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***Pandemic Preparedness from the Security Research
Perspective***

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Pandemic Preparedness from the Security Research Perspective¹

Introduction

This chapter critically discusses pandemic preparedness in the case of COVID-19 from the security research perspective. Security research has been defined as

“research activities that aim at identifying, preventing, deterring, preparing and protecting against unlawful or intentional malicious acts harming [...] societies; human beings, organisations or structures, material and immaterial goods and infrastructures, including mitigation and operational continuity after such an attack (also applicable after natural/industrial disasters).”²

The essence of security research includes – among other things – integrated consideration of ethical, legal, and social issues (ELSI)³ in the evaluation of security policies and strategies across an

¹ Parts of this chapter draw from an article previously published under the title “Pennsylvania’s COVID-19 Response vs. Homeland Security Frameworks and Research: Masking the Whole Community,” *Homeland Security Affairs Journal* 16 (2020), <https://www.hsaj.org/articles/16350>. I would like to thank Lawrence Schätzle for his valuable comments and edits.

² European Security Research Advisory Board (ESRAB), *Meeting the Challenge: The European Security Research Agenda*. Report from the European Security Research Advisory Board (Luxembourg: Office for Official Publications of the European Communities, 2006), <https://www.kowi.de/Portaldata/2/Resources/fp7/coop/security-esrab-report-2006.pdf>.

³ See Katerina Hadjimatheou, Tom Sorrell, and John Guelke, “Ethical, Legal, and Social Issue (ELSI) in Homeland and Civil Security Research and the European Union Approach,” in *Cross-disciplinary Perspectives on Homeland and Civil Security: A Research-Based Introduction*, ed. Alexander Siedschlag, 177-194 (New York: Peter Lang, 2015); Alexander Siedschlag “Ethical, Legal, and Social Issues in Homeland security: What they are and How to Address Them,” in *Foundations of Homeland Security: Law and Policy*, 2nd ed., ed. Martin J. Alperen, 29-54 (Hoboken, NJ: Wiley, 2017); Alexander Siedschlag and Andrea Jerković, “Ethical, Legal, and Social Issues,” in *Handbook of Security Science*, ed. Anthony J. Masys (New York et al.: Springer, 2021, online first Live Handbook version), https://doi.org/10.1007/978-3-319-51761-2_37-1.

all-hazards spectrum, awareness for trade-offs between different security interventions, and the balancing of security as a societal (*not* a governmental) value with other commonly acquired values of a society. Security research is a multi-disciplinary pracademic effort.⁴

The World Health Organization's (WHO) *International Health Regulations* require that member states use their public health powers transparently and in nondiscriminatory ways, with "full respect for the dignity, human rights and fundamental freedoms of persons."⁵ Although geared to international travel, these regulations are also indicative of reasonable expectations in the domestic use of public health powers by members of the United Nations, in particular in the human and societal (as opposed to nation-state) security era.

Against those standards and looking at pandemic preparedness (comprehensively defined as the prevention, protection, mitigation, response, and recovery cycle)⁶ related to COVID-19, the most concerning discovery is a pandemic response style increasingly marked by the political devaluation of fundamental citizen rights. Among the alarming aspects is the line of political argument that the government takes away fundamental rights and freedoms from the citizens as part of the COVID-19 response, and then incrementally returns, or does not return, those rights or freedoms to the citizens based on their compliance with government measures. One would in particular not have expected to see such a conditionalization of "inalienable" constitutional

⁴ Seminal contributions to security research include: J. Peter Burgess, ed., *The Routledge Handbook of New Security Studies* (Milton Park: Routledge, 2010); Lars Gerhold and Jochen Schiller, eds., *Perspektiven der Sicherheitsforschung. Beiträge aus dem Forschungsforum Öffentliche Sicherheit* (Frankfurt am Main et al.: Peter Lang, 2012); Martin Gill, ed. *The Handbook of Security*, 2nd ed. (Basingstoke: Palgrave Macmillan, 2014); Clifton L. Smith and David J. Brooks, *Security Science: The Theory and Practice of Security* (New York et al.: Elsevier, 2013); Klaus Thoma, ed., *European Perspectives on Security Research* (Munich: acatech – Deutsche Akademie der Technikwissenschaften, 2011), <https://en.acatech.de/publication/european-perspectives-on-security-research/download-pdf/?lang=en>; Lucia Zedner, *Security* (London et al.: Routledge, 2009). See also Alexander Siedschlag, "Homeland and Civil Security Research Studies for an Evolving Mission Space: Introduction and Overview of Articles," in *Cross-disciplinary Perspectives on Homeland and Civil Security. A Research-Based Introduction*, ed. Alexander Siedschlag, 1-19 (New York: Peter Lang, 2015).

