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D4.1 Baseline report: Governmental responses



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Executive Summary

COVINFORM provides an in-depth analysis of the behavioural, social, and economic impacts of the outbreak multi-dimensional responses from governmental entities, NGOs, international organizations, and additional relevant stakeholders. More in particular, the current workload of Work Package 4 (WP4: Government responses and impact assessment) gives focus on the governmental responses towards COVID-19. Based on a large desktop research conducted by the consortium partners among their fourteen respective countries, the main outcomes of this deliverable summarise and assess the responses per country in terms of governmental structures, social, legal, cultural, and economic factors influencing the governmental measures and responses towards COVID-19, adaptations to vulnerable groups as well media representation. The majority of the States that have been included in this study, in regard to governmental structure, have adopted a central-government approach, issuing additional administrative powers to central points of authority such as Ministries instead of regional administrative entities. Moreover, regarding socio-economic, cultural, and legal factors, close family ties was a common identified phenomenon which depend on the percentage of diversity in each case. In addition, States have identified vulnerabilities based on health, cultural, economic, and social factors, whereas the needs of the elderly population, minorities, single-parent families, citizens, and businesses struck by COVID-19, were prioritized in most cases. Concluding, regarding the official communication efforts, a centralized communication strategy was adopted by most states, which utilized live press briefings on contemporary COVID-19 data via renown epidemiologists and state officials. The governments of the States in this research have also utilized a wide range of platforms and means to convey timely COVID-19 related information such as official websites, radio, newspapers, social media platforms and flyers. An initial comparative discussion with further recommendations that will fit to the next iterations of the empirical research will be also provided.

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Acronyms & Abbreviations

Term	Description
AGIA	Agency for Childhood and Adolescence
AGES	Austrian Agency for Health and Food Safety
AHA	Abstand Hygiene Alltagsmasken
BAG	Bundesamt für Gesundheit
BAME	Black Asian Minority Ethnic
ВС	Before Christ
BMG	Bundesgesundheitsministerium
BMI	Body Mass Index
CCS	Civil Contingencies Secretariat
COVID	Corona Virus Disease
CTS	Scientific Technical Committee
DOI	Digital Object Identifier
DSP	Department of Social Protection
ECDC	European Centre for Disease Prevention and Control
EEA	European Economic Area
EKKA	National Center for Social Solidarity
EKPA	National & Kapodistrian University of Athens
ERMG	Economic Risk Management Group
EU	European Union
EWSS	Employment Wage Subsidy Scheme
FAQ	Frequently Asked Questions
FOPH	Federal Office of Public Health

GDP	Gross Domestic Product	
GDPR	General Data Protection Regulation	
GSPP	General Secretariat for Civil Protection	
HSE		
	Health Service Executive	
ICU	Intensive Care Unit	
IEEE	Institute of Electrical and Electronics Engineers	
IOM	International Organization for Migration	
JCVI	Joint Committee on Vaccination and Immunisation	
KYSEA	Council for Foreign and Defense Affairs	
NARPDCA	National Authority for the Rights of Persons with Disabilities, Children and Adoptions	
NATO	North Atlantic Treaty Organization	
NHS	National Health System	
NPHET	National Public Health Emergency Team	
NPHO	National Public Health Organization	
OECD	Organisation for Economic Co-operation and Development	
PPE	Personal Protective Equipment	
PUP	Pandemic Unemployment Payment	
RAI	Radiotelevisione Italiana	
RAG	Risk Assessment Group	
SAGE	Scientific Advisory Group for Emergencies	
SARS	Severe Acute Respiratory Syndrome	
SCG	Strategic Coordinating Group	
SN-STF	Swiss National COVID-19 Science Task Force	
TAC	Technical Advisory Cell	
TAG	Technical Advisory Group	
TV	Television	
TWSS	Temporary Wage Subsidy Scheme	
UN	United Nations	
UNICEF	United Nations International Children's Emergency Fun	
UNWTO	United Nations World Tourism Organization	
VAT	Value Added Tax	
WHO	World Health organisation	
WP	Work Package	
	-	

1 Introduction

Since the beginning of 2020, the global health crisis of COVID-19 pandemic has impacted severely the wellbeing of society worldwide, bringing forward socioeconomic vulnerabilities, inequality, and division among marginalised communities. The COVINFORM project's main objective is to capitalise on the multidisciplinary expertise of the sixteen consortium partners and analyse and critique COVID-19 responses on the levels of government, public health, community, and information and communications, developing in parallel risk assessment models based on available quantitative data at the European level which will end up to the creation of an online portal and visual toolkit for governments, healthcare, and citizens.

The main aim of the current work package (WP4: Government responses and impact assessment) is to focus on the governmental structures and responses, by reviewing them on a national level among the project target countries, as well as on a regional/local level in selected communities and case studies, performing in parallel an in-depth analysis of key dimensions of governmental response impact in the project target countries. More in particular, the current deliverable under task 4.1 (T4.1 Describe governmental structures and responses in the target countries), aims to gather and assess governmental responses, including a review of relevant primary sources (governmental policies and guidelines, official assessments and reports, etc.) and secondary sources discussing these **governmental responses**¹ (scholarly studies, grey literature, etc.), resulting to a baseline concrete report with chapters per partner country, containing top-level descriptive analysis of relevant structures and responses. Focus is given to **vulnerable groups**² and the way those were affected (physically, economically, socially, and mentally) not only by COVID-19 but mostly from the governmental response and reaction to it.

After a short introduction of the aims and the objectives of the deliverable (Section 1), Section 2 introduces the reader to the concept of governance and its relevance and importance during the COVID-19 pandemic, illustrating in parallel the research design methodology followed to gather all the relevant responses from the respective partner countries. In Section 3, a descriptive analysis of the received dataset is being outlined, while Section 4 reports the research outcomes per country and per specific question, as received by the consortium partners. Finally, Section 5 briefly summarises and discusses the main findings, performing an initial comparative analysis among countries, providing also further recommendations for the empirical research, with section 6 to conclude the whole document.

¹ Focus should be given to policies and final decisions. Any reference to potitical debates/discussions should not be listed separately, just the final outcomes of such debates.

² According to EU Migration and Home affairs, vulnerable people can be minors, unaccompanied minors, disabled people, elderly people, pregnant women, single parents with minor children and persons who have been subjected to torture, rape or other serious forms of psychological, physical or sexual violence, victims of trafficking. (vulnerable person | Migration and Home Affairs (europa.eu))

Also please check the European institute for Gender Equality definition of vulnerable people during COVID-19, People in vulnerable situations (europa.eu), as well as the Technical report of European Center for Disease Prevention and Control namely "Guidance on the provision of support for medically and socially vulnerable populations in EU/EEA countries and the United Kingdom during the COVID-19 pandemic" Medically-and-socially-vulnerable-populations-COVID-19.pdf (europa.eu)

In this WP we will adopt a general approach on the "Vulnerable group" definition so as to see how governemental responses apporached during COVID-19 these groups. Vulnerabilities: "conditions determined by physical, social, economic, and environmental factors or processes, which increase the susceptibility of [an individual or] a community to the impact of hazards" (UN/ISDR, Geneva 2004; cited in the Hyogo Framework for Action 2005-2015)

2 Governance

2.1 Introduction: Governance in the time of COVID-19 Pandemic

According to Aristotle (385-322 BC) "Man is by nature a political animal" (Barnes 2000), who lives in societies and forms states (polis) not as "artificial trappings imposed upon natural man but as manifestations of human nature itself". In order for the society and the State to function in a proper order since ancient years the concept of governance has emerged. Even though the term is wide, it mainly refers to all the systems, structures and process that have emerged and are in place to direct, control and hold accountable each organisation, institution agency, social system, government and/or state, ensuring "accountability, transparency, responsiveness, rule of law, stability, equity and inclusiveness, empowerment, and broad-based participation" (International Bureau of Education n.d). As Hufty (2011) outlines, governance is related to "the processes of interaction and decision-making among the actors involved in a collective problem that led to the creation, reinforcement, or reproduction of social norms and institutions".

COVID-19 global pandemic of coronavirus disease was initially reported in Wuhan, China and spread worldwide. It required a strong strategical plan not only from international institutions and organisations, but also from governments themselves on a national, regional, and local level that would orchestrate a coordinated response and preparedness plan to tackle all the issues emerging from this pandemic. As it has been underlined by OECD (2021) (Organization for Economic Cooperation and Development n.d.), a good public governance plays a pivotal role to the proper and effective management of such a global crisis, not only on the preparedness but also on the recovery phase. According to World Bank (2021) recommendations³, a good governance system needs to consider different dimensions to be tackled, such as regulatory legal and ethical constraints, risks emerging from daily multidimensional challenges (e.g., health, education, employment, social inclusion, etc.), issues on public trust and integrity towards the relevant governmental decisions and strategies. In particular, as a policy brief from the world Justice Project outlines (2020)⁴, governmental institutions had to balance an effective response to the COVID-19 health crisis by responding to public health in conjunction with keeping all the other essential public services at a good level and with respect to the relevant legal frameworks. All the emergency measures that needed to be adopted had also to be aligned with "five essential features in order to strike a proper balance between liberty and security: (a) in accordance with the law, (b) based on a legitimate objective, (c) strictly necessary in a democratic society, (d) the least restrictive and intrusive means available and (e) not arbitrary, unreasonable, or discriminatory"⁵.

In addition to the former, speed, effectiveness, responsiveness, adaptation, transparency, accountability, communication, and coordination not only on a national but also on an international level are the cornerstone for well-rounded governmental actions that could provide societies with

³ The World Bank Group. (2020, April 13). *Governance*. Retrieved May 27,2021, from https://www.worldbank.org/en/topic/governance/overview

⁴ World Justice Program. (2020, July). *Accountable Governance and The COVID-19 Pandemic*. Retrieved May 27, 2021, from

https://worldjusticeproject.org/sites/default/files/documents/Accountable%20Governance-10.20.20.pdf. bid.

mitigation measures against the daily pandemic challenges, maintaining in that way the continuity to society, without leaving behind vulnerable populations among their nations⁶.

2.2 Research design and methodology

The following chapter presents the adopted methodology that guided the consortium partners to collect the relevant data for further analysis, as further outlined in the next sections of this deliverable.

2.2.1 Aim and objectives of the desktop research.

The main objective of the desktop research as part of this task under WP4, was to gather and further assess the governmental responses that have been in place since the outbreak of COVID-19 pandemic from the respective consortium countries, so as to comprise a baseline report that could be used for further empirical research. Researchers aimed through the data collection to identify and analyse per target country the relevant structures and responses, also outlining commonalities and differences on a national and regional level.

2.2.2 Research questions

The desktop research conducted by the consortium partners in T4.1, was guided by the following research questions, which served as safeguard for the studies to be as representative as possible. The main research questions are:

- Which indicators led governments adopt specific COVID-19 related responses /measures?
- How (in matters of legal procedures) were they shaped?
- What were the main incentives and core approach during the first and the second wave of the pandemic, focusing on the main differences between these two periods?
- How were those responses different from the usual governmental practices (if there are any differences) before the pandemic? Have the governmental structures been changed at any way (nationally, regionally, and locally)?
- Who was the main target-population of the governmental responses? Were they diversified per target-population?
- What were the particular responses relevant to economy, social welfare, health system, security?
- What were the main (i) economic, (ii) social, (iii) health (iv) educational effects from these governmental responses to the population of interest?

2.2.3 Research Guidelines and process

All COVINFORM consortium partners involved in T4.1 had received a guide named "COVINFORM Research Guidelines for T4.1" (Annex A), which entailed analytical guidance to them explaining the specific steps, requirements, deadlines as well as instructions for the data collection templates along with the general objectives and data collection procedures. Along with the guide, they also received an excel template (Annex B) that had the following categories:

⁶ The World Bank Group. (2020, March 31). Governance and Institutions Emergency Measures for State Continuity during COVID-19 Pandemic. Retrieved May 27, 2021, from https://pubdocs.worldbank.org/en/333281587038822754/Governance-and-Institutions-during-COVID.pdf.

- i. Name of Publishing Organisation/Institution/Entity
- ii. Level of Publishing Organisation Organization/Institution/Entity
- iii. Publication/Source Type
- iv. Year of Publication
- v. Author (s)
- vi. Search terms used.
- vii. Title of source/document/publication in the original language and an English translation
- viii. Language of source/document
- ix. Detailed English Description of main points
- x. Timeframe of the specific response (before COVID-19, during the first wave, during the second wave)
- xi. Population of interest which was affected by the specific response.
- xii. Impact identified on relevant population.
- xiii. Hyperlink/DOI
- xiv. Other Comments

Parallel to the excel file, each Consortium partner was asked to fill in a specific Country Report (Annex c) briefly summarize the situation existing in their respective countries around the following issues, reflecting also to changes comparing with the situation prior to the pandemic as well as between the two pandemic waves. More in particular, they were asked to provide specific answers on the following topics:

- The **governmental structure** of their country (on national, regional, and local level), indicating any changes/adaptations, prior the pandemic as well as among the pandemic waves.
- The main actors in decision making and policy process inside their country, indicating any changes/adaptations prior the pandemic as well as among the pandemic waves (e.g., parties, unions, business/medical/research associations, legal sector etc.)
- The main social, economic, cultural, and legal factors that were taken into consideration for the specific governmental responses to emerge.
- Any adaptations of the governmental responses towards vulnerable groups, indicating any changes/adaptations prior the pandemic as well as among the pandemic waves.
- The main means of communication (e.g., online and offline media, specific web platforms etc.) used on a governmental level (national, regional and local) for the governmental decisions to be promoted to citizens, indicating any changes/adaptations prior the pandemic as well as among the pandemic waves.

2.2.4 Timeline, Inclusion and Exclusion criteria

The entries should cover the period from 24th of January 2020 (as January was the month when the first COVID-19 case was identified in Europe), till end of March 2021, with clear distinction among the relevant waves of the pandemic in each country, also including entries from January 2019-January 2020 (for comparison purposes among governmental structure/decisions/responses etc. before and after the start of the pandemic)

The language that had to be included in the research would be mainly English. However, due to the specific particularities of the research (governmental responses usually are issued in the national/regional language and there is not an English translation), all the entries were accepted if

accompanied by a comprehensive and detailed English description of the main points of each entry and its relevance to the research.

Entries with no focus on the subject of research, with no available detailed abstract in English, with no available free text or not compliant with GDPR and/or research ethics standards, e.g., private social media profiles, data gathered in an unethical way were excluded.

2.2.5 Research sources and search terms

The main research sources for the desktop research could be:

- 1. **Primary sources** including governmental policies and guidelines, official assessments and reports, produced directly by national governmental and policymaking bodies. Consortium partners could search inside their countries for this information (e.g. in parliament decisions, in legislation, in reports etc.) using probably official governmental websites etc.
- 2. **Secondary sources,** where **c**onsortium partners could search for **specific studies focusing on economic/health/social impact of governmental policies**. These may include:
 - a. *Academic resources* (peer-reviewed journals, academic books, conference proceedings and other academic studies), utilising Google Scholar⁷, Web of Science⁸, Scopus⁹, IEEE Explore¹⁰ and/or other academic databases.
 - b. *Grey literature*, e.g. policy briefs, reports and presentations produced by international and EU organizations, governmental and policymaking/legal bodies, NGOs and civil society organizations, think tanks, lobbies, Security Organisations, and the private sector.
 - c. *Popular resources* (online articles, press stories, websites, publicly available social media accounts and wikis), using search engines (google, Bing), newspapers databases and archives (LexisNexis¹¹, ProQuest¹², other databases from their country), Social search engines (e.g. social searcher¹³), public social media profiles of relevant bodies, organisations and companies.
 - d. Data from similar projects, if any.

Partners were also provided with suggested search terms to ensure relevance of results with the aim and objectives of Task 4.1, an indication of which is summarized in Table 1.

Main Search Term (s)

Secondary Search Terms
(Combined with AND/OR with the main search terms)

Impact on - Economic, Societal (wellbeing etc.), Educational, Health, Elderly Care, Employment Legal, Security and Criminal Justice System (Prisons-Courts-Police)

Responses (Before/After)

Legal factors/Law/Legislature

Vulnerable groups

Table 1. Search Terms for T4.1

¹¹ Welcome to LexisNexis Legal & Professional

⁷ https://scholar.google.com/

⁸ Web of Science - Please Sign In to Access Web of Science (webofknowledge.com)

⁹ <u>Scopus preview - Scopus - Welcome to Scopus</u>

¹⁰ IEEE Xplore

¹² ProQuest | Better research, better learning, better insights.

¹³ Social Searcher - Free Social Media Search Engine (social-searcher.com)

Communication Campaigns	
Europe	
Global	
Countries (the Country name can be used to filter the specific responses/policies for your country e.g. Spain, Greece, Austria etc.)	

Both Boolean operators¹⁴ (AND, OR, NOT) and Truncation¹⁵ (*, for multiple endings) along with Wildcard Symbols¹⁶ (*,?) could be used to combine the search terms of interest from all the columns, as well as expand the search results.

2.2.6 Countries under the research

The countries covered by the research were: Austria, Belgium, Cyprus, Israel, Ireland, Italy, Germany, Greece, Portugal, Romania, Spain, Sweden, Switzerland, and the United Kingdom. In addition to that governmental responses from an international and EU level have been also gathered and properly assessed for the final outcomes of the report.

3 Research outcomes: Excel Entries.

3.1 Final Dataset

All the consortium partners have provided N_0 =1533 entries in the excel database. Having carefully reviewed these entries based on the inclusion and exclusion criteria, N_1 =25 entries were excluded as they had been published before January 2019, while the remaining **N=1508** entries fitted all the inclusion criteria, leading to the final dataset.

3.2 Descriptive Analysis

For acquiring a better overview on the received entries, a certain descriptive analysis has been applied. To begin with, as Table 2 outlines, 3 entries were before the pandemic, 1185 (79%) were in the year 2020 and the rest either in the year 2021 (17%) or ongoing from 2020 till the current date of report (4%)

Year of Publication	Count
2019	3
2020	1185
2021	260
ongoing	60
Total	1508

Table 2. Year of Publication (N=1508)

¹⁴ Rockwell Schrock's Boolean Machine

¹⁵ Truncation & Wildcard Symbols - Research Process - LibGuides at Northcentral University

¹⁶ Asterisk wildcard (*) is used between words where variations may be possible, Question mark wildcard (?) is used to replace an unknown character

Moving to the Level of Organisation/Institution/Entity that issued the relevant entry, Figure 1 illustrates that national entries fall under the majority of 92.3%, while the rest are distributed among International (4.8%) European (1.4%) Regional (1.3%) and "other" (0.2%).

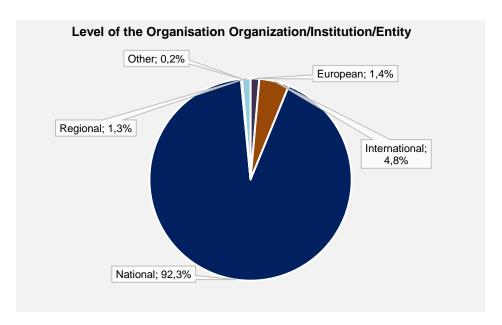


Figure 1. Level of Organisation/Institution/Entity proposing the data entries (N=1508).

Finally, as far as the Publication type is concerned, the majority (Table 3) of them mainly refer to all the legislation acts, measures, orders, decisions etc. that have been issued from the beginning of pandemic till the end of March 2021, which aimed to tackle and respond to the impact and the challenges COVID-19 had on the relevant population on a social, educational, economic, labour, security, justice level.

Table 3. Type of publication per entry (N=1508)

Publication/Source Type	Count
Academic publication/Scientific Article	97
Government Response/Statements/Plans	210
Policy papers, briefs, and factsheets	48
Legislation and Guidance (orders, acts, legislature, announcements, decrees, decisions etc.)	1032
Press release/Press Conference	27
News/Media/Websites	63
Reports and Recommendations	31
Total	1508

4 Research Outcomes: International, EU and specific country reports.

4.1 International and EU Responses

To begin with, the following section provides a short overview from responses, actions, measures, and practices from four selected International and European organisations.

4.1.1 World Health Organization

On December 31st, 2019 WHO was notified about cases of pneumonia from unknown origin in the city of Wuhan, China. During January 2019, and while the disease was spreading, it was determined that the outbreak was caused by a novel coronavirus (Sohrabi et. al 2020). The rhythm by which the virus was spreading led the WHO to declare the outbreak of COVID-19 to be a Public Health Emergency on January 30th, 2020. After the identification of numerous cases in Europe, the WHO, on the 11th of March 2020, raised the level of alertness and characterized the outbreak as a "pandemic" 17. As the main international institution responsible to handle health related crisis, the WHO took multi-level actions to combat the pandemic. Its strategy focused around three priority areas, namely (1) advice, (2) technical guidance and (3) response. Advice was, and still is, issued by the WHO mainly towards, the public, regarding basic health safety procedures and actions such as social distancing, wearing masks, hand cleaning etc.¹⁸. In addition, advice19 were published regarding health workers and personnel, which included approaches and measures in order to safeguard themselves and the patients they are attending to. The second aspect of WHO's strategy was the constant publication of technical guidelines to the countries in order to assist them in dealing with the pandemic on a variety of topics, from tools for surveillance and response to new COVID-19 cases and clinical care to measures and protocols for schools and workplaces. Those guidelines written by the WHO, in cooperation with health experts, constitute a holistic approach to the technical consultation of countries on how to deal with this and with future pandemics and they can be found in WHO's guideline designated website²⁰.

WHO's all-around response is summarized and described in its **Strategic Preparedness and Response Plan (SPRP)**²¹. The SPRP constitutes a comprehensive document that outlines an overview of the pandemic situation while helping in guiding the public health responses on global, national, and local levels. It proposes solutions on matters of coordination, planning, risk communication, surveillance, laboratories, diagnostics, and case management, among others, in order to achieve certain strategic goals (limit the spread, misinformation, protection of the vulnerable etc.) and bring the global community closer to combat the pandemic. The first SPRP was published on the 4th of February 2020

¹⁷ Branswell H. and Joseph A. WHO declares the coronavirus outbreak a pandemic. Statnews. Retrieved May 26, 2021 from https://www.statnews.com/2020/03/11/who-declares-the-coronavirus-outbreak-a-pandemic/

¹⁸ World Health Organization (2021). *Coronavirus disease (COVID-19) advice for the public.* Retrieved May 26, 2021 from https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public

¹⁹ World Health Organization (n.d.) *Health Workers and Administrators*. Retrieved May 26, 2021, from https://www.who.int/teams/risk-communication/health-workers-and-administrators.

²⁰ World Health Organization (n.d.). *Country & Technical Guidance - Coronavirus disease (COVID-19)* Retrieved May 26, 2021, from https://www.who.int/emergencies/diseases/novel-coronavirus-2019/technical-guidance.

²¹ World Health Organization (2021). *COVID-19 Strategic Preparedness and Response Plan (SPRP 2021)*. Retrieved May 26,2021 from https://www.who.int/publications/i/item/WHO-WHE-2021.02.

and has been updated regularly ever since. Finally, WHO provides regular information regarding vaccinations²² and promotes fair and equal access to vaccinations anywhere in the world. It is also worth noting that WHO has created a **designated database**²³ regarding all COVID-19 related research as well as an **R&D Blueprint**²⁴ to expedite the research process and the cooperation between scientists.

4.1.2 United Nations

Over the course of the pandemic, it became clear that COVID-19's consequences were not limited only on health but touched upon the whole spectrum of the social life. This is why the United Nations employed all its mechanisms to try and manage this unprecedented crisis. The overall UN's strategy is described in its "Comprehensive Response to COVID-19 Saving Lives, Protecting Societies, Recovering Better" document²⁵. The Response is based on three main points, health response, safeguard lives and livelihoods, and a transformative recovery. Spearheading the health response is the WHO with its own Strategic Preparedness and Response Plan which is briefly described in another section of this paper. The second aspect of the Response is concerned with the socio-economic impact of the virus on societies. Its objectives are to protect people's lives and human rights, ensure the economic survivability of the countries and maintaining the accessibility to vital services. To that end, all the UN agencies, each in its field, contributed to providing support to the national governments of the member states. To specify, the UN agencies have aided in the following areas:

UN Areas of Assistance Humanitarian Assistance 27 Economic and Social Development²⁸ Peacekeeping²⁶ Refugees²⁹ Migration and Mobility³⁰ Aviation³¹ Tourism³² Shipping³³ Environment³⁴ Human Rights³⁷ Labor³⁵ Education³⁶ Space³⁸ Children³⁹ Women⁴⁰

Table 4. UN areas of Assistance

World Health Organization (2021). *COVID-19 Vaccines*. Retrieved May 26, 2021, from https://www.who.int/emergencies/diseases/novel-coronavirus-2019/COVID-19-vaccines.

²³ World Health Organization (2021). *COVID-19 Global literature on coronavirus disease*. Retrieved May 26, 2021 from https://search.bvsalud.org/global-literature-on-novel-coronavirus-2019-ncov/.

²⁴ World Health Organization (2021). *R&D Blueprint and COVID-19*. Retrieved May 26, 2021, from https://www.who.int/teams/blueprint/COVID-19.

²⁵ "Comprehensive Response to COVID-19 Saving Lives, Protecting Societies, Recovering Better"

²⁶ https://peacekeeping.un.org/en/impact-of-COVID-19-un-peacekeeping.

²⁷ https://www.unocha.org/COVID19.

²⁸ <u>https://www.un.org/en/desa/COVID-19.</u>

²⁹ https://data2.unhcr.org/en/situations/COVID-19.

³⁰ https://www.iom.int/COVID19.

³¹ https://www.icao.int/Security/COVID-19/Pages/default.aspx.

³² https://www.unwto.org/tourism-COVID-19-2020.

 $^{{\}color{blue}^{33}}\,\underline{\text{https://www.imo.org/en/MediaCentre/HotTopics/Pages/Coronavirus.aspx.}}$

³⁴ https://www.unep.org/COVID-19.

³⁵ https://www.ilo.org/global/topics/coronavirus/lang--en/index.htm.

³⁶ https://en.unesco.org/COVID19/educationresponse.

³⁷ https://www.ohchr.org/EN/NewsEvents/Pages/COVID-19.aspx.

³⁸ https://www.un-spider.org/advisory-support/emergency-support/COVID-19.

³⁹ https://www.unicef.org/coronavirus/COVID-19.

⁴⁰ https://www.unwomen.org/en/news/in-focus/in-focus-gender-equality-in-COVID-19-response.

Trade ⁴¹	Water and Sanitation ⁴²	Information and Communication ⁴³
Atomic Energy ⁴⁴	Finance ⁴⁵ and Banking ⁴⁶	Drugs, Crimes and Terrorism ⁴⁷
Food ⁴⁸ and Agricultural Development ⁴⁹		

As a part of its comprehensive response the UN also issues, on a tactical basis, **policy briefs**⁵⁰ in order to provide Governments with solutions that will tackle the consequences of COVID-19 on each of the aforementioned areas. Great attention has been given to **people with disabilities**, as the UN has recognized that the COVID-19 has had a negative impact upon them, both socially and economically. The significance of the matter to the UN is highlighted by the fact that it has launched The **United Nations Disability Inclusion Strategy**51 alongside several other tools and mechanisms⁵² that not only address how people with disabilities have been affected from the pandemic but also how countries will be able to include them as a part of their future recovery.

Finally, regarding the transformative recovery and the post-COVID-19 period, the UN and its country teams are closely cooperating with the national governments in order to align the COVID-19 related measures with the 2030 Agenda for Sustainable Development⁵³ and the Paris Agreement on Climate Change⁵⁴ and the Sendai Framework for Disaster Risk Reduction⁵⁵ as well as to ensure the better management of future diseases and the rising social inequality. In the same context, the UN's Secretary General has launched a Response and Recovery Trust Fund⁵⁶ that is dedicated in facilitating the recovery of countries that need assistance due to the socio-economic impact of COVID-19. The resources gathered have been used to fund solutions on various issues, like gender equality, agriculture, education, health services and others, that are based on the UN framework for the immediate socio-economic response to COVID-19⁵⁷.

