

Pandemic responses at the subnational level: Exploring politics, administration, and politicization in Swedish municipalities

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Abstract

The Swedish response to the pandemic at the national level has attracted considerable international attention, but little focus has been placed on the way municipalities dealt with the crisis. Using Hay's dimensions of politicization, namely the capacity for human agency, deliberation in the public domain, and social context, we analyze the politicization of the municipal response to the pandemic in Sweden. We do this based on the analysis of the decision making process to activate (or not) an extraordinary crisis management committee. We find inter alia, that (i) only a quarter of the municipalities activated the committee while a majority of them had an alternate special organization in place; (ii) support to the existing organizational structure was more salient than creating an extraordinary organization, and (iii) a robust municipal structure was deemed to be one able to withstand shocks without resorting to extraordinary governance arrangements. We find a 'conditioned politicization' of the response, privileging administration over politics.

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© 2022 The Authors. *European Policy Analysis* published by Wiley Periodicals LLC on behalf of Policy Studies Organization.

Funding information

Myndigheten för Samhällsskydd och Beredskap, Grant/Award Number: 2017-340

KEYWORDS

COVID 19, local government, politicization, politics administration dichotomy, Sweden

1 | INTRODUCTION

It would be accurate (if trite) to state that the COVID-19 pandemic has affected, to a considerable degree, every aspect of social and political life everywhere at the macro, meso, and micro levels. For this reason, in order to understand the societal and political dimensions of the pandemic as well as the responses to it, engagement of multidisciplinary character is necessary. Weible et al. (2020) argue for the use of a variety of policy perspectives in this endeavor, including domestic and global policy-making, crisis response and management, policy networks, policy implementation, knowledge and expertise, emotions, narratives, learning, and policy success and failure.

Scholarship in political science, public administration, and policy studies published on this empirical field thus far has progressed along three broad trajectories, though the literature is continuously evolving as the crisis shifts. First, literature has treated national responses to COVID-19 as the dependent variable, investigating factors explaining policy responses, either in single case studies or (less so) comparatively (see, for example, Bakir, 2020; Capano, 2020; Lee et al., 2020; Petridou, 2020; Petridou et al., 2020; Zahariadis et al., 2021).

Second, research has focused on structural and persisting societal cleavages that have resulted in different segments of the population being unevenly affected by the pandemic, including, for example, long-standing health inequities in the US context. Targeting these inequities requires a long-term response at the community level, including maintaining a continuous dialog on the role of public administration and equity in health policy; monitoring health disparities; paying attention to scientific knowledge; investing in addressing health needs at the local level; facilitating access to health care; bolstering the infrastructure of community health workers; and generally daring to integrate social equity in policy planning by taking into account the needs of all population groups (Deslatte et al., 2020; Gadson, 2020; Gaynor & Wilson, 2020; Lynch, 2020; Martin-Howard & Farmbry, 2020).

Finally, a segment on the literature has focused on strategies for effective crisis management including leadership skills (Zahariadis et al., 2020), mobilizing societal actors and politicians, building and maintaining networks, and learning from the experience of previous crises (Grizzle et al., 2020; Schomaker & Bauer, 2020; Van der Wal, 2020).

Pandemic responses involving the subnational level of governance (especially in unitary states, but also in federal systems) have garnered less scholarly attention. Such studies have touched upon the boundaries between politics and administration from a multilevel governance lens. In their analysis of the Italian response, Malandrino and Demichelis (2020) analyze the conflictual power allocation between the central government and local authorities, finding that it resulted in misaligned adoption of contagion mitigation measures engendering uncertainty and confusion. Additionally, van Overbeke and Stadig (2020) tackle the politics of the response comparatively in Belgium and the Netherlands also as a problem of multilevel governance operationalized by the allocation of tasks, including the use of expert knowledge, across different levels of governance. They find policy cooperation to be lacking in both countries (albeit for different reasons) hindering an effective response. Finally, analyses of large federal states, namely the US and Brazil (Lima & da Cruz, 2022; Taylor et al., 2022), reveal fragmented coordination efforts and power struggles

between the federal government and states in addition to the perverse politicization of the pandemic by these countries' national leaders.

The purpose of this article is to analyze the first phase of the COVID-19 pandemic response, spanning from January to December 2020, in Sweden at the municipal level. In Sweden, this timeline encompassed the acute phase in the first part of the year, the summer interlude, and the second wave around November 2020. We lean on Hay's theorization of politics and politicization (2007) to interrogate the synergies and tensions between (local) politics and administration in Sweden. We examine the politicization of the municipal pandemic response based on the structures underpinning local policy decisions (Hay, 2007; Palonen et al., 2019). More specifically, we base our analysis on whether the municipalities utilized legislation allowing them to activate an emergency decision-making structure (the "crisis management committee") that bestows local politicians with extended decision-making powers during extraordinary circumstances. We use Hay's (2007) three analytical dimensions to explore politicization: *agency*, *deliberation*, and *social context*. We place the analysis of the arena (the locus) in which the municipal responses to the pandemic played out in order to further unpack the concept of politicization. We find a state of *conditioned politicization*, where the pandemic response decisions remained mostly in the realm of local administration vis-à-vis politics, the latter operationalized as the activated crisis management committee.

