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The antinomies of sovereigntism, statism and liberalism in European democratic responses to the COVID-19 crisis: a comparison of Britain and France

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Abstract

This paper argues that the current COVID-19 pandemic reveals and in a sense crystallizes a series of long-standing tensions about sovereignty that have become increasingly salient in the advanced capitalist democracies of the European Union. The spread of the pandemic led first to the activation of a conflict between a 'sovereigntist reflex' privileging the expression of national capacities and national self-reliance and a more 'perforated' understanding of sovereignty stressing the interdependence of peoples and states, both geographically and institutionally. As the response to COVID itself became more politicized we see the emergence of a second tension, between a libertarian 'reflex' supporting a residual state protecting liberties and facilitating individual choice and a sovereign-statist 'instinct', calling for an empowered guardian of the public good capable of ensuring collective security. A third tension relates to the seemingly growing opposition between a conception of sovereignty founded (and contingent) upon the will of the people and one in which the sovereign is, simultaneously, the discerner, defender and ultimate guarantor of the public good. After having mapped out these interwoven tensions and their main fault lines in general terms, the paper proceeds comparatively, tracking and tracing their (differential and specific) presence in governmental responses in two advanced capitalist democracies, France and Britain.

Keywords COVID-19 · Sovereigntism · Libertarianism · Statism · Public good · France · Britain

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Introduction

Imagine for a moment reading this in December 2019. Our colleagues have invented a time travel machine. It does not work very well, offering insights into the future but only over short temporal distances. They have let us have first use of it for the purposes of this paper. We are just back from the near future, and we can tell you that it is not pleasant. We prepare you for the bad news with a list of some of the effects: the price of oil will turn negative; an almost unprecedented stock market crash will occur, and yet the value of Zoom shares will sky rocket; billions of people in the world will see their domestic parliaments shut; US unemployment will rise by 30 million in 2 months (and by closer to 40 million in 6 months); the free movement of goods and people within the European Union (EU) will be suspended; we will see the lowest per capita global carbon emissions in 20 years; yet the transport minister of a European democracy will declare that it is a 'civic duty' not to use public transport[1]; at 8 pm on the dot, in the large cities of many western democracies for day after day, week after week, citizens will enthusiastically clap core public sector workers; the Olympics will be postponed; and the Dutch government will publish official advice to those of its citizens regarding themselves as 'single' to restrict themselves to just the one 'sex-buddy' until further notice.

You might struggle to identify the single triggering factor in all of this. But there are clues in the list, and the more forensically minded of you might just about be able to hazard a guess. That in itself is interesting—telling us quite a lot about the situation into which the COVID-19 crisis has pitched us. For a pandemic of this kind was envisaged (in the sense of being foreseen) if not, it turns out, anticipated (in the sense of having been prepared for).

No less interesting we contend is that many (if not quite all) of these strange events (these symptoms, if you like) illustrate and might even be seen to arise from a common set of political tensions and potential paradoxes. COVID-19, we will argue, exposed and exacerbated these tensions; though it is not responsible for having created any one of them. Each predates the crisis. Identifying and describing as clearly we can these tensions, exploring the politics that they have served to unleash and illustrating how and to what extent they are present in governmental responses to the spread of the pandemic are the main objectives of this paper. We suggest that the COVID-19 crisis, exceptional and unprecedented though it is, makes clear what we could have seen, but did not. In making this claim, we do not seek to dismiss nor to diminish the exceptional and highly contingent character of the COVID-19 crisis. Instead, we argue, we are better placed to make sense (retrospectively) of this episode, and to draw lessons from it, precisely because the responses it has generated help to reveal as they exacerbate a number of dynamic tensions and paradoxes that are motive forces in the politics of our age. Exceptional times allow us to see more clearly the normality they disrupt and disfigure—as they do the tensions inherent within its seeming stability.

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[1] Grant Schapps, Government Press Conference, 14.5.2020.

So what are these tensions and paradoxes and how might we describe them? Each we suggest can usefully be seen as conflict in and around our conception of *sovereignty*—in the sense that they question the political sources of ultimate authority, challenge the institutional structures vested with the authority to govern, and touch upon the very borders of the political community (as elaborated further in the introduction to this special issue). In Western Europe, the first reactions to the spread of the pandemic led to the activation of an at times overt conflict between a 'sovereigntist reflex' privileging the expression of national capacities and national self-reliance and a more 'perforated' understanding of sovereignty stressing the interdependence of peoples and states (notably, EU member states), both geographically and institutionally—and, above all, the need for coordinated responses capable of averting a series of classic collective action problems (on 'perforated sovereignty' see, especially, Duchacek 1987). That is well illustrated in both the typically mild (and sometimes rather lame) attempts at reconciling and steering national responses to COVID-19 through multilateral or supranational institutions, and, more significantly still, the fact that such attempts were rapidly undermined by national executives deciding, largely unilaterally, the policies to fight this invisible foe on the home front.

This first line of conflict is arguably the most obvious. But no less significant, if less immediately visible and less highly politicized is the second: the opposition, in the realm of political competition and policymaking, between a libertarian 'reflex' supporting a residual state protecting liberties and facilitating individual choice and a sovereign-statist 'instinct', calling for an empowered guardian of the public good capable of ensuring collective security in accordance with expert adjudication (see Brack et al. 2019). Neither is the product of a simple ideological conflict generating a stark political cleavage. The trade-offs generated by these conflict-provoking dispositions were also present and (increasingly) prevalent in the more or less politicized reactions generated by, and to, these policies. These came to centre fundamentally on the place of public goods provision vis-à-vis the sovereignty of the individual, a prominent unresolved tension of the current (post)neoliberal order (Hay and Benoit 2018).