⁴¹ https://unctad.org/programme/COVID-19-response.

⁴² https://www.unwater.org/coronavirus-global-health-emergency/.

⁴³ https://www.itu.int/en/Pages/COVID-19.aspx.

⁴⁴ https://www.iaea.org/COVID-19.

⁴⁵ https://www.imf.org/en/Topics/imf-and-COVID19.

⁴⁶ https://www.worldbank.org/en/who-we-are/news/coronavirus-COVID19.

^{47 &}lt;a href="https://www.unodc.org/unodc/en/COVID-19.html">https://www.unodc.org/unodc/en/COVID-19.html.

⁴⁸ http://www.fao.org/2019-ncov/en/.

⁴⁹ https://www.ifad.org/en/COVID19.

⁵⁰ United Nations (2020). *United Nations Comprehensive Response to COVID-19*. Retrieved May 26, 2021 from https://www.un.org/sites/un2.un.org/files/un-comprehensive-response-to-COVID-19.pdf.

⁵¹ United Nations (n.d.). *United Nations Disability and Inclusion Strategy*. Retrieved May 26, 2021 from https://www.un.org/en/content/disabilitystrategy/assets/documentation/UN Disability Inclusion Strategy english.pdf.

⁵² ibid.

United Nations. (2020). *The Sustainable Development Agenda*. Retrieved May 26, 2021 from https://www.un.org/sustainabledevelopment/development-agenda/.

⁵⁴ United Nations. (2021). The Paris Agree*ment*. Retrieved May 27, 2021 from https://unfccc.int/process-and-meetings/the-paris-agreement/the-paris-agreement.

⁵⁵ United Nations Economic Commission for Europe. (n.d.) *Sendai Framework.* Retrieved May 27, 2021, from https://unece.org/sendai-framework.

⁵⁶ United Nations. (2021). About the COVID-19 Response and Recovery Trust Fund - #RecoverBetterTogether. Retrieved May 26, 2021 from https://www.un.org/en/coronavirus/recoverbetter

⁵⁷ United Nations Sustainable Development Group. (2020, April). *A UN framework for the immediate socio-economic response to COVID-19.* Retrieved May 26, 2021 from https://unsdg.un.org/resources/un-framework-immediate-socio-economic-response-covid-19.

4.1.3 European Union

The European Union has coordinated a **common European response** to combat the pandemic, indicating once again the foundational value of solidarity. Decision and actions are taken aiming to reinforce public heath sectors, whilst mitigating the socio-economic negative impact that COVID-19 has in the EU, whereas the EU has mobilized all available means to aid the member states in coordinating national responses while disseminating valid and objective information via a wide range of means and platforms, on how COVID-19 spreads and effective containment efforts. A COVID-19 response team⁵⁸ has been set by President von der Leyen at a political level which coordinates the European response. The European Union has facilitated easier transnational treatment of ill patients, donations of protective equipment as well as facilitating easier processes to bring stranded citizens back to their country or residence or origin. The European Union's response efforts have emphasized in the following areas:

Fighting disinformation 62

Crisis management and solidarity 65

EU Areas of Response efforts

Travel 60

Research and innovation 61

Transportation 63

Jobs and Economy 64

Emergency support 67

Global Health Summit 68

Table 5. EU Areas of Response Efforts

The EU Commission has established a multi-dimensional, multilayered approach as a response to tackle the pandemic, led by the EU Commission's coronavirus response team⁶⁹. A retrospective view

⁵⁸ European Commission. (n.d.). *European Commission's coronavirus response team.* Retrieved May 26 2021, from https://ec.europa.eu/info/european-commissions-coronavirus-response-team en.

⁵⁹ European Commission. (n.d.) *Safe and Effective Vaccination. Public Health.* Retrieved May, 26, 2021, from https://ec.europa.eu/info/live-work-travel-eu/coronavirus-response/public-health en.

⁶⁰ European Commission. (n.d.). *Travel during the coronavirus pandemic. Retrieved May 26, 2021, from* https://ec.europa.eu/info/live-work-travel-eu/coronavirus-response/travel-during-coronavirus-pandemic en.

⁶¹ European Commission. (n.d.). *Coronavirus research and innovation*. Retrieved May 26, 2021, from https://ec.europa.eu/info/research-and-innovation/research-and-innovation/esearch-and-innovation en.

⁶² European Commission. (n.d.). *Fighting disinformation*. Retrieved May 27, 2021 from https://ec.europa.eu/info/live-work-travel-eu/coronavirus-response/fighting-disinformation en.

⁶³ European Commission. (n.d.). *Transportation during the pandemic.* Retrieved May 26, 2021, from https://ec.europa.eu/info/live-work-travel-eu/coronavirus-response/transportation-during-pandemic_en.

⁶⁴ European Commission. (n.d.). *Jobs and economy during the coronavirus pandemic.* Retrieved May 26, 2021, from https://ec.europa.eu/info/live-work-travel-eu/coronavirus-response/jobs-and-economy-during-coronavirus-pandemic en.

⁶⁵ European Commission. (n.d.). *Crisis management and solidarity. Retrieved May 26, 2021 from https://ec.europa.eu/info/live-work-travel-eu/coronavirus-response/crisis-management-and-solidarity en.*

⁶⁶ European Commission. (n.d.). *Digital solutions during the pandemic. Retrieve May 26, 2021, from* https://ec.europa.eu/info/live-work-travel-eu/coronavirus-response/digital-solutions-during-pandemic en.

⁶⁷ European Commission. (n.d.). *Emergency Support Instrument. Retrieved May 26, 2021, from* https://ec.europa.eu/info/live-work-travel-eu/coronavirus-response/emergency-support-instrument en.

⁶⁸ European Union. (2021, May 21). *Global Health Summit*. Retrieved May 27, 2021, from https://global-health-summit.europa.eu/index en.

⁶⁹ ibid.

on the actions taken⁷⁰ by the EU demonstrates that the European Union has stood firm along with the member states and has provided a variety of tools and resources to combat the pandemic.

In order to supplement the government responses of EU member states, the EU Commission has introduced the Vaccines Strategy⁷¹ which aims at assisting companies **increase their manufacturing capacities**, ensure the provision of adequate vaccines through **Advance Purchase Agreements**, and speed up the **research and development**, **authorization** as well as **availability** of the COVID-19 **vaccines**⁷².

The EU Commission, under Horizon 2020 has mobilized approximately €660 million for COVID-19 vaccines, treatments, diagnostic methods, and medical systems Research & Development. CureVac, a European vaccine developer has received financial support which ranges up to €75 million and has signed a financing agreement with BioNTech in order to develop a vaccine programme. The EU has also initiated the **Coronavirus Global Response**⁷³ and raised €15.9 billion in order to ensure universal access to COVID-19 vaccines, which includes middle and low-income countries. The European Investment bank and the EU Commission has also strongly supported COVAX74, the worldwide facility aiming at fair, universal access to COVID-19 vaccines. Furthermore, Italy and the EU Commission hosted the Global Health Summit in Rome, on May 21st, 2021. This event was an opportunity for invited state leaders, G20, leading figures of International and regional organizations, global health bodies representatives and other participants to share lessons learned from the pandemic as well as to adopt a "Rome Declaration", according to which, a commitment was made to adhere to common principles in order to overcome COVID-19 as well as prepare and prevent future pandemics⁷⁵.

Regarding Economic measures, the European Union has agreed on a €1.8 recovery package which includes the EU budget for 2021-27 and **NextGenerationEU**⁷⁶. The measures adopted include provision of economic guidance to Member states, provision of financial support to hard-hit medium/small businesses, mobilization of European Investment bank and EU Budget aimed at saving jobs by supporting companies, the Coronavirus Response Investment initiative and support of agriculture (ibid).

On November 11th, 2020, the EU Commission has focused and took steps towards a **European Health Union**⁷⁷, based on a **stronger health security framework** and **more robust EU agencies.** In addition, medical guidance was provided to EU countries which emphasized in response measures for all member states, gaps in clinical management, prioritization of healthcare and civil protection and policy

⁷⁰ European Commission. (n.d.). *Timeline of EU Action*. Retrieved May 26, 2021

from https://ec.europa.eu/info/live-work-travel-eu/coronavirus-response/timeline-eu-action en.

⁷¹ European Commission. (2020, June). *Coronavirus: Commission unveils EU vaccines strategy. Retri*eved May, 26, 2021, from https://ec.europa.eu/commission/presscorner/detail/en/ip_20_1103.

⁷² European Commission. (n.d.). *Safe COVID-19 vaccines for Europeans. Retrieved May, 26, 2021, from*https://ec.europa.eu/info/live-work-travel-eu/coronavirus-response/safe-covid-19-vaccines-europeans en.
https://global-response.europa.eu/index en.

⁷⁴ European Commission. (n.d.). *Safe COVID-19 vaccines for Europeans. Retrieved May, 26, 2021, from* https://ec.europa.eu/info/live-work-travel-eu/coronavirus-response/safe-covid-19-vaccines-europeans en.

The European Commission. (2021, March). Coronavirus: Commission proposes a Digital Green Certificate. Retrieved May, 27, 2021, from https://ec.europa.eu/commission/presscorner/detail/en/ip_21_1181.

⁷⁶ European Commission. (n.d.). *Revovery Plan For Europe*. Retrieved May 26, 2021, from https://ec.europa.eu/info/strategy/recovery-plan-europe en.

⁷⁷ European Commission. (2020, November). *Building a European Health Union: Stronger crisis preparedness and response for Europe.* Retrieved May 26, 2021, from https://ec.europa.eu/commission/presscorner/detail/en/ip 20 2041.

measures for long-term consequences of COVID-19. Based on a science-based approach the European Centre for Disease Prevention and Control (ECDC) and the EU Commission adopted several measures to ensure the provision of adequate medical equipment, vaccines and treatments which was made feasible through the **Emergency Support Instrument**⁷⁸ and **rescEU**⁷⁹.

Regarding cross-border movement, the EU Commission has proposed the use of **Digital Green Certificates**⁸⁰ which will facilitate safer Inner-Europe movement during COVID-19. In addition, the EU has offered guidelines for border management, free movement of employees, repatriation, travel advise, arrangements and repatriation, as well as proposals⁸¹ that any measures implemented by Members states shall follow a set list of rules and will be communicated with the Commission on a EU level to have a common approach. To increase the effectiveness of these efforts, the EU launched **Reopen EU**⁸², a mobile app which shall provide real-time information regarding: available means of transport, public health and safety measures, borders, and a color-coded map (**European Union, n.d.**).

The European Commission has identified disinformation as a pivotal challenge to combat the pandemic, therefore has utilized social media platforms effectively to disseminate accurate and valid COVID-19 related content in a timely manner, whereas limited COVID-19 related disinformation. To do so, the Commission has created www.EUvsDisinfo.eu. In close cooperation with the European External Action Service, Member States and EU institutions, international partners from NATO and G7 and through the Rapid Alert System, partners have been jointly fighting disinformation. Concluding, in order to combat disinformation, the Commission proposed the European Democracy Action Plan⁸³, emphasizing in strengthening of efforts and adaptation of evolving threats, as well as the provision of support of free, independent media and the Digital Service Act⁸⁴, which introduces a set of rules for social media platforms to increase accountability for content moderation (European Commission, n.d.).

4.1.4 OECD

The Organization for Co-operation and Development has been actively engaged in Governance and policy responses which relate to COVID-19. Specifically, OECD has a multilayered section which is

⁷⁸ European Commission. (2020, November). Emergency Support Instrument. Retrieved May 26, 2021, from https://ec.europa.eu/info/live-work-travel-eu/coronavirus-response/emergency-support-instrument en.

⁷⁹ European Commission European Civil Protection and Humanitarian Aid Operations. (n.d.). RescEu. Retrieved May 27, 2021 from

https://ec.europa.eu/echo/what/civil-protection/resceu en.

⁸⁰ European Commission. (2020, March). *Coronavirus: Commission proposes a Digital Green Certificate*. Retrieved May 27, 2021 from

https://ec.europa.eu/commission/presscorner/detail/en/ip_21_1181.

⁸¹ Eur-Lex. (n.d.). Proposal for a COUNCIL RECOMMENDATION on a coordinated approach to the restriction of free movement in response to the COVID-19 pandemic. Retrieved May 26, 2021, from

https://eur-lex.europa.eu/legal-content/EN/TXT/?qid=1604080584943&uri=CELEX:52020DC0499.

⁸² European Union. (n.d.) *Re-open EU*. Retrieved May 27, 2021, from https://reopen.europa.eu/en.

⁸³ European Commission. (n.d.). *European Democracy Action Plan.* Retrieved May 27, 2021, from <a href="https://ec.europa.eu/info/strategy/priorities-2019-2024/new-push-european-democracy/european-democracy-action-plan_en_democracy-action-plan_

⁸⁴ European Commission. (n.d.). *The Digital Services Act: ensuring a safe and accountable online environment.* Retrieved May 27, 2021, from

https://ec.europa.eu/info/strategy/priorities-2019-2024/europe-fit-digital-age/digital-services-act-ensuring-safe-and-accountable-online-environment en.

dedicated to the rules of good governance in relation to the issues that may rise from the pandemic⁸⁵. OECD suggests and provides **Evidence-based policy responses and tools**⁸⁶ for a sustainable recovery which include the following themes:

- i. Public trust
- ii. Digital government and data
- iii. Risk governance and crisis management
- iv. Regulation
- v. Public sector innovation
- vi. Open government and public communication
- vii. Public integrity
- viii. Infrastructure and procurement
- ix. Budgeting and public management
- x. Diversity and inclusion
- xi. Countering illicit trade
- xii. Evidence-based policy making & evaluation.
- xiii. Policy coherence & co-ordination

Moreover, specifically regarding resilience building during the pandemic, OECD suggested the implementation of Centres of Government (CoGs) and their important role during the pandemic for national and sub-national governments. Exploring the various examples and challenges that CoG encountered, OECD concludes that "...countries often developed complementary approaches to traditional emergency management procedures, led or supported by the center of government..." thus countries adjusted their crisis management mechanisms⁸⁷. Further "robust co-ordination across institutional and policy siloes, whether for emergency response purposes or for effective strategic planning, ensuring trustworthy evidence in making decisions, and engaging in strategic communications with stakeholders within and beyond governments cannot remain an afterthought but are essential governance practices that need to be harnessed right from the get-go", thus, CoG have demonstrated their importance in inner-governmental policy coordination, valid evidence dissemination and public communication (ibid). In addition, "Co-ordination across government, policy areas and levels of government and with civil society will become critical to steer the recovery efforts", thus, the long term COVID-19 economic consequences will require the organized effort of the whole society (ibid).

Concluding, OECD offers a wide range of **webinars**⁸⁸ in public governance and 212 key policy responses which fall into the following sub-categories: Containment Measures, SMEs, Impact of COVID-19, Tax,

⁸⁶ ibid.

⁸⁵ Organisation for Economic Co-operation and Development. (n.d.). *Responding to Covid-19: The rules of good governance apply now more than ever!*. *Retrieved May 27, 2021, from* https://www.oecd.org/governance/public-governance-responses-to-covid19/.

⁸⁷ Organisation for EconomicCo-operation and Development. (2020, September 2). *OECD Policy Responses to Coronavirus (COVID-19): Building resilience to the Covid-19 pandemic: the role of centres of government.* Retrieved May 27, 2021, from

https://www.oecd.org/coronavirus/policy-responses/building-resilience-to-the-covid-19-pandemic-the-role-of-centres-of-government-883d2961/.

⁸⁸ Organisation for Economic Co-operation and Development. (2020, December 10). *Webinars: public governance & Covid-19*. Retrieved May, 27, from

Health, School Closures, Confinement Measures, and Infection. These responses are offered in a wide range of languages such as: English, French, Spanish, Japanese, Portuguese, German, Italian and Russian⁸⁹.

4.2 Governmental Structure per country and adaptations for COVID-19

The following section outlines a short analysis of the governmental structure and the adaptations observed after the outbreak of COVID-19 crisis, of each of the participating countries, as follows:

4.2.1 Austria

Austria is a **federal parliamentary republic**, giving its states/provinces broad autonomy. The executive power is exercised by the Federal Government, on a national level, and by Local Governments, on a local level. The country is divided in nine provinces, whose Governments have great autonomy, and abide by the principles of a representative democracy. The executive, federal, branch of Austria, which normally has a regulatory role, in consisted of the Head of State, the Head of Government (Chancellor) and the Federal Cabinet. Legislation-wise, the main body responsible is the National Assembly, alongside the Federal Council, which is the representator of the Provinces in the Parliament and has its members chosen by the Provincial Assemblies of its respected province. The Judicial Branch is independent from the other two branches and is responsible for the fair application of the Law in all Austrian territory. ⁹¹

As far as governmental adaptations to COVID-19 are concerned, the decision-making process remained relatively the same. The main policy actors still were the federal and province governments, with the majority of responsibilities being embedded in the Ministry of Health⁹². This is evident by the fact that several laws were passed in order to empower the Minister of Health to manage the pandemic. In contrast to some European Countries, like Portugal, Austria did not declare a State of Emergency to combat COVID-19 but instead relied on the pre-existing Epidemic Law⁹³ (with some articles reformed due to COVID-19) and the Katastrophenhilfe Gesetz (law for combatting catastrophes)⁹⁴ (Nimmervoll 2020). A pre-existing body also acted, as a response, the "Austrian National Crisis and Catastrophe Emergency Task Force⁹⁵", which has a supporting role towards the federal states and a monitoring role

 $[\]underline{\text{https://www.oecd.org/governance/public-governance-responses-to-covid} 19/\text{webinars-public-governance-responses-to-covid} 19/\text{webinars-public-governance-responses-to-c$

⁸⁹ Organisation for Economic Co-operation and Development. (n.d.). *Key policy responses from the OECD.* Retrieved May 27, from https://www.oecd.org/coronavirus/en/policy-responses?language=english%7Efrench.

⁹⁰ Desson, Z., Lambertz, L., Peters, J., Falkenback, M., & L. Kauer (2020) Europe's COVID-19 outliers: German, Austrian and Swiss policy responses during the early stages of the 2020 pandemic, Health Policy and Technology 9, pp. 405-418.

⁹¹ Migration. Gv. (n.d.). *The political, administrative and legal systems*. Retrieved May 27, 2021, from https://www.migration.gv.at/en/living-and-working-in-austria/austria-at-a-glance/the-political-administrative-and-legal-systems/.

⁹² Ihid

⁹³ Republik Österreich. (1950). *Epidemiegesetz*. Bundesgesetzblatt für die Republik Österreich. Retrieved May 27, 2021, from https://www.ris.bka.gv.at/Dokumente/BgblPdf/1950 186 0/1950 186 0.pdf.

⁹⁴ Bundministerium Inneres. (n.d.). *Krisen- und Katastrophenmanagement.* Retrieved May 27, 2021, from https://www.bmi.gv.at/204/skkm/start.aspx.

⁹⁵ Ibid.

of the crisis. The novice entity in the Austrian political scenery, was the "Corona Taskforce" 96, created by the Ministry of Health. It is comprised of health and social experts that provide scientific advice on the handling of the crisis.

4.2.2 Belgium

Belgium operates under the framework of **the federal political system**, with its five regions enjoying a high level of autonomy. Belgium is a **constitutional representative monarchy**, where the king is the Head of State.⁹⁷ On a national level, the executive branch is comprised of the Head of Government (Prime Minister) and the Council of Ministers, as well as the State Secretaries (do not attend the Council)⁹⁸. Locally, the five Belgian "federated entities" also have Governments but differentiate from the central one in terms of responsibilities (e.g., the Federal Gov. is in charge for the framework and the programs of the hospitals whereas the Local ones for certain health services and hospital accreditation standards) (Vandijck & Annemans 2010). The main legislative body in Belgium is the Chamber of Representatives and its members are elected via representative elections⁹⁹. Each respective "federal entity", namely the Flemish Community, French Community, German-Speaking region, the Walloon region, and the Brussels- Capital Region, each has its own parliament or unicameral council, which can vote decrees with the same legal power as the Central one¹⁰⁰.

Belgium **did not declare a State of Emergency**, as it is unconstitutional to suspend any kind of rights in the country. The response was, instead, based on a "consultation structure" that consisted of pre-existing and newly created bodies. Until October 2020, those bodies reported to the National Security Council and were (Desson et al. 2020), 101:

- a. The Risk Assessment Group (pre), which analyses risk, based on scientific epidemiological data
- b. The Risk Management Group (pre), charged with deciding what are the appropriate measures against COVID-19, after receiving advice from RAG.
- c. The Economic Risk Management Group (March 2020) responsible for financial matters
- d. The Expert Strategy Exit Group (April 2020)

After October 2020, and with a new Government in power, the centre of the decision-making process shifted from the National Security Council to a newly formed Consultative Committee that decides on all the COVID-19 related responses. The policies are then executed in the form of ministerial decrees issued by the Minister of Security and Foreign Affairs and their application is then described in the form of guidelines, by the National Crisis Centre. Local Governments also have the authority to implement further regulations to their respective regions, especially in matters of education, elderly

⁹⁶ Bundesministerium Sociales, Gesundheit, Pflege, und Konsumentenschutz. (2021, April 19). *Coronavirus Taskforce*. Retrieved May 27,2021, from https://www.sozialministerium.at/Informationen-zum-Coronavirus/Neuartiges-Coronavirus-(2019-nCov)/Coronavirus---Taskforce.html.

⁹⁷ Belgium.de. (n.d.). *The structure of the Federal State and the power levels*. Retrieved May 27, 2021, from https://www.belgium.be/en/about belgium/government/federale staat/structure.

⁹⁸ The Constitution. (n.d.). *On the King and the Federal Government*. Retrieved May 27, 2021, from https://web.archive.org/web/20100403214530/http://www.fed-parl.be/gwuk0006.htm#E11E6.

⁹⁹ Ibid.

¹⁰⁰ Belgium.de. (n.d.). *The structure of the Federal State and the power levels.* Retrieved May 27, 2021, from https://www.belgium.be/en/about_belgium/government/federale_staat/structure.

¹⁰¹ De Standaard. (2020, April 6). *Tien experts moeten België uit lockdown leiden*. Retrieved May 27, 2021, from https://www.standaard.be/cnt/dmf20200406_04914854.

care, and health services102. Via their specialized departments, like the Flemish Department of Welfare, Public Health and Family, they develop their own protocols to tackle the pandemic and control the infection rate103. However, this overlap of responsibilities has led to the characterization of the Belgian response as confusing and sometimes inefficient, mainly due to the bureaucratic delays in terms of making decisions and disputes over jurisdiction¹⁰⁴.

4.2.3 Cyprus

The republic of Cyprus is a **Presidential Republic**, with the President who is both Chief of State and Head of Government, to exercise his powers via the Council of Ministers¹⁰⁵. This Council is the main policy decision-maker and in charge of governing the country, while the legislative power is on the hands of the parliament¹⁰⁶. On a regional level, Cyprus is composed of six districts: Ammochostos, Kerynia, Larnaca, Limassol, Nicosia and Paphos. Each district has a District Officer, who serves as the Governmental representative at each district. The D.O coordinates the administrative activities of the Ministries in the District and answers directly to the Ministry of the Interior¹⁰⁷. On the local level, there are two types of Local Authorities, namely Municipalities and Communities. The 39 Municipalities of the Republic of Cyprus are governed by their Municipal Councils and Mayors. As far as the Communities are concerned, their administrative tasks are carried out by a Community Council and a Community Leader¹⁰⁸.

The main actors that handled the crisis in Cyprus derived from the Public sector and it has to be noted that there was no significant change or adaptation in the policy process, as the Central Government

¹⁰² Karel Reybrouck (2020, November 13) *Hoe het Coronavirus onze bevoegdheidsverdeling op de proef stelt.* Retrieved May 27, 2021, from https://www.leuvenpubliclaw.com/hoe-het-coronavirus-onze-bevoegdheidsverdeling-op-de-proef-

stelt/? cf chl captcha tk =6e912a6aa9c7b0637274440695b32c57363504b8-1622130194-0-

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V0zfKDTCgh8nUjn0JJGDF4AjdG2CP1OtKFqG-

 $[\]underline{SKDkpPRKP5lexgGONf9yoZfbens2n8c21yTWUAkNwqE7Zl1M3iLjby04rh-}\\$

¹U6Mm1sl3g6oa15Bjy384MMIJCFe2KXIy37Jbmzc0iuF4LjO-

L0c1SyhKN3K4kzg5nt8LZfLqLxBAKvb35lPh1DQKmj127V-

 $[\]underline{xHZQISigYMFqGLyyrN6L3RB3jUaG9dt0SZterWKfbzEgQvkhJw0BDCNIf8778Dk7EQGtJoHMqsjbBiMBQcDj9SVx68g}\\ \underline{8f14a-I0CMVds6wiXZNhq0vTnUc-}$

YkZsiT6P5sm1Wreb7NJoa9kE8PQrnYwJDBnhKTlFZiHefcxViFJhTGto9mTCZzjFk88tdF5VcWeXBXOKhyhd8g Hwa a2WhFvUd gCJyc58-B5ylEmiqSawCdX0o-sH8-jlpzZylgmaV3cahw21xwyFpz9Nn6Mh9WauUveNsVXrbu-

Y8YSCT4cAlchLUnhL9cUcUAscB_bDOO_QKgs51sPxaWm3u9a8KRj2cVdFp48Xy6uCZLgXbFXPisF5bcJ9akeKv71_PC2Gw5Z4WgLH4DlOf6WSe69LK 2dljxQe0LeRhxQ_uAmntNxUhWZUx3-

⁷Rz6VeevGuxNCmSgFBPQn9Kj4DJCJ44FDIvpkt0MEcdJCS82hOiMlA.

¹⁰³ Departement Welzijn, Volksgezondheid en Gezin. (n.d). *Over het department*. Retrieved 27 May 2021, from https://www.departementwvg.be/over-het-departement.

¹⁰⁴ Merckx S. and Delespaul A. (2020, June 19). *Waarom we nood hebben aan één federale minister van gezondheid*. Solidair. Retrieved May 27 2021, from https://www.solidair.org/artikels/longread-waarom-we-nood-hebben-aan-een-federale-minister-van-gezondheid.

¹⁰⁵ There are 11 Ministries namely: Ministry of Agriculture, Natural Resources and the Environment, Ministry of Energy, Commerce, Industry and Tourism, Ministry of Communications and Works, Ministry of Defense, Ministry of Education and Culture., Ministry of Finance, Ministry of Foreign Affairs, Ministry of Health, Ministry of the Interior, Ministry of Justice and Public Order and Ministry of Labor and Social Insurance.

¹⁰⁶ CyprusProfile (2020, November). Government & Politics. Retrieved March 23, 2021, from https://www.cyprusprofile.com/page/country-information/politics.

¹⁰⁷ Committee of the Regions (2016). *Cyprus, Introduction*. Retrieved March 23, 2021, from https://portal.cor.europa.eu/divisionpowers/Pages/Cyprus-Introduction.aspx.
¹⁰⁸ Ihid.

opted to deal with the crisis using the same state mechanisms. The Council of Ministers was the primary source of decisions and policies. Via decrees and announcements, the Council, and especially the Ministry of Health and its Medical and Public Health Services, constantly updated the measures to combat COVID-19. Even though Local Governance did not participate in decision making, its contribution was significant in the application of the measures. This was the result of targeted communication between the Central Government and the Unions of Cyprus Municipalities and Cyprus Communities. ¹⁰⁹. Be that as it may, the overall strategy to combat COVID-19 was also based on the **cooperation between Government and the scientific community**. A team of experts was created to assist the Government in handling the crisis. Its role was crucial not only because of the scientists' level of expertise in public health issues but also because of their role in communicating the measures (Petridou, Zahariadis, & Ceccoli 2020).