From an empirical perspective, Hay's framework complements our understanding of the boundaries and power struggles between politics and administration and, indeed, policy cooperation between the central and subnational governments. Focusing on politicization (rather than coordination) allows us to explore the dynamics within the local level of governance by parsing it from the multilevel governance system in which it is situated.

The remainder of the article is structured as follows: We first outline our theoretical assumptions, followed by the description of the Swedish case. After describing our research design, we present the results and wrap up the article with a section connecting these results back to theory and a discussion of their implications for normal policy-making and crisis management at the subnational level.

2 | THEORETICAL UNDERPINNINGS: POLITICS, (DE) POLITICIZATION, AND ADMINISTRATION

"The study of politics is the study of influence and the influential" (Lasswell, 1936, p. 1). Hay (2007) laments the fact that politics is not what it once was cracked up to be. In an era of populism, rampant mis/disinformation, and political disenchantment, open hostility toward politics is the norm—though berating political and bureaucratic institutions has been common, for example in the U.S., for decades (Goodsell, 2004). This has not always been the case, of course. The word "political" means *inter alia* "of the citizen"; the Greeks had a word for those who were not political, that is, those who did not take part in the public affairs: *idiôtes*, private individuals. This is the word that gives us "idiot" in English.

We follow Warren's (1999) definition of politics "as the subset of social relations characterized by conflict over goods in the face of pressure to associate for collective action, where at least one party to the conflict seeks collectively binding decisions and seeks to sanction decisions by means of power" (quoted in Petridou et al. (2015), p. 1). This definition dovetails with Hay's definition of politics, as "the capacity for agency and deliberation in situations for genuine collective or social choice" (Hay, 2007, p. 77).

This definition implies that politics involves choice (among competing alternatives), agency (the capacity to act), deliberation (in a public manner), and social context (a *polis* [Stone, 2002] as opposed to a private locus). Based on this, an issue becomes politicized when it becomes the subject of public deliberation contingent on human agency, when previously it was not, offering new chances for politics (Hay, 2007; Palonen et al., 2019). Both Hay (2007) and Palonen et al. (2019) note that the terms politics, political, politicization, and politicized are contested; they are loaded and contingent on the extant normative stance of those who attempt to delimit them. These terms exist in a continuum bookended by the normative, on one end, and the value-free, on the other, and have both positive and negative connotations. From a negative, normative perspective, issues become politicized when “influential actors in the political arena succeed in framing them as blameworthy violations of crucial political values” (Brändström & Kuipers, 2003, p.280). Empirically, Hardy et al. (2021) exemplify this by analyzing the politicization of fear, as well as different ideas of health behavior through a perverse manipulation of political ideology for partisan politics gain in the American context during the pandemic, while for Hart et al. (2020), the politicization of COVID-19-related communication in the media is understood as the degree that politicians were mentioned in news items in conjunction with the pandemic.

Normative dimensions of “politics” and its derivative nouns and adjectives are beyond the scope of this article. We concur with Hay (2007), who argues that (incremental) politicization of an issue presupposes its successive ascendancy from the “realm of necessity” to the “private sphere”, the “public sphere,” and finally the “governmental sphere”. The realm of necessity does not provide an opportunity for agency and public deliberation. If an issue falls under the realm of “god will provide”, then human agency and deliberation become moot. Issues moving from the non-political to the political become more or, alternatively, less politicized depending on the sphere of the political (for example, but not exclusively in the legislative branch, the executive, or the judiciary) in which they are debated, contested, framed and re-framed, and the level of divergence or conflict that characterizes this contestation. The politicization of an issue is typically underpinned by its increasing salience, the expansion of the range of actors being involved in it, and an associated polarization of the position actors hold regarding this issue (Voltolini et al., 2020). The politicization process of an extraordinary event, and the crisis that may ensue as a result, begins at the moment when it is defined and named. Such events send vague signals that must be recognized and made sense of (Boin et al., 2017; t Hart, 2014). They elevate to the political sphere as they expose not only societal vulnerabilities, but they also highlight values, qualities, and operational codes for the political system in which they occur (Olson, 2000). The answer to the question “what is going on” (begging the question “what do we do about it”) is a political act of sensemaking (Boin et al., 2017) because it entails the authoritative allocation of the values of deference, income, and safety (Olson, 2000, see also Lasswell, 1936). The question that emerges, then, is not whether an extraordinary event, such as a pandemic, becomes politicized, but rather in which part of the political sphere and to what level of contestation.

