Methodology and selected expert opinions on the global and national responses to covid-19

Methodology

This study draws upon desk reviews and consultations with key opinion leaders. We analysed 28 countries, including positive and negative outliers in relation to reported covid-19 deaths per capita among highly populous countries, as well as a selection of countries in the middle ground (as of 6 November 2020).

First, our research team conducted web searches to identify (1) journal articles, (2) news articles, and (3) government policy documents or press releases. We organised the findings according to predefined categories agreed by the team. Second, a total of 25 qualitative interviews with stakeholders were conducted between December 2020 and March 2021. Participants included experts on covid-19 working across academia (n=12), government (n=5), the private sector (n=5), and the not-for-profit sector (n=3). Interviewees were from Europe, North America, South America, Africa, and Asia, with representatives spanning the four sectors. We define experts as "representatives from organisations that manage the covid-19 pandemic at a policy and operational level, conduct research on the pandemic, collaborate with organisations involved in the response, or that are affected by the pandemic." All respondents gave their consent to participate in the study and for audio recording. Confidentiality was ensured with each participant given the option of not being quoted, even anonymously.

We adopted an interpretative approach to data analysis. We coded all interviews primarily through an inductive approach and thematic analysis, using QSR NVivo 12 software, drawing on techniques from grounded theory, such as the use of the constant comparative method, line by line analysis, and discussion of deviant cases. The interviews were conducted in English or Spanish, recorded, and transcribed in full. The study received ethical approval from the Saw Swee Hock School of Public Health at the National University of Singapore.

What the experts say

National governance and leadership to guide timely responses

If you look at the country with good performance, I would almost bet that none of them started blaming other political actors, the subnational authorities, for example, for the failure of the strategy, but, rather, brought them together, coordinated them. So, again, it's the idea, are you in the same boat, or not (interview 11).

I think that it's absolutely critical to have political leadership support and a whole of government approach. And then that will hopefully also extend into a whole of society approach. But in order to do that, you would have to a lot of trust between the authorities and the people (interview 13).

Incorporating scientific advice and evidence into decision making

I think sometimes when politicians said that their decisions were guided by the science, they were relying on science as a prop. They wanted to say that as an excuse for not having to take a difficult political decision (interview 6).

Pre-existing community engagement structures towards greater trust

Why has the west failed, and the west has failed bitterly, I think the west has the biggest failure in this epidemic because the west is about me, myself and I. People are all about "me and my freedom." Whereas take Singapore or Taiwan, or Korea, I mean there's a sense of community to contribute. And if in Japan they were wearing facemasks, it's to protect the community not to protect themselves (interview 25).

The role of social norms and cohesion in shaping national responses

Good leaders, political leaders have capitalised on that to unify people and then make everyone do the necessary sacrifices to protect themselves and then, as a very nice effect, to protect the rest (interview 11).

I think openness and transparency and humility. Because if you have humility, you will listen to people like your advisors and you will also be prepared to say, actually, that didn't go right. That doesn't sound right, and we'll look into that or we will fix it, or we're changing that (interview 14).

Technosciences, social factors, and inequalities: the role of indicators

I don't disagree with you that there are similar patterns for, say, another infectious disease, but the difference is that this has ten times mortality. So, because there's a higher mortality, it brings these inequalities into much starker form. […] it surprises me that we haven't really talked about the notion of a Sindemic very much. […] but I think the important point is that if you focus on this pandemic as, it's only about a virus, then you misunderstand the nature of the threat. And more importantly, you misunderstand the nature of pandemic preparedness (interview 6).

Cross border cooperation to enhance domestic preparedness and response

We have good neighbours who are very successful […]. So, I think regional network and regional dialogue with the support from WHO – not necessarily WHO, but some global consensus would be the one way to do that. (interview 3)