Dealing with COVID-19 in the Middle East

Political systems shape both the capacity and the motivations of political leaders in dealing with emergencies. In this paper, we investigate global responses to the outbreak of the COVID-19 pandemic to identify systematic differences in different regime types, ranging from democratic to autocratic. In particular, we examine in depth how countries in the MENA region have responded to the pandemic, and compare these responses to global trends. We divide the policy responses into two broad categories: policies for closure and policies for economic support. We then investigate the relative use of these different tools in different countries during the spring of 2020. Taking account of the severity of the outbreak, economic capacity, and capacity of the health systems, we find that the most democratic countries were less likely to implement the most restrictive closure policies, and more likely to adopt high levels of economic support, compared to the most autocratic countries.
Dealing with COVID-19 in the Middle East

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Executive Summary

Political systems shape both the capacity and the motivations of political leaders in dealing with emergencies. In this paper, we investigate global responses to the outbreak of the COVID-19 pandemic to identify systematic differences in different regime types, ranging from democratic to autocratic. In particular, we examine in depth how countries in the MENA region have responded to the pandemic, and compare these responses to global trends. We divide the policy responses into two broad categories: policies for closure and policies for economic support. We then investigate the relative use of these different tools in different countries during the spring of 2020. Taking account of the severity of the outbreak, economic capacity, and capacity of the health systems, we find that the most democratic countries were less likely to implement the most restrictive closure policies, and more likely to adopt high levels of economic support, compared to the most autocratic countries. Globally, the data shows the following main trends:

- Countries with more democratic institutions were more likely to adopt high levels of economic support.
- Countries with more democratic institutions were slightly less likely to adopt the most restrictive closure policies.
- Countries with more democratic institutions have stronger healthcare capacity to deal with the pandemic.
- Countries with more democratic institutions have more transparent reporting of key statistics, such as the number of conducted tests.
1. Introduction

What explains how governments react to the COVID-19 pandemic? In this analysis, we combine a series of global-level data with more in-depth case studies of five Middle East states or state-like entities/territories: Israel, Iran, Jordan, Palestine and Turkey. This structure allows us to both see some overarching global trends and compare these trends to some more fine-grained examples from within one region. This ‘nesting’ within the larger dataset allows us to have a two-way dialogue within our study. Using the overarching dataset, we investigate whether there is any difference between how democratic countries and countries with more autocratic systems of government have reacted to the pandemic. Our case studies, in turn, enable us to question some of the assumptions that lie within the overarching model, allowing us to ask: What explains why some countries behave differently than expected, and – equally important – what are the mechanisms that explain the behavior of the countries that react exactly as expected? The answers to these questions have in turn informed how we shape our broad analysis.

We restrict the global overview analysis to the initial responses in the opening phase of the pandemic, between 1 January and 10 May 2020, before most countries were past the first wave. This is primarily because the real-time data collection tends to have several errors and inaccuracies, while the data up until 10 May have been checked more thoroughly. For the country case studies, the authors have analyzed the situation up until 10 June. We have seen no indication that this difference in the time period covered changes the conclusions in any significant way. Furthermore, the overview data does not consider sub-national variation – such as the extraordinary situation in Northern Italy and Wuhan in China – in the policy response. The case studies in the Middle East help illuminate the large variation of responses also within countries.

The Middle East, like the rest of the world, has been hit by the COVID-19 pandemic. However, the variations in both severity of the outbreak and the scope and intensity of government reactions are large. Jordan, at one end of the spectrum, has had a very low death rate and a high degree of government-mandated lockdown. Iran, at the other end of the spectrum, has had a high death rate and a relatively low degree of country closure policies.
2. Data

We have combined four categories of data: a) the V-Dem data on regime characteristics;\(^1\) b) economic and demographic information on the country; c) data on the severity of the COVID-19 outbreak in each country; and d) data on regime policies aimed at handling the crisis.

The V-Dem data is static in the sense that the data we use is characteristic of what the regimes looked like in December 2019 (Coppedge et al. 2020). The same is true for the economic and demographic data, which are largely from the World Bank (Roser et al. 2020). Here, we use the latest year available per country. The data on the severity of the COVID-19 outbreak and the policies enacted in response, our final two categories of data, are temporal and thus follow the daily developments within each country. For the descriptive statistics, we extract a ‘snapshot’ from specific points in time, indicated at the relevant places (Roser et al. 2020).