4.2.4 Germany

Germany has a multi-layered administration regarding the governance of the State. On a national level, Germany has abided by the federal parliamentary democracy model. Germany's executive branch is comprised of the Federal President, the Federal Chancellor, and the Cabinet¹¹⁰. The Federal President, who is the head of State and has mainly ceremonial duties, his duties are, but not limited to represent the Federal Republic of Germany in matters of international Law and to sign all federal laws before they can be applied. The Federal Chancellor, acting as Head of Government and being the main controller of government decisions, has the power to determine the number and composition of his/her cabinet and appoint a Deputy with the unofficial capacity of the Vice-Chancellor. Legislative power is vested upon the national parliament (Bundestag) and the federal council (Bundesrat) which have the authority to influence the decision-making process (veto) in order to ensure a relative political balance. However, the Bundestag, unlike in other countries, does not have the authority to remove the Cabinet via a vote of no confidence and can only remove the Chancellor via an absolute majority. On a state level, 16 German states (Landers) enjoy a high degree of administrative autonomy and have a similar political structure to the Federal one. Decisions are made by a Head of Government and his Cabinet while having their own state parliaments (Landtag) handle topics such as education, culture, infrastructure, daily administrative issues, and internal security within the area of responsibility. 111

Governmental responses to COVID-19 in Germany were based on its pre-existing Infection Protection Act (Infektionsschutzgesetz -- IfSG), National Pandemic Plan, and other relevant laws and guidelines, as a State of Emergency situation was not declared. Several restrictions were decided to control the spread of the virus, such as restrictions on gatherings, traffic controls and cancellation of large-scale events, which were imposed by the Federal Government but executed by the Lander ones. This is due to the Infection Protection Act dictating that the Lander Governments are the sole bearers of the power to apply the restrictions (Binder et al. 2020). Furthermore, Lander Governments also took initiatives on a local level, with some declaring their respective regions in a state of catastrophe which subsequently allowed them to implement more measures and, in some cases (Bavaria), manage all the relevant authorities in the region.

¹⁰⁹ Council of Europe (2020). *European Committee on Democracy and Governance and COVID-19*. Retrieved March 23, 2021, from https://www.coe.int/en/web/good-governance/cddg-and-covid#{%2264787140%22:[4]}.

¹¹⁰ The Federal Government. (n.d.) *Structure and Tasks*. Retrieved May 27, 2021, from https://www.bundesregierung.de/breg-en/federal-government/structure-and-tasks-470508.

¹¹¹ Ibid.

4.2.5 Greece

Greece (Hellas) officially the Hellenic Republic is a **Presidential Parliamentary Republic**, based on the Constitution of 1975 as revised in 1986, 2001, 2008 and 2019¹¹². The Head of State is the President, who is being elected every 5 years by the Parliament¹¹³, whereas the President of Government, is the Prime Minister, who is the second-in-class state institution following the President of the Republic and is being elected by the people every 4 years.¹¹⁴ The Council of Ministers consists of the Prime Minister, the Deputy Prime Minister, the Ministers, and the Deputy Ministers and is the collective decision-making body that constitutes the Government of Greece.¹¹⁵ There is also the government Council for Foreign and Defense Affairs (KYSEA) on shaping the country's national defense and security policy, chaired by the Prime Minister, and consisting of the Ministers of Foreign Affairs and Defense, (b) National Defense, (c) Maritime and Island Policy, and the Chief of General Staff of National Defense.¹¹⁶ The government comprises of 19 Ministries¹¹⁷ and the legislative power is exercised by Parliament and the President of the Republic. The executive power is exercised by the President of the Republic and the Government, while the judicial power is laid upon the relevant courts.¹¹⁸. On a regional level there are 13 administrative regions and 74 prefectures, while all of them are divided to 325 municipalities.¹¹⁹

As far as the COVID-19 pandemic is concerned, **no new Ministers have been established**, however a **National Crisis Management Mechanism of the General Secretariat for Civil Protection** (GSPP) was activated that coordinated the general actions and agencies relevant to tackle the pandemic. The Deputy Minister for Civil Protection and Crisis Management along with the relevant ministers of the respective ministries (e.g., Health, Education, Internal Affairs, Sports, etc.) participated to daily videoconferences with the Prime Minister, for preparing and combatting any issues related to the pandemic¹²⁰. Parallel to those the Ministry of health supervised the **National Public Health Organization (NPHO)**, a legal entity of Private Law121 that among others it aimed to supervise and monitor the epidemiological effect of the COVID-19 disease, raise public awareness, promote all the relevant protective measures to the Greek population. In addition, a flexible Government Committee (reporting body – **COVID-19 Observatory, is headed by the President of the Council of Economic Experts**) has been also established, having as its main role to evaluate any new and emerging data

Hellenic Parliament. (n.d.). *The Constitution*. Retrieved May 27, 2021, from https://www.hellenicparliament.gr/en/Vouli-ton-Ellinon/To-Politevma/Syntagma/.

Presidency of the Hellenic Republic. (n.d.). *Election of the President*. Retrieved May 26, 2021, from https://www.presidency.gr/en/president/election-of-the-president/.

Hellenic Republic the Prime Minister. (2021.). *The Office.* Retrieved May 26, 2021, from https://primeminister.gr/en/the-prime-minister/the-office.

Hellenic Republic Collective Bodies. (2021.). Cabinet. Retrieved May 26, 2021, https://primeminister.gr/en/the-government/collective-bodies.
 Ibid.

Hellenic Republic. (2021). *The Government*. Retrieved May 26, 2021 from https://www.mfa.gr/missionsabroad/en/about-greece/government-and-politics/the-government.html.

Hellenic Parliament. (n.d.). *The Constitution*. Retrieved May 27, 2021, from https://www.hellenicparliament.gr/en/Vouli-ton-Ellinon/To-Politevma/Syntagma/.

¹¹⁹ Πατριδογνωσία. (n.d.). *Regions of Greece*. Rerieved May 26, 2021, from https://www.geogreece.gr/regions-list-en.php.

¹²⁰ Council of Europe. (n.d.). European Committee on Democracy and Governance and COVID-19: Greece. Retrieved May 26, 2021, from https://www.coe.int/en/web/good-governance/cddg-and-covid#{%2264787140%22:[10]}.

National Public Health Organization (n.d.). *NPHO.* Retrieved May 26, 2021 from https://eody.gov.gr/en/npho/.

ensuring the health of the population while trying to minimize the consequences for the economy¹²². The Hellenic Ministry of Health, the General Secretary of Civil Protection and the Hellenic Ministry of Citizen Protection along with their specialized bodies developed informational campaigns for COVID-19, while Local Authorities held a pivotal role to the combat of COVID-19 pandemic along with the central government.¹²³ Finally, more than **800 Acts of legislative content** (Laws, Joint Ministerial decisions, Ministerial decision, Decrees etc.) have been imposed in the Greek territory, declaring the country in emergency situation and regulating all the administrative, financial educational, labor, religious, insurance, migration related aspects of the Greek society, by adopting in general strict measures.¹²⁴

4.2.6 Ireland

Ireland is a parliamentary democracy, but the power is distributed between the Legislature (the Oireachtas), the Executive (the Government) and the Judiciary (the Courts). The Constitution (Bunreacht 27ah Eireann) acts as the separation point of these powers, providing independence of each function. ¹²⁵The Dail elects the Prime Minister, which is appointed by the President, and is the leader of the Irish Government. The deputy minister and the Prime Minister appoint cabinet Ministers for each of the fifteen government departments which form the government under the Irish Constitution. Each government department have a specific role in response to national emergencies. However, the two departments which were the key decision entities during the COVID-19 pandemic where the Department of the Taoiseach, and the Department of Health (DoH). Nevertheless, the pandemic demanded a cross government response. There are two Houses of Parliament: Dail Eireann (House of Representatives) and Seanad Eireann (Senate), the Dail comprises of 160 members known as Teachtai Dala (or TD's). TDs are responsible for deciding which laws are passed, changed, or removed, as well as appointing the government and representing the needs of the people who elect them. The Republic of Ireland is divided into 39 voting areas known as constituencies, these can be entire counties, smaller parts of counties, or sometimes two or more counties grouped together. Some TDs are part of Oireachtas Committees, which consist of groups of politicians who take an in-depth look at laws and public policies, before making suggestions for changes to the rest of the Oireachtas. The Republic of Ireland and Northern Ireland co-operate on several policy areas under the North/South Ministerial Council created by Agreement. The President of Ireland serves as the head of state and is elected by the people, and the role is largely ceremonial. 126, 127

Hellenic Government. (2020). Χάρτες υγειονομικής ασφάλειας και προστασίας από τον Covid-19. Retrieved May 26, 2021 from https://covid19.gov.gr/.

¹²³ Council of Europe (2020). European Committee on Democracy and Governance and COVID-19. Retrieved 23 March 2021, from https://www.coe.int/en/web/good-governance/cddg-and-covid#{%2264787140%22:[4]}.

¹²⁴ International Monetary Fund. (n.d.). *Policy Responses to Covid-19. Country: Greece.* Retrieved May 26, 2021 from https://www.imf.org/en/Topics/imf-and-covid19/Policy-Responses-to-COVID-19#G.

¹²⁵ Green M. (n.d). *Constitution and Government of Ireland*. Retrieved May 27, 2021 from https://www.ireland-information.com/reference/congov.htm.

Houses of the Oireachtas. (2020). *TDs & Senators*. Retrieved May 27, 2021 from https://www.oireachtas.ie/en/members/.

Houses of the Oireachtas. (2020). *Committees*. Retrieved May 27, 2021 from https://www.oireachtas.ie/en/committees/.

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Short before the pandemic outbreak, Ireland had elections¹²⁸. However, no party achieved sufficient seats and a coalition government was appointed which was also responsible for delivering the decisions regarding COVID-19 (during the second wave of the pandemic)¹²⁹. To respond in pandemics, the Irish Cabinet nominated a subcommittee to provide policy directions on activities recommended by the Department of Health following an assessment by the National Public Health Emergency Team. In addition to that, the government established the Special Cabinet Committee on COVID-19, chaired by the Taoiseach on 3 March 2020 (Cunningham 2020). The Committee comprised of senior officials across all 15 departments and the Health Service Executive (HSE), the state health service, and a dedicated Communications Group which coordinates a whole-of-government communications response¹³⁰. In the first phase the objective was to eliminate the COVID-19 transmission and slow down the spread in order to keep the number of infected people low and reduce the pressure on the national health system¹³¹. Ireland adopted Delay and Mitigation Phases and responded to COVID-19 with several policies and campaigns. The department of Health and the National Public Health Emergency Team played a substantial role in governmental decision making. In the first wave, all Ministers supported the Taoiseach, and all ministerial decisions were driven by medical/scientific evidence and guidelines were disseminated to the public by the National Public Health Emergency Team which was also supported by an Expert Advisory Group as well as eleven sub-groups, including an expert modelling group. In addition, during all waves of the pandemic Ministers had the opportunity to ensure new policies which were needed in relation to their department. 132

4.2.7 Israel

Israel's political system is a **parliamentary democracy**. The **executive power** is exercised by the Prime Minister and its cabinet with the President having a ceremonial role. The ministers are appointed by the Prime Minister and are in charge of the overall administration of the state. The **legislative authority** of Israel is the Parliament (Knesset) which, except from voting and validating laws, is responsible for recommending the Prime Minister and approving his choices of Ministers. The **main peculiarity of Israel** is that it does not have a Constitution. Instead, it has several Basic Laws that act as one, and entail the basic operating regulations of the State, as well as the country's civil rights. ¹³³

As far as COVID-19 is concerned, Israel **declared a State of Emergency situation**. Israel depended on pre-existing government entities to handle the crisis, with the addition of few new ones. On a

¹²⁸ European Movement Ireland. (2022, February). *Irish General Election, February 2020*. Retrieved May 27, 2021 from https://www.europeanmovement.ie/irish-general-election-february-2020/.

MerrionStreet.ie.(2020, June 27). Statement by the Taoiseach Michéal Martin T.D. Announcement of Government 27 June 2020. Retrieved May 28, 2921, from https://merrionstreet.ie/en/newsroom/news/statement by the taoiseach micheal martin t d announcement of government 27 june 2020.html.

¹³⁰ Government of Ireland. (2020). *Government agrees next phase of Ireland's COVID-19 response*. Retrieved May 26, 2021 from https://www.gov.ie/en/news/72ecf5-government-agrees-next-phase-of-irelands-covid-19-response/#.

¹³¹ ibid.

Government of Ireland. (2020). *Government approves series of emergency measures to protect tenants*. Retrieved May 26, 2021 from https://www.gov.ie/en/press-release/e9ebe0-government-approves-series-of-emergency-measures-to-protect-tenants/.

¹³²https://www.gov.ie/en/campaigns/resilience-recovery-2020-2021-plan-for-living-with-COVID-

¹³³ Israel Ministry of Foreign Affairs. (n.d.). *Israeli Democracy-How does it work.* Retrieved May 27, 2021, from https://mfa.gov.il/mfa/aboutisrael/state/democracy/pages/israeli%20democracy%20-%20how%20does%20it%20work.aspx.

parliamentary level a "Special Commission for COVID-19" was created in March 2020, to oversee Governmental responses against the pandemic. However, after the new government was formed in May 2020 the commission was left with no responsibilities¹³⁴ and the management of the crisis was transferred to the "Ministers Commission for Facing COVID-19 and its Implications" (COVID-19 Cabinet)¹³⁵. Structurally, the commission was comprised of nine ministers and five more members, mainly Directors of Divisions of critical importance (security, economy, health etc.). Suggestions and advice on policies derived from the Ministry of Health and its program "Israel Protector"¹³⁶, which aimed in containing the spread of the virus, checking the hospitals' capacity and support the national response. More in particular the Ministry of Health activated the "Contagious disease act"¹³⁷ and set up the national pandemic crisis management center, with a designated coordinator (nominated by the Ministry of health and the prime minister) with dedicated cells, acting as the national coordinating for the whole health sector.

4.2.8 Italy

Italy is a democratic parliamentary Republic with a three-way division of power. Executive power is exercised by the Council of Ministers, legislative power is vested primarily by the Parliament, and the judiciary power is independent. 138 The State has powers of control - subjected to constitutional limitations - over fifteen ordinary regions, four regions and two provinces with special autonomy. The regional government is composed by the regional council, that has the power to pass laws and issue administrative regulations; the regional committee, with executive power; and the president of the regional committee. However, their legislative powers are limited by the Constitution since they cannot conflict with the national interests. The regions can also enact legislation necessary in order to enforce state laws when the latter contain the necessary provisions. The state has powers of control over the regions. The Municipalities are the smallest government units in a local context. They are governed by an elected municipal council, the municipal committer or executive body and the mayor. Their power is limited and basically on local level since they are operating multiple activities whereas regions have some control over their activities. Between the regions and the municipalities there are the provinces, that are organized similarly to the municipalities; they each have councils, committees, and presidents. Regarding, power execution the president of the regional committee as well as the mayors have similar governmental duties in cases of emergency such as to issue ordinances concerning public health, town schedule and local police. The actions established by the Civil Protection and the Ministry of Health were implemented through each regional coordinator in all the twenty Italian regions which were appointed by the Italian government (Armocida et al. 2020).

The Knesset (2020, July). *Knesset passes "major corona law" granting the government special powers for dealing with the pandemic*. Retrieved May 27, 2021, from https://m.knesset.gov.il/en/news/pressreleases/pages/press23720s.aspx.

¹³⁵ Toi Staff. (2020, May). *Government approves new security cabinet, ministerial committee for coronavirus*. Times of Israel. Retrieved May 27, 2021, from https://www.timesofisrael.com/government-approves-new-security-cabinet-ministerial-committee-for-coronavirus/.

¹³⁶ Israel Ministry of Health. (n.d.). *Magen Israel: A national program for fighting the coronavirus, coordinating between multiple agencies, and engaging the public with the war on the healthcare crisis.* Retrieved May, 26, 2021, from https://corona.health.gov.il/en/magen-israel/.

¹³⁷ Public Health Order. (2020). *Israel "Contagious disease act" for COVID-19.* Retrieved May 26, 2021, from https://www.nevo.co.il/law_html/law01/502_230.htm.

Republic of Italy. (1947, December 22). *Constitution of Italy*. Retrieved May 26, 2021, from https://www.refworld.org/docid/3ae6b59cc.html.

With the outbreak of the pandemic, the Civil Protection Department in Italy was asked to lead a command-and-control governance structure and worked together with the Ministry of Health as well as with the Scientific Technical Committee (CTS) to fight the COVID-19 pandemic (Pistoi 2021). The above entities, following the WHO recommendations and evidence played a major role regarding health policies followed by the Italian Government, but many of their suggestions were also considered based on various factors (mainly economics) (Bosa et al 2021). Further, at national level, fifteen other task forces were established which were associated with other Ministries and act in relation to those as well as other public agencies completing specific tasks. Other national agencies assisted in monitoring and model the epidemic. Nevertheless, the overall decision and leadership of the country's efforts were taken under by the Prime's Minister's own responsibility. Since in Italy there are different administrative levels, there were efforts in this level to implement their own rules on issues regarding COVID-19. However, the Civil Protection Department and the CTS managed to negotiate consensus between different administrative levels. Finally, the Italian National Institute of Statistic assisted in decision making with data provision (Sanfelici 2020).

4.2.9 Portugal

Portugal is a **semi-presidential democratic republic**. On a national level, the executive branch is comprised of the President, who is the head of State, the Prime Minister, who serves as head of Government, and the Council of Ministers, along with the State Secretaries. On a local level, Portugal is divided in 20 administrative regions that each has their own Governor. Even though the Portuguese regions do not have the autonomy of Austria's Provinces or Belgium's "federated entities", two out of the 20, Madeira and Azores, are actually autonomous having their own Governments, while being under the framework of the Portuguese republic. The main legislative body in Portugal is the Assembly of the Republic.¹³⁹

In Portugal, a **State of Emergency situation was declared** after the COVID-19 pandemic outburst. More specifically, a **Structure of Monitorization of the State of Emergency** was created in March 2020 in order to coordinate and mobilize all the appropriate state actors into successfully combating the pandemic. Its members originated from a broad spectrum of Government officials and reported to the Ministry of Internal Affairs. **New committees** were created to tackle the multi-layered problems that the Pandemic caused. A working group to determine social funds, a committee to tackle COVID-19 induced poverty, a Project group to keep students close to schooling, and an **autonomous project team** to monitor the planning of the measures, are just a few of the many mechanisms set up by the Portuguese state to handle the crisis during all pandemic waves. ¹⁴⁰

Republica Portuguesa. (n.d.). *Government Composition*. Retrieved May 26, 2021, from https://www.portugal.gov.pt/en/gc22/government/composition.

Order No. 3545/2020 from the Prime-Minister (2020). Diário da República: II series, no. 57-A/2020.
 Despacho 3545/2020, 2020-03-21 - DRE.

[■] Rectification Declaration No. 381-A/2020 from the Presidency of the Council of Ministers (2020). Diário da República: I series, no. 90/2020. <u>Declaração de Retificação n.º 381-A/2020 - DRE</u>.

Order No. 4235-B/2020 from the Prime Minister (2020). Diário da República: Il series, no. 68/2020.
 Despacho n.º 4235-B/2020 - DRE.

Order No. 6868-A/2020 from the Prime Minister (2020). Diário da República: II series, no. 127/2020.
 Despacho n.º 6868-A/2020 - DRE.

4.2.10 Romania

The Romanian form of government is a Parliamentary Republic with a semi-presidential regime. The government in Romanian is consisted by the Prime Minister and the relative Ministers. The leader of the government is the Prime Minister which coordinates the member's activities in respect to their legal rights. The governmental structure is composed of the Prime Minister's working team, the General Secretariat of the government, departments and some relative organizational working teams with explicit attributes appointed by government decision. Generally, the Romania government is organized by the Prime Minister's apparatus, the Ministers, and the Prefects offices. More precisely the government working apparatus is consisted of the General Secretariat of the government, the Anti-Fraud Department (DLAF), the Control Body of the Prime Minister, the Department for Interethnic Relations and other departments organized as structures as legal entities or not, subordinated to the Prime Minister, headed by secretaries of State or their associates, whose establishment and / or functioning is approved by government. In addition, under the government working apparatus are all relevant Ministries. 141. Romania is divided in forty-one counties, each of them having a Prefect office whereas Bucharest having a separate one. Each Prefect is leading and operating each county. The institution of the Prefect is a public institution with legal personality, with its own patrimony and budget. The Prefect is the representative of the government at county level. Further, the Prefect ensures the achievement of national interests, application and observance, laws, ordinances and decisions of the government and other normative acts and serves as a tertiary authorizing officer¹⁴².

All the decisions from the beginning of the pandemic regarding the control of the spread, the confinement, and the medical assistance were taken **based on emergency ordinances issued by the Romanian Government**. By decision of the Prime Minister, in addition to the General Secretariat of the Government, working groups may be set up consisting of specialists - external collaborators - to analyze draft normative acts in terms of proposed solutions, requirements for correlation with all internal regulations, harmonization with European legislation and with the international treaties to which Romania is a party, as well as the observance of the norms of legislative technique.¹⁴³

4.2.11 Spain

Spain, a parliamentary monarchy, has a multi-layered administrative system which emphasizes in regional and central administrative management (Alba & Navarro 2003). On a national level the

Order No. 9121/2020 from the Prime Minister (2020). Diário da República: II series, no. 188/2020.
 Despacho n.º 9121/2020 - DRE.

Order No. 10520/2020 from the Prime Minister (2020). Diário da República: II series, no. 211/2020.
 Despacho n.º 10520/2020 - DRE.

Deliberation (extract) No. 70/2021 from the Social Security Institute (2021). Diário da República: Il series,
 no. 11/2021. <u>Deliberação (extrato) 70/2021, 2021-01-18 - DRE.</u>

¹⁴¹ Guvernul Romaniei. (n.d.). *Organization*. Retrieved May 26, 2021 from https://gov.ro/en/government/organization.

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Chamber of Deputies. (n.d). Constitution of Romania. Retrieved May 26 2021 from http://www.cdep.ro/pls/dic/site.page?id=339&idl=2.

[■] Governul Romaniei. (n.d.). *LEGE Nr. 69 din 26 noiembrie 1991*. Available at http://legislatie.just.ro/Public/DetaliiDocumentAfis/1547.

[■] Governul Romaniei. (n.d). HOTĂRÎRE nr. 118 din 9 martie 1992. Available at http://legislatie.just.ro/Public/DetaliiDocumentAfis/2422.

Governul Romaniei. (n.d.). *REGULAMENT din 13 ianuarie 2005.* Available at http://legislatie.just.ro/Public/DetaliiDocumentAfis/58731.

Spanish parliament is the point of decision making for the central government (Heywood 1995), whereas parliamentary sub-political systems have been developed on a regional scale in 17 autonomous communities and two autonomous cities (Melilla and Ceuta). The abovementioned communities are essential in the Spanish institutional structure as the manage more than 33% of the annual public revenue. These regional authorities receive a basic regulation in areas such as education, health, environmental protection, and economic policy, by the central administration and adapt it based on the unique characteristics that the region has. Local Spanish governments have a lesser degree of competences under their administrative management, in comparison to the Swedish or potentially the German administrative model (Eliseo & Colino 2014).

The Spanish decentralized state model was put into test with the pandemic outbreak. As the autonomous community of Catalonia and Madrid's health system collapsed, on March 14th, 2020 the Central Government declared a state of emergency or State of Alarm¹⁴⁴ according to which, the latter received the direct administrative management and implemented policies in the autonomous regions that faced health related challenges¹⁴⁵. Besides specific measures to limit mobility, the State of Alarm constituted a new coordination structure, the Single Authority (also labelled as Single Command) to lead and coordinate the responses to the COVID-19, assuming then the responsibility of dealing with the pandemic. As of May, to June 2020, emergency policies to combat COVID-19 began to ease their intensity of the implemented limitations. During the second and third COVID-19 wave in Spain, as general dissatisfaction grew towards the implemented COVID-19 measures, the Sectorial Conference approved several measures to restrict the pandemic, however, a lot of disagreements generated due to the legality of the implemented measures on a regional level. Based on various internal pressures regarding the management of the pandemic and due to the ever-growing needs to implement a new version of State of Alarm that would cover the entire Spanish territory. On October 25th, 2020, a new State of Alarm was established which delegated authority to each regional government, which restricted their decision-making capacity in specific fundamental right restriction limits. In the new emergency regime, multiple Delegated Authorities were established instead of a single authority. The autonomous communities kept the competences of a single authority but as a delegation, whilst the central government kept the competence to reacquire the delegated authority if that was necessary. This type of open regulation allowed communities to adopt less or more restrictive measures depending on the regional health status quo. This type of governance during the pandemic would minimize political frictions between central and regional political points of authority and the Sectorial Conference of health became an institution of crucial importance which would coordinate regional policies while simultaneously monitor the evolution of the pandemic.

Presidencia del Gobierno. (n.d.). *Estadio de Alarma*. Retrieved May 26 2021 from https://www.lamoncloa.gob.es/covid-19/Paginas/estado-de-alarma.aspx#:~:text=El%20primer%20estado%20de%20alarma,provocada%20por%20el%20COVID%2D19.

¹⁴⁴ More information available here:

¹⁴⁵ The Spanish Constitution oversees the declaration of three kind of emergency regimes to face serious threats for Spanish society: alarm, exception, and war. The one planned for pandemics and health crisis is the State of Alarm. This regime allows to limit some fundamental rights and permits the creation of new structures of government to unify the coordination of decisions that, in normal circumstances, follow the distribution of competences described above - *Gross, Oren. 2011. "Constitutions and Emergency Regimes." In Comparative Constitutional Law, eds. Tom Ginsburg and Rosalind Dixon. Northampton: Edward Elgar, 334–54.*

4.2.12 Sweden

Sweden abides by the model of constitutional monarchy and is based on four primary laws: the Act of Succession, the Freedom of the Press Act, the instrument of Government and the Parliament (Riksdag). Moreover, Sweden's constitution is based on representative democracy, parliamentarism and popular sovereignty. The monarch is considered as the head of state however does not have political power. In a similar fashion, the political points of authority are the prime minister, party leaders and other cabinet members. The administrative management is handled by the central administrative agencies and are highly autonomous. On a regional level, Sweden has 21 countries (län) and regional governors. They administer healthcare, regional transport and a certain degree of educational and vocal training. In addition, Sweden has 290 municipalities (Kommuner) that have elected assembly and have a certain degree of independency on local administrative issues. Municipalities oversee the care of elderly people and national health care agencies cannot enforce rules regarding the separation of infected and non-infected people as well as personal protection equipment (Larson et al. 2021). Sweden did not experience changes or adaptations in the governmental structure prior or during COVID-19.

4.2.13 Switzerland

Switzerland has a **federalist political system** which allows for broad autonomy for its cantons. The central government is known as 'Federal Council', and the main points of authority are the confederation (central government), 26 cantons (regional points of authority), 2,250 communes (local level of authority). ¹⁴⁶ Switzerland does not have an official (de jure) capital city in the technical sense. Chosen as the seat of government, Bern is referred to as the 'federal city' and operates as Switzerland's de facto capital. The 246 members of the Swiss parliament (Federal Assembly) are directly elected by the people. Further, the parliament consists of two chambers: The National Council with 200 members and the Council of States with 45 members. The National Council, or "lower chamber", represents the people. The Council of States, or "upper chamber" and represents the cantons. Both chambers are elected directly by the people for a four-year term. ¹⁴⁷ The power is shared between the Confederation, the cantons, and the communes. All three levels have legislative and executive power. However, only the Confederation and the cantons have juridical power ¹⁴⁸.

The management rate of the central government in the daily administration of cantons is low, however, this changed, to a certain degree, in order to combat COVID-19 more effectively. The Federal Office of Public Health FOPH (Bundesamt für Gesundheit BAG), represented by Health Minister Alain Berset and Head of Infectious Disease Daniel Koch is strongly involved in the management of the COVID-19 pandemic. The Swiss COVID-19 government response consists of multiple nationally coherent health measures and economic support packages. These are backed by the Epidemien Gesetz (Epidemic law) and since 25.09.2020 by the COVID-19 Act. Based on the Epidemien Gesetz, the Bundesrat (Swiss Federal Council) in cooperation with the cantons can define the strategies to contain an infectious disease. However, the handling of the Corona virus has disrupted the usual democratic system of Switzerland (Eichenauer & Sturm 2020). The reason for this was the announcement of the so-called 'extraordinary situation' on March 16th, 2020. The announcement meant that the Swiss

¹⁴⁶ Confederation Suisse. (n.d.). *The Federal Assembly*. Available at: https://www.eda.admin.ch/aboutswitzerland/en/home/politik/uebersicht/bundesversammlung.html.

