

COVID-19

# Supporting the Centre of Government to respond to the crisis

Africa Cabinet Government Network



## Executive Summary

This brief provides guidance on strengthening the ability of central government agencies – Presidents and Prime Ministers’ Offices, Cabinet Secretariats and special coordinating units – to manage and mitigate the impacts of the Covid-19 crisis sweeping the globe. It highlights the critical need for informed central government decision-making and outlines some areas of possible international support.

**Effective coordination and leadership by the centre of government are critical to the success of national responses and eventual recovery** for a number of reasons:

1

This is not just a health crisis, but **equally an economic crisis**, requiring difficult trade-off decisions and complementary policies determined at the highest levels of government.

4

This central **coordination and leadership must be informed by evidence and analysis**, not just about the behaviour of the coronavirus, but how local communities and businesses are likely to behave in response to possible government measures, as well as evidence on what is working elsewhere.

2

National responses cannot be imported from elsewhere but need to be **tailored for local circumstances**, such as health services capacity, virus transmission chains, housing density, household structure and food security risks. Political leaders need to chart their own course.

5

The **global nature of the pandemic** prevents the large-scale focused international support provided for previous, more concentrated outbreaks, such as the West Africa Ebola outbreak. Global resources, including equipment, supplies and technical advice, are spread much more thinly, with the result that national governments will have to rely more on their own resources.

3

A **whole of government response** is required in each country, engaging with existing arms of government, coordinated from the centre to ensure that all relevant government agencies are harnessed to meet the challenges of the crisis.

6

The **communication role** of political leaders will be critical to influence the behaviour of other stakeholders, for example earning acceptance of (and compliance with) drastic containment measures.

## Authors

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**We recommend that donors should look to strengthen the policy resources, secretariat support and communications capabilities of centres of government.**

Specific donor assistance should depend on local resources and priorities, however **we have identified the following critical areas where donors should consider support:**



-  **a)** Moving quickly to help establish or ensure effective structures and procedures for special Covid-19 coordinating units, to effectively utilise the resources, expertise and networks of existing government institutions;
-  **b)** Mapping roles and responsibilities to avoid gaps and unnecessary overlap;
-  **c)** Building central analytic capacity to rapidly analyse emerging scientific research on the virus itself and possible testing and treatment methods, and to interpret those research results in the local context; developing dashboards and other IT aids for decision-makers;
-  **d)** Supporting communication by political leaders, including public tracking of case indicators and internal coordination to ensure coherent messages;
-  **e)** Articulating national requirements for international support, taking into account public health infrastructure and specific risk areas (such as slums areas or refugee camps);
-  **f)** Centrally driving procurement of critical equipment and supplies, including testing reagents and laboratory capacity, as well as pharmaceutical treatments and vaccines as they are developed and tested;
-  **g)** Providing technical advice on appropriate testing strategies, such as passive testing, sentinel testing and (as yet unproven) rapid blood testing for antibodies, taking into account local transmission patterns and capacities as well as emerging scientific research;
-  **h)** Advising on the use of technological aids to help trace contacts, such as Bluetooth mobile phone apps being used in various countries (especially in higher risk urban areas with greater penetration of smart phones);
-  **i)** Fiscal analysis of stimulus measures and steps to minimise fiduciary risk;
-  **j)** Helping to develop recovery road maps, to ensure staged relaxation of restrictions to minimise the risk of subsequent outbreaks; and
-  **k)** Using new modalities to provide technical assistance remotely to senior government officials (e.g. refocusing or reactivating projects with existing relationships; and support for peer initiatives).

The costs of such proposed interventions are relatively low, the impact high.

## Introduction

The Covid-19 crisis is placing a very heavy burden on political leaders and the institutional frameworks and agencies that support them. If these structures fail or perform poorly, the costs, whether in deaths or economic impact, are disproportionately high.

