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Seraphine F. Maerz, Anna Lührmann,  
Jean Lachapelle, Amanda B. Edgell

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Please address comments and/or queries for information to:

V-Dem Institute  
Department of Political Science  
University of Gothenburg  
Sprängkullsgatan 19, PO Box 711  
SE 40530 Gothenburg  
Sweden  
E-mail: [contact@v-dem.net](mailto:contact@v-dem.net)

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# Worth the sacrifice? Illiberal and authoritarian practices during Covid-19\*

Seraphine F. Maerz  
Assistant Professor  
V-Dem Institute

Anna Lührmann  
Associate Professor  
V-Dem Institute

Jean Lachapelle  
Postdoc  
V-Dem Institute

Amanda Edgell  
Assistant Professor  
University of Alabama

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## **Abstract**

Excessive use of emergency powers and limitations of media freedoms have raised concerns that Covid-19 is infecting democracy itself. How do government responses to Covid-19 violate democratic standards? How do such violations relate to the countries' success in limiting the Covid-19 death tolls? We propose a novel conceptualization of which government responses to Covid-19 qualify as a violation of democratic standards and measure such violations using a regularly updated dataset covering 143 countries from March 2020 onward. Our data track seven types of violations of democratic standards for emergency measures during the Covid-19 pandemic: discriminatory measures, derogation of non-derogable rights, abusive enforcement, no time limit on emergency measures, disproportionate limitations on the role of the legislature, official disinformation campaigns, and restrictions on media freedoms. In this article, we provide a comprehensive overview of the extent to which governments have violated democratic standards in their response to Covid-19. Using a regression analysis, we find no relationship between violations of democratic standards for emergency measures and Covid-19 death rates. Thus, violations of democratic standards during the Covid-19 pandemic cannot be justified by the achievement of better public health outcomes. Rather, such crisis-driven violations need to be carefully observed as they could signal autocratization.

# 1 Introduction

Violations of democratic standards by several governments - such as excessive use of emergency powers and limitations of media freedoms - have raised concerns that the Covid-19 pandemic could "infect" democracy itself. This potential for pandemic backsliding is particularly worrisome in light of the current global trend toward autocratization (Lührmann and Lindberg, 2019; Maerz et al., 2020). Yet, those who violate democratic standards of emergency measures often do so by invoking protection of human life, suggesting that during crises, normative preferences for life should outweigh democratic principles. For example, President Rodrigo Rao Duterte of the Philippines has called for the police to use lethal force against individuals who violate virus-related restrictions (Gregorio, 2020). He later justified drastic measures in the name of human life, stating:

"When the pandemic struck, I decided to prioritize life over other considerations. According to experts, the interventions that the government had put in place prevented as much as 1.3 to 3.5 million infections. To me, even if the numbers were much lower, it would still be and would have been worth the sacrifice[s] we made (Duterte, 2020)."

Likewise, Hungarian Prime Minister Viktor Orbán argued for legislation that gave him virtually unchecked authority by saying: "Everyone has to leave their comfort zone. This law gives the government the power and means to defend Hungary" (Kakissis, 2020). And in the beginning of the pandemic, it seemed that several closed autocracies - China, Singapore, and Vietnam - were particularly effective in addressing the virus (Diamond, 2020; Yamey and Jamison, 2020).

The comparison between autocracies and poor performing democracies like the United States raises questions about whether democracy is a liability during pandemics and similar crises. During normal circumstances democracies have a comparative advantage at providing public goods that improve health outcomes (Besley and Kudamatsu, 2006; Wang et al., 2019). However, early evidence from the Covid-19 pandemic shows no correlation between democracy and Covid-19 related deaths (Bosancianu et al., 2020; Cepaluni et al., 2020). Yet, as Cheibub et al. (2020) find, "when the threat of death became sufficiently severe, many democracies resorted to the same measures as autocracies." This suggests that democratic violations occur in dictatorships and democracies like, confounding analyses of how levels of democracy correlate with mortality rates.

