#### ON LINE INTERNATIONAL SYMPOSIUM

## Credibility of scientific expertise and decision-making

New challenges for health risk governance in a changing world



### COVID-19 SESSION

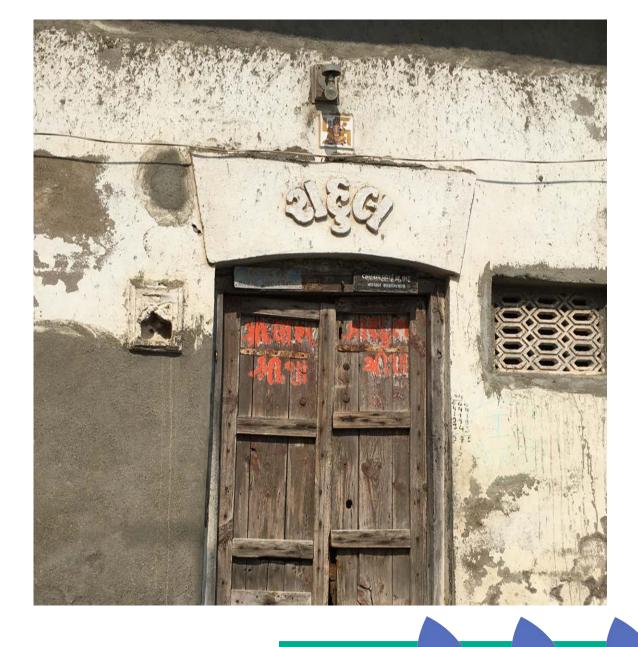
# Covid-19 International Comparisons: Crisis, Knowledge, Policy

Stephen Hilgartner (Cornell University)

21st January 2021



# I. Introduction





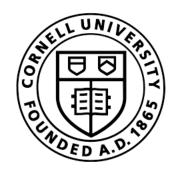
# Comparative Covid Response: Crisis, Knowledge, Politics

Interim Report

- Sheila Jasanoff (Harvard Kennedy School)
- Stephen Hilgartner (Cornell University)



- Onur Özgöde (Harvard University)
- Margarita Rayzberg (Cornell University)









# Comparative Covid Response Crisis, Knowledge, Policy (CompCoRe)

**16** country teams

2 Co-Pls

**59** Collaborators

**38** Research Institutions

2 affiliate countries

## **Funding:**

NSF, Schmidt Futures; multiple national partners

## Disciplines Represented

Social sciences

Law

History

Policy

Science & Technology Studies (STS)



## **ASIA**



China

Singapore

**(**\*\*\*





India South Korea





Japan Taiwan

## **EUROPE**





Austria

Netherlands





France

Sweden





Germany

United Kingdom



Italy

# AUSTRALIA, NORTH AMERICA & SOUTH AMERICA



Australia



Brazil



**United States** 



# WHY COMPARE? It's a *Pan*demic. Why look at Nations?

Territorial borders matter

National measures dominate policymaking

National responses have international implications

Nation's experiences and responses differ

Varied responses offer opportunities for learning







# II. Findings



# Puzzles, Paradoxes, and Divergences

### Myths and realities

- US (#1 in GHSI, #1 in deaths)
- World evangelist for democracy; democracy under attack

#### **Outcomes**

- US confirmed 1837 times more COVID-19 cases per million people than Taiwan
- UK's cumulative deaths per million (1,113) more than double South Africa's (515) in 2021
- UK GDP per capita over three times higher than South Africa

### **Science advice**

Germany (Robert Koch Institute) vs. UK (SAGE vs. indieSAGE)

## Relationship between Citizens and the State

• Netherlands ("intelligent lockdown") vs. Japan (blame victim) vs. Singapore (trusted paternalism)







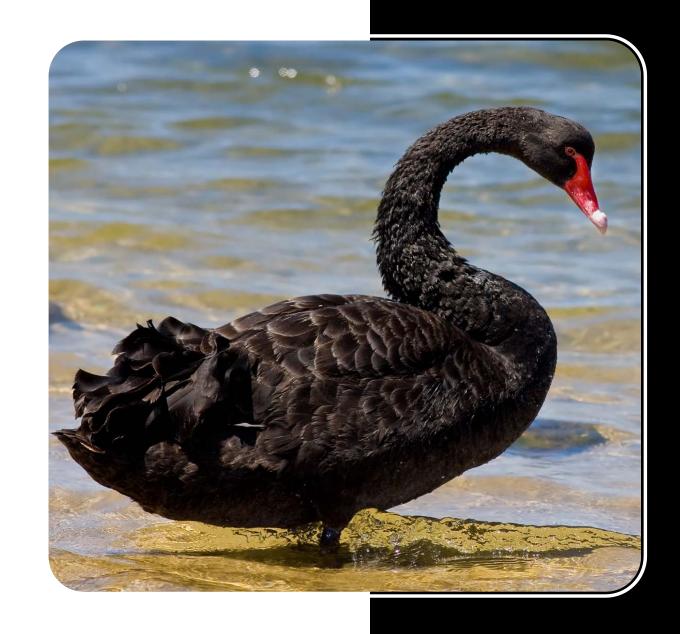
Health system Economic system Political system





## FIVE FALLACIES

- 1 A playbook can manage a plague.
- 02 In an emergency, politics takes a backseat to policy.
- Indicators of success and failure are clear and outcomes can be well defined and objectively measured.
- O4 Science advisors enable policy makers to choose the best policies.
- O5 Distrust in public health advice reflects scientific illiteracy.