This paper highlights the critical role of such agencies during the crisis and draws on the experience of the Africa Cabinet Government Network (ACGN) and Adam Smith International (ASI) in providing support to developing nations, specifically to the Offices of Presidents and Prime Ministers, to Cabinet Secretariats and to special coordination units set up to deal with such crises or their aftermath.

### **Effective coordination and leadership by the centre of government are critical to the success of national responses and eventual recovery:**

- This is not just a health crisis. It is **equally an economic crisis**, requiring difficult decisions and complementary policies. These challenging decisions not only involve the obvious trade-offs associated with the economic costs of extreme measures to contain the virus, but also the detailed design of measures to maintain essential services and facilitate recovery. While public health advice will be critical, decisions on such trade-offs and inter-dependencies need to be taken by the highest levels of government, by political leaders with appropriate support from central agencies.
- National responses need to be **tailored for local circumstances**, depending on the capacity of local health services, housing density and household structure, economic activity, labour market characteristics and transport links, as well as cultural and behavioural factors. One size does not fit all. What works in a highly urbanised and relatively developed nation with detached housing will probably be quite inappropriate for densely populated communities or scattered rural villages, with informal or subsistence employment. And national plans need to take account of specific local risks, such as food security risks and the direct and indirect impacts of the crisis on vulnerable groups, such as refugees or migrant workers' camps. Policies cannot be imported; each national government needs to take account of the particular risks and opportunities it faces.
- Experience with previous crises, such as the Ebola outbreak, and emerging lessons from this one demonstrates that a **whole of government**

In Sierra Leone, Adam Smith International has provided technical assistance to the Ministry of Water Resources and Ministry of Health since 2011. The programme quickly adapted its support to help both ministries manage the Ebola crisis.





**response** is required, engaging almost all existing arms of government, ranging from health to education, transport and border control, as well as industry, trade and macro-economic policy. Rapid and effective coordination across these sectors demands engagement of existing structures and processes wherever possible, rather than trying to set up new institutions or entirely new procedures and systems. This is especially important for essential services delivered by decentralised administrations or local government. The requirement is for strong, central coordination, not centralisation of power or delivery.

- This central **coordination and leadership must be informed by evidence**. This is not a time for policy-making by tweet. Global understanding of the coronavirus itself is still developing, with significant implications for effective containment strategies. In making decisions across sectors, political leaders need to be accurately advised on what is working in what circumstances. And how local communities and businesses are likely to behave in response to the possible measures the government can take. Governments also need local evidence on how both Covid-19 and response measures are impacting specific groups, such as women, people with disabilities, refugees, migrant workers and vulnerable minorities. As with many policy and strategic decisions, success depends on the behavioural responses of individuals, communities and/or businesses, for example the level of compliance with government lockdowns. In a crisis context, there is no time for the usual leisurely coordination processes of government; adequate central capacity is needed to rapidly analyse cross-sectoral evidence from international and national sources and to interpret it for the local context - an effective analytic capacity that many governments lack.
- The **global nature of the pandemic** poses additional challenges. Severe restrictions on international travel make it very difficult to deploy advisers and the widespread nature of the crisis prevents the concentrated international effort that, for example, helped to defeat Ebola in a handful of West African nations. Donors and international organisations like the World Health Organisation (WHO) are spread very thinly. Fierce competition for equipment and testing reagents is compounded by competing demands for technical assistance. Compared to smaller scale crises, national governments will have to rely more on their own resources to get through this.
- Finally, political leaders have a primary **communication role** during crises. This role is not just to communicate the government's policy decisions and to publicise the government's effective handling of the crisis but also, critically, to influence the behaviour of other stakeholders. Successful crisis responses depend on gaining acceptance of and compliance with the measures being taken by the government, for example, movement restrictions, social distancing or personal hygiene such as hand-washing.



Many governments lack effective central coordinating institutions to support leaders in these roles. The remainder of this brief outlines some practical recommendations to help centres of government to operate effectively in this crisis and to plan and manage their responses.

The costs of such proposed interventions are relatively low, the impact high.