In Hay (2007), the governmental sphere is rather summarily treated as the legislative body, for example, a parliament (Palonen, 2003; Palonen et al., 2019). The discussion of what happens to an issue in the governmental sphere tends to exclude bureaucracies, perhaps because the executive branch is tasked with implementation, although the dichotomy between politics and policy formulation, on the one hand, and policy implementation and administration, on the other, is far from sharp. This is especially true in Sweden, where an extensive administration with considerable freedom is a prerequisite for the effective provision of welfare services (Ehn, 2016; Olsson & Hysing, 2012).

In this article, we unpack the “governmental sphere” at the municipal level by examining the relationship between politics and administration in the case of the pandemic response, which is often expressed as a dichotomy. This concept, including attendant theories of political control over bureaucracy (see, for example, Frederickson et al., 2012; Goodnow, 1900; Goodsell, 2004; Svava, 1994; Wilson, 1887) and polemics (see Osborne & Gaebler, 1992) as well as critiques of, and alternatives to, New Public Management (NPM) in the U.S (Denhardt & Denhardt, 2000) and elsewhere (Ehn, 2016; Garsten et al., 2015), has a long history in the field of public administration, and an extensive philosophical treatment is beyond the scope of this article. Indeed, there is no consensus among scholars as to what this “politics-administration dichotomy” actually means. The normative cornerstone and practical imperative of this relationship, especially if it is expressed in terms of a dichotomy, is that of political neutrality in the sense that the ideal type of the public administrator deals with technical issues and does not take part in policy formulation. Overeem (2005) conceptualizes the political neutrality of public administrators as not some kind of political apathy, but the idea that the administrator ultimately and in the long term is in the service of the polity and must have its best interest at heart, rather than the (short term) interest of the government in power. Having the short-term interests at the heart of one’s political masters has the potential to result in ushering partisan politics in administration. Overeem (2005) focuses his argument on the concept of “politics” rather than of “dichotomy” and concludes that although public administrators must not be involved in partisan politics, they are, and indeed must be, an integral part of the making of policy, as a component of the political. In the case of Sweden, Hall (2016) notes that the *managing by results*, NPM-inspired administrative models rely on a distinct separation between politics and administration, where politics decides and administration implements. He notes, however, that even though this distinction is paid lip service to, the reality is that the role of politicians is often reduced to formally setting broad goals without real power over the process of governing.

Of course, politicians are often generalists and rely on the professional expertise of career bureaucrats for input when formulating policy solutions. The literature on policy implementation and specifically bureaucrats at different levels (see, for example, Frisch-Aviram et al., 2018; Hysing & Olsson, 2012; Lipsky, 1980/2010; Olsson & Hysing, 2012; Petridou, 2018, 2020), points to the salience of these actors in making policy through the act of implementing it. Additionally, Petridou et al. (2021) show that the involvement of public administrators in the framing of a policy problem does not necessarily result in its technical representation. In a case study comparing two municipalities, the authors show that the engagement of a public administration in flood risk governance resulted in the issue being framed as a broad, social issue rather than a technical one.

In summary, in this case study, we examine Hay’s (2007) governmental sphere and break it down to its constituent components of politics and administration. We argue that contagion mitigation measures at the municipal level in Sweden ascended to the political sphere and therefore were subject to human agency, deliberation, and social context—in other words, they were politicized. However, we show that the main venue of decision making was administration (public administrators and experts) and not politics (politicians).

3 | THE SWEDISH CASE

3.1 | The Swedish response to the pandemic at the national level

The Swedish response at the national level has attracted attention—academic and in the media—because it diverged considerably internationally and from other Scandinavian countries

(Petridou, 2020). Despite the criticism, a recent special report found that Sweden performed consistently high in terms of sustainable governance (Petridou et al., 2021). The parliament appointed a commission of inquiry (the Corona Commission) which concluded, *inter alia*, that: (i) the response at the national level was slow; (ii) the country's pandemic preparedness was inadequate; (iii) the Swedish communicable disease prevention system and attendant legislation were not equipped to handle the extent of the pandemic, though (iv) the health-care system was able to upscale and handle the COVID-19 cases, mostly through the dedication of its employees. Finally, (vi), there are instances where lack of data hindered the monitoring of the pandemic. Having said all this, the commission found that overall, Sweden has fared better than most European countries (Coronakommission, 2021).

In 2020, contagion mitigation measures fell under the following categories: (1) travel advisories, though domestic mobility of Swedish citizens and residents was never forbidden; (2) general regulations regarding hygiene, staying home when having symptoms, and physical distancing (non-legally binding); (3) general regulations about working from home (non-legally binding); (4) general recommendations regarding online teaching at high schools and universities (non-legally binding); (5) limits on public gatherings (legally binding during a certain period); (6) limits on restaurant operations (legally binding during a certain period); (7) limits on eldercare home visits (legally binding during a certain period); (8) general regulations regarding using mass transportation (National Institute for Economic Research, 2020; Sparf & Petridou, 2021). Advice to the public [in Swedish: *allmänna råd*] was issued in a series of official documents called regulations [in Swedish: *föreskrifter*]. These regulations were not legally binding. They were a matter of soft law—in other words, they were expected to be followed but did not carry enforcement instruments (Treib et al., 2007). The remit of the municipalities was to implement, with a broad degree of discretion, the broad regulations issued by the state.