¹⁴⁷ ibid.

Confederation Suisse. (n.d.). Federalism. Available at: https://www.eda.admin.ch/aboutswitzerland/en/home/politik/uebersicht/foederalismus.html.

Federal Council has the power to make decisions for all of Switzerland, not needing to consolidate with the cantons. During the first wave the 'extraordinary situation' got extended until the 26th of April 2020. Throughout the COVID-19 pandemic measures and decisions have been made on the level of the Federal Council as well as on the level of the cantons. The Swiss Federal Council also implemented **two non-decisive task forces relevant to the handling of the COVID-19 crisis**: The **Task Force FOPH COVID-19**¹⁴⁹ (run and located at the **Federal Office of Public Health (FOPH)**, with its main purpose to be the handling of the crisis and its potential long-term consequences) and the Swiss National COVID-19 Science Task Force (SN-STF)¹⁵⁰ (which supports and advises the public authorities with scientific expertise in relation to the novel Coronavirus).

4.2.14 United Kingdom

The United Kingdom (UK) is comprised of Wales, England, Scotland and Northern Ireland and it is a constitutional monarchy and parliamentary democracy. In the UK parliament, in the House of Commons, there are members representing both England and Wales¹⁵¹. The second chamber of the UK Parliament, the House of Lords, complements the work of the House of Commons by making laws, considering public policy in-depth and holding government to account. Regarding emergency planning structure, the Civil Contingencies Secretariat (CCS) is part of the UK Cabinet Office and is in charge for emergency planning and response. The Civil Contingencies Act¹⁵² and accompanying measures provide the framework for civil protection in the UK including the activities that relative entities (category 1) such as the Police, NHS (National Health System) and Fire Department must implement in an emergency. At a local level in England and Wales, the aforementioned responders are prepared for emergencies through Local Resilience Forums (LRFs)¹⁵³. Strategic Coordinating Groups (SCG)s also operate at a local level, with documents outlining how it would be likely for the SCGs to be convened in the event of a pandemic to take overall responsibility for the multi-agency management at a local level¹⁵⁴. Since 2006, Wales given legislative powers, resulting in the creation of a Welsh Parliament and a Welsh Assembly Government, comprising of a Prime Minister for Wales, Welsh ministers, and deputy ministers. There are twenty areas of responsibility devolved to the National Assembly for Wales, including economic development, health, social welfare, and local governments.

Available at: https://www.bag.admin.ch/bag/en/home/das-bag/organisation/direktionsbereiche-abteilungen/krisenorganisation-covid-19.html.

¹⁴⁹ Federal Office of Public Health. (n.d.). FOPH COVID-19 Task Force.

¹⁵⁰ Swiss National Covid-19 Science Task Force. (n.d.). *We identify, analyse and advise*. Retrieved May 29, 2021, from https://sciencetaskforce.ch/.

¹⁵¹ UK Parliament. (n.d.). *Parliamentary constituencies*. Retrieved May 26, 2021, from https://www.parliament.uk/about/how/elections-and-voting/constituencies/.

¹⁵² UK Cabinet Office. (2013). *Preparation and planning for emergencies: responsibilities of responder agencies and other.* Retrieved May 26, 2021, from https://www.gov.uk/guidance/preparation-and-planning-for-emergencies-responsibilities-of-responder-agencies-and-others.

¹⁵³ UK Cabinet Office. (2013, Febrary 13). *Local resilience forums: contact details*. Retrieved May 26, 2021, from https://www.gov.uk/guidance/local-resilience-forums-contact-details.

¹⁵⁴ UK Cabinet Office. (2013). *Preparing for Pandemic Influenza*. Retrieved May 26, 2021, from https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment data/file/225869/Pandemic Influenza LRF Guidance.pdf.

The four nations of the UK joined their efforts to respond to the COVID-19 pandemic. Mid-March 2020, the UK Prime Minister issued new ministerial structures¹⁵⁵ to respond to the pandemic which included four new implementation committees (Freeguard & Zodgekar 2020) focusing on health, public sector preparedness, economy and international response which participate into the daily COVID-19 meetings led by the Prime Minister. These committees were replaced in June 2020 by the 'COVID-19 Strategy' and the 'COVID-19 Operations' cabinet. Further, in May,2020 the government also created new ministerial-led taskforces for an efficient re-opening of specific sectors such as restaurants, non-essential stores, tourism etc¹⁵⁶. However, Wales approved the COVID-19 restrictions by the Welsh Parliament on March 25th resulting in independent management of the COVID-19 pandemic from other British nations. In Wales, the Public Health department manages the health emergencies whereas emergency planning is consistent with the United Kingdom's Civil Contingencies Act 2004, but it includes the Welsh Government's involvement and the participation of operating organisations unique to Wales. Wales Resilience Forum is the highest authority for emergency planning in Wales and works in cooperation with local resilience forums and other agencies.

Four phases included the UK government's response (Hadden & Ittoo 2020). More precisely, in the first phase where the four countries worked together the Department of Health and Social Care played a key role in the governmental response with committees of experts and scientific advisory groups working in a close relationship with the government (Kapucu 2009). More precisely, COBR (Cabinet Office Briefing Rooms) comprised of key ministers and officials and the Scientific Advisory Group for Emergencies (SAGE) which first established as a precautionary measure on 22nd January, led by the government chief scientific adviser and the chief medical officer. In the following phase, in March 2020 COBR was the basic forum for decision making regarding COVID-19 in the UK (including all other nations) whereas SAGE served as and informative and advice forum for all devolved nations¹⁵⁷. However, the CORB meetings generated the decisions and best approaches. In the third phase was introduced the lockdown¹⁵⁸. The Prime Minister and several senior Ministers and officials participated in daily meetings for the decision of COVID-19 responses. Wales followed England into lockdown on March 23rd, creating a Technical Advisory Cell (TAC) and a Technical Advisory Group (TAG) to support SAGE in advising the Welsh Government and Public Health Wales¹⁵⁹. The aforementioned entities communicated with the Ministers who then presented the changes to regulations in the Cabinet for consideration. The Cabinet is the one to decide and then to inform the Ministers one day before the changes were announced to the public.

¹⁵⁵ Prime Minister's Office, 10 Downing Street, Cabinet Office, Department of Health and Social Care, Foreign & Commonwealth Office, HM Treasury, Department for Business, Energy & Industrial Strategy, and The Rt Hon Boris Johnson MP. (2020). *New government structures to coordinate response to coronavirus*. Retrieved May 26, 2021, from https://www.gov.uk/government/news/new-government-structures-to-coordinate-response-to-coronavirus.

¹⁵⁶ UK Cabinet Office. (2020). *Government announces roadmap taskforces*. Retrieved May 26, 2021, from https://www.gov.uk/government/news/government-announces-roadmap-taskforces.

¹⁵⁷ *Supra* note 177.

¹⁵⁸ Ibid.

¹⁵⁹ Welsh Government. (n.d). *Terms of Reference*. Available at https://gov.wales/technical-advisory-cell/terms-reference.

4.3 Social economic, cultural, and legal factors per country¹⁶⁰

4.3.1 Austria

Austria's responses were influenced by several factors, especially during the second and third wave of the pandemic. From a legal standpoint, the Austrian Constitutional Court ruled that some of the restrictive policies taken during March and April 2020 were unconstitutional (Aichinger 2020). Having to adapt to the court's decision, the Austrian Government decided to change some of its responses during the second wave and even amend the COVID-19 law, in September 2020, to comply with the Court order¹⁶¹. As far as the **economy** is concerned, the Ministry of Finance issued 41 laws and ordinances to tackle the financial consequences of the pandemic. Among them, there was the determination of a fund to help small enterprises as well as a regulation mentioning that the state would subsidise employees' wages from companies whose operation was suspended. Perhaps, the most controversial economic measure was the decision to keep ski resorts and lifts open during Austria's third lockdown¹⁶². This was done because the country heavily relies on the winter season's tourism to maintain its economic wealth. Culture-wise, the significance one of the most important Christian holidays, Christmas, became evident in the government response, as lockdown restrictions were eased during the holiday season. Nevertheless, this was not the case for Easter, as the British mutation of the virus and the rising number of cases, led the country to a six-day lockdown in three eastern provinces. A social factor that did not influence policies but rather the whole course of the pandemic in Austria, was the "low level of intergenerational contact and cohabitation" which "may have helped to isolate elderly vulnerable groups". 163

4.3.2 Belgium

In Belgium both COVID-19 itself and the responses to combat the pandemic had a social impact in many aspects of the Belgian's every-day life. In general, it seems that the overall crisis had severe consequences on the disadvantaged and enhanced social inequality. To specify, in Brussels, there seems to be a connection between fatality and impoverishment, as higher death rates were noted in poor areas. Moreover, the lockdown measures affected children from families with limited resources because they could not provide them with equipment to learn from home. Culture-wise, the restrictions in gatherings set limitations for Jews and Muslims to exercise their religious duties and participate in their respective religious festivities (e.g., Ramadan). From an economic perspective, Belgium, as is the case in most countries, received a big financial hit due to the pandemic. This is indicated by the fact that Belgian companies had a 10% loss of revenue during the health crisis. As mentioned above, Belgium had a designated body responsible for handling the financial situation, the Economic Risk Management Group (ERMG). The ERMG measured the financial impact on companies, ensured that the critical-ones would continue to operate, and reviewed the decided- upon economic

¹⁶⁰ It has to be mentioned that due to the lack of bibliographical data on what shaped the responses, the section focuses mainly on the nature and consequences of the relevant responses.

Republic of Austria. (2020, September 25). Änderung des Epidemiegesetzes 1950, des Tuberkulosegesetzes und des COVID-19-Maßnahmengesetzes (NR: GP XXVII IA 826/A AB 370 S. 51. BR: AB 10408 S. 912.). Retrieved May
27, 2021, from

https://www.ris.bka.gv.at/Dokumente/BgblAuth/BGBLA 2020 | 104/BGBLA 2020 | 104.pdfsig.

¹⁶² Vienna Center for Electoral Research. (2021, February 19). *Chronology of the Corona crisis in Austria - Part 4: Renewed lockdowns, mass tests and the start of the vaccination campaign – Corona blog 100*. Retrieved May 27, 2021, from https://viecer.univie.ac.at/corona-blog/corona-blog-beitraege/blog100/. ¹⁶³ Ibid.

policies. Legally, the restrictions imposed by the Government were not judged as unconstitutional but were criticized as such by many. The various suspensions of fundamental rights in matters like education, religion, and assembly in conjunction with the curfew and the limitations of movement, which can only be enforced in cases of safety threats or during natural disasters, are the main points of criticism towards the Belgian Governments.

4.3.3 Cyprus

The measures taken by the Government of Cyprus aimed at controlling the spread of the COVID-19 outbreak while ensuring the survivability of the economy and the country's financial operations. To that end, the measures were focused on the limitation of movement (curfews, lockdowns, work from home measures etc.) and the financial assistance to those in need. The suspension of operation of retail and hospitality businesses led the government to announce financial benefits for small and medium -sized businesses. They included both financial aid but also tax and VAT releases, rent reductions and reductions in social security contributions. ¹⁶⁴ In the economic context, it should also be noted, that Cyprus, acknowledging the danger of imported COVID-19 cases, and since its first two cases came from abroad, decided to close its airports and ports, which resulted in damage to the country's tourism (as the measures were lifted the airports and ports reopened with travel regulations). From a social perspective, the Government adopted measures to limit all types of public gatherings. Ceremonies, social gatherings, and in general concentration of crowds, were either limited in attendees or completely forbidden. Schools and all kinds of businesses were no exception, as the measures of online lessons and "work from home" were adopted, respectively. The governmental responses did not particularly consider cultural factors, as Cyprus is a rather homogenous country. However, if something ought to be noted, that would be in regard to the operation of religious buildings such as Churches. The Government, acknowledging that religious gatherings and rituals could potentially be sources of contagion, decided to suspend Church services, despite the influence of the Orthodox Church in the Cypriot community (Petridou & Zahariadis, Ceccoli 2020).

From a legal standpoint, many presidential Decrees were issued throughout the pandemic period in order to keep up with the specific needs that emerged. These were mainly:

- Decrees by the Minister of Health, all of which are on the Determination of Measures against the Spread of COVID-19
- Decrees by the Minister of Transport, on Civil aviation restrictions due to COVID-19 and
- Decrees by the Ministry of Labour, Social Welfare and Social Insurance that mainly focus on Hotel Units and Tourist Accommodations or other Economic Activities Related to the Tourism Industry or Economic Activities, which are affected by Tourism, on Partial or Complete Suspension of a Company's Operations due to the pandemic, on Unemployment Support, on Special Plans for Certain Categories of Independent Employees, Allowance from Work for Health Reasons and Special Work Absence Allowance for Child Care.

4.3.4 Germany

The German response to Covid-19, on a federal level, is expressed in the four Acts on the Protection of the Population in the Event of an Epidemic Situation of National Importance (*Gesetz zum Schutz der*

¹⁶⁴ In-Cyprus. (2020, March 15). *Coronavirus: Measures to support jobs, workers and vulnerable groups*. Retrieved May 27, 2021, from https://in-cyprus.philenews.com/coronavirus-measures-to-support-jobs-workers-and-vulnerable-groups/.

Bevölkerung bei einer epidemischen Lage von nationaler Tragweite),¹⁶⁵ which were implemented on 27th March 2020, 19th May 2020, 18th November 2020, and 22nd April 2021, respectively. An overview of the introductions to the draft versions of these Acts not only reveal the character of the measures taken but also the social, economic, cultural, and legal indicators that guided them in the first place¹⁶⁶.

Border controls imposed as executive actions in accordance with Articles 25 and 28 of the Schengen Borders CodeA retrospective review of the Four acts¹⁶⁷ highlights the commitment of the German Federal Government to protect the **social basis (the social welfare state "Sozialstaat")** of the German community by safeguarding its health care system. This is indicated by the specific measures taken to enhance the health responses such as the continuous "supply of medicines medical devices, laboratory testing services, personal protective equipment (PPE), and auxiliary materials...", among others. Attention was also given to data protection and the digitalization of services. To specify, the first Act provides data-related regulations in order to ensure that individuals' privacy rights are respected, when their data are shared between different institutions (e.g., health institutions-agencies-government), while the third Act includes provisions for the digitalization of the public health services. Other socially related policies include the modification of pre-existing Acts and Codes to improve laboratory testing and influenza vaccination processes as well as the "…empowerment of the BMG to ensure that not only ensured persons but also non-insured persons may have a legal claim to testing and vaccinations". ¹⁶⁸

From an **economic perspective**, the Federal Government's main goals were to guarantee all around access to health services, to financially support the health system and to secure the financial survivability of the country's economy. To that end it quickly implemented regulations to ease access to short-time work benefits (Kurzarbeit), assembled a comprehensive set of support measures for

¹⁶⁵ Bundestag. (Marz, 2020). Gesetz zum Schutz der Bevölkerung bei einer epidemischen Lage von nationaler Tragweite. Retrieved 27 May, 2021 from https://wipolex.wipo.int/en/legislation/details/19754.
 ¹⁶⁶ Additional key guidelines and legislation include:

- Non-binding guidelines for fighting the Corona epidemic (<u>Leitlinien zum Kampf gegen die Corona-Epidemie</u>) and measures for the containment of the COVID-19 epidemic (<u>Maßnahmen zur Eindämmung der COVID-19-Epidemie</u>) agreed upon by the federal and state governments on 16 March 2020 and 6 May respectively, and updated/amended at several points during the pandemic
- Act Mitigating the Effects of the COVID-19 Pandemic in Civil, Insolvency, and Criminal Law (Gesetz zur Abmilderung der Folgen der COVID-19-Pandemie im Zivil-, Insolvenz- und Strafverfahrensrecht) implemented on 27 March 2020
- Administrative tax measures to take account of the effects of the Coronavirus (gewerbesteuerlichen Maßnahmen zur Berücksichtigung der Auswirkungen des Coronavirus) decreed by the Federal Ministry of Finance on 19 March 2020, followed by the first and second Corona Tax Assistance Acts (Corona-Steuerhilfegesetz) on 19 June and 29 June 2020
- Act on the Temporary Crisis-Related Improvement of Short-Time Work Benefit Regulations (Gesetz zur befristeten krisenbedingten Verbesserung der Regelungen für das Kurzarbeitergeld) and regulation to ease access to short-time work (Verordnung über Erleichterungen der Kurzarbeit – KugV), adopted on 13 March and 25 March 2020
- Guidelines for special "bridging assistance" (Überbrückungshilfe) for MSMEs and the self-employed
- Regulation on the entitlement to protective vaccines against the Coronavirus SARS-CoV-2 (<u>Verordnungzum Anspruch auf Schutzimpfunggegen das Coronavirus SARS-CoV-2</u>) implemented on 8 February 2021

¹⁶⁷ Drafts with problem statements and justifications: <u>first</u>, <u>second</u>, <u>third</u>, <u>fourth</u>; final texts: <u>first</u>, <u>second</u>, <u>third</u>, <u>fourth</u>;

International Labor (n.d.). *Germany*. Retrieved May 27, 2021 from https://www.ilo.org/dyn/natlex/natlex4.detail?p_lang=en&p_isn=43202.

MSMEs and the self-employed, and made special funding available for <u>cultural institutions</u>. It also paid attention to MSMEs and the self-employed by addressing potential cost-sharing conflicts with private-insurance companies while ensuring the fair distribution of health care costs among stakeholders in the system. Furthermore, it relaxed the billing audits for hospitals treating COVID-19 patients and provided financial assistance for nursing and long-term care. Finally, the first Act expanded "the compensation provisions of the Infection Protection Act (IfSG)" in conjunction with the third act, which clarified the regulations regarding compensations to those who lost earning due to the pandemic. ¹⁷⁰

Legally, the Acts are based upon Article 2, Paragraph 2, Sentence 1 of the Basic Law of the Federal Republic of Germany (i.e., the constitution), which provides legal justification for the measures as they were taken in order to "ensure the continued functioning of the social welfare state – particularly the health system – and by doing so to fulfil the state's duty to protect life and health". From a cultural point of view, Germany proved its commitment to the European ideals and values by covering the costs of European nationals, hospitalized in German facilities, due to lack of space or inadequate health protection in their home countries. It furthermore offered recognition to the role of culture and the arts in sustaining a high quality-of-life by making special funding and other support measures available to cultural institutions and workers.

4.3.5 Greece

All the measures adopted by the Greek government had a substantial impact on the everyday lives of all the citizens, thus all the relevant social, legal, economic, and cultural factors have been taken into consideration to minimize all the possible implications and challenges. To begin with, specific restrictive measures have been applied from the beginning of the appearance of COVID-19 pandemic in the Greek territory, through curfew limitations, lockdowns (local and/or national), restrictions to movements and travelling, quarantines, limitation of public or private social gatherings, mandatory use of face masks indoors and outdoors, etc. ¹⁷². All these measures had an impact on the wellbeing of the Greek population both from a sociological/psychological (Peppou et al. 2021) and from a financial aspect. During the lockdowns period, certain businesses had to suspend their operations and could function only through online applications, which created substantial income loss and rise to unemployment 173. For that reason, the government announced certain financial benefits and/or tax and VAT releases for small and medium -sized businesses especially for sectors that had been

¹⁶⁹ European Commission. (2020). *Economic policy measures adopted by the Federal Government and the German Länder to combat the impact of the COVID-19 pandemic*. Retrieved May 26, 2021, from https://ec.europa.eu/info/sites/default/files/2020-european-semester-national-reform-programme-annex-germany en.pdf.

¹⁷⁰ Ibid.

¹⁷¹ The Federal Government. (n.d.). *The Basic Law*. Retrieved from https://www.bundesregierung.de/breg-en/chancellor/basic-law-

 $[\]underline{470510\#:}^{\sim}: text = Article\%202\%20\%5 BPersonal\%20 Freedoms\%5D, to\%20 life\%20 and \%20 physical\%20 integrity.$

A3M. (n.d.). *COVID-19 pandemic - Greece*. Retrieved May 27, 2021, from https://global-monitoring.com/gm/page/events/epidemic-0001942.ugWbZWZFtslc.html?lang=en.

¹⁷³ Trading Economics. (1998 - 2020). Greece Youth Unemployment Rate. Retrieved May 27, 2021, from https://tradingeconomics.com/greece/youth-unemployment-rate.

impacted the most, as well as individuals, which can be found in the forthcoming section 4.4.5)¹⁷⁴, 175. In addition to that, there was a substantial support to the public healthcare system not only in terms of funding, but also in terms of human resources¹⁷⁶. Furthermore, despite the fact that no measures were explicitly referred to cultural factors, since Greece is home of many foreigners, migrants and immigrants, all official governmental announcements were translated into the main languages spoken in the country¹⁷⁷, while considering the practice of religions, ceremonies, rituals, and gatherings, these are allowed if specific requirements are met and under strict circumstances. Having not any Court Rulings concerning the legality of all the measures taken¹⁷⁸, during the pandemic, more than **890** legislation acts in total (laws, presidential decrees etc.) were issued only for COVID-19, along with presidential decrees mainly by the Minister of Health, all of which are on the Determination of Measures against the Spread of COVID-19, by the Minister of Transport, on Civil aviation restrictions due to COVID-19 and by the Ministry of Labour, Social Welfare and Social Solidarity on Partial or Complete Suspension of a Company's Operations due to the pandemic, on Unemployment Support, on Special Plans for Certain Categories of Independent Employees, Allowance from Work for Health Reasons and Special Work Absence Allowance for Child Care etc.¹⁷⁹

4.3.6 Ireland

In Ireland, the COVID-19 restrictions had significant impact on individuals, families, and businesses through the various state measures that were taken on social welfare, housing, business protection, disability, and employment^{180,181}. The government took reactive measures to relieve the effects of the COVID-19 restrictions imposed. On an economic level the government attempted to reduce the impact of COVID-19-related restrictions on household incomes, and on helping businesses survive during waves of increased rates of disease and as restrictions were relaxed (Kennelly et al. 2020). This included income supports in the form of a flat-rate *Pandemic Unemployment Payment* (PUP) for individuals who lost their jobs due to the pandemic, as well as a *Temporary Wage Subsidy Scheme* (TWSS) which provides financial support to employees whose employers are affected by the pandemic and was

¹⁷⁴ European Commission. (n.d.). *Greece*. Retrieved May 27, 2021, from https://ec.europa.eu/info/live-work-travel-eu/coronavirus-response/jobs-and-economy-during-coronavirus-pandemic/state-aid-cases/greece en.
¹⁷⁵ PWC. (2021, April 12). *Measures adopted to address the negative effects of the occurrence of COVID-19 (coronavirus)*. Retrieved April 14, 2021 from https://www.pwc.com/gr/en/newsletters/tax-index/tax-and-legal-measures-COVID19.html.

¹⁷⁶ European Commission - Directorate General, Economic and Finance Affairs. (2020, November 16). *Policy measures taken against the spread and impact of the coronavirus* – *16 November 2020*. Retrieved May 27, 2021, from https://ec.europa.eu/info/sites/default/files/coronovirus policy measures 16 november.pdf.

¹⁷⁷ Hellenic Ministry of Migration and Asylum. (n.d.). *Covid-19*. Retrieved May 27, 2021, from https://migration.gov.gr/tag/covid-19/.

¹⁷⁸ European Union Agency for Fundamental Rights. (2020, November 3). *Coronavirus pandemic in the EU – Fundamental Rights Implications*. Retrieved May 27, 2021, from https://fra.europa.eu/sites/default/files/fra uploads/el report on coronavirus pandemic november 2020.p df.

Hellenic Republic. (n.d.). *Legislation On Covid-19*. Retrieved May 27, 2021, from https://covid19.gov.gr/nomothesia-gia-ton-covid-19/.

¹⁸⁰ Republic of Ireland - Department of Social Protection. (2020, November 12). *COVID-19 Social Welfare Schemes available to a self-employed person*. Retrieved May 27, 2021, from https://www.gov.ie/en/publication/b41bb-covid-19-social-welfare-schemes-available-to-a-self-employed-person/.

¹⁸¹ Republic of Ireland - Department of Housing, Local Government and Heritage. (2020, March 24). *Guidance Document on COVID-19 Supports for Landlords and Tenants*. Retrieved May 27, 2020 from https://www.gov.ie/en/publication/c209a-guidance-document-on-covid-19-supports-for-landlords-and-tenants/.

administered by the Department of Social Protection (DSP). The *Employment Wage Subsidy Scheme* (EWSS) replaced the TWSS from 1st September 2020, during the second wave, and had since been operated by The Office of the Revenue Commissioner¹⁸². Other measures included payment breaks on mortgages, personal, and business loans, liquidity funding for businesses and deferred tax payments, as well as freezes on evictions and rent increases¹⁸³. Asylum seekers in Direct Provision centres were initially ineligible to claim PUP and eligibility was only included in August 2020, during the second wave of the virus¹⁸⁴. The government also introduced two main emergency measures to protect tenants: a rent freeze and a prohibition on evictions (with some exceptions)^{185,186}. During the first wave, The Roadmap for Reopening Society and Business set out ways to keep the level of transmission as low as possible while balancing continuing restrictions proportionately with the positive social and economic benefits which will be brought about by lifting restrictions¹⁸⁷. The updated COVID-19 Resilience and Recovery - The Path Ahead¹⁸⁸ updated during the third wave focused on three key areas.

- 1. Learning from Experience: Public Health Impact and Risk Assessment
- 2. Managing Challenges: Economic and Social Impact Assessment and Response
- 3. Next Steps and Beyond: Preparing for the Future

The Government reported key areas where social impacts required a focused response including mental health, long term care, policing and crime, education, at-risk families and children, gender, Direct Provision centres and local communities. The government acknowledged the negative impact of school closures on children and families and the first easing of restrictions focused on the staggered opening of schools ¹⁸⁹. The Department of Education engaged with all education stakeholders to ensure the phased opening of schools commenced from March 2020. Emphasis has also been placed on mental health and wellbeing services, in reference to preparing for the future, Local Authorities will promote awareness of local programmes and initiatives, whilst a programme of "citizen empowerment" will be delivered with local partners.

¹⁸² Republic of Ireland - Department of Social Protection. (2020, July 30). *Self-Employed and the Pandemic Unemployment Payment*. Retrieved May 27, 2021, from https://www.gov.ie/en/publication/c4828-self-employed-and-the-pandemic-unemployment-payment/.

¹⁸³ Republic of Ireland - Department of Housing, Local Government and Heritage. (2020, March 19). *Government approves series of emergency measures to protect tenants*. Retrieved May 27, 2021, from https://www.gov.ie/en/press-release/e9ebe0-government-approves-series-of-emergency-measures-to-protect-tenants/

¹⁸⁴ The Journal. (2020, August 6). Direct Provision residents will now be eligible for Pandemic Unemployment Payment. Retrieved May 27, 2021, from https://www.thejournal.ie/direct-provision-pandemic-unemployment-payment-5168145-Aug2020/.

¹⁸⁵ *Supra* note 201.

¹⁸⁶ Republic of Ireland - Residential Tenancies Board. (2020, August 4). *New protections for tenants in rent arrears and Covid-19 moratorium now expired*. Retrieved May 27, 2021, from https://www.rtb.ie/news/new-protections-for-tenants-in-rent-arrears-and-COVID-19-moratorium-now-expired.

¹⁸⁷ Republic of Ireland - Department of the Taoiseach; Department of Health. (2020, June 18). *Roadmap for reopening society and business*. Retrieved May 27, 2021, from https://www.gov.ie/en/news/58bc8b-taoiseach-announces-roadmap-for-reopening-society-and-business-and-u/.

