



Denmark Report

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Sustainable Governance in the
Context of the COVID-19 Crisis

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Executive Summary

The coronavirus crisis has been an unusual event, with no obvious blueprint for action in terms of health or economic policies. Information and knowledge regarding how the pandemic would unfold was and remains incomplete; moreover, lockdown-style restrictions are well outside the usual policy toolbox, and therefore economic measures (emergency packages) had to be designed within a very short period of time.

After an initial phase of attempted containment, the Danish strategy has been to keep the virus under control via lockdowns and other restrictions, seeking to avoid the rapid spread of the virus and ensure that hospitals retain sufficient treatment capacity. The government pursued a precautionary approach during the pandemic's first and second wave, with health considerations given priority over other concerns. It has provided extensive economic support, with the goal of protecting the incomes of workers and self-employed people, while also protecting firms and the health of the labor market. In accordance with Danish traditions, most of the emergency economic packages relied on tripartite agreements or consultations. The comprehensive wage compensation scheme has been particularly important among these agreements; however, no less than 14 tripartite agreements had been struck by the end of the review period.

Governance during the crisis has relied on an emergency change made to the Epidemic Act that essentially transferred unheard peacetime powers to the minister of health, weakening the National Health Authority. In many cases, normal parliamentary procedures could be – and were – bypassed. This gave rise to debate. Before Christmas, a political agreement was reached on a new Epidemic Act to be enacted during the first half of 2021. Serious questions were raised about the legal basis for one major action – the culling of mink – with possible constitutional issues referenced. A “scrutiny commission” was subsequently convened.

While lockdown restrictions in March 2020 had a significant negative effect on economic activity (GDP dropped by 6.8% in the second quarter of 2020), unemployment did not show a corresponding rise, due to the wage compensation scheme. Following the reopening in mid-2020, economic

activity quickly picked up (GDP grew by 4.9% in the third quarter of 2020), and most individuals on the wage compensation scheme returned to work. Assessed in broad terms, the emergency packages supported a swift recovery after the economy could be reopened in mid-2020. The second wave of the pandemic resulted in the reintroduction of lockdown restrictions, and the emergency packages were relaunched. It is too early to assess the overall fiscal consequence of the crisis, but preliminary assessments indicate a budgetary effect in 2020 amounting to between 7% and 8% of GDP. However, the country has sufficient fiscal space to accommodate these consequences without endangering long-term fiscal sustainability.

In response to the COVID-19 crisis, activity in the healthcare system was reduced to create room for coronavirus patients. Hospital activity and the number of contacts made with general practitioners declined by around 50% from March to the middle of April 2020 (Sundhedsstyrelsen, 2020a). From mid-April onward, activity picked up again, and was almost back to normal levels by the end of October. The second wave caused a steep increase in the number of infected persons, and activity in hospitals was again reduced, freeing beds for COVID-19 patients. As of the time of writing, this had again been successful, but a number of patient rights, for example regarding waiting-time guarantees, had been suspended and numerous elective surgeries had been cancelled/postponed.

The rollout of vaccines has attested to the Danish healthcare system's agility. By 8 January 2021, all willing nursing home residents – approximately 40,000 people, in around 900 centers – had been vaccinated; moreover, the first small batch of vaccines was distributed on December 27.

Key Challenges

Denmark's management of the coronavirus crisis produced a number of important lessons. This was true of specific health issues and more broadly of the trade-off between health concerns and other socioeconomic objectives, especially with regard to the economy, general well-being and individual freedom. While the crisis management efforts took place under conditions of severely incomplete information, and ultimately represented a continuous process of trial and error, the crisis also showed the importance of cooperation between different institutions and organizations, as well as the need to involve experts. This process was slow and incoherent, and in future crises it will be

important to establish ad hoc expert groups up front that have relevant (typically interdisciplinary) expertise, and which policymakers and civil servants can consult as needed. This is even more important in a situation defined by a widespread lack of knowledge, and is important for the credibility of crisis policies. Decision transparency should be increased, with the public given easy and early access to relevant documents underlying key interventions. For instance, the secrecy that has shrouded the actions of the National Operational Staff (NOST), maybe because medical issues are new to NOST, should be lifted.

Accumulation of data from the early stage of the crisis was incomplete. This applies in particular to essential information on individual behavior and responses to restrictions, and to the effects of the emergency packages. This deficiency became apparent in the second wave of the crisis, when a lack of relevant data made it difficult to draw lessons from the first wave. In a related point, it will be important to invest in the development of integrated epidemiological-economic models. Crisis management has been forced to make trade-offs between health and socioeconomic concerns, and for this it is important to have adequate modeling frameworks.

Information technologies have been important, and have served to mitigate the consequences of lockdowns and other restrictions. A similar pandemic 10 or 15 years ago would have had much more severe consequence, due to the more limited scope for virtual meetings and education, working from home, internet commerce, etc. It will be important to make a systematic analysis of what can be learned in this area. It is also important to study the experience and suggest improvements in areas such as distance learning.

A number of other important lessons can be learned specifically in the area of healthcare and systemic preparedness.

A key weakness in Denmark's preparations was the lack of stockpiles of protective gear like face masks, medical supplies and reagents. Moreover, there had been insufficient attention paid to ensuring that supply chains were robust enough to stand up to a crisis of this scale. The establishment of a brand new 60–70 person Danish Critical Supply Agency, along with a new office within the Ministry of Health, is an attempt to rectify this. However, these hastily constructed organizational units need to be reconsidered with regard to staffing and their place in the government hierarchy. For example, the supply agency's position as part of the National Police does not seem logical, as the primary issues appear to be of medical nature.

The biannual exercises carried out by the Danish Emergency Management Agency should focus regularly on the issue of pandemics, something that previously has not been the case.

The state should introduce a two-tier system of professional advice. In-house professional advice has been coming from the National Health Authority and the Statens Serum Institut. In several instances of additional consultation, outside national and international experts have correctly questioned the in-house advice. The suggestion is thus to require in-house experts to include input from independent national and international experts. Implementation of lessons from the crisis is important in all fields. Keeping track of how lessons are transformed into established practice will be important. In parallel, policymakers should be aware of why some lessons may be neglected.

One urgent task is to analyze the dramatic increase and subsequent decline in video consultations in hospitals and general practices. There is considerable potential in developing this field, but a change of culture and a better understanding of the potential for patients and finances will be needed. Doctors are by training taught that face-to-face contact is very important, but at the same time they rely increasingly on contact by telephone. Video consultations can to a certain extent serve as a substitute for either type of contacts. An app – Min Læge – for use in general practice was very rapidly supplemented with video functionalities, and its use made eligible for insurance reimbursement. Danish regions are already looking into further possibilities, but need to be supported in all possible ways. Video consultations should of course not be blindly accepted. Ongoing research into their use in general practice should be followed closely.

At all levels of education, lessons derived from experiences with online teaching should be considered. This is probably most important in higher education, where individualized learning is less important than at the primary education and high school level.

In general, the use of video meetings should be continued in order to save time and money. Research is also needed here, in particular with regard to the mixed use of face-to-face and video meetings.

Technology, including the equipment, software and digital infrastructure needed, is already in place to support all above.

A surge in the number of coronavirus cases in late 2020 prompted new lockdown restrictions, although not quite as restrictive as those implemented

in the first part of 2020. The Christmas restrictions were essentially maintained until reopening commenced in March and April. The emergency economic packages were reactivated in parallel with the lockdown. A reopening process started in March, and was accelerated in April because the number of new infected cases was far below the model-based predictions, and the number of hospitalized persons at no time approached the limits of hospital capacity. The number of per capita infected persons in mid-April was among Europe's lowest, attesting to the effectiveness of the lockdown and the Danes' adherence to the various restrictions. The reopening was accompanied by intense testing and infection tracking. People are in many cases required to present negative test results in order to visit schools or barber shops, for example. By mid-April 17% of the Danish population had been vaccinated. However, vaccination plans were somewhat delayed due to the problems with the AstraZeneca vaccine; indeed, by mid-April, the Danish Health Authority decided not to use the AstraZeneca vaccine at all. On 3 May 2021, policymakers also decided to drop the Johnson and Johnson vaccine from the vaccination program. Ensuring the vaccination of all people above 50 years of age (who want the vaccine) has become a critical political yardstick for normalizing the situation and phasing out lockdown restrictions. At the time of writing, the goal of vaccinating all people above 50 was expected to be reached by the end of August.

Resilience of Policies

I. Economic Preparedness

Economic Preparedness

Economic Policy
Preparedness
Score: 9

Prior to the coronavirus crisis, the Danish economy was performing very strongly on all standard macroeconomic indicators, including (un)employment, growth, the current account balance and public finances (Det Økonomiske Råd/The Economic Council, 2019; Nationalbanken, 2019; OECD, 2019; Finansministeriet, 2019). This was also reflected in the very strong credibility of the Danish exchange-rate peg to the euro. Per capita income is among the OECD's highest, and Denmark scores high on the World Bank Index on the ease of doing business, as well as the World Economic Forum's competitiveness index.

Looking ahead, a series of reforms to the social safety net, and in particular increases in the official retirement age (and an indexation to longevity), have helped keep the employment rate high, while also implying that the country's fiscal policy satisfies sustainability criteria. The problems associated with an aging population can thus be handled, and the pension system additionally delivers high replacement rates in comparative perspective.

Key future challenges include ensuring a high educational level, the particular challenges pertaining to the relatively large fraction of young people that do not obtain educations relevant to the labor market, and the need to promote lifelong learning in order to support higher retirement ages. Integrating migrants into the labor market also remains a challenge. As a small and open economy, Denmark faces continuous challenges in adapting its production structure and staying innovative. While productivity growth has in the past

been slightly below the OECD average, there have been terms-of-trade improvements, suggesting an ability to move up the value-added chain.

The minority social democratic government has set a target of reducing national greenhouse-gas emissions by 70% by 2030 as compared to the 1990 level. This is an ambitious goal, requiring that the reduction rate more than doubles in relation to the reductions made from 2005 to 2018. Among economic experts there is consensus that a cost-effective fulfillment of this target should be based on uniform taxes on the emission of all greenhouse gases, and accompanied by cancellation of the use of quotas.

Citation:

DET ØKONOMISKE RÅD/THE ECONOMIC COUNCIL 2019. Danish Economy Autumn 2019 – summary and recommendations Copenhagen: The economic council

DET ØKONOMISKE RÅDS FORMANDSSKAB 2019. Productivity 2019 – summary and recommendations Copenhagen The economic council.

FINANSMINISTERIET 2019. Economic Survey 2019. Copenhagen: Ministry of Finance.

NATIONALBANKEN 2019. Financial stability – 2nd half 2019 Copenhagen.

OECD 2019. OECD Economic Surveys – Denmark 2019. Paris.

Labor Market Preparedness

Labor Market
Policy
Preparedness
Score: 9

The Danish labor market is characterized by a high degree of flexibility and high turnover rates. Both job-destruction and job-creation rates are very high. During the financial crisis this was important for ensuring that most unemployment spells were short, and that long-term and youth unemployment remained at comparatively low levels (see Andersen, 2019). These properties are associated with the so-called flexicurity model. Although it is no safeguard against crises, it is important in helping the labor market cope with a downturn. While it is too early to render a final judgment on the labor-market effects of the coronavirus crisis, and an increase in unemployment is unavoidable, it is noteworthy that the underlying dynamics seem to be intact, as reflected in the high level of job openings and the short average duration of unemployment spells.

Before the coronavirus crisis, unemployment was close to its structural level (Finansministeriet, 2019). Employment was at a record-high level, reflecting a string of reforms over the past decade that had strengthened labor supply and employment. One notable aspect has been the strong growth in employment for the 60+ age group. The employment rate among 60- to 64-year-olds increased from just under 50% in 2013 to just over 60% in 2018. The reforms increasing statutory retirement ages for both the early retirement pension and the public pensions have contributed to this development.

Unemployment rates among low-skilled workers in Denmark are above the national average, and the employment rate among this group has been on a downward trend. This group has also been adversely affected by the coronavirus crisis. While the employment rate among those with a tertiary education is high and increasing, there are some exceptions, especially for academics with a background in the humanities. There is a high rate of unemployment during the first and second year after graduation, again especially so for humanities graduates ((AC), 2020). Fewer students have been accepted in the humanities departments in recent years. Employment rates are also generally lower among immigrants, and especially among women in this community.

A particular policy challenge follows from the increase in the statutory retirement age. This was motivated by increasing societal longevity and healthy aging; however, not all workers do in fact benefit from these advantages. The possibility of allowing individuals with reduced work capabilities to retire somewhat earlier has been intensely debated, especially with regard to an intermediary group of people who do not qualify for disability pensions (eligibility conditions have been tightened in recent years), but who still have difficulty in finding a full-time job. Recent reforms have extended the retirement options for this group.

Active labor-market policies have served as the country's core labor-market approach since the mid-1990s. However, these have changed following the results of studies, and due to new challenges. For example, under the current situation the goal is to avoid structural unemployment during the recession, and to promote reskilling or increase mobility in a way that supports economic recovery. The main components of active labor-market policy are relatively high levels of unemployment benefits, the right and duty to engage in activation, and a right to six weeks of education or vocational training with unemployment benefits.

Vocational training is an individual choice, but the options available depend on the individual's previous education record. For youth (below the age of 30) without a qualifying education, there is effectively an activation requirement in terms of education in the ordinary educational system. Most educational activities fall within the adult vocational-training system (AMU), which offers skill-specific short-term courses. This program (Ministry of Children and Education, 2020) (in Danish "arbejdsmarkedsuddannelser" or "AMU") serves to 1) maintain and improve the vocational skills and competences of the participants in accordance with the needs of the labor market and further the participant's competence development, 2) solve labor-market restructuring and adaptation problems in accordance with the labor market's short- and long-

term needs, and 3) give adults the opportunity to upgrade their labor-market and personal competences. The programs primarily provide skills and competences directed toward specific sectors and job functions. Unemployed people and adults who are not part of the labor force may also participate in adult vocational-training programs, but with different financing and management provisions. During times of economic crisis, it is particularly important to provide training to groups facing a high risk of unemployment.

Since the public sector is a large employer – about one-third of all employment in the country – wage formation in the public sector is a particular issue, since it differs from the private labor market (Danish Productivity Commission, 2013). In the public sector, only 10% of total employee compensation is negotiated at the workplace, with the remainder determined through centralized bargaining. This contrasts with the organized decentralization used in the private sector, which is characterized by general sector-level agreements with substantial room for lower-level agreements, and has been found to deliver good labor-market performance (OECD, 2018). While performance is more difficult to measure in the public sector, and the delivery of high-quality services often depends on the efforts of a group of people, further decentralization of wage bargaining should be considered.

