in institutions and individuals within those institutions that craft emergency, interim, and long-lasting public policy towards the COVID-19 pandemic as the center of its analysis to address a major theoretical gap in the literature and bridge our understanding of policy formation, public institutions, social actors, and the management of risks. At the core of the paper is a case study research approach used to generate an in-depth, multi-faceted understanding of a complex issue in its real-life context with a central tenet being the need to explore an event or phenomenon in depth and in its natural context to obtain an in-depth appreciation of an issue, event, or phenomenon of interest (Crowe et al., 2011). This paper will explore how policy formation and tools are operating in the midst of the COVID-19 pandemic to offer viable sustainable solutions for civil society. To this end, some historical context is given, as provided by a brief overview and assessment of how the policy response to both September 11 and Hurricane Katrina offered a temporary "fix" or a viable solution.

Public policy and policy problems

In the wake of the COVID-19 pandemic, the policy changes that appeared to manage the individual crises that emerged may remain. Moreover, "…will the *status quo ante* return as the conservative aspects of policy resilience prevail over the

opportunities for change, or are we likely to see a mix of the new and the old – and if so, what does this tell us about stabilizing and disruptive effects of events of this kind?" (Capano et al., 2022: 2). Public problems, or policy problems, are conditions or situations, including disasters, crises, and pandemics, that require government decisions. According to Thoeodoulou (as cited in de Jesus, 2015), public policy is government action (or inaction) which is designed to serve a politically defined purpose. Public policy serves a number of functions as it 1) can resolve conflict claims on resources, 2) provides incentives for cooperation and collective action, 3) regulates behavior, 4) protects groups and individuals, 5) includes activities essential to the government, and 6) provides direct benefits to citizens, including finding solutions to address public problems. Public problems, or policy problems, are conditions or situations, including disasters, crises, and pandemics, that require government decisions.

Policy framework

Important to the concepts in this article, Schneider and Ingram's Social Construction Policy Theory will be applied to explain why policies are instituted. The Social Construction Policy Theory best explains why decision makers pay attention to some public problems (versus others). Schneider and Ingram (1993) focus on the social construction of target populations and the cultural characterizations or the images of the persons or groups whose behaviors or well-being will be affected by public policy. In turn, these constructions are also believed to hold certain political power (i.e., more likely to vote, organize, donate to campaigns). Elected officials create public policy which will assist in their re-election as well as address social problems. These officials calculate whether cultural characterizations may be either positive or negative, and depending on which, as well as the anticipated reaction of the target population and the extent others will support the policy (Schneider & Ingram, 1993).

According to Schneider and Ingram (1993), the social construction of these target populations influences decision makers by setting the policy agenda, and the design of the policy itself. Elected decision makers (the policy makers) are motivated to produce public policies to remedy public problems to 1) assist in their being reelected as well as 2) effectively address widely accepted public or social problems. For these reasons, Schneider and Ingram contend some issues rise to the government agenda yet others remain neglected.

Target populations also impact problem definition and agendas based on their power (votes; propensity to mobilize for action, and wealth) (Schneider & Ingram, 1993). These target populations are further categorized as advantaged (powerful and positively constructed, i.e., older people, military veterans), contenders (powerful

and negatively constructed, generally undeserving, wealthy, unions). Dependents (children, mothers) are generally positive and deviants (criminals, drug addicts, terrorists) are both weak and negatively constructed (Schneider & Ingram, 1993).

From catastrophes to focusing events and public policy

Catastrophes serve as pivotal moments that force society to focus attention on both crises that are final and favor a foreseeable end, and disasters that may have unforeseeable projected long-term consequences for survivors. Social actors are able to effect change and implement policies that impact the outcomes of disasters when the policy institutions are able to align policy formation with societal goals in a meaningful way that secure community buy-in and support.