We detect a third and final fault line in the seemingly growing, and closely related, tension between the sovereign state conceived as a guardian of the public interest on the one hand, and the state as the simple aggregation of the individual preferences of citizens as subjects on the other. To be clear, this is not so much a tension between the state and the individual (as above), so much as between different conceptions of how the public good is to be determined. It is linked, if not ultimately reducible to, different conceptions of representative democracy itself (see Bickerton et al. in this issue)—the liberal and the republican democratic, as it were. As we shall argue in the following pages, a disproportionate reliance on public opinion (or to certain constructions and representations of it) has characterized the form and timing of policy responses to the COVID-19 crisis in Western Europe—and sometimes the very policy stance taken by political elites. Here too, a clear tension can be identified—between a conception of sovereignty founded (and contingent) upon the will of the people and one in which the sovereign is, simultaneously, the discerner, defender and

ultimate guarantor of the public good. This is, in effect, the distinction between the 'good *of* the people' and the 'good *for* the people'.

None of these tensions, and the paradoxes they imply, are mutually exclusive. They are not simply manifest as mere discursive constructs or framings—as they permeate (and thus, might be analytically retrieved from) institutional and political responses to the pandemic. And they are present to different extents, and articulated differently, in different national contexts (see Béland et al. 2021). The precise form that they take is, in other words, inflected by and expressive of extant national political traditions (liberal or republican, for instance). The devil, as it were, lies in the detail of their combination and their articulation. This is why, after having mapped out these conflicts and their main fault lines in general terms, our paper proceeds comparatively, tracking and tracing their (differential and specific) presence in governmental responses in two advanced capitalist democracies, France and Britain.

There are obvious and well-known differences between these two countries that make their comparison relevant: the very structure of their polities is anchored in different, if perhaps not quite antagonist, conceptions of sovereignty—respectively, republican and (Anglo)-liberal (Hay 2013). The institutional architecture of their market economies differs, as well as their respective growth models. Crucially for a crisis of this kind, the organization and substantive capacity of health care systems also differ.

Yet this is just as much a story of political agency as it is a story of institutional structure and capacity. When the first cases started to be reported in the spring of 2020, the UK government was the populist–nationalist yet libertarian administration of Conservative Prime Minister and architect of Brexit, Boris Johnson. Emmanuel Macron, arguably at least as liberalizing and rather more multilateralist than his British counterpart, was the incumbent in the *Élysée*. And Britain was then in the process of leaving the EU—thus making, as argued below, some of the tensions we identified even more salient in the political arena. Yet, despite these obvious political differences, a close analysis of the evolution of the response to COVID-19 in the UK and France shows a significant (and perhaps surprising) convergence in policy stance over time. By the onset of the 'second wave' in the autumn of 2020, the similarities in policy position were already evident.

The rest of the paper is organized as follows. In the first section, we characterize more precisely the main tensions and paradoxes around sovereignty that we detect in the unfolding and evolving response to the COVID-19 crisis. The unfolding of and interaction between these conflicts, the politics they have served to create and their implications for effectiveness of policy responses to the spread and attempted management of the pandemic are discussed in greater detail in the second section. Here, we contrast the trajectory of France and the UK from January 2020 to the beginning of the 'second wave' 6 to 7 months later. The final section draws out some wider implications for our understanding of both COVID-19 and the role of sovereigntism in the democratic governance of contingencies.

Tensions, paradoxes and sovereigntism during the COVID-19 crisis

During the first semester of 2020, the COVID-19 pandemic came to be framed as a mounting crisis with potentially staggering implications requiring unprecedented and decisive intervention, invariably by the state (Hay 1999). What imperatives, contradictions, failures, or necessities were emphasized in the framing and in the narration of such event? How did they shape governmental responses to it? And what might this tell us about the political condition of European liberal democracies today?

In what follows, we explore the heuristic value of analysing the politics of responding to the COVID-19 crisis in terms of the management of the tension between multidimensional claims to sovereignty. By sovereignty, we mean the 'claim to ultimate authority' on behalf of a given society or community that is both reflected and stabilized through a set of institutionalized relationships, 'binding the people to the state, or the governed to the governors' (see the introduction to this special issue)—acknowledging that such claims can be founded on potentially different and antagonist representations of the source (or sources) of legitimating authority. Whilst this perspective is, to our knowledge, quite new in the emerging literature on COVID-19, linking the analysis of crises to the reconfiguration of conflicts of sovereignty has become a more common focus of attention for political economists and political scientists (see Jabko and Luhman 2019 for a discussion).

Here we argue, more particularly, that three main fault lines can be discerned in the unfolding politics of the COVID-19 crisis: first, an overt conflict between multilateralism and national sovereignty; second, a conflict between a libertarian reflex and a sovereigntist instinct in governmental responses and political attitudes; and third, a recurrent tension between public opinion-based ('bottom up') and public good-based ('top down') policymaking. While these three series of tensions are arguably interdependent, we first consider them separately for matters of clarity—before turning to an examination of their combination in France and in the UK in the next section.

A missed opportunity for global health governance…

On 30 January 2020, the World Health Organization (WHO) declared a public health emergency of global concern, after the Chinese government had reported that thousands of its citizens had been infected by a novel coronavirus strain.[2] A little over a month later, on 11 March, the WHO declared COVID-19 'a [global] pandemic'.[3]

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[2] World Health Organization (2020) Statement on the second meeting of the International Health Regulations (2005) Emergency Committee regarding the outbreak of novel coronavirus (2019-nCoV). 30 January 2020. https://www.who.int/news-room/detail/30-01-2020-statement-on-the-second-meeting-of-the-international-health-regulations-(2005)-emergency-committee-regarding-the-outbreak-of-novel-coronavirus-(2019-ncov) (accessed November 5 2020).

[3] World Health Organization (2020) WHO Director-General's opening remarks at the media briefing on COVID-19–11 March 2020. World Health Organization, 11 March 2020. https://www.who.int/dg/speeches/detail/who-director-general-s-opening-remarks-at-the-media-briefing-on-covid-19---11-march-2020 (accessed November 5 2020).

In the same statement, the WHO Director General emphasized the organization's continuous work with its 'many partners across all sectors to mitigate the social and economic consequences of [the] pandemic'. The day before, the European Council met (online) to prepare a joint European response to COVID-19. Exuding a collective spirit of multilateralism, member states insisted on the need for strengthening solidarity, cooperation, information pooling and coordination if they were to limit effectively the spread of the virus, to ensure the appropriate provision of medical equipment and, eventually, to deal together with the socio-economic consequences of the pandemic.

