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You May not be Interested in COVID, but COVID is Interested in You

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If we accept that security is a sentence that may be written many ways, it follows that traditional strategic studies concerns – focussing especially on an external attack and the ability to respond thereto – may be only one such rendering. Given the well-developed and -established nature of traditional strategic studies, it is understandable that an intellectual broadening from "strategy" to "security" could meet some concern and resistance.[1] The possibility that differing types of security issues could generate vastly different sorts of studies, as well as responses, could create the very sort of intellectual and subject-matter diffusion and loss of focus that supporters of a narrower traditional strategic studies approach fear. Nonetheless, the possibility exists for cross-overs and linkages between traditional strategic studies and a broader concept of security studies, as well as reasonable support for specialization. This positive possibility exists on both a more detailed, instrumental level and on a broader, more comparative and theoretical level.

On an instrumental level, one notes the use of the military in local disasters (natural or, as in the case of Chernobyl, technological) or, in the case of the pandemic, in

[1] Muthiah Alagappa, ed., *Asian Security Practice: Material and Ideational Influences* (Stanford: Stanford University Press, 1998), pp. 11-23, 27-64, 677-697, addresses aspects of this in developing his broader formulation of "security with adjectives."

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the form of medical assistance. It is also clear that military authorities are giving attention to the security consequences of climate change as both a threat in its political consequences and to military capabilities (e.g., the effects of rising sea levels on ports and naval bases). The use of state instruments – whether troops or state vessels – to handle issues of migration is also apparent. The security challenges posed by cybercrime and cyberwar are also notable.

More broadly, war may be different from the other horsemen of the Apocalypse, but there may also be at least some heuristic similarities in the challenges posed and the record of responses that are worthy of consideration. McAuley raises this question in his use of a broad security-oriented framework to discuss the COVID-19 pandemic in Alberta. While, as he notes, "A copy of *On War* would not have been expected to serve as a manual of action for pandemic response," it is possible that some elements of Clausewitz, or other traditional strategic thinkers, judiciously employed, could be at least one point of origin for fruitful thinking. After all, there may be at least some common elements between the preparation for war and its undertaking and the handling of other great sociopolitical challenges and enterprises. Not all the problems faced by the military are exclusive simply to the military even if they may sometimes take on a certain specific military character. Responding effectively to *any* security challenge requires the use of appropriate and *fit-for-purpose* institutions and agencies as instruments of policy, and reasonably clear and well-considered policy objectives and strategies. In many cases, it will also require substantial public support, rather than indifference or opposition. That issues of resistance to and distrust of policy responses to the pandemic are of significant concern, and are part of a larger sense of distrust in specific institutions or in government as such, merely underlines this. Concerns about social cohesion, trust in authorities, and national *will* are not relevant just to military undertakings. Thus, it is notable that McAuley's focus is on a "whole-of-society" problematic, on institutional preparedness and responses to challenges, and on problems in decision-making and social-political responses.[2]

[2] One is tempted to point to the supposed Clausewitzian trinity of "people, army, government" as one specific example of this broader set. Villacres and Basford note this version of the trinity, and how it differs from the initial Clausewitzian version. However, they do not challenge its– at least limited – utility. Their objection is more directed at attempts to use the revised trinity to claim the obsolescence of Clausewitz. Edward J. Villacres and Christopher Bassford, "Reclaiming the Clausewitzian Trinity,"

The Security Challenge

The Public Health Agency of Canada (PHAC) has articulated the broad policy goal in the case of a pandemic as minimizing serious illness and death while also minimizing social disruption.[3] At the same time, it acknowledged that

> An optimal pandemic response is one that is rapid, decisive, adaptable and coordinated. Decision-making during a pandemic is complex and reflects an environment where knowledge is constantly changing, there is often a lack of or unclear research and evidence, data may not be standardized, and decisions need to reflect multiple needs. Within the Canadian context, the division of responsibilities between the federal, provincial/territorial and municipal levels of government, each with their own ability to make independent decisions, presents an added layer of complexity.[4]

A brief survey of both the KPMG report on the response of the Alberta government to the first wave and the 2020 and 2021 PHAC Annual Reports quickly establishes both the problem of understanding and the problem of management.[5] The characteristics of the situation include the following, which themselves vary over time and from one location (within and across jurisdictions – federal, provincial, and municipal) and one demographic and sub-population to another:

1. A virus with specific characteristics affecting its virulence, its effects, and its susceptibility to treatment, and as well to subject to change as it mutates.
2. Changing reliable knowledge about the virus and its effects, and about treatment and preventive measures.