The brief focuses on the immediate steps that should be taken by the centre of government in developing countries in order to set up Covid-19 response administrative architecture and to manage the response effectively. Some governments have existing emergency response units with proven capacity. Others are setting up dedicated Covid-19 response units.

While there are many technical issues to be dealt during the crisis, such as epidemiological analysis, specialised public health measures and macro-economic policies, this note focuses on the broader role of the centre of government (CoG) in coordinating each Government's response and support for recovery.

From this broader perspective, there are a number of lessons for CoG agencies from previous crises and the emerging experience in dealing with Covid-19 around the globe. The lessons discussed below are drawn from experience of working with central government agencies and emergency response mechanisms.<sup>1</sup>

There is sometimes a reluctance on the part of donors to engage the political leadership and to provide support to the institutional apparatus that directly supports them, and through which they exercise political power. But these are not normal times and such scruples need to be weighed against the looming and as yet unknown longer-term impacts of the virus on societies. Short-term action to strengthen and shore up central government institutions to better equip them to anticipate and mitigate these impacts can be a highly effective use of donor funds.

### Special COVID-19 Coordinating Units

Managing and recovering from the Covid-19 crisis demands a strong state response in developing countries as in richer countries. As noted already, there is a need to balance urgent healthcare and macro-economic responses with planning for longer-term resilience across the spectrum of Sustainable Development Goals. While the crisis is still in its initial stages in many developing countries (at least in terms of confirmed cases), the response will need to be cross cutting - focussing holistically across healthcare, economic stabilisation, education, water and sanitation, public financial management, social safety nets, energy provision and other critical public services.

Effective cross cutting coordination needs to draw directly on the political power of each country's leadership. A whole of government approach cannot be bossed by junior ministers, or public



<sup>1</sup> This experience includes: in Sierra Leone during the Ebola crisis and post-Ebola through the President's Delivery Team; in Libya on a transitional funding mechanism following the collapse of the Gaddafi regime; in Iraq on emergency fiscal management post-Saddam Hussein; in Syria through the Stabilisation Response Mechanism; in Mali through Support to Stabilisation in Central Mali; and in Kenya and Zimbabwe after complex elections and disputed changes in government. The lessons also take into account our experience supporting central government organisations in more normal times, such as the capacity building of African Cabinet Secretaries on the use of evidence in Cabinet decision-making.

health officials suddenly thrust into the limelight with limited political skills or experience.

Procurement modalities, Covid-19 testing regimes and the lifting of restrictions on movement will be politically charged in the developing world as elsewhere. Only those with political authority and capital can lead on these life and death decisions and make things happen.

Put simply, such decisions will place a heavy burden on centres of government – on Prime Ministers/Presidents, their offices, and staff. They cannot be delegated down or passed over. This means that donors must be alive to the need to plug gaps and provide short term emergency resources to these central agencies. They will require more policy and secretariat capacity. Their communications capacity and the technology that supports it will need to be strengthened. Not least to allow effective remote working practices while lock downs are in place.

***Donors should therefore look to strengthen the policy resources, secretariat support and communications capabilities of centres of government.***

CoG response capacity does not, however, mean the unbridled centralisation of response. To be effective the CoG will need to drive the response but will only do so if it can to coordinate effectively with – and rely on the networks and services of – local government, the private sector, NGOs and communities, as well as other arms of the national government. This bears particular emphasis when it comes to changing people’s behaviour during the crisis, as discussed later in this note.