¹⁸⁸ Republic of Ireland. (2020, September 15). *COVID-19 Resilience and Recovery 2021 - The Path Ahead*. Retrieved April 21, 2021, from https://www.gov.ie/en/campaigns/resilience-recovery-2020-2021-plan-for-living-with-COVID-19/.

¹⁸⁹ Ibid.

4.3.7 Israel

Israel's responses were basically guided **by its socio-cultural diversity**. First of all, approximately 11% of its population is over 60 years old, living in long-term care facilities and had the Government's focus from the start. Secondly, the high percentage of non-Hebrew speaking individuals in Israel (21% Muslim-Arabs, Christian-Arabs, and Druze) means that the Government communicated the responses in Arabic as well. Thirdly, the Government focused its attention to the Jewish Ultraorthodox society (12% of the population), that is consisted of large families living in overcrowded areas and follows the instructions of its community leaders. ¹⁹⁰ As far as economy goes, the Israeli government's main concern was the increasing unemployment rate, that skyrocketed during the pandemic from 3.8% pre-COVID-19 to 17.7% in December 2020¹⁹¹.

4.3.8 Italy

In Italy, the COVID-19 measures that were adopted by the Italian government had a substantial effect on economic and social structure. Italy was highly affected from the pandemic has also seen a loss of 8.8% of GDP in 2020 as a consequence of the ant COVID-19 measures and namely the lockdown (Berardi et al. 2020). A survey carried out by Istat in May 2020¹⁹² to investigate the situation and prospects in the COVID-19 health emergency, described that 45% of companies with three or more employees have suspended the activity. For 38.3% of the companies, the decision was made following the first lockdown, and more than half of the companies foresee a lack of liquidity to meet the expenses that will arise until the end of 2020. Through the decrees Cure Italy, Liquidity, Relaunch and August, the Italian Government has implemented a series of fiscal measures aimed at supporting Italy's economy. The most significant measures were suspensions, extensions, and postponements of payments for companies and professionals; cancellation and reduction of taxes; incentives and grants; support for capitalization. Other measures that the pandemic demanded was the shift to digitization. The Italian government implemented measures such as working from home and distance learning by also providing an economic bonus to incentivize the purchase of computers in low-income families¹⁹³. In addition, there are multiple psychological affects generated from the pandemic (Rajkumar 2020). Thus, the Italian government developed the regional activation of a team of psychologicalpsychotherapeutic experts trained on the diagnosis of COVID-19 psychological effects (Sanfelici 2020). Further, the Italian government issued monetary benefits to cover all groups and ease conditions for working parents¹⁹⁴, ¹⁹⁵.

¹⁹⁰ Israeli Ministry of Foreign Affairs. (n.d.). *PEOPLE: Minority Communities*. Retrieved May 27, 2021, from https://mfa.gov.il/mfa/aboutisrael/people/pages/society-%20minority%20communities.aspx.

¹⁹¹ i24News. (2021, April 22). *Israel's unemployment rate drops below 10%*. Retrieved May 27, 2021, from https://www.i24news.tv/en/news/economy/1619079679-israel-s-unemployment-rate-drops-below-10.

¹⁹² Istituto Nazionale di Statistica [ISTAT], (2020). Situazione e prospettive delle imprese nell'emergenza sanitaria COVID-19. Available at: https://www.istat.it/it/archivio/244378.

¹⁹³ Supra note 210.

¹⁹⁴ Republic of Italy - State Gazzette. (2020, December 30). *State budget for the financial year 2021 and multi-year budget for the three year period 2021-2023*, 30 December 2020, n°178. Retrieved May 27, 2021 from https://www.gazzettaufficiale.it/eli/id/2020/12/30/20G00202/sg.

¹⁹⁵ Republic of Italy - State Gazzette (2020, March 17). Strengthening measures of the National health service and economic support for families, workers and businesses connected to the epidemiological emergency from COVID-19, 17 March 2020, n°18. Retrieved May 27, 2021, from https://www.gazzettaufficiale.it/eli/id/2020/03/17/20G00034/sg.

4.3.9 Portugal

Portugal declared a State of Emergency situation and had legal coverage from its constitution. Nevertheless, the measures to combat COVID-19, on a social level, were not that different. Portugal, similarly, to most European countries, relied on restriction of movements, curfews and travel bans to limit the contagion of the virus. Moreover, retail and leisure businesses had their operations suspended and "work" and "study' from home became standard practice during the lockdowns, except for some core services like production, distribution etc. For those remaining in the workplace, special regulations were established in order to avoid overcrowding and respecting social distancing. It should also be noted that Portugal enhanced its Healthcare System by hiring more personnel, purchasing medication and equipment and by suspending the vacations of all necessary health-related personnel. In the economic context, Portugal, decided to financially support companies that lost revenue due to the pandemic. It did so by launching a number of long and short-term programs, which include economic recovery, provision of financial incentives and other support measures. Furthermore, Portugal, being a tourist destination itself, especially during the summer period, decided to draft regulations that dictate the operation of the beaches while ensuring the survivability of the tourist industry by supporting it with additional funds. Finally, Portugal's responses were not particularly influenced by cultural factors except from the two Christian holidays, Christmas and Easter, and other indigenous celebrations, during which lockdown restrictions were eased.

4.3.10 Romania

In Romania measures of social distancing were implemented the first being instituted on the 10th day from the date of confirmation of the first case by banning public meetings of more than 1,000 people. A study conducted at Oxford University states that Romania had a prompt response, registering a high value of the "Government Response Stringency" index¹⁹⁶. Associated social risks factors such as age, health status, quality of foods, sports etc. (factors that Romania does not rank well) were taken into consideration in the fight against COVID-19. The public health crisis is also being translated into the economic one, which aims at the reaction of the economy both in the short and long term. In order to mitigate the adverse economic effects of social distancing measures, in the short term it is still necessary to identify a set of measures to mitigate the economic shock to the point where the economic costs of this package are equal to the economic benefits. These measures must target the vulnerable areas of the economy, respectively the most severely affected, but also those that have a significant share in GDP. Thus, according to a study published by the European Commission in 2006¹⁹⁷, sectors such as the hotel and public administration industry, transport or entertainment, cultural and recreational activities would be most affected by a pandemic of a similar magnitude. However, the effect of such a pandemic on agriculture, industry or trade should not be ignored, representing approximately 40% of Romania's GDP in 2019. The main measures adopted by the law, by the Romanian government were to increase responsiveness (e.g. acquisition of goods and services of immediate necessity by negotiation without prior publication, operational coordination of public services, adaptation the work schedule or perpetuating the activity of the social assistance services,

¹⁹⁶ University of Oxford – Blavatnik School of Government. (2020 March - 2021 December). Covid-19 Government Response Tracker. Retrieved May 27, 2021, from https://www.bsg.ox.ac.uk/research/research-projects/covid-19-government-response-tracker.

¹⁹⁷ European Commission – Directorate for Economic and Financial Affairs. (2006). *Special Report No 2 / 2006*. Retrieved May 27, 2021, from https://ec.europa.eu/economy_finance/publications/pages/publication485_en.pdf.

secondment on the national territory, etc.), to **ensure community resilience** (e.g.) temporary evacuation of persons and property from the affected area or possibly being affected, granting basic necessities for the affected persons and animals, measures to protect life and to limit the effects of the type of risk produced on health persons, including quarantine or solitary confinement at home, etc.), to reduce the impact of risk (e.g. restricting or prohibiting different types of gatherings indoors, movement of persons and vehicles, temporary closure of some state border crossing points etc.)¹⁹⁸. During the state of alert, the Ministry of Health coordinated prevention activities and by joint order with the Minister of Internal Affairs the obligation to wear a protective mask in closed public spaces, commercial spaces, means public transport and work and the obligation to organize the activity of public institutions and authorities, economic operators and professionals, so as to ensure that epidemiological triage is mandatory upon entry into office and mandatory hand sanitization for both staff and visitors was implemented.

4.3.11 Spain

Social, cultural, and legal factors in Spain that likely influence the pandemic vary. People are highly concerned about the cost of living in the center of the country, particularly around Madrid, which were also the epicenter of the pandemic during the first wave (March to June). The area has a high human density and a busy main airport (Barajas). Similarly, Catalonia, Basque country and Community of Valencia are highly human density regions that have a high volume of traffic due to international airports, thus, recorded higher stress in health system and higher mortality rates. Moreover, available housing and size is also another contributing factor, due to the relatively small sized apartments, there is a higher exposure percentage amongst residents. Further, Spain has a large population of elderly nationals. At least nine million of the overall population are of the age 65, whilst 1/3 of the elderly are over 80 years old. Southern European countries share this trend and due to the fact that a high percentage of the very old population lives in rural environments such as villages and very small towns that are far away from health centers, may explain why 2/3 of the deaths during the first wave, were people over 80 years old. Moreover, Spain has a poor healthcare system for the elderly, with insufficient nursing homes and scare resources, inadequately trained personnel and low-quality services which contribute to increased mortality rates (Abellán et al. 2018). The average age of the residents in these nursing facilities are over 80 years old, individuals with a severely strained psychical state. Another common trend that Southern European countries have is the intense family and societal ties¹⁹⁹. Elderly relatives have a daily contact with their sons/daughters on a 68%, a 37% with their grandchildren and 22% with their siblings. Elderly people take care of their grandchildren's needs on about 70% rate daily (Rhodes 1996). Due to high youth unemployment, ever growing housing prices and financial insecurity, Spanish families continue to be the main financial provider, thus, can explain this high daily interaction among family members. According to UNWTO data in 2017²⁰⁰, Spain is the second-best destination on an international scale and third largest country on Erasmus student

¹⁹⁸ Code for Romania. (n.d.). Information from reliable sources. Retrieved May 27, 2021, from https://stirioficiale.ro/hotarari.

Eurostat. (2019, May 14). When are they ready to leave the nest?. Retrieved May 27, 2020 from https://ec.europa.eu/eurostat/en/web/products-eurostat-news/-/EDN-20190514-1?inheritRedirect=true&redirect=%2Feurostat%2Fen.

²⁰⁰ United Nations World Tourism Organization (UNWTO). (2018, June 15). *2017 International tourists results: The highest in seven years*. Retrieved May 27, 2021 from https://www.unwto.org/global/press-release/2018-01-15/2017-international-tourism-results-highest-seven-years.

reception (receives than 47.138 European students, and send more than 40.000 Spanish to study abroad). Furthermore, Spain has a characteristic cultural and societal approach towards leisure activities, thus, during the first months of 2021, Madrid became a nightlife party destination for European youth, due to ease of regional restrictions. All of these contributing factors can explain the 26.753 accumulated outbreaks in Spain, of which 17.174 can be attributed to social and family related context, thus, the societal factors have been the primary source of contagion²⁰¹.

4.3.12 Sweden

Sweden has based the crisis management mechanism on three fundamental principles such as: responsibility, proximity, and equality. To summarize, actors with a set responsibility should also act on crises and uncertain situations, societal disturbances ought to be handled in the location of occurrence and those most closely responsible and affected, as well as organization changes should be proportional to resolve a situation or crisis. From a legal perspective, the Swedish constitution does not regulate emergencies or crises in peaceful times but only during war or when war is imminent, thus, an emergency curfew cannot be imposed, however, Sweden decided on containment measure restrictions such as alcohol sale restriction and restaurant closure (Restaurant Act (Act 2020: 526)²⁰² and Ordinance (2020: 956)²⁰³). Sweden implemented economic measures to support the affected sectors of the society²⁰⁴, 205, 206, 207. Sweden's COVID-19 Act was a legislative framework which allowed the Riksdag to temporarily give necessary decision-making authority to the Government to issue legally binding ordinances and pandemic containment measures. The main objective was to generate accurate measures, enhance adaptation rate in accordance with the inflection rate fluctuation and prevent hindering activities which can be conducted in an infection-safe manner. Similarly, to Germany, Spain and Switzerland, Sweden's central administration received the authority to regulate public gatherings, events, commercial centers, public transport, and private gatherings²⁰⁸. These measures were implemented based on social factors such as the impact of crowd congestion

²⁰¹ La Moncloa - President of the Spanish Government. (n.d.). *videos*. Retrieved May 27, 2021, from https://www.lamoncloa.gob.es/multimedia/videos/Paginas/index.aspx?mts=202003.

²⁰² Swedish Library of Congress. (2021, July 16). *Sweden: Law Giving Municipalities Authority over Bars and Restaurants Not Complying with COVID-19 Measures Enters into Force*. Retrieved May 27, 2021, from https://www.loc.gov/law/foreign-news/article/sweden-law-giving-municipalities-authority-over-bars-and-restaurants-not-complying-with-COVID-19-measures-enters-into-force/.

²⁰³ Government offices of Sweden - Ministry of Justice. (2020, March 13). *Ordinance on a prohibition against holding public gatherings and events*. Retrieved May 27, 2021, from https://www.government.se/articles/2020/03/ordinance-on-a-prohibition-against-holding-public-gatherings-and-events/.

²⁰⁴ Government offices of Sweden - Ministry of Finance. (2021, January 20). *Robust financial support for businesses affected by closure*. Retrieved May 27, 2021, from https://www.government.se/press-releases/2021/01/robust-financial-support-for-businesses-affected-by-closure/.

²⁰⁵ Government offices of Sweden. (n.d.). *For entrepreneurs due to covid-19*. Retrieved May 27, 2021, from https://www.regeringens.se/regeringens-politik/regeringens-arbete-med-coronapandemin/foretag/#tidigarestod.

²⁰⁶ Government offices of Sweden. (2020, April 7). *Strategy due to the new coronavirus*. Retrieved May 27, 2021, from https://www.regeringen.se/regeringens-politik/regeringens-arbete-med-coronapandemin/strategi-med-anledning-av-det-nya-coronaviruset/.

²⁰⁷ Government offices of Sweden. (n.d.). *The Government's work in response to the virus responsible for COVID-19*. Retrieved May 27, 2021, from https://www.government.se/government-policy/the-governments-work-in-response-to-the-virus-responsible-for-COVID-1/.

²⁰⁸ Ibid.

and the negative psychological impact that isolation can have on public health. From a cultural perspective, the PHA²⁰⁹ and the official communication site titled *Krisinfromation.se*, published COVID-19 relative information on easy-to-read texts in a variety of languages and sign language.

4.3.13 Switzerland

Switzerland (DACH region) has a significantly higher percentage of private actors in matters of financing. Specifically, the Swiss health coverage system can be characterized as "almost entirely [accessed] through private actors under a system of regulated competition, with large differences in cost between cantons." (Desson et al. 2020). Due to the immense role that the private sector has in the Swiss health system, public hospital capacity has been reduced over the last twenty years in order to achieve inpatient care cost reduction. Switzerland declared National State of Emergency on March 16, 2020. This was nationwide central administration decision, a relatively newly found phenomenon as the Swiss cantons retain a significant rate of independence. This shift in decision-making power assisted in a faster introduction of containment measures such as event restrictions and closure of schools, borders, shops and bars, construction sites and factories among other high human density commercial sites. A notable difference was recorded whilst observing the canton of Ticino which operated in a different timeline and implemented more severe measures as it has been affected much more than other cantons. Another important economic measure in Switzerland was labor market issues. The Swiss Federal Council, as of March 13, made available CHF10 billion to support small businesses, unemployed citizens implemented debt repayment freeze, while it increased the amount according to the pandemic progression and as of April, larger businesses were also financially supported²¹⁰. In addition, according to the Swiss government (Lison et al. 2021) the measures are designed to rely as much as possible on individual responsibility and be proportional.

4.3.14 United Kingdom

In the UK, the government scheduled the recovery from the COVID-19 measures considered three main factors: **Health, economic and social effect**²¹¹. To begin with, the health analysis on the relevant documentation outlines the way Government will consider direct COVID-19 mortality, indirect harms based on the NHS emergency services being overwhelmed as well as increases in mortality or other ill health due to the measures taken and the long-term health effects of any increase in deprivation. The economic analysis illustrates the short- and long-term economic impact of the pandemic on the business sector, the financial stability and sustainability of public finances along with the respective measures. Finally, the social effect is concerned with the wider effect of social distancing measures on how people live their daily lives. Guiding principles and factors were informed by science, fairness, proportionality, privacy, and transparency along with fourteen supporting programmes of work that Government will deliver as part of the recovery plan were also outlined.

Public Health Agency of Sweden. (n.d.). *Covid-19*. Retrieved May 27, 2021, from https://www.folkhalsomyndigheten.se/the-public-health-agency-of-sweden/communicable-disease-control/covid-19/.

²¹⁰ Ibid.

²¹¹ UK Government - Cabinet Office. (2020, May 11). *Our plan to rebuild: The UK Government's COVID-19 recovery strategy.*Retrieved May 27, 2021, from https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/884760/
Our plan to rebuild The UK Government s COVID-19 recovery strategy.pdf.

Further, the Welsh governmental response to the COVID-19 measures included **social support for those affected**²¹² **and focusing on mental health and well-being**²¹³ as well as people who needed specific support such as ethnic **minorities and migrants**. Regarding economic factors, the government issued **monetary benefits** in people and businesses who were hit by the pandemic²¹⁴. The Welsh government "choose to response in the pandemic in a culturally sensitive way to ensure the effectiveness, whilst being sympathetic to dominant perceptions of behavioural control" (Yan et al. 2020). In the decision-making process the Welsh government considered and expected the majority of the Welsh public to comply with the set measures, proofing key aspects of the Welsh national identity such as collectivism, community, and solidarity (Evans 2019). Hence, the implemented rules and regulations were issued on communal values and stressed individual responsibility in an effort to alert people to protect themselves and others. That resulted to a substantial part of the Welsh public to cooperate and respect the measures as the South Wales Police declared.

4.4 Vulnerable groups and specific adaptations per country

4.4.1 Austria

Austrian government did not have a coherent approach towards vulnerable groups. The decisionmaking actors opted to focus around "at risk groups" and not touch upon "vulnerability". To that end, the Ministry of Health identified those groups via certain variables. Those were mainly health related indicators such as chronic diseases, cancer, obesity, diabetes, and others. Social indicators like poverty, age, parental status, motherhood, and people with disabilities, were also taken into consideration when determining the groups at risk (Hofer et al. 2020). In order to safeguard the people in those groups, the Austrian Government did take certain measures. Employing the Social Insurance Law (Sozialversicherungsgesetz²¹⁵) as legal basis, it provided health related at risk groups, with the ability to work from home, to go on a paid leave, and with protective equipment (all the above were not obligatorily adopted by employers). Pregnant women and parents with children under 14 were also given the right to premature maternity leave and paid leave, respectively²¹⁶ Finally, a special caretaking allowance was given to employees that attend to the needs of people with disabilities or elderly, while the unemployed were eligible for increased social support (Desson et al. 2020). As a final comment, it is important to keep in mind that even though Austria took measures for people at risk due to health or social difficulties, it neglected to consider "other dimensions such as race, ethnicity, sexuality, legal status..." (ibid.).

²¹² Government of Wales. (n.d.). *Find support if you're affected by coronavirus*. Retrieved May 27, 2021, from https://gov.wales/find-support-affected-coronavirus.

²¹³ Government of Wales. (n.d.). *How can I look after my mental health and wellbeing?*. Retrieved May 27, 2021, from https://gov.wales/safe-help/mental-health.

²¹⁴ Welsh Parliament - Senedd Research. (2020, March 19). *Coronavirus timeline: Welsh and UK governments' response.* Retrieved May 27, 2021, from https://research.senedd.wales/research-articles/coronavirus-timeline-welsh-and-uk-governments-response/.

²¹⁵ Austrian Federal Law Official Gazzette. (2020, December 31). *General Social Insurance Act - COVID-19 risk certificate*. Retrieved May 27, 2021, from https://www.ris.bka.gv.at/Dokumente/Bundesnormen/NOR40223704/NOR40223704.html.

²¹⁶ Austrian Government Official Gazette. (2021, March 24). *Bundesgesetz, mit dem das Mutterschutzgesetz 1979 geändert wird*. Retrieved May 27, 2021, from https://www.ris.bka.gv.at/Dokumente/BgblAuth/BGBLA 2021 I 44/BGBLA 2021 I 44.pdfsig.

4.4.2 Belgium

The Belgian response to the impact of COVID-19 on groups at risk, was arguably encompassing and well-rounded. On an institutional level, Belgium established two bodies that dealt with COVID -19's effects on vulnerable groups. The first, the Working Group on the Social Impact of the COVID -19 crisis, was responsible for the overall observation of the effect and impact of the policies and for the identification of groups at risk. ²¹⁷ The second one, the Taskforce for Vulnerable Groups, was a specialized body that determined vulnerable groups, highlighted their needs, and proposed measures to tackle the problems that each faced. ²¹⁸ Belgium widened the vulnerability spectrum to not only include health and employment parameters, but also migration status, sex workers and homelessness, among others. Similarly, the actual policies implemented by the Belgic Government, were not limited to financial aid, but included psychosocial support and shelter for the homeless, leniency towards undocumented migrants and food-aid to those living below the poverty threshold. Needless to say, Belgium also safeguarded pregnant women, single parents, the unemployed, and students, with paid-leave, funds, and digital equipment, respectively.

4.4.3 Cyprus

On the 16th of March 2020, the Ministry of Health issues **a press release indicating which people belong to vulnerable groups**.²¹⁹ Those include people with chronic diseases (respiratory and cardiovascular diseases etc.), diabetes and the pregnant women. According to the document, these individuals are to be restricted from the workplace and can either work from home or take for a "Sick Leave". Grants and financial benefits were also announced for those vulnerable groups, alongside other measures which allow the free movement of people for the purpose of assisting individuals belonging to one of the groups. ²²⁰ Furthermore, supermarkets and food-retailers only service people from those groups and people over 60 for the first two hours of their operation. ²²¹

The Cypriot Government, in cooperation with International Agencies, also took measures to protect asylum seekers, prisoners and migrants. More specifically, certain provisions of the Quarantine Law described that those individuals would be regularly tested for COVID-19 and examined by doctors whenever necessary. Guidelines and plans have also been announced by the Prisons Department of Cyprus in order to ensure the physical wellbeing of the prisoners and the prison's faculty. The plans include regular COVID-19 testing, regular disinfections, and provision of hygiene products (masks, gloves etc.). Attention has also been given to elderly homes and day cares. Frequent COVID-19 testing, limitations in visitations and special plans whenever a case is identified, are some of the measures. Finally, as part of its response to COVID-19, UNHCR as well as the International Organization for

²¹⁷ FPS Social Security. (n.d.). Monitoring the social impact of the COVID-19 crisis in Belgium. Retrieved 27, 2021, from https://socialsecurity.belgium.be/nl/sociaal-beleid-mee-vorm-geven/sociale-impact-covid-19.

²¹⁸ PPS Social Integration. (n.d.). *Task Force Vulnerable Groups*. Retrieved from https://www.mi-is.be/nl/tools-ocmw/task-force-kwetsbare-groepen.

²¹⁹ Cypriot Ministry of health. (2020, March 16). *The people that belong to the vulnerable population groups should be restricted from their workplace*. Press Release. Retrieved May 27, 2021, from https://www.pio.gov.cy/coronavirus/press/16032020 7.pdf.

²²¹ In-Cyprus. (2020, March 15). Coronavirus: Measures to support jobs, workers and vulnerable groups. Retrieved May 27, 2021, from https://in-cyprus.philenews.com/coronavirus-measures-to-support-jobs-workers-and-vulnerable-groups/.

²²² Cypriot Government Official Gazzette. (2020, July 14). *Law on Infections*. Retrieved May 28, 2021, from https://www.pio.gov.cy/coronavirus/diat/53.pdf.

Migration (IOM) has been providing support to migrants awaiting voluntary return assistance, including food, clothes, hygiene items, and accommodation arrangements, as well as provision of much needed hygiene items to unaccompanied children moving from camps to independent living. IOM has also worked together with local authorities, NGOs and UN agencies COVID-19 information provision and the translation of social distancing measures adopted by the government in more than two dozen languages. Regular COVID-19 testing, disinfections and provision of hygiene products were also provided to day cares and elderly homes as well as prison faculties. Articles of the Quarantine Law also addressed the issues faced by parents/employees caused due to the lockdown restrictions. To be more precise, parents with children under the age of 15 or with children with disabilities are entitled to "special leave" as well as to a "special allowance" that is adjusted according to their salary. Single parents are entitled to the same benefits with a slight increase to the allowance. The previous provisions, however, only apply if the parents are unable to work from home or if they are unable to secure outside childcare assistance. ²²³ Finally, the Cypriot Government distributed allowances and funds to individuals and businesses whose operations were affected by the lockdown restrictions (ibid.) while setting up a scheme that provided employers with incentives to hire unemployed individuals under state subsidy. 224

4.4.4 Germany

In **Germany,** measure implementation by the Federal Government regarding vulnerable groups varied, mostly due to infection fluctuation. The **elderly** and **disabled** were identified early on as the primary vulnerable groups from a <u>health</u> perspective. (Wieler, Rexroth, & Gottschalk 2021)²²⁵ Later in the course of the pandemic, additional groups were identified as vulnerable from an <u>intersecting health and social</u> perspective and hence given priority access to vaccines: for instance, health care workers; residents in collective accommodations, such as asylum-seekers and the homeless; and low-wage and temporary-contract workers. Vulnerable groups from an <u>economic</u> perspective were employers, employees in a wide range of sectors such as but not limited to cultural centers and nurses that observed economic support and a minimum wage rise. From a <u>social</u> perspective, Germany identified as vulnerable groups individuals that experienced <u>domestic violence</u> and <u>negative psychological effects</u>, and took measures to strengthen existing services or provide new services tailored to these groups.

Measure-wise, on 28 March, the Federal Government passes the (first) Act on the Protection of the Population in the Event of an Epidemic Situation of National Importance (Gesetz zum Schutz der Bevölkerung bei einer epidemischen Lage von nationaler Tragweite), which gives the Federal Ministry of Health extraordinary powers to control the epidemic.²²⁷ According to the Act, the Federal Ministry

²²³ Cypriot Government Official Gazzette. (2020, May 5). *Law on Infections - Part 1*. Retrieved May 28, 2021 from https://www.pio.gov.cy/coronavirus/diat/31.pdf.

²²⁴ Cypriot Department of Labour. (n.d.). Programmes for employment incentives. Retrieved May 28, 2021, from http://www.mlsi.gov.cy/mlsi/dl/dl.nsf/dmlschemes en/dmlschemes en?OpenDocument.

²²⁵ Robert Koch Institut. 2020 (6 March). SARS-CoV-2 Steckbrief zur Coronavirus-Krankheit-2019 (COVID-19). Stand: 6.3.2020. Retrieved May 28, 2021, from https://www.vpkbb.org/wp-content/uploads/2020/03/2020-03-10-Anlage 2 - Steckbrief zum Coronavirus.pdf.

Robert Koch Institut. 2021 (8 January). Beschluss der STIKO zur 1. Aktualisierung der COVID-19-Impfempfehlung. Retrieved May 28, 2021, from https://www.rki.de/DE/Content/Infekt/EpidBull/Archiv/2021/Ausgaben/02 21.pdf? blob=publicationFile.

²²⁷ German Federal Gazzette. (2020, March 27). Gesetz zum Schutz der Bevolkerung bei einer epidemischen *Lege von nationaler Tragweite*. Retrieved May 28, 2021, from https://wipolex.wipo.int/en/text/566299.

of Health (BMG) took measures to ensure that patients can be supplied with necessary medicines and medical devices during the pandemic (SARS-CoV-2-Arzneimittelversorgungsverordnung [SARS-CoV-2 drug supply regulation]). These measures provided for temporary remuneration for pharmacies for messenger services and facilitated exchange options for dispensing medicines. The aim was to ensure the supply of medicines to chronically ill patients and patients in quarantine and home isolation. In addition, the BMG was able to control the sale of medical supplies.