3.2 | The Swedish government model and the position of the municipalities

The Swedish Constitution (SFS, 1974: 152) and the Popular Government Model have democracy, a national parliament, and regional and local governments as focal points of sovereignty; relatively independent public administration; accountability through elections; and political parties as crucial links in the policy process.

On the national level, there is a multitude of national authorities with different areas of responsibilities. Some of the national agencies have coordination responsibilities within their specific areas of expertise, but no public agency has the power to impinge on the work of another agency. These national agencies are under the purview of different government departments, but Sweden is characterized by the absence of ministerial rule. This means that the small ministries guide the national agencies in very broad planning and policy issues, but the latter have considerable autonomy when it comes to day-to-day operations.

In Sweden, as in the Scandinavian welfare states in general, the regional and municipal authorities have a prominent position due to their responsibilities in the provision of welfare services (see Kleven et al., 2000). Therefore, the national authorities are expected to interact closely with 21 County Administrative Boards [in Swedish: *Länsstyrelsen*], representing the state at the regional level. Local and regional governments in Sweden were crucial in the welfare project as providers of social services like health, medical, child and elderly care, and education, and

physical infrastructures such as roads, water, and sewage. Health care is financed and delivered by the 21 regions, whereas primary health care is provided by municipal health-care centers. Political and democratic decision making is exercised by elected assemblies in the municipalities and the municipalities levy income tax. However, because Sweden is a unitary state, local self-government is negotiated and conditioned in the sense that local self-government can be broadened or restricted by parliamentary decisions. There is an inherent tension between national equality and local/regional self-government within this system (Montin & Granberg, 2021). On the one hand, Swedish residents shall have equal access to high-quality services regardless of where they live. On the other hand, the production and provision of public goods should be adapted to fit the local and regional needs.

Unlike in many countries, Swedish municipalities are not governed by a mayor who is also in charge of the municipal administration. Instead, the executive body of the municipality is the municipal executive board, and its chairperson (the municipal commissioner) is the political leader of the municipality. The power of that person is limited, as decisions are made collectively by the board. Conversely, the head of the administration is the leading public servant and is responsible for coordinating the entire administration of the municipality, which is chiefly responsible for the day-to-day affairs.

In practice, municipal autonomy translates into substantial freedom in the implementation of nationally mandated, legislated guidelines. When it comes to the municipal structure governing crisis management, national legislation requires that certain mechanisms be in place (SFS, 2006: 544). In this article, we investigate one such mechanism, the *crisis management committee* [In Swedish: Krisledningsnämnd]. If the severity of an extraordinary event calls for coordination and decisions beyond the jurisdiction of the municipal administration (staffed by public servants), the municipal commissioner (a politician) may activate a crisis management committee, which is an extraordinary political decision-making structure. The rationale behind this mechanism is that decisions that may concern different administrations within the municipality, for example, the school administration or the social administration, may be made centrally, efficiently, and expeditiously by the committee of politicians. This, in theory, means that the public servants, normally contributing to a large part of municipal decision making because of their technical expertise, would become more peripheral in the process. The activation of the committee is not a requirement but is at the discretion of each municipality. Municipalities may also install other temporary structures, such as task forces or other coordinating groups, consisting of public servants from relevant municipal administrations. In this article, we label such structures “special organizations”.

3.3 | Crisis management in Sweden

The Swedish crisis management system (CMS) is underpinned by three principles. The *principle of responsibility* stipulates that an actor responsible for a certain activity under normal circumstances is also responsible for that activity during a crisis. The *principle of parity* mandates that the localization and organization of activities should, as far as possible, be the same during crises as under normal circumstances. Finally, according to the *principle of proximity*, a crisis should primarily be managed where it occurs, by those who are closest to it, and at the lowest possible level of government (Regeringskansliet, 2001). Collaboration is a fourth, equally important principle, regulated in the general Administrative Procedure Act [SFS, 2017:900] (Becker & Bynander, 2017).

The CMS in Sweden is based on the notion that all crises are primarily local, regardless of their geographic or administrative scope (Becker & Bynander, 2017). This local focus is a common

feature within the Nordic region, with both responsibilities and resources largely gathered at the municipal level (Harjanne et al., 2016). The Swedish legislation, therefore, provides Sweden's 290 municipalities with considerable power over crisis management in their jurisdictions, while the county administrative boards and the national government are tasked with ensuring regional and national coordination if the management of a crisis requires it.