It is important to resist the temptation to bypass mainstream government agencies, whether they are responsible for decision-making and coordination (e.g. national cabinets), policy development (ministries) or service delivery. There is no time to build a parallel government structure or start fundamental reform or capacity building. Many countries have therefore established special Covid-19 coordination mechanisms, but it is important to ensure that major decisions are based on broader economic and service delivery implications, not just technical public health expertise.<sup>2</sup>

## Clarity on roles and responsibilities

**The rapid assessment and mapping of the roles and responsibilities of all levels of government and agencies in respect to the current crisis is a prerequisite in building a platform from which effective Covid-19 responses can be driven.**

The core functions of Covid-19 response units, broadly, should be to:

- collate and analyse data on Covid-19’s impacts and the response;
- plan the response, supporting the leadership to take evidence-informed decisions (see below);
- bolster first line infrastructure, in partnership with private sector, NGOs and communities, including via logistics and procurement;
- engage and galvanise national stakeholders around the governments’ strategy;
- articulate key sector priorities, develop targets for these key priorities, and allocate clear responsibilities;
- take stock and assess progress on a daily basis;
- coordinate donor support; and
- effectively communicate to the public on priorities and delivery progress in partnership with communities.

In developing recommendations for Government leaders, small, regular meetings with key officials and advisers in Cabinet and civil service are preferable to larger groups. Where donors are making significant contributions to the response, it can be advantageous to invite the heads of donor agencies into these meetings.

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<sup>2</sup> The special Ebola coordination arrangements in Sierra Leone failed in the early stages to adequately mobilize all relevant agencies, missing opportunities for more comprehensive action and possibly facilitating some of the corruption revealed later.

Sometimes existing decision-making institutions have been augmented to provide broader engagement with other stakeholders, such as Australia’s National Cabinet, which has brought together federal and state political leaders to make decisions on the crisis, similar to a wartime Cabinet.

Some Governments have also augmented existing decision-making bodies with advice or representation from other key stakeholders, such as business leaders, whose organisations have been adversely affected (in some cases decimated) by national containment measures and will be required to play a key role in restarting economies that have been put into hibernation.

## Evidence-Informed Decision-Making

Scientific knowledge of the virus and its behaviour is developing rapidly, for example on the extent of immunity amongst recovered patients and the effectiveness of possible treatments, as well as new testing procedures being trailed.

**CoG decision-making needs to be based on solid scientific evidence from international sources, with local capacity to interpret that evidence in the local context and to communicate it to decision-makers and other stakeholders.**

Effective responses require daily epidemiological monitoring and modelling, preferably made available to all stakeholders, to enable rapid tuning of containment and recovery measures, to determine what is working, and what is not working, in specific local contexts.

Many Governments are discovering that this data needs to be disaggregated, to enable them to respond quickly at the local level, to jump on local outbreaks and to adjust measures to suit local conditions and risks. Containment measures that work well in the suburbs or sparsely populated rural areas may not be effective in urban slums and migrant/refugee camps, where quarantine or isolation is much more difficult, and where there is greater hardship for poor communities. Measures also need to vary locally according to the stage in the epidemic and, of course, the capacity of local health services.

Decision-makers also need local evidence on likely behavioural responses to possible containment measures, such as the expected degree of compliance with restrictions on movement and social distancing, and the likely economic impacts of shutting down specific activities, as well as appropriate economic relief to offset the micro-economic and macro-economic impacts.

Finally, the evidence and analysis must be presented to decision-makers and, in many cases, to the public. Development of simple dashboards to report daily to political leaders and the public can help to communicate the progress (or lack of progress) in containing the virus as well as the economic impact of the crisis.

With DFID funding and support from ASI, ACGN has worked with more than a dozen African Governments to build their capacity to use research evidence.