The German government also adopted **policies to protect children in need and ensure the continuance of their education**. To specify, in August 2020, the Federal Ministry for Family Affairs, Senior Citizens, Women and Youth, supports children and youth hospices in the Corona pandemic. The German Government is providing Deutsche Bahn with 40 million euros for better information systems and more accessibility.²²⁸ The Federal Ministry of Education has extended the bridging aid for students who are in particular need as a result of the Corona pandemic.²²⁹ The Federal Ministry for Family Affairs also sets up a 100-million-euro emergency programme for non-profit institutions for child and youth education. ²³⁰

Finally, provisions were taken **to strengthen the Healthcare workers**. In September 2020, additional employment opportunities in the health sector were created and 100 million euro are provided to give bonus payments to nursing staff who were particularly burdened by the care of COVID-19 patients while in October 2020, The Hospital Future Act is approved by the Federal Council which includes digitalization and strengthening of the regional care structures (Lovell 2020).

4.4.5 Greece

In Greece, the majority of the governmental responses were directed to the **protection of vulnerable populations**, such as persons with disabilities, single parent families, families with four or more children and families in high risk of dissolution, asylum seekers, unaccompanied minors, the elderly etc.). To that end, the Government has issued specific guidelines and undertook specific financial measures and allowances during all the pandemic waves to assist these groups. To begin, a special telephone land line (10306) has been established to provide 24-hour **psychological support** and care to all people in need (people with mental illnesses, children and families, health personnel, etc.)²³¹. This support service is under the scientific directions supervision of the First Psychiatric Clinic of the Medical School of the National & Kapodistrian University of Athens (EKPA). At a scientific and operational level, the Federation of Psychosocial Rehabilitation & Mental Health Institutions "ARGO", the National Center for Social Solidarity (EKKA), and other non-profit associations are collaborating. Parallel to that the Greek Ministry of Health has organised a specialised **Psychological Support Program** for those who had COVID-19, for their families and the health professionals, in order to

²²⁸ German Federal Ministry of Finance. (n.d.). *A stimulus package for everyone in Germany*. Retrieved May 28, 2021, from https://www.bundesfinanzministerium.de/Web/EN/Issues/Priority-Issues/stimulus-package-for-everyone.html.

²²⁹ Studentenwerk Leipzig. (n.d.). *Corona Pandemic: Bridging Assistance for Students in Emergency Situations*. Retrieved May 28, 2021, from https://www.studentenwerk-leipzig.de/en/bafog-finances/corona-pandemic-bridging-assistance-students-emergency-situations.

²³⁰ Eu2020. (2020, November 24). *Online conference: Supporting European families during the COVID-19 pandemic*. Retrieved May 28, 2021, from https://www.eu2020.de/eu2020-en/news/article/online-conference-supporting-european-families-covid-19-pandemic/2422782.

²³¹ Hellenic National Public Health Organization (EODY). (n.d.). *Psychosocial Support Hotline 10306 for the coronavirus*. Retrieved May 28, 2021, from https://eody.gov.gr/tilefoniki-grammi-psychokoinonikis-ypostirixis-10306-gia-ton-koronoio/?print=print.

further confront any psychological impact due to the pandemic²³². Similar guides have been issued for elder population to ensure their proper care, alleviating their fears of loneliness, sadness, and helplessness due to COVID-19²³³ and for children and isolated populations²³⁴. In elderly care units, centers for the chronically ill, structures and hostels for vulnerable groups, transitional hostels for the homeless, social structures for the immediate treatment of poverty (dormitories, day care centers, social groceries, social pharmacies, dormitories, dormitories) suspension of visitation and certain operations according to the general lockdowns and other restrictive measures were also implemented to protect those individuals, thus prevent a further outbreak of the pandemic among them. Elder population were also prioritized for vaccination²³⁵, along with patients with **high-risk diseases**²³⁶. Social distancing, restrictions in movements and lockdowns have affected also specific populations such as students of all levels, whose in-person educational activities have been suspended apart from special education students, for whom the schools have remained open during the second pandemic wave so as not to disturb their well-being. However, during the time of suspension, distance-learning educational activities along with specific financial aid to parents have been provisioned.²³⁷ Such restrictions have been also imposed to Reception and Identification Centers, open accommodation structures, as well as any kind of structure and space for reception and hospitality of third country nationals. All the relevant services (Asylum applications, registrations, etc.) were provided upon scheduled appointment and electronic means of communication were also advanced, capitalizing on the digitization of such services²³⁸. In addition to that an extension of the International Protection Applicant Cards validity period was also foreseen²³⁹. In addition to that, in order to protect the homeless and other vulnerable groups and to ensure public health from the spread of coronavirus COVID-19, the creation and operation of temporary accommodation structures and dormitories by the first-degree local authorities in cooperation with the approved agencies for the protection of addicts

²³² Greek Ministry of Health. (2021, February 1). Psychological Support Program. Retrieved May 28, 2021, from https://www.moh.gov.gr/articles/health/domes-kai-draseis-gia-thn-ygeia/c312-psyxikh-ygeia/8388programma-psyxologikhs-yposthrikshs.

²³³ Greek Ministry of Health. (2020, March 27). The COVID-19 Epidemic as a Serious Stressful Condition for the Instructions for the Elderly. Retrieved https://www.moh.gov.gr/articles/health/dieythynsh-dhmosias-ygieinhs/metadotika-kai-mh-metadotikanoshmata/c388-egkyklioi/6970-h-epidhmia-toy-covid-19-ws-sobarh-psyxopiestikh-synthhkh-gia-thn-trithhlikia-odhgies-gia-hlikiwmenoys.

²³⁴ Greek Ministry of Health. (n.d.). Mental Health - Taking Care of Yourself and Managing Stress During a Pandemic. Retrieved May 28, 2021, from https://www.moh.gov.gr/articles/health/domes-kai-draseis-gia-thnygeia/c312-psyxikh-ygeia/8013-psyxikh-ygeia-frontida-toy-eaytoy-sas-kai-diaxeirish-toy-agxoys-sthn-periodoths-pandhmias.

²³⁵ Greek Ministry of Health - National Vaccination Campaign. (2021, January 11). National Vaccination Operational Plan against COVID-19 - Operation "Freedom". Retrieved May 27, 2021, from https://emvolio.gov.gr/diadikasia-emvoliasmou.

²³⁶ Greek Ministry of Health - National Vaccination Campaign. (2021, April 19). *Prioritization of patients with* underlying diseases and high risk. Retrieved May 28, 2021, from https://emvolio.gov.gr/proteraiopoiisi-tonasthenon-me-ypokeimena-nosimata-ypsiloy-kai-ayximenoy-kindynoy.

²³⁷ Hellenic Republic. (n.d.). Digital educational platform for students and teachers (e-me). Retrieved May 27, https://www.gov.gr/ipiresies/ekpaideuse/katartise-kai-ekpaideutiko-periekhomeno/psephiakeekpaideutike-platphorma-gia-mathetes-kai-ekpaideutikous-e-me.

²³⁸ Hellenic Republic - Ministry of Migration and Asylum. (2020, October 19). The electronic platform of the Asylum Service is strengthened - The service of the public exclusively by electronic appointment. Retrieved May 28, 2021, from https://migration.gov.gr/apokleistika-me-ilektroniko-rantevoy-i-exypiretisi-toy-koinoy/.

²³⁹ Hellenic Republic - Ministry of Migration and Asylum. (2021, January 8). Extension of applications for international protection. Retrieved May 28, 2021, from https://migration.gov.gr/paratasi-deltion-aitoyntondiethni-prostasia/.

and vulnerable people. The possibility to use tourist accommodation, which are in legal continuation, for the temporary residence of the homeless and other vulnerable groups of the population is provided. Turning to the suspension of business and workplaces, Greek government advised operation with the necessary personnel both for public and private sector, provisions with a mandatory protection of employees belonging to high-risk groups by granting special leave of absence and providing teleworking, where possible²⁴⁰. Special purpose compensation, taxation reliefs and further financial aids have been provided both to the businesses and the employees to assist and support them. Lack of compliance with the National Decrees were monitored by the health inspectors and the police force and perpetrators causing increased risk to public health were given hefty fines and those who repeatedly violated the Decrees their businesses were suspended.

4.4.6 Ireland

In Ireland, a social impact assessment was published in the COVID-19 Resilience and Recovery report in February 2021, which highlighted the disproportionate impact of COVID-19 on vulnerable groups. There have been several guidance documents issued by the NPHET, in collaboration with the DoH, in consideration of vulnerable groups, specific documents were issued for the Irish Traveler and Roma communities, the homeless and those seeking asylum in Direct Provision centers ²⁴¹. Research in Ireland has shown that non-nationals are being disproportionately affected by the governmental measures in the fight of the pandemic. More precisely, migrants who work in certain industries such as meat processing factories had been heavily infected in their workplace as it is quite difficult to adhere physical distancing. ²⁴² The nature of physical structures and production processes within the factories, as well as the low salaries and issues relating to migrant workers travelling, and living together, sometimes in overcrowded places, also enhances their exposure to the possibility of getting infected. Indicative of that was the case of the workers in the meat industry.²⁴³ The government, after the second wave, identified several clusters of COVID-19 in multiple meat processing factories where language barriers were repeatedly highlighted since English was not the first language for most of the workers and the communication material was difficult to understand. To resolve the situation and approach migrant workers who did not understand English sufficiently, a subcommittee was formed and provided translations of the necessary information and advice on COVID-19 in multiple languages²⁴⁴. In Ireland, women were highly affected in several ways from the COVID-19 pandemic (Madgavkar et al. 2020). More precisely, domestic violence against women rose significantly while most carers, older persons in long-term care, healthcare, and social care workers, are also women.²⁴⁵ Connected to that is the fact that women at the frontlines were some of the most vulnerable to the

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²⁴⁰ United Nations High Commissioner for Refugees (UNHCR) in Greece. (n.d.). *About Coronavirus*. Retrieved May 28, 2021, from https://help.unhcr.org/greece/coronavirus/.

²⁴¹ Health Protection Surveillance Centre. (n.d.). *Guidance for Vulnerable Groups*.

Retrieved March 2, 2021, from https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/vulnerablegroupsguidance/.

Houses of the Oireachtas. (2020, May 21). Dáil Éireann debate - Thursday, 21 May 2020 Vol. 993 No. 4. Retrieved May 28, 2021, from https://www.oireachtas.ie/en/debates/debate/dail/2020-05-21/7/.

²⁴³ Power J. (2020, September 17). Covid-19: *'Significant' outbreak in Waterford meat plant, union says*. Irish Times. Retrieved May 27, 2021, from https://www.irishtimes.com/news/ireland/irish-news/covid-19-significant-outbreak-in-waterford-meat-plant-union-says-1.4357622.

²⁴⁴ Houses of the Oireachtas. (2020, July 27). *Investigation into a Series of Outbreaks of COVID-19 in Meat Processing Plants in Ireland, 2020.* Retrieved May 28, 2021, from https://assets.gov.ie/95603/8c23ae9c-9a30-4c01-9ebf-f624f2c99702.pdf.

²⁴⁵ *Supra* Note 211.

effects of the pandemic and required tailored support (Pollack 2021). In March 2020, the Irish Child and Family Agency prioritized the provision of frontline child protection services, services supporting children in care and domestic as well as sexual and gender-based violence services which continued during the pandemic waves. In addition, after efforts and proposals from various stakeholders and NGOs the National Awareness Campaign was launched by the government, in partnership with frontline services and civil society organizations, in order to raise awareness regarding the available support services that women have access to (e.g., Domestic Violence Services), especially in times of increased stay at the family residence, where violent domestic behavior can occur more often.²⁴⁶ The Irish government also identified the social implications of the pandemic in Irish Traveler and Roma communities, which led the Department of Health to declare them a priority group regarding COVID-19 testing.²⁴⁷ The Minister for Housing issued measures, to safeguard the Irish Traveler Community, that may be required to be implemented by the Directors of Local Authorities in Ireland which included additional mobile accommodation/space in cases of overcrowding and additional units (either mobiles on site or houses elsewhere that will allow for self-isolation/ quarantine). Furthermore, in late March 2020, the Emergency Measures in the Public Interest (COVID-19) Act 2020 came into effect, which forbid evictions of all Travelers residing in any location during the pandemic. Finally, regarding education for Traveler and Roma children, the Ministry of Education provided additional support and funding, via schools, for children who are "disadvantaged" due to lack of digital devices, internet etc. (Joyce 2020). Regarding the educational system in general, the Irish Government identified that vulnerable groups, such as children with learning needs could be impacted by issues relating to school meals, access to the necessary equipment for the participation in online school etc. Its response included the issuing of guidelines for assisting schools in running their "School Meals Program" while simultaneously providing food services to disadvantaged children. Finally, for the purpose of facilitating "learn from home" all major telecom providers agreed on being flexible on their "billing and data limits". 248

4.4.7 Israel

Israel's response towards vulnerability was influenced by its cultural and social heterogeneity. It was mainly focused in protecting its large percentage of elderly people living in health-care facilities²⁴⁹. Moreover, Israel wanted to ensure that its Arab and Ultraorthodox Jewish societies complied with the regulations issued by the Government. To that end, it communicated the measures through community leaders, who have influence in the communities and are more easily heard and trusted that the Government. Even though the measures were communicated in Hebrew during the first pandemic wave, it was deemed necessary to also become accessible in Arabic in order to approach the

²⁴⁶ Irish Ministry of Justice. (2020, November 16). *Tánaiste launches major national awareness campaign on Domestic and Sexual Violence*. Retrieved May 28, 2021, from http://www.justice.ie/en/JELR/Pages/PR16000347.

²⁴⁷ HSE Social Inclusion - The National Social Inclusion Office. (2020, December). *National COVID-19 Roma Service User Experience Survey*. Retrieved May 27, 2021, from https://www.hse.ie/eng/about/who/primarycare/socialinclusion/travellers-and-roma/romaserviceuserexperiencesurveyfinal031220.pdf.

²⁴⁸ Irish Government News Service. (2020, April 15). *Minister Bruton Announces Increased Supports from Telecoms Providers during Covid 19*. Retrieved May 28, 2021, from https://merrionstreet.ie/en/news-room/news/minister bruton announces increased supports from telecoms providers during covid 19.html.
²⁴⁹ Israeli Ministry of Health. (n.d.). *Family Center for Information and Questions on Nursing Home Care (Extension 2) - Elderly Protector Program*. Retrieved May 28, 2021, from https://govextra.gov.il/ministry-of-health/care-covid19/elderly-care-covid19/.

Arabic community. It is worth mentioning that for each of the aforementioned groups, with the addition of children and Ethiopian and Russian speaking Israelis, a special department was created inside the Ministry of Health²⁵⁰ with the purpose of addressing their needs.

4.4.8 Italy

In Italy, after the first phase of the pandemic it was identified that the virus had a severe impact on vulnerable groups, such as older people and on socially disadvantaged groups. Since the first phase, the Italian government adopted relief measures and communication models especially created for vulnerable groups. However, during and after the lockdown and as the pandemic continued, the Italian government identified other vulnerable groups, who were being affected. To that end, the Government issued a series of Decrees and measures to relief the effects of the pandemic to the public and secure their health and life conditions. For vulnerable groups, specific actions were required and implemented by the Italian government. On the Ministry of Health official webpage dedicated to COVID-19, there were different sections devoted to the elderly, frail people, women, and children. ²⁵¹

For the two later categories the Italian Government and its agencies had to adopt to the situation and take measures to safeguard them. In order to protect women victims of domestic violence, and since the specialized centers for women victims had shut down due to COVID-19 measures, the Italian government launched a campaign to inform women about a free number operating 24/7 providing support for domestic violence victims (Colagrossi et al. 2020). Attention was also given to Children and Teenagers as the Agency for Childhood and Adolescence (AGIA) created a set of rules to limit the spread of the contagion with a language suitable for children, both in Italian and in English. Furthermore, on the website of the Ministry of Education a specific section was dedicated to COVID-19 with all the references and useful tools for students and teachers for teaching, proper information and all the necessary links.

The Italian Government recognized that **migrant groups and minorities** could be in a higher risk of getting infected from COVID-19 or suffering from the lockdown measures since they stay in overcrowded places with limited hygiene and difficulties in implementing social-distancing (Fabiani et al. 2021). Thus, it applied various measures to guarantee the reception of migrants and ensure the protection of their health. Such measures were, among others, the extension of the reception projects of the municipalities, the possibility of hosting migrants in centers, and the extension of the validity of residence permits. Further, in the detention centers the screening and health security measures for repatriation as well as agricultural workers settlement were strengthened.²⁵² Also, one of the Decrees issued by the Government extended the residence permits since foreign people could work in various sectors and implemented measures for asylum seekers so that they are able to stay in designated facilities.

Healthcare workers and caregivers were also taken into consideration as parts of the response towards vulnerable groups. Health and social-health care workers faced an unrepresented situation

²⁵⁰ Israeli Ministry of Health. (n.d.). *The Novel Coronavirus*. Retrieved May 28, 2021, from https://www.gov.il/en/departments/ministry of health.

²⁵¹ Italian Ministry of Health. (n.d.). *Novel Coronavirus - Daily report*. Retrieved May 28, 2021, from https://www.salute.gov.it/portale/nuovocoronavirus/homeNuovoCoronavirus.jsp?lingua=english.

²⁵² Italian Chamber of Deputies Studies Service. (2021, May 20). *Emergenza COVID-19: le misure in materia di immigrazione*. Retrieved May 27, 2021, from https://www.camera.it/temiap/documentazione/temi/pdf/1215466.pdf? 1588825553154.

with the outbreak of COVID-19. Issues relating to equipment, inadequate training, workload as well as psychological aspects highly affected them (Castellia et al. 2021). This led the Italian government to create a platform and prepare publications to provide information and distance learning to health and social health professionals. Additional support to health care workers was also given by providing basic necessities and equipment, organizing places for recovery and rest in the workplace as well as extra financial benefits (Pollock et al. 2020).

Finally, the Government adopted policies regarding people with **disabilities**. This specific group of people is addressed through the Minister for the promotion and coordination of government action in the field of disability. The adopted measures focused on guaranteeing the protection of the rights of persons with disabilities and their caregivers. ²⁵³ More precisely, the Italian government provided multiple funds and monetary assistance to people and children with disabilities as well as provide guidelines and advice to caregivers and children with disabilities regarding tele-schooling procedures.

4.4.9 Portugal

Portugal addressed the consequences that the pandemic created on multiple vulnerable groups. For the financially disadvantaged, the Portuguese Government launched the National Strategy to Combat Poverty, within the framework of the European Pillar for Human Rights. Moreover, the Iberian country concentrated a lot of its efforts to not only safeguard the elderly, living in care facilities, but also the health-care personnel working in those establishments. ²⁵⁴ This was done via close monitoring, daily testing and by creating a rear support structure to accommodate the infected elderly that were not in need of hospitalization. ²⁵⁵ Students and families of children who are considered at risk were also supported with special measures. Finally, despite the lockdown restrictions of operation in many businesses and public services, the Government decided to keep the National Support Centers for the Integration of Migrants open, as it deemed their operation and functions as "essential". ²⁵⁶ For the purpose of facilitating migrants and other vulnerable populations, the Government also issued certain provisions under which private social solidarity institutions and NGOs could be supported by the State.

4.4.10 Romania

Romania issued multiple measures covering various aspects of every-day life in the fight of the pandemic. On the same note, measures were adopted towards vulnerable groups. To specify, for students, the Romanian Ministry of Education introduced the method of "tele-schooling" while trying to eliminate social inequalities, (e.g., for families who do not have access to internet). It continued to train teachers to use the "tele-education" platforms and facilitated the enrollment of children in the schooling system. ²⁵⁷ Also, the government launched the first psychological counseling for students,

²⁵³ Italian Ministry of Economy and Finance. (n.d.) *COVID-19 EMERGENCY - All measures to support health and the economy*. Retrieved May 28, 2021, from https://www.mef.gov.it/en/covid-19/misure-coronavirus.html.

²⁵⁴ Portuguese Republic - Electronic Gazzete. (2020, April 2). *Despacho n.º 4097-B/2020*. Retrieved May 28, 2021, from https://dre.pt/web/guest/home/-/dre/131051270/details/maximized%22%20/.

²⁵⁵ Portuguese Republic - Electronic Gazzete. (2020, November 6). *Despacho n.º 10942-A/2020*. Retrieved May 28, 2021, from https://dre.pt/web/guest/home/-/dre/147814594/details/maximized%22%20/.

²⁵⁶ Portuguese Republic - Electronic Gazzete. (2020, March 3). *Despacho n.º 3614-F/2020*. Retrieved May 28, 2021, from https://dre.pt/web/guest/home/-/dre/130600791/details/maximized.

²⁵⁷ Romanian Ministry of Employment and Social Protection. (2020, March 10). *Recomandările Ministerului Muncii și Protecției Sociale în scopul prevenirii răspândirii infectării cu coronavirus, 10 martie 2020*. Retrieved

teachers, and parents. Measures were taken to provide for the people with disabilities, as the National Authority for the Rights of Persons with Disabilities, Children and Adoptions (NARPDCA) created a series of guidelines for the provision of social services such as guidelines in hygiene protocols, distancing regulations, isolation, and quarantine protocols etc. ²⁵⁸ Further, NARPDCA generated a series of specific measures for child social assistance, especially for children with disabilities, by assisting the families in bureaucratic papers and by changing the procedure to not require physical appearance in offices etc. as well as assist and create regulations for child adoptions during the pandemic²⁵⁹. Finally, NARPDCA issued regulations for social services in order to eliminate the spread of the virus by including recommendations and health protocols that should be adopted by all residential social services²⁶⁰.

4.4.11 Spain

Spain identified **elderly people** and **disabled people** as two highly vulnerable groups and due to the immense impact of COVID-19 on elderly care homes, sanitary and isolation measures were emphasized, family visits were restricted, and contact between patients and specialized personnel was limited (Abellán et al. 2018).²⁶¹ Due to the shortage of protective equipment, long-term employees, the advanced age of the elderly, lack of knowledge of combating COVID-19 and the large size of elderly care centers coincidentally led to high mortality rates. As a result, among other measures which emphasized on the protection of these groups, elderly population were the first group to receive the vaccines.

From an economic **perspective**, Spain introduced economic aid measures to households and vulnerable groups, businesses, organizations, and autonomous communities. Regional and local governments had established their own responses to assist households and vulnerable groups, as they were responsible. These points of authority aided **disabled people**, **immigrants and elderly** via social housing, community assistance, minimum income guarantee programs and food distribution. Moreover, **Spain** introduced measures to protect mortgage debtors by implementing the law of (1/2013 of May 14) which rendered all evictions impossible until May 2024. The main beneficiaries where: large families, **Single-parent families** with dependent children or with a minor, families with a disabled member, families in which the debtor is **unemployed**, Families with dependent or **seriously ill people**, Families in which there is a **victim of gender violence** and debtors over 60 years old. In addition, **Spain** made sure that domestic consumers would have gas, water and electricity supply that could not be suspended as well as a 25% discount on the electrical bill of vulnerable groups such as **self-employed workers that were forced to cease their employment activities**. According to the Spanish points of authority, a "vulnerable consumer" is "...those natural persons who, individually or

May 28, 2021, from http://www.mmuncii.ro/j33/index.php/ro/comunicare/comunicate-de-presa/5827-recomand%C4%83rile-ministerului-muncii-%C8%99i-protec%C8%9Biei-sociale-%C3%AEn-scopul-prevenirii-r%C4%83sp%C3%A2ndirii-infect%C4%83rii-cu-coronavirus.

²⁵⁸ Romanian Ministry of Employment and Social Protection. (2020, April 16). *Protocol recomandări pentru serviciile sociale aplicabile în perioada stării de alertă generată de epidemia de COVID-19*. Retrieved May 27, 2021, from http://andpdca.gov.ro/w/wp-content/uploads/2020/05/PROTOCOL-Recomandari-STARE-ALERTA.pdf.

²⁵⁹ Ibid.

²⁶⁰ Ibid

²⁶¹ Spanish Ministry of Health and Social Policy. (2010). *Encuesta Mayores 2010*. Retrieved May 28, 2021, from https://www.imserso.es/InterPresent1/groups/imserso/documents/binario/presentacionencuestamayores 20 https://www.imserso/es/InterPresent1/groups/imserso/documents/binario/presentacionencuestamayores 20 https://www.imserso/documents/binario/presentacionencuestamayores 20 https://www.imserso/documents/binario/presentacionencuestamayores 20 https://www.imserso/documents/binario/presentacionencuestamayores 20 https://www.imserso/documents/binario/presentacionencuestamayores 20 <a href="https://www.imserso/documents/binario/presentacio

collectively, due to their characteristics, needs or personal, economic, educational or social circumstances, find themselves, even territorially, sectorial or temporarily, in a special situation of subordination, defenselessness or lack of protection which prevents them from exercising their rights as consumers under equal conditions" (Royal Decree-Law of January 19, pp. 518-519). Concluding, according to the Royal Decree-Law 20/2020 establishing the Minimum Vital Income, Spain identified as the most economic vulnerable citizens those that fall under the following categories: informal workers, part-time, with temporary contracts, with wages below the minimum wage, often linked to sectors such as construction, hospitality, retail, domestic work, immigrant workers, single-parent households. Therefore, adopted measures to ensure minimum income.²⁶²

4.4.12 Sweden

In **Sweden**, the government identifies the **elderly citizens** living in care home as the most vulnerable group. As of March 10, 2020, the Public Health Agency issued that visitations are restricted, whereas they were banned as of April 2020 until September 2020. In November 2020, the government issues a regulation (2020:979) according to which the Public Health Agency could, if necessary, decide on localized restraining orders for elderly care homes. This regulation applies until May 31, 2021 on a local, regional, and nationwide scope.

Migrants and marginalized populations were also disproportionally hit by COVID-19. Sweden's approach towards those groups can be characterized as indirect. The Swedish state is committed in supporting international organizations, like UN, WHO as well as NGOs, both financially and politically, to assist vulnerable groups in need.²⁶³ Furthermore, community and civil participation is a core value of Sweden's social development. To that end, the Government strongly supported incentives taken by community-based organizations to actively assist vulnerable groups by giving them flyers regarding COVID-19 and by translating the guidelines given from the Public Health Authority.

Finally, in May 2020 the Swedish Government proposed a multi-million financial support package towards organizations that assist other vulnerable groups such as women that have suffered from domestic violence, vulnerable children, homeless people, and undocumented immigrants.²⁶⁴

4.4.13 Switzerland

In **Switzerland**, the government has identified the following categories of individuals as high risk vulnerable groups: **Older people** (50 years old and more with or without pre-existing (underlying) conditions which can increase the risk even further), **Pregnant women** and **Adults with the following underlying medical conditions**: High blood pressure, Cardiovascular disease, Diabetes, Chronic pulmonary and respiratory diseases, Cancer, Conditions and therapies that weaken the immune

²⁶² Spanish Government Official Gazette. (2020, June 1). *Real Decreto-ley 20/2020, de 29 de mayo, por el que se establece el ingreso mínimo vital*. Retrieved May 28, 2021, from https://www.boe.es/boe/dias/2020/06/01/pdfs/BOE-A-2020-5493.pdf.

²⁶³ Government Offices of Sweden - Ministry of Health and Social Affairs. (2020, December 15). *Summary of SOU 2020:80 Elderly care during the pandemic*. Retrieved May 28, 2021, from https://www.government.se/legal-documents/2020/12/summary-of-sou-202080-elderly-care-during-the-pandemic/.

²⁶⁴ The Local. (2020, May 13). *Sweden's new coronavirus cash help to protect vulnerable groups*. Retrieved May 27, 2021, from https://www.thelocal.se/20200513/swedens-new-coronavirus-cash-help-for-vulnerable-groups/.

system, Obesity class II (BMI \geq 35 kg/m2), Liver cirrhosis and Chronic kidney disease. ²⁶⁵ The Swiss government implemented several policies to protect the vulnerable population such as the right to work from home, a right to leave of absence, salary substitute if a safe work environment could not be guaranteed as well as the obligation of employers to protect employees and particularly pregnant women at their workplace (Article 10/ SR 818.101.26). ²⁶⁶ In addition, the government implemented a short working scheme to protect employment and businesses. ²⁶⁷

The Swiss government established particular policies to protect people at especially high risk. For example, people at especially high risk have a right to work from home (home office) or equal protection at their actual workplace. If this is not possible, they have a right to a leave of absence. Here, the government established a Corona salary substitute applicable in situations where a safe workplace environment cannot be guaranteed. ²⁶⁸ Based on a newly established order in relation to the COVID-19 pandemic (Article 10/ SR 818.101.26) the employer is required to protect employees, particularly pregnant women, at their workplace.