Citation:

Andersen, T.M., 2019, The Danish labor market, 2000–2018, IZA World of Labor

<http://wol.iza.org/articles/the-danish-labor-market>

FINANSMINISTERIET 2019. Economic Survey 2019. Copenhagen: Ministry of Finance.

OECD 2019. OECD Economic Surveys – Denmark 2019. Paris.

Fiscal Preparedness

Fiscal Policy
Preparedness
Score: 9

Budgetary policies have long had a focus on fiscal consolidation and ensuring fiscal sustainability. Denmark was one of the few countries to reduce its public debt following the financial crisis, and the country's overall debt level by the end of 2019 was 34% of GDP, significantly below the EU average. It thus meets the criteria for fiscal sustainability (Finansministeriet, 2019)

These developments and the soundness of public finances have several explanations, but there are two key elements. First, a string of reforms in the last decade has strengthened labor supply and employment. Given the extended welfare state, the increase in private sector employment has had a significant effect on the public budget via increased tax revenue and lower expenditures on social transfers. Second, the National Budget Act from 2013 stipulates a number of fiscal targets. This is particularly true in terms of public consumption, where expenditure ceilings combined with sanctions on municipalities and regions that violate these ceilings have played an important

role in ensuring compliance. The structural budget deficit cannot exceed 0.5% of GDP. All fiscal policy objectives have been met since the adoption of the National Budget Act (Det Økonomiske Råd/The Economic Council, 2019).

In its autumn 2019 report, the Economic Council, which under the terms of the budget law acts as a fiscal watchdog, discussed various aspects of The National Budget Act and spending management. Among other things, it recommended that room be allowed for small and temporary overruns of the deficit level, as is made possible under EU Fiscal Compact. The report also discusses arguments for and against an easing of the deficit threshold.

Citation:

DET ØKONOMISKE RÅD/THE ECONOMIC COUNCIL 2019. Danish Economy Autumn 2019 – summary and recommendations Copenhagen: The economic council
FINANSMINISTERIET 2019. Economic Survey 2019. Copenhagen: Ministry of Finance.

Research and Innovation

Research and
Innovation Policy
Preparedness
Score: 7

Measured in terms of research and development expenditures, Denmark ranks above most European countries. Expenditures constituted 2.9% of GDP in 2019, declining slightly from a fairly constant level of 3% in the previous two years (Statistics Denmark). This can be compared to the EU-28 average of 2.03% (2018) and the OECD average of 2.38% (2018) (OECD, 2020). The Danish Council for Research and Innovation Policy has the objective of furthering the development of Danish research, technology and innovation for the benefit of society. Innovation Fund Denmark provides between €0.7 million and €4 million in subsidies for research and development within areas like bioresources, food and lifestyle; trade, services and society; energy, climate and environment; production, materials, digitalization and ICT; infrastructure, transport and construction; and biotech, medicine and health.

A recent review (2019) of Danish innovation concluded that Denmark's innovation system performs well, particularly within the life sciences, which in Denmark are world class. Denmark has also evolved as an innovation hub in several other areas, including wind energy and robotics. Many strengths contribute to these achievements, such as the country's highly innovative business sector, strong human capital and world-class research capacity. The analysis indicates no immediate threats to this position. Nonetheless, there is a need for a continuous focus on how strengths are translated into results, and on the innovation system's response to structural changes in the global (innovation) landscape. The review identified a set of specific challenges and missed opportunities that show this tension, including a high reliance on a very small number of firms with large R&D budgets, and in specific sectors (mainly the life sciences) with limited diffusion to smaller companies and entrepreneurs. The report also noted that performance has deteriorated over

time (relative to the EU); that the excellent outcomes in science often fail to translate sufficiently into commercial innovation, in particular within SMEs, startups and fast-growing firms; and that efficiency is lost due to a lack of strategic coordination with the private sector foundations that fund a significant and growing share of R&D activity.

In the view of the report's authors, these issues reflect an insufficiently systemic approach to innovation. That is, there is no sufficiently clear, deliberate, overarching strategic direction within the Danish innovation system. The innovation policy system appears fragmented, despite its high level of openness to dialogue and discussion, with no obvious central platform to discuss and make strategic, system-wide decisions. And while there has been significant policy action, the focus of recent reforms has been on reducing overlaps and interdependencies across different entities of the system, not on actively promoting collaboration and coordination at interfaces. The counterargument in the debate is that the government has responsibility for the overall framework, while specific initiatives should be based on a bottom-up process driven by the private sector. In November 2017, the Danish parliament passed an agreement on a range of initiatives intended to influence growth and entrepreneurial activity. An element of this agreement was an increase in the tax deduction rate for investments in research and development from 100% to 110%. The purpose is to strengthen incentives to develop new technologies. Government support for research and development in Denmark is significantly below the median for the OECD countries.

However, despite the lack of strategic coordination, there were many innovative actions during the pandemic, which may have been partially due to the decentralized Danish innovation landscape.

Citation:

EUROPEAN COMMISSION 2019. Peer Review of the Danish R&I System. Ten steps, and a leap forward: taking Danish innovation to the next level.

OECD 2020. Main Science and Technology Indicators, Volume 2020 Issue 1. Paris: OECD.

STATISTICS DENMARK. Research, Development, and Innovations (Online). Copenhagen: Statistics Denmark. Available: <https://www.dst.dk/en/Statistik/emner/uddannelse-og-viden/forskning-udvikling-og-innovation> (Accessed December 18th 2020).

II. Welfare State Preparedness

Education System Preparedness

Education Policy
Preparedness
Score: 8

Average educational attainment in Denmark is similar to that in the OECD overall (OECD, 2020a): 80.9% of 25- to 64-year-olds held at least an upper-secondary qualification in 2018, compared to 82.6% across all OECD countries. Skill levels, as measured by the OECD Survey of Adult Skills

(PIAAC) are high. Despite large public investments in education, a relatively large share (15% – 20%) of each cohort does not get an education providing them with labor-market qualifications, and thus enters the labor market as unskilled. Despite various effort to address this problem, progress has been slow.

Denmark's adults received average scores of 271 in literacy and 278 in numeracy, compared to respective OECD averages of 268 for both. Furthermore, in problem-solving in technology-rich environments (ICT skills), 39% of Danish 16- to 65-year-olds scored in the highest two proficiency levels of adult skills, well above the OECD average of 31%.

The country's 15-year-old primary school students performed above the OECD average in the 2018 Program for International Student Assessment (PISA) tests, in the reading, mathematics and science categories. The country also outperformed the OECD average in terms of limiting the impact of socioeconomic status on learning, as measured by PISA 2018, and in ensuring that students reach a baseline proficiency in reading and math. Upper-secondary and tertiary attainment levels in Denmark are slightly below the OECD average for 25- to 64-year-olds. Adult education remains an important component of the Danish education system, with comparatively high enrollment despite decreases in recent years. Students with migrant backgrounds experience considerable gaps (especially for boys) in learning relative to their native-born peers.

Danish teachers have strong digital skills. A total of 36% of teachers primarily or only use digital teaching materials. A total of 49% of teachers believe that digital teaching materials prepare the student for the skill requirements of the future more effectively than do analog materials (Analyse Danmark, 2019) Results from the 2018 Teaching and Learning International Survey (TALIS) show that on average, across participating OECD countries and economies, only slightly more than half of lower-secondary teachers (53%) reported that they “frequently” or “always” allow students to use ICT for projects or class work. In Denmark, 90% of teachers do so.

Citation:

AKADEMIKERNE (AC). 2020. Ledighed August 2020 (incl. 2019 data) (Online). Available: <https://www.akademikerne.dk/ledighed-august-2020/> (Accessed).

MINISTRY OF CHILDREN AND EDUCATION. 2020. Adult vocational training (Online). Copenhagen: Ministry of Children and Education. Available: <https://eng.uvm.dk/adult-education-and-continuing-training/adult-vocational-training> (Accessed December 15 2020).

OECD 2020. Education Policy Outlook – Denmark Paris: OECD.

Social Welfare Preparedness

Social Welfare
Policy
Preparedness
Score: 8

The poverty indicator from the UN Sustainable Development Goals (SDGs) is calculated by Statistics Denmark, following the UN definitions combining criteria for low income, low wealth and socioeconomic status. The agency then reports the proportion and the number of persons below this limit. In 2019, 4.8% of men and 3.8% of women in the country were living in relative poverty (Denmark, 2020). This figure had declined for the past two years. In the same year, 7.9% of men and 7.5% of women were deemed to be financially vulnerable. This number has been declining across age groups. It is difficult to identify which policies have caused this change.

The child poverty rate as reported by the OECD was 3.7%, the second-lowest such rate among OECD countries (OECD, 2020c). Child poverty (for those aged up to 17 years) is based on equivalized household disposable income (i.e., income after taxes and transfers adjusted for household size). The poverty threshold is set at 50% of median disposable income in each country. The change to the child benefit system discussed above will undoubtedly help reduce the poverty share. Before Christmas 2019, child benefits to about 14,000 poor families with a total of around 28,000 children were increased (Beskæftigelsesministeriet, 2019). The amount was approximately €80 per child, or double that for single parents. This was a temporary measure implemented while a more thorough reform of the cash benefit system is made (Kvist J, 2019).

A large fraction of preschool children are in day care, and the publicly financed education system helps provide equal access to education, though there remains a social gradient.

Regarding unemployment, various requirements for unemployment benefits and social assistance have been temporarily modified to prevent individuals from losing their entitlements as a result of lockdown restrictions.

Citation:

BESKÆFTIGELSESMINISTERIET 2019. Midlertidigt børnetilskud vedtaget. København: Beskæftigelsesministeriet.

DENMARK, S. 2020. Target 1.2: Reduce poverty by at least 50% (UN sustainable development goals, SDG) (Online). Statistics Denmark. Available: <https://www.dst.dk/en/Statistik/Sdg/01-afskaffattigdom/delmaal-02/indikator-1> (Accessed December 30 2020).

KVIST J 2019. Denmark: More generous and fairer welfare policies, especially for children. The European Social Policy Network (ESPN).

OECD. 2020. OECD Family Database (Online). Paris: OECD. Available: <https://www.oecd.org/els/family/database.htm> (Accessed December 27 2020).

Health Policy
Preparedness
Score: 8

Healthcare System Preparedness

Previous flu epidemics provided a stress test of the health system's vulnerability. Based on the two examples below, it was believed as of 2019 that the healthcare system was fairly robust in times of crisis, both with regard to accommodating the increase in demand generated by an epidemic/pandemic, and in doing so without hurting other patient groups very much. It should be kept in mind that as a rule of thumb, Danish hospitals work with an assumption of 85% average bed occupancy, partly to be able to cope with spikes in demand.

In 2009, Denmark saw two waves associated with the influenza A (H1N1) pandemic. The first wave in the summer was mostly due to imported cases, with only limited community transmission. It was picked up by Danish influenza surveillance systems, but did not have a substantial effect on the healthcare system. The second wave, which was a result of sustained transmission within the country, lasted between week 45 and week 51 in the autumn of 2009. In total, Statens Serum Institut estimated (Mølbak K et al, 2011) that 274,000 individuals (5%) in Denmark experienced clinical illness. The highest attack rate was found in children aged between 5 and 14 (15%). Compared with the expected baseline number of hospital admissions, there was an 80% increase in the number of influenza-related hospital admissions in this age group. The number of patients admitted to intensive care approached 5% of the national capacity. Estimates of the number of deaths ranged from 30 to 312 (0.5 – 5.7 per 100,000 population), depending on the methodology used. In conclusion, the 2009 pandemic was characterized by high morbidity and unprecedentedly high rates of admissions to hospitals for a range of influenza-related conditions affecting mainly children. Nonetheless, the burden of illness was lower than assumed in planning scenarios, and the present pandemic compares favorably with the 20th century pandemics

The flu-season 2017/18 was the most serious ever (Statens Serum Institut, 2017), despite flu vaccination rate of around 50% among the over-65 population. During this season, a total of 1,644 persons died of flu, falling both within the 15-64 and 65+ age groups. A total of 7,667 patients were hospitalized with laboratory-confirmed flu. More than half were infected by flu type B. A total of 56,113 patients were tested, 16,093 of whom tested positive. The high number of flu cases was in part due to the “wrong” choice of flu vaccine for the season.

However, even this pressure was not enough to change the national trends for in- and outpatients at the country's hospitals or general practitioners' offices

(Sundhedsdatastyrelsen, 2020). The years 2017 and 2018 in fact saw a decline in the number of days with bed occupancy rates above 100% in departments of internal medicine, where most flu patients are hospitalized (Sundhedsministeriet, 2019). There were no indications of unequal patient treatment during the flu epidemic.

In 2013, the Danish Health Authority published a plan for an influenza pandemic (Sundhedsstyrelsen, 2013). This was an update of the 2006 plan. In essence, it is a national plan for handling a pandemic supported by subnational (regional) operational plans (Sundhedsstyrelsen, 2017), including recommendations to conduct regular exercises to test preparedness. No data is available on whether such exercises were in fact regularly conducted. The national plan does not directly address hospital capacity in case of an influenza pandemic. This topic is instead addressed by regional plans. Nor does the national plan directly address the need to stockpile protective gear or face masks; indeed, advice on this topic contained in a 2012 draft version was disregarded (Pedersen KM, 2020). There is serious doubt as to the adequacy of resources for pandemic preparedness activities.

The act on infectious and transmittable diseases (the Epidemics Act) (Sundhedsministeriet, 2020a) sets the legal framework for the prevention of the spread of infectious diseases, granting considerable powers to five regional epidemics commissions.

As of 22 March 2020, the Danish Health Authority reported that the country had 433 intensive-care beds with ventilators available. In addition, another 164 ventilators were stockpiled and could be activated. The total number of intensive beds could, if need be, be expanded to more than 1,200, 925 could be made available for COVID-19 patients by cancelling planned elective surgeries. There was no available information on personnel levels, but it is implicitly assumed that the necessary personnel would be available, including surgical and anesthesiologic nurses with strong intensive-care nursing knowledge. At no time during the first wave was there a shortage of intensive-care beds. During the second wave, on 21 February 2021, the Danish Health Authority published a document on “scalable hospital capacity,” and developed four scenarios for bed capacity for COVID-19 patients. At no time between the end of March and mid-April 2021 did the number of hospitalized coronavirus patients approach the system’s ordinary capacity (intensive beds and beds with ventilators).