The data on regime policies enacted in relation to COVID-19 is produced by the Blavatnik School of Government (Hale et al. 2020). It breaks these policies down into two broad categories. The first category is ‘containment and closure’ and the second is ‘income support’. The ‘containment and closure’ category is measured in what is called the stringency-index, ranging from 0 to 100, where 100 is total lockdown of the country. This is constructed based on 9 indicators, described in Table 1. The model combines the various values of these nine measures and produces a total score. Very few countries ever reached 100; Jordan was one of very few that did. ‘Income support’ takes on 3 values: 0 indicates no income support; 1 indicates that the government is replacing less than 50% of lost salary (or if a flat sum, it is less than 50% median salary); and 2 indicates that the government is replacing 50% or more of lost salary (or if a flat sum, it is greater than 50% median salary).

Importantly, these are not two sets of either/or policies. States do not either implement ‘containment and closure’ or not, and they do not either give ‘income support’ or not. Similarly, states do not either implement ‘containment and closure’ or ‘income support’. States typically implement some combination of both to a different extent and at different points in time. The important question is therefore: why do certain states implement more or less of each of these policy measures? This question also has a clear temporal aspect: at what point in time (in relation to the severity of the COVID-19 outbreak) do states implement these mechanisms? And for how long do they maintain them?

3. Democracy

The V-Dem database gives countries a democracy score, spanning from 0 to 1, with 1 being a fully-fledged electoral democracy. The index, known as the Polyarchy-index,\(^2\) consists of 5 sub-components: 1) freedom of expression; 2) freedom of association; 3) elected officials; 4) clean elections; 5) suffrage. These components are themselves indexes based on individual questions coded by experts. Many of these questions demand that experts rate complex concepts, and the final verdict may vary across individuals and across cases. Moreover, equally knowledgeable experts will often disagree. V-Dem therefore uses several experts and employs “Item-Response Theory” to make the measure comparable through time (Coppedge et al. 2020).

For a global point of reference, Denmark had the highest score by the end of 2019, with 0.9, whilst Saudi Arabia is ranked as the most autocratic country with a score of 0.023. The United States scores 0.798. When it comes to our country cases, they represent much of the regional range and are thus representative of regime types in the Middle East. Notably, though, we did not include any countries that have an ongoing war within their borders. In states such as Yemen, Syria and Libya, measures of neither policy response nor data on COVID-19 are reliable in any meaningful way. While Palestine is an entity in a state of conflict, it is not an ongoing war in the same way and many of the state-like institutions have well-functioning reporting mechanisms. The same goes for countries engaged in conflict outside of their own borders, such as Turkey, who is militarily involved in northern Syria.

Amongst our country cases, Palestine/Gaza\(^3\) has the lowest democracy score (though it does not represent the lowest score in the region), with a paltry 0.13. While the de facto governing body there was technically the result of a parliamentary/legislative council election, Hamas has since secured and solidified its power in the aftermath of the 2007 intra-Palestine divide (while under Israeli-Egyptian siege). Hamas has clamped down on civil society and has not held elections in Gaza since 2006. Iran has the second lowest democracy score, with 0.217. While Iran has elections to a parliament and to the position of president, the country is run according to the vilayet e-fiqh system, according to which those running for office are vetted by religious jurists, and where the head of state, the Supreme Leader, is not an elected official. Jordan fares somewhat better with a score of 0.276. Jordan also has an elected parliament, but the head of state is the Hashemite monarch, which is a hereditary position. The King can disband the government at his will, and there are limits on freedom of the press. Palestine/West Bank scores almost equal to Jordan with 0.283. Palestine/West Bank technically has an elected president (in office since 2005) and an elected parliament/legislative council (elected in 2006, but dysfunctional since then and dissolved by the President in late 2018). Despite the multiple declarations to hold the decade-long overdue parliamentary and presidential elections, neither of these have taken place, nor are they currently scheduled. Furthermore, there has been a downward trend in press freedom and increasingly authoritarian trends emerging in the occupied West Bank. Turkey under President Erdoğan also hovers around the same score at 0.292 and can be placed in a space between representative democracy, with regular elections, and authoritarianism. Key features of the present governance model include the absence of horizontal accountability (inadequate separation of powers and corruption), weak freedom of expression, strong centralized rule by a populist leader with unchecked powers, and clientelist practices. Israel scores the highest amongst our cases, but not the highest in the region, with a score of 0.667. The democracy score for Israel, often touted as the ‘only democracy in the region’, has declined from 0.76 since 2015. This reflects very particular

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\(^2\) From Robert A. Dahl’s (1971) term Polyarchy, a more realistic implementation of the unattainable ideal of democracy.