Yet simultaneously governments across the European continent were taking measures in seeming stark contrast with these ostensible commitments and the integrationist sentiment they ostensibly reflected. France, Germany and the Czech Republic were, for instance, introducing limits on the exports of protective medical equipment, including face masks (Anderson et al. 2020). With constrained budgetary and staffing resources, the main supranational entities in the areas of health security and disease prevention—namely the EU Health Security Committee and the European Centre for Disease Prevention and Control (ECDPC)—were largely unable to provide an effective response to the rapid spread of the virus. On the other side of the Atlantic, the then US President Donald Trump attacked the WHO for being too 'China-centric' and for getting the pandemic 'wrong'.[4] Soon after, he announced the US's withdrawal from the WHO. It has rapidly become apparent that the very principles of global health were threatened—both explicitly, by Trump and other populist leaders and, albeit less noticeably at first, by the significant nationalization of emergency measures adopted to limit the spread of the contagion.

Thus, despite an initial 'push toward greater global cooperation', we have witnessed a consistent drift towards a predominant (and hardly unfamiliar) "national security framing of disease threats in which defending the nation […] has taken on a new level of importance" (Ferhani and Rushton 2020: 459). In spite of their tentative efforts, neither the WHO nor the EU were able to seize the moment to establish an authoritatively transnational framing of the crisis, far less an enduring transnationally coordinated response. It is true that over the course of the crisis, the EU has gradually demonstrated a better adaptability and improved its management capacities, typically as compared to other recent multidimensional threats of a comparable magnitude (see Wolff and Ladi 2020 for a discussion). Yet the flaws reported by the literature in that respect (see Dinan et al. 2017) still largely prevail—as revealed by its overall inability during the more recent period to mitigate 'vaccine nationalism' beyond mere principled stands; and by the latter's difficulties in fashioning a coherent vaccination policy. National sovereigntism, it seemed, had (again) trumped multilateralism.

There is still much to be learned about the underlying causes of the failure of international organizations, and of the deceptive results of supranational institutions to coordinate responses to a global pandemic—the very moment for which the WTO, in particular, was created. The more specific condition of the EU, however,

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[4] BBC News, April 8 2020.

suggests that even if some pre-existing institutional factors partly account for its limited coordinative role, these factors provide only a partial account of the strength of the sovereigntist reflex observed in almost all member states. Granted, there is a treaty article on public health 'that carefully limits EU competencies'; 'a legislation that avoids authorizing forceful EU action'; and 'a budget that puts little money into health and [which contains] no health emergencies line at all' (Greer and de Ruijter 2020: 623). And it is also true that a national-centric recoil has been a common and widely identified feature of responses to pandemics (see Jones 2020). But what is still striking is the degree to which most EU member states so quickly and completely came to privilege (their construal of) national self-interest in a context in which there existed clear possibilities and significant institutional resources for a more coordinated (and arguably more effective) response. The nationalization of expertise is a case in point. While often using the same data or evidence furnished by the ECDPC and the WHO, most EU governments seem to have based their policy choices on their own national experts (epidemiologists, virologists or public health scholars) often through hastily convened ad hoc or special committees (see Lavazza and Farina 2020). Another striking illustration is 'vaccine nationalism'—the resoundingly national approach that was taken to the development and distribution of COVID-19-related health technologies.[5] There have been many examples of this—ranging from the USA, Russia and India's refusal to participate in a global initiative run by a number of European leaders, the Welcome Trust and the Bill and Melinda Gates Foundation; or European states (including both France and the UK) competing to be the first in the queue for vaccine doses—often with the support of large governmental grants and in collaboration with University-based teams. The situation of the EU is particularly striking in this regard. In spite of an agreement eventually reached by member states in June 2020 around a common EU vaccine strategy, the European Commission repeatedly failed to harmonize national approaches—be it in terms of supply, prioritization of target groups, or use of available doses.

What is evident is that the sovereigntism that prevailed in most European countries—though arguably an almost natural (and certainly populist) reflex in moments such as this—has created a negative-sum game. Fighting first over access to testing kits and, later, over vaccine doses, has merely served to extend the period of significant economic disruption (as borders cannot be reopened), contributing to exposing countries to larger second and, indeed, third waves in the process.

... or a product of recent politics?

The vertical tension between multilateralism and sovereigntism is arguably the most obvious conflict of sovereignty that the COVID-19 emergency has spawned. It ultimately resulted in the nationalization of policy responses to the spread of the

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[5] See Weintraub, R., Bitton, A. and Rosenberg, M. (2020) The danger of vaccine nationalism. *Harvard Business Review*, May 22.

pandemic, with states generally refusing to engage in all but the most minimal forms of (typically bilateral) cooperation (and, more rarely still, coordination).

While most countries were considering and deciding upon their own range of available options to fight the pandemic, other lines of conflict started to emerge. The first of these relates to the realm of domestic political competition opened up by the very refusal to countenance transnational coordination. The adoption of measures to limit the spread of the virus or to mitigate its consequences rapidly generated a series of tensions between the sovereignty of the state, on the one hand, and that of the individual on the other, exacerbating a number of paradoxes characteristics of the politics of our age.

Thus, governmental actors typically responded to the initial threat and spread of COVID-19 domestically by giving voice to a sovereigntist 'instinct', in which the state was presented as the provider of collective security and as the guarantor (of last resort and in adversity) of a range of cherished public goods. This attitude is well illustrated by the various governments that claimed sovereignty over the political and policy responses to COVID-19, sometimes embracing a clearly nationalist stance in the process. In Western Europe, this notably includes French President Emmanuel Macron declaring a 'war' against the virus and his insistence that the state would bear the economic costs of the measures taken irrespective of the extent of that commitment. In these and other discourses, leaders have typically invoked the rhetoric of war, conferring in so doing hero status on the medical teams 'on the front line' (Benziman 2020).

