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1	RAPID POLICY BRIEF NUMBER: 012-01
2	RESEARCH DOMAIN: COVID-19 RESPONSE CAPACITY WITH THE HEALTH SYSTEM
3	TITLE: Health system governance and management for COVID-19 response
4	DATE OF PUBLICATION: 2/15/2021
5	<p>BACKGROUND</p> <p>The COVID-19 pandemic has made governments at all levels to react quickly, implementing national and subnational measures in response to the COVID-19 crisis [1]. According to Christensen and Læg Reid [2], governance capacity refers to preparedness or analytical ability, coordination, regulation, and implementation or delivery capacity. This brief is aimed at Summarizing the available literature on COVID-19 response capacity with the health system with regards to governance and management.</p>
6	<p>SEARCH STRATEGY / RESEARCH METHODS</p> <p>Five databases were searched for studies conducted between December 2019 and 12th January 2020, including PUBMED, WHO COVID-19 database, The COVID-NMA initiative, Cochrane COVID-19 Study Register Google scholar. The search terms used were: “health system capacity,” “governance,” “COVID-19”, “SARS-CoV-2”, “Coronavirus,” using relevant Boolean operators. A further search was done, which included “Africa” and a search string of all countries in Africa to identify studies specific to the continent. A total of 15 articles were used to synthesize the findings summarized in this policy brief.</p>
7	<p>SUMMARY OF GLOBALLY PUBLISHED LITERATURE RELATED TO THE SUBJECT</p> <p>When COVID-19 hit, countries worldwide had to respond at all levels of government to fight the pandemic [3]. Many countries adopted different approaches around containment measures [1]. Governments are also providing massive financial support to protect firms, households, and vulnerable populations. Many countries, and the European Union, have reallocated public funding to crisis priorities, supporting health care, small and medium enterprises, vulnerable people, and regions particularly hit by the crisis [1].</p> <p>Norway is one of the countries that seemed to have performed well in handling the pandemic, especially in terms of decision-making, handling, and making sense of the situation [2]. After three weeks of strict measures, Norway became the first European country to claim that the situation was under control. The number of hospitalized COVID-19 patients decreased, and the number of deaths remained low. This high-performance can be attributed to competent politicians, a high-trust society with a reliable and professional bureaucracy, a strong state, a good economic situation, a big welfare state, and low population</p>

density. The government instituted lockdown measures, coupled with financial compensation, border controls, restrictions on interprovincial movements. The prime minister and the other ministers involved played an essential role in communicating with citizens and the media [2].

Similarly, in the first two months of the COVID-19 pandemic, the Republic of Korea (South Korea) had the second-highest number of cases globally yet could significantly lower the incidence of new cases and sustain a low mortality rate. Facilitators of this great performance include existing hospital capacity, the epidemiology of the COVID-19 outbreak, strong national leadership, and population sensitization due to the previous experience with the 2015 Middle East respiratory syndrome-related coronavirus (MERS-CoV) epidemic [4,5].

China also exhibited robust government control from the third week of January 2020, when COVID-19 was officially confirmed. The government instituted lockdown, and strict measures were put in place to spread fake news at that early stage. These measures were accompanied by a range of social distancing measures, including the closure of schools, universities, libraries, centres for older people, and sporting venues, and even restricting all movement in some of the most affected areas [8].

Trinidad and Tobago displayed governance competence and capacity at both the national and sector levels. The country's Prime Minister led the charge with senior health officials, and they engaged early, regularly, and clearly with the general population. Regular media briefings were aired on all local television channels, as well as multiple radio stations. Videos and media releases were made available on numerous Ministry websites and social media platforms [9].

Other countries that displayed good response are Singapore and New Zealand, which have been lauded for their rapid health interventions, border closures, and prime ministerial leadership. Also, Germany, armed with strong political leadership, is said to have shown what a well-funded public health system can achieve in terms of patient care and societal intervention [7].

However, the governance system in the UK has been criticized. According to Stoker et al., "COVID-19 has revealed that our governance system in the UK is not just prone to the occasional disaster; it is fundamentally flawed". The authors blamed the poor governance on the government's lack of capacity to mobilize resources to meet their needs. The governance system was described as one that: (1) "undermines effective communication between state and citizens; (2) lacks the capacity to coordinate and bring together sectors and actors to meet common goals; and (3) consistently fails to share power effectively and distribute resources fairly". A cross-national survey revealed that the percentage of citizens who think the UK government is handling the issue of COVID-19 well or very well dropped from the low 70s in late March to the low 30s in late October 2020 [6]. Similarly, health systems in developing countries are constrained

	<p>by capacity, governance, and corruption issues [10]. For example, it is said that countries like Bangladesh and many states within India have not been very successful in enforcing lockdowns or delivering interventions at various levels. Weak centralized systems struggled to communicate the behaviour changes required for social distancing and lockdowns or provide the necessary treatments at low cost or scale [10].</p>
<p>8</p>	<p>SUMMARY OF AFRICA-SPECIFIC LITERATURE ON THE SUBJECT</p> <p>There have been improved efforts, for example, daily briefings, the formation of national crisis response committees, cash transfers to the poor, lockdowns and curfews, by governments in Africa to respond to the crisis compared with other previous disasters [11,12]. However, it is argued that some of these policies may have adverse social, psychological, and economic consequences on their populations [11]. It has also been reported that there is a lack of consistency with implementing these policies at the national, regional, and continental levels. While some countries are adopting strict measures to counter the spread of the disease, some countries underestimate the impact of the disease [11].</p> <p>Concerns have also been raised over some governments’ iron fist approach in Africa [13,14]. In countries like Kenya, Nigeria, Cameroon, and South Africa, law enforcement agents are said to be using excessive force, seeking bribes, and terrorizing civilians to enforce COVID-19 safety measures. On the other hand, citizens seem to respond to the set-out rules only to avoid punishment, and in most cases, only when the law enforcers are around. Kenya recorded instances of potential patients escaping from quarantine and politicians circumventing lockdown rules to travel to other parts of the country. This lack of compliance from citizens is further worsened by fake news, especially their unbelief in the existence of the virus [15].</p> <p>It is has been argued that such inconsistency between policy formulation and implementation can undermine COVID-19 response policies [11]. Nonetheless, some countries like South Africa have been applauded by The United Nations for their bold and decisive leadership response to COVID-19 [7].</p>
<p>9</p>	<p>POLICY FINDINGS</p> <ul style="list-style-type: none"> • Inconsistencies exist between policy formulation and implementation in Africa • Africa governments may have employed authoritarian strategies that affect the level of compliance from citizens • Citizens seem to adhere to set-out rules not due to conviction but to avoid being reprimanded • Citizens are still yet to develop trust in the government, as seen with their lack of belief in the existence of the SARS-Cov-2 virus

10	<p>ONGOING RESEARCH IN THE AFRICAN REGION</p> <p>None found</p>
11	<p>AFRO RECOMMENDATIONS FOR FURTHER RESEARCH</p> <ul style="list-style-type: none"> • More research on the governance capacity of individual countries in Africa are needed • The impact of governance on the response and compliance of the citizens • Studies on the effects of context-specific interventions to increase citizens' trust in the government during a similar crisis • Studies on the effects of context-specific interventions to improve governance capacity in Africa.
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