\(^3\) The West Bank and Gaza together form what we usually term Palestine. The V-Dem database treats them as separate entities and gives them separate scores. The separation is therefore a methodological one and does not imply that we see them as distinct political entities.
recent developments such as the nation-state law and the attack on the press and the judiciary by the government. This score relates only to Israel proper and does not factor in that Israel is also an occupying power.

Regarding the span of democracy scores within the region, the lowest score was held by Saudi Arabia at 0.023 and the highest was held by Tunisia at 0.723.

In Figure 1, we have illustrated the MENA region, with more intense green indicating a higher democracy score.

Figure 1: Democracy in MENA as of December 2019. Darker green colour indicates a higher Polyarchy-score
4. Containment and Closure

Globally, there was a very modest use of strict closure policies during the first two months of 2020. On 1 March, only countries with many cases scored above 50 on the stringency-index: China, Italy, and South Korea. One notable deviation here is Iraq, where there were still few patients with the virus but where they nonetheless enacted strict closure measures. We note that Iraq saw massive demonstrations in this period, and the strict closure policies might have been partly aimed at stifling these protests. By mid-March, panic had erupted globally. Figure 2 illustrates the global median score on the stringency-index between 1 January and 10 May. As the figure illustrates, starting in mid-March, countries started to enact strict measures even though they still only had a few cases of the virus. Our case in point is Jordan, where, as we elaborate in the policy brief on Jordan and COVID-19, the government enforced full curfew with rations (bread) delivered to households for approximately one month. On 1 April, Jordan was among the eight countries with a full 100 score on the stringency-index but ranked as number 75 (out of 157) in the number of confirmed cases.

The strictness of closure also has a temporal aspect. What is most strict, for example, out of a very high closure for a short period of time, versus a medium closure for a long period of time? In Figure 3, we illustrate the cumulative score on the stringency-index for our five case countries. By May, Palestine had the highest score on this cumulative measure. While Jordan had a higher maximum closure score, the country maintained its closure for a shorter period of time compared to Palestine and so the Jordanian score is lower on this cumulative index.

The data shows that as a general tendency, democratic countries have been somewhat more restrained in their use of closure policies when compared to autocracies. There are several reasons for this. First, closure policies are generally unpopular, and democratic leaders risk being punished in the polls if they cannot justify enacted closure. A full curfew, for example, seemed legitimate in the hardest hit areas of Italy and Spain, but would have been more difficult to explain to the Norwegian population. For reference, the closure in Norway never reached higher on the stringency index than 75.9. Autocratic leaders, on the other hand, are generally less concerned about electoral punishment, and strict closure can help them achieve other, less sanguine motives. For example, closure makes it more difficult to organize protests, and by restricting freedom of movement, it is easier for autocratic leaders to track down and harass...
individuals in the opposition. Thus, closure has several side-benefits that make such policies slightly more appealing to autocratic leaders. Even if such nefarious reasons are not behind an autocratic state’s closure policy, it is clear that autocrats have fewer disincentives stopping them from enacting closure and more incentives for closure, whilst democracies have more disincentives from enacting closure and fewer incentives for enacting closure.

The question of regime type does not only affect how the state reacts in terms of incentives, but also in terms of capacity. An autocracy usually has a high degree of coercive capacity with a low mobilizing cost, whilst a democracy usually has legal checks and balances that increase the costs of any coercive measures. There is a similar pattern for healthcare infrastructure. Democracies have usually had a sustained focus on building a healthcare system that caters to the population at large, whilst autocracies typically build infrastructure favouring the elites on whom the regime depends. This means that there is a general path dependency whereby states favour the use of the tools in which they have invested their resources in the past. Jordan is a case in point here, as it is a country with a high coercive capacity and a low healthcare capacity. It therefore made sense for the Jordanian regime to institute a hard closure rather than overburden a weak healthcare system.