⁵ *International Health Regulations*, Article 3, Section 1, see World Health Organization, *International Health Regulations*, 3rd ed. (Geneva: World Health Organization, 2015), 10, <https://apps.who.int/iris/rest/bitstreams/1031116/retrieve>.

⁶ For the purposes of this article following the definition in U.S. Department of Homeland Security, *National Preparedness Goal*, 2nd ed., September 2015, https://www.fema.gov/sites/default/files/2020-06/national_preparedness_goal_2nd_edition.pdf.

rights – and the deriving creation of a sense of citizenry with full rights as opposed to a citizenry with restricted rights – emerge in the European Union (EU), and even less so in Germany, for obvious historical reasons. One would also not have expected the majority of the media to uncritically reproduce and affirm such political jargon and practice. However, it did happen and has demonstrated how political and civic culture are superseded by emergency culture, which is reflective of the lack of a firm whole-community culture of pandemic preparedness.⁷

On both sides of the Atlantic, compliance with public health interventions has become politically defined almost exclusively in terms of the willingness to be vaccinated. Those who have chosen not to receive vaccinations have been defamed by authorities, tabloids, and social media as ignoring "science" – while security research pre-COVID-19 had predicted that the development of a vaccine against the next global pandemic would likely take years, and posited that pandemic response would have to be much more complex than relying on pharmaceutical interventions alone.⁸ Therefore, even if COVID-19 vaccines considered safe and secure by authorities have been developed and made available to the public within a few months, it should not come as a surprise that skepticism is significant, also based on what pertinent science had found or assumed before. Those who remain skeptical of interventionist and intrusive COVID-19 response measures at this time are not necessarily all "conspiracy theorists" (media slogan) or "science deniers" (media slogan). Prior pandemic and public health research may in fact support the doubts and value judgments of quite a few of those.

⁷ On the concept of culture in security research, see Hans-Jürgen Lange, Michael Wendekamm, and Christian Endreß, eds., *Dimensionen der Sicherheitskultur* (Wiesbaden: Springer VS, 2014); Alexander Siedschlag and Andrea Jerković, eds., *Homeland Security Cultures: Enhancing Values while Fostering Resilience* (London and New York: Rowman and Littlefield International, 2018).

⁸ William Charney, ed., *Emerging Infectious Diseases and the Threat to Occupational Health in the U.S. and Canada* (Boca Raton, FL et al.: CRC - Taylor and Francis, 2006); Christine Uhlenghau and Walter Biederbick, "Prävention und Krisenreaktion in biologischen Gefahrenlagen – die Mechanismen für den Umgang mit Pandemien, Endemien und lokalen Ausbrüchen," in: *Perspektiven der Sicherheitsforschung. Beiträge aus dem Forschungsforum Öffentliche Sicherheit*, ed. Lars Gerhold and Jochen Schiller, 219-236 (Frankfurt am Main et al.: Peter Lang, 2012). For a general critical review of early COVID-19 response in selected countries as well as from a general risk science point of view, see Jamie K. Wardman and Ragnar Lofstedt, eds., "COVID-19 Special Issue," *Journal of Risk Research*, 23:7-8 (2020), <https://www.tandfonline.com/toc/rjrr20/23/7-8>.

In pandemic preparedness, in particular, research has shown that prevention and response are impacted by a multitude of factors, such as leadership issues in policy and public administration, organizational challenges, public trust, and psychology and sociology of risk perception. While often regarded and sometimes operating as such, the public health sector is not a secluded area of experts but, among other things, needs to include cross-agency training and communication, community involvement, and be able to build its response efforts on an established pre-disaster routine.⁹

This is why a whole-community approach to public safety and security is so important: A sanctioned division of the public into different segments, supported by policy and mass-media-created urban jargon and slang such as “3G,” “2G,” or “1G” entry rules (to use an example from Germany and Austria, standing for, respectively, “geimpft,” “genesen,” or “getestet” – meaning vaccinated, recovered, or tested – or only “geimpft” and “genesen,” or only “geimpft”) or “vaxxed” vs. “unvaxxed” (an example from the U.S.) or “deniers of science” and “conspiracy theorists” (common phrases) goes against the principles and recommendations of security research. Public policy should not linguistically celebrate the exclusion of a substantial part of the population from considerable portions of public life and from exercising some of their “inalienable” fundamental rights. Rather, public policy should evaluate why COVID-19 pandemic preparedness failed to an extent that has resulted in resort to drastic response measures, and why COVID-19 policy and measures have been unable to gain higher public approval ratings and compliance rates. This is where a lot of social science research results could be utilized, speaking of ‘science’ as a guide for pandemic policy.¹⁰ This is not limited to but essentially includes the security vs. liberty problem.

