

Editorial Dossier

State interventions and COVID-19

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The State as a public and societal policy maker

We will start by recognizing that it is only possible to think and reflect about the role of the State from the categories and disciplines that have been constructed by a knowledge that is arbitrarily shaped by the State itself. The condition for identifying and clarifying the interactions between the elements that it is composed of presuppose that “we must try to question all the presuppositions and all the preconstructions that are part of the reality that we are trying to analyze and part of the very thinking of the analysts” (Bourdieu, 1993, p. 1).

Thus, the State is considered the political institution par excellence and it is the one that executes policies aimed at producing various effects on society as a whole, modeling and shaping both the public and private spheres of the subjects (Scribano and De Sena, 2013). For this reason, reflections on its actions known as *public policies* take on a central significance. In view of all the contradictions that the State represents and that make it compatible, the State has been and is “the maximum instance of social coordination [while] it is what it does” (Oszlak, 1997, pp. 3-4), so that it is judged on the basis of its actions, of its public policies.

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From a classic definition, such as the one coined by Oszlak and O'Donnell (1976), public policies can be analysed from at different legal and administrative levels, making it possible to identify the presence of the State in its multiple manifestations. This makes it possible to identify the different forms of State presence in people's daily lives, noticing "the manifestations of its cellular presence in the organization of a society's life" (Oszlak, 2011, p. 4). The State thus permeates the totality of practices of everyday life, through its actions and/or omissions, its presence and/or absence.

The State materializes its presence in society through public policies that "address", "respond" to certain expressions of the State agenda or to problems that express the social question. These actions allow for a certain interpretation of reality, "they indicate, with greater clarity, in which direction the State's actions are moving. These positions constitute, in fact, the public policies or state policies of the agencies responsible for resolving the issues on the agenda" (Oszlak, 2011, p. 2).

Under this initial analytical umbrella, public policies are instances for taking action on the social body that begin with the process of identifying and defining an event on which to act. Tamayo Sáez (1997) refers to this event as the detected *problem* that initiates the life cycle of the intervention. This identification process mobilizes and makes actions feasible in order to address or mitigate it (Tamayo Sáez, 1997). However, we will say here that its solution does not imply its resolution in substantive terms (Oszlak, 2011).

The process of formulation, implementation and evaluation of public policies implies drawing attention to a given political project, within the framework of a political-administrative system that responds to the current accumulation regime. Therefore, these interventions necessarily reinforce the political power of one group to the detriment of another, as they generate processes that are intrinsic to the State, which are complexly intertwined with the social phases related to the emergence, treatment and resolution of the "issue" that they are trying to solve (Oszlak and O'Donnell, 1976). Public policies, in this way, dispute meanings in relation to the problems they claim to address, which are embodied in the normative and institutional designs (Ramacciotti, 2010).

State interventions in the form of public policies in the context of pandemics are not alien to this general framework. Since each of the State measures implemented in the aforementioned context have established certain ways of addressing the situations, which have condensed certain images of the world in relation to the problem (Scribano et al., 2015). That is, particular schemes of classification and division of reality, which inscribed in the design, implementation and evaluation of public policies, have offered one -and only one- reading of the problem.

In this sense, we will say that public policies are “policies” because they entail a set of actions, omissions and interests of multiple actors. They materialize the ways in which political, economic and social needs are constructed and expressed in a given space and time. Additionally, they reveal a particular state of alliances and class struggles, giving way to definitions regarding the nature of the problems to be addressed.

The State, then, materializes itself through the public policies it implements, these being the product and producers of these times (Cena, 2018). For the first of the senses, state interventions are the result of a particular moment inscribed in certain models of state and society (Titmuss, 1974). Regarding the second sense, public policies impact, produce and dialogue with the what and the how things are and the feeling of the society. With this conceptual theoretical foundation, in the following section we problematize three complementary elements that account for public policies as makers of society. We explore some conjunctural aspects of COVID-19 as a scenario for problematizing the actions of the State; we also account for some nodal characteristics of Latin America in order to stress and complexify the “arrival” of the pandemic in a structure deeply marked by inequality. Finally, we briefly present the articles that make up this dossier, as they analyze and recover interventions resulting from the aforementioned context.