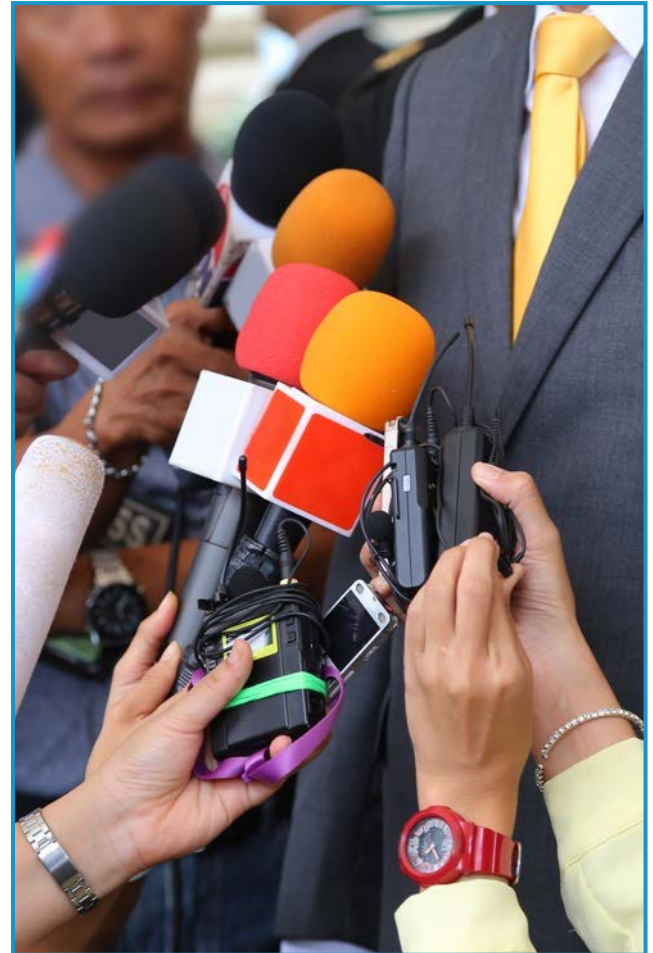


## Communication by Political Leaders

The Ebola experience in West Africa also highlighted the importance of clear and coherent Government communications. Some populations need convincing that the pandemic is relevant for them; others need to be persuaded of the falsity of conspiracy theories transmitted through social media and the inappropriateness of the proposed or implied responses to those conspiracies. The world has already seen a marked increase in racism and abuse of groups suspected of spreading the virus, such as foreigners and health workers.

Containing the virus and sustaining restrictions will depend critically on community behaviour and trust. Behavioural responses to restrictions and other measures, including sustained compliance, will depend on the political context (e.g. trust in Government) and cultural factors as well as law enforcement. Compliance also depends on community acceptance of the need for specific restrictions.

Leadership styles obviously vary with cultural factors and community expectations of individual leaders. What works for the Chinese Communist leader is unlikely to work for New Zealand's Prime Minister, and vice versa, but there are still broad lessons to be learned.



The most important weapon in the fight against the virus will be changing behaviour at the community level, including social distancing and avoiding risky behaviours. In the West African fight against Ebola, the most critical step was to change family and community behaviour, to report cases among family members, to avoid bodily fluids and to change burial practices. Treatment centres, testing and foreign expertise were important, but the most important step was to understand and halt community transmission chains. This proved challenging given widespread distrust of government and was only overcome through extensive efforts to communicate key messages and to engage at the local level with traditional and religious local leaders and opinion influencers.

Trust will be maximised with transparent data on the pandemic. Successful Covid-19 communication strategies emphasise the roles of individuals, communities and businesses in defeating the virus. While the Government may be making major decisions on restrictions and resources, success in the battle will depend on the foot-soldiers. Achievements need to be publicly attributed to community action, rather than Government decisions. And Governments should not be hesitant to publicise setbacks or failures, as these will not only lend credibility to Government reporting but also help justify the strengthening of measures necessary to address those setbacks.

This can be difficult where there is widespread distrust of government, but the experience with previous crises and with Covid-19 so far, is that the winning messages are that "we are all in this together" and "every person needs to play their part".

An ongoing, effective communication strategy requires clear, unambiguous messages at every stage of the crisis, although this does not prevent fine-tuning of measures and even major adjustments to response measures in the light of experience.

Multiple communication channels should be used, as appropriate to local circumstances. In many countries social media and phone apps are playing a major role in getting messages to people and getting feedback. Other possible channels include regular TV and radio shows inviting doctors and experts to discuss the spread of Covid-19 and the precautions communities should take. Live calls and question/answer questions have been helpful in



disseminating information and enforcing the mandatory precautions. And, as mentioned already, local community and faith leaders have an important role to play.