How do Covid-19 responses violate democratic standards? How do these violations of democratic standards relate to the countries' public health outcomes? This paper addresses these questions and thereby offers four contributions: First, we conceptualize how governments violate democratic standards with their response to the Covid-19 pandemic. Second, we present a new dataset on government responses to Covid-19 that covers 143 countries from March 2020 onward. Third, we provide a comprehensive overview of the extent to which governments have violated democratic standards in their response to Covid-19. Finally, we test the relationship between those violations and the countries' death tolls.

We find that while most violations of democratic standards for emergency measures during the Covid-19 pandemic occurred in autocracies, also some democracies are affected. This suggests that authoritarian and illiberal practices, even if temporary, become more prevalent during times of crises. Moreover, we find no evidence that restrictive and potentially disproportionate emergency measures are necessary to achieve better public health outcomes. Autocrats like Duterte and Orbán would have us believe that a trade-off exists between democracy and human life. However, governments that violated democratic norms do not seem to perform better on Covid-19 related mortality once demographic factors are taken into account. Rather, these violations need to be closely monitored as crisis-driven violations of democratic standards could have long-term effects on the quality of democracy.

The paper is structured as follows: First, we review previous literature on autocratization, crises, and Covid-19 government emergency responses. Second, we conceptualize seven ways of how democratic standards are violated during crises such as the Covid-19 pandemic. Third, we introduce and discuss our dataset. Finally we analyze the relationship between our new index on violations of democratic standards and Covid-19 mortality rates. We conclude with a discussion of our findings and an outlook on future research.

## 2 Autocratization during crises and Covid-19 government responses

Autocratization - meaning any substantial decline of democratic regime traits (Lührmann and Lindberg, 2019) - has become a prevalent concept in the literature on political regimes. It is an umbrella term covering backsliding in democracies as well as democratic breakdown and autocratic regression (Maerz et al., 2020). Recent studies illustrate that during the current "third wave of autocratization" the process of democratic deterioration happens much more gradually than during earlier waves of reversal (Lührmann and Lindberg, 2019) and typically involves restrictions of media freedoms and civil society as first steps towards more authoritarian ways of ruling (Maerz et al., 2020). However, the literature remains equivocal about when and where crises - such as the fulminating Covid-19 pandemic - will accelerate autocratization. Exceptions are Lührmann and Rooney (2020) who illustrate that democracies are more likely to decline under a state of emergency or Windsor et al. (2015) who analyze how autocratic leaders rhetorically (over)react to suddenly appearing natural disaster crises.

Do temporary but potentially disproportionate emergency responses such as overly strict limitations of the freedom of assembly, unjustifiable curtailments of media freedoms, or official disinformation campaigns by the government automatically accelerate autocratization at large? What does "disproportionate" mean in the context of democracy, and how do we measure these "temporary" violations of democratic standards? Such pressing questions point to the general need for more fine-grained theories on the relationship between autocratization and crises. More specifically there is a need to conceptualize and measure the ways that governments can violate democratic standards during crises such as the Covid-19 pandemic.

A growing number of research projects investigate government responses to Covid-19. The International Institute for Democracy and Electoral Assistance (IDEA), for example, has a global monitor of Covid-19's impact on democracy and human rights (IDEA, 2020), including elections, checks on the government, fundamental rights, participation, and impartial administration, which it uses to flag countries as either concerning or potentially concerning. Sebhathu et al. (2020) and Cheibub et al. (2020) focus on restrictions of movement and assembly like lockdowns and school closures, finding that stronger democracies are more hesitant to initiate such policies. A policy-focused, largely hand-coded dataset by Cheng et al. (2020) offers a detailed source of information on the actions governments are taking in response to the Covid-19 crisis, such as the level of government acting, the geographical areas and groups targeted, and the timing of specific policy responses. Similarly, the Oxford COVID-19 Government Response Tracker (OxCGRT, Hale et al., 2020) collects Covid-19 related policy information on containment and closure (e.g. school closings, workplace closings, and stay-at-home requirements), economic responses (e.g. income support and dept relief), and health systems (e.g. testing policy and contact tracing). These and other more general political and social measures (cf. Bosancianu et al., 2020) can be used as explanatory variables to analyze Covid-19 outcomes such as infection and death rates.