Parameters, Autumn 1995, pp. 9-19. It should be clear here that I am appealing to the supposed trinity of people, state, army for its heuristic, not its scriptural, properties. If anything, this suggests the potential relevance of Clausewitz as inspiration, one possible starting-point, for broader thinking.

[3] Public Health Agency of Canada, *From Risk to Resilience: An Equity Approach to COVID-19. The Chief Public Health Officer of Canada's Report of the State of Public Health in Canada 2020*, p. 13 (hereinafter cited as PHAC 2020).

[4] Ibid.

[5] KPMG, *Review of Alberta's Covid-19 Pandemic Response: March 1 to October 12, 2020: Final Report to the Government of Alberta, January 2021.* At http://health-alberta-covid-19-pandemic-response-review-final-report.pdf (hereinafter cited as KPMG), PHAC Annual Report 2020. Public Health Agency of Canada, *A Vision to Transform Canada's Public Health System: The Chief Public Health Officer of Canada's Report on the State of Public Health in Canada 2021* (hereinafter cited as PHAC 2021).

3. A changing repertoire of available responses, varying with changing reliable knowledge and with availability and access to treatments and preventive measures.
4. Differing locations and populations, such that the effects of the virus are felt differently over time and across locations and sub-populations, and varying with their specific circumstances and access to healthcare.[6]
5. The changing capacity of healthcare systems in the face of the pressures of the pandemic.
6. Variations among jurisdictions (federal, provincial and municipal) in the effects of the pandemic, the legal and health responses available to them, the resources available relative to the challenges they faced, and their decisions.
7. The socio-political context of the response by authorities and the reaction by populations.

The twin public health objectives – minimizing serious illness and death while also minimizing social disruption – present a difficult problem of finding an optimal (or, more likely, merely satisficing) solution[7] in a dynamic, multi-dimensional space of the virus's characteristics, shifting bases of knowledge and resources, and costs (social, economic, political and health). Initially, the elderly residing in long-term care facilities were particularly vulnerable but, as this sub-population became better protected, the virus shifted increasingly to other groups characterized by differing age and socio-economic conditions. The spread of the virus affected different areas and populations differently at any one time, even if there was an overall consistency in the pattern that would eventually emerge. For example, if the virus appeared initially in major urban centres, especially those that served as major travel hubs (both domestic and international), it would then spread to smaller towns and cities, and into rural areas. How specific groups and locations experience the pandemic might thus vary substantially at any one time, affecting responses to both the pandemic and to measures taken to counter it.

[6] See, e.g., PHAC 2020, p. 20.
[7] PHAC 2021, p. 13: "It was difficult to mitigate the social, psychological, and economic consequences of public health measures, while also reducing transmission by limiting community-wide contact rates."

Challenge and Response: The Institutional Level

Razumenko notes the institutional response of Canadian authorities to the Great Influenza – the development of authorities, advisory bodies, protocols and procedures, and so on. PHAC 2021 provides a broad timeline of developments in Canadian public health from pre-colonial times to the present,[8] while PHAC 2020 provides a timeline of public health responses between 1 January 2020 and 17 June.[9] The KPMG report provides a timeline of the pandemic and responses in Alberta up to 12 October 2020;[10] it may be compared to and extended by reference to Bratt's Appendix.