According to Kingdon (as cited in Birkland & Warnement, 2015), the term "focusing event," is used to describe events, such as terror attacks, and natural disasters like hurricanes, which focus attention on problems and solutions. Focusing events force attention on problems and developing solutions to said problems (Kingdon, as cited in Birkland & Warnement, 2015), often in the form of policy formation. Critical incidents, such as disasters, catastrophes, and crises can impact public policy (Birkland & Warnement, 2015). For the purpose of this paper, we analyze COVID-19 which shaped public policy in the United States like no other disaster or crisis incident in the country's history. While disasters are unique in their origins, they can serve as focusing events to help shape public policy, set the path for disaster recovery, guide mitigation strategies in the future. In ways disasters and crises can foster inclusive civic participation, community buy-in, and retain the public's trust that the government will fulfil its fiduciary responsibilities in keeping its citizens safe. Miller (2016) and Schneider (1992: 136) maintain that local and federal governing bodies must act by: 1) mitigating or preventing a disaster from occurring in the first place, 2) preparing areas for potential emergency situations, 3) providing immediate relief after a disaster strikes, and 4) helping individuals and communities recover from the effects of natural disasters.

Temporary policy or structural change: September 11, 2001 and Hurricane Katrina

September 11, 2001 terror attacks

Despite the fact that domestic terrorist activities have occurred on the United States' soil since the mid-19th century (Taylor & Swanson, 2016), the September 11, 2001 terror attacks ushered in massive changes in law, government organization, as well as policy and practice.

In response to the September 11 terror attacks, on September 20, 2001 President George W. Bush created the Office of Homeland Security within the White House as an Executive Cabinet level position and appointed then Pennsylvania Governor Tom Ridge as the director. That action was furthered on October 8, 2001 when Bush issued Executive Order 13228, establishing the Homeland Security Executive Council (Bullock et al., 2020). Executive Order 13288 served as the foundation for the 2002 Homeland Security Act, which created the Department of Homeland Security (consolidating 22 federal agencies, responsible for, in part, a coordinated effort in protecting the United States) (Bullock et al., 2020). Once said Council was established, President Bush signed 25 additional executive orders, focusing primarily on counterterrorism (Bullock et al., 2020) and inspired confidence in the role of the policy institutions in promulgating policies and aligning the government actors to protect citizens and bolster confidence and trust in government institutions to secure the homeland.

Legislative action during this era included the introduction and enaction of the Uniting and Strengthening America by Providing Appropriate Tools Required to Intercept and Obstruct Terrorism Act (USA PATRIOT Act) (Bullock et al., 2020). First introduced by the House of Representatives on September 24, 2001, the legislation was signed into law on October 26, 2001. The law had overwhelming bipartisanship support and was enacted in record time, passing through the nine-step legislative process (which can take as long as two years) (Bullock et al., 2020). The purpose of the PATRIOT Act was "to deter and punish terrorist acts in the United States and around the world" by giving law enforcement agencies more powers to "identify, disrupt, and prevent terrorist acts and money laundering activities by encouraging further cooperation among law enforcement, regulators, and financial institutions to share information" (Director of National Intelligence, 2022, para. 1).

That same lens of the Social Construction Policy can be used to explain the Bush administration and how it reshaped policies and reorganized agencies to protect the United States against terror attacks. The administration "forged a new, comprehensive

cybersecurity policy" which included strengthening security at U.S. ports, advocating for and signing the USA PATRIOT Act, the Intelligence Reform and Terrorism Act, and modernized the Foreign Intelligence Surveillance Act. Likewise, the government was restructured as the intelligence community was unified under the leadership of the Director of National Intelligence (with the goal to ensure information is shared among the intelligence and law enforcement communities) and the creation of the National Security Branch at the Federal Bureau of Investigation. Finally, the Terrorist Screening Center and the National Security Division was created within the United States Department of Justice (White House Archives, 2008). Such policies not only changed the anti-terrorism landscape in the United States, but also influenced international policies regarding non-state terror actors. For example, after Bush signed Executive Order 13224, the United Nations Security Council issued Resolution 1373, which called on states to criminalize acts that may finance terrorism. As such, the U.S. Government has a variety of policy tools used to combat international terrorism that are the foundation for other nations antiterrorism efforts. These tools include diplomacy and constructive engagement among nations and the United Nations, economic sanctions, international agreements for covert action, international treaties for both extradition and law enforcement cooperation, multi-national military operations, and international conventions that have remained part of the sustained efforts and structural changes to combat terrorism. Many of these major international efforts and policy tools have roots in the United States political resolve to address terrorism in the aftermath of September 11 (Perl, 2001).