# PREEXISTING CONDITIONS Health disparities | Inequality | Partisan division



## 3 Response Patterns

Control,

Consensus,

Chaos

	Control (Taiwan)	Consensus (Germany)	Chaos (United States)
Health	Uncontested public health sovereignty  Learning from SARS and H1N1	Negotiated public health sovereignty  National research & advisory system  Corporatist medicine	Contested public health sovereignty  Competing political and biomedical subject
Economy	Minimal restriction  No lockdown  Negative effects mainly from networked economy	System stabilization  Job protection  Learning from 2008	Market stimulus  Direct cash relief  Controversial bailouts
Politics	Statist approach  High public approval of Covid response  Victory for incumbent party in local election	Corporatist approach  Committed to risk aversion and stability	Pluralist with high polarization  Distrust in expertise  Conflict between center and states

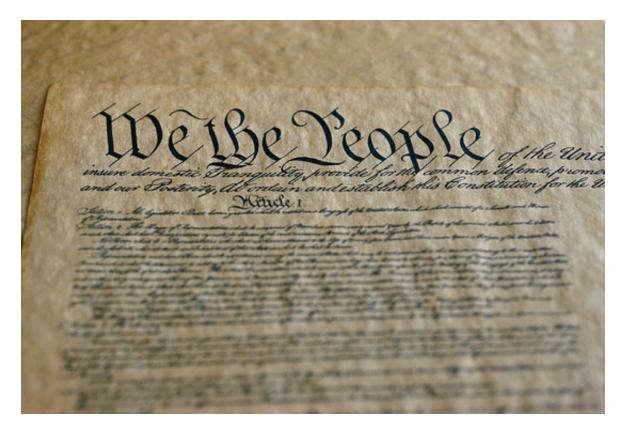


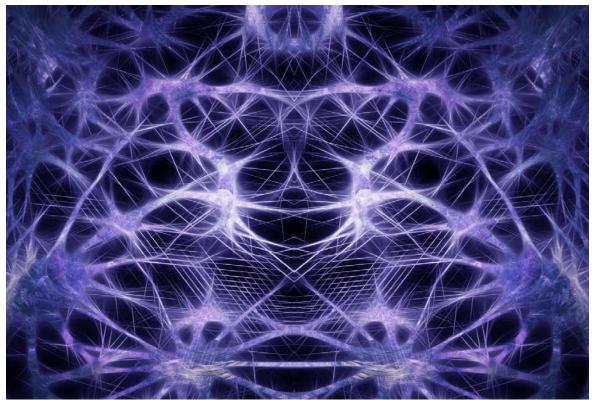




# Two modes of intervention

	Targeting the Virus	Targeting Social Practices
Metaphoric Frame	Virus as foreign invader	Citizens and social practices as domestic threat
Typical Measures	Border controls Personal protective equipment (PPE) Isolating vulnerable individuals Herd immunity Miracle drugs Vaccines	Social distancing in public Limiting private gatherings Mask mandates Domestic travel restrictions Lockdowns of economies & social life, school closings Combating vaccine hesitancy
Sources of expertise	Clinical medicine, virology, cellular biology, genomics	Epidemiology, mathematical modeling, social and behavioral science
Imagined mechanism of action	Technological fixes "Silver bullet" solutions	Citizen compliance to limit spread
Intrusiveness	Low	High





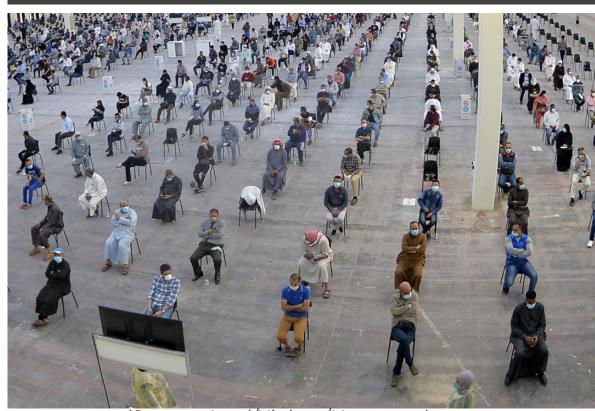
The 21<sup>st</sup> Century Social Compact

Delegation to experts
Epistemic authority
Trust in science





# In sync | Out of sync





(Source: Asad/Xinhua/Newscom)

(Source: AP Photo/Paul Sancy)



# IV. Conclusion





# **Hard Truth #1**

Misreading the world has high costs

**Hard Truth #2** 

Trust in science is not equivalent to trust in public health expertise

**Hard Truth #3** 

Resilience is more important than planned public health guidance

#### CompCoRe Leadership Team

Sheila Jasanoff (Harvard), Principal Investigator Stephen Hilgartner (Cornell), Principal Investigator J. Benjamin Hurlbut (Arizona State University) Onur Özgöde (Harvard University) Margarita Rayzberg (Cornell University)

#### **CompCoRe Country Teams**

#### Australia

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#### **United States**

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#### **Affiliate Country Teams**

#### Indonesia

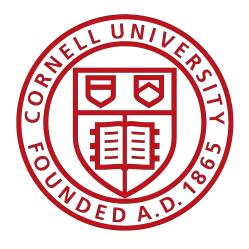
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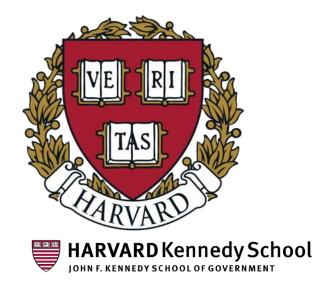
#### **CompCoRe Participants**

5 continents 16 core countries 2 affiliate countries 39 institutions 59 researchers









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Cornell University

# Thank you!

CompCoRe report available here: <a href="https://www.futuresforumonpreparedness.org/research">https://www.futuresforumonpreparedness.org/research</a>