All this requires ongoing monitoring and feedback on the communications strategy, using surveys, focus groups, and consultations with key stakeholders. Governments need honest feedback on how specific messages are being received and how behaviour is changing on the ground.

At least one government, whose new case numbers have declined significantly, is explicitly linking staged relaxation of some restrictions (e.g. local sporting events) to further declines in case numbers and compliance with other ongoing restrictions.

**Communication support for political leaders should be a major focus of donor support, to increase transparency and help political leaders to get key messages across, as well as encouraging feedback on responses.**

## Articulating National Requirements & Procuring Essential Equipment

Each government needs to be able to rank and articulate its requirements clearly and to communicate these needs to development agencies and other international partners. Countries with limited public health infrastructure and/or with significant slums and refugee camps will, for example, require greater support and funding for basic sanitation measures and PPE as opposed to ventilators.

While in more conventional times much of this analysis would be done by donor officials working with government, in the current crisis donor capacity can be augmented by international and local experts given the scale of the crisis and the restrictions on donor official mobility.



**Donors can commission rapid assessments of the needs of individual countries, to be developed in consultation with individual governments so as to ensure a degree of ownership and responsiveness to specific cultural and other contextual issues.**

In the scramble for resources – whether PPE, test kits, field hospital capacity – the governments that can best articulate their needs will be the most successful in securing resources in the face of already fierce competition between countries for medical supplies and equipment. Even developed economies are finding PPE and ventilators difficult to procure and sometimes of unsatisfactory standard. There will also be significant competition when effective treatments and vaccines are developed.

Donors can play a useful role supporting international procurement, not with the usual focus on avoiding improper procurement practices, but helping developing nations to gain access to scarce supplies on the international market, perhaps through international cooperation. They can also help governments to assess lower cost and lower technology equipment currently being developed and tested, for example low cost ventilators.

**Given the scale of the crisis and the international scramble for supplies, CoG agencies may need to play an active role in procurement.** There is a reason that the King of Spain and President Trump, for example, are leading procurement initiatives, to ensure that their countries are able to secure essential supplies.

## Testing Strategies

Increased testing in places like Afghanistan is now revealing large numbers of previously undetected Covid-19 cases, suggesting that relatively low numbers of confirmed cases in many developing countries may primarily reflect limited testing capacity.

In West Africa testing capacity was one of the most important forms of international support, to help distinguish Ebola cases from large numbers with similar malaria symptoms. Testing capacity is even more critical for Covid-19 because of asymptomatic transmission. The global shortage of Covid-19 testing capacity has hindered early responses in developed countries like the US, and will be even more critical for countries with less purchasing power and much more limited domestic capacity.

Technical advice on specific testing methodologies is beyond the scope of this brief and beyond the role of the political leaders. However, with many projects underway internationally to develop alternative testing methodologies and to understand their effectiveness, leaders need to be kept informed of developments and their potential use. At the time of writing the sensitivity and specificity of rapid swab tests has yet to be confirmed, and there is even more uncertainty about rapid blood tests for antibodies, with uncertainty about the interpretation of positive anti-body results in terms of possible immunity.

Political leaders should be supported to make strategic use of such testing technologies as they are validated and become widely available, by determining the criteria to be used to allocate limited testing capacity. Optimal testing strategies will depend on the stage of the epidemic and testing capacity in each country, as well as local economic and social priorities.

Possible testing strategies include passive testing of patients presenting with symptoms, 'sentinel testing' which targets key groups (e.g. supermarket workers) and universal testing of specific populations. Many countries have specifically targeted returning citizens and other arrivals, as well as institutions, such as aged care facilities, workers camps or schools where there have been confirmed cases.