August 29, 2005, Hurricane Katrina

Hurricane Katrina was a "catastrophe, far greater in scale than almost anything in American history," as it affected approximately 90,000 square miles and caused an estimated $81.2 billion in damage (Cutter & Gall, 2006; Levitt & Whitaker, 2009; Solnit, 2009: 235). The storm's impact overwhelmed the city of New Orleans, not only because of the hurricane, but as a result of 140+ mile per hour winds, heavy rainfall, storm surge, and levee failures resulting in 80% of the city being flooded, causing an estimated $17 billion in damage in the city alone (City of New Orleans, 2015; Cutter & Gall, 2006; Levitt & Whitaker, 2009; Solnit, 2009).

In July 2005, New Orleans' population was an estimated at 455,188 (City of New Orleans, 2015). National Geographic (2015) reports that in 2000 nearly 67% of the New Orleans Parish was African American. In 2005, Louisiana was one of the poorest states (Cutter & Gall, 2006), with 23.2% of New Orleans' population living at or below the poverty line, with a median household income of $39,793 (Shaughnessy,

White, & Brendler, 2010). The city ranked in the top 97th percentile according to the Social Vulnerability Index (Cutter & Gall, 2006).

Evacuation is a critical part of emergency preparation (United States Congress, 2006). In the days immediately following Hurricane Katrina, the images of people standing on roofs, wading through water, etc., the majority of whom were African American, prompted public remarks chastising them for not evacuating. Despite an advanced warning (56 hours) that Hurricane Katrina's trajectory changed paths and would make landfall near New Orleans, then New Orleans Mayor C. Ray Nagin did not order a mandatory evacuation until 19 hours before the landfall; Governor Kathleen Blanco ordered an optional evacuation (Cutter & Gall, 2006; United States Congress, 2006). The evacuation order, regardless of timing, was also short-sighted in light of the poverty demographics described above as those residents would not have the means to evacuate (it is estimated that as much as 80% of New Orleans residents relied on public transportation at that time) (United States Congress, 2006). The decisions which led to an incomplete evacuation of the city before Katrina's landfall resulted in a number of deaths, horrible conditions for those who remained and sheltered, and created a dangerous environment for rescues (Menzel, 2006; United States Congress, 2006).

When applying the Social Construction Policy Theory, the persons who were unable to evacuate (minorities; low income) are considered negative contenders, yet they have strong political power how society would like the chosen policies enacted in response (Schneider & Ingram, 2003). Hurricane Katrina serves as a focusing event for not only policy makers and policy institutions, but it also questioned the faith and trust in the government among many minority older people and the poor who were left behind. As noted in the research of Mead (2006), the significant number of deaths, loss of property, and seemingly neglect of the elderly rocked the trust and faith in government actors and social institutions.

It was almost instantaneous that the federal government, specifically President George W. Bush, would be wrongfully blamed for the response and recovery in New Orleans. The National Response Plan, which was in effect at the time of Hurricane Katrina, was designed to provide a comprehensive coordinated response to Incidents of National Significance – those high-impact events that require an extensive and multi-agency response "to save lives, minimize damage, and provide the basis for long-term community recovery and mitigation activities" (United States Department of Homeland Security, 2004: 3). Under the National Response Plan, all incidents were to be handled at the lowest jurisdictional level, which in terms of Hurricane Katrina meant the city of New Orleans (United States Department of Homeland Security, 2004). As such, stakeholders who should have been responsible for incident

management were the city of New Orleans public safety and public health organizations, the mayor, and other medical and emergency management officials.