Public health agencies at both the federal and the provincial level would be drawn upon in response to the pandemic, but they would not be the only actors involved. In Alberta, the Chief Medical Officer of Health is a standing position; Alberta Health Services and the Health Ministry similarly would already exist; other emergency preparedness agencies would also be already-existing or were created specifically in response to the first wave. Cabinet committees would be created or existing committees drawn upon similarly.[11] The public health agencies, one would assume, would have an institutional advantage in responding to the pandemic, given the nature of their knowledge bases (including epidemiology, data and modeling), authorities, and experiences: both the KPMG report and the PHAC 2020 report note that plans and prior experience stemming from the earlier SARS and the H1N1 episodes existed.[12] However, both also note that this prior experience and planning had limitations with respect to the COVID-19 epidemic. Noted the KPMG report, "Simply put, no jurisdiction's existing planning or preparedness could have been "fit for purpose" to respond to the COVID-19 crisis."[13]

The federal response would be further complicated by a number of factors, including:

[8] PHAC 2021, p. 44.
[9] PHAC 2020, pp. 61-62.
[10] KPMG, pp. 19-21.
[11] Ibid., pp. 16-17, 99-100. KPMG, pp. 78-79, notes that policy-making shifted to more informal structures with respect to the economic consequences of measures: "Previous structures and protocols had not anticipated a crisis of such magnitude and the pace at which decisions would need to be made; as a result, more informal structures were adopted."
[12] KPMG, p. 3; PHAC 2020, p. 13.
[13] KPMG, p. 3.

1. The assignment of health to provincial jurisdiction under the Canadian constitution, providing a basis for varying provincial responses;
2. The variation in the pandemic situation both over time and from place to place, thus leading to varying responses by local authorities;
3. Data gaps and standardization problems. PHAC 2020 noted that "Obtaining consistent, timely, and complete national COVID-19 case data was difficult, given that provincial and territorial jurisdictions do not always collect or report information in the same way."[14]

In contrast, the KPMG report noted the advantage of the dominant position of Alberta's single health authority in terms of data, consistency of standards and regulations for the continuing care challenge and in other management situations, standardized messaging, etc.[15] However, although it does not specifically address the response of the municipal level, the report also notes some problems in the provincial-municipal interface.[16]

Other actors in the province's disaster and emergency management apparatus, oriented to different sorts of challenges would have to re-orient their thinking and approach. The KPMG report notes that

> In recent decades, most emergencies that Alberta has responded to have been natural disasters including floods and fires. A natural disaster is often a specific occurrence in a localized region, and may impact specific sectors and geographically contained portions of the population. Pandemic emergences differ substantially from natural disasters, in that their geographical spread is much broader, and the duration of the event and required response are much longer.[17]

McAuley notes that "mainstream critical infrastructure" protection plans were, as one might expect, focussed on disruptions in "communications and transportation, critical nodes" in a network, rather than on wholesale disruptions of the linkages as such. Critical infrastructure responses were successful, he argues, in particular sectors, but in general no one seems to have been prepared in advance for the broad social

[14] PHAC 2021, pp. 33, 82. See also PHAC 2020, pp. 50-52.
[15] KPMG pp. 5-6, 31-32.
[16] Ibid., pp. 8, 84-88.
[17] Ibid., p. 15.

disruption created by the pandemic itself and by the initial public health measures – absent a vaccine – taken in response to it. The specific knowledge advantages of the public health agencies were themselves also crucially limited. He argues that various possible public health measures were drawn upon to model forecasts to guide decision-making, but the question of their broader implications – including, one might suggest, public receptivity – were "outside the boundaries" of those models. Government responses thus had to adapt on the fly, both as the situation and knowledge changed, and as public consequences and acceptance varied.