⁹ Meredith Allen, “Public Health Readiness,” in *Homeland Security: Best Practices for Local Government*, 2nd ed., ed. Roger L. Kemp, 116-120 (Washington, D.C.: International City/County Management Association [ICMA] Press, 2010), 120.

¹⁰ Cf. Enrico L. Quarantelli, “A Half Century of Social Science Disaster Research: Selected Major Findings and Their Applicability,” University of Delaware, Disaster Research Center, 2003, <http://udspace.udel.edu/handle/19716/297>.

Balancing Security with Liberty

To declare COVID-19 to now be a “pandemic of the unvaccinated” (political slogan) and to label those who have doubts about the vaccine as “vaccine refusers” (media catchphrase) reduces the problems at hand in a way that raises ELSI concerns and goes against the principle of (inclusive) *societal security*,¹¹ which is an essential security research concept also supported by disaster ethics research.¹² The underlying systematic problem has recently been exemplified by the practice now adopted by all German federal states to strip those unvaccinated who have received quarantine orders of their salary while under quarantine. While federal legislation in Germany provides the grounds for doing so, that only takes the concern to a higher level, also considering quarantine orders are issued by local authorities based on sometimes hard to review standards and not always on thorough results of contact tracing and infection risk extrapolation. Germany’s Basic Law grants fundamental rights that are inviolable and inalienable (Article 1), and even where certain restrictions are permissible based on federal law, the essence of those rights may not be infringed upon (Article 19). The question then remains, at what point does that essence become touchable, and what does that mean? Proper pandemic preparedness policy would, in all cases of any doubt, be overprotective of those constitutional provisions. “Governing security under the rule of law” requires prudent striking of delicate balances,¹³ and the public health domain is no exception.

The U.S. experience can be a useful point of reference but also merits a critical review of its own. To that extent, George Washington’s Letter of Transmittal (of the Constitution as drafted by the Constitutional Convention to the President of the Confederation Congress) of September 17, 1787 is relevant in this context as it explains the intent of the Constitution related to finding the right balance between security and liberty:

“Individuals entering into society, must give up a share of liberty to preserve the rest. The magnitude of the sacrifice must depend as well on situation and circumstances, as on the object to

¹¹ Per Lægveid and Lise H. Rykkja, eds., *Societal Security and Crisis Management: Governance Capacity and Legitimacy* (Cham: Springer Natures, 2018).

¹² Naomi Zack, *Ethics for Disaster* (Lanham, MD et al.: Rowman and Littlefield, 2009).

¹³ John R. Blad et al., eds., *Governing Security Under the Rule of Law?* (The Hague: Eleven International, 2010).

be obtained. It is at all times difficult to draw with precision the line between those rights which must be surrendered, and those which may be reserved; and on the present occasion this difficulty was increased by a difference among the several states as to their situation, extent, habits, and particular interests.”¹⁴

To note, the passage “*The magnitude of the sacrifice must depend as well on situation and circumstances, as on the object to be obtained*” is a reminder that it is inappropriate for any democracy to simply resort to “guidance by science” (political slogan) in order to legitimate public health interventions, as however has become a governance habit in COVID-19 public health policy in the United States and elsewhere.

In prevention, science informs but emergency ethics come first, and difficult political decisions need to be made, not singling out certain members of the community (e.g., those not vaccinated) but striving for a comprehensive approach with the whole community in mind. Science should not and cannot tell a political community how to balance and prioritize its values: ‘Can inalienable citizen and human rights become conditional in COVID-19 response?’ is not a scientific question, it is a political and moral question: “In the context of public health emergencies, ethical preparedness is as important as scientific or technical preparedness.”¹⁵

In public health sciences, it is part of the state of the art that even if we focus on the domain of immediate public health emergency response, we must still understand and be responsive to the needs of citizens and society as a whole.¹⁶ This includes the need to duly consider “intangible consequences of disasters,” such as immaterial losses such as social and psychological pain and recovery,

¹⁴ Letter from the Federal Convention President to the President of Congress, Transmitting the Constitution. September 17, 1787, last accessed September 21, 2021, <http://www.constitutionfacts.com/us-constitution-amendments/letter-of-transmittal>.