In addition to executive orders and relief legislation, the 109th Congress (2005–2006) passed the S.3721 Post-Katrina Emergency Management Reform Act of 2006 that significantly reorganized the structure of FEMA and increased its authority to address problems, policy gaps, agency gaps, and strengthen disaster relief effort that were illustrated in the ineffective initial response to Hurricane Katrina. Key provisions of this law include creating new positions within FEMA (such as a disabilities coordinator) and position requirements (case management services) (Bea et al., 2006; FEMA, 2009). The Act also appropriated $ 400 million toward FEMA's Disaster Relief Fund for alternatives to manufactured homes, trailers, authorized a rental repair program, and funding for housing in conjunction with the Department of Housing and Urban Development (FEMA, 2009).

Other policy innovations that have produced fundamental structural changes impacting emergency response post-Katrina include the introduction of the National Response Framework in 2008 to replace the National Response Plan (FEMA, 2008; 2016). The Framework guides as to how the United States and local jurisdictions "respond to all types of disasters and emergencies. It is built on scalable, flexible, and adaptable concepts identified in the National Incident Management System" and integrates the five preparedness mission areas of 1) prevention, 2) protection, 3) mitigation, 4) response, and 5) recovery (FEMA, 2016: 1).

Developing while implementing amid COVID-19

In December 2019, a new and infectious disease was identified in Wuhan, China, and by March 11, 2020, the World Health Organization (WHO) declared the highly infectious disease, commonly named COVID-19, a pandemic (Miller & Davis Bivens, 2022). The responsiveness of public policy and policy institutions was not evolving at the rate of the COVID-19 pandemic. In the United States, President Donald Trump advised that federal officials had it under control on January 21, 2021, only to declare a public health emergency in response to the virus on January 31, 2021, as well as institute a travel ban for persons who had visited China (Subramaniam & Hickey, 2020), which would be the first official response at the national level that seemed to be inconsistent or ever changing. As such, many citizens in the United States did not trust the "official" information and public health guidelines, policies promulgated to ensure public safety, and the leaders of public health and the government. Laws, executive orders, temporary local ordinances, restrictions in mobility (Miller, 2022),

and disinformation in the mass media (Miller & Davis Bivens, 2022) only served to erode the trust in government officials. While seasonal influenza and regional illnesses had occurred prior to the novel coronavirus-2019, COVID-19 became the first pandemic to affect the United States since the 1918 Influenza Pandemic. In the United States, the Spanish Influenza resulted in 675,000 deaths (Davis Bivens & Byrd, 2020). By October 1, 2021, COVID-19 claimed 701,000 lives in the United States alone. In essence, the United States struggled to engage effectively the policy and public health infrastructures during the early stages of the viral pandemic in a way that inspired confidence in both leaders and institutions.

The rapid spread of COVID-19 required governments to devise and implement responses in the midst of the crisis. Unfolded, many governments were sharing information, learning from each other, and coordinating their responses (Goodman et al., 2020). While all governments needed to respond to the same phenomenon, their responses took a variety of on-going policy formation techniques and strategies based on population size, jurisdictional borders, governance arrangements, resources, and system capacity and were deemed credible by their citizens at varying levels (Miller & Davis Bivens, 2022; Mintrom & O'Connor, 2020). The social isolation imposed through government policies to curtail the spread of the virus came at a massive cost to businesses, livelihoods, and economies (Mintrom & O'Connor, 2020). In the United States, the policy narrative unfolds when on January 28, 2020, at a meeting the President of China and the WHO agreed to send a team of international experts, including the US Centers for Disease Control and Prevention staff, to China to investigate the coronavirus outbreak. On January 29, 2020, the White House announced the formation of a new task force to help monitor and contain the spread of the virus. By January 31, 2020, the Trump administration denied entry to foreign nationals who had traveled in China in the last 14 days. Amid the uncertainty, the Trump and Biden White Houses issued three risk and spread-avoidant Presidential Proclamations to address travel and border restrictions to limit the spread of the COVID-19 virus through a series of three proclamations (two signed by President Trump on January 31 and February 29, 2020, and one by President Biden on January 25, 2021). These proclamations began the official federal response to the disaster and impending global pandemic. In the following year, several laws, designed to reduce the severity of lockdown-induced economic downturns through a range of income-support and broader expenditure measures were implemented to protect the lives of all citizens supporting economic activity to avoid massive social dislocations that come with financial hardships (Mintrom & O'Connor, 2020). Within the United States, several large cities and states passed additional laws, policies, and restrictions that added to the policy confusion narrative, leaving citizens not knowing who or