The COVID-19 pandemic as a context for analysis

At the end of 2019, we began to hear and read that in the Chinese city of Wuhan a new virus causing some type of pneumonia had been identified, which required the implementation of a strict quarantine. By 2020, it had left the Chinese borders and we began to become familiar

with the term COVID-19, a virus that spread not only to the rest of Asia and Europe, but also to the rest of the continents, including Latin America. The number of infections increased rapidly and, finally, on March 11, the World Health Organization [WHO] declared the coronavirus outbreak a pandemic. By March 16, 139 countries had been affected (Pan American Health Organization [PAHO], 2020).

The COVID-19 pandemic has become an event that has changed work, education, our daily lives and social practices on a global scale. Very quickly we witnessed the “closing” of cities and flight cancellations. Passenger ships tried to return to ports. Schools, temples, commercial centers, factories, banks and recreational facilities were *temporarily* closed waiting “for it to pass.” All of this happened with the uncertainty of having no knowledge of the behavior of the virus. Multiple investigations were launched from all disciplines in the face of confusion and uncertainty, while only one thing appeared to be certain: the high level of contagion and “isolation” being the sole means of prevention worldwide. This method was nothing new and had already been used during other pandemics over the years, such as the Spanish flu of 1918.

The 21st century is entering its third decade with a disease that has led more than 3 billion people to comply with various regimes of social isolation. This includes maintaining a distance of at least 1.80 meters from other human beings, to continuously wash their hands, and to use alcohol gel, and face masks. Within the sudden and wide-ranging transformations in all practices of daily life, the ban on movement became established, except for people working in areas considered “essential”. This is how the categories of “essential” and “non-essential” began to appear, concentrating this definition on a series of possibilities and restrictions on behavior. This novel situation for the 21st century has led to new forms of isolation and social distancing all over the world. It has also led to a review of the performance of healthcare systems and the “discipline” of individuals in complying with the new regulations issued by the national and/or local authorities.

Against this background, the emergence of COVID-19 has put the vulnerabilities, shortcomings and fragilities of the world in the spotlight. This has been no more evident than in Latin America, where all

the problems have worsened and state responses have been far from substantial solutions.

We will briefly describe some Latin American indicators in order to contextualize the consequences of the COVID-19 pandemic. The continent has been one of the most affected regions in the world, both in terms of the number of cases of infections and deaths. As of December 2020, the region accounted for 18.6% of the accumulated COVID-19 infections and 27.8% of deaths caused by this disease (CEPAL, 2021).

One of the first issues we could mention is that in Latin America and the Caribbean, 80% of the population lives in urban areas, and particularly in South America 30% of the population is concentrated in megacities (Buenos Aires, Mexico City, Lima, São Paulo, Rio de Janeiro), constituting an important risk factor, due to the fact that the virus is more transmissible in places with high population density (Banco Interamericano de Desarrollo [BID], 2018; CEPAL, 2021). A worrying and persistent feature of the continent is inequality:

the income captured by the richest quintile (quintile V) represents about 45% of household income, while the average income of the lowest income quintile (quintile I) is just 6% of total income (BID, 2018, p. 3).

According to the Gini index, the region stands at 0.4675, although with large differences between countries (BID, 2018). By 2019, poverty levels was 187 million –that is, 30.5% of the region’s population–while extreme poverty reached 70 million 11.3% of the population (CEPAL, 2021). By 2020, it was estimated that extreme poverty would stand at 12.5% and poverty would reach 33.7%. This would mean that the total number of poor people would climb to 209 million by the end of 2020, 22 million more than the previous year. Of this total, 78 million people would be in extreme poverty, 8 million more than in 2019 (CEPAL, 2021).