¹⁵ Leslie Meltzer Henry, “An Overview of Public Health Ethics in Emergency Preparedness and Response,” in *The Oxford Handbook of Public Health Ethics*, ed. Anna C. Mastroianni, Jeffrey P. Kahn, and Nancy E. Kass. Oxford Handbooks Online (Oxford: Oxford University Press, 2019), <https://www.oxfordhandbooks.com/view/10.1093/oxfordhb/9780190245191.001.0001/oxfordhb-9780190245191-e-66>.

¹⁶ Elizabeth L. Daugherty Biddison, Howard Gwon, Monica Schoch-Spana, Robert Cavalier, Douglas B. White, Timothy Dawson, Peter B. Terry, Alex John London, Alan Regenberg, Ruth Faden, and Eric S. Toner, “The Community Speaks: Understanding Ethical Values in Allocation of Scarce Lifesaving Resources during Disasters,” *Annals of the American Thoracic Society* 11, no. 5 (June 2014), <https://doi.org/10.1513/AnnalsATS.201310-379OC>.

cultural losses, community cohesion, or morale, as first summarized by the United Nations Development Programme (UNDP) in 1994.¹⁷

To add, from a political science point of view, the argument that all policy should follow what is, or is claimed to be, objective facts of science is a socialist one (cf. Marxism). Furthermore, Ulrich Beck's popular "risk society" thesis posited an increased need for science along with an increasing fallibility of scientific advice to policymakers.¹⁸ This having been hammered into the public mind in Germany and elsewhere, the public is not to blame if it holds on to pre-pandemic popularized scientific knowledge and assumptions (as long as one concedes that science transcends laboratory science).

Bioethics of Disaster Resilience

In bioethics, the tendency of public health sciences and practice to focus on risk avoidance (as opposed to risk management) has been criticized.¹⁹ Risk personalization is integral to effective public warning systems and strategies. However, it becomes difficult when "a personal understanding of what was meant by the warning" is difficult for people to form.²⁰ When public crisis communication, as has been the case in COVID-19, becomes fixated on infection counts, hospital beds, and ventilator numbers, as well as sometimes wild extrapolations on case numbers, it does not help to achieve proper risk personalization but risks actually enhancing the "it won't happen here/it won't happen to me" effect,²¹ thus infringing upon public compliance with behavioral instructions such as wearing of masks.

¹⁷ Jane A. Bullock, George D. Haddow, and Damon P. Coppola, *Introduction to Homeland Security: Principles of All-Hazards Risk Management*, 5th ed. (New York et al.: Elsevier, 2016), 511.

¹⁸ Ulrich Beck, *The Risk Society* (Cambridge: Polity, 1992).

¹⁹ Miguel Ángel Royo-Bordonada and Begoña Román-Maestre, "Towards Public Health Ethics," *Public Health Review* 36, no. 3 (May 2015), <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5809831>.

²⁰ Denis S. Mileti, "Factors Related to Flood Warning Response," U.S.-Italy Research Workshop on the Hydrometeorology, Impacts, and Management of Extreme Floods, Perugia (Italy), November 1995, 1, <https://www.engr.colostate.edu/ce/facultystaff/salas/us-italy/papers/46milet1.pdf>.

²¹ Kevin J. Molloy, "The Three Mile Island Nuclear Disaster from an Emergency Management Perspective," in *Cross-disciplinary Perspectives on Homeland and Civil Security: A Research-Based Introduction*, ed. Alexander Siedschlag, 53-69 (New York: Peter Lang, 2015), 69.

From the security research perspective, targeted mitigation orders, including testing or even vaccination requirements for dining, can be interpreted in different ways. They may therefore simultaneously be seen as a realistic protective measure, as a requisite in a security theater, or – as a cultural analysis²² of the COVID-19 response may posit – as a symbolic boundary where public/expert territory is crossed or prohibited from crossing and different moral codes compete against each other. This is a good example showing that a science/research-based approach as legitimation for freedom-restricting COVID-19 response measures must not be limited to data science but also seek and appreciate insights and inputs from disaster research and the broader field of security research. In a security theater situation, measures designed to make people feel more secure without actually making them safer would prevail in the government's response to the threat.²³

“Because the government isn't carefully limiting the permission to gather personal health data on employees, customers, travelers, and people in other public venues, it's effectively endorsing unreliable surveillance systems,” a critique of the U.S. COVID-19 response argued, concluding that “this is the very definition of security theater.”²⁴ Ensuring resilience to disasters, in contrast,

“requires an ongoing process of reflection, dialogue, and adjustment that embraces complexity and ambiguity” and should constitute “[a]n ongoing, iterative process of reflection that attends to the process of securing the homeland as it relates to the people engaged in and affected by the process, [and] the consequences of short-term strategies.”²⁵

This is particularly relevant in the case of pandemic preparedness and considering that public health is classically defined as “the science and art of preventing disease, prolonging life and promoting health through the organized efforts and informed

²² Following Robert Wuthnow, *Meaning and Moral Order: Explorations in Cultural Analysis*. (Berkeley, CA et al.: University of California Press, 1987), 13.