Citation:

MØLBAK K ET AL 2011. Burden of illness of the 2009 pandemic of influenza A (H1N1) in Denmark. *Vaccine*, 29C, 6

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Families

Family Policy
Preparedness
Score: 9

Childcare facilities (kindergartens, day nurseries and day care) are very developed in Denmark, and hence available to families with working parents. Payment is graduated according to income, with services free for low-income families, and a sibling rebate is also given. Day care facilities were included in the lockdown in March, forcing many parents to stay at home, though most publicly employed persons had been urged to work from home if possible in any case. However, the lockdown in November/December did not include day care facilities, angering many employees. Politically, this was justified on the basis of labor-market considerations. The lockdowns obviously made it more difficult to balance work, family and parenting roles. The crisis also demonstrated the importance of having good and flexible day care facilities in order to ensure the supply of labor, and hence support employment more broadly. Day care is the responsibility of the municipalities. In March and December, many if not all municipalities established “emergency day care” facilities for families, in which parents carried out critical societal functions such as healthcare and transport.

In June 2020, Mother’s Aid conducted a survey (Mødrehjælpen/Mother’s Aid, 2020 – juni) among 1,501 vulnerable families, 72% of whom were single parents. Overall, they indicated that they been seriously challenged during the crisis. A total of 68% of the respondents reported that they had had difficulty in making ends meet economically. More than 50% of single parents said they had felt lonely during the crisis, and three-fourths of the surveyed families had not received support from their networks. About half had not reached out for help, either privately or from public sources. About one-fourth said they had found it difficult to fulfill their parental role, and almost 50% had found it seriously challenging to support their children.

Citation:

MØDREHJÆLPEN/MOTHER’S AID 2020 – juni. Undersøgelse: Sårbare børnefamilier hårdt pressede under corona-krisen.

III. Economic Crisis Response

Economic Response

Economic
Recovery
Package
Score: 9

The first Danish lockdown was announced on 11 March 2020, and took effect on March 13. Recovery packages were announced on March 12 (Finansministeriet, 2020a), and enacted by parliament on March 15 and the following weeks.

The emergency packages included compensation to firms for fixed costs, subsidies to self-employed people for the loss of income, and a wage compensation scheme. Moreover, support packages were offered within specific areas such the culture and non-profit sectors. In addition, a number of liquidity-oriented measures were implemented, for example postponing tax payments for firms (both income and VAT taxes) and offering loan facilities with state guarantees. By the end of January 2021, the state had provided compensations amounting to DKK 28 billion (approximately 1.2% of GDP, of which nearly half went to the wage compensation scheme) and liquidity/loan arrangements amounting to DKK 300 billion (approximately 13% of GDP).

Overall, the various recovery packages were comprehensive in the sense of addressing many societal functions. They were also timely in the sense that the essential programs were implemented early and very rapidly. However, the administration of these arrangements was in some cases slow, in part because EU approval was needed in some cases, for instance when government support was being provided to the private sector. The packages were also targeted, but some were subsequently further fine-tuned.

The economic logic of the abovementioned measures builds on the fact that lockdowns and other containment measures are undertaken to cope with a health problem, but their costs are borne by particular firms and workers. Hence, the support can be seen as an extension of the social safety net within the context of a particular event to support the incomes of those who are directly affected. Moreover, and importantly, it is also an investment in avoiding firm closures (bankruptcies) and in the health of the labor market. Allowing firms to go under without aid would make a quick recovery of economic activity impossible, even once the economy could be safely reopened. However, these effects should be seen relative to the risk of disrupting normal market dynamics, since the emergency packages are based

on historic revenue, employment – that is, they have a status quo bias. Therefore, it is important to phase these packages out as the economy is reopened. The government appointed an economic expert group to assess the emergency packages and propose a phaseout plan (see Andersen et al., 2020). It largely followed this group's recommendations, and the emergency packages were phased out with a short lag alongside the reopening of the economy in mid-2020. Importantly, economic activity and employment quickly picked up after the reopening, which suggests that the strategy of keeping production capacity intact to ensure a V-shaped path for economic recovery was successful. However, after the dramatic increase in COVID-19 infection rates in November/December, new lockdown and containment measures were needed, and the emergency packages (with some adjustments) were reinstated.

The wage compensation program has been particularly important. It was established through tripartite agreement, since the existing work-sharing arrangement could not adequately deal with the new situation produced by the lockdowns. Companies that would otherwise be forced to cut staff by a minimum of 30% or by more than 50 employees were eligible for salary compensation under the scheme. This meant that the state would provide compensation of 75% of the total salary expenses to the employees in question, to a maximum of DKK 23,000 per employee per month. The compensation was paid on the condition that the employees in question were not to be laid off. The companies receiving the aid were also required to commit that they would not lay off employees for financial reasons during the period in which they received the pay compensation.

The tripartite agreements were expanded several times, and were in many respects renewed in November/December (Beskæftigelsesministeriet, 2020b).

The initial wage compensation scheme introduced in the tripartite agreement expired at the end of August 2020. A new scheme was subsequently introduced, following recommendations from the economic expert group, called work sharing (Beskæftigelsesministeriet, 2020a). The new tripartite agreement allows for companies to share their available labor between employees instead of laying off staff. Under this plan, staff sent home due to reduced hours are eligible to receive unemployment benefits while retaining their employed status. To be eligible, an employee's working hours must be reduced by at least two full days per week, or with one week of full-time work followed by one week of unemployment; the distribution can also entail two weeks of full-time work followed by one week of unemployment, or two weeks of full-time work followed by two weeks of unemployment. The scheme allows for unemployment benefits of a maximum DKK 23,000 per

month, 20% higher than the normal maximum payout. The increased benefit payment is primarily financed by employer contributions.

Toward the end of 2020, a discussion emerged on what the consequences for the compensation program would have been the Epidemic Act (section 27) had not been changed on March 12 (see “Informal Democratic Rules” for details). The pre-March 2020 version of the act stated that if efforts to prevent the spread of infection resulted in economic losses for anybody, they were to receive compensation from the state. In the March 12 version, this provision was instead changed to a model based on expropriation and compensation. If the pre-March version had been applied to the situation that emerged following the March lockdown, total compensation payments would have been considerably larger (Persson S, Ingvarlsen 2020a) (Persson S Ingvarlsen 2020b). The agreement on the 2021 Epidemic Act contains a clause indicating that a working committee containing economic experts will be established to look into the question of economic compensation in connection with pandemics. However, any legal measure resulting from this committee’s work will require a separate act, rather than being integrated into the new Epidemic Act (Sundhedsministeriet, 2020c).

:

Andersen, T.M., M- Svarer og P. Schröder, 2020, Rapport fra den økonomiske ekspertergruppe vedrørende udfasning af hjælpepakker, København.

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BESKÆFTIGELSESMINISTERIET 2020b. Trepartsaftale om en ny midlertidig arbejdsfordelingsordning på det private arbejdsmarked. København Beskæftigelsesministeriet.

BESKÆFTIGELSESMINISTERIET. 2020c. Trepartsaftaler (oversigt) (Online). København: Beskæftigelsesministeriet. Available: <https://bm.dk/arbejdsomraader/politiske-aftaler-reformer/politiske-aftaler/trepartsaftaler/> (Accessed December 12th 2020).

DET ØKONOMISKE RÅD/THE ECONOMIC COUNCIL 2020. Baggrundsnotat. Den økonomiske situation og den økonomiske politik i lyset af coronakrisen København: Det økonomiske Råd.

DYRTIDSFOND, L. 2020. 51,6 mia. indefrosne feriemidler udbetalt til 2,3 mio. lønmodtagere. København: Lønmodtagernes Dyrtidsfond.

FINANSMINISTERIET 2020a. Nye initiativer til at holde hånden under danske arbejdspladser København: Finansministeriet.

FINANSMINISTERIET 2020b. Regeringen og alle Folketingets partier er enige om omfattende hjælpepakke til dansk økonomi. København: Finansministeriet.

KULTURMINISTERIET. 2020. COVID 19 (Online). København: Kulturministeriet. Available: <https://slks.dk/covid-19/> (Accessed December 15th 2020).

MINISTRY OF CULTURE. 2020. COVID-19 information (Online). Ministry of Culture. Available: <https://english.slks.dk/covid-19/> (Accessed December 15th 2020).

MINISTRY OF EMPLOYMENT 2020. MEMORANDUM Tripartite agreement on the Danish labor market to retain jobs and pay of salaried employees in the private sector. Copenhagen: Ministry of Employment.

NATIONALBANKEN 2020. Kan kapitalbuffere reelt hjælpe banker i krisetider? København: Nationalbanken.

PERSSON S; INGVARSDEN J. 2020a. Milliarddyr regning til erhvervslivet blev til under “utrolig usikkerhed” i nedlukningens 11. time: “På daværende tidspunkt var vi ikke klar over det fulde omfang.” Berlingske Tidende, December 29.

PERSSON S; INGVARSDEN J. 2020b. Regeringens egne rådgivere sår tvivl om centralt argument mod erstatning. Berlingske Tidende, December 30.

SOCIALMINISTERIET 2020. Et stærkt civilsamfund både under og efter COVID-19 København: Indenrigs-og socialministeriet.

Sustainability of Economic Response

Recovery
Package
Sustainability
Score: 5

The primary purpose of the recovery packages is to preserve existing production capacity and current jobs in order to make a swift recovery possible. The state has the ability to shoulder the measures financially without jeopardizing fiscal sustainability. Therefore, the scope for initiating structural changes to reach environmental and climate targets remains intact. Both before and during the pandemic, there has been broad political agreement and consensus on the importance of sustainability in economic policy.

The government, together with a majority in the Danish parliament, entered into five sizable political agreements in December 2020 that support the recovery of the economy and promote a green transition. The priorities in the agreements are primarily financed by resources from the EU's Recovery and Resilience Facility, a reserve intended to address COVID-19 recovery, as well as other reserves included in the 2021 budget proposal. Among other issues, the agreements address a green transition for the road transport sector, the broader issue of economic stimulus and green recovery and green tax reform (Finansministeriet, 2020b)

Citation:

FINANSMINISTERIET 2020. Economic Survey, December 2020. København.

Labor Market Response

Labor Market
Policy Response
Score: 9

The most essential labor-market policy initiative during the crisis was the tripartite agreement on the wage compensation scheme (see also "Economic Response"). Its main objective is to preserve current jobs and avoid a large spike in unemployment. The scheme thereby reduced the need for other welfare-state initiatives.

Nevertheless, the state did undertake a number of more specific initiatives. As part of the lockdown initiated in March 2020, the active labor-market approach was suspended. The requirements that unemployed people be available for job openings and participate in interviews at the municipal placement center were suspended, and the municipal placement services were closed. The placement services subsequently developed alternatives such as virtual interviews, among other stratagems (Kommunernes Landsforening, 2020a) (Beskæftigelsesministeriet, 2020f).

Several reskilling and training initiatives were intended to reduce unemployment and provide for a qualified workforce after the crisis. Some of these were implemented in the context of tripartite agreements. All were aimed at alleviating the effects of actual unemployment or its risk, and contained mechanisms that reduced layoffs. In a December 22 press release, the government claimed that around 79,000 jobs had been saved through various initiatives. However, it has not been possible to avoid an increase in unemployment.

In the middle of 2020, there was political agreement to increase funding for training unemployed adults, primarily through relatively short courses (Beskæftigelsesministeriet, 2020a). Nearly DKK 350 million were approved for this initiative. Also, in the middle of the year, a reskilling arrangement that provided compensation payments totaling 110% of unemployment benefits during the period of education was added, for a cost of almost DKK 400 million. However, benefit levels were differentiated such that the highest levels were given to persons who reskilled in areas with (expected) labor shortages. The government budget for 2021 set aside approximately DKK 125 million for reskilling and vocational education. A tripartite agreement further provided approximately DKK1.4 billion to employers with the goal of increasing the number of apprentices and trainees (Beskæftigelsesministeriet, 2020h).

Citation:

BESKÆFTIGELSESMINISTERIET 2020a. Et justeret uddannelsesløft. København
 BESKÆFTIGELSESMINISTERIET 2020b. L 143 Forslag til lov om ændring af lov om sygedagpenge. (Midlertidig forlængelse af retten til sygedagpenge).
 BESKÆFTIGELSESMINISTERIET 2020c. Midlertidig kompensationsordning for selvstændige.
 BESKÆFTIGELSESMINISTERIET 2020d. Ny trepartsaftale skal forebygge fyringer.
 BESKÆFTIGELSESMINISTERIET. 2020e. Regeringen forlænger mulighed for digitale og telefoniske samtaler i jobcentre og a-kasser (Online). Available: <https://bm.dk/nyheder-presse/pressemeddelelser/2020/09/regeringen-forlaenger-mulighed-for-digitale-og-telefoniske-samtaler-i-jobcentre-og-a-kasser/> (Accessed 4. januar 2021).

Fiscal Response

Fiscal Policy
 Response
 Score: 9

Denmark's fiscal response to the crisis includes several elements.

First, so-called automatic stabilizers are included in the design of the social safety net and the taxation system. They reduce variations in disposable income deriving from business cycle changes, including the downturn triggered by the coronavirus crisis. Denmark has the strongest automatic stabilizers in the EU (Mourre et al. 2019). Variations in economic activity are thus strongly reflected in the public sector fiscal balance, which shifted from a surplus of 3.8% of GDP in 2019 to a (early estimate) deficit of -3.5% of GDP (Finansministeriet 2020). Such budget variations are subsequently reflected in

the public debt burden, and therefore involve risk sharing between current and future generations.

Second, a number of emergency packages (see “Economic Response”) specifically sought to ameliorate the consequence of lockdown restrictions. These schemes also reflect a collective burden sharing of some of the costs associated with initiatives addressing the coronavirus’ health challenges (Andersen et al. 2020). Most of these packages were phased out when the economy reopened in mid-2020, and were reintroduced when new lockdowns were enacted in the autumn. Moreover, the healthcare sector itself generated direct costs, including testing expenses and more. The central government has compensated regions and municipalities for coronavirus-related expenses. As of the time of writing, the regions had received DKK 4.8 billion and the municipalities DKK 3.6 billion (Finansministeriet 2020a).