Of the approximately 59 million people who in 2019 belonged to the middle-income strata and who in 2020 would have experienced a downward slide in economic mobility, slightly more than 25 million people would have done so without dropping out of the middle-income strata. At the same time, slightly more than 3 million people would have fallen directly into poverty or extreme poverty and the re-

mainder would have slipped into the low-income stratum albeit does not fall below the poverty line (CEPAL, 2021).

Meanwhile, informal work in Latin America and the Caribbean has reached 53.8% (Bertranou, 2019). However, since 2015, labor market indicators have shown adverse trends in the region, such as an increase in unemployment, as well as a worsening of the quality of employment. In this context we, we must add the profound effects of the pandemic, the various forms of isolation have directly affected the population's ways of life. In this regard, one of the main impacts has been the reduction in employment. This differs according to the country and the restrictions imposed, as well as the employment protection measures (CEPAL, 2021).

In terms of social security, before the crisis brought on by the pandemic, only 47.2% of employed persons were affiliated or contributed to pension systems, and 60.5% were affiliated or contributed to health-care systems. In parallel, in 2019, a quarter of people aged 65 years or older did not receive a pension, while conditional transfer programs reached 18.5% of the population in Latin American and Caribbean countries (CEPAL, 2021).

As mentioned earlier, the region's cities and metropolises - in addition to population density - have several deficits that constitute important risk factors for the spread of the virus. By 2019, 30% of urban households in the region were overcrowded. Besides, there are some basic infrastructure problems such as a lack of access to water, sanitation, electricity and Internet services, along with a precarious and saturated public transport (CEPAL, 2021).

Latin America has an abundance of water resources, but there are two major elements to consider: on the one hand, the heterogeneous geography strongly determines the level of access to water, with scarcity in some areas and abundance in others. The availability of usable water is also jeopardized by contamination (BID, 2018).

More than 13 million urban inhabitants do not have access to improved water sources and almost 61 million to improved sanitation facilities, a situation that is worse in the rural sector. So, significant progress is still required in that regard (...) If we take the criteria of the Sustainable Development Goals (SDGs) into consideration,

these gaps become more evident. Indeed, according to definitions compatible with the SDGs (“safely managed services”), only 65% of the region’s population has access to safe drinking water and 22% to sanitation. (BID, 2018, p. 10).

In Latin America at least 65 million people do not have access to water and soap, washing hands is not such a simple task, which in the current context of the pandemic, has become essential. In addition, in terms of sanitation, 15 million people defecate in the open air in Latin America (UNESCO, 2020), which shows a scenario of deep and diverse inequalities that have been exacerbated by COVID-19.

In terms of inequalities, gender violence has also come to the fore during the pandemic. By 2019, it was estimated that one in three women had experienced physical, psychological, patrimonial or sexual violence from their partner at some point in their lives. Additionally, two out of three women reported having experienced sexual harassment at work or in the street. In the same year, there were 4,555 cases of femicide (CEPAL, 2020). This has worsened due to a return to isolation and overcrowding during Covid-19, which women had previously been escaping from.

In view of all the measures taken by the State, understood as public policies, as well as the particular circumstances in the region that have been exacerbated by COVID-19, the role of the State and its actions are open to debate. The present issue revolves around the following topics: healthcare, work, education, violence and social welfare. All of these expressing the tensions and complexities of the COVID-19 circumstances.

Starting with healthcare, the article, “*Cuidados en América Latina: una investigación exploratoria en el contexto de la crisis sanitaria*” (Healthcare in Latin America: an exploratory investigation in the context of the health crisis), reviews healthcare policies and measures aimed at preventing the spread of COVID-19. It looks at how this had the biggest impact on the female population, migrants and economically dependent people. The document explores how labor, gender, class and ethnic inequalities exacerbate the problems brought by the health crisis. At the same time, it aims to expose how public policies often reinforce these inequalities and negatively impact, women, migrants and dependent people.