²³ Bruce Schneier, *Beyond Fear: Thinking Sensibly about Security in an Uncertain World* (New York: Copernicus Books, 2003), 38.

²⁴ Evan Selinger, “The Public is Being Misled by Pandemic Technology That Won't Keep Them Safe,” *OneZero*, May 22, 2020, <https://onezero.medium.com/the-public-is-being-misled-by-pandemic-technology-that-wont-keep-them-safe-1966ed740a87>.

²⁵ Richard Sylvès, *Disaster Policy and Politics: Emergency Management and Homeland Security*, 2nd ed. (Los Angeles, CA et al.: Sage, 2015), 18.

choices of society, organizations, public and private, communities and individuals."²⁶

Science and Politics of Pandemic Crisis Management

To summarize, there are no simple solutions, but there is an almost completely ignored, while highly relevant, century-old debate in political science about how scientific insight should inform political practice. Its classic contributions include the following:

Idealist behaviorism as laid out by Charles E. Merriam, who also served as an advisor to several U.S. presidents, in his *New Aspects of Politics* (1925).²⁷ Merriam had argued that political reasoning can be directly improved by improving methods of related research. Merriam advocated "politics as the science of constructive, intelligent social control," based on a well civics-educated rational public.²⁸ Hence, in this perspective, political decision-making can, and should, be based on scientific insight and foster crisis management by scholarly informed intelligent social control. The political principle of a 'data-driven' and 'science-guided' pandemic response is akin to an idealist-behaviorist approach to crisis management.

A different approach, which may be termed *calamitology*, is based on Pitirim Sorokin's *Man and Society in Calamity* (1942).²⁹ A sociologist particularly known for his study of cultural mentality and how it influences social dynamics,³⁰ Sorokin's work provided an important foundation for the theoretical study of disaster. Accordingly, disasters can affect different parts of society differently: they can facilitate social diversification in one place and contribute to the polarization of disaster effects in the next, which

²⁶ C[harles]-E[dward] A. Winslow, "The Untilled Fields of Public Health," *Science New Series* 51, no. 1306 (1920): 23.

²⁷ Charles E. Merriam, *New Aspects of Politics* (Chicago: The University of Chicago Press, 1925).

²⁸ *Ibid.*, 10.

²⁹ Pitirim A. Sorokin, *Man and Society in Calamity: The Effects of War, Revolution, Famine, Pestilence upon Human Mind, Behavior, Social Organization and Cultural Life* (New York, NY: Dutton, 1942).

³⁰ Pitirim A. Sorokin, *Social and Cultural Dynamics*. Vol. I: Fluctuation of Forms of Art; Vol. II: Fluctuation of Systems of Truth, Ethics, and Law; Vol. III: Fluctuation of Social Relationships, War, and Revolution (New York: American Book Company, 1937).

Sorokin refers to as “sinners and saints in calamity.” Moreover, disasters can be expected to reinforce political power as a consequence of the strong need to regulate and control social relationships. *Calamitology* conceives of the role of research in disaster response differently. It does not advocate science as a beacon for judicious crisis management but sees calamities as opportunities for the advancement of science and technology through accompanying social research.

The resulting “unprecedented times” mantra has been used by various governments and public health officials on both sides of the Atlantic, and beyond, to describe the alleged uniqueness of the COVID-19 catastrophe and why it would warrant exceptional measures, including a substantial amount of crisis management by executive order that resulted in substantial restrictions of civil liberty and personal freedom. However, calamitology would still shine a critical light on it. It would look at lessons learned, or not learned, from previous public health crises as well as advocate for planning and preparedness to limit the impact of the personality of political and crisis response leaders as a factor. Calamitology would also admonish crisis decision-makers to not only look at quantitative data in mapping and advocating their course of action but also to factor in the various “intangible consequences of disasters,” as discussed above.³¹

Examples from virtually across the world show that also in pandemic response, there is no governance immunity from the “arrogance of power.”³² In his eponymously titled book, U.S. Senator Fulbright had described “intolerance of dissent” as a “well-noted feature of the American national character.”³³ At the same time, he upheld the “duty of dissent” because – and this appears decisive in times of catastrophic crisis like the COVID-19 pandemic – “to criticize one’s country is to do it a service and pay it a compliment.”³⁴

Since crisis power naturally risks becoming an end in itself, if for nothing else than human nature and the nature of politics itself, it is time to discuss a third perspective on how politics can, and if they should, be guided by scientific insight. A major proponent

³¹ Bullock, Haddow, and Coppola, Introduction to Homeland Security, 5th ed., 511.