Thirdly, support has targeted specific groups. Eligibility conditions associated with labor and social policies were softened (see “Labor Market Response”), effectively extending the duration of support. Moreover, all recipients receiving any kind of cash subsidy from the government (e.g., pensioners, students, parents on paternity leave and persons receiving sickness benefits) received a tax-free check of DDK 1,000 in October 2020 (Beskæftigelsesministeriet, 2020).

Finally, the issue of further fiscal stimulus has been extensively debated. Due to a change in the Danish Holiday Act (Ferieloven) that synchronized the timing of paid holiday right accrual and the actual holiday, all wage earners had an accumulated credit (typically amounting to five weeks of holiday pay) that was originally “frozen” until retirement. In response to the coronavirus crisis, the government decided to make it possible to liquidate these funds. As an aggregate demand management tool, this was interesting, since it would increase disposable income for households, while at the same time providing government revenue, since the funds represent taxable income at payment. The so-called frozen holiday pay was thus released in two steps – a first step in autumn 2020, and the final step in early spring 2021 – with the aim of boosting private consumption.

More traditional fiscal stimulus initiatives have also been discussed, but the timing is an important and difficult question. While lockdown and other containment restrictions are effective, traditional fiscal stimulus will not function in this context. It is also difficult to assess the need for a fiscal stimulus alongside the reopening of the economy, since many households have “involuntary” savings accumulated due to the lockdowns, and a surge in private consumption is possible upon reopening. Moreover, the consequences

of the crisis have differed significantly between sectors, making it more difficult to address them with traditional fiscal instruments.

Since Denmark entered the coronavirus crisis with sound public finances, including a low debt level, it has been possible to accommodate the consequences to the public finances without undermining sustainability more generally. To allow the deficit spending necessary, the budget law's rules were suspended with reference to the special circumstances.

Although not a fiscal instrument, the so-called countercyclical capital buffer was released on 12 March 2020, providing DDK 200 billion in credit facilities. This reduced the risk of a credit contraction, and was a helpful signal that the government was seeking to support liquidity in the credit market.

Citation:

Andersen, T.M., M- Svarer og P. Schröder, 2020, Rapport fra den økonomiske ekspertgruppe vedrørende udfasning af hjælpepakker, København.

DET ØKONOMISKE RÅD/THE ECONOMIC COUNCIL 2020 Dansk Økonomi Efterår 2020.

FINANSMINISTERIET 2020a. 2,7 mia. kr. ekstra i COVID-kompensation til kommuner og regioner i 2020.

FINANSMINISTERIET 2020b. Economic Survey, December 2020. København.

FINANSMINISTERIET 2020c. Økonomisk Redegørelse, December. København.

Mourre, G., A. Poissonnier and M. Lausegger, 2019, Underlying the Cyclically-Adjusted Budget Balance: An Update & Further Analysis, European Economy, Discussion Paper 098, Brussels.

Research and Innovation Response

Research and
Innovation Policy
Response
Score: 7

The government, with the support of all parties in the Danish parliament, allocated DKK 150 million for the rapid launch of COVID-19-related research and innovation projects with the potential to mitigate the coronavirus crisis (Uddannelses- og forskningsministeriet, 2020). The funds have been released on a fast-track basis under the auspices of the Ministry of Higher Education and Science (DKK 88 million), the Innovation Fund Denmark (DKK 40 million) and the Independent Research Fund Denmark (DKK 22 million). Among other projects, funds were allocated to develop a contract-tracing app, and a rather small amount of approximately DKK 20 million was allocated to the Danish vaccine development at the Statens Serum Institut.

A number of Danish research-funding foundations also allocated millions of DKK to COVID-19-related research, separately from the government grants (Uddannelses- og forskningsministeriet, 2020). For example, the country's biggest private foundation, the Novo Nordisk Foundation, allotted DKK 77.7 million to 44 projects that may help mitigate the health consequences of COVID-19 in Denmark and the rest of the unitary state. The foundation has also launched a number of other initiatives related to combating COVID-19.

The Carlsberg Foundation has devoted DKK 95 million to accelerating efforts to combat the coronavirus, and the Lundbeck Foundation earmarked DKK 30 million to supporting researchers attempting to improve the diagnosis and treatment of COVID-19.

:
UDDANNELSES-OG FORSKNINGSMINISTERIET. 2020. Coronarelaterede forskningsprojekter (Online). Available: <https://ufm.dk/en/research-and-innovation/covid-19-research/danish-research-and-innovation-initiatives-related-to-covid-19-1/danish-research-and-innovation-initiatives-related-to-covid-19> (Accessed 6. januar 2020).

IV. Welfare State Response

Education System Response

Education
Response
Score: 9

Online education was provided throughout the first two coronavirus waves, and was been accessible by everybody at all education levels, due to Denmark's well- developed digital infrastructure, and the fact that almost all households are linked to the internet.

However, evaluations have shown that it has been difficult to individualize teaching. An evaluation by the teachers' union (Danmarks Lærerforening, 2020) showed that roughly half of the country's primary-level students did not receive instruction. Tests/exams at the school-leaving level (ninth grade) were cancelled (Undervisningsministeriet, 2020). The interruption in teaching has primarily affected children from economically and ethnically disadvantaged environments. The number of exams for students graduating from high school graduates was reduced (Undervisningsministeriet, 2020).

Distance learning at the college level seemed to function well (Kesby K, 2020). A survey asking teachers and students to evaluate university online teaching (Aarhus Universitet – Rambøll, 2020) indicated that although distance-learning practices gradually improved, there still were disadvantages compared to traditional teaching methods, and that student motivation was low. Students also found that the professional benefits were low. Online supervision and exams functioned well.

A survey of pros and cons of online teaching, polling 90,000 students and around 7,000 teachers, was started in mid-summer 2020 (Laeremiddel.dk, 2020). There were five changes made to the state educational grant and loan (SU) scheme (Uddannelses-og forskningsstyrelsen, 2020). These included the following:

- Extra funds for students receiving student loans or grants (SU loan).
- An extra loan targeting the completion of studies was provided for students who were at the end of their higher education.
- An increase in the limited earned income allowed for students receiving SU support during the pandemic.
- An additional SU loan or loan targeting the completion of studies was provided for higher education students who were in paid internships for all or part of the periods from March to August 2020 and November 2020 to January 2021.
- The period for receiving a loan targeting the completion of studies was extended for students in higher education or private education who have exhausted their loan limit or are not yet entitled to an ordinary loan.

Despite the lockdown, primary schools remained open to disadvantaged children without reliable access to online learning at home (about 5-10% of the pupil body at the country level).

:
 DANMARKS LÆRERFORENING 2020. Undersøgelse blandt lærere og børnehaveklasselædere i folkeskolen om nødundervisning under covid-19-nedlukningen. København
 KESBY K. 2020. VIA-undervisere har gode erfaringer med fjernundervisning under coronakrisen (Online). Available: <https://www.via.dk/om-via/presse/nyheder-2020/via-undervisere-har-gode-erfaringer-med-fjernundervisning-under-coronakrisen> (Accessed 3. januar 2020).
 LAEREMIDDEL.DK. 2020. Erfaringer og oplevelser med online undervisning under COVID-19 (Online). Available: <https://laeremiddel.dk/erfaringer-og-oplevelser-med-online-undervisning-under-covid-19/> (Accessed 6. januar 2021).
 UDDANNELSES-OG FORSKNINGSSTYRELSEN. 2020. COVID-19 og SU – sidst opdateret 17/12-2020 (Online). Available: <https://www.su.dk/covid-19-og-su/covid-19-and-su-english-version/> (Accessed 6. januar 2021).
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 AARHUS UNIVERSITET – RAMBØLL 2020. Undersøgelse af online undervisning og eksamen forår 2020 Aarhus.

Social Welfare Response

Social Welfare
 Policy Response
 Score: 8

The coronavirus pandemic has had a serious impact on Danish long-term care (LTC) beneficiaries, as a substantial proportion were infected by the virus, and all were affected by the policy measures adopted to fight the virus the first two COVID-19 waves (e.g., visiting restrictions at nursing homes). However, by August, 125 of 935 residential care institutions, with a total of approximately 40,000 residents, or 13% of the entire population, had reported at least one resident with confirmed COVID-19. By 5 January 2021, this proportion was virtually unchanged at 12% (Statens Serum Institut, 2020a), but with a considerably higher number of infected persons, at 441. As of the time of writing, a total of 523 people in these facilities had died, accounting for 37% of the country's total coronavirus-related deaths.

Part of the Danish COVID-19 strategy has been to isolate the people most vulnerable to the virus, including frail older people in residential care (Kvist J, 2020). Beginning in 17 March 2020, and again in November/December, this meant that people in residential care were prohibited from receiving visits. The only exceptions were visits in critical situations, by a close relative to a critically ill or terminally sick person; and visits that could be critical for the well-being of a resident with reduced cognitive skills who could not understand the restrictions on visits. The government passed the necessary legislation, which required the municipalities responsible for LTC to follow the guidelines of the Danish Patient Safety Authority and communicate their guidelines on municipal websites. Some decisions were left to the discretion of LTC unit managers.

In general, patient organizations support this strategy. However, DaneAge (ÆldreSagen), Carers in Denmark (Pårørende i Danmark) and the Alzheimers Association have argued that many of the recommendations have been interpreted too strictly in some locales, and will have negative consequences especially in the long term. This includes an increased sense of loneliness among older people, which may result in them losing vital functions and even dying from causes other than COVID-19. To the extent that this is the case, then the coronavirus' relatively low direct effect on the mortality of older people in residential care should be supplemented by the indirect effect on mortality of the COVID-19 measures, for example due to an increased sense of loneliness and disorientation among people with dementia (two out of three residents have dementia). In late November, DaneAge sent a letter to the minister of health and elderly care claiming that the visiting restriction might infringe the human rights of the residents (Ældresagen, 2020). The group said that it feared for residents' quality of life, and in general asked that the residents be given greater power of codetermination.

In early May 2020, a political agreement was reached to implement a number of activities designed to alleviate loneliness, and to help relatives and partnerships combat loneliness (Sundhedsministeriet, 2020c). A total of 165 million DKK was reserved for these purposes.

In addition to these initiatives, funds for homeless people and other vulnerable groups were established to help them cope with the pandemic, with a cost of DKK 75 million. However, at the time of writing, there had as yet been no research assessing the effectiveness of these measures.

Citation:

KVIST J 2020. Denmark: responses to the COVID-19 pandemic in the long-term care sector. The European

Social Policy Network (ESPN).

STATENS SERUM INSTITUT. 2020. COVID-19 på plejehjem (Online). Available: <https://covid19.ssi.dk/overvagningsdata/ugentlige-opgorelser-med-overvaagningsdata> (Accessed).

SUNDHEDSMINISTERIET 2020. Bred aftale om hjælp ældre under coronakrisen

ÆLDRESAGEN 2020. Besøgsrestriktioner strider mod menneskerettigheder. København

Healthcare System Response

Health Policy
Response
Score: 8

The Danish healthcare system reacted very quickly to the coronavirus by reducing activity levels in order to create room for COVID-19 patients. Hospital activity declined by around 50% from March to the middle of April (Sundhedsstyrelsen, 2020a). Similarly, the number of contacts with general practitioners also declined by almost 50%. In hindsight, this activity reduction was probably too drastic, due in part to the fact that the first prognosis by the National Health Authority was based on data from Wuhan and Northern Italy. From the middle of April onward, activity picked up again, and was almost back to normal levels by the end of October. However, toward the end of November and into December, the number of infected persons increased dramatically. This necessitated reductions in hospital activity levels once again.

The National Health Authority took the lead in this area, and issued guidelines on reduced hospital activity on 13 March 2020 (Sundhedsstyrelsen, 2020d). It additionally established a task force on hospital capacity that has met frequently. Before the lockdown on March 11, the idea of suspending core patient rights (e.g., the waiting-time guarantee), was considered (Sundhedsstyrelsen, 2020e). Parliament suspended these rights on March 12, and a circular was issued on the limitations being made to patient rights (Sundhedsministeriet, 2020b). A sunset clause stipulated that they would be reintroduced on 1 January 2021, but in view of the increased COVID-19 infection rate in November/December, this date was postponed until March 2021.

Almost all elective surgery was cancelled after March 12, freeing beds for COVID-19 patients. Moreover, there was a sharp decline in ordinary hospitalizations. Before March 11, the country had around 400 intensive-care beds with ventilators, but that number was increased to around 1,200 in just one to two weeks. The expected peak load was around 800 to 900 beds, based on data from China and northern Italy (Sundhedsstyrelsen, 2020b). The highest number of hospitalized COVID-19 patients was approximately 550 in early April, but with far fewer – only about 140 – in intensive-care beds. However, due to the flare up of infections in December, the Capital Region had to expand COVID-19 intensive-care bed capacity, and was forced to draw

on spare capacity in the other regions. On November 18, the National Health Authority issued guidance on coordinating hospital-bed capacity at the national level (Sundhedsstyrelsen, 2020c), and on December 22 called for an expansion of COVID-19 bed capacity in view of the rising infection rates. In December, the National Health Authority developed a vaccination rollout strategy that included group-level prioritization, starting with the frail elderly and front-line health professionals (Sundhedsstyrelsen, 2020 f). Vaccination centers were established before Christmas, and by January 8, more than 100,000 persons had been vaccinated, including 40,000 nursing home residents.

Citation:

SUNDHEDSMINISTERIET 2020. Bekendtgørelse om begrænsning af rettigheder på sundheds- og ældreområdet i forbindelse med håndtering af Coronavirussygdom 2019 (COVID-19). BEK nr 364 af 04/04/2020 (der er tidligere udgaver på Retsinformation) København
 SUNDHEDSSTYRELSEN 2020a. COVID-19: Monitorering af aktivitet i sundhedsvæsenet. Beskrivelse af udviklingen i aktivitet i sundhedsvæsenet under COVID-19 (6. juli).
 SUNDHEDSSTYRELSEN 2020b. Håndtering af COVID-19: Prognose og kapacitet i Danmark for intensivterapi. København: Sundhedsstyrelsen
 SUNDHEDSSTYRELSEN 2020c. National koordinering af sygehuskapacitet ved behov for prioritering København: Sundhedsstyrelsen
 SUNDHEDSSTYRELSEN 2020d. Notat om reduktion af hospitalsaktivitet ifm COVID-19 (13. marts). København: Sundhedsstyrelsen

Family Policy Response

Family Support
 Policies
 Score: 7

Day care facilities were part of the lockdown in March 2020. This required some parents to stay at home. People were urged to work from home if possible, and a large share of public employees were mandated to work from home. However, during the lockdown in November/December, day care facilities remained open as a means of ensuring labor supply more generally, angering many staffers. All of this clearly made it more difficult to balance work, family and parenting roles, and there has been a concern that mothers and single parents have borne a disproportionate share of the burden. Day care is the responsibility of the municipalities. In March and December, many if not all municipalities established “emergency day care” facilities for families, at which parents carried out critical societal functions such as healthcare and transport.

