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Towards a New Model of Governance after Covid-19

POLICY BRIEF # 1

THE LACK OF GOVERNANCE IN THE RESPONSE POLICIES LAUNCHED TO FIGHT COVID-19 IN CHILE

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The Covid-19 pandemic has brought us into uncharted territory. It represents a crisis with health, economic, social, and also political dimensions. Besides, it has exacerbated the inequalities and exclusion suffered by sectors living under conditions of vulnerability. It represents a crisis that has given rise to additional concerns, due to the likely deepening of political discontent and the consolidation of authoritarian practices through the expansion of the Executive Branch's powers and the restrictions of civil rights in a post-Covid-19 scenario.

This reality has shown us that the pandemic poses a challenge to which we cannot respond unilaterally, from the one-sided perspective of a single government or specific community. This is a global challenge with profound impacts on several dimensions of society, as well as differential impacts on the different women and sectors living under more vulnerable conditions. Therefore, it is a challenge that requires a multidimensional solution with an intersectional approach – a solution that is not yet available to us.

This is why we need political practices that promote collective intelligence-oriented collaboration as a way of finding solutions to public challenges, such as the one posed by the pandemic. The premise behind collective intelligence is, precisely, that no one knows everything, but everyone knows something. Translating this fact to the way in which decisions are made in a society represents a significant challenge, and requires collaborative mechanisms involving a variety of actors. It specifically requires collaborative governance.

For this reason, the *Colabora.Lat: Towards a New Model of Governance after Covid-19* project aims at studying and making recommendations on the governance models that have the greatest potential to respond to convoluted crises such as the Covid-19 pandemic. By collecting quantitative and qualitative data in several

Latin American countries, we seek to generate diagnostic and prospective information about the impact of collaboration on the feasibility, effectiveness, and legitimacy of the responses developed to address the numerous problems that have emerged during the pandemic, especially in vulnerable communities.

The project is grounded in the conviction that defining a framework of good practices in governance, inclusion and gender parity will lay the foundations for a new long-term democratic agreement in Latin America.

Antonella Perini, Jennifer Cyr, and Matías Bianchi

Colabora.Lat is driven by an Implementation Council comprising universities and think tanks with experience in research and territorial anchoring in Argentina, Bolivia, Chile, Colombia, Guatemala, and Mexico.

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Pandemics always bring to light the inescapable connection that must exist between politics and health for countries to be able to overcome these events and assist their people. Furthermore, that connection exists within a social context which may strengthen or undermine the effectiveness of the measures adopted to respond to a pandemic. An analysis of Chile's response to Covid-19 reveals that, in a social, economic, and political context already weakened by the social outburst of October 2019, the Government underestimated the severity of the crisis when announcing to the press that the spread of the virus would be under control within two months. This is evidenced by the announcement of a "safe return" plan which took place only two months after the first case was detected, and amid the rising number of cases in April 2020.

The public policy responses to the socioeconomic consequences were designed using the usual instruments: coercive measures, benefits for the most economically vulnerable groups, and a few subsidies. These responses did not take into account what the social outburst called for, that is, social rights for everyone and a more present state, as opposed to a focus on groups which had been defined as "vulnerable" by the Government itself. The responses of the Chilean state have been based on the same structure in place for forty years: centralized, hierarchic, and without participation. This lack of collaborative governance has led to inadequate specific responses for vulnerable groups. Nevertheless, Chile has also been triumphant in the competition for the vaccine market, coming out victorious thanks to a successful inclusive, mass vaccination process.

The public policy implementation design model in the face of Covid-19: centralized and nearly fully medical

The coordination authorities exclusively created to address the pandemic were highly centralized and quite exclusive in terms of participation. The majority of the members in these task forces are doctors. There is little representation both

in regional terms and with regard to other fields of sciences, as well as no participation from social organizations.

Covid-19 Social Committee

- Set up to propose and drive efficient measures to combat the pandemic.
- Comprised of four ministers, two undersecretaries, two elite university presidents, the medical board, two representatives from international organizations and two local authority associations.

Subcommittee for Data

Established to analyze and study Covid-19 information.

Led by the Ministry of Science and comprised of 16 members (officials from other ministries and university experts).

Covid-19 Advisory Council

- A government-independent advisory council comprised of academia experts and Ministry of Health officers.
- Its purpose is to guide the Ministry regarding the policies that will be implemented to take on the coming stages of the coronavirus protocol, in the face of the growing number of cases in the country. It is a council that convenes weekly and, under the circumstances, also holds special meetings.
- It comprises ten advisors, all of whom are doctors.

Covid-19 Vaccine Scientific Advisory Council

- Nine experts work with the Government to identify and evaluate the most promising developments in the field of vaccines for the next clinical trials to be conducted in Chile.
- The Council is tasked with identifying, and recommending based on scientific and technical expertise, the most suitable candidates for conducting phase III clinical trials, thanks to the talent, skill and experience of our scientific community in this type of testing.
- Nine members, eight doctors and one engineer, in addition to the Minister of Science and the ministry's Head of International Relations.

The two most relevant dimensions of policy: health and socioeconomics, with a focus on economic poverty

Health response

- State of exception and curfews: in force throughout the territory until March 2021.
- Lockdown: the Step-by-Step Plan determines when a municipality goes into or comes out of lockdown, and the steps from it and towards de-confinement, based on the virus spread data. Its effects are uneven. In underprivileged areas, mobility does not decrease as much.
- Testing-traceability-isolation: for members of the public healthcare system, testing is free. Healthcare facilities were prepared for the isolation of people who could not self-isolate at home due to the household's conditions.
- Vaccination: it started in 2020, it is universal and free, and it includes migrants. It has prioritized certain vulnerable groups, such as the elderly and children at custodial centers of the National Service for the Minor.

Socioeconomic response

- **Employment Protection Law:** a universal law for both employers and employees whose work has been adversely affected as a result of the pandemic.
- **Emergency Family Income and Bono Covid-19 relief program:** focused on families with lower incomes. It does not take into account multidimensional poverty variables.
- **Protection Insurance for Self-Employed Workers:** a measure for those whose income has dropped by a minimum 20% as a result of the pandemic.
- **Employment Subsidies:** hiring and re-hiring benefits. The amounts are a bit higher for youth and women (this is the only focus on a vulnerable group).
- **Emergency Maternity Leave after Birth:** the maternity leave after birth is extended.
- Tax measures for small- and medium-sized enterprises.
- **Withdrawal of 10% of Savings on the Social Insurance Funds:** this is the only universal measure in this regard.

Challenges

- To establish a connection between politics and health that brings together different sectors of society and the territory.

- To improve indicators in order to focus public policy on groups which are vulnerable not only in economic terms but also due to structural poverty and in other regards.