³² J. William Fulbright, *The Arrogance of Power* (New York: Vintage Books, 1966).

³³ *Ibid.*, 27.

³⁴ *Ibid.*, 25.

of political realism, arguing against Merriam and others, Hans J. Morgenthau, in *Scientific Man vs. Power Politics* (1947),³⁵ outlined how a political emphasis on science and reason in crisis management causes nations to lose touch with their historic traditions of statecraft. As Morgenthau pointed out, science deals with probabilities but politics require prudent leadership. Morgenthau argued that “belief in the redeeming powers of science” does not exempt the political leader from making the difficult choice of the lesser evil.³⁶

This can be directly applied to the politics of crisis management during COVID-19. Whenever predictive models (such as those of virus spread and infection rates) that come with a lot of parameters and contextual assumptions are thrown at political decision-makers, the resulting governance problems are predictable. COVID-19 pandemic preparedness is no exception, demonstrating the risks that lie in the belief that science is unpolitical and brings salvation.

It is normal for a pandemic to involve “politics of crisis management” as crises put “public leadership under pressure” and public crisis management is not a secretive expert responsibility but an open governance challenge.³⁷ Scholars assume that current political implications for emergency management, already having been quite noticeable pre-COVID-19, will further intensify in the future and lead to a “politicization of response and recovery” phases, in particular.³⁸ Research has found “as much as 50% of all disaster relief being politically motivated or influenced.”³⁹ Disaster response is not laboratory life, and “if the political structure of disaster recovery as well as the historical examples of political response is any indication, emergency managers cannot avoid the impact of politics during disaster response and recovery.”⁴⁰

³⁵ Hans J. Morgenthau, *Scientific Man vs. Power Politics* (Chicago, IL: University of Chicago Press, 1946).

³⁶ *Ibid.*, vi.

³⁷ Aren Boin, Paul 't Hart, Eric Stern, and Bengt Sundelius, *The Politics of Crisis Management: Public Leadership under Pressure*, 2nd ed. (Cambridge et al.: Cambridge University Press, 2017).

³⁸ Adam S. Crowe, *A Futurist's Guide to Emergency Management* (Boca Raton, FL et al.: CRS Press, 2015), 151-174 (Chapter 7).

³⁹ *Ibid.*, 162.

⁴⁰ *Ibid.*, 171.

Preparedness Gap and Ignorance of Imagination

If the COVID-19 response is research-based, as is so often claimed by governments and public health officials, it cannot legitimately claim to have been unexpectedly confronted with the unprecedented in the case of COVID-19. The situation we have been finding ourselves in has not been beyond imagination, and neither has it been beyond expectation: “As with famines and hunger, however, major epidemics and pandemics (international epidemics) of diseases represent only dramatic periodic escalations of an underlying and persistent threat.”⁴¹

For example, according to the *National Biodefense Strategy* of 2018, under its Goal 1, “the United States will build risk awareness at the strategic level, through analyses and research efforts to characterize deliberate, accidental, and natural biological risks” – the related objective being to “ensure decision-making is informed by intelligence, forecasting, and risk assessment.”⁴² Actually, pandemic planning models and scenarios have covered COVID-19-like and worse pandemics for almost as long as the homeland security enterprise has existed:

In the *National Planning Scenarios* of 2005, “Scenario 3: Biological Disease Outbreak – Pandemic Influenza”⁴³ portrayed a hypothetical public health emergency with 85,000 fatalities in the U.S., which the COVID-19 pandemic, however, has by far exceeded; and 300,000 hospitalizations, which is in the dimension of the cumulative number of COVID-19-related hospitalizations nationwide that surpassed 300,000 by end of July 2020.⁴⁴ As a result, based on the scenario assumptions, the load on the U.S. health sector during the first wave of the pandemic had been within the forecast range and hence should not have been unanticipated.

⁴¹ Peter Hough, “Health and Security,” in *International Security Studies: Theory and Practice*, by Peter Hough, Shahin Malik, Andrew Moran, and Bruce Pilbeam, 254-266 (London and New York: Routledge, 2015).

⁴² The President of the United States, *National Biodefense Strategy*, 2018, 6, <https://www.whitehouse.gov/wp-content/uploads/2018/09/National-Biodefense-Strategy.pdf>.