4.4.14 United Kingdom

In the UK, and according to the Health Protection (Coronavirus, Restrictions) (England) Regulations 2020, vulnerable groups are identified as people aged 70 or older, people under 70 with an underlying health condition and pregnant women. ²⁶⁹ However, a research on COVID-19 and vulnerable groups on the UK parliament website generated more results in relation to vulnerability.

The government identified that not all people are familiar with the digital devices and do not have the necessary equipment or monetary funds to own one. Thus, the UK government provided laptops to disadvantaged school children as well as training courses to improve workplace skills and agreed measures with leading telecom companies to support vulnerable customers to pay bills and remove caps on data allowances.²⁷⁰ **Young people's mental health** was also addressed by the UK government

²⁶⁵ Federal Office of Public Health FOPH. (2021, April 11). *Coronavirus: People at especially high risk.* Retrieved May 27, 2021, from <a href="https://www.bag.admin.ch/bag/en/home/krankheiten/ausbrueche-epidemien-pandemien/aktuelle-ausbrueche-epidemien/novel-cov/krankheit-symptome-behandlung-ursprung/besondersgefaehrdete-menschen.html#-955308326.

²⁶⁶ Federal Office of Public Health FOPH. (n.d.). *FAQ - Maternity Leave*. Retrieved May 28, 2021, from https://www.seco.admin.ch/seco/de/home/Arbeit/Arbeitsbedingungen/faq_arbeitsbedingungen/faq_mutterschutz.html#-239663014.

²⁶⁷ Competence Center for Official Publications of Switzerland. (1982, June 25). *Federal Law on Compulsory Unemployment Insurance and Insolvency Compensation (Unemployment Insurance Act, AVIG)*. Retrieved May 28, 2021, from https://www.fedlex.admin.ch/eli/cc/1982/2184 2184 2184/de.

²⁶⁸ Government of Switzerland - EasyGov Covid19 Help Center. (2021, February). What rules apply to people who are particularly at risk?. Retrieved May 28, 2021, from https://helpcenter.easygov.swiss/hc/de/articles/360006989237-Welche-Regeln-gelten-bei-besonders-gef%C3%A4hrdeten-Personen-.

²⁶⁹ United Kingdom - Secretary of State. (2020, March 26). *The Health Protection (Coronavirus, Restrictions)* (England) Regulations 2020. Retrieved May 28, 2021, from https://www.legislation.gov.uk/uksi/2020/350/2020-06-13?view=plain.

²⁷⁰ Government of the United Kingdom, Department for Digital, Culture, Media & Sport and The Rt Hon Oliver Dowden CBE MP. (2020, March 29). *Government agrees measures with telecoms companies to support vulnerable consumers through COVID-19*. Retrieved May 28, 2021, from https://www.gov.uk/government/news/government-agrees-measures-with-telecoms-companies-to-support-vulnerable-consumers-through-covid-19.

by funding certain charities to psychologically support children and adolescents in need.²⁷¹ Children were also affected by the school closure, especially those coming from disadvantaged families who have less access to technological means and inadequate support from their parents compared to others. The government, wishing to close this "disadvantage gap"272, issued benefit measures such as additional funding for 2020-2021, a tutoring programme and enhanced support for remote learning.²⁷³

People from ethnic minorities and the homeless were also identified as vulnerable groups (Lally 2020). Public Health England published an evidence report with suggestions for the UK government on how to ensure COVID-19 recovery strategies to reduce existing health inequalities, while the government announced on 19 March that it would provide £1.6 billion for local authorities to respond to COVID-19 pressures, including for services helping the most vulnerable, such as homeless people.²⁷⁴

The Government decided to safeguard **victims of domestic abuse** as the instances of violence at home rose significantly during lockdown. New legislation, the establishment of a Domestic Abuse Commissioner, monetary funds, provision of safe spaces, accommodation, and access to support services were some of the measures taken by the UK government.²⁷⁵ To amplify the UK's political response on the matter, the House of Commons Women and Equalities Committee is currently conducting an inquiry into the impact that COVID-19 and the measures to tackle it are having on people with protected characteristics under the Equality Act 2010.²⁷⁶

Homeless people were also highlighted as a high-risk group since they are more vulnerable to be infected by the spread the virus. Attentions was given to this particular group as the government announced on 19 March that it would provide £1.6 billion for local authorities to respond to COVID-19 pressures, including for services helping the most vulnerable, such as homeless people. ²⁷⁷

Finally, the UK government advised near 2.2 million people who are "clinically extremely vulnerable" to stay at home for twelve weeks to protect themselves. During this period, the government provided

²⁷¹ Government of the United Kingdom - HM Treasury. (2020, April 8). *Chancellor sets out extra £750 million coronavirus funding for frontline charities*. Retrieved May 28, 2021, from https://www.gov.uk/government/news/chancellor-sets-out-extra-750-million-coronavirus-funding-for-frontline-charities.

²⁷² Lally C. and Rowena Bermingham. (2020, September 1). *COVID-19 and the disadvantage gap*. UK Parliament POST. Retrieved May 28, 2021, from https://post.parliament.uk/covid-19-and-the-disadvantage-gap/.

²⁷³ Government of the United Kingdom - Department of Education. (2020, November 19). *Catch-up premium: coronavirus (COVID-19)*. Retrieved May 28, 2021, from https://www.gov.uk/government/publications/catch-up-premium-coronavirus-covid-19.

²⁷⁴ Public Health England. (2020, June). Beyond the data: Understanding the impact of COVID-19 on BAME groups.

Retrieved May 28, 2021, from https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment data/file/892376/C

OVID stakeholder engagement synthesis beyond the data.pdf.

²⁷⁵ Government of the United Kingdom - Home Office. (2018, October 5). *Domestic abuse: how to get help*. Retrieved May 28, 2021, from https://www.gov.uk/guidance/domestic-abuse-how-to-get-help#where-to-get-help.

²⁷⁶ UK Parliament. (n.d.). *Unequal impact: Coronavirus (Covid-19) and the impact on people with protected characteristics*. Retrieved May 28, 2021, from https://committees.parliament.uk/work/227/unequal-impact-coronavirus-covid19-and-the-impact-on-people-with-protected-characteristics/.

²⁷⁷ Government of the United Kingdom - Department of Health and Social Care and Ministry of Housing, Communities & Local Government. (2020, March 19). £2.9 billion funding to strengthen care for the vulnerable. Retrieved May 27, 2021, from https://www.gov.uk/government/news/2-9-billion-funding-to-strengthen-care-for-the-vulnerable.

support with food and medicine delivery and social care through local authorities.²⁷⁸ Seventeen million vulnerable people were advised to take additional social distancing measures but not in the aforementioned strict way. All the above who needed further support should approach local authorities for more assistance.

As far as Wales is concerned, **the Welsh** government did not create a specific plan for vulnerable people, in the beginning of the pandemic. However, as the pandemic continued there were multiple adaptations from the government regarding vulnerable groups. These adaptations included provisions for BAME groups, people without sufficient resources to participate in pandemic self-governance (such as Gypsy Travellers) or unable to develop full knowledge of risks (such as people with learning disabilities).

In June 2020, a report published by the BAME COVID-19 Socioeconomic Subgroup suggested recommendations to mitigate the impact of COVID-19 on certain minority ethnic groups.²⁷⁹ More precisely, the report identified that people with low income are in disadvantage. Also, in November 2020 the self-isolation scheme was issued to support people who cannot work from home and have to isolate. Also, the Welsh government after a recommendation from the Joint Committee on Vaccination and Immunisation (JCVI), prioritized vaccination to people with learning disabilities.²⁸⁰ Further, the WELSH government provide information to local authorities to assist the support of Gypsy and Traveller in Wales.²⁸¹

4.5 Official governmental communication means per country.

4.5.1 Austria

In Austria, the Communication strategy was implemented **by both public and non-government actors**. As far as the state is concerned, communication was carried out by the Government, and especially the Austrian Chancellor, Health Minister and Minister of Interior. Information was transmitted to the Austrian public predominantly through Press Conferences, but also via social media and other health campaigns, which were, on their majority organized by the Austrian Red-Cross. Information, namely data, news and dashboards were also provided by Austria's public broadcaster, ORF (both TV and radio but also a dedicated COVID-19 website), as well as by the Austrian Agency for Health and Food Safety (AGES)282. However, the Austrian communication strategy, which started out to be rather effective,

²⁷⁸ UK Parliament. (2020, April 20). *Covid-19: Medically Vulnerable People*. Retrieved May 28, 2021, from https://hansard.parliament.uk/lords/2020-04-22/debates/75CE14D6-4E2D-4013-ABEC-F56C1D1D4C79/COVID-19MedicallyVulnerablePeople.

²⁷⁹ Chair Prof Emmanuel Ogbonna. (2020, June). *Report of the BAME Covid-19 Socioeconomic Subgroup*. Retrieved May 27, 2021, from https://gov.wales/sites/default/files/publications/2020-06/first-ministers-bame-covid-19-advisory-group-report-of-the-socioeconomic-subgroup.pdf.

²⁸⁰ Government of Wales. (2021, February 24). *COVID-19 vaccinations: prioritisation of individuals with learning disability or severe mental illness*. Retrieved May 28, 2021, from https://gov.wales/covid-19-vaccinations-prioritisation-individuals-learning-disability-or-severe-mental-illness.

Public Health England. (2020, August). Disparities in the risk and outcomes of COVID-19. Retrieved May 28, 2021,

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/908434/ Disparities in the risk and outcomes of COVID August 2020 update.pdf.

²⁸² Austrian Agency for Health and Food Safety (AGES). (2021, May 25). *Coronavirus*. Retrieved May 26, 2021, from https://www.ages.at/en/topics/pathogenic-organism/coronavirus/.

has been criticized, especially by the Austrian Corona Panel Project²⁸³ as being unable to adapt to the changing character of the pandemic, while at times it caused confusion and information overload.

4.5.2 Belgium

Belgium based its communication campaign on the cooperation of both government and nongovernment actors. As was the case with Belgium's overall response plan, the communication was done through a government structure that followed a specific flow of information²⁸⁴. First, the measures were issued in the form of Ministerial Orders by the Ministry of Security and Internal Affairs. Then the National Crisis Centre describes the application of the Orders in guidelines form, which are then communicated by the Information Unit. The Consultative Committee (Federal Government) also holds Press Conferences to inform the public about the measures and communicates them to the Local Governments in order to ensure that local communities stay adequately informed²⁸⁵. The main means of communication used are the crisis website, which provides overall information regarding the pandemic, Social Media accounts of the FPS Health and the NCNN as well as an application (CoronaAlert), which is used for contact tracing²⁸⁶. From a more conventional perspective, posters with basic hygiene rules were printed and handed out in public spaces, while traditional Media (print, broadcast and online) dedicated special editions and airtime solely to the handling of the crisis²⁸⁷. The communication narrative changed and adapted to the changing nature of the pandemic. The main message until Spring 2020 focused around raising awareness and explaining the measures, but during the second wave it changed and focused on making the new situation part of the Belgians lifestyle²⁸⁸. In addition to that, Belgium made tremendous efforts to reach its vulnerable populations. More specifically, information was sent via text messages in simple Dutch and included visualizations and videos in order to be understandable by the illiterate. Another aspect of the strategy was to approach religious communities by cooperating with their religious leaders and distribute information on those communities as well (Bergmans 2020). Finally, information to vulnerable groups was given via local government services and non-profits, that among other things, translated information pieces in many languages in order to reach a larger audience²⁸⁹.

4.5.3 Cyprus

Government decisions were promoted to citizens both online and offline. A unique Government website was created solely for COVID-19 matters. All decrees, press releases, new measures,

²⁸³ Austrian Corona Panel Project (ACPP). (n.d.). *Panel survey on the corona crisis - Project description*. Retrieved May 26, 2021, from https://viecer.univie.ac.at/en/projects-and-cooperations/austrian-corona-panel-project/. Retrieved May 26, 2021, from https://viecer.univie.ac.at/en/projects-and-cooperations/austrian-corona-panel-project/. ²⁸⁵ Federal Public Service (FPS) Health, Food Chain Safety and Environment. (n.d.). What is the government doing?. Retrieved May 26, 2021, from https://www.info-coronavirus.be/en/what-is-the-government-doing-about-it/.

²⁸⁶ Coronalert. (n.d.). Why a Coronalert app? Retrieved May 26, 2021, from https://coronalert.be//en/.
²⁸⁷ COVID-19 Health System Response Monitor. (2021, January 4). Policy responses for Belgium. COVID-19 Health System Response Monitor. Retrieved May 26, 2021, from https://www.COVID19healthsystem.org/countries/belgium/livinghit.aspx?Section=1.1%20Health%20communication&Type=Section.

²⁸⁸ Crisiscentrum. (2020, May). *Van crisiscommunicatie naar risicocommunicatie. Coronavirus:Hoe de communicatie organiseren na de eerste golf*. Crisiscentrum. Retrieved May 26, 2021, from https://crisiscentrum.be/nl/publication/van-crisiscommunicatie-naar-risicocommunicatie-0.

²⁸⁹ Federal Public Service (FPS) Health, Food Chain Safety and Environment. (n.d.). *Coronavirus COVID-19 - Information multilingue*. Retrieved May 26, 2021, from https://www.info-coronavirus.be/en/translation/.

regulations etc. were uploaded to the site and made accessible to the public. Press and media also reported all the new measures that the Government adopted. Scientists and experts also communicated the measures to the public in order to de-politicize the matter and increase compliance of the public to the measures (Cuschieri et al. 2020). More in particular:

- https://www.pio.gov.cy/coronavirus/ which is the official governmental site for COVID-19 and focuses mainly on:
 - Press releases: A guide for parents and guardians for the safe return of children to schools, in many languages.
 - Information flyers: Gradual easing of lockdown measures, in many languages
 - Personal protection measures: Advice on the use of masks and Coronavirus Symptoms and steps to take for protection, in many languages.
 - Guidelines for the public: Simple Guidelines for the Protection of Workers on construction sites from COVID-19.
 - Important announcements
 - Presidential decrees on COVID-19
 - Press releases for testing units.
 - Testing announcements
- https://www.coronavirus.mlsi.gov.cy/safety
 which is the official site of the Ministry of Labor,
 Welfare and Social Insurance and focuses on:
 - Guidelines for the protection of workers from COVID-19 in general and in construction sites in specific (health and safety measures)
 - Support program information for coping with the effects of COVID-19
 - Guidelines and support for all related and affected companies
 - Guidelines and support in case of partial or complete suspension
 - Work absence allowance for health reasons due to COVID-19
- https://www.moh.gov.cy/moh/moh.nsf/All/0D5A0919CACA4BF8C225851B003E098C which is the official site of the Ministry of Health providing basic information on the pandemic, such as:
 - Personal protection measures
 - Handling of packages from China
 - General information on COVID-19

4.5.4 Ireland

Similarly in Ireland, all the material regarding COVID-19 was disseminated by **Ministers or public health officials through national broadcast**. Following, the daily press briefings and all necessary information were published on the government and NPHET websites, through national press as well as multiple social media channels²⁹⁰. They key elements of the Irish governmental communication plan was transparency, a commitment to open data policy with scientific emphasis as well as a frequent communication and the use of all communication means both traditional and digital (Cushion 2020). Further, the President of Ireland, which is a well-respected figure for Irish people, frequently

²⁹⁰ Department of the Taoiseach. (2021, March 3). *Briefing on the government's response to COVID-19 - Wednesday 3 March 2021*. Retrieved May 26, 2021, from https://www.gov.ie/en/publication/0843e-briefing-on-government-measures-in-response-to-COVID-19-wednesday-3-march-2021/.

communicated with the public ²⁹¹ via national broadcasts and the weekly' 'President Diaries'' which was also shared on the official webpage of the president²⁹².

However, the communication plan demanded a change during the evolution of the pandemic. More precisely, there was a specific focus on preparation, followed by resilience, aspects necessary for change and hope as the approval of vaccines came closer (Kennelly et al. 2020). Additionally, specific communication for vulnerable groups came late and as the pandemic continued various governmental issues (golf society event (Connelly 2020), Leo Varadkar's sharing of confidential documents²⁹³, and the leaked report of the Mother and Baby Home Commission (Hosford 2021)) caused mistrust and demotivate public. Finally, in the third wave the communication tone from the government revealed an uncertainty since Ireland struggled to fight the pandemic, the vaccination procedures were quite slow and the pressure on the health system experienced its most enduring wave (Carswell 2021).

4.5.5 Israel

Israel mainly used **technological means to reach its citizens**. COVID-19 related information was published on **pre-existing Government websites**, without neglecting to **create new websites** dedicated to COVID-19, such as the "traffic light" website²⁹⁴ of the Ministry of Health²⁹⁵ with the restrictions and instructions for the public, and the "National Emergency Portal" of the Home Front Command²⁹⁶. The Israeli Government also employed conventional and social media to inform the public and spread its narrative. Information was disseminated in many languages, due to the aforementioned cultural heterogeneity of Israel.

4.5.6 Italy

In a same way in Italy two ways to communicate with the public were adopted, that is traditional and social means. The traditional government communications were carried via public relations office and website and continued through Radioteleviesione Italiana S.p.A (RAI) and other private TV channels. Further, the most active official websites were the governmental ones such as the Ministry of Health which also provided a continuously updated and free accessible monitoring system online of new infections, treatments, and deaths. In addition, during the lockdowns a daily and then weekly briefings were held by the Head of the Department for Civil Protection to inform the public about the COVID-19 evolution. Muselli et al. (2020) by assessing the marketing tool of Google trends confirmed that this communication strategy increased the public interest (Muselli et al. 2021).

²⁹¹ President of Ireland. (2021, March 17). *Saint Patrick's Day Message 2021*. Retrieved May 26, 2021, from https://president.ie/en/media-library/speeches/saint-patricks-day-message-president-michael-d-higgins-march-2021.

²⁹² President of Ireland. (n.d.). *President's diary*. Retrieved May 26, 2021, from https://president.ie/en.

²⁹³ Fine Gael Press Office. (2020, October 31). *Statement on behalf of An Tánaiste Leo Varadkar*. Retrieved May 26, 2021, from https://www.finegael.ie/statement-on-behalf-of-an-tanaiste-leo-varadkar/.

²⁹⁴ Ministry of Health. (n.d.). *Getting Vaccinated. Going Back to Life*. Retrieved May 26, 2021, from https://corona.health.gov.il/en/.

Ministry of Health. (n.d.). *Coronavirus*. Retrieved May 26, 2021, from https://www.gov.il/en/departments/topics/corona-main-sub.

²⁹⁶ Ministry of Science and Technology, National Knowledge and Research Center for Emergency Readiness. (n.d.). *Emergency information in Israel and disaster related sites worldwide*. Retrieved May 26, 2021, from https://muchanut.haifa.ac.il/index.php/en/resources/information/emergency-information-in-israel-and-disaster-related-sites.

The social governmental communication was mainly carried via social media platforms which were considered to be well-suited for public communication since they offer except from information, a level of interaction also. Social communication reaches a wider audience than the traditional. The role of the government during the pandemic was to provide reliable, accurate and timely information. However, Mori et al., (2020) highlighted that the Italian government communication did not provide accurate evolution during the pandemic especially in terms of quantity and frequency (Mori et al. 2020). In contradiction, municipal and regional communication evolute during the pandemic and their official pages became richer in messages and contents (ibid). Finally, the followers of the official governmental pages increased in social media during COVID-19, revealing the importance of social media in disseminating information (ibid.).

4.5.7 Germany

Germany had a streamlined communication strategy from the start of 2020 that included both public and private actors. On a federal level, a multi-channelled approach was followed by the Government which included press releases, website updates and print and digital campaigns. The Ministry of Health launched the slogan "Through the year with AHA" ("Mit AHA durchs Jahr") ", which was based on the so-called AHA-Formula (AHA Formel) (stands for physical distancing (German: Abstand), hygiene (German: Hygiene) and face masks (German: Alltagsmasken).²⁹⁷ The scientific involvement in the communication campaign was spearheaded by the Robert Koch Institut, with other entities such as the Helmholtz Centre for Infection Research ²⁹⁸ and the Charité Institute of Virology²⁹⁹ also having a vital role. The main public voice of the scientific community was Director Christian Drosten via his podcast "Das Coronavirus-Update".³⁰⁰ The countering of misinformation was also a concern for the German Government. A section of the federal Government's website called "Myths and False Reports" was set up in order to raise awareness regarding misinformation. In addition, a press release was issued in May 2020 to alert people regarding false information which was then followed up in September with extra guidelines on how to handle conspiracy adherents.³⁰¹

4.5.8 Greece

Similarly, to other European States, Greece adhered to a **government-centred official communication approach** which emphasized in frequent TV press conferences which were led by well-known epidemiologists, civil protection, and Ministry of Health officials, as well as occasionally the Greek Prime Minister. Greece opted for a multi-layered communication approach which highlighted the significant cooperation between the Ministry of Health, General Secretariat Civil Protection, Hellenic

297 Body Science Center. (n.d.). SARS-CoV-2: The AHA effect for summer holidays and the start of school. Retrieved May 27, 2021, from

https://www.bode-science-center.com/center/hand-hygiene/hand-disinfection/detail-hand-disinfection/article/sars-cov-2-the-aha-effect-for-summer-holidays-and-the-start-of-school.html.

²⁹⁸ Helmholtz. (n.d.). *SARS-CoV-2 coronavirus*. Retrieved May 29, 2021, from https://www.helmholtz.de/en/current-topics/coronavirus/research/.

²⁹⁹ Charité – Universitätsmedizin Berlin. (n.d.). *Institute of Virology*. Retrieved May 29, 2021, from https://virologie-ccm.charite.de/en/.

NDR. (n.d.). Das Coronavirus-Update von NDR Info. Retrieved May 29, 2021, from https://www.ndr.de/nachrichten/info/podcast4684.html.

³⁰¹ Deutschland.de. (2021, May 27). The Federal Government informs about the corona crisis. Retrieved May 29, 2021, from HYPERLINK "https://www.deutschland.de/en/news/german-federal-government-informs-about-the-corona-crisis." https://www.deutschland.de/en/news/german-federal-government-informs-about-the-corona-crisis.

Ministry of Citizen protection, news agencies and healthcare professionals. Greek Agencies utilized the available resources and information from international organizations such as WHO on social distancing, hand hygiene, relevant information, guidance, and lessons learned³⁰². Greece waged a multidimensional campaign which encompassed a variety of means and platforms, emphasizing in good hygiene and social distancing practices, particularly in vulnerable groups such as the elderly, children, and other health-vulnerable citizens³⁰³. The campaign was characterized most notably by the slogan "Menoume Spiti", which was broadcasted via through TV, SMS-texts, a 24-hour Call line (1135), newspapers, advertisements, printed ads, magazines, on the radio, online, on social media platforms and on billboards, in sign a variety of oral languages, targeting different age groups of the population. Moreover, governmental advice, FAQ's, measures, and information on COVID-19, including legislative decisions and policies were publicly accessible on a dedicated webpage³⁰⁴. During the first wave the message which was conveyed was to stay safe at home, adhering to all the hygiene protocols. During the second wave, the pre-mentioned message was accompanied by the strong vaccination campaign, which lasted until the current (third) pandemic wave. During the third wave the predominant campaign revolved around vaccination. The campaign was launched to inform citizens about the COVID-19 vaccination plan. National Vaccination Campaign was launched to inform citizens about the COVID-19 vaccination plan³⁰⁵.

4.5.9 Portugal

Portugal had its information disseminated by the **Government, even though it did not have a communication plan**. As was the case in the previous countries, the Prime Minister and the Council of Ministers held press-conferences to inform the public about new laws and measures and hand out a brochure or press-release that summarizes the information. All the necessary COVID-19 related information can also be found on the Government's website along with information that affect different aspects of the social life like the education sector, the business sector etc³⁰⁶. Conventional media are also used to inform the public as well as Governmental social media ³⁰⁷.

4.5.10 Romania

In Romania, the government communicated all the necessary information regarding COVID-19 via the **National Communication Strategic Group** using as channels the official websites of the government

³⁰² Economou, C., Kaitelidou, D., Konstantakopoulou, O., & Vildiridi, L. (2021, February 28). *Policy responses for Greece - Health Communication*. COVID-19 Health System Response Monitor. Retrieved May 27, 2021, from https://www.COVID19healthsystem.org/countries/greece/livinghit.aspx?Section=1.1%20Health%20communication&Type=Section.

³⁰³ Economou, C., Kaitelidou, D., Konstantakopoulou, O., & Vildiridi, L. (2021). *Policy responses for Greece 5. Governance*. Retrieved from COVID-19 Health System Response Monitor: https://www.COVID19healthsystem.org/countries/greece/livinghit.aspx?Section=5.1%20Governance&Type=Section.

³⁰⁴ Economou, C., Kaitelidou, D., Konstantakopoulou, O., & Vildiridi, L. (2021, February 28). *Policy responses for Greece - Health Communication*. COVID-19 Health System Response Monitor. Retrieved May 27, 2021, from https://www.COVID19healthsystem.org/countries/greece/livinghit.aspx?Section=1.1%20Health%20communication&Type=Section.

³⁰⁵ Hellenic Ministry of Health. (n.d.). *National Vaccination Campaign - COVID-19 Vaccination*. Retrieved May 27, 2021, from https://emvolio.gov.gr/en.

³⁰⁶ Republic of Portugal. (2021, January 15). *New State of Emergency Measures*. Retrieved May 26, 2021, from https://covid19estamoson.gov.pt/new-state-of-emergency-measures/.

³⁰⁷ Republic of Portugal. (2021, January 15). *COVID-19: Measures, Guidelines and Recommendations*. Retrieved May 26, 2021, from https://www.acm.gov.pt/-/COVID-19-medidas-orientacoes-e-recomendacoes.

and relative Ministries. Additionally, during the emergency state there were daily briefings from the Ministry of Interior and the State Secretary for Emergency Situation broadcasted by all tv channels. During the briefings there were announcements regarding the COVID-19 evolution in the country and the new measures implementation. Further, the Romanian government in a collaboration with the Romanian Red Cross and UNICEF, created an information campaign regarding COVID-19 and the channels that were used were: TV, radio, social media, outdoor advertising, door to door with printed materials³⁰⁸. Also, all the decisions that were issued from the government they were also disseminated through the Prefect office in each county to all local authorities. A campaign regarding vaccination was also created to encourage and promote vaccines³⁰⁹ whereas at some point translations in Hungarian, Romani and Russian was demanded and offered from the government³¹⁰.

4.5.11 Spain

In Spain, the main source of information which reflects on official governmental decisions, regulations and measures is the Official State Gazette (Boletin Oficial del Estado), which reflects upon all adopted measures and decisions, in detail according to their issue, entry into force, department, organ that adopts and implements them. This is government centered communication approach which has similarly been observed in several of the abovementioned countries. During the first State of Alarm in Spain, the President of the Government, and civil servants such as from the Ministry of Health, Defence, Transports, and Interior conducted daily press conferences. On behalf of the Ministry of Health, Fernando Simon, head of the Centre of Coordination for Health Alarms and Emergencies would elaborate on health-related issues: how COVID-19 spreads, hospital capacity evolution, and mortality rate (Martínez, Miguel & Contreras 2020). Law enforcement officials would elaborate on restrictions, while military officials would elaborate other actions such as disinfection and cleaning. The discourses were straightforward and often dramatic, even war expressions were used (Castillo-Esparcia et al. 2020). Pedro Sánchez discoursed for more than 20 minutes on average, including answering the questions of reporters, that on average had a duration of one hour³¹¹. From March to April, the Minister of Health participated in 12 conferences, the Minister of Defence in 3, the Minister of Interior in 7 and the Minister of Transports spoke 5 times. The speech of these had a technical perspective, avoiding polarisation or political competition (Crespo & Garrido 2020). In comparison to weekly press conferences, and the daily conferences that were offered by civil servants, Spanish Ministers were much less salient, except the Minister of Health (Martínez, Miguel & Contreras 2020). Near the end of the first wave, the relevance of the Minister of Health in communicating contemporary COVID-19 related information increased and reached a number of 33 press conferences until June according to the available data (Castillo-Esparcia et al. 2020). Therefore, Spain's main communicative strategy was conducted via press conferences, however, Spain also communicated

311 Ibid.

³⁰⁸ United Nations International Children's Emergency Fund (UNICEF). (n.d.). *This is the time to re-imagine the future of Romania together*. Retrieved May 26, 2021, from https://www.unicef.org/romania/time-re-imagine-future-romania-together.