**Donors can not only provide technical support to governments to increase their testing capacity, but also to support CoG strategic decisions on the use of that testing capacity in the light of emerging scientific research and the national context and priorities, for example where testing can allow reopening of key industries or services.**

Rapid testing will be critical for targeting hotspots and mopping up lingering clusters, as countries emerge from the crisis, and will help to target limited vaccine supplies when available.

## Tracing Contacts

Along with testing capacity, a critical success factor in controlling Covid-19 and keeping it under control will be the capacity to trace contacts when cases are identified and confirmed by testing.<sup>3</sup> This will become increasingly important as nations move into recovery stages and need to respond quickly to prevent isolated outbreaks from spreading.

Depending on local knowledge and resources, tracing will be undertaken by local public health authorities. However, a number of political leaders<sup>4</sup> have actively promoted IT support for this tracing, funding development of

<sup>3</sup> Together with behavioural changes (especially for burials), effective tracing of contacts was a major factor in the successful fight against Ebola in West Africa.

<sup>4</sup> including those in Singapore and Australia.



smart phone apps that use Bluetooth connections to track proximity to people who are subsequently confirmed to have Covid-19. The effectiveness of this strategy obviously depends on the penetration of smart phones, but even 20-30% participation can help significantly in tracing potential contacts.<sup>5</sup>

The apps developed in Singapore and Australia have been government initiatives, however global IT firms Google and Apple are now developing their own apps with similar functionality.<sup>6</sup> Even if these apps become globally available, governments may need support to ensure that public health authorities have the technical capacity to upload the data and to use it effectively to trace contacts with a confirmed case.

## Fiscal Policy & Fiduciary Risk

Most developed countries severely impacted by Covid-19 have announced major spending packages to increase health services, to compensate those suffering economic loss and to provide fiscal stimulus to reduce the impact of the looming recession. And most central banks are further loosening monetary policy and printing money.

In many cases the usual fiscal management rules are being discarded, with major spending measures being taken without much attention to the longer-term costs or the difficulties of repaying large-scale debt. Leaders (and the institutions that provide the fiscal conscience in normal times) figure that deeper recession will create even greater difficulties, particularly if the health crisis is deepened and extended.

Countries that were already struggling economically, with limited or no reserves, already high levels of debt and very limited borrowing capacity, face even greater challenges.

There are, however, some general principles that remain in a crisis. One is that extraordinary measures need to be temporary, politically able to be turned off when the health crisis has passed. They need to be designed to have maximum impact in the short run and to be able to be wound back when things improve. Limiting the announced duration of subsidy programmes or financial assistance will not only help to turn them off but is also likely to maximize the stimulus in the short run.

Social support and stimulus measures also need to be designed to avoid exacerbating job losses and to facilitate ultimate recovery. Some countries have already found that government cash payments to unemployed workers exacerbated job losses because employers laid off personnel quickly to enable them to be eligible for government assistance. The alternative of subsidising wages, even when workers are unable to be profitably employed, provides an incentive for employers to retain their employees and avoid losing their skills and experience when they are able to reopen.

Of course, this is much more difficult to achieve where a large proportion of employment is in the informal sector. However, social support and fiscal stimulus should still be designed to avoid creating adverse incentives and to facilitate future recovery by making it easier for businesses, including small and micro businesses, to come out of hibernation.

***Social support and stimulus measures should be carefully designed to facilitate recovery, able to be switched off when needed and avoiding unintended adverse incentives.***

Previous crises also provide some lessons on reducing fiduciary risk, including the importance of ensuring:

- Proper processing of expenditure, which is critical to overall credibility of the response and trust in the Government's management of the crisis;
- Key accountability institutions, such as the Auditor General and anti-corruption bodies, remain operational during the crisis, even if spending programmes are accelerated and approval processes are streamlined; and

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<sup>5</sup> In Singapore and Australia the limiting factor has been concern about privacy; in developing contexts the limiting factor will probably be the extent of use of smart phones with Bluetooth capability.