4 | RESEARCH DESIGN

In this article, we employ an idiographic case study research design. The aim of this research design is to “explain, interpret, and/or understand a single case study as an end in itself rather than as a vehicle for developing broader theoretical generalizations” (Levy, 2008, p. 4). In other words, our case is Sweden, though the level of observation is the subnational level of governance: its 290 municipalities. Following George and Bennett (2005, p. 5), we embark on the detailed examination of “an aspect of a historical episode” (here the municipal response to the pandemic) for the purpose of making knowledge claims regarding the (de)politicization of policy output. This is a theory-driven case study design (Levy, 2008) because we rely on existing theory to interpret our data. Following Vennesson (2012), we collected both quantitative and qualitative data.

Data were collected through a questionnaire sent to all 290 municipalities regarding the organizational measures they took as a response to the COVID-19 pandemic during the calendar year of 2020. This means that we collected no data regarding the vaccination campaign and that we did not have the benefit of hindsight that the second year of the pandemic provided in the policy response during the first year, since our data collection occurred at the end of 2020. The questionnaire was sent out in November 2020, after consultation with the Swedish Association of Local Authorities and Regions (SALAR). We sent the questionnaire to the general contact email address of each municipality requesting only one answer per municipality. We received 177 answers, yielding a response rate of 61%. The questions were mainly exploratory in nature because, in many respects, this research was uncharted territory and we did not have the vocabulary to form fixed alternatives. We sought to understand how the municipalities organized their decision-making structure in order to effectively respond to the pandemic; the responses were thus not *a priori* delineated. The majority of the responses were in text form, which we coded as part of the analysis work. This had analytical implications: the questions we posed were more suited to statistical description rather than statistical inference.

Additionally, and to gain a more detailed understanding of the municipal response, we conducted nine semi-structured interviews. We identified the nine municipalities through a purposive sampling process, based on the first round of analysis of the questionnaire data. The criteria were empirical: first, we chose municipalities on the basis of the scope, size, and composition of the special organization put in place. The second criterion concerned the dynamics and flexibility of the municipalities' response to the pandemic, which varied considerably, whereas some operated through a fixed organization throughout 2020, other municipalities' organizations shifted based on the unfolding of the pandemic. Finally, we identified a variation in municipalities' degree of structure in relation to preparedness, which ranged between municipalities with an improvised structure and others within advanced prepared plans with clearly defined criteria for different levels of crisis management. The interviews were then recorded and transcribed. We coded the interview data based on the theoretical dimensions of politicization of a question: agency, deliberation, and context.

5 | RESULTS

The overwhelming majority of the municipalities that responded to the survey (167) adopted initial measures within the first three months of 2020. These first measures were of organizational nature and aimed at creating situational awareness, preparing crisis communication, revising the general action plans for pandemics, initiating local and regional collaboration, and upscaling monitoring activities of the municipality. Most of these measures were achieved by activating an organizational structure for internal coordination and the performance of specific tasks.

Of the municipalities that responded, 16 activated the crisis management committee once and a further 28 more than once. In total, only about a quarter of the municipalities that responded activated the crisis management committee. Almost all of these municipalities activated the committee for the first time in March 2020. The main reason to activate the crisis management committee was reported to be making a specific decision. This could be a decision that spanned municipal jurisdictions or one that was time sensitive and had to be made quickly.

In the open-ended “other” option, one municipality mentioned that the reason for activation was to signal the severity of the pandemic to the public. The crisis management committees made decisions concerning operational continuity, contagion limitation, strategic direction, coordination, and staff continuity. Some examples of specific decisions were banning visits to elderly care facilities, withdrawal of alcohol licenses (as a contagion mitigation measure through the curtailing of restaurant operations) providing extra funding for certain activities, reallocating resources, shutting down certain operations, and ordering protective equipment. In some of the municipalities, the crisis committee took temporarily over (and away from the municipal administrations) the management of some operations such as elderly care, schools, technical operations (including building maintenance, water, and sewage), and social services. Notably, we did not find any statistically significant correlation between municipality attributes such as dominant political party, demographics, geography, or previous activation of the crisis management committee and the activation of the committee during the pandemic. The spatial distribution of the municipalities may point to a clustering effect suggesting intermunicipal coordination; however, the data from the survey are not adequate for any conclusive analysis (Table 1).

Conversely, 132 municipalities did not activate the crisis management committee in response to the COVID-19 pandemic, of which 102 actively considered activating the committee but chose to not do so. The main reason for this decision was that municipalities believed that the crisis management organization in place would be able to absorb the event within existing decision-making structures. Most of the responding municipalities stated that the crisis management organization briefed the politicians about the situation daily, regardless of whether the committee had been activated.

All but seven municipalities had some form of special organization in 2020 to respond to the COVID-19 pandemic. The special organizations were, however, not extraordinary structures but rather incremental adjustments of the existing organization, staffed by public servants rather than politicians. The reasons behind the special organizations can be grouped into three categories (Figure 1). The main category (striped bars) concerned coordination and strategic planning, whereas the second category (white bars) concerned general management issues and contagion mitigation. Finally, the last category (black bars) included issues related to specific operations. These reasons underpinning the emergence of special organizations are also the areas in which these special groups focused their operations during 2020.