The second topic in which these articles focuses is labor, particularly, labor policies in Latin America that have greatly contributed to the inequality and fragility which has been worsened by the pandemic. The following two articles explore the conditions of employment, informal work, unemployment and precarious work. In the second article, entitled *COVID-19 en Ecuador: luto en el periodismo y zozobra informativa* (COVID-19 in Ecuador: mourning in journalism and troubling information), the authors discuss the labor instability of working as a journalist in Ecuador. They highlight the lack of minimum-security standards for journalists covering stories and how the general public and labor unions have responded to this situation.

The third article addresses the educational situation and how students and teachers have had to migrate to virtual classes. The text is entitled *Implicaciones de la pandemia por COVID-19 en la salud docente. Revisión sistemática* (Implications of the COVID-19 pandemic on the health of teachers. Systematic Review). The article systematically reviews and analyzes the unprecedented changes that COVID-19 has brought about in the teaching profession since March 2020. Telework became the new *modus operandi* for teaching classes and this resulted in new health problems for teachers. In this article, the author raises questions about the health of teachers after reviewing 26 texts, concluding that health/illness of teachers is a recurrent issue in international research. Telework, as an educational policy, disrupted the personal, professional and family lives of teachers affecting them both physically and emotionally.

Finally, the following articles review the State and its actions ranging from social welfare policies to violence. Regarding Chile, the fourth article of this dossier, problematizes *La 'política del 10%': respuesta de la élite política chilena en tiempos de pandemia* (The '10% policy, which the Chilean political elite used as a response to the pandemic). The article analyzes the institutional responses to the pandemic, focusing on the discourse, considering it as a methodological tool to explore in-depth a symbolic watershed moment. The purpose is to address the interactions, contradictions and representation of the political elite towards certain segments of society. At the same time, is highlighted how emotional mind games shaped the result of allowing people to withdraw their pension funds through an

unprecedented constitutional reform. One of the conclusions is that the pandemic showed the need to modernize information channels for decision-making in public policy. Covid-19 made us aware of the lack of coordination within the institutional framework and thrust the middle classes into the center of the political debate regarding institutional inequality.

This issue concludes with an article on Colombia entitled *COVID-19, estado de excepción, autoritarismo y recrudecimiento de la violencia en Colombia* (COVID-19, state of emergency, authoritarianism and the resurgence of violence in Colombia). It shows another side-effect of the pandemic: violence. The article discusses how the concepts of states of emergency, neoliberal authoritarianism and biopolitics allow the analysis of concrete social phenomena caused by the intervention of the Colombian government during periods of quarantine between March and September 2020. The piece reviews literature, official statistics and reports from human rights organizations and concludes that during the pandemic, the number of violations of international humanitarian law (IHL) has intensified. The article claims that there was an increase in the stigma associated with and criminalization of social mobilization and collective action. There was a spike in human rights violations by public security forces, massacres, assassination of social leaders, heads of ethnic minorities as well as demobilized members of the Revolutionary Armed Forces of Colombia (FARC-EP). There was an uptick in structural violence resulting from increased poverty, restrictions on freedom of movement and access of the most vulnerable members of Colombian society to basic health services and vaccination.

The following articles will allow us to reflect on the pandemic, which is still evolving, the amalgamation of the old and the new, and the overlapping of new problems with deep-seated and long-running inequalities (Cena and Dettano, 2020). In particular, the articles reflect on state intervention, and successive attempts to “flatten the contagious curve” in the midst of a pandemic that “has exposed what many of us already saw” (Scribano, 2020, p. 65), only now more critical and deep-seated. It discusses the innumerable consequences that still cannot be quantified in any single curve of contagion. Along with that, it looks at how in the face of inequalities exacerbated by the pandemic, States chose ways

of controlling the virus, political discourses and practices akin to those taken in the 19th and the beginning of the 20th centuries: quarantines and social hygiene that have come back to haunt us in the 21st century.

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