Table 1: Components of the stringency-index.

<table>
<thead>
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<th>Description</th>
<th>Coding</th>
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<tr>
<td>Closings of schools and universities</td>
<td>0 - no measures; 1 - recommend closing; 2 - require closing (only some levels or categories, e.g. just high school, or just public schools); 3 - require closing all levels; Blank - no data</td>
</tr>
<tr>
<td>Closings of workplaces</td>
<td>0 - no measures; 1 - recommend closing (or recommend work from home); 2 - require closing (or work from home) for some sectors or categories of workers; 3 - require closing (or work from home) for all-but-essential workplaces (e.g. grocery stores, doctors); Blank - no data</td>
</tr>
<tr>
<td>Cancelling public events</td>
<td>0 - no measures; 1 - recommend cancelling; 2 - require cancelling; Blank - no data</td>
</tr>
<tr>
<td>Limits on private gatherings</td>
<td>0 - no restrictions; 1 - restrictions on very large gatherings (the limit is above 1,000 people); 2 - restrictions on gatherings between 101–1,000 people; 3 - restrictions on gatherings between 11–100 people; 4 - restrictions on gatherings of 10 people or less; Blank - no data</td>
</tr>
</tbody>
</table>
### Closing of public transport

0 - no measures; 1 - recommend closing (or significantly reduce volume/route/means of transport available); 2 - require closing (or prohibit most citizens from using it); Blank - no data

### Orders to ‘shelter-in-place’ and otherwise confine to the home

0 - no measures; 1 - recommend not leaving house; 2 - require not leaving house with exceptions for daily exercise, grocery shopping, and ‘essential’ trips; 3 - require not leaving house with minimal exceptions (e.g. allowed to leave once a week, or only one person can leave at a time, etc); Blank - no data

### Restrictions on internal movement between cities/regions

0 - no measures; 1 - recommend not to travel between regions/cities; 2 - internal movement restrictions in place; Blank - no data

### Restrictions on international travel

0 - no restrictions; 1 - screening arrivals; 2 - quarantine arrivals from some or all regions; 3 - ban arrivals from some regions; 4 - ban on all regions or total border closure; Blank - no data

**Note:** this records policy for foreign travellers, not citizens

### Presence of public info campaigns

0 - no COVID-19 public information campaign; 1 - public officials urging caution about COVID-19; 2 - coordinated public information campaign (e.g. across traditional and social media); Blank - no data

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Figure 4: Democracy and Stringency globally at four different dates with our country cases highlighted.
In Figure 4, we have illustrated the correlation between democracy and closure-policies. The figure contains four different graphs, each corresponding to a ‘snapshot’ at four different dates: 1 February, 1 March, 1 April, and 1 May. Each bubble indicates a country, and the size of the bubble indicates the number of confirmed cases of COVID-19 at that point in time. Countries are sorted on their level of democracy along the horizontal axis, with 1 being the most democratic and 0 most autocratic. Countries are sorted by their score on the stringency-index along the vertical axis. For example, the deviating top-left bubble in the panel for 1st February is China. At the time, China had many cases, making the bubble large. It is a highly autocratic country, which is why the bubble is positioned far to the left, and it had already implemented strict containment policies, which is why the bubble is positioned high up in the graph. The blue line indicates the result from a local linear regression line, which indicates a general association between the level of democracy and the use of closure-policies.

Looking at the four different panels, we see how the disease spreads to the democratic countries in Europe by 1 March, and a general wave towards containment by 1 April. By 1 May, the most democratic countries have already started to lift the most restrictive measures. What we see, then, is that the democratic countries enact closure as a reactive policy, and they are quick to reopen once the virus seems to have come under control. Notice, however, that the general association – the blue line in the graphs – does not consider relevant factors such as the wealth of the country, the spread of the disease, or demographic patterns. When we account for these things using more complex regression models, the results indicate a small (but statistically significant) association between more democracy and less containment. The graph illustrates that the association is especially strong for the most democratic countries.

How, then, do our country cases look compared to the global picture? On measures of ‘containment and closure’, our country cases behave more or less as expected on 1 February when there are few registered cases of COVID-19. On the 1 March measure, when cases have started to appear with higher frequency, they are still all behaving as expected, but with some more variance. By 1 April, however, Jordan and Palestine have become outliers, responding more stringently than expected, whilst Iran is an outlier that is being less stringent than expected. On 1 May, Jordan is still slightly more stringent than expected, Palestine is still a more stringent outlier and Iran is more clearly a less stringent outlier. To add some more depth to this: Jordan is an outlier because it has a very high degree of closure measures but few cases, whilst Iran is an
outlier because it has low closure despite a high number of cases. This becomes even more pronounced when one looks at the cumulative stringency, where Palestine gets the highest score of our country cases while Iran gets the lowest.
5. Income Support

In contrast to policies for containment and closure, income support is a popular measure among the electorate. We therefore expect democratic leaders to be more likely to implement such policies than their autocratic counterparts. Economic flexibility is here a complicating factor, as not all democratic states can afford income support, whilst some autocratic states have so much cash on hand that they can do so with relative ease. In Figure 6, we have repeated the same setup as in Figure 4, but with income support indicated along the vertical y-axis. A few things can be noted about the picture that emerges. First, supportive income support policies started to appear during the month of March, as a ‘second wave’ of policy responses after the initial closures. Second, more democratic countries were much more likely to implement them. This is in contrast to closure policies, which were more evenly adopted across regime types. By May, a number of the most autocratic countries had also adopted economic supportive measures.

Figure 6: Democracy and Income support globally at 4 different dates.
For ‘Income support’, all our country cases behaved as expected (according to the global pattern) for the 1 February and 1 March measures. By the 1 April measure, however, Jordan begins to enact minor income support, at an earlier stage than most countries in the group of fairly autocratic countries. As shown in Figure 7, only Tunisia, Israel, Jordan, Kuwait and Qatar had implemented any income support at this time in the MENA region. By the 1 May measure, the global pattern had partially caught up with Jordan, with a few countries – Palestine among them – still not implementing any economic support. When we use more complex regression models to take into account differences such as countries’ economic wealth, the results show strong association between more democracy and more generous income support.

Figure 7: Income support in MENA at 1 April. Darker indicates more generous income support. Light grey indicates no income support.
6. Health Services

We found that beyond looking at state structures in an overall sense, it was specifically important that we investigated the states’ healthcare capacities. We are analyzing a pandemic, after all, and the health system is decisive for vulnerability. We used two different measures to capture this. The first is the WHO measure for states’ hospital beds per capita (prior to this particular outbreak). This number serves as a proxy to describe the states’ preparedness for a large public health crisis. The second number we have collected is COVID-19 tests per capita at around the first and second week of June. This number denotes how well the state in question has been able to mobilize new healthcare resources to limit the spread of the virus. Unfortunately, public information about testing is available for only 11 of the 23 countries.

Figure 8: Hospital beds per 1,000 inhabitants. Our five case studies are highlighted as darker green.

Figure 9: Number of tests per 1,000 inhabitants for selected countries. Our five case studies are highlighted as darker green.
7. Lessons from Case Studies

While global statistics can help explain general tendencies, every country has their own particular challenges and opportunities. In five separate PRIO Middle East Centre policy briefs, we offer a more thorough investigation of Iran, Israel, Jordan, Palestine, and Turkey. In this section, we give a short summary of each of these briefs and the main takeaways for how the respective governments responded to the pandemic. These five country cases highlight that while the broad global tendencies we have presented above are mostly on-point, such an overview does not capture the specific mechanisms that shape a regime’s response in individual countries. Some of the country-specific factors not captured in the statistical overview have to do with such things as combined external and internal pressure (Iran), or challenges faced by a regime/population under occupation (Palestine). Furthermore, the statistical overview only captures state-level policies, while the country-case briefs highlight how the regime can engage less with certain areas/population groups (Turkey) or face challenges due to a high presence of refugees (Jordan, Turkey, Iran). In the following, we highlight the main findings from our five country cases. See the five respective PRIO Middle East Centre policy briefs for more detail (Jensehaugen 2020 on Jordan; Palik 2020 on Iran; Tank 2020 on Turkey; Tartir and Hawari 2020 on Palestine; and Martins and Tjønn 2020 on Israel).

7.1. Iran

Iran was the immediate epicenter of the COVID-19 pandemic in the Middle East and among the most severely hit countries globally. Despite having the highest number of cases and deaths in the region, Iran was late to enforce lockdown measures and early to resume economic activity. Tehran’s reluctance to impose a comprehensive lockdown was driven by its lack of capacity to provide economic support to its population. Iran could not afford severe lockdown measures due to US sanctions, a significant decrease in oil prices, and the leadership’s fears of stirring domestic protest. The lack of effective lockdown, compounded by the regime’s concealment of credible information, led to severe outbreaks of the virus and significantly impacted the population’s trust in government.

- The Since the COVID-19 outbreak, the Islamic Republic of Iran has been the hardest hit country in the MENA region, the slowest to close down, and among the first countries to re-open.
- Iran was not able to introduce considerable income support due to US sanctions, plummeting oil prices, and a global decrease in demand for oil.
- Iranian security forces assumed healthcare-related tasks, ensured government monopoly over information related to the virus, and quickly suppressed prison protests.


7.2. Israel

Israel has been affected by the COVID-19 pandemic, though not as seriously as other countries in the region. As of 10 June 2020, coronavirus casualties in the country stood at 299, but a June uptick in infections has generated uncertainty. Israel has also put to use highly contested means, setting aside personal rights and protections to a larger degree than other democracies, allowing the repurposing of anti-terror surveillance tools to track infection cases, and giving its intelligence
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Service leeway in helping procure medical equipment. The Israeli situation – with hundreds of thousands of its citizens living in occupied territory – is complex, and the management of the pandemic has exposed pre-existing inequalities both within Israel itself, and between Israel and the Occupied Palestinian Territories.

- Israel has largely succeeded in preventing an uncontrolled escalation of the pandemic.
- The government and its agencies mobilized broadly to limit the spread of the disease, occasionally moving beyond the boundaries upheld by other democracies.
- After three inconclusive elections over the previous year, the current government agreement was reached as a direct response to the COVID-19 pandemic.


7.3. Jordan

According to health statistics, Jordan has largely avoided the COVID-19 pandemic. As of early June 2020, there have only been 9 deaths in a population of 10 million. Jordan implemented a strict closure before the outbreak gained momentum. The country’s swift lockdown was due to it being well-equipped to coerce the population, while being structurally ill-equipped to deal with a large outbreak. Jordan has a weak health-care system, a struggling economy and densely populated poor urban areas where the virus would have been hard to contain. Jordan is a success story from a public health perspective, but the societal and economic costs have been high.

- The key to understanding the Jordanian reaction is the state’s high coercive capacity contrasted with the low healthcare capacity.
- Unlike most countries, Jordan implemented a preventive lockdown of an unusually high severity.
- Economic and societal costs have been high, including increasing limitations on the freedom of speech, but the health costs have been remarkably low.


7.4. Palestine

Although the Palestinian authorities followed a set of global standards and procedures to tackle the pandemic, they had to maneuver within severe constraints: weak health infrastructure, a fragile financial situation for the Palestinian Authority (PA), and the political ramifications of the Israeli military occupation – particularly the imminent threat of annexation of major parts of the West Bank. The COVID-19 response yielded a strengthening in the perceived legitimacy and popularity of the Palestinian government, but this is very likely to be short-lived.

- The COVID-19 outbreak in the West Bank and Gaza Strip, observed in late June 2020, has been mild. A possible second wave may be stronger.
- The Palestinian Authority’s strategic communication, with regular briefings to the population, was key to the relative success of the response.
- Despite the instrumentalization of COVID-19 by the Palestinian political and security leadership, deep legitimacy and trust gaps remain.
7.5. Turkey

Turkey’s response to COVID-19 has been effective, employing travel restrictions, selective lockdowns and widespread testing. A young population and a good public healthcare system have been critical to its success. As a global travel hub and the world’s largest migrant host nation, Turkey’s strategy has been important in stopping the spread of the coronavirus. However, lack of transparency and freedom of expression under the Justice and Development Party government (AKP) raises uncertainty regarding official statistics, and there are regional challenges to the government’s national policies. As Turkey’s economy hangs in the balance, the AKP has to weigh up economic needs versus public health, as the re-opening of society may undermine the progress made on containing the pandemic.

- A developed healthcare system and a relatively youthful population have been critical in containing the disease.
- The Turkish government’s reaction to COVID-19 strikes a balance between safeguarding public health and limiting economic repercussions.
- The reported numbers of COVID-19 cases are unreliable due to poor freedom of expression.

8. References


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