Since municipalities are free to organize themselves, there is no standard nomenclature for these special organizations. In practice, regardless of what these groups are called, they most

commonly consist of a combination of public servants from different municipal offices. These special organizations were intended as central nodes in the municipal organization, with the specific task to coordinate decisions and actions and channel internal communication between the departments and the politicians. Fifteen of the special organizations were dissolved sometime during the year, 23 were intermittently active, and 57 special organizations were still active at the time of the survey.

The interview data complemented the questionnaire by providing depth and nuance in the three themes of politicization of an issue—agency, deliberation, and social context—in addition to shedding light on the venue of the governmental sphere where these themes were taking place, namely politics or administration.

5.1 | Agency

The premise of the municipal response was based on agency at the local level—perhaps at a higher degree than other European local governments in the sense that, as mentioned earlier, the Swedish municipalities were free to organize themselves and implement the broad national guidelines according to their local needs. The production of knowledge and learning during the response as a means of improving the situation at hand, as well as potential future crisis of similar nature, was mentioned as crucial by the informants.

In the face of the next crisis, we have to see what we did well and what we did badly ... we evaluated this over time so we can have that as a starting point when we revise our crisis management plans in the future ... We try to evaluate in the meantime here in order to remember.

(I2)

TABLE 1 Activation of the crisis management committees and decision categories

	Municipalities (in percentage)
Activation of the crisis management committee	
Activated once	9%
Activated more than once	16%
Did not activate	75%
Reasons to activate the crisis management committee	
To make a specific decision	93%
To ensure the politicians would be well informed	53%
To signal the severity of the pandemic to the public	0.5%
Other	7%
Decision categories of the crisis management committees	
Operational continuity	49%
Contagion limitation	41%
Strategic decisions	33%
Coordination	26%
Staff continuity	18%

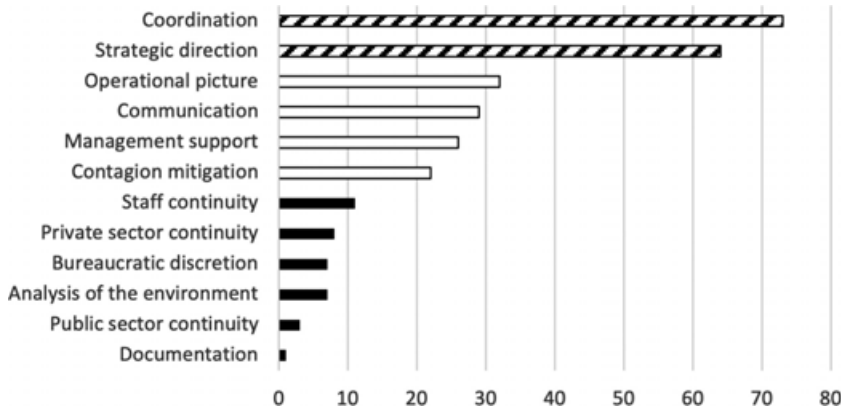


FIGURE 1 Reasons behind initiating a special organization, percentage of municipalities

The idea of policy based on evidence and expert knowledge was salient, though not unexpected because our respondents were public servants, trained to make decisions (and inform the municipal politicians) based on their expertise. The pandemic was perceived as a “knowledge event” where learning had to take place in parallel with the handling of the crisis, coupled with a lack of prior experience and preparation. Indeed, crisis plans that were in place in many municipalities played a very limited role in terms of a how-to tool, but, in some municipalities, they were deemed important as a reference document of how to organize crisis management in broad terms.

The learning process was based on interim follow-up instances, risk analyses, and documentation. The knowledge generated during the pandemic in the form of evaluations will form the basis for revising existing crisis plans, facilitating a more flexible organization to deal with pandemics and other crises that arise alongside and after the COVID-19 pandemic.

5.2 | Deliberation

During the pandemic, collaboration at the regional level took place mainly through established structures, such as regular regional management meetings, sometimes with the addition of meetings linked directly to the pandemic. The County Administrative Board’s role in the coordination between different levels was described as inefficient by the respondents. Some claimed that a lack of competence was the reason behind inefficient collaborative activities, while others believe that County Administrative Boards have had an unclear role and that this has made their work with coordination more difficult. Not all respondents were in agreement, with some respondents expressing satisfaction with the coordination activities carried out by the County Administrative Boards.

In larger municipalities, more resources were required to coordinate, and coordination entailed a greater challenge. In contrast, personnel in smaller municipalities were able to have more direct contact with each other, contributing to a fast dissemination of information and facilitating more expedient decision making. A key success factor mentioned frequently was the trust between different municipal sectors, as well as between administrators and politicians. Intermunicipal coordination was highlighted as significant as well. An overall purpose of this was to avoid confusing residents by coordinating measures promoting similar actions and avoiding sending conflicting messages by implementing conflicting measures. For example, neighboring municipalities coordinated the opening (or closing) of their respective public pools. In the same

vein, it was important that deliberating networks consisting of both internal and external actors were formalized networks rather than *ad hoc* ones. Outward-oriented coordination aimed to create conditions within the municipality to more efficiently comply with the national restrictions.