An additional institutional factor pointed to by Bratt, is the political relationship between the government of Alberta and the healthcare sector, particularly Alberta Health Services, its doctors and nurses. Expenditures in the health sector, a major element in the province's budgeting, have long been a sensitive issue. In the face of periodic declines in petroleum-related revenues since the 1990s, the government has characteristically responded with budget cuts and reorganizations, and an antagonistic relationship with doctors and nurses has been a steady feature. The combination of the most recent price collapse and the pandemic made the government's usual combative approach particularly difficult. Threats that the sector would be overwhelmed by the pandemic were met in part by increasing capacity in intensive care units and through equipment purchases, but also by shifting resources (for example, postponing non-essential surgeries), but as Bratt notes, the government initially continued to pursue a hard line in its dispute with doctors. It ultimately backed down and the Health Minister was reassigned. Government responses to the pandemic typically faced strong criticisms from healthcare professionals.

Communications were also an important part of the institutional response. PHAC 2020 noted several challenges: "Vast amount and varying quality of information," "Local context of a global pandemic," "COVID-19 outbreaks across Canada have had different effects on different populations. [18] Effective public health measures seek to recognize and target these local contexts and regional differences. In turn, information needs to be tailored and locally contextualized, while at the same time balanced with consistent key messaging being shared across the country: rapidly evolving public health science; and an environment of uncertainty and fear. PHAC

[18] PHAC 2020, p. 16.

2021 noted problems arising from the need for coherent, consistent and transparent messaging and risk communication, incorporation of evolving knowledge, and the need to fit communications to differing targets. It noted the use of social media to communicate, but also multiple and competing messages. "This caused an infodemic, an overabundance of information, both online and offline," which may have undermined efforts. There was also the need to counter misinformation and disinformation. [19] The KPMG report noted the wide variety of communication mechanisms used, but found the communications plan "not fit for purpose."[20] It noted, among other things, difficulties in the provincial-municipal interface – "Municipalities engaged in this Review reported a lack of engagement as active partners in the response to the first wave" – and recommended "Work closely and collaboratively with municipalities to communicate and implement pandemic response measures… The implementation of provincial measures could be more effective, efficient and better aligned through closer collaboration and increased two-way communication."[21]

Measures to try to mitigate the economic effects of public health measures were a final element of both the provincial and the federal responses . Aside from somewhat looser restrictions, especially after the first wave, and given differences among all provinces, Alberta had a broader definition of "essential services," which reduced some aspects of the economic impact.[22]

Challenge and Response: Policies, Politics and Decision-Making

McAuley notes a variety of challenges facing decision-makers, and especially in terms of his *cynefin* framework.[23] The problem, both in understanding and in practical management, is to move from an initial situation that is, at an extreme, chaotic, through complexity and complication and finally to simplicity, the final stage being one where things presumably are both well-understood and, one hopes, manageable as well

[19] PHAC 2021, pp. 34-35.
[20] KPMG, pp. 80, 83. On the subject of provincial-municipal communications, see pp. 84-85, 88.
[21] KPMG, quoted p. 8; see also pp. 84-85, 88.
[22] KPMG, pp. 62, 63.
[23] For some of these see also, e.g., the final chapters of Lawrence Freedman, *Strategy: A History* (Oxford: Oxford University Press, 2013).

(though sound understanding is not a guarantee of an ability to manage). In the case of the COVID-19 pandemic, the initial period seems reasonably characterized as complex, if not chaotic, as a new virus of unknown and frightening characteristics was first encountered and as policy-makers struggled both to understand and grapple with it. This is attested to by the very rapid and high initial deaths as the virus first struck especially among highly-vulnerable populations (in care facilities and in populations with certain co-morbidities). Given the lack of effective treatments other than ventilators, responses initially turned to social measures, travel bans, and personal protective equipment, but with both problems implementing and disagreements concerning these measures. As time passed, increased knowledge, growing availability of treatments, continued resort to social measures and especially the development of vaccines have shifted both the nature of the problem and the available repertoire of responses. Yet at the same time, the continued mutation of the virus has also altered the situation faced.