Yet in practically every case this image of a state empowered by necessity to act in exceptional ways (and often taken on emergency powers) collided with a more libertarian 'reflex' emphasizing the need to protect individual liberties and to preserve individual choice. In stark contrast with countries where a sovereigntist reflex dominated in the initial framing of COVID-19, here the image of a more residual state initially prevailed. This looks at a range of different forms, certainly the most spectacular of which were offered in countries which had recently witnessed the rise of populist leaders. US President Donald Trump, for instance, explicitly refused to wear a mask, while Brazil President Jair Bolsonaro fired his health minister for advocating social distancing measures (Gonsalves and Yami 2020). Both tried to frame the public policies presented as necessary to limit the spread of the virus in other countries (and even by their own experts) as an infringement of individual liberties. Both, of course, were ultimately unable to protect themselves from the virus. In their initial rejection of major state intervention or additional regulation to fight the pandemic, Trump and Bolsonaro's stances were in fact clearly aligned to their broader rejection of the 'corrupt elite'—a familiar populist construct here stretched to include transnational elites and 'their' experts and academics and scientists in general (Woods et al. 2020). The position they adopted rejected the capacity of transnational institutions to know best the global interest and their right to substitute the global interest (however construed) for its national counterpart. It was, in short, populist, sovereigntist and profoundly anti-multilateralist. And it was deeply wrapped in the symbolic politics of posture and performance—as the refusal to take personal protective measures became a mark of identity for their 'macho political

brands'.[6] Paradoxically, this sovereigntist yet populist libertarianism manifestly ignored a basic requirement of sovereignty, namely security—the capacity of the state to protect its own citizens.

As this suggests, two rather different images of the state (and more fundamentally, of sovereignty) were articulated during the initial spread of the pandemic. While the first image was typically associated with a stringent implementation of restrictive measures, the second one was associated with a more flexible facilitation of the choices of individuals, with the primary imperative being to respect individual liberties. One should be careful, however, not to draw an overly sharp line between more 'sovereigntist' and more 'libertarian' stances in the context of the pandemic—as most Western countries actually alternated (or at least vacillated) between the two. What we see is less a bifurcation than different ways of managing a common tension.

During the first wave where the libertarian reflex predominated, it typically slowly morphed into something more sovereigntist as the number of fatalities rose exponentially. Similarly, where a governmental-led sovereigntist instinct led the way, a more populist and libertarian backlash typically followed—as in Austria, in Germany, in The Netherlands and more recently in Italy, where the populist right sought to organize protests against the measures taken by the government in the final quarter of 2020.

The tension between sovereigntism and libertarianism was thus a recurrent feature of the COVID-19 crisis, though one manifest differently from one country to another. From an analytical perspective, this tension is interesting, as it crystallizes a range of ideational conflicts which have become central in present-day politics.

When public opinion 'trumps' public good provision

As we have argued, the tension between sovereigntism and libertarianism was constant, even whilst it has evolved, during successive phases of the pandemic. In the first half of 2020, public attitudes towards government responses in Western Europe as well as compliance with public dictates essentially varied according to fatalities, with little effect of ideology (Becher et al. 2020). Things, however, changed as initial governmental decisions were gradually re-politicized or depoliticized, typically by political forces framing their claims in the language of populist libertarianism (as the populist right did in continental Europe) or by other groups calling for a more holistic and sovereigntist approach in governmental decisions. Though largely exacerbated by the COVID-19 crisis, this second line of conflict was thus never properly resolved.

To a large extent, it was reinforced by the rather inconsistent timing of policies adopted in most European countries to fight the pandemic. Interestingly, one can observe a fair degree of similarity from one country to another between these measures. They have tended to include travel bans or restrictions; quarantine;

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[6] *The Guardian* (2020) Putin, Johnson, Bolsonaro and Trump: men too macho for masks. May 17.

epidemiological tracking and testing; public guidelines and recommendations; temporary closures of 'non-essential' businesses; prohibition of mass gatherings; school and university closure; curfew; declaration of state of emergency and internal travel restriction (Capano et al. 2020). Various policy instruments were also used to tackle the adverse economic consequences of the measures taken. These we described in more detail in the next section. Yet, and despite the apparent similarities between these various policies, there has seemingly been rather little lesson diffusion and policy transfer within the EU, and considerable variation both in terms of the mix of measures adopted by governments and, crucially, the timing of their responses (see Hale et al. 2021). Indeed, when the first cases were reported during the first months of 2020, several European governments were seemingly reluctant to take action, even with their immediate neighbours reporting rising infection levels. This was notably the case, in March 2020, of France, the UK, Sweden and Germany. A few weeks later, Italy (first) and France (subsequently) took stringent measures, including the imposition of strict lockdowns and social distancing policies. These two respective governments then called for national unity and clearly endorsed a more republican and sovereigntist stance. At the same time, UK Prime minister Boris Johnson was adopting a more libertarian attitude, refusing to impose the same restrictions on British citizens—even if he eventually imposed more stringent restrictions as the pandemic spread dramatically throughout the UK.

In all of this it is public opinion, rather than public good provision, that has tended to dominate both the framing and the timing of the measures adopted other than in autocratic regimes. In seeming confirmation of Kingdon's aphoristic paradox, policymakers have turned out to be policy adverse, their aversion no doubt reinforced by the 'tragic choices' they have faced. In the end, they have been incredibly reluctant to do today what they could (and might ultimately be forced to) do tomorrow (see Kingdon 2010). In the process they have come to rely on public opinion as the trigger for ratcheting up constraints on individual/civil liberties.

This perhaps surprising reliance on public opinion brings us to a third, though an arguably more latent, conflict around the concept of sovereignty. It concerns the authority of the sovereign vis-à-vis the people to discern the public good that the sovereign seeks to defend. Is sovereignty, in short, nothing other than the will of the people, or is the sovereign a genuine guardian and guarantor of the interest of the people?

