



# ALERT

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## COVID-19

extended edition



# A Message from the Vice-President

**A**s the old and rather droll curse, says, "May you live in interesting times," and so we do. Covid-19 is an epoch-defining event and in some respects an existential crisis. Although it is different from other disasters, in that there are no broken buildings and collapsed pieces of infrastructure, it is the epitome of a rapidly spreading global calamity.

The changes wrought by Covid-19 are remarkable. For instance, as I write, one and a half billion people are in lock-down, severely constrained in their activities by social distancing measures. The infection rate and death toll continue to rise, and although they may fall, there could be a resurgence of the disease. The economic implications of the pandemic are already extremely severe and will be with us for many years. Despite this, Covid-19 is not a 'black swan'. It was neither unforeseeable nor unforeseen. In the mid-2000s the scenario began to be elaborated, under World Health Organisation auspices. It was completed by 2008. Already in

2005, the process of national and international planning for the emergency had begun.

The United Kingdom was one of the pioneers of the use of national registers of civil risks. The first UK Risk Register, published in 2010, underlined the primacy of the threat from pandemics. Subsequent editions have refined the country's risk outlook, but have merely reinforced the position of pandemics at the top of the list. The UK's national counter-pandemic plan dates from 2011. Pandemic management simulations have been held, notably Exercise Cygnus in 2016-2017. This event, in particular, highlighted the country's deficiencies in preparedness. Unfortunately, political decision-making has been dominated by cognitive dissonance: we face the greatest civil threat (leaving aside climate change, which for its unmatched size and reach is in a category all of its own), but—so the reasoning apparently went—we can afford not to tackle it at the moment. In times of austerity and a shrinking welfare state,

the result has been a lack of both preparedness and surge capacity in the vital healthcare sector.

Governments are often reluctant to define 'welfare', no doubt in case they should be held to account for not living up to their own definitions. Covid-19 has abruptly highlighted the importance of social fabric, welfare state and healthcare for all. Restricting healthcare to those who can afford to pay for it would simply mean that they would receive the infection from those who cannot afford it, quite apart from the medical ethics of access to what should be regarded as a universal right. After years of the domination of the ideology of a shrinking public sector, governments now have to scramble to show that the state can look after its citizens. The result is frantic improvisation, despite the enduring presence of a scenario which should have been the basis of planning. Perhaps the plans were drawn up, but they were only as good as their implementation. Improvisation is not something that can be eliminated, but if it is not reduced to a minimum, it begins to look like negligence.

ICPEM has been busy monitoring the developing pandemic situation, commenting publicly on it, and, thanks to one of our officers, Tony Thompson, providing a valuable daily briefing on where to access vital new information. We have now formed a select committee in order to evaluate the British response to the emergency. We will continue to contribute to the debate on Covid-19 and encourage a wide-ranging, informed, rational debate on how to deal with this remarkable and alarming situation. We hope fervently that all our members and their families will remain safe and well throughout the crisis. the business that the Institute works so hard to support – keep safe! ▲



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