Bratt argues the importance of ideology, particularly in the case of the Premier, Jason Kenney, in affecting the course of the government's response to the pandemic. Under conditions especially of changing knowledge and uncertainty, underlying dispositions will play an important role in selecting and implementing responses. As well, the tension within the United Conservative Party over the pandemic responses would play an important role, as documented by Bratt. For example, shifting to businesses the role of requiring vaccinations might be consistent with an emphasis on preserving choice, but would also, at least technically, dodge the bullet of a contentious government vaccine mandate. Other factors may also come into play.In the face of *uncertainty and fear*, any government will be tempted to try to project an appearance of optimism and control. This could lead it to create hostages to fortune, such as the *Open for Summer* policy. If even good choices are subject to bad luck, bad choices may be even more so.

The government's responses should be framed not only in terms of the pandemic itself and opposition to its policies but as well in a larger political context. The UCP entered power in 2019 determined to roll back aspects of the previous New Democratic Party government's actions, to launch a stronger defence of the petroleum sector in the province, to restore provincial finances, and to show its responsiveness to forces within

the province dissatisfied with the existing situation regarding the province's relations with the federal government. In power for less than a year and still dealing with the effects of the collapse of oil prices, it is no surprise that the initial period of the pandemic would find the government of Alberta pursuing measures to revive the province's economy and repair the state of the province's finances. That it would try to attract investment and control government spending would be perfectly in line with the approach of previous conservative provincial governments in similar circumstances. That healthcare would be a significant target, being one of the largest components of the provincial budget, is also no surprise: its importance in spending had made it a natural and a recurring target for such exercises in the past. As the pandemic developed in Alberta, finally, it is not a surprise that the government's response would reflect both the broad conservative orientation of the governing party and its internal tensions as well as the strength of outside dissatisfaction.

But by the final months of 2019 – that is, *before* the pandemic hit – the Alberta premier and his party were already facing political difficulties. Budget cuts and other problems had already cut his approval rating from his post-election high of well over 50 percent to the point where he was the third least popular premier in Canada, at 40 percent.[24] On the broader government agenda, a later Leger poll suggested that it was vulnerable on a wide variety of issues. Its "poor" ratings were as follows on seven of the most prevalent issues:

1. reconciliation with Indigenous peoples (62 percent);
2. addressing climate change (68 percent);
3. growing the economy (74 percent);
4. diversifying the economy (72 percent);
5. handling the pandemic (81 percent);
6. dealing with social issues (77 percent);
7. working with the federal government to advance Alberta's interests (78 percent).[25]

[24] Stuart Thompson, "Jason Kenney's approval rating plummets in the wake of Alberta budget cuts." *National Post*, 12 December 2019.
[25] Don Braid, "Braid: Some hope for UCP in poll despite harsh disapproval of performance." *Calgary Herald*, 15 December 2021.

In some cases, respondents might have wanted more aggressive actions (for example, against the federal government), but in others, they might have found the province's positions insufficiently in step with the times. However the numbers are interpreted, they suggest that the Alberta government's usual playbook was no longer strongly resonating with its public.

In regard to the pandemic, the UCP government and the Premier have had to juggle at least three medical and political balls simultaneously: handling the effects of the pandemic on the health of Albertans and on the healthcare system; trying to balance those effects against the social and economic disruptions of effective public health measures; and trying to fend off attacks from both opponents and proponents of stronger measures. A strong vaccination uptake would help greatly to mitigate the problems posed by all of these, but the province has been reluctant at least visibly to force vaccination on reluctant Albertans (other provinces have also wrestled with the problem of encouraging vaccinations). And behind this is the fourth ball: an NDP which has led the UCP in the polls, in fundraising and in the popularity of its leader consistently, if to varying degrees, for months.[26] Bratt notes that levels of NDP support in Calgary rose substantially between April 2019 and April 2021, topping the UCP in the latter poll, while Edmonton has long been an NDP base. There is still time before the next election for the party and the premier to recover, particularly if the petroleum sector does well. However, there is also the possibility of a catch-22 at least in the pandemic situation, and especially if omicron is not the final word: in a first-past-the-post system, alienating its right risks vote-splitting of the sort that allowed an NDP victory in 2015; on the other hand, trying to repair relations on its right could still leave it vulnerable to the NDP – unless good news (such as in the petroleum sector) is sufficiently good in the months to come.