³⁰⁹ Romanian Ministry of Health. (n.d.). #ROVACCINARE. Retrieved May 26, 2021, from https://vaccinare-covid.gov.ro/.

³¹⁰ Forbes. (2021, January 1). *NAC calls on Strategic Communication Group to subtitle spots on COVID-19 vaccination campaign in minority languages*. Retrieved May 26, 2021, from https://www.forbes.ro/cna-solicita-grupului-de-comunicare-strategica-subtitrarea-limbile-minoritatilor-spoturilor-privind-campania-de-vaccinare-impotriva-COVID-19-198842.

via press, TV, radio advertisements and websites^{312.} As of June 2020, until now, the Spanish President became far less salient whereas the Minister of Health and the Head of Centre of Coordination for Health Alarms and Emergencies remained as the main official speakers, while press conferences also remained as the main communication method. Apart from press conferences, TV, radio, press, and websites were used to convey COVID-19 information.

4.5.12 Sweden

Sweden, adhered to a **central communication campaign** which was waged by the central administration such as the Government, Governmental Agencies and the Swedish Civil Contingency Agency³¹³. Sweden also mainly used daily press conferences via the PHA and often with the active participation of the Prime Minister, Minster of Social Affairs, as well as The National Board of Health and Welfare. These press conferences, which would be transmitted also in sign language, and briefings were set daily at p.m. In addition, PHA would update information in regard to the evolution of the pandemic in their website and via press releases and social media³¹⁴. One of the main actors in the communication efforts was the State epidemiologist Anders Tegnell. The Swedish Civil Contingency Agency would also administer the information site Krisinformation.se, that would include COVID-19 relative updates in 27 different languages and the sign language, which would target ethnic minorities³¹⁵. With the exception of these means, Sweden has also employed social media, newspapers, radio, TV and digital information boards³¹⁶.

4.5.13 Switzerland

Switzerland adopted a centralized communication strategy, rather than a region-based (canton) communication. The Swiss government has also used factsheets, Frequently Asked Questions (FAQ), technical articles, websites, media releases and conferences, hotlines, radio and/or TV commercials, social networks (Gilardi et al. 2021), flyers, press, advertisements, and posters so that they could convey COVID-19 information to all citizens that may not use all means of information and media (Wong Sak Hoi 2020). The leadership and coordination of the overall communication strategy of the pandemic and pandemic-related measures was shouldered by the FOPH in collaboration with different actors such as involved federal agencies, the cantonal medical services³¹⁷ and other relevant stakeholders.

³¹² Center for the Coordination of Health Alerts and Emergencies (CCAES). (n.d.). Novel coronavirus disease, COVID-19. Retrieved May 26, 2021, from https://www.mscbs.gob.es/profesionales/saludPublica/ccayes/alertasActual/nCov/home.htm.

³¹³ Swedish Civil Contingency Agency. (2021, March 22). *MSB's work with handling the new coronavirus*. Retrieved May 26, 2021, from https://www.msb.se/en/operations/ongoing-operations/coronavirus---COVID-19/.

³¹⁴ Public Health Agency of Sweden. (2021, March 9). *COVID-19*. Retrieved May 26, 2021, from https://www.folkhalsomyndigheten.se/the-public-health-agency-of-sweden/communicable-disease-control/COVID-19/.

³¹⁵Swedish Civil Contingency Agency. (n.d.). *COVID-19*. Retrieved May 26, 2021, from https://www.krisinformation.se/en/search?q=COVID-19.

³¹⁶ Government Offices in Sweden. (n.d.). *The Government's work in response to the virus responsible for COVID-* 19. Retrieved May 26, 2021, from https://www.government.se/.

³¹⁷ The Federal Council, The portal of the Swiss government. (n.d.). *Press Releases*. Retrieved May 26, 2021, from https://www.admin.ch/gov/en/start/documentation/media-releases.html?dyn_startDate=31.01.2019&dyn_endDate=26.05.2021&dyn_organization=1&dyn_topic=15.

4.5.14 United Kingdom

In the UK, even though the four nations worked together in the fight of the pandemic, soon each followed its own path. For public to understand risk is necessary for consistent, clear, and timely guidelines to be communicated (Attwood & Hajat 2021). Thus, a government-funded UK-wide information campaign was created which was featured on traditional means such as radio and print media as well as on digital such as social media. Other communication means implemented by the UK government was post and broadcast. More precisely, on 29 March a letter was sent to 30 million households with a simple instruction of "You must stay home" accompanied with rules and guidelines regarding measures of COVID-19 as well as a leaflet saying "Coronavirus - Stay at home, Protect the NHS, Save Lives" 518. Following, in April 2020, Queen Elizabeth II send messages through two speeches which were broadcasted thought TV. The one was to thank the public for complying with the rules 319 and the second was the first time that the Queen had delivered an Easter message and included the message that "Coronavirus will not overcome us" 320.

It has to be noted that many people were not aware of different rules and restrictions which applied across the four British nations (Cushion et al. 2020). The government officials did not make clear that the restrictions did not always applied to Wales, and it was concluded that not enough concerted efforts were made to convey this to the Welsh public³²¹. Nevertheless, most of the communication in Wales was made via multiple media channels such as TV, print and social media. Additionally, the Welsh government through TV briefings communicated with the public and informed them regarding COVID-19 evolution and measures.

³¹⁸ PoliticsHome. (2020, March 29). *Boris Johnson's letter to the nation on coronavirus*. Retrieved May 26, 2021, from https://www.politicshome.com/news/article/read-in-full-boris-johnsons-letter-to-the-nation-on-coronavirus.

³¹⁹ BBC. (2020, April 6). *Coronavirus: The Queen's message seen by 24 million*. Retrieved May 26, 2021, from https://www.bbc.com/news/entertainment-arts-52183327.

³²⁰ BBC. (2020, April 11). *Coronavirus: 'We need Easter as much as ever,' says the Queen*. Retrieved May 26, 2021, from https://www.bbc.com/news/uk-52255054.

³²¹ Ibid.

5 Discussion

Having finalised the analysis of the all countries under research on the governmental responses towards COVID-19 pandemic the following outcomes can be noted on the basis of an initial comparative analysis across countries.

To begin with, even if countries have different **governmental structures** with specific administrative differences, all countries emphasized on a main centralised point of authority, such as the central government along with semi-autonomous regions in some of the cases. All of them depended on their already existing mechanisms against crises, while the majority of them activated and orchestrated new bodies, scientific committees, and ministerial led task forces to cope with this new health threat. Some of them such as Spain and Switzerland adapted the influence of the central government on a regional level based on the evolution of the pandemic, while others did not change their administrative status quo. All countries decided also to adopt response measures as quickly as possible to tackle the pandemic such as physical distancing, lockdowns (local and/or national), while some of them, such as Greece, Italy and Ireland declared their countries in an emergency situation, taking into consideration to abide with the relevant human rights protected under their Constitution and the international legislature, while others continued with no such declaration. In all countries the final decisions were generated from the central government with small adaptations to smaller entities such as regions, municipalities, and counties at a certain degree, based on their administrative structure inside the country.

Moving to the social, economic, cultural, and legal factors that influenced specific governmental responses, it is evident that from a social perspective that certain rights related to movement suspensions (lockdowns, curfews, suspension of business and education, etc.) have been adopted in order to minimise the impact of COVID-19 to the relevant citizens. Health, economy, and social effect are the most important factors that were taken into consideration from a governmental point of view, with several countries such as Spain, Greece, and Cyprus to emphasize on the protection of elder population, through vaccination prioritization and adoption of specific communication campaigns for the protection of such populations. All but Switzerland have emphasized on a public health care insurance coverage system, trying in parallel to support both financially and with human resources the health system and facilities in their respective countries, in order to reduce the heavy workload from the intensive care units (ICU) and the hospitals as a whole. In addition to that, all countries have highlighted the importance of physical distancing and lockdowns, keeping simultaneously the balance with human rights and freedoms of each individual. Turning to cultural risk factors, great support was provided to the mental health issues and the effects that the pandemic may develop to each individual regardless the fact whether he/she belongs to a specific vulnerable population. Due to the fact that lockdowns and curfew measures affected substantially the economy and limited business operation, certain economic measures and monetary benefits have been in place in all countries. Countries such as Greece, Portugal, and Austria mainly emphasized on tourism without neglecting support and specific monetary benefits towards employees and businesses. A number of long- and short-term programs with economic recovery and financial incentives have been adopted, ensuring the continuous operation of the most critical ones.

Turning to the specific adaptations each country took towards specific **vulnerable groups**, it has to be highlighted that all countries have identified inside their countries the specific vulnerable population to which they wanted to pay attention. Specific relief measures have been implemented to people that

fall within the categories of social, health and economic vulnerabilities, based on the internal reality of each country. Elder population and people with disabilities and chronic illnesses have been identified in almost all countries as the most vulnerable groups, which highly influenced the implemented policies, with children, minors, teenagers to follow mainly due to the educational issues and the impact COVID-19 has on their mental and psychological well-being. Gender was also a factor taken into consideration, since domestic violence especially against women increased during the lockdown, while in several countries such as the UK, Italy, Ireland, Greece etc. minorities and migrant populations were also on the spotlight for preventative and protective measures. A high level of consideration was also given to healthcare workers due to their heavy everyday workload during all the pandemic waves. All countries have adopted COVID-19 prevention related policies and other measures based on the fluctuation and evolution of the pandemic in order to minimise the devastating impacts of the pandemic to the relevant populations. Several shortcomings were identified which shall be examined in the following empirical assessment.

Finally, as regards the communication strategies followed by the countries under research, it was demonstrated that most of the target countries had varied successes in their COVID-19 communication strategies. The reason for differences has in part depended on the actors involved and the level of public trust in the communicator. These factors are impacted by several evidenced indicators, including the timing, consistency and transparency of the information communicated. Main communication strategies focusing on vulnerable groups often lacked a tailored communication response and these communication plans generally came at a later stage or in reaction to increased needs. Successful communication strategies had a concise and timely approach from the start of 2020 that included both public and private actors and traditional and digital means of communication (e.g., newspapers, social media, TV, radio, etc.) to inform the public on the evolution of the COVID-19 pandemic. Daily briefings via governmental officials and highly respected health experts along with press conferences have been identified as very effective communication means, that conveyed the right message to the people. Apart from the official governmental websites, dedicated COVID-19 official websites and social media that contained all measures and relevant information on COVID-19 evolution along with specific thematic and targeted campaigns (posters, fliers, advertisements, etc. targeted to the hygiene measures, social distancing practices, vaccination plan and procedures, the protection of certain vulnerable populations, counteracts to misinformation etc.) have been adopted from as above countries under research. All countries also employed a variety of means in conveying information such as in a variety of languages and sign language so that the cultural and language needs of every citizen/recipient could be addressed in a swift and effective manner.

Based on the initial data received by the consortium partners from the desktop research in their respective countries, it can be derived that there is a quite unique insight into the governmental approach countries have adopted to combat COVID-19 impact on the relevant populations. **Further empirical research** that will involve interaction with the main actors from the public sector as well as other related experts will enhance the existing findings having as main outcome to fill in the general understanding on the pivotal role of governments, providing reports and recommendations for future responses and measures in similar situations.

6 Conclusions

The main objective of the COVINFORM project is to identify the unique characteristics and analyse the multi-layered and multidimensional COVID-19 responses on the levels of public health professionals, government, communications, societal and information, with a holistic scientific research approach. In addition, based on the available quantitative data at the European level, COVINFORM aims to develop parallel risk assessment models which consequentially shall likely make feasible the creation of an online portal and visual toolkit which is intended to be utilized by healthcare professionals, governments and governmental leading figures, relevant stakeholders, and citizens, as an instrument to combat this contemporary pandemic. Based on the comparative analysis the majority of the abovementioned states have adhered to similar governmental modus operandi in order to organize and lay out their COVID-19 strategy and responses. Stakeholders have taken into consideration measures and contributing factors such as the socio-economic, legal, cultural characteristics of their States in order to tailor their approach in regard to governmental structure, vulnerable groups, and official channels of communication through which accurate, timely and actionable information would be disseminated which would also combat misinformation and address the needs of the society. Most of the states have opted in for a government-centred administrative approach, which allowed the issue of legislative frameworks that provided enhanced legal and administrative powers in contrast to the pre-COVID-19 era status quo. Moreover, States have adopted a holistic approach which encompassed socio-economic, cultural, and legal factors and challenges which surfaced alongside COVID-19. These considerations led to scientific-based measures such as mandatory mask wearing in public places, restriction of movement, pause of business activity in certain cases, physical distancing, and other relevant pandemic-related containment measures. Emphasis was placed upon vulnerable groups, based on their physical and mental health needs, socio-economic and cultural characteristics, however this was not the case in all States. Some States have heavily emphasized on vulnerabilities which were defined by health factors which have in certain cases overshadowed other vulnerable groups which may not be characterized by their physical health status quo but other characteristics which constitute these groups as vulnerable. This is a common shortcoming in many cases and the overshadowing of other vulnerable groups should be addressed in further research, as this can be considered as a case that needs further improvement. The research and development of the vaccine and the prioritization of health-vulnerable groups such as the elderly populations across Europe, was a common phenomenon across these States. Regarding official communication channels, governments, and stakeholders such as international organizations and NGO's have published timely and accurate COVID-19 related information utilizing a wide range of means such as their official webpages, leaflets, TV, radio, newspapers among other sources. Governments opted for a centralized communication strategy via their official webpages and highly frequent press conferences which were usually led by well-known epidemiologists, Prime Ministers, Ministers, and additional relevant governmental agents, particularly from the Ministry of Health. Concluding, to address the cultural, societal and language needs of citizens and minorities, both Governmental entities as well as international organizations and non-governmental institutions have provided easy-to-read texts, webinars, leaflets, articles, and audio-visuals in a wide variety of languages. These official communication strategies have significantly deterred and countered the impact of disinformation and misinformation. Further empirical research will be performed to provide a well-rounded analysis on the key dimensions of governmental response impact in the project target countries.

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Annexes

Annex A: COVINFORM Research Guidelines for T4.1

1. Introduction

This document provides analytical guidance to partners involved in T4.1 of WP4, explaining the specific steps, requirements, deadlines as well as instructions for the data collection template (Excel) along with the general objectives and data collection procedures. Participants of this task are all COVINFORM Consortium partners.

2. T4.1: Describe governmental structures and responses in the target countries – Workplan and Timeline

2.1 Aim and Objectives

WP4 has as its main objective to review and describe governmental structures and responses on a national level among the project target countries, as well as on a regional/local level in selected communities and case studies, performing in parallel an in-depth analysis of key dimensions of governmental response impact in the project target countries³²². More in particular, T4.1 aims to gather and assess **governmental responses**³²³, including a review of relevant **primary sources** (governmental policies and guidelines, official assessments and reports, etc.) and **secondary sources** discussing these governmental responses (scholarly studies, grey literature, etc.), resulting to a baseline concrete report with chapters per partner country, containing top-level descriptive analysis of relevant structures and responses, cross-referenced with indicators utilised in WP2 and accompanied by an index of sources. Focus will be given to **vulnerable groups**³²⁴ and the way those were affected (**physically, economically, socially and mentally**) not only by COVID-19 but mostly from the **governmental response and reaction** to it.

³²² Here each participant could decide on which level of governance should focus and in realtion to the following research questions, based on the reality of their countries.

³²³ Focus should be given to policies and final decisions. Any reference to potitical debates/discussions should not be listed separately, just the final outcomes of such debates.

³²⁴ According to EU Migration and Home affairs, vulnerable people can be minors, unaccompanied minors, disabled people, elderly people, pregnant women, single parents with minor children and persons who have been subjected to torture, rape or other serious forms of psychological, physical or sexual violence, victims of trafficking. (vulnerable person | Migration and Home Affairs (europa.eu))

Also please check the European institute for Gender Equality definition of vulnerable people during COVID-19, People in vulnerable situations (europa.eu), as well as the Technical report of European Center for Disease Prevention and Control namely "Guidance on the provision of support for medically and socially vulnerable populations in EU/EEA countries and the United Kingdom during the COVID-19 pandemic" Medically-and-socially-vulnerable-populations-COVID-19.pdf (europa.eu)

In this WP we will adopt a general approach on the "Vulnerable group" definition so as to see how governemental responses apporached during COVID-19 these groups.

Vulnerabilities: "conditions determined by physical, social, economic, and environmental factors or processes, which increase the susceptibility of [an individual or] a community to the impact of hazards" (UN/ISDR, Geneva 2004; cited in the Hyogo Framework for Action 2005-2015)

Specific Workplan

The assessment of governemental responses will require both a desktop research from the respective countries, as well as a brief 2-page report on the main inputs from each country. For the desktop research we are going to follow the basic steps of a systematic literature review, adapted to the current needs of COVID-19 specifications. For the 2/3-page report, we will send to all the participants a detailed template, where we would like to fill it in with the required information that will comprise the prementioned report.

2.2. Desktop Research

The desktop research conducted by the consortium partners in T4.1, will be guided by the following research questions, which will serve as safeguard for the studies to be as representative as possible . The main research questions are:

- Which indicators led governments adopt specific COVID-19 related responses /measures?
- How (in matters of legal procedures) were they shaped?
- What were the main incentives and core approach during the first and the second wave of the pandemic325, focusing on the main differences between these two periods?
- How were those responses different from the usual326 governmental practices (if there are any differences) before the pandemic? Have the governmental structures been changed at any way(nationally, regionally and locally)?
- Who was the main target-population of the governmental responses? Were they diversified per target-population?
- What were the particular responses relevant to economy, social welfare, health system, security?
- What were the main (i) economic, (ii) social, (iii) health (iv) educational effects from these governmental responses to the population of interest?

Research Sources³²⁷

The main sources for T4.1 research can be the following:

- 3. **Primary sources** including governmental policies and guidelines, official assessments and reports, produced directly by national governmental and policymaking bodies. Consortium partners could search inside their countries for this information (e.g. in parliament decisions, in legislation, in reports etc.) using probably official governmental websites etc.
- 4. **Secondary sources,** where **c**onsortium partners could search for **specific studies focusing on economic/health/social impact of governmental policies**. These may include:

³²⁵ Here participants could take into consideration incentives from an economic perspective (closed economy can lead to specific problems, thus different approach could be decided from the governments during the second pandemic wave), or from a psychologic perspective (e.g. take into consideration any recommendations that psychologists could have provided to the governments that may affected them on taking specific decisions for the second wave of pandemic),etc.

³²⁶ The term "usual" refers to practices that are adopted during periods of normality, or to measures and protocols that are adopted during crisis and other emergencies (e.g. natural disasters, terrorist attacks etc.) than pandemics.

³²⁷ Please check also the following link with a tutorial on effective research: <u>The University of South Carolina</u> Beaufort (sc.edu)

- a. <u>Academic resources</u> (peer-reviewed journals, academic books, conference proceedings and other academic studies), utilising Google Scholar³²⁸, Web of Science³²⁹, Scopus³³⁰, IEEE Explore³³¹ and/or other academic databases
- b. <u>Grey literature</u>, e.g. policy briefs, reports and presentations produced by international and EU organizations, governmental and policymaking/legal bodies, NGOs and civil society organizations, think tanks, lobbies, Security Organisations, and the private sector.
- c. <u>Popular resources</u> (online articles, press stories, websites, publicly available social media accounts and wikis), using search engines (google, Bing), newspapers databases and archives (LexisNexis³³², ProQuest³³³, other databases from their country), Social search engines (e.g. social searcher³³⁴), public social media profiles of relevant bodies, organisations and companies.
- d. Data from similar projects, if any.

Language

The language that will be included in the research will be mainly English. However, due to the specific particularities of the research (governmental responses usually are issued in the national/regional language and there is not an English translation), all the entries will be accepted on the premise that the partners will provide a comprehensive and detailed English description of the main points of each entry and its relevance to the research.

Timeframe

The entries should cover the period from 24th of January 2020 till current period (as January was the month when the first COVID-19 case was identified in Europe), with clear distinction among the relevant waves of the pandemic in each country, including also entries form January 2019-January 2020 (for comparison purposes among governmental structure/decisions/responses etc. before and after the start of the pandemic)

Search Terms

The following search terms could be suggested to consortium partners to ensure relevance of results with T4.1. and could be used as a starting point. Please note that this is just an indicative sample, so Consortium partners are free to add more relevant terms.

Main Search Term (s)	Secondary Search Terms (Combined with AND/OR with the main search terms)
Governmental (response, policy etc.) COVID-19 pandemic	Impact on - Economic, Societal (wellbeing etc.), Educational, Health, Elderly Care, Employment Legal, Security and Criminal Justice System (Prisons-Courts-Police) Responses (Before/After) Legal factors/Law/Legislature

³²⁸ Μελετητής Google

Web of Science - Please Sign In to Access Web of Science (webofknowledge.com)

³³⁰ Scopus preview - Scopus - Welcome to Scopus

³³¹ IEEE Xplore

Welcome to LexisNexis Legal & Professional

ProQuest | Better research, better learning, better insights.

^{334 &}lt;u>Social Searcher - Free Social Media Search Engine (social-searcher.com)</u>

Vulnerable groups
Communication Campaigns
Europe
Global
Countries (please use your Country name here to filter the specific responses/policies for your country e.g. Spain, Greece, Austria etc.)

Both Boolean operators³³⁵ (AND, OR, NOT) and Truncation³³⁶ (*, for multiple endings) along with Wildcard Symbols³³⁷ (*, ?) can be used to combine the search terms of interest from all the columns, as well as expand the search results.

Exclusion criteria

Entries with no focus on the subject of research, with no available detailes abstract in English, with no available free text or not compliant with GDPR and/or research ethics standards, e.g. private social media profiles, data gathered in an unethical way will be excluded.

Excel specific guideliness

The excel file that Consortium Parnters need to fill in contains the following information:

- Name of Publishing Organisation/Institution/Entity
- Level of Publishing Organisation Organization/Institution/Entity
- Publication/Source Type
- Year of Publication
- Author (s)
- Search terms used
- Title of source/document/publication in the original language and an English translation
- Language of source/document
- Detailed English Description of main points
- Timeframe of the specific response (before COVID-19, during the first wave, during the second wave)
- Population of interest which was affected by the specific response
- Impact identified on relevant population
- Hyperlink/DOI
- Other Comments

Timeline for the research and next steps

Consortium partners will be asked to provide their research entries till 26.03.2021, focusing on their respective countries. The final excel sheets will be sent to KEMEA (t.spathi@kemea-research.gr, d.papadaki@kemea-research.gr, mv.arabatzi@kemea-research.gr, i.eliezer@kemea-research.gr)

³³⁵ Rockwell Schrock's Boolean Machine

³³⁶ Truncation & Wildcard Symbols - Research Process - LibGuides at Northcentral University

³³⁷ Asterisk wildcard (*) is used between words where variations may be possible, Question mark wildcard (?) is used to replace an unknown character

KEMEA will focus on the Greek territory as well as on governmental responses from an **international** and EU level which may be useful for the report. KEMEA will be also responsible for the collection, the review and the systematic report of the desktop research, which will be reported to D4.1 in the end of April (M7).

2.3. Specific Country Reports

Parallel to the excel file, each Consortium partner will be asked to briefly summarise the situation existing in their respective countries around the following issues, reflecting also to changes comparing with the situation prior to the pandemic as well as between the two pandemic waves. More in particular, they will be asked to map out:

- The governmental structure of their country (on national, regional and local level), indicating
 any changes/adaptations, prior the pandemic as well as among the pandemic waves
- The main actors in decision making and policy process inside their country, indicating any changes/adaptations prior the pandemic as well as among the pandemic waves (e.g. parties, unions, business/medical/research associations, legal sector etc.)
- The main social, economic, cultural, and legal factors that were taken into consideration for the specific governmental responses to emerge
- Any adaptations of the governmental responses towards vulnerable groups, indicating any changes/adaptations prior the pandemic as well as among the pandemic waves
- The main means of communication (e.g. online and offline media, specific webplatforms etc.) used on a governmental level (national, regional and local) for the governmental decisions to be promoted to citizens, indicating any changes/adaptations prior the pandemic as well as among the pandemic waves

All the participants will be sent these points in a form of questionnaire that will have to fill in. Due to the fact that some consortium partners come from the same countries, they can fill in this report jointly, till the **26.03.2021**, and send it to KEMEA (t.spathi@kemea-research.gr, d.papadaki@kemea-research.gr, mv.arabatzi@kemea-research.gr, i.eliezer@kemea-research.gr). The agreed proposed workplan is as follows:

Austria: SYNYO & AUTRCBelgium: UANTWERPEN

Cyprus: KEMEAIsrael: MDAIreland: TRI

Italy: UCSC & SAPIENZA

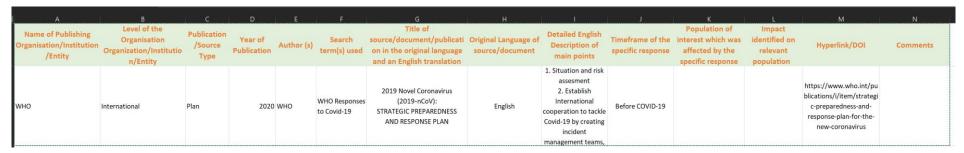
Germany: SINUS
 Greece: KEMEA
 Portugal: FS
 Romania: SNCRR
 Spain: SAMUR & URJC

Sweden: UGOT

Switzerland: SYNYO & SINUS

United Kingdom: TRI, MDI & SWANSEAUS: FS (OECD) & additional support

Annex B: Excel Template for Desktop Research for T4.1



Annex C: COVINFORM Country Reports for T4.1

1. Introduction

This document serves as a complementary report to the excel file of T4.1 on the governmental structures and responses on a national level among the project target countries, as well as on a regional/local level in selected communities and case studies. It aims to briefly summarise the situation existing in their respective countries around the following issues, reflecting also to changes comparing with the situation prior to the pandemic as well as between the two pandemic waves.

2. Questions (to be filled in for the report)

- Which is the exact governmental structure of your country (on national, regional and local level)? Please indicate any changes/adaptations, prior the
 pandemic as well as among the pandemic waves in terms of structure and governance (e.g. establishment of new Ministries or other relevant structures
 etc.)
- Who are the main actors in decision making and policy process inside your country (e.g. parties, unions, business/medical/research associations, legal sector etc.)? Please indicate any changes/adaptations prior the pandemic as well as among the pandemic waves
- Which are the main social, economic, cultural, and legal factors that were taken into consideration for the specific governmental responses to emerge?
- Are there any adaptations of the governmental responses towards vulnerable groups, indicating any changes/adaptations prior the pandemic as well as among the pandemic waves?

• Which are the main **means of communication** (e.g. online and offline media, specific webplatforms etc.) used on a governmental level (national, regional and local) for the governmental decisions to be promoted to citizens? Please indicate any changes/adaptations prior the pandemic as well as among the pandemic waves

Please note that due to the fact that some consortium partners come from the same countries, they can fill in this report jointly, till the **26.03.2021**, and send it to KEMEA (<u>t.spathi@kemea-research.gr</u>, <u>d.papadaki@kemea-research.gr</u>, <u>mv.arabatzi@kemea-research.gr</u>, <u>i.eliezer@kemea-research.gr</u>). Please also check the T4.1 guidelines for more information.