⁴³ “National Planning Scenarios. Created for Use in National, Federal, State, and Local Homeland Security Preparedness Activities,” April 2005, <https://media.washingtonpost.com/wp-srv/nation/nationalsecurity/earlywarning/National-PlanningScenariosApril2005.pdf>.

⁴⁴ The COVID Tracking Project: <https://covidtracking.com/data/national/hospitalization>.

To add, in the Rockefeller Foundation's "Lock Step" scenario developed in 2010, a new influenza virus kills 8 million people worldwide (COVID-19-attributed deaths having amounted to 6.7 million by the end of 2022) and some governments' overbroad response starts to threaten civil liberties and democratic values, evoking mass protest.⁴⁵

Relatedly, the "SPARS" pandemic scenario developed by the Johns Hopkins Bloomberg School of Public Health's Center for Health Security in 2017 addressed possibly emerging public health risk communication challenges of medical countermeasures to a new infectious pathogen.⁴⁶ The scenario in fact assumed the pathogen to be a novel coronavirus, in the scenario narrative referred to as the "St. Paul Acute Respiratory Syndrome Coronavirus (SPARS-CoV, or SPARS)," after the city where the first cluster of incidents had been recorded.

As another example: The National Infrastructure Simulation and Analysis Center (NISAC), founded in 1999, was incorporated by the Patriot Act into the new U.S. Department of Homeland Security (DHS). In 2007, it conducted a pandemic influenza preparedness study. Its planning model estimation was that a catastrophic pandemic would overwhelm the nation's healthcare capabilities in seven to ten weeks, with the healthcare sector going out of capacity and having to reject 3 to 4 million patients.⁴⁷

Moreover, state-of-the-art reviews had identified health policy as an emerging "key element of building resilience."⁴⁸ At the textbook level, "catastrophic pandemic" scenarios including related ethical

⁴⁵ The Rockefeller Foundation and GBN Global Business Network, *Scenarios for the Future of Technology and International Development* (New York and San Francisco, CA, May 2010), 18-25, <https://www.nommeradio.ee/meedia/pdf/RRS/Rockefeller%20Foundation.pdf>.

⁴⁶ Monica Schoch-Spana, Emily K. Brunson, Matthew P. Shearer, Sanjana Ravi, Tara Kirk Sell, Hannah Chandler, and Gigi Kwik Gronvall, *The SPARS Pandemic, 2025-2028: A Futuristic Scenario for Public Health Risk Communicators* (Baltimore, MD: Johns Hopkins Center for Health Security, 2017), <https://jhsphcenterforhealthsecurity.s3.amazonaws.com/spars-pandemic-scenario.pdf>.

⁴⁷ U.S. Department of Homeland Security, *National Infrastructure Simulation and Analysis Center, National Population, Economic, and Infrastructure Impacts of Pandemic Influenza with Strategic Recommendations* (Washington, D.C., October 2007), 4, <https://info.publicintelligence.net/PI%20FINAL%20-%202012-21-07.pdf>.

⁴⁸ Anne Tiernan, Lex Drennan, Johanna Nalau, Esther Onyango, Lochlan Morrissey, and Brendan Mackey, "A Review of Themes in Disaster Resilience Literature and International Practice since 2012," *Policy Design and Practice* 2, no. 1 (2018), <https://www.tandfonline.com/doi/full/10.1080/25741292.2018.1507240>.

decision-making challenges have been covered as well.⁴⁹ We have been teaching our students for quite some time the catastrophic character of a potential crisis like the one now materialized in the form of COVID-19, also due to the systemic risks of our “‘just-in-time delivery’ economy”: “the United States has no surge capacity for health care, some food supplies, and many other products and services.”⁵⁰

Hence, the COVID-19 pandemic was by no means beyond imagination, nor should it have been a surprise for emergency management, the public health preparedness community, and the National Preparedness System in the United States. The problem was no failure or lack but ignorance of imagination, and similar inferences may be made for countries in the EU and elsewhere in the world.