Crucial to this question in the COVID-19 crisis has been the role assigned to expertise. Instead of responding proactively to scientific alerts about the dangers of the virus—which became clear as the pandemic was unfolding—governments, particularly in Western Europe, invariably delayed the implementation of (what their experts agreed were) much-needed measures. They did so, understandably perhaps, to avoid the perceived electoral costs, contributing in a manner largely anticipated in so doing to the existence and severity of a second (and subsequent) wave(s) (Middleton et al. 2020). This is an additional paradox of our present political context which the COVID-19 crisis has starkly exposed: after decades of governance legitimized on the basis of nominally independent expertise in areas where scientific consensus was far from evident (think of economic governance), it seems that self-imposed ignorance prevailed precisely where international peer-reviewed consensus rapidly
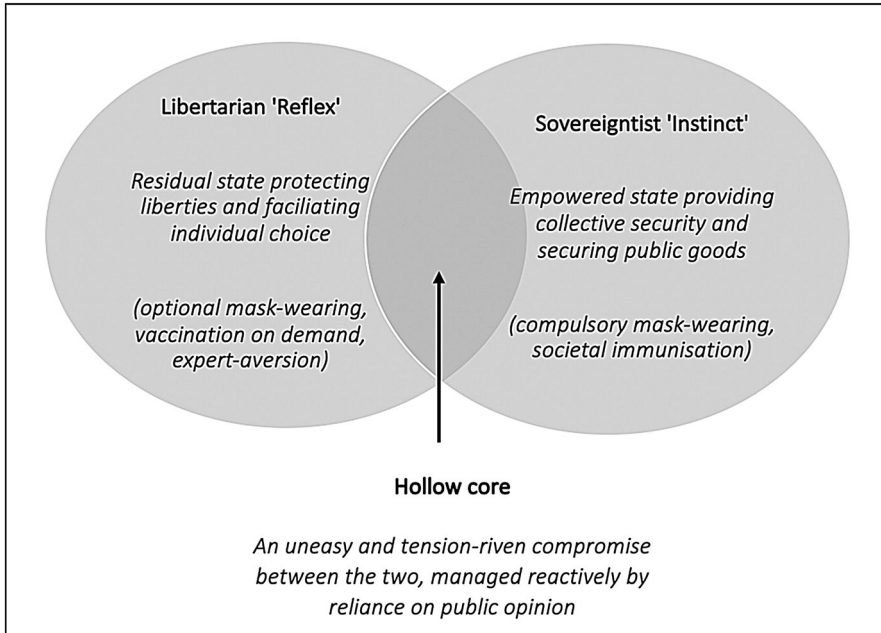
Libertarian 'Reflex'

Residual state protecting liberties and faciliating individual choice

(optional mask-wearing, vaccination on demand, expert-aversion)

Sovereigntist 'Instinct'

Empowered state providing collective security and securing public goods

(compulsory mask-wearing, societal immunisation)

Hollow core

An uneasy and tension-riven compromise between the two, managed reactively by reliance on public opinion

Fig. 1 Libertarianism, Sovereigntism and their Hollow Core

formed (see Ortega and Orsini 2020). There is thus an intimate connection between the second and third conflict of sovereignty that we have identified (Fig. 1).

The constant back and forth between a libertarian 'reflex' and a sovereigntist 'instinct' has thus proved a consequence (though in a certain extent also a cause) of the disproportionate reliance of most Western European governments on public opinion. As a result, it is essentially *reactively* that the COVID-19 crisis was managed—with the harmful consequences that we know and, ironically, as an expert consensus largely anticipated.

France and Britain compared: different paths, similar destinations

The COVID-19 crisis saw a very significant exacerbation of pre-existing conflicts around the concept of sovereignty within European liberal democracies. Yet the interaction between these conflicts was case-specific and contingent, particularly in a context in which governments gave the impression of making it up as they went along without learning much from those who had gone before them. This, as discussed below, was clearly true for France and Britain—two countries in which, at the time of writing, the number of reported deaths linked to COVID-19 was, respectively, 158.16 and 192.18 per 100,000 inhabitants.

In the next following pages, we present and discuss the implications of the response to COVID-19 in each country during 2020, by reflecting on how the three lines of conflicts were drawn and managed over time. For convenience, we

consider these events chronologically, identifying the main path-shaping moments sequentially.

A practical certainty treated as an unknown: coping with the first wave

France was the first European country to report COVID-19 infections on 24 January. Earlier, the same month, the BBC had referred for the first time to a 'mysterious viral pneumonia' considered as 'severe' by Chinese authorities (3.01.2020). Yet it was only on 12 March that President Macron announced a lockdown as well as a series of stringent measures; this followed months in which only relatively light measures to limit the spread of the pandemic were adopted. During this period, mass public events continued, including the first round of (the countrywide) municipal elections. Four days later in Britain, Prime Minister Boris Johnson held a press conference with both his chief medical advisor and his chief scientific advisor at his side. In his speech, he made rather vague recommendations, asking Britons to avoid non-essential contact, travel and 'social venues' (Hunter 2020). The same day, a group of scientists at Imperial College, London, reported that the surge capacity of the National Health Service (NHS) was likely to be exceeded 'under any response scenario' (Mahase 2020). It was only 7 days later, on 23 March, that Boris Johnson announced new strict rules for the UK and asked the public to stay at home except for very limited and specific purposes.

This tells us much about how the COVID-19 pandemic has been managed by policymakers. The approach has, above all, been reactive rather than proactive, with an excessive focus on the domestic political context and with insufficient acknowledgment of the clear interdependence between national communities and economies (even more so in Europe).

At first, the French and British governments seemed to refuse to countenance drastic measures for fear of curbing cherished personal liberties, even at the expense of the public good. This was clear in the French government's insistence on 'individual liberty' and the need to 'continue [with] life as usual' during the first months of 2020 (Yan et al. 2020); and, in its British counterpart's emphasis on the dangers of 'behavioural fatigue'. This concept, that originally emerged from a governmental 'nudge' unit, suggests that 'people would get tired of staying at home', thus implying that 'lockdown would be ineffective' (Sibony 2020). In both countries, there was apparently no clear public health plan, and a disproportionate faith was placed in domestic experts—with little policy learning from the experience of others and little attempt to capture an international scientific consensus. Mathematical modelling and behavioural science were also largely privileged over public health and communicable disease control, particularly so in Britain (Pollock et al. 2020). By contrast, community case findings, testing and contact tracing—devices which were already proving successful elsewhere and which were particularly advocated by the WHO—remained largely underused (Scally et al. 2020).