Challenge and Response: The Party and the Public

[26] "Kenney's UCP bleeding support to Notley's NDP as Opposition support nears 40%, poll suggests." *CBC*, 18 March 2021, https: www.cbc.ca/news/canada/calgary/alberta-poll-notley-kenney-ucp-ndp-common-1.5954876. Adam Lachacz, "'These numbers are shocking': Alberta NDP doubles UCP in 2021 Q2 fundraising." *CTV News*, 29 July 2021, https://edmonton.ctvnews.ca/these-numbers-are-shocking-alberta-ndp-doubles-ucp-in-2021-q2-fundraising-1.5528900.

Bratt notes the tensions within the UCP, some antedating the pandemic and some more directly linked to the government's responses. The rural base of the party, where the Wild Rose element is stronger, is further to the right and likely to be unwelcoming to restrictions. If the effects of the pandemic are later, and less visible, in rural areas, then it is understandable that it might see restrictions as too strong. In contrast, the party in large urban centres, suggests Bratt, is more towards the centre politically. While influenced by economic concerns over restrictions, it is also more vulnerable, especially in Calgary, to the effects of the earlier appearance of the pandemic and its consequences – swift, visible and significantly fatal. Thus, stronger measures, more quickly taken, would find more favour.

A significant split also developed in the public, though the initial measures may have been accepted. Bratt notes that the government backed off its initial, strong measures. That did not solve its political problems, however: as the third wave developed, Don Braid, a *Calgary Herald* columnist, reported that 45 percent of Albertans thought existing COVID-19 restrictions went too far while 42 percent thought they did not go far enough – and 75 percent thought the Premier was doing a bad job of managing the pandemic.[27] While pressures for stronger measures, particularly with respect to vaccinations, have developed, optimistic decisions to relax restrictions (especially for holidays) might nonetheless find some favourable response among a population hoping things are improving, even as they face criticisms from healthcare professionals. Further, McAuley argues, a focus centred above all on public health has been displaced by a *citizen/rights* focus. This would affect the ability and willingness of the government to push harder.

As the pandemic developed, there was more time for resistance to the provincial government's efforts to develop. Yet although that resistance would share some characteristics with outbursts elsewhere, it would seem fair to suggest at least at first glance that it has not been on the scale or with the virulence seen elsewhere (one would also, of course, wish to compare both enforcement measures and the degree of compliance). On a national level, one might explain this by a standard, even stereotyped, appeal to a supposed greater trust in Canadian authorities and institutions

[27] Don Braid, "Braid: Premier Kenney's COVID confusions are catching up with him." *Calgary Herald*, 13 April 2021.

than found in some other states, or to *peace, order and good government* as fundamental Canadian values (as compared, usually and invidiously, to the American "life, liberty, and the pursuit of happiness"). However that may be, one might hypothesize a more specific explanation in Alberta. The later more limited responses may have softened some opposition, though still presenting the government and the Premier with a problem. As well, there was greater opportunity for discontent (whether for stronger or weaker measures) to express itself within the confines of the ruling UCP. Both might blunt, though not stop, manifestations of discontent by some segments of the population.

Conclusion

The COVID-19 pandemic has presented a clear threat to the lives of individual Albertans; together with the measures taken in response, it has posed a clear threat to their economic circumstances while uncovering existing social fissures in terms of the variable vulnerability of sub-populations to both the virus and those response measures. It qualifies as a significant security threat on these levels. In responding to this threat, the Alberta government marshalled its institutional resources and had to adapt them to circumstances of a scale and type last seen one hundred years ago. It had to do so under economic and political conditions that already presented significant challenges, and that were in some cases strongly exacerbated by its policy choices and their consequences. Finally, it had to do so in the face of strong, yet often contradictory, public pressures. These challenges and difficulties found in the microcosm of a single Canadian province in confronting a specific sort of problem may be of interest and use in considering the prospect, particularly of future, especially non-traditional, security challenges.