what information to trust. In fact, there was no one universal standard in the United States to address the COVID-19 pandemic. Multiple jurisdictions announced policy measures with different approaches and timing of adopting the measures in the early stages of the pandemic. Comparatively, when viewing the response by members of the European Union, it appears that the earlier countries acted and the more comprehensive the restrictions they adopted, the more effective they were in slowing down and containing the spread of the virus (Hsiang et al., 2020; Islam et al., 2020; Toshkov, et al., 2021).

Migone (2020: 1) notes that: " (p) olicy making during a pandemic presents two main challenges: on the one hand it is very complex because it must address multiple policy fields and be implemented at a variety of jurisdictional levels (Bennett & Carney 2015), affecting the health care, social, economic, and public security policy fields and creating unique challenges" (see Carney & Bennett, 2014; Keller, 2019).

As the pandemic waned, no specific strategy or public policy emerged until a series of significant measures aimed at targeting economic recovery, unemployment, combatting the virus and public health were passed over the period of one year (this is not an exhaustive list). The various legislation appropriated trillions to combat COVID-19, including testing, paid time off for quarantine, economic stimulus, the paycheck protection program, and stimulus checks:

- Coronavirus Preparedness and Response Supplemental Appropriations Act, March 2020;
- Families First Coronavirus Response Act, March 2020;
- Coronavirus Aid, Relief, and Economic Security Act (CARES Act), March 2020;
- Paycheck Protection Program and Health Care Enhancement Act, April 2020;
- Paycheck Protection Program Flexibility Act of 2020, June 2020;
- Consolidated Appropriations Act, 2021, December 2020;
- American Rescue Plan Act of 2021, March 2021.

Meanwhile, there were state laws and COVID-19 laws passed simultaneously. However, there were few opportunities taken to change fundamentally the way the government works to address crises and disasters.

Pandemic public policy and management requires a comprehensive public administrative approach to deal with everything from regulating social distancing, developing protocols for international trade and travel, creating economic support packages for businesses and individuals, and managing medical responses (Migone, 2020). Moreover, Migone (2020) asserts that there are a myriad of possible policy choices involving multiple options in terms of implementation and that often require a granular focus on specific groups like healthcare workers (Maunder et al., 2008) and populations at risk (O'Sullivan & Phillips, 2019), an example here being how

COVID-19 struck older people particularly hard (Daoust, 2020). To complicate the policy landscape further, each of these policies has a broad range of choices available, such as the tensions that have emerged about limiting individual choice through lockdowns and wearing masks but is also dependent on the preparedness of a country at the onset of the pandemic (Capano, 2020). The legislation, local restrictions, supply chain issues, employment protection, emergency response, mobility restrictions, and border closures were simply done in the middle of the crisis to address the immediate issue with no true way to address the resilience of society and emergency response for the long-term or for disasters, crises, and pandemics yet to come. And thus, the question remains will the new programs, initiatives, and policy innovations that began as short-term reactions to the COVID-19 pandemic or an associated crisis remain? Or will particular innovations remain, those building a more resilient policy landscape in a post COVID-19 world?