What was striking at the time, and no less striking with the benefit of hindsight, is that none of this was unexpected. A pandemic of this kind—indeed a pandemic of this *specific* kind—was quite widely anticipated. But public policymakers responded

to it as *if it were* entirely unexpected. In France, seemingly little consideration was given to existing pandemic plans. Thought they had not been significantly updated since the period following the 2009 H1-N1 pandemic, they could have provided a valuable starting point.[7] In Britain, Chief Advisor to the Prime Minister, Dominic Cummings, even tried to pretend that he had something in the filing cabinet[8]—yet the filing cabinet was bare. The absence of a clear strategy and the reactive management of the pandemic was also prevalent in the rather inconsistent position of both governments towards a variety of public health measures, such as mask wearing and social distancing—with both executives agonizing about, whilst simultaneously trying to anticipate, public reactions to the policies they were still in the process of designing. The sovereignty of public opinion thus reflects broader anxieties in both countries—about lockdowns that could not be ended and would not be respected, or an anticipated crisis in governmental authority as opposed to a crisis of hospital capacity.

In this early phase of the crisis, then, Britain and France followed different routes to ultimately similar destinations—something which directly speaks to our second line of conflict. In France, much of Emmanuel Macron's presidency had been dominated by valence politics, an appeal to the centre and a pro-EU agenda. During his first years in office, he tried to push for a more classical understanding of the neoliberal account—a posture he apparently turned to in his mid-March television address, during which he explicitly endorsed a more traditionally republican (and distinctively sovereigntist) posture. A legalistic and 'decree response strategy' followed, very much in line with France's highly centralized and republican tradition (Yan et al. 2020). Consistent with that tradition, it included highly severe lockdown measures, the adoption of an emergency health law, extended powers for the executive and the closure of public spaces (see Desson et al. 2020). The army was even mobilized to set up field hospitals. By contrast, Boris Johnson's term in office is well known for its anti-system populism. The Prime Minister sought to maintain this leadership style during the first few months of the pandemic, shaking hands with COVID-19 patients in hospitals and not wearing a mask—before succumbing to the virus himself.

Though coming from a very different political background to Macron, he subsequently adopted a more sovereigntist attitude and embraced the war rhetoric of his French counterpart (Benziman 2020). Finally, emergency measures were taken during the last weeks of March, including a severe lockdown. Boris Johnson then tried to improvise himself as a public good provider of last resort in a country where years of austerity had fragilized health and social services—and where cost–benefit analysis, rather than scenario-building, had become the dominant form of expertise produced by public health institutions as a result of successive governmental reforms (Benoît 2020).

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[7] See SGDSN (2011) Plan National de prévention et de lute 'pandémie grippale'. Document d'aide et de préparation à la décision. Paris, available at https://solidarites-sante.gouv.fr/IMG/pdf/Plan_Pandemie_Grippale_2011.pdf (accessed November 5 2020).

[8] See https://fullfact.org/health/cummings-blog-coronavirus/ (accessed April 6 2020).

It is in this context (and in part as a result) that both states came to reject multilateralism. Here again, France and Britain played different roles but eventually took similar measures. From the beginning of the pandemic, the attitude of the French government was more explicitly multilateralist (in keeping with Macron's self-image as an integrationist President for Europe as much as for France). In effect, it participated in, and sought consciously to draw attention to, various transnational initiatives under the umbrella of the EU or the WHO and signed the 'Covid-19 Joint declaration of the Alliance for Multilateralism' (April 16), an initiative reuniting United Nations countries committed to enhancing multilateralism, particularly in the management of the present crisis.[9] Such an emphasis on global cooperation was largely absent from British public discourse. But in substantive policy terms, the two administrations were far closer. Indeed, they were pursuing very similar domestic initiatives. Both administrations passed agreements with domestic pharmaceutical companies to ensure that they would be the first to access the vaccines these same companies were currently developing. This led in France to a widely publicized controversy with Sanofi, which ultimately resulted in a pledge by the company to invest more than €600 million in vaccine research and production in France in response to President's Macron demand.[10] France also took measures to restrict investments by foreign companies during the pandemic, as well as restricting exports of medicines (restrictions reciprocated by the British government). Whilst Britain's anti-multilateralism was at least consistent, France's public discourse was rather more rhetorical than it was substantive.

These seemingly similar sovereigntist reflexes were nonetheless the expression of different politics. In France, sovereigntist measures (as illustrated by the Sanofi affair) were consistent with a broader sovereigntist narrative, the salience of which was reinforced by the populist right's attack on the government for its failure to defend the national interest (see Betz 2020). In Britain, the salience of ostensibly similar decisions was magnified by Brexit—with the country formally exiting the EU on 31 January. Such an exceptional context had a twofold consequence. First, it amplified the already existing trend towards the neglect of advice from multilateral institutions and scientific experts. Second, it led to Britain's non-participation in, or simple withdrawal from, supranational initiatives, such as the EU Early Warning and Response System.[11]

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[9] *France Diplomacy* (2020) Covid-19 Joint Declaration of the Alliance for Multilateralism, April 16, https://www.diplomatie.gouv.fr/en/french-foreign-policy/united-nations/multilateralism-a-principle-of-action-for-france/alliance-for-multilateralism-63158/news-about-the-alliance-for-multilateralism/article/covid-19-joint-declaration-of-the-alliance-for-multilateralism-16-apr-2020 (accessed November 5 2020).

[10] *The Wall Street Journal* (2020) Sanofi Bows to France's demand for Coronavirus Vaccine Supplies, June 16.