The burgeoning Covid-19 research agenda offers valuable sources of information during the highly uncertain global pandemic. However, none of these projects conceptualizes or measures how government responses to Covid-19 violate democratic standards. Observing such violations of democratic standards during crises is crucial since they can be early-warning signs of a looming and ongoing trend of autocratization. This is especially true for those as-

pects of democracy that typically deteriorate first, such as media freedoms (Maerz et al., 2020) or the tone and accountability of official communication (Maerz and Schneider, 2019; Schedler, 2019). As a result, we still know very little about how such violations vary across countries and regime types. Lastly, there is also a gap in our knowledge regarding the relationship between such violations and public health outcomes. In other words: Can governments legitimize such violations by referring to lower infection and death rates compared to countries with less strict emergency responses? Or are these disproportionate measures simply used as a camouflage to usher in authoritarianism without any real benefits in mitigating the actual crisis?

### 3 How do Covid-19 government responses violate democratic standards?

What does it mean to respect democratic standards during an emergency? As highlighted by United Nations Experts (2020) at the beginning of the crisis, government responses must be "proportionate, necessary and non-discriminatory". This notion builds on international human rights law - most prominently the International Covenant on Civil and Political Rights (ICCPR, 2020), which has been ratified by 173 states. The ICCPR states in Art. 4 that countries may derogate from some rights when *necessary* (during a "time of public emergency which threatens the life of the nation", ICCPR, 2020). A derogation is the suspension (Hafner-Burton et al., 2011), deviation (Richards and Clay, 2012), or elimination (McGoldrick, 2004) of a legal obligation - in this case commitments to honor political and civil rights. The ICCPR (Art. 4) also places clear limitations on such derogations, including that they must be *proportionate* ("strictly required by the exigencies of the situation") and *non-discriminatory*. Furthermore, the UN Secretary General needs to be notified of the derogation (ICCPR, 2020; UN Human Rights Committee, 2001; McGoldrick, 2004; Ellena and Shein, 2020).

Thus, based on international human rights law, emergency measures may alter democratic institutions, rights, and proceedings only within certain boundaries. For example, while responses to Covid-19 may ensure physical distancing by restricting freedom of movement and assembly, they may not infringe on certain non-derogable rights like the right to life or freedom from torture. For that reason, unlike some recent studies (Cheibub et al., 2020; Sebatu et al., 2020), we do not consider the derogation or limitation of movement or assembly rights (e.g. lockdowns, school closures, and workplace closures) as violations of democratic standards, unless these measures are considered disproportionate, discriminatory, or abusively enforced. To provide a conservative assessment, we conceptualize only those practices as violations of democratic standards if they are relatively unambiguously disproportionate, non-necessary, or discriminatory. We also do not count the postponement of elections as a violation of democratic standards, as it is not always clear how elections and campaigns can or should be safely organized during the pandemic.

Further, we draw on the conceptualization of Glasius (2018) on authoritarian and illiberal *practices*, which may appear in all regime types. This framework allows us to capture malpractices during the Covid-19 pandemic in established democracies and autocracies alike. Specifically, Glasius (2018) proposes two distinct but overlapping categories: *authoritarian practices* harm democracy by disabling access to information and disabling voice and thus sabotaging accountability, which is fundamental to democracy; and *illiberal practices* are primarily a human rights problem since they infringe personal autonomy and dignity. The intersection between both categories includes all practices that simultaneously undermine accountability and infringe on personal autonomy and dignity.