In June 2020, Mother’s Aid conducted a survey (Mødrehjælpen/Mother’s Aid, 2020 – juni) among 1,501 vulnerable families, 72% of whom were single parents. Overall, they indicated that they been seriously challenged during the crisis. A total of 68% of the respondents reported that they had had difficulty in making ends meet economically. More than 50% of single parents said they had felt lonely during the crisis, and three-fourths of the surveyed families had

not received support from their networks. About half had not reached out for help, either privately or from public sources. About one-fourth said they had found it difficult to fulfill their parental role, and almost 50% had found it seriously challenging to support their children.

Newspapers have reported on an evident increase in family-related violence. Police have reported an increase in domestic disputes (Møller, 2020). In a non-representative questionnaire survey (Poulsen SH, 2020), families were asked to state the extent to which their family mood and mental health had been influenced by COVID-19. A total of 30% responded that they were “very affected.” It was also found that the importance of the family had increased.

At a more speculative level, a report on gender issues and the coronavirus indicated that on weekdays, women usually did close to 3.5 hours of housework, while men did 2.5 hours. Other gender differences were also evident, as on an average weekday, mothers spent close to three hours on childcare, while fathers spent an average of two hours and 15 minutes. The time spent on childcare has increased for both men and women. The question remains whether this gender difference has increased during the COVID-19 outbreak due to gendered expectations of informal care work with children, the sick and the elderly. This kind of pattern has been observed in earlier epidemics in developing countries (World Health Organization 2007).

Citation:

COORDINATION FOR GENDER STUDIES 2020. Gender and the COVID-19 Outbreak – A Literature Review of Coronavirus-related knowledge and practices. Denmark as a case study. Copenhagen: University of Copenhagen Department of Sociology.

MØLLER, E. 2020. Ny undersøgelse: Mindre vold og færre indbrud under corona-nedlukningen (Online). Kolding: TVSYD. Available: <https://www.tvsyd.dk/esbjerg/mindre-vold-og-faerre-indbrud-under-corona-nedlukningen> (Accessed December 10 2020).

POULSEN SH, A. A., OBEL C, 2020. Familieerne har fået en fornyet og større rolle under coronakrisen.

International Solidarity

International
Cooperation
Score: 8

Denmark has supported various coronavirus-related activities in Africa, contributing a total of DKK 1.025 billion. A first disbursement of DKK 650 million was made on April 2, followed by a second on June 10 (DKK 365 million) (DANIDA, 2020a).

In December (DANIDA, 2020b), the government contributed DKK 50 million to the COVAX facility. At the same time, it provided DKK 50 million to the UNICEF Supply Division for the distribution and purchase of vaccines on behalf of COVAX. Furthermore, the government provided the World Bank’s energy program, ESMAP, with DKK 40 million to provide health clinics in

Africa with green electricity in order to cool vaccines. A call from Italy for help with ventilators in April 2020 created some debate, but eventually some were offered, although there were issues with the quality of the ventilators. A total of 50 ventilators were donated to Ukraine for critically ill coronavirus patients.

Denmark, the other EU countries and the European Commission collectively contributed €400 million to support the COVAX vaccine alliance, whose aim is to ensure that low- and middle-income countries have access to vaccines. In 2018, Denmark developed a four-year strategy for supporting the Gavi vaccine alliance.

Citation:

DANIDA. 2020a. Bredt politisk flertal bag ny Covid-19 hjælpepakke til Afrika (Online). Available: <https://um.dk/da/danida/om-danida/nyheder/newsdisplaypage/?newsID=96615054-90D8-4B36-BC55-13C6D46900D2> (Accessed December 21 2020).

DANIDA. 2020b. Regeringen vil sikre COVID-19 vacciner til verdens fattigste (Online). København: Danida. Available: <https://um.dk/da/nyheder-udenrigsministeriet/newsdisplaypage/?newsID=AD47FEF8-F39C-4CE8-9939-BFCDFB03945E> (Accessed December 22 2020).

Resilience of Democracy

Media Freedom

Media Freedom
Score: 8

The media have acted independently and free from government interference, except for a few cases described below. However, the many government press briefings conducted from March 11 onward have been very controlled/orchestrated. While coronavirus restrictions have necessitated changes from the usual format for press conferences, allowing only two questions per journalist without follow-up questions has reduced the scope for critical journalism. Especially, in the early phases, critical and investigative journalism was weak (Jensen L, 2020b). Also, in connection with Minkgate (see “Judicial Review”), public officials at the Ministry of Justice called journalists and told them to abstain from the use of terms like “unlawful” (Cordes T, 2020) when referencing a judicial paper on the Minkgate situation written by the ministry (Justitsministeriet, 2020). The prime minister also relied on (one way) communication through Facebook and Instagram (Andreassen AM, 2020), and appears unwilling to take part in potentially critical interviews conducted by journalists.

On the eve of 10 March 2020, in connection with the lockdowns, the permanent secretary of the Ministry of Culture directly and without legal basis contacted the two public broadcast organizations, DR and TV2, and told them to change their broadcast schedules and send their journalists home (Jensen L, 2020c; Jensen L, 2020a). This violated the arms-length principle, but was not widely discussed or recognized until the middle of May. The Ministry of Culture later apologized for the intervention.

After the initial shell shock in March, all media recovered, and started using the freedom of information act (the Public Access to Information Act) to get access to documents underlying some of the critical decisions made during the coronavirus crisis. The decision processes have been very closed, and in May 2020, seven of the parties in parliament called for the documents underlying corona-related decisions to be made fully open (Kildegaard K and Schultz RB, 2020).

Citation:

ANDREASSEN AM 2020. Avisboss til Mette Frederiksen: "På langt sigt undergraver det demokratiet." Journalisten. København: Journalistforbundet

CORDES T. 2020. Embedsmænd ringede og irettesatte journalister: Nu skal Mette Frederiksen i samråd. Berlingske Tidende.

JENSEN L. 2020a. Da coronakrisen gjorde TV 2 og DR til statsmedier. Information, May 16.

JENSEN L. 2020b. Nu må hår i suppen-historierne vige for ordentlig journalistik og samfundsansvar. Information Marts 25.

Politisk armlængde-princip inficeret af virus, 2020c. Radio, DR. Directed by JENSEN L, S. K. DR.

JUSTITISMINISTERIET 2020. Notits vedrørende visse retlige spørgsmål med relation til Miljø- og Fødevarerministeriets redegørelse for forløbet vedrørende manglende hjemmel til at udvide den hidtidige indsats med aflivning af mink til hele landet. København: Justitsministeriet.

KILDEGAARD K & SCHULTZ RB. 2020. Efter hård kritik: Flertal vil nu tvinge regeringen til øget åbenhed (åbenhedsmanifest). Berlingske Tidende, 6. maj

Civil Rights and Political Liberties

Civil Rights and
Political Liberties
Score: 7

The Danish parliament unanimously passed an emergency coronavirus law (law on epidemics) on March 12, the day after imposing the lockdown restrictions. This gave health authorities the power to enforce testing, treatment and quarantine with the backing of the police, and granted the minister of health far-reaching powers associated with the management of COVID-19 – the most far-reaching powers since the second world war – by not requiring parliamentary approval of all measures undertaken. The far-reaching new law was to remain in force until March 2021, when it was slated to expire under a sunset clause.

However, after political pressure in parliament, an agreement between the majority of political parties was presented on 18 December 2020 (Sundhedsministeriet, 2020c) stating that draft legislation was to be presented before the Christmas holidays, and that the consultation period would expire on 15 January 2021.

On June 26, the Justitia think tank published a report on coronavirus and the rule of law, authored by the former director of the Danish Institute of Human Rights, J. Christoffersen (Christoffersen Jonas and Jensen Stine Brøsted, 2020). At about the same time the Institute of Human Rights and the Danish Bar and Law Society published a report on the rule of law and human rights (Advokatsamfundet og Institut for Menneskerettigheder, 2020). Both reports focused on the changes to the Epidemic Act on March 12, and the extent to which these changes threatened basic constitutional and human rights.

The Institute of Human Rights and the Danish Bar and Law Society noted the difficulties in striking a balance between fundamental freedoms and efforts to

combat COVID-19. They noted that the Danish parliament unanimously agreed to back measures temporarily circumscribing many fundamental rights. However, they said, it is important to reflect on whether the measures struck the right balance between protecting public health, especially that of the elderly and particularly vulnerable groups, and maintaining the capacity of the health services; and on the other hand, protecting due process and the fundamental rights of all citizens.

The Institute of Human Rights and the Danish Bar and Law Society made a number of recommendations for managing serious future crises, including that all legislation and regulation with a negative impact on due process or human rights should be submitted for consultation. Emergency legislation should be used only for imperative measures that must be adopted immediately, and should be as precise as possible, motivated by necessity and proportionate to its aims. Specific attention should be devoted to the consequences for marginalized and vulnerable groups. Moreover, explicit sunset clauses should be used, and the measures should be evaluated ex post.

The external observers issued a number of stern warnings regarding some of the clauses of the temporary Epidemic Act of March 12. Compulsory hospitalization, isolation and vaccination are very intrusive interventions that can have serious consequences for the individual, they noted. According to the revised Epidemic Act, it is permitted to detain a person even if there is no certainty that the person is infected with COVID-19. Moreover, in order to minimize the spread of other diseases (e.g., ordinary influenza), the Minister for Health can impose compulsory vaccination, for example to prevent influenza patients from taking up hospital beds needed by COVID-19 patients. However, no such regulation of this kind has as yet been implemented. In connection with the upcoming revision of the Epidemic Act, the government should consider carefully whether there is still a need for compulsory vaccination for other diseases. As of the time of writing (first quarter of 2021), compulsory vaccination had been omitted from the draft version of the new Epidemic Act (Sundhedsministeriet, 2020c).

Citation:

ADVOKATSAMFUNDET OG INSTITUT FOR MENNESKERETTIGHEDER 2020. COVID-19-tiltag i Danmark – retssikkerhedsmæssige og menneskeretlige konsekvenser

CHRISTOFFERSEN JONAS & JENSEN STINE BRØSTED 2020. Retsstaten og COVID-19. København Tænketanken Justitia.

SUNDHEDSMINISTERIET 2020. Stemmeaftale mellem regeringen (Socialdemokratiet), Venstre, Radikale Venstre, Socialistisk Folkeparti, Enhedslisten, Det Konservative Folkeparti, Liberal Alliance og Alternativet om

Judicial Review

Judicial Review
Score: 7

There has not yet been any formal review by independent courts as to whether the government and administration acted in conformity with the law throughout the COVID-19 pandemic. To the extent there has been a discussion about the rule of law, it has been raised by independent experts (Christoffersen Jonas and Jensen Stine Brøsted, 2020) (Advokatsamfundet og Institut for Menneskerettigheder, 2020).

The partial closure of the courts from March through mid-April challenged the separation of powers (executive, legislative and judicial, section 3 in the Danish Constitution) (Force, 2020). For example, did the courts decide to close down independently or were they ordered to do so by the government? If the latter, the separation of powers was violated. Courts also partially shut down as part of the broader closure of public institutions, but continued to operate in “critical” cases. These included cases with strict time limits, those which rested on constitutional guarantees (including habeas corpus, see section 72 in the Danish Constitution) and/or other pressing issues. The courts made case-by-case assessments as to whether each case could be delayed (Lauta, 2020). Almost all of these orders were carried out as statutory orders with legal mandate given by the newly amended Danish Epidemic Act.

While these orders obviously constitute clear interferences with individual rights, they do not necessarily amount to violations.

The issue of the violation of the division of powers was brought to light by Information, a daily publication (Andersen LS. Gjerding S, 2020), thanks to the public access provided to minutes taken by the court crisis staff. These minutes seemed to indicate that the Danish Court Administration thought they should follow executive government orders. All obstacles to judicial review were made unintentionally, and were quickly removed.

In early December, an expert group made two conclusions and recommendations (Force, 2020) in this area: First, that policies may have violated the separation of powers, and were unclear, and second, that internal decision procedures within the judicial system itself were unclear. The expert group noted that when looking at five other countries – Norway, Sweden, Great Britain, Austria and the Netherlands – no similar lack of clarity could be documented. At a press meeting on 4 November 2020, Danish Prime Minister Mette Frederiksen instructed all Danish mink farmers to cull their herds after discovering a COVID-19 mutation, cluster 5, in the animals. This was thought

to endanger the efficacy of the upcoming COVID-19 vaccine. This contention was subsequently disputed and downplayed. Approximately 17 million minks were culled in the course of a couple of weeks. Apparently many administrative and political shortcuts were taken, and an amazing number of things apparently went wrong.

Two weeks later, Minister of Food Mogens Jensen left office after it was revealed that the instruction had lacked statutory authority and a legal basis, although it has been questioned whether the prime minister was responsible for the decision. Minkgate has triggered an intense discussion about a possible breach of the country's constitution, focusing on the issue of expropriation and the possible lack of legal authority for some of the interventions. It seems that there was no legal basis for culling minks that were not infected with COVID-19 (Justitsministeriet, 2020, fødevareministeriet, 2020). A parliamentary commission (granskningskommission – Scrutiny Commission) has been established to look into the matter. This is a new parliamentary construction (Forretningsordenen., 2020), and a legislative basis for the action has to be established before 1 April 2021.

Denmark's chief of police has denied suggestions that he carried out an order to cull the country's entire mink population despite knowing that it was against the law. In a statement (Rigspolitechefen, 2020), Thorkild Fogde said he had "neither seen nor approved" instructions to officers to put pressure on farmers to quickly cull their mink, and that accusations that he knowingly violated the law were baseless. The statement was issued as several political parties called for an independent investigation into the police's involvement in a scandal that had already cost the job of the minister in charge of veterinary affairs.

Project HOPE at Aarhus University (HOPE, 2020) notes that Minkgate seems to have accelerated the growth of both pro- and anti-government groups on Facebook, indicating a polarization within the Danish population regarding trust in the government and the political handling of the COVID-19 crisis. The study was based on data collected weekly by HOPE researchers using CrowdTangle.

Citation:

ANDERSEN LS. GJERDING S. 2020. Referater modsiger myndigheders forklaring om nedlukningen af domstolene. Information, August 1.

FORCE, D. C. T. 2020. Da krisepolitik såede tvivl om magtens tredeling. Brief 2. København: DJØF.

FORRETNINGSORDENEN., U. F. 2020. Beretning om etablering af en undersøgelsesform med særlig parlamentarisk forankring. København: Folketinget.

FØDEVAREMINISTERIET, M.-O. 2020. Redegørelse for forløbet vedrørende manglende hjemmel til at udvide den hidtidige indsats med aflivning af mink til hele landet København

HOPE. 2020. HOPE – How Democracies Cope with COVID19 A Data-Driven Approach (Online). Aarhus: Department of Political science. Available: <https://hope-project.dk/#/> (Accessed December 20 2020).

JUSTITSMINISTERIET 2020. Notits vedrørende visse retlige spørgsmål med relation til Miljø- og

Fødevarerministeriets redegørelse for forløbet vedrørende manglende hjemmel til at udvide den hidtidige indsats med aflivning af mink til hele landet. København: Justitsministeriet.

LAUTA, K. C. 2020. Something is Forgotten in the State of Denmark: Denmark's Response to the COVID-19 Pandemic.,. VerfBlog, 2020/5/04 (Online). December 21).

RIGSPOLITICHEFEN 2020. Vedrørende minksagen og Rigspolitiets actioncard. København: Rigspolitiet.

Informal Democratic Rules

Informal
Democratic Rules
Score: 7

The Danish government is a social democratic minority government with parliamentary support provided by two socialist parties and one center-left party. In the first phases of the coronavirus crisis, the opposition largely supported the government's decisions, but over time, criticism mounted that they were not consulted and or integrated in the decision-making process, which can be seen as a break from a tradition of seeking broad consensus for policy initiatives.

Crisis management was helped greatly by the amendment of the Epidemic Act and forceful leadership by the prime minister. When needed, support was provided by the government's parliamentary base, and the population offered broad support for the policies. Until the discussions on (partially) lifting the lockdown in early April, there was no political split on the measures implemented. However, in connection with reopening, many politicians argued that they did not have any real input, but were rather merely informed by the government about decisions that had already been made.

The discussion of the new Epidemic Act (see "Civil Rights and Political Liberties") is a case in point, both due to its importance and the growing criticism from the opposition that it was not involved in its development. The first draft proposal for a new Epidemic Act was heavily criticized. This pushed the government to enter serious negotiations, which resulted in an agreement (Sundhedsministeriet, 2020c) laying the foundation for a new act. The agreement limited the government's ability to act unilaterally, as illustrated in late December, when the government wanted stronger restrictions on New Year's Eve and Night, but eventually retreated. Overall, party polarization on coronavirus-related issues has been avoided.

The government has been severely criticized for a lack of openness, and especially for a concentration of power in the Prime Minister's Office. It is not clear whether the lockdown restrictions imposed in March were based on expert advice from the relevant health authorities, or were a political decision made without expert backing. The prime minister argued that the lockdown was based on expert advice, but it later became clear that this was not the case. A majority in parliament decided to appoint an expert group to scrutinize the

handling of the COVID-19 crisis, and the report was released end of January 2021 (see Christensen m.fl. 2020). The report makes clear that the lockdown was a political decision made without the support of the relevant health authorities, and includes a detailed account and discussion of the decision process in the unusual situation created by the coronavirus crisis.

The so-called Minkgate (see “Judicial Review”) also raised a fierce debate over the legal basis for the order to cull the mink populations. A clear political divide emerged, in which the government made serious missteps, including interventions without legal authority. In an open letter to parliament, a number of epidemiological and economic experts warned against such a polarization, for fear that the focus on public health would be weakened (Bang Petersen, 2020).

Citation:

ANDERSEN LS. GJERDING S. 2020. Referater modsiger myndigheders forklaring om nedlukningen af domstolene. Information, August 1.

CHRISTENSEN, J. G. mfl, 2020, Håndteringen af covid-19 i foråret 2020, Rapport afgivet af den af Folketingets Udvalg for Forretningsordenen nedsatte udredningsgruppe vedr. håndteringen af covid-19, København.

FORCE, D. C. T. 2020. Da krisepolitik såede tvivl om magtens tredeling. Brief 2. København: DJØF.

FORRETNINGSORDENEN., U. F. 2020. Beretning om etablering af en undersøgelsesform med særlig parlamentarisk forankring. København: Folketinget.

FØDEVAREMINISTERIET, M.-O. 2020. Redegørelse for forløbet vedrørende manglende hjemmel til at udvide den hidtidige indsats med aflivning af mink til hele landet København

HOPE. 2020. HOPE – How Democracies Cope with COVID19 A Data-Driven Approach (Online). Aarhus: Department of Political science. Available: <https://hope-project.dk/#/> (Accessed December 20 2020).

JUSTITSMINISTERIET 2020. Notits vedrørende visse retlige spørgsmål med relation til Miljø- og Fødevareministeriets redegørelse for forløbet vedrørende manglende hjemmel til at udvide den hidtidige indsats med aflivning af mink til hele landet. København: Justitsministeriet.

LAUTA, K. C. 2020. Something is Forgotten in the State of Denmark: Denmark’s Response to the COVID-19 Pandemic,.. VerfBlog, 2020/5/04 (Online). December 21).

RIGSPOLITICHEFEN 2020. Vedrørende minksagen og Rigspolitiets actioncard. København: Rigspolitiet.

Resilience of Governance

I. Executive Preparedness

Crisis Management System

Crisis
Management
System
Score: 7

The National Health Authority, which reports to the Ministry of Health, is overall responsible for preparedness plans in the healthcare sector, both nationally and at the regional and municipal levels (Sundhedsstyrelsen, 2013, Sundhedsstyrelsen, 2017). However, execution is a regional and municipal responsibility based on national guidelines. The Danish Emergency Management Agency (DEMA) is a governmental agency functioning under the Ministry of Defense that works to prepare society for, prevent and respond to major accidents and disasters. DEMA is partly staffed by conscripted paramilitary personnel – approximately 525 persons in 2020. DEMA is responsible for updating the crisis management manual (Beredskabsstyrelsen, 2019).

In emergencies like a pandemic, the government's security council is at the top of the chain of command. This includes the prime minister as chair, along with the ministers for defense, justice, finance and foreign affairs, and often additionally includes other key public officials. Second in line is the Senior Officials Security Committee. This is followed by the National Operational Staff (NOST), which convenes in national emergencies and is in charge of national coordination. NOST is headed by one of the regional directors of the National Police. Members of NOST need security clearance, and is shrouded in secrecy (i.e., minutes are not publicly available).

Every second year there is an exercise/drill on specific topics. The last one took place in 2019 and aimed to test the Danish crisis management system at the strategic and operational level. About 40 authorities were involved (Beredskabsstyrelsen; Rigspolitiet, 2020). One of the lessons was that there was a need to strengthen communication between the three top levels: the Government Security Committee, the Senior Officials Security Committee and

NOST. There has never been an exercise involving a threat to public health (Pedersen KM, 2020b).

Looking back at the preparedness plans in view of COVID-19, several shortcomings are evident, including a lack of attention to weak (international) supply chains, the failure to stockpile critical equipment and devices, and a lack of directions for rapid short-term capacity expansion, for example with regard to testing and laboratory facilities, and intensive-care beds (Pedersen KM, 2020b).

Citation:

BEREDSKABSSTYRELSEN 2019. Retningslinjer for Krisestyring. København: Beredskabsstyrelsen.

BEREDSKABSSTYRELSEN; RIGSPOLITIET 2020. Evaluering af KRISØV 2019. Birkerød: Beredskabsstyrelsen.

DANISH EMERGENCY MANAGEMENT AGENCY. Danish Emergency Management Agency (Online). Available: <https://brs.dk/en/> (Accessed December 2 2020).

NOST National operative Staff – (YouTube video).

PEDERSEN KM 2020. Smittetryk og samfundssind. Kritisk nedslag i coronaens tid, Odense, Syddansk Universitetsforlag.

SUNDHEDSSTYRELSEN 2013. Beredskab for pandemisk influenza, del I: National strategi og fagligt grundlag. København.

SUNDHEDSSTYRELSEN 2017. Planlægning af sundhedsberedskab. Vejledning til regioner og kommuner København.

II. Executive Response

Effective Policy Formulation

Effective Policy
Formulation
Score: 7

Government responses have been swift throughout the coronavirus crisis, but not entirely coherent, undoubtedly due to the lack of time for planning. Moreover, the decisive lockdown restrictions imposed in March, which retrospectively may appear well-placed, were taken against the recommendations of the relevant health authorities (Christensen et al. 2020). Expert advice was not always followed by politicians (Pedersen KM, 2020a, Pedersen KM, 2020b) and there is no (external) evidence on the question whether balanced expert opinion was used.

Throughout, the government has relied on medical, virological and epidemiological expert advice from its own in-house experts, located at the National Health Authority, the Statens Serum Institut, the Danish Patient Safety Authority and the National Police. Much advice was coordinated through the National Operational Staff (NOST). It has not been possible to determine the extent to which external expert advice was in fact used – in part

because written documents are not readily available, if at all. However, it seems that the advice provided to the government came from a very closed circle (Pedersen KM, 2020b). Nevertheless, the process of developing computer models for the spread and development of infections drew primarily on university experts, for the simple reason that there was no in-house expertise (Pedersen KM, 2020b).

When the health situation allowed for a gradual reopening of the economy in spring 2020, discussion arose on how the reopening should be sequenced so as to balance health and economic considerations. A group of three independent experts, two of whom were former chairmen of the Economic Council, was appointed to prepare a report for policymakers within a very short span of time. The report provided recommendations on how to reopen so as to reap the largest socioeconomic gains while still avoiding a renewed spike in the spread of the virus (Andersen T et al., 2020 a,b).

The same expert group was soon after additionally asked to provide advice on how the emergency packages could be phased out, and policymakers largely followed the recommendations (Andersen T.M et al., 2000c).

During the autumn, as the risk of a second pandemic wave became clear, there was widespread demand – especially from the private sector – to clarify the guidance regarding which restrictions would be imposed at given levels of virus incidence. The work on this was organized by the Ministry of Health, with the help of a so-called reference group consisting of various experts (health, epidemiology, political science, economics). An early-warning scheme was released in the autumn (Sundheds- og Ældreministeriet, 2020). While a more differentiated approach to the regulations (including regional lockdown) was pursued, the second wave ultimately hit with a force that precluded fine-tuning, and widespread lockdown restrictions were imposed during December.

The abovementioned reference group was asked to prepare a report on reopening the economy. This was published in early January 2021 (Faglig Referencegruppe, 2020).

Citation:

ANDERSEN T, SVARER M & SCHRÖDER P 2020a. Rapport fra den økonomiske ekspertgruppe vedrørende genåbning af Danmark. København.

ANDERSEN T, SVARER M & SCHRÖDER P 2020b. Designing Reopening Strategies in the Aftermath of COVID-19 Lockdowns: Some Principles with an Application to Denmark, IZA Policy Paper 158, Bonn.

ANDERSEN T, SVARER M & SCHRÖDER P 2020c. Rapport fra den økonomiske ekspertgruppe vedrørende udfasning af hjælpepakker. København.

CHRISTENSEN, J. G. mfl, 2020, Håndteringen af covid-19 i foråret 2020, Rapport afgivet af den af Folketingets Udvalg for Forretningsordenen nedsatte udredningsgruppe vedr. håndteringen af covid-19,

København.

FAGLIG REFERENCEGRUPPE, 2020, Vurdering vedrørende genåbning fra den faglig reference gruppe til COVID-19 National Varslingsystem, København.

PEDERSEN KM 2020a. Rådgivning er en hårfin balance. Ugeskrift for Læger.

PEDERSEN KM 2020b. Smittetryk og samfundssind. Kritisk nedslag i coronaens tid, Odense, Syddansk Universitetsforlag.

SUNDHEDS- og ÆLDREMINISTERIET, 2020, Covid-19 varslingssystem, coronasmitte.dk

Policy Feedback and Adaptation

Policy Feedback
and Adaptation
Score: 9

Infectious-disease monitoring systems were already in place at the Statens Serum Institut (Institut, 2020). They were immediately adapted to COVID-19, allowing developments in the number of infected persons, tests given, positive tests, hospitalizations and ICU hospitalizations with ventilators to be tracked from day one, Statens Serum Institut notes that the quality of the Danish surveillance registers is very high and the registers are often used in connection with research projects.

The monitoring process includes continuous reporting and analysis of possible problems, such as changes in the occurrence of diseases; outbreaks; new microorganisms and resistance patterns; and the appearance of new, more virulent types of already well-known viruses.

Hence, government was able to monitor developments on a daily basis, assessing the effects of various interventions such as reopening, or the new restrictions imposed in August through December. Key numbers like the number of infected and hospitalized persons were reported daily by the media. In February 2020, the Danish Health Data Authority introduced ICD-10 diagnosis codes relevant to COVID-19 so that patient data could be entered into the Danish National Patient Register (Sundhedsdatastyrelsen, 2020b) and the National Clinical Registries (RKKP, 2020). For instance, coronavirus-related mortalities and elective surgeries cancelled due to COVID-19 can be tracked.

At an early date, Statistics Denmark established a tracking system for overall economic consequences. The Ministry of Employment focused on tracking employment and unemployment statistics, among other things.

Citation:

RKKP. 2020. National Clinical Registries (RKKP) (Online). Aarhus: RKKP. Available: <https://www.rkkp.dk/in-english/> (Accessed December 20 2020).

STATENS SERUM INSTITUT. 2020. Surveillance in Denmark (Online). Statens Serum Institut. Available: <https://en.ssi.dk/surveillance-and-preparedness/surveillance-in-denmark> (Accessed December 28 2020).

SUNDHEDSDATASTYRELSEN. 2020. Udvidet registrering af coronavirus (Online). Sundhedsdatastyrelsen. Available:

<https://sundhedsdatastyrelsen.dk/da/nyheder/2020/registreringcorona130320> (Accessed December 15 2020).

Public Consultation

Public
Consultation
Score: 7

As reflected in the 14 tripartite agreements between the government, the Danish Employers' Confederation and the Danish Trade Union Confederation (the social partners) (Beskæftigelsesministeriet, 2020c; Beskæftigelsesministeriet, 2020b), the government consulted actively and successfully with societal actors – with very visible results.

However, it is difficult to document the extent and nature of consultation with other organizations. One indicator is to look at the number of meetings held between the government, parliamentarians, interest associations and civil society representatives at which issues associated with proposed legislation in parliament was discussed. However, this is only one means by which affected parties can contact the government. In other cases, the government may seek out affected parties in connection with policy development. This is often informal, and is not systematically documented – but most likely took place nonetheless. Furthermore, during the coronavirus crisis, policy development often took place within extremely tight time limits, which precluded the use of normal procedures for consultation.

Citation:

BESKÆFTIGELSESMINISTERIET 2020a. Trepartsaftale om en ny midlertidig arbejdsfordelingsordning på det private arbejdsmarked. København Beskæftigelsesministeriet.

BESKÆFTIGELSESMINISTERIET. 2020b. Trepartsaftaler (oversigt) (Online). København: Beskæftigelsesministeriet. Available: <https://bm.dk/arbejdsmraader/politiske-aftaler-reformer/politiske-aftaler/trepartsaftaler/> (Accessed December 12th 2020).

Crisis Communication

Crisis
Communication
Score: 9

Experts assess the government's crisis communication during March 2020 to have been strong and convincing (Engholm P, 2020). The prime minister's televised press meetings were well orchestrated, with the prime minister flanked by the directors of the National Health Authority, the Statens Serum Institut and the National Police, all of whom supported and elaborated on the prime minister's messages. The prime minister's speech writer did an excellent job with the speech given on March 11 (Statsministeriet, 2020), producing catchy phrases, clear instructions and arguments. Despite the lack of a crisis-communication manual, there were nevertheless similarities to the six basic rules contained in the United States' Centers for Disease Control and Prevention's (CDC) crisis and emergency-risk communication manual: 1) Be first, 2) be right, 3) be credible, 4) express empathy, 5) promote action, and 6) show respect (Centers for Disease Control and Prevention, 2014).

The government initially dominated the communications landscape, in part because the two public TV stations were partially closed down (see “Media Freedom”), and because the media did not initially take a critical journalistic approach, for instance by engaging in follow-up interviews with other politicians or commentators. Also, during the first week of the lockdown, the queen addressed the nation. This was the first time that the queen had done so, apart from her annual New Year’s Eve address to the nation. This thus underscored the impression of a national crisis. Fully 3.3 million Danes – out of 5.6 million – followed the televised address, the highest number ever reported by tracking firm Kantar Gallup, which has tracked viewer numbers since 1992 (Breinstrup T, 2020). The prime minister timed her own televised press conference to air an hour before the queen’s address, and got 2.8 million viewers.

National Health Authority communication aimed at the general populace (Sundhedsstyrelsen, 2020e) received considerable praise. The Authority was proactive, and brought a professional PR agency on board early on. In the annual PR barometer, with a special section on COVID-19 (Communication, 2020), in which 200+ journalists grade communications, the National Board of Health was ranked ahead of the Ministry of State, and the director of the National Health Authority was ranked above the prime minister (Nyhus M, 2020).

The behavioral response of a representative sample of Danes has been tracked since early March 2020. To a certain extent, this captures how successful the communication has been. In March 2020, almost 90% of Danes said the government had pursued the necessary coronavirus policy, but this figure had steadily declined to around 62% by December 8. During the first week of April 2020, between 82% and 88% fully or mostly agreed that the country and its leaders were standing together in the fight against the coronavirus. This share had declined to between 48% and 59% by December 8.

In the later phases of the coronavirus crisis, government communication was less successful – in part because it had become more complex, with many interested parties participating, including other politicians. The polling results seem to indicate that the communication had become less clear and reliable, due to the presence of dissenting voices on some aspects of the chosen policy approach. The prime minister gradually shifted to the active use of Facebook and Instagram, where her messages are unfiltered. She uses these channels to provide early signals of policy shifts, and to display her softer sides, for instance when she took part in a Friday TV sing-along. Her use of Facebook communication has been criticized as an attempt to avoid confrontational

journalists and critical questions (Andreassen AM; Lindhardt C, 2020). A harsh editorial in the large Jyllands Posten daily newspaper on 13 December 2020 captured some of the thinking with regard to meeting the press head on: “It would seem that for the current head of government, a critical press is not only irritating but unacceptable – intolerable even. Therefore the prime minister is consistently choosing to communicate via those channels we call social media. ... Here she bakes, there she sings Christmas carols and presents herself as ‘Mette from next door.’ ... We must stress the need for the free press to engage in critical journalism – even if the social democratic spin machine is doing everything it can to prevent it.”

Communication during the Minkgate incident in November (see “Judicial Review”) was a catastrophe in almost all respects, in that government was unable to set the agenda, and on occasion had to backtrack. For the first time during the COVID-19 era, the agenda was set by the opposition, and the government was clearly thrown on the defensive.

Citation:

ANDREASSEN AM; LINDHARDT C 2020. Derfor er statsministeren på SoMe: Aviser har ikke så mange abonnenter længere. Journalisten. København: Dansk Journalistforbund.

BREINSTRUP T. 2020. TV-seningen er eksploderet under coronakrisen. Berlingske Tidende, 1. april.

CENTER FOR DISEASE CONTROL AND PREVENTION 2014. Crisis and emergency risk communication. Washington DC CDC.

COMMUNICATION, A. 2020. PR-barometer Corona (Online). Available: <https://www.aalund.com/wp-content/uploads/2018/09/Aalunds-PR-Barometer-2020-Medieh%C3%A5ndtering-under-coronakrisen-1.pdf> (Accessed).

ENGHOLM P. 2020. PR-eksperter bedømmer Mette F: Eksemplarisk kommunikation (ugen med nedlukningen) (Online). Available: <https://bureaubiz.dk/pr-eksperter-bedoemmer-mette-f-eksemplarisk-kommunikation/> (Accessed).

NYHUS M 2020. Søren Brostrøm giver Mette Frederiksen baghjul på corona-kommunikation. Journalisten
STATSMINISTERIET 2020. Statsminister Mette Frederiksens indledning på pressemøde i Statsministeriet om corona-virus den 11. marts. Statsministeriet.

SUNDHEDSSTYRELSEN 2020. Sundhedsstyrelsens borgerrettede kommunikationsindsats om ny coronavirus/COVID-19 – Status pr. 5. maj 2020. København: Sundhedsstyrelsen

Implementation of Response Measures

Implementation
of Response
Measures
Score: 9

One prerequisite for effective implementation is a clear line of command in case of emergencies – not only in the healthcare sector, but in the whole of society. This should be reflected in any preparedness plans. Furthermore, as illustrated by the experiences in the COVID-19 era, improvisation is needed when dealing with the unexpected or unknown.

In Denmark, the National Health Authority, which reports to the Ministry of Health, is responsible for preparedness plans in the healthcare sector, nationally as well as at the regional and municipal levels (Sundhedsstyrelsen, 2013; Sundhedsstyrelsen, 2017). However, execution is a regional and

municipal responsibility, based on national guidelines. The Danish Emergency Management Agency (DEMA) is a governmental agency reporting to the Ministry of Defense that works to prepare for, prevent and respond to major accidents and disasters. DEMA is partly staffed by conscripted paramilitary personnel – approximately 525 people in 2020. DEMA is responsible for updating the crisis management manual (Beredskabsstyrelsen, 2019).

In emergencies like a pandemic, the government's security council is at the top of the chain of command. This includes the prime minister as chair, along with the ministers for defense, justice, finance and foreign affairs, and often additionally includes other key public officials. Second in line is the Senior Officials Security Committee. This is followed by the National Operational Staff (NOST), which convenes in national emergencies and is in charge of national coordination. NOST is headed by one of the regional directors of the National Police. Members of NOST need security clearance, and is shrouded in secrecy (i.e., minutes are not publicly available).

Every second year there is an exercise/drill on specific topics. The last one took place in 2019, and aimed to test the Danish crisis management system at the strategic and operational level. About 40 authorities were involved (Beredskabsstyrelsen; Rigspolitiet, 2020). One of the lessons was that there was a need to strengthen communication between the three top levels: the Government Security Committee, the Senior Officials Security Committee and NOST. There has never been an exercise involving a threat to public health (Pedersen KM, 2020b).

All of the above have been called on during the coronavirus crisis. The process has been relatively effective, but the many unexpected challenges never considered in planning manuals required considerable improvisation. Some examples are mentioned below.

The most extreme and dramatic case was the culling of 17 million minks (Minkgate, see "Judicial Review"). Police were called on to provide access to privately owned mink farms when the owners denied access. The Emergency Management Agency actively took part in the culling, in some cases supported by the army. The same two parties took care of the disposal of the minks. In this case, the state's authorized right to exercise power was used when needed.

Limitations on assembly sizes (e.g., groups were limited to no more than 10 persons) were enforced by issuing fines, usually DDK 2,500 per person. This was upheld by the courts. In some case police closed locations to the public. The police also fined shops if they broke closure rules. First-time offenders

were fined DDK 10,000. To a certain extent, these functions paralleled regular police duties, but required a special legal basis. Implementation itself was almost standard operating procedure, however.

Early on it became painfully clear that Denmark had not stockpiled face masks and protective gear. NOST organized purchases and airlifts from China, with the help of a number of large private companies with experience doing business in China, and relatively quickly rectified this deficiency in the country's preparedness plans. To handle this function, NOST created a new organizational unit, the National Societal Robustness (National Samfunds Robusthed, NSR), in which private sector participants worked pro bono alongside McKinsey & Company consultants (Bøgelund E, 2020).

Many of the guidelines (i.e., social distancing, hygiene and the like) issued by the National Health Authority were recommendations, not enforced regulations. Nevertheless, the population followed them to a high degree, as documented by Project HOPE (Marie Fly Lindholt FJ; Jørgensen F; Bor A; Petersen MB, 2020). Improvisation was needed when the government decided to massively expand (PCR) testing capacity, along with the associated laboratory analyses, in late April (Sundhedsministeriet, 2020c). A new organization, Testcenter Danmark (SSI; Testcenter Danmark, 2020), was established under the Statens Serum Institut to supplement regional test capacity (Sundhedsministeriet, 2020c). Testcenter Danmark was established in collaboration with the Novo Nordic Foundation, which contributed half the funding required. Pharmaceutical company Novo Nordisk also contributed. White tents were raised across the country. Since that time, testing and laboratory capacity have been continuously expanded. In December, rapid antigen tests were added to the country's capacity. The capacity expansion necessitated the employment of a massive number of temporary workers, including conscripted personnel from the Emergency Agency. It has not been possible to obtain exact numbers, but an educated guess is that around 1,000 persons were used for this purpose. In addition, supplying the materials needed for these tests has been and remains a challenge. Thus, the laboratory has established a unit solely focusing on the procurement and production of reagents and materials that cannot be sourced through the usual distributors. For some materials (e.g., plastic materials), it has been necessary to find vendors in Denmark or Europe capable of custom production, for instance for 1 mL matrix tubes (SSI; Testcenter Danmark, 2020).

Contact-tracing capacities were also expanded considerably. The Patient Safety Authority is responsible for this activity but is supported by the National Police and the Agency for Patient Complaints. More than 1,500 persons are involved in the effort, including 600 from the National Police and

100 persons from the Agency for Patient Complaints (Patientssikkerhedsstyreslen, 2020). From an implementation perspective, this has been a considerable organizational challenge. The efficacy of the contact-tracing efforts has been criticized, and a new unit has been established as part of Denmark's compulsory pension scheme, ATP/Udbetaling Danmark, and tasked with scaling up the activity.

Citation:

PATIENTSSIKKERHEDSSTYRESLEN. 2020. COVID-19: Mere end 800 nye medarbejdere til smitteopsporingen (Online). København Available: <https://stps.dk/da/nyheder/2020/covid-19-mere-end-800-nye-medarbejdere-til-smitteopsporingen/> (Accessed 2. januar 2020).

PEDERSEN KM 2020. Smittetryk og samfundssind. Kritisk nedslag i coronaens tid, Odense, Syddansk Universitetsforlag.

SSI; TESTCENTER DANMARK. 2020. Testcenter Danmark (Online). Statens Serum Institut. Available: <https://tcdk.ssi.dk/> <https://tcdk.ssi.dk/-/media/arkiv/subsites/testcenter-danmark/english/the-setup-of-testcenter-denmark.pdf?la=da> (Accessed 1. januar 2020).

SUNDHEDSMINISTERIET 2020. Regeringen og regioners øger antallet af test markant. Sundhedsministeriet.

SUNDHEDSSTYRELSEN 2013. Beredskab for pandemisk influenza, del I: National strategi og fagligt grundlag. København.

SUNDHEDSSTYRELSEN 2017. Planlægning af sundhedsberedskab. Vejledning til regioner og kommuner København.

<https://coronasmitte.dk/>, 2020

National Coordination

National
Coordination
Score: 9

The Danish healthcare sector has three levels: state (run regulatorily by the National Health Authority, with relevant laws passed by parliament, and headed politically by the minister of health), regional (which has operational responsibility for hospitals, general practitioners, etc.) and municipal (which operates home-based care, nursing homes, rehabilitation centers, etc.). Cooperation has always been good, but some rivalries have emerged. During the coronavirus crisis, all parties collaborated naturally and without rivalry toward the common goal of beating COVID-19. There was usually no doubt about who should lead. The media has not reported any problems with cooperation. It is obvious that cross-sectoral collaboration was more difficult than work specifically within the healthcare sector, but here, NOST (see “Crisis Response System” and “Implementation”) was undoubtedly a useful organizational construct in coordinating relevant parties.

Over the course of the crisis, the National Health Authority has issued numerous coronavirus-related guidelines (Sundhedsstyrelsen, 2020g) to the five regions and the 98 municipalities. Moreover, it has engaged in ongoing consultations, in particular with the regions. In line with tradition in the Danish healthcare sector, guidelines are followed. Hence, COVID-19 policies in the regions largely accorded with national policies, but were – also as usual – adapted to local circumstances by the regions and the municipalities.

Early on, the national authorities developed a joint website – coronasmitte.dk (corona infection) – where almost all information aimed at the public and companies was made available in Danish and English. For instance, there is a complete listing of news of all kind, including directives, press meetings, economic aid packages and more.

Numerous examples of vertical and horizontal collaboration emerged during the crisis. Several examples are given below.

On 13 March 2020, the Medicines Agency, working with the regions and the municipalities, established a national logistics center tasked with monitoring the distribution and redistribution of critical medical devices and protective gear/equipment (KL, 2020). An IT system for this purpose was developed rapidly.

The Medicines Agency collaborated with AMGROS, a regional drug wholesaler, as well as other wholesalers, to stockpile essential and vital drugs. This collaboration was established in early March. At no time did Denmark experience critical shortages (Lægemedelstyrelsen, 2020). Regions have also cooperated with one another by admitting patients from other regions overburdened by corona patients.

Separately, the Danish Health Data Authority collaborated with the National Health Authority, the Statens Serum Institut and the regions to collect data on coronavirus-related hospitalizations and deaths (Sundhedsdatastyrelsen, 2020a).

Citation:

KOMMUNERNES LANDSFORENING. 2020. COVID-19: Nyt samarbejde skal modvirke forsyningsproblemer med kritisk medicinsk udstyr (Online). Available: <https://www.kl.dk/forsidenyheder/2020/marts/covid-19-nyt-samarbejde-skal-modvirke-forsyningsproblemer-med-kritisk-medicinsk-udstyr/> (Accessed 10. november 2020).

LÆGEMIDDELSTYRELSEN 2020. Flere tiltag for at sikre medicinforsyningen under COVID-19. Lægemedelstyrelsen.

SUNDHEDSDATASTYRELSEN. 2020. Sundhedsdatastyrelsens bidrag til bekæmpelse af COVID-19 (Online). Sundhedsdatastyrelsen Available: <https://sundhedsdatastyrelsen.dk/da/nyheder/2020/sdsarbejde-covid060420> (Accessed 2. januar 2020).

SUNDHEDSSTYRELSEN. 2020. Udgifter om COVID-19 (Online). København: Sundhedsstyrelsen. Available: <https://www.sst.dk/da/corona/materialer> (Accessed 2. januar 2020).

International Coordination

International
Coordination
Score: 8

Much of Denmark's participation in international efforts has taken place through the EU, and has hence followed the usual channels for EU-collaboration. For instance, the Danish Medicines Agency has close ties with the European Medicines Agency (EMA). Similarly, the Statens Serum Institut has been in close contact with the European Center for Disease Prevention and Control throughout the crisis.

There is some doubt as to whether Denmark took an active part in the development of the EU vaccine strategy (European Commission, 2020a). However, it is of course difficult to gauge the scope of the country's influence. The same holds for the various European Commission initiatives on COVID-19 (European Commission, 2020b).

Denmark is known for a quick and effective integration of EU initiatives into its political and administrative praxis.

The Danish parliament has a European Committee that develops negotiation mandates for Danish ministers when they meet in the Council of Ministers, for instance. As another example, the committee discussed domestic criticism of how Denmark had handled a request from Italy for ventilators to be used in northern Italian hospital (Europaudvalget, 2020). In a letter to the prime minister, the committee observed critically that the COVID-19 crisis and the use of virtual meetings had weakened the committee's role with regard to developing mandates for negotiation and monitoring EU decisions (Udvalget for forretningsorden, 2020).

Citation:

EUROPAUDVALGET 2020. Beretning om regeringens håndtering af Italiens anmodning om hjælp som følge af udbruddet af COVID 19.

EUROPEAN COMMISSION. 2020a. Coronavirus: Commission unveils EU vaccines strategy (Online). Bruxelles: European Commission. Available: https://ec.europa.eu/commission/presscorner/detail/en/ip_20_1103 (Accessed).

EUROPEAN COMMISSION. 2020b. Timeline of EU action (Online). Available: https://ec.europa.eu/info/live-work-travel-eu/coronavirus-response/timeline-eu-action_en (Accessed 2. januar 2020).

UDVALGET FOR FORRETNINGSORDEN 2020. Samarbejdet med Europaudvalget.

Learning and Adaptation

Learning and
Adaptation
Score: 8

The national government and local governments (regions and municipalities) have already evaluated many dimensions of the coronavirus crisis, including that of communication, distance learning and preparedness (Danmarks

Lærerforening, 2020; Rigspolitiet, 2020; Odense Universitets Hospital, 2020; Region Sjælland, 2020). The evaluations have been carried out by internal and external evaluators, and all have been aimed at learning from the COVID-19 experience. Some of the lessons learned are in the process of being implemented (Vejle Kommune, 2020). However, the government has not initiated systematic country-wide evaluations, which is consistent with the Danish tradition of not subjecting national initiatives to evaluation. . On the other hand, the lessons of the crisis have resulted into two key central-state actions. First, the government has established an Agency for Supply Safety (Styrelsen for Forsyningssikkerhed) (forsyningssikkerhed, 2020), which is to be staffed by 60 to 70 persons. Funds for the agency were to be allocated in the 2021 state budget and beyond (Finansministeriet, 2020c). Second, the Ministry of Health has established a new office, to be staffed by between 10 and 13 persons, also with money allocated in the 2021 state budget. This office is to be tasked specifically with drawing lessons from the coronavirus experience and improving preparations for coming pandemics (Finansministeriet, 2020c).

In summer 2020, a review of the background behind the March 2020 lockdown was initiated (Udvalget for forretningsorden, 2020a). The government had been unwilling to release information on the advice provided on the issue by entities such as the National Health Authority, the Statens Serum Institut and NOST. This led to political pressure calling for examination of the issue, and a large parliamentary majority voted to establish a Scrutiny Committee. A group of five experts led by a professor emeritus in public administration submitted a report on the issue in late January 2021 (Christensen et al. (2021)).

On the urging of the Ministry of Finance, the Danish regions published a report (Danske Regioner, 2020) on their experience with shifting hospital intake strategies to provide room for COVID-19 patients from March 2020 to May 2020, which involved, for example, canceling elective surgery and outpatient appointments. At least one university hospital has published a comprehensive report on the overall experience between January and April, offering 59 recommendations across numerous areas (Odense Universitets Hospital, 2020). Patients, employees and management provided input through interviews and questionnaires.

In October 2020, the Association of Municipalities published a report on municipality experiences under COVID-19. The Association of Municipal CEOs issued its own similar report, as did several individual municipalities, including Copenhagen (Kommunernes Landsforening, 2020) (Kommunaldirektørforeningen, 2020, Københavns Stift, 2020). All these

reports were aimed at generating lessons and recommendations for the future. (Danmarks Lærerforening, 2020).

There has not yet been any systematic evaluation of the economic policies and emergency packages launched during the coronavirus crisis. Since lockdowns were still in effect as of the time of writing, it is premature to assess the packages' overall and long-term effects.

Citation:

DANMARKS LÆRERFORENING 2020. Undersøgelse blandt lærere og børnehaveklasselædere i folkeskolen om nødundervisning under covid-19-nedlukningen. København

DANSKE REGIONER 2020. Regionernes erfaringer med omstilling af kapaciteten København: Danske Regioner.

FINANSMINISTERIET 2020. Trygt gennem krisen i fællesskab - Finansloven 2021. København: Finansministeriet.

KOMMUNALDIREKTØRFORENINGEN 2020. Læring af coronakrisen

KOMMUNERNES LANDSFORENING 2020. KommuneDanmark under forårets coronakrise København: KL.

KØBENHAVNS STIFT 2020. Evaluering af coronakommunikationen.

ODENSE UNIVERSITETS HOSPITAL 2020. Evaluering af COVID-indsatsen på OUH. Odense: OUH.

REGION SJÆLLAND 2020. Organisatorisk evaluering af Region Sjællands håndtering af COVID-19.

RIGSPOLITIET 2020. Politiets kommunikation om coronavirus Status og evaluering af rækkevidde og effekt i den indledende fase København: Rigspolitiet.

STYRELSEN FOR FORSYNINGSSIKKERHED. 2020. Styrelsen for forsyningssikkerhed (Online). Available: <https://sfos.dk/> (Accessed 3. januar 2020).

UDVALGET FOR FORRETNINGSORDEN 2020. Beretning afgivet af Udvalget for Forretningsordenen den 23. juni 2020 om gennemførelsen af en udredning om håndteringen af covid-19. København: Folketinget.

VEJLE KOMMUNE 2020. Evaluering af ((corona)covid-19 Vejle

III. Resilience of Executive Accountability

Open Government

Open
Government
Score: 10

Government agencies publish update coronavirus-related data on a daily basis at 2:00 p.m. This effort is led by Statens Serum Institut (SSI), which has developed a dashboard with good graphics on the number of tests, positive tests, tested persons, the number of people hospitalized, the number of deaths and the number of recoveries (infection no longer active). This is available on the national, regional and municipal levels, and provides seven-day summaries (Statens Serum Institut, 2020). The weekly summaries are also available broken out by sex and age. The SSI data are regarded as authoritative.

The National Health Authority also publishes data (Sundhedsstyrelsen, 2020h), in part based on the SSI data, and in some cases based on more detailed data from the Health Data Authority. Data on national and regional

hospital-bed availability is also available. The National Health Authority also publishes a “COVID Meter” based on voluntary reporting from citizens, which is hence not necessarily representative (Sundhedsstyrelsen, 2020b).

Statistics Denmark publishes what it calls experimental statistics on COVID-19 (Statistik, 2020), with good graphics. The goal here is to provide up-to-date information, and the project does not follow international standards to the same extent as the other publications. Part of this information comes from SSI data, while other data relate to the crisis’ effect on businesses, for instance addressing the risk of bankruptcy, electricity use, consumer indicators and so on.

Citation:

STATENS SERUM INSTITUT. 2020. Overvågningdata for covid-19 i Danmark og Europa (Online). København: SSL. Available: <https://covid19.ssi.dk/overvagningsdata> <https://covid19.ssi.dk/overvagningsdata/ugentlige-opgorelser-med-overvaagningsdata> (Accessed 3. januar 2020).

SUNDHEDSSTYRELSEN. 2020a. COVIDmeter: borgeres frivillige rapportering af symptomer på covid-19 (Online). Available: <https://covid19.ssi.dk/overvagningsdata/covidmeter> (Accessed 3. januar 2020).

SUNDHEDSSTYRELSEN. 2020b. Tal og overvågning: COVID-19 (Online). Sundhedsstyrelsen. Available: <https://www.sst.dk/da/corona/Status-for-epidemien/tal-og-overvaagning> (Accessed 3. januar 2020).

Legislative Oversight

Legislative
Oversight
Score: 7

The usual procedures for passing legislation have been suspended on several occasions. Ordinarily, a vote on a proposed act cannot be taken until at least 30 days after the proposal has been introduced. The crisis has forced faster action, with the most far-reaching example being the change to the Epidemic Act (see “Informal Democratic Rules”), which was passed in only 18 hours on 13 March 2020, giving the minister of health unprecedented rights to issue decree-like orders. However, the change was passed unanimously, and contained a March 2021 sunset clause. An specific group of parliamentarians (healthcare spokespersons) were supposed to monitor how minister of health was using the powers granted under this measure (Folketinget, 2020). In the early phases of the pandemic, this oversight group was not very active, but it was convened for consultation regularly toward the end of 2020 (DR, 2020), when new restrictions were planned. It apparently had some influence, although the minister had the ultimate right to decide on many matters.

The parliament’s European Committee indicated that it had not been able to fulfill its consultation role on EU matters fully during the crisis (see “International Coordination”)

The March 2020 lockdown greatly influenced the parliament's activity level, resulting in new workflows and procedures. As the parliament reopened, the Committee on Order of Procedure (Udvalget for Forretningsordenen), which contains members from all political parties, discussed the parliament's work (Frost KE, 2020). Minutes from the meetings are not publicly available, but an article in *Altinget* indicated that physical meetings in subcommittees were possible after the lockdown was lifted, with some members of parliament joining virtually. The same was true for parliamentary consultations with ministers (Samråd).

Citation:

DR. 2020. Sundhedsordførere i covid-19-følgegruppen indkaldt til møde (Online). DR. Available: <https://www.dr.dk/nyheder/seneste/sundhedsordfoerere-i-covid-19-foelgegruppen-indkaldt-til-moede> (Accessed 4. januar 2021).

FOLKETINGET 2020. L 133 Forslag til lov om ændring af lov om foranstaltninger mod smitsomme og andre overførbare sygdomme. København: Folketinget.

FROST KE. 2020. Folketinget på vej mod genåbning. Available: <https://www.altinget.dk/artikel/folketinget-tager-nyt-skridt-mod-normale-arbejdsgange> (Accessed 4. januar 2021).

Independent Supervisory Bodies

Auditing
Score: 8

The national audit office – the Rigsrevisionen – has not as of the time of writing initiated or announced any investigations into the financial aspects of the crisis (Rigsrevisionen, 2020). The Rigsrevisionen can be called upon to conduct an audit by the parliamentary audit group (Statsrevisorerne), but can also initiate audits on its own initiative, and frequently does so. The body has the power to look into financial risk, including cases of fraud and the like, but can also review administrative procedures and management.

Citation:

Rigsrevisionen. 2020. Rigsrevisionen (Online). Available: <https://rigsrevisionen.dk/> (Accessed 3. januar 2020).

Data Protection
Score: 10

The Danish Data Protection Agency (DPA) is the national independent supervisory authority with responsibility for upholding the fundamental right of data protection (Datatilsynet, 2020). The DPA's statutory powers, functions and duties derive from the Data Protection Act, the General Data Protection Regulation, the Law Enforcement Directive, the Danish Law Enforcement Act and the Danish TV Surveillance Act.

During the coronavirus crisis, the DPA has actively reviewed a number of issues concerning data privacy. Apparently, no breaches of the GDPR regulations have been identified.

The development of Denmark's official COVID-19 contact-tracing app, Smitte-stop, raised a number of data privacy issues. These had to be addressed clearly within terms of the Data Protection Act; for example, the app was not allowed to collect GPS data on users' locations. The issue of data privacy was addressed in detail by the Patient Safety Agency (Styrelsen for Patientssikkerhed, 2020), and the associated report was republished on the Data Protection Agency's webpage, indicating its approval. Nevertheless, a survey conducted just before Christmas 2020 indicated that respondents' main reason for not downloading the app was uncertainty surrounding data privacy (Ritzau, 2020).

The Data Protection Agency has clarified when and how employers can register certain corona-relevant data about employees (Datatilsynet, 2020).

Citation:

DATATILSYNET. 2020. Hvordan er det med GDPR og coronavirus? (Online). Available: <https://www.datatilsynet.dk/presse-og-nyheder/nyhedsarkiv/2020/mar/hvordan-er-det-med-gdpr-og-coronavirus> (Accessed 22. december 2020).

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Møller Pedersen, K., Andersen T. & T. Hustedt (2021).
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