[11] See Hopkin, J. (2020) Brexit Thinking Poisoned the Government's response to Covid-19. *LSE Covid-19 Blog*, June 10.

COVID-19 and the renegotiation of sacrosanct economic imperatives

What happened in France and in Britain during the first semester of 2020 clearly suggests that COVID-19 turns out to have been a trial of state capacity but perhaps also a trial of liberalism (and, indeed, neoliberalism). These tensions (and arguably, paradoxes) were illustrated further with the dramatic economic interventions that accompanied the more explicitly health-policy-oriented measures adopted in the two countries—with some still in effect months after. These measures, rather similar in both France and Britain, include the following, listed here in decreasing order of budgetary importance (Heald and Hodges 2020):

- *Public services spending;*
- *VAT and income tax deferral;*
- *Job retention (furlough) schemes;*
- *Additional business loan schemes;*
- *Corporate financing facilities;*
- *Self-employed support schemes;*
- *Small business grants;*
- *Business rates relief;*
- *Direct support for households;*
- *Other taxation measures;*
- *Other business support*[12]

In both countries, the sovereigntist reflex observed during the most critical period of the crisis (namely when the first wave reached its peak) also led to a renegotiation of a number of previously sacrosanct economic imperatives. These included the idea that growth trumps all, that competitiveness trumps next to all, and that austerity (particularly in Britain) had to be pursued at all cost. What this more fundamentally suggests is that (like Brexit before it at least in Britain) the COVID-19 crisis has become *the imperative to trump all (preceding) economic imperatives* (Hay 2020). In both countries and perhaps more generally, a range of formerly non-negotiable and institutionally inscribed imperatives came to be rendered once again negotiable, even if the specific politics behind this were once again different in each case.

In France, the implementation of such imperative trumping measures—and the rhetoric that accompanied them—was explicitly couched in the more traditionally republican and sovereigntist posture adopted by Emmanuel Macron in March. This was made explicit in his speeches and those of his ministers during the following weeks. These sought to make clear the idea that the state would pay 'whatever it costs'.[13] The President also insisted on French sovereignty, declaring that

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[12] For a full description of economic responses in both countries, see KPMG (2020) Government and Institutions Measures in Response to Covid-19. Available at https://home.kpmg/xx/en/home/insights/2020/04/united-kingdom-government-and-institution-measures-in-response-to-covid.html for the UK. Available at https://home.kpmg/xx/en/home/insights/2020/04/france-government-and-institution-measures-in-response-to-covid.html for France. Accessed November 5 2020.

[13] Excerpts from Emmanuel Macron television address, March 2020. Authors' translation from French.

'delegating our food, or capacity to care, our living conditions to other [countries] is a folly' and that 'everything will be done to protect our workers and our enterprises' (13.03.2020). Neoliberal Macron thus took on the more traditional Presidential mantra of the public good provider. Yet (and crucially), he did so in a country where the very institution of the Presidency enshrined such an expectation (Cole 2020).

The situation was different in Britain for both conjunctural and structural reasons. Here, Boris Johnson *tried*—or more accurately, was being forced—to represent himself as a public good provider while coming from a political (liberal/anti-paternalist) tradition that had long sought to deny the state such a role. In fact, Johnson's slow drift from a more populist and libertarian demeanour to a more sovereigntist posture illustrates well a more profound and long-standing tension clearly manifest in the Brexit vote itself (and arguably before that in Thatcherism's combination of neoliberal and neoconservative emblems). Such a tension comes from an interpretative ambiguity between two broad (and potentially contradictory) meanings of the motives behind the Leave vote (and, indeed, Thatcherism before). While some have seen in Brexit an explicitly sovereigntist and neoconservative objection to multilateralism and supranationalism ('taking back control'), others couch Brexit it more staunchly neoliberal terms, presenting it as a rejection of the EU as an illiberal 'social model' and as the triumph of a supranational 'super-state' (as an impediment to neoliberalization) (Hay 2020). Crucially, these are the two stances that were, respectively, promoted by the unofficial and official Leave campaigns—with the later (of course) championed by Boris Johnson himself. This makes the paradox in Boris Johnson's economic policy during the pandemic all the more palpable and it suggests that the inherent ambiguity in the Brexit vote is yet to be resolved.

The COVID-19 crisis thus significantly disrupted the pursuit of the neoliberal agenda in both countries. It seems to have brought at least to a temporary end governance by perceived economic imperative whilst precipitating, albeit rather differently in each case, a turn to economic sovereigntism and a wider (if again perhaps temporary) repoliticization of economic policy. What appears now—and this has also been made very clear in public speeches in both countries—is a form of *conditional neoliberalism*, so that there is *conditional* austerity, *conditional* competitiveness, *conditional* price stability and, indeed, *conditional* growth. Interestingly, such a conditional acceptance of the neoliberal agenda starkly reveals—if this had to be proved—the very contingency on which these principles are based.

A new version of the same? Policy learning and the second wave

The restrictions decided in March were gradually eased in both countries at the end of spring 2020, paralleled with local lockdowns and accompanied by new regulations, for example compulsory mask wearing in all or part of the public space. Policymaking gradually became more proactive and decentralized in both countries—as both administrations moved towards a more flexible approach, with restrictions varying from region to region.

By the early summer, both governments were facing low levels of popular approval.[14] Though lower in Britain, approval ratings nearly doubled between the end of March and mid-June, and they continued to rise during the following months.[15] *En Marche*'s standing in the opinion polls was not much higher. In part as a response to this, and also as a result of the large electoral defeat of his party in the second round of the municipal election, Emmanuel Macron replaced his Prime Minister Edouard Philippe in early July with Jean Castex, who had previously been responsible for the *deconfinement* plan. The Health Minister also announced a vast consultation with several working groups coming from different segments of the health care system, to agree on a series of reforms supporting an ambitious increase in the health care budget—and this in part to prepare the country for future pandemics of a similar kind. Meanwhile in Britain, the government was publishing a 60-page roadmap of what the exit from lockdown could look like. This was presented by some conservative leaning newspapers as 'tacking back control' over the pandemic (Cowpers 2020).

