Tackling Covid-19: Lessons for A Global Challenge

Yanzhong Huang & Samantha Kiernan

China’s aggressive response has won plaudits, but it betrays some of the worrying signs of the SARS crisis.

Clare Wenham

Many countries have introduced border restrictions, but a close look suggests that they offer only the illusion of control.

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South Korea has a legal infrastructure that gives the government powerful tools to combat a disease outbreak. The US should take note.
It’s an Illusion that Border Restrictions Help to Deal With a Global Outbreak

By Clare Wenham

As the outbreak of the coronavirus in China burst into public view in mid-January, Beijing’s startling decision to lock down the city of Wuhan, and eventually the whole of Hubei Province, turned a sharp focus on the use of border controls to battle the crisis as it spread.

Since then, nations around the world have imposed differing versions of such controls. But a close look at border restrictions suggests that they offer only the illusion of control, writes Clare Wenham.

Travel and border restrictions don’t always do what they intend. In outbreaks of pandemic disease, governments often propose that shutting their borders and/or limiting travel from certain nationalities or on certain routes can contain disease at the source of the infection, and in doing so can keep own their population, and economy, safe. We are seeing this in the outbreak of coronavirus (Covid-19), where initially many governments implemented travel restrictions for nationals or travelers from China and South Korea, and later Iran and Italy. This was catapulted into the mainstream when US President Donald Trump announced March 11 that all flights from mainland Europe would be banned from entering the United States, and later from China and South Korea. Such border restrictions will have little effect on the disease’s spread.

The caveat is that these are unprecedented times, and we’ve seen different implementation of travel restrictions from different states. Obviously, a complete shutdown prior to detection of a first case, such as Guatemala and El Salvador, might limit the infection arriving, but there are always caveats, such as nationals and diplomats who are able to enter and may bring an infection with them. The logic, I imagine, would be that this limited transmission would be easier to contain. Only time will tell which of these approaches will ultimately prove the most effective in terms of disease transmission, economic security and population health.

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However, travel restrictions do act as a political placebo for concerned citizens. In the absence of verifiable knowledge about their effectiveness, they can make a population feel as if their government is doing something, and in doing so the government can demonstrate legitimacy, and strengthen domestic support. This might be particularly important amid the current wave of populist governments that look to mass support from their political base. However, this could also amount to offering a false sense of security to citizens in locations with widespread community transmission, and individuals may think that owing to these travel bans, they are not at risk of infection and thus may not adhere to other public health advice such as washing hands and/or limiting exposure at public gatherings.

Yet, these travel restrictions can have a series of secondary, unintended consequences. For example, travel restrictions can negatively affect economies if trade routes are severed and global supply chains disrupted; consumer product distribution networks may suffer and ultimately employment could be impacted. Employment can be further challenged if people are unable to perform travel functions required for their work. This can have gendered effects when we consider the predominant role that Filipino and Indonesian women play as foreign domestic workers in Hong Kong and Singapore. Many such women returned home for Chinese New Year, which coincided with the implementation of travel bans. These women were then unable to return to work, and now live without employment. This has wider ramifications, noting the role of remittances to sustain economies in those countries. It might mean that we see an increase in illegal passage into countries, with people smuggling across borders and potentially contributing to increased spread among undocumented migrant communities, who may not have access to routine medical care. Furthermore, travel restrictions can have regressive effects on access to food, medicines, contraceptives and other supplies. As demand is not met by supply, and prices increase, it is the poorest and most marginalized who suffer. This can have implications for long-term health conditions, economic growth, job security and more.

Instead of emphasizing the security theater of travel restrictions, governments should be meaningfully investing in front-line health care, medical workers, increased testing and surge capacity to manage and respond to the crisis. The global community needs to think creatively about how to mitigate the effects of the crisis across economies and societies going forward.

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