Several respondents were critical regarding the utility of crisis plans and documents, reflecting that such plans, though mandatory, were not much used in practice when managing the pandemic. “We have a lot of plans ... but we had at least identified that we had a useless pandemic plan” (I7) and “Then you can have a document with 48 pages. But you only remember one or two [pages]” (I2).

[...] I have worked for a couple of years to develop our crisis management organization and then when this crisis came with a pandemic ... it was decided that we would continue to work within the regular organization ... Our crisis management plan is based on staff work.

(I5)

Existing municipal crisis plans were of two kinds: useless documents that were drafted and put on the shelf, and plans that had been continuously revised and followed up. Often, municipal crisis plans were seen as providing structure for the setup of the crisis organization during the pandemic. The municipalities' decision making took place primarily in the regular organizations with support from various types of central crisis functions. This reduced the fragmentation of management and decision making, and a great emphasis was placed on the expertise of public servants as knowledge producers rather than on the politicians as actors in charge of the decision-making process. Having said that, several respondents stated that it was important that politicians understand and agree with decisions and the measures proposed. A salient point was that the regular municipal organization should be trusted to handle the pandemic. The respondents believed that it was important to understand the municipal organization and governance processes in order to be able to work effectively with crisis management.

Another aspect highlighted in the interviews was that activation of crisis management committees had the potential to lead to a politicization of a professional organization and, through this, a politicization of pandemic management. Notably, here, the word “politicization” takes on a negative connotation. One respondent put it this way: “There was no reason [...] to have a lot of politicians who do not have the knowledge and are not of the profession sitting there and making decisions, this would have been not good at all” (I8). Another respondent stated that it is important to place responsibility and accountability within the administration: “it is not so much a political issue as it is a management issue” (I1). At the same time, several of the respondents emphasized the importance of “bringing the politicians along”, but that the political decisions in the crisis should primarily be made on professional grounds. One of the respondents compared this with the national crisis management practice in stating that “[...] in many other countries, the issue has become more of a political issue [but in Sweden] it has to a large extent been the national specialist authorities who have made the decisions [and at the local level] the experts are allowed to take care of their own activities” (I4).

Instead, those responsible for management and coordination were often municipal directors, safety managers, safety and emergency preparedness coordinators, and heads of administrative departments. The time spent on crisis management duties varied, with many municipalities having a full-time officer, while others worked part time with crisis management. In smaller municipalities, civil servants often perform several tasks, a practice that could lead to personnel strains in protracted crisis, such as the pandemic.

5.3 | The crisis context of the pandemic

The broader context of the municipal pandemic response is, of course, the background of the unfolding crisis. A common theme emerging from the data is that the COVID-19 pandemic was viewed as a “grinding” crisis: an extraordinary event that was drawn out, requiring a steady, stable, low-intensity response with occasional spikes of increased activity. Additionally, the pandemic was a broad crisis, impacting the municipality as a whole. Some respondents argued that “firstly, this pandemic does not fit the template of a crisis, in that it has been so low intensity in some periods and higher intensity in others” (I9). Other respondents continued along the same lines and posited that the crisis management committee’s activation required extraordinary circumstances such as “after a big storm, when water distribution, electricity networks, food supply, and infrastructure would be disturbed” (I8). Another example was if the municipal organization would be hit hard in terms of “huge problems with staffing [...] even more people on sick leave and so on ... then maybe it would have been an issue” (I5). The consensus among the respondents was that the pandemic did not constitute a crisis or an extraordinary event in the sense that it threatened infrastructure or staff continuity. For these reasons, the municipalities that did not activate the crisis management committee considered it a structure unsuitable to a long, drawn-out crisis, because having a centralized, extraordinary decision-making venue comprising solely of politicians would be disruptive to the normal workflow of the municipal organization. Additionally, the public servants expressed concern for the democratic process threatened by an extraordinary structure in power for an indeterminate amount of time.

A feature of the broader crisis context was that of extreme uncertainty. Swedish municipalities had limited or no experience with a pandemic event and limited training in pandemic management, which increased their feeling of not knowing what to expect: “Because it was a new concept, pandemic was a new concept ... but now we are there, now we are in the middle of it” (I8). And “Yes, it was a lot in the beginning... we did not know what this was or how it would hit” (I5) indeed, “[...] this pandemic [...] it is protracted and you don’t know what’s coming next” (I3).

Administrators focused on flexible decision-making processes, continuous communication, information gathering, and external monitoring in their effort to reduce uncertainty. The uncertainty surrounding the pandemic was a corollary of its unpredictability regarding both the spread of the virus and the societal effects of contagion. Therefore, a key aspect of crisis management involved efforts to minimize uncertainty and work on situational updates. What is more, preparing for this type of protracted crisis was very difficult. This highlighted the question of whether it was possible at all to prepare for such a crisis: “no municipality in Sweden has ever practiced for such a long crisis... this is new to all of us” (I6).