Conclusion

Seldom in the era of modern democracy have so few restricted so many in so much as in the COVID-19 response. In his *System under Stress*, Donald F. Kettl in one chapter addresses the challenge of “Balancing Liberty with Protection”:

“Americans have always treasured their ability to go where they want when they want. They have long valued the freedom to choose their jobs and chart their careers, to live their lives without government scrutiny, and to associate with people of their own choosing. So important are these values, in fact, that many states refused to ratify the U.S. Constitution until, in 1789, Congress proposed a bill of rights. But at the same time, Americans have always expected their government to protect them from threats.”⁵¹

This ambivalence may also apply to other nations. It is not easy to resolve but it is also not self-evident to default to just erring on the side of protection at the expense of liberty. COVID-19 adds to the challenge, even more than any pandemic naturally would, as considerations of universal mask mandates, mandatory testing, and contact tracing, as well as other mitigation and response

⁴⁹ Linda Kiltz, “Case 5.1: Catastrophic Pandemic: Cases in Ethical Decision-Making,” in *Critical Issues in Homeland Security. A Casebook*, ed. James D. Ramsay and Linda Kiltz, 211-231 (Boulder, CO: Westview, 2014).

⁵⁰ *Ibid.*

⁵¹ Donald F. Kettl, *System under Stress: The Challenge to 21st Century Governance*, 3rd ed. (Thousand Oaks, CA: CQ Press, 2014), 119.

aspects that combine restrictions with surveillance, are “ultimately demanding of citizens that, in order to be secure, they must also allow security to be practised through their bodies.”⁵² Of course, this is not a new dilemma and it was prominently addressed in *Jacobson v. Massachusetts* (1905),⁵³ where the U.S. Supreme Court upheld that states have the constitutional authority to enforce compulsory vaccination laws. The Court thus held the view that the constitution does not establish individual liberty as an absolute principle but ultimately subjects it to the law-enforcement power of the state, and that the rights of the individual do not outweigh the rights of the collective.

While intrusive public health interventions as seen in the case of COVID-19 may not go against the constitution (in the U.S. and elsewhere), security research would still advise focusing on societal security principles and the cultivation of a civic culture that generally embraces public health precautions as part of the everyday way of life.⁵⁴

Adding to the complexity of the decision-making challenges, research in the field has argued that government-set target values for the health sector are more of a mixture of different risk perceptions and political objectives than based on evidence, in particular when it comes to setting action-triggering numerical thresholds, such as infection rates, hospitalization rates, or vaccination rates.⁵⁵ A “*collibrational approach*” has been proposed that is committed to weighing different principles and various stakeholder groups’ concerns, would try to balance risk and risk avoidance versus risk management, as well as factor in principles of democratic security governance.⁵⁶ Such a recommendation is in line with the standing observation that

⁵² Stefan Elbe, *Security and Global Health* (Cambridge and Malden, MA: Polity, 2010), 165.

⁵³ *Jacobson v. Massachusetts*, 197 U.S. 11 (1905).

⁵⁴ See Martin J. Alperen, “Resiliency and a Culture of Preparedness,” in *Homeland Security Cultures: Enhancing Values while Fostering Resilience*, ed. Alexander Siedschlag and Andrea Jerković, 280-293 (London and New York: Rowman & Littlefield International, 2018); Chad S. Foster, “Achieving a Culture of Disaster Resilience,” in *Homeland Security Cultures: Enhancing Values while Fostering Resilience*, ed. Alexander Siedschlag and Andrea Jerković, 127-141 (London and New York: Rowman & Littlefield International, 2018).

⁵⁵ Agnieszka Latuszynska, Trish Reay, and Eivor Oborn, “Managing Risk in Healthcare Settings,” in *The Routledge Companion to Risk, Crisis and Emergency Management*, ed. Robert P. Gebhart, Jr., C. Chet Miller, and Karin Svedberg Helgesson, 378-391 (New York and London: Routledge, 2018), 388.

⁵⁶ *Ibid.*

“Risk has become systemic. It cannot be divided into categories that are then assigned to health authorities, disaster management agencies or early warning centres. If governments continue to operate in this way, the bigger picture as a disaster unfolds will remain unseen and the solutions will not be fit for purpose.”⁵⁷

To conclude, as United Nations Secretary-General António Guterres, reminded us,

“The best response is one that responds proportionately to immediate threats while protecting human rights and the rule of law. More than ever, governments must be transparent, responsive and accountable. Civic space and press freedom are critical. Civil society organizations and the private sector have essential roles to play. And in all we do, let’s never forget: The threat is the virus, not people.”⁵⁸

⁵⁷ Mami Mizutori, “What COVID-19 Tells Us about the Changing Nature of Disaster Risk,” PreventionWeb, last published April 23, 2020, <https://www.preventionweb.net/news/view/71448>.

⁵⁸ António Guterres, “We Are All in This Together: Human Rights and COVID-19 Response and Recovery,” United Nations: COVID-19 Response, last published April 23, 2020, <https://www.un.org/en/un-coronavirus-communications-team/we-are-all-together-human-rights-and-covid-19-response-and>.

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