<sup>6</sup> Reported 4 May 2020 (<https://www.wired.com/story/apple-google-covid-19-contact-tracing-interface/>).



- Donor support for financial management does not provide a veneer of legitimacy to corrupt processes and actually add to the problem.

Inevitably there is pressure during a crisis to shortcut normal anti-corruption processes and avoid making it difficult for those saving lives. However, the Ebola experience highlights that corruption can cost lives too, for example where bribes paid at roadblocks undermine the effectiveness of containment measures or where lifesaving supplies are diverted.

***Donor support for governments should recognise that the crisis demands rapid responses and significant economic stimulus and social support, but ensure that accountability requirements are streamlined rather than ignored.***

## Recovery Road Maps

Winding back containment measures will often involve even more difficult decisions than early responses to the pandemic. Some of the countries more successful in “flattening the curve” are already facing political and economic pressures to relax restrictions as those they start to reduce the spread of the virus and reduce the number of new cases. At the same time, countries like Japan and Singapore are experiencing a second wave of infections.

***Donors should prioritize support for planning recovery, with specific conditions for staged relaxation of measures and deliberate design of stimulus/support measures to facilitate recovery.***

It will be important for each country to develop a credible roadmap out of the crisis, with flexible timetables but clear milestones for staged relaxation of measures. These will depend on the local context, but will typically include:

- Sustained reduction in the rate of new cases at the national or sub-national level;
- Adequate testing to ensure that asymptomatic cases can be detected and outbreaks can be quickly suppressed (e.g. through sentinel testing);
- Adequate health services to deal with further outbreaks, including ICU beds and ventilators, national teams of health workers, cleaners, carers, kitchen staff and other support workers available to back up limited local health services when there is a major outbreak forcing local staff to be quarantined;
- Transparent and credible epidemiological monitoring, together with public communications to maintain compliance with remaining restrictions; and
- Border closures or effective quarantine arrangements at borders to ensure that Covid-19 is not reintroduced through international travel.

Countries with poor health services face fewer options, under greater pressure to prevent or contain an outbreak rather than totally overwhelm their limited health system.

## New Modalities for Support

Finally, some comments on how support for Government leaders to coordinate the Covid-19 response needs to be delivered.

Obviously, assistance would need to be provided remotely given current severe restrictions on international travel. In this context, building internal capacity to develop effective, country-specific strategies will be particularly challenging, especially when working with very high-level political decision-makers. And it is always difficult to provide remote assistance from a standing start, without established trust and relationships built on prior face-to-face contact.

***Flexible modalities should therefore be adopted to provide remote technical assistance, building on established relationships with counterparts and utilising senior, experienced advisers with credible CVs and international reputations among government leaders.***

ASI's success in working with senior government leaders has demonstrated that support for the CoG needs to be through mentoring and coaching, with a range of options, rather than simple 'international best practice' prescriptions based on technical knowledge. Governance support needs to be provided through firms and advisers with experience in providing such support.

One way of building on existing relationships is to refocus or restructure existing projects, or to re-employ key team members from recent successfully completed projects. These could be governance projects working with the CoG, or sector-specific projects combined with CoG coordinating expertise, to work simultaneously with key Ministries as well as President/PM/Cabinet offices.

As well as forcing nations to rely more on their own resources, the global nature of the pandemic may provide an opportunity for greater peer support, with governments sharing their experience with other similar countries. ACGN and ASI have already played a key role in encouraging peer cooperation with support from DFID's Building Capacity to Use Research Evidence Programme.<sup>7</sup>

***But, whatever modalities are used to provide support, it is clear that the political leaders of many developing countries require international support to plan and deliver the whole-of-government responses needed to contain the spread of the coronavirus in their particular circumstances and to successfully manage their nations' economic and social recovery.***

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<sup>7</sup> ACGN is currently considering a virtual conference of African Cabinet Secretaries to share challenges and experience in dealing with the Covid-19 crisis, as well as previous crises such as Ebola.



For more information, please get in touch:



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