Policy for a temporary crisis or sustained structural change: envisioning the post-COVID policy landscape

This paper presents an analysis of the theoretical and empirical challenges the coronavirus pandemic poses for temporary crises such as the social one, public health and travel implications, and the policies that have shifted structural change. Each disaster, pandemic, or crisis serves as a triggering event and provides an opportunity for a systemic advance in policy. Such opportunities, as Leslie (2014: 125) contends, are "unpredictable openings in the policy process that create the possibility for influence over the direction and outcome of that process," whereas Kingdon (1995) calls this opportunity the "opening of policy windows." Nevertheless, the role of policy makers and policy intuitions is highlighted in the midst of societal challenges.

Since the beginning of COVID-19, governments have faced demands from vulnerable populations, where they are responsible for social welfare services and social transfers, while also ensuring the continuity of public services in a crisis context. During the pandemic, citizens not only expect basic administrative services and the proper delivery of fundamental services in a seamless manner for essential sanitation, waste collection, hygiene, public transport, and public safety, but they also expect the fiduciary responsibilities of orderly government to transpire. In order to engage in orderly government during and in the post-COVID-19 landscape, governments and private sector collaborations must be developed to ensure a continuity of services when standard operating patterns and processes must be adjusted or new, more innovative ways to administer the public's affairs must be developed. Innovations

in policy and practices such as better access to tele-services (OECD, 2020b) is one way to sustain government functions, but more are needed. Additionally, governments and policy makers must be able to respond to emergent crises that arose as a result of other crises such as major economic downturns in economies heavily dependent on tourism and the relatively higher risk of job disruption and livelihood insecurity associated with national and regional lockdowns (OECD, 2020a; OECD, 2020b).

Furthermore, the current COVID-19 pandemic requires governments to become more innovative in the practice of government and the offer of more cross-regional policy innovation and practices is needed for sustained structural change to address governmental responses to viral outbreaks. When viewing global best practices and policy innovations, examples of policy innovation are working to maintain the orderly function of government. Multi-national examples of innovative practices at the municipal/city level include examples of regional approaches include: cooperation across municipalities in Denmark, where municipalities have joined forces to purchase protective equipment for their personnel (Aarhus Kommune, 2020; OECD, 2020b), in Israel, local authorities share knowledge via the Ministry of the Interior, the Union of Local Authorities and the National Initiative 265 for Development and Knowledge-sharing to Advance the Digitization of Local Authorities (Tel Aviv-Yafo Municipality, 2020, OECD, 2020b). Additionally, at the regional level, in Switzerland, the Conference of Cantonal Governments coordinates activities related to the COVID-19 crisis with the Federal Council and among the 26 cantons (Conference of Cantonal Governments, 2020; OECD, 2020b). In the US those are cross-region coordination initiatives among states such as coordination among New York, New Jersey, Connecticut, and Pennsylvania to establish a common set of policies for social distancing and limits on recreation (New York State, 2020; OECD, 2020b). And finally, an example of cross-border collaborations for swift policy innovation includes cross-border transfers of COVID-19 patients among France, Germany, Switzerland, and Luxembourg.

Conclusion

The COVID-19 pandemic offered short- and medium-term effects and will have long-term effects on the functioning of national and subnational governments. One key risk identified by the OECD is that many government unit responses focus only on the short term. In order to promote a well-prepared sustained government response that is resilient to the shocks of this kind and disasters yet to come, the OECD (2020b) contends that longer-term priorities must be included in the immediate response

measures to disasters and crises in order to boost the resilience of regional socio-economic systems. The case study of the COVID-19 pandemic disaster, presented briefly in this paper, although unique in its nature, clearly illustrates how the role of policy formation during times of crisis can lead to revolutionary changes in society and long-term structural changes within policy institutions themselves.

Author Contributions

NDB prepared the analytical framework. DSM developed the case study analysis. Both authors prepared the literature on the subject and conclusions from the research. Both authors, NDB and DSM have made substantial, direct, and intellectual contributions to the work and approved it for publication.

Conflict of Interest

The authors declare that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

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