

## ► ARE WE REALLY AT WAR WITH COVID-19?

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<https://sciencepolicy.ca/response-covid-19>

Our leaders and media have latched onto the war metaphor to describe the public health response to the COVID-19 pandemic. I don't know about you, but I think that sends all the wrong signals and distorts the policy and public response we need.

In the recent past we have declared war on poverty, cancer, crime and disease, to name but a few. We launch these campaigns with great enthusiasm and a goal of vanquishing the enemy. Regrettably, outcomes seldom match the rhetorical goals and we often waste time and resources that could have made a difference.

The war metaphor imposes a set of assumptions that distorts how we think and act. In early days of the pandemic, the all-hands-on-deck strategy may have been the most effective way of responding.

But now we know more about the disease and have built medical capacity to assist those most in need. We now need to be exploring strategies to quickly yet safely restart our economic, social and community activities.

The war metaphor leads to a few simple yet wrong assumptions that will hurt this effort.

First, the war analogy implies there is some external aggressor. Initially that was foreigners, mostly coming from Wuhan or cruise ships, and now everyone from outside your neighbourhood. Barricades, police checks and information stop-checks between our provinces, at the boundaries of some

communities, in cottage country and in many First Nations symbolize the idea that it is others that are infecting us. That is false logic now and undoubtedly distorts our actions.

Second, wars need to have a goal, and when context changes we should reassess our actions. Already in this pandemic circumstances have shifted widely, with little or no change in strategy. Our initial goal was to vanquish the disease, first by stopping its spread, then to flatten, plank and now, crush the curve. With more than 2 million confirmed cases worldwide (and up to 10 times more undiagnosed cases), COVID-19 is now endemic. We were going to have to find ways to live with it, rather than to vanquish it.

Third, wars tend to become all-in efforts. This creates all-in thinking and decision making. In the context of COVID-19, that has led to a total fixation on the infection and death rate of this single disease. For those in our hospitals, nothing else probably matters, but in a country of almost 38 million people, this war has engaged less than 20% of our population directly. The rest of us have been asked, some ordered, to cease activities and wait for instructions. In the meantime, everything else we value is in limbo. Jobs and retirement wealth are lost, firms are folding, other diseases are not being treated, and we are doing little or nothing to address other social priorities. The opportunity cost of the current strategy is high and growing.

Fourth, wars lead to unity of command. Governments everywhere are centralizing resources to fight the disease. This leads to overreach. The Liberal government in Ottawa sought unlimited spending and taxation powers without parliamentary oversight for 21 months and mooted invoking the Emergency Act to consolidate powers in

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the federal executive. Provinces, regions, cities and First Nations are arbitrarily setting up border checks, with no effective oversight. Cities have attempted to impose emergency orders beyond their competence to administer. Police are exploiting their new powers to enforce the letter of the law, regardless of the context and degree of risk involved. Most of these excesses have been pushed back but on-balance power is being centralized, with few benefits.

Finally, the one certainty of war is that truth is the first casualty. Governments in the



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# MAKING WAVES



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heat of battle censor, distort and mislead to boost morale and create a unity of purpose. All governments in times of war distrust citizens and don't have the time, patience or inclination to engage in normal debate. The cloak of war is well and truly in place in Canada, with most governments preferring to release only high level infection and death rates, to keep their underlying models and planning assumptions hidden and to generalize about the risks for the general population. We are only seeing what governments want us to see.

The military metaphor is especially poor as we begin to discuss the recovery and reconstruction effort that lies ahead. It is time to change the rhetoric.



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