Building on the ICCPR (2020) and the Glasius (2018) framework, we identify seven types of violations of democratic standards for emergency measures during the Covid-19 pandemic

which are neither mutually exclusive nor collectively exhaustive.<sup>1</sup> Figure 1 illustrates these seven types of illiberal and authoritarian practices during the Covid-19 pandemic.

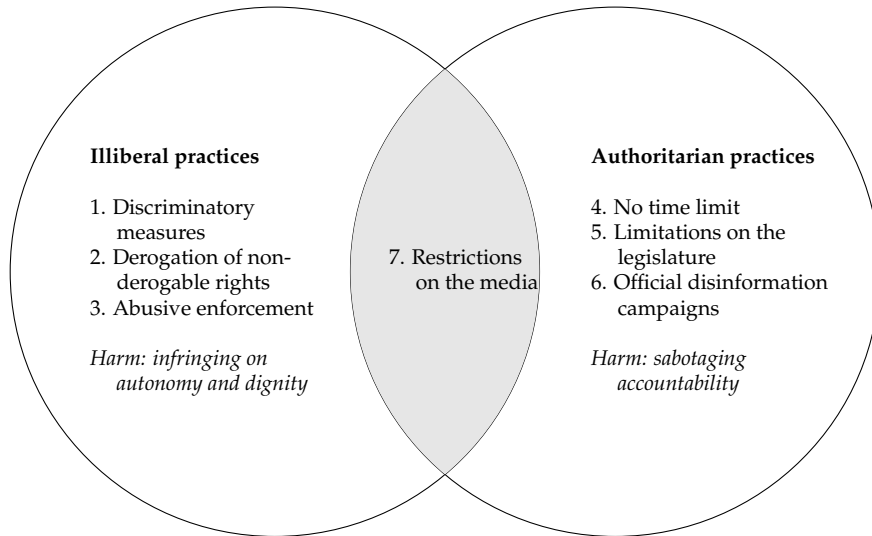


Figure 1: Violations of democratic standards for emergency measures conceptualized as illiberal and authoritarian practices based on Glasius (2018)

### 3.1 Illiberal practices: Infringements on personal autonomy and dignity

*Type 1 (discriminatory measures):* The ICCPR (Art. 4) explicitly states that emergency measures should not “discriminate solely on the ground of race, colour, sex, language, religion or social origin.” Therefore, we conceptualize discriminatory measures as an illiberal practice in violation of democratic standards because this infringes on autonomy and dignity. In light of recent trends, we also consider discrimination on the basis of sexual orientation because this cannot occur without also accounting for the individual’s sex (e.g. Gorsuch, 2020).

*Type 2 (derogation of non-derogable rights):* The ICCPR (Art. 4) notes several (non-derogable) rights that governments may never violate. These include: the right to life (Art. 6); freedom from torture and “cruel, inhuman or degrading treatment or punishment” (Art.7); freedom from slavery (Art. 8); freedom of thought, conscience, and religion (Art. 18); and three ICCPR clauses pertaining to the rule of law 4 (Art. 11, Art., 15 and Art. 16).<sup>2</sup> Both in academia and international law, violations of these non-derogable rights are not considered as legitimate, even during times of crisis (McGoldrick, 2004; Criddle and Fox-Decent, 2012). Therefore, we count any de-jure breach of these legal obligations as another illiberal practice that violates democratic standards for emergency responses.

*Type 3 (abusive enforcement):* A key element of a proportionate government response is that measures are not enforced in an abusive way, for instance through police brutality (Callamard, 2020). Abusive enforcement infringes on autonomy and dignity and runs counter to the notion that states have an obligation to guarantee subjects “secure and equal freedom” (Criddle and Fox-Decent, 2012). It is difficult to imagine any circumstance where excessive force aligns with the principles of necessity and proportionality (Franck, 2010; McGoldrick, 2004), which is why

<sup>1</sup>As discussed above, there may be additional violations of democratic standards that are highly context-specific, for example, the unnecessary postponements of elections or disproportionate limitations of movement or assembly.