6 | DISCUSSION AND CONCLUSIONS

In this article, we set out to unpack the municipal response to the pandemic at the municipal level in Sweden based on Hay’s (2007) dimensions of politicization: agency, deliberation, and social context. Measures to curb contagion necessarily politicize actions that are in the purview, under normal circumstances, of personal choice. The choice of whether to wash one’s hands, commute to work, stay home if having a runny nose, cover one’s nose and mouth, or simply go outside became an object of public deliberation. This public governance of one’s personal bodily space that characterized contagion mitigation measures has constituted the politicization of

these issues simply because they are deliberated in the public and governmental spheres and regulated through governmental recommendations and even legislation.

Having said that the national response in Sweden was designed to be sustainable over time. It was also a corollary of the country's administrative and legal frameworks. The Swedish contagion mitigation measures were spearheaded by the Public Health Agency of Sweden (as dictated by law, see Petridou, Sparf, et al., 2021) and communicated for the most part by an expert public servant at the higher echelons of that agency. Concomitantly, the constitution offers no provisions for the declaration of a state of emergency during peacetime, while impinging on the autonomy of the municipalities is politically sensitive (Petridou, 2020). The final statement of the Corona Commission, though it praised the substance of the Swedish pandemic responses, criticized what it perceived as a lack of political leadership—in essence, the critique was leveled against the inadequate politicization of the policy response, which was solely based on the views of public administrators and experts.

Conversely, at the subnational level, the law provides for an extraordinary decision-making structure during peacetime emergencies. However, we saw that most municipalities chose to not make use of it. The municipalities, for the most part, chose to stay within the boundaries of their administrative capacity. We call this “conditioned politicization” to reflect the predominance of administration following normal policy-making processes.

We offer the following two explanations for this. First, the pandemic response regime at the local level mirrored the response that played out at the national level. Just as the national politicians stayed in the background, so was the case at the local level as well. This is an articulation of Swedish path dependency and political sensibilities privileging technocratic and evidence-based solutions. At the same time, a dialectic relationship, based on high trust between public servants and politicians facilitated by communication, characterized the interface between politics and administration at the local level. Again, echoing the national level, local politicians were satisfied with the public servants being at the forefront of decision-making processes, partly because this would provide more distance between them and any less popular decisions. Indeed, we argue that protracted reliance on an extraordinary decision-making structure would raise democracy issues. This is because the politicians, by taking over crisis management, would be exercising centralized power over the public servants, impinging on their professional domains. The involvement of politicians in operative decision-making processes risks disturbing the system rather than supporting it. In that sense, the flexibility of crisis management organization at the local level was pragmatic in the sense that it was elastic and allowed for work-arounds (through the creation of a special organization) and a multitude of approaches rather than a one-size-fits-all approach in a country that is otherwise quite diverse.

Second, and following the first point, the crisis management committee is a temporary solution to an extreme situation. However, the pandemic, as extreme as it is in conceptual terms, was not considered extreme in operative terms. Municipalities realized that this was a situation that was going to last for some time and the temporary crisis management committee solution was not considered by many a good fit. Additionally, and beyond the eldercare acute situation during the first phase of the pandemic response in the first part of 2020, municipalities did not experience the pandemic as a continuous acute event, and based on this did not see the purpose of activating the crisis management committee. We must note here that there seem to be inherent tensions in the Swedish crisis management system. On the one hand, the principles outlined earlier in this article promote a system where crises are to be absorbed in the most local, most ordinary structures as possible, avoiding extraordinary structures as much as possible. On the

other hand, the legislation provides for emergency structures. Indeed, our informants conceptualize a resilient crisis management system as one that is robust enough to absorb disturbances without changing its organization. Given this deep-seated rationale, it is not surprising that the crisis management committee arrangement is reserved for circumstances that are perceived as truly extraordinary by public servants.


Consequently, we may conclude that the long-term handling of the pandemic at the municipal level does not constitute acute crisis management or perhaps, not crisis management at all. Rather, the lines of crisis management and business-as-usual blur. At an age where consequences of climate change occur more often and indeed become routinized, the future of normal policy-making (policy formulation as well as implementation) might involve an integral component of crisis management. If that is the case, then, we need to consider the threshold for the activation of emergency procedures—at all levels of governance, a kind of conditioned politicization of issues.

CONFLICT OF INTERESTS

The authors report no conflict of interest.

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How to cite this article: Sparf, J., Petridou, E., Granberg, M., Becker, P., & Onn, B. (2022). Pandemic responses at the subnational level: Exploring politics, administration, and politicization in Swedish municipalities. *European Policy Analysis*, 8, 327–344. <https://doi.org/10.1002/epa2.1151>