At the same time, however, studies were already warning about the risk of a second wave (Wise 2020). Yet these clear signals were largely ignored during a period in which both governments were, more explicitly than before, trying to manage the increasingly acknowledged trade-off between growth, on the one hand, and health and security, on the other, in relatively similar ways. Containment measures had had a large and cumulative impact on economic activity—and a number of domestic and international institutions, such as the IMF, were warning that 'workplace closures and stay-at-home orders, [though] more effective in curbing infections [are] associated with the largest economic costs'.[16]

By the end of the summer—and as largely anticipated—both countries were witnessing a resurgence of the pandemic, with France setting a new record for the number of reported infections on 28 August (with 7379 new cases) and with Britain doing the same on 29 September (with 7143 new cases). With health care systems on the verge of overload, severe measures were taken more rapidly than for the first wave in both countries—though the ensuing lockdowns were less strict than during the first wave.

While a clear learning process is evident in the response to the second wave, some tensions have persisted—and they too map closely onto the three conflicts of sovereignty we have sought to identify. First, government reactions show that the tension between multilateralism and sovereigntism (and the privileging of the latter) has proved enduring. Though similar measures have been adopted, there is little sign of conscious policy transfer, and governments have not built on the experience of others to model—and/or modify—their responses. The second wave was still essentially managed through the lens of domestic politics. The libertarian reflex that was

[14] See, for France, Ifop-Fiducial (2020) *Balises d'opinion #114*, Paris, October.

[15] See YouGov polling tracker. Available at https://yougov.co.uk/topics/politics/trackers/government-approval. Accessed November 5 2020.

[16] Deb, P., Furceri, D., Ostry, D. et al. (2020) The Economic Effects of Covid-19 Containment Measures. *International Monetary Fund Working Papers*, August 7.

manifest during the first wave was clearly not observed during the second. Yet sovereigntism, as eventually privileged in both France and Britain, put governments in a very difficult position—as various groups in both countries (ranging from populist political forces to employee representatives,[17] local politicians[18] and maverick scientists[19]) mobilized in the name of the protection of individual liberties, individual choice and the need to preserve the economy. These two lines of conflict, just as earlier in the year, served to reinforce the tension between public good provision and public opinion—so much so, perhaps, that sovereignty (fundamentally a question of legal responsibility) tended to be prioritized over autonomy (fundamentally a question of options). Pooling sovereignty and coordinating responses earlier would certainly have given greater autonomy to policymakers later.

Conclusion

Our aim in this paper has been to reveal, in the management of the COVID-19 crisis, in France, in Britain and more generally three tensions:

- a tension between multilateralism and sovereigntism;
- a tension between a libertarian reflex and a sovereigntist instinct;
- a tension between the reactive and preference accommodating adaptation of policy to public opinion and a proactive, top-down and public good-based conception of policy choices.

The story of the COVID-19 crisis (to date) in both Britain and France is a story, we have argued, of the unfolding relationship of the management of these various tensions. It is, strangely, perhaps also a story of an unlikely convergence. Whist one might have expected the French republican tradition combined with the integrationist and multilateralist sentiment of its President to lead to a coordinated and European but nonetheless centralized, statist and top-down exercise of the prerogative and responsibility of the state to protect the security of its citizens in the name of the public good, things have not turned out that way. Macron may have ended up being dragged into a second confinement by the burden of the prospective overloading of the health care system and the burden of scientific advice, but this was very much against his will, against his liberalizing disposition and largely in response to shifts in public opinion.

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[17] See for e.g. BBC News (2020) 'A New Lockdown Will be Far Worse for Businesses', October 31; Le Point (2020) Le Medef estime que re-confiner provoquerait 'un écroulement de l'économie française', October 26.

[18] See Blakeley, G. (2020) Coronavirus pandemic has pitted England's mayors against London. *The Conversation*, October 17; *La Tribune* (2020) Confinement: des maires bravent l'interdiction de fermeture des commerces, October 30.

[19] See Wise (2020); *The Guardian* (2020) Marseille's Maverick Covid-19 Scientist: why the city took the doctor to its heart.

The British government's position and the evolution of that position is perhaps more easily anticipated. The largely anti-multilateralist and nationally sovereigntist character of the Johnson administration's response was in no sense difficult to anticipate. A government that had toyed with a 'no (trade) deal' Brexit was never likely to embrace an internationalist or multilateralist solution to the global pandemic; however, much it might have been needed; and its watery isolation was always likely to make insularity (literal and figurative) a core part of its response. But what was perhaps more difficult to predict was the extent to which the libertarian (rather than neoliberal) reflex and disposition of Johnson himself would make so difficult the use of the much-avowed and much-vaunted sovereign state power that Brexit sought to guarantee. When it was arguably most needed, the capacity (and potential resources) of the state to defend its own citizens from ontological threat, turned out to be very difficult—at times seemingly impossible—to deploy. Those self-same citizens newly inoculated from the contagion of European political influence were left seriously undefended from viral contagion.

The COVID-19 crisis, we contend, has activated multidimensional conflicts (and claims) to sovereignty. But it has not created them itself—since all manifest dynamic and conflict-provoking tensions that were already motive forces in contemporary advanced capitalist democracies. Though the politics they create differ from one country to another—as illustrated in our more detailed analyses of the French and British cases—they arise from clear and more general sources of tensions of the late neoliberal era. To date at least, the unprecedentedly rapid development of vaccines in the most recent period of the crisis has not resolved these tensions. Indeed, if anything, it seems to have exacerbated them.

In many respects, COVID-19 has thus been a test—a test of state and health care capacity, a test for the world economy (reinforcing, it seems, a sovereigntist recoil and a variety of de-globalizing reflexes), and a test of the sacrosanct economic imperatives of our age. Crucially, it has also been a (failed) test for equilibrium thinking and models of political and human behaviour based on such assumptions. A series of path dependencies were severely disrupted. A number of unquestioned imperatives were renegotiated. Its legacy is likely to be considerable.

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