<sup>2</sup>These are the ICCPR articles in detail: *Article 11*: “No one shall be imprisoned merely on the ground of inability to fulfill a contractual obligation”; *Article 15*: “No one shall be held guilty of any criminal offense on account of any act or omission which did not constitute a criminal offense, under national or international law, at the time when it was committed”; *Article 16*: “Everyone shall have the right to recognition everywhere as a person before the law”.



we conceptualize abusive enforcement here as a third illiberal practice that violates democratic standards of emergency responses.

### 3.2 Authoritarian practices: Sabotaging accountability

*Type 4 (no time limit on emergency measures):* While the ICCPR does not explicitly mention the need for a time limit on emergency measures, such provisions are commonly considered necessary to fulfill the spirit of the ICCPR (Council of Europe, 2020; Ellena and Shein, 2020; Cormacain, 2020; Ponta, 2020; Venice Commission, 2016). The ICCPR (Art. 4) calls for emergency measures to be "strictly required by the exigencies of the situation". The UN Human Rights Committee in its General Comment on the ICCPR has noted that this requirement refers to the "duration, geographical coverage and material scope" of emergency measures (UN Human Rights Committee, 2001, emphasis ours). Thus, the comment clarifies that "[m]easures derogating from the provisions of the Covenant must be of an exceptional and *temporary* nature" (UN Human Rights Committee, 2001, emphasis ours). The inclusion of an explicit end date in the legal document that initiates the emergency measures is the most effective way of ensuring that they do not persist beyond the time period they are needed (Ackerman, 2004; Cormacain, 2020). If emergency measures are arbitrarily and unnecessarily prolonged they disable voice and thereby sabotage accountability. Therefore, we conceptualize the failure to include an end date as an authoritarian practice in violation of democratic standards.

*Type 5 (disproportionate limitations on the role of the legislature):* When emergencies such as the Covid-19 pandemic unfold, it is crucial that governments respond efficiently. As a result, the normally time-consuming debates and procedures of legislatures may seem too slow. For this reason, emergencies are often considered as the "hour of the executive" (Stelzenmueller, 2020). However, many national legislatures have demonstrated ingenuity in their capability to continue to legislate effectively during crises (Democracy Reporting International, 2020). For instance, the German parliament has met regularly throughout the Covid-19 pandemic, but with a lower quorum requirement. In Uganda, the national legislature is meeting outdoors to ensure social distancing. Many other legislatures have implemented remote debate and voting procedures. Therefore, we consider the adjournment or dissolution of a legislature in the pandemic to be an authoritarian practice in clear violation of democratic standards (Bar-Siman-Tov, 2020; Petrov, 2020). Similarly, vague formulations in emergency laws giving the government the ability to rule by decree on issues exceeding Covid-19 related issues are seen as problematic (Ackerman, 2004; Petrov, 2020) since they also have the potential to sabotage accountability.

*Type 6 (official disinformation campaigns):* We also consider the dissemination of gravely misleading and false information by governments on key facts about Covid-19 - such as what it is, how it is transmitted, or how it can be treated or cured - as an authoritarian practice. The deliberative principle of democracy implies that political leaders maintain a reason-based and respectful dialogue with the public (Habermas, 1984; Coppedge et al., 2011; Lührmann et al., 2019). Spreading false information on Covid-19 runs counter to this principle. While some (minor) misreporting may be unintentional, broader disinformation campaigns on Covid-19 disseminated or supported by government officials systematically hinder the public to access fact-based information and is therefore an authoritarian act of sabotaging accountability.

### 3.3 Restrictions on media freedoms: the intersection of illiberal and authoritarian practices

*Type 7 (restrