How Well Do National and Sub-National Governments Cooperate on Coronavirus?

GMF Experts

As the coronavirus pandemic continues to spread worldwide, countries on both sides of the Atlantic are still struggling to contain it and to deal with the rising number of infections and fatalities. While governments have reacted with different speeds and with different approaches, they have now mostly settled on a similar set of measures, based principally on imposing varying degrees of lockdowns and social-physical distancing. Meanwhile the pressure on their healthcare infrastructure is either already intense or growing. One feature of how the crisis is playing out in several countries has been the political and institutional dynamics between national and sub-national governments, most strikingly and controversially in the United States so far. Below, GMF experts look at how these dynamics have played out in France, Germany, Italy, Spain, Turkey, and the United States, whether they have been a help or hindrance in reacting to the crisis, and whether the pandemic will aggravate existing problems between national and sub-national governments.

France
While countries worldwide affected by the coronavirus pandemic have aimed to find the most appropriate level of public action to fight the virus, France’s approach has been centralized and coordinated from Paris. The crisis has strengthened the national government and its local representation in the country’s departments, the prefectures. President Emmanuel Macron has based his communications on a vocabulary of war to reinforce national unity, as in his “We are at war” speech on March 16.

The state has adopted new legal procedures with the Health Emergency Act of March 23. As a result, the prime minister can now impose certain measures by decree for two months, in metropolitan France and overseas territories, including home confinement, prohibiting gatherings, and requisitions of protective masks and hydroalcoholic gel. The government is also monitoring medical processes. For instance, when regions are overwhelmed by hospitalization of the most serious cases, the General Secretariat of the Ministry of Health, in coordination with the Regional Health Agencies and regional prefects can decide to transfer patients from the medically saturated region to another less affected. At the beginning of April, 50 patients were thus transferred from the Paris region to the Normandy region. Some leeway is left to local authorities if they need to take special measures, such as the reopening of an open-air market or the implementation of a curfew. But final containment decisions and waivers are made by prefectural decrees. For instance, the curfew orders issued by mayors in two cities in Moselle on March 24 were invalidated by the department’s prefect.
The coronavirus crisis seems to have enhanced fragmentation at the national and international levels. In France, however, it has not challenged the longstanding centralizing tradition, despite all the risks of bureaucratic delays this implies. The competence for public and health action lies with the center, attempting to adjust needs according to regions. But the first criticisms of the center’s poor preparation have started to emerge, reinforced by the clumsy communication of some members of the government; for example, among several ill-chosen remarks, the government spokeswoman Sibeth Ndiaye explained that a mask is not necessary “when you are not sick or a caregiver.” Since he took over a press conference on March 28, Prime Minister Edouard Philippe has centralized the government’s communications and taken a more prominent role in it. This shows the government has understood the importance of a transparent and clear communications to prevent a very controversial aftermath of the crisis.

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**Germany**

Federalism is enshrined in Germany’s constitution and decentralization is the norm, giving the 16 states authority over the likes of education, policing, and culture. As the pandemic unfolded, the federal government stuck to the letter of the law and watched as different state governments announced varying measures to contain the coronavirus, because monitoring and protecting against infectious diseases falls within their purview. But it took an unusual intervention from Chancellor Angela Merkel for the whole country to realize the severity of the outbreak and to adopt common action against it. On March 18, for the first time since she came to office—except for her annual New Year’s address—she took to the airwaves to say Germany faced its biggest challenge since the Second World War.

Although the Robert Koch Institute’s, the country’s public health agency, had been issuing daily national outlooks, patchwork regulations were emerging across the country and it seemed as if state leaders were competing with each other over their credentials for higher office as well as medical equipment. The minister presidents of Bavaria and North Rhine-Westphalia, Armin Laschet and Markus Söder respectively, are both potential successors to Merkel. The health minister of North Rhine-Westphalia would not reveal where he had purchased masks at the beginning of March because of fierce competition for resources. It was also apparent that Germany was embarking on divergent courses regarding school closures and public gatherings.

After Merkel implored citizens to follow the guidelines on social distancing and show solidarity, a like-mindedness took hold around the country and citizens from Stuttgart to Dresden now face the same national baseline restrictions. A little direction and tone from the top were needed to allow for better coordination and collective mobilization. That does not mean that good policy cannot come from the local level, however. For example, the city of Jena, known for its innovation and the sciences, just made facial masks mandatory for visits to the supermarket or while using public transportation.

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**Italy**

The dynamics between the national and regional governments has been a central topic of debate in Italy as the coronavirus crisis has unfolded. Historically, there are two major dynamics with regard to the center-regions
situation: on the one hand, a deep north-south divide. On the other, what is known in Italian political culture as campanislimo (parochialism): the dominance of local interests and narratives.

A change in the constitution in 2001 reinforced the role of the regional governments on health issues, which became part of the so-called “concurrent legislation” between center and the regions. This contributed to broaden the gap between regional health systems. However, one of the paradoxes of the current crisis is that the systems in more prosperous northern Italy, despite having more robust fundamentals, started suffering soon. There, hundreds of medical staff were infected and dozens have died—a tragedy within the tragedy. The health system in the south has so far managed relatively well. The number of reported infections is lower there, but local authorities and even citizens also took several preventive measures even before the formal imposition of a national lockdown as the mounting crisis in the north raised concerns.

The regional governors of Lombardy and Veneto in the north, usually champions of greater autonomy, have accused the central government of abandoning their regions. As a result of this crisis, the populist Five Star Movement and the center-left Democratic Party have now called for re-centralizing health policy, a call that public opinion seems to appreciate. The problems of coordination between regions and the center, as well as a public opinion more inclined towards re-centralizing specific powers, will be the drivers of a likely change in Italy, shifting the balance between regional and central government in favor of the latter.

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**Turkey**

In Turkey the relationship between the central government and the municipalities held by the opposition has evolved from initial cooperation to competition and finally confrontation. In the beginning the municipalities, including those that are run by the opposition, limited their activities to supporting the social-distancing measures introduced by the government through initiatives such as restricting public transportation and removing benches from main squares. Mayors of big metropolitan cities, which are mainly opposition-controlled demanded more strict measures including a lockdown, but in a mild non-accusing manner.

Then, the metropolitan municipalities began competing with the central government by taking initiatives that would ease the difficulties faced by their residents in these difficult times, such as reducing utility prices, tolerating non-payments of bills, or doing the shopping for the elderly who were subject to a curfew. And finally, the metropolitan mayors from the opposition launched donation campaigns aiming at assisting the most vulnerable citizens who had lost their incomes, such as street vendors. President Recep Tayyp Erdoğan immediately responded by introducing his own nationwide campaign. The next day, the Ministry of Interior suspended the campaigns of the municipalities on highly dubious legal grounds. With this, what started as cooperation between the central and local governments transformed to confrontation. While opposition-held municipalities have already lodged court appeals against the decision, this is unlikely to produce any results and the situation will remain a talking point for the opposition.

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**United States**
In moments of crisis there has typically been a coalescing in the United States of federal officials in Washington with state and local officials. Such a collective response at all levels of government is more critical than ever given that the United States now has the highest reported coronavirus infection rate globally. While cooperation is ongoing daily between senior federal and state officials it is at times hampered by what some believe has been a slow response, early dismissal of the threat, sowing of political divisions, and mixed messaging by President Donald Trump. Although Trump may not want the responsibility of this crisis on his shoulders, state and local officials—who are on the frontline of the crisis—are increasingly in need of federal assistance, waiting for protective and palliative equipment, including ventilators, respirators, and other supplies, to keep their citizens safe.

Unlike with the collective government response to the needs of New York City after 9/11 or of New Jersey after Hurricane Sandy in 2012, which also faced serious coordination challenges, federal, state, and local officials are having difficulty staying on the same footing. This has impacted the ability to address the coronavirus and help communities, first responders, and millions of vulnerable Americans. President Trump's attacks on several governors in recent weeks and telling the vice president not to call those “who don't treat you right” creates new fissures between the federal government and the states and harms building a unified response. As the weeks ahead become more difficult, President Trump and other political leaders need to take the high road, as the federal, state, and local responses will need to be further strengthened. Americans may be turning to state governors for leadership, but the latter know they will be more capable of dealing with the coronavirus with the full weight, resources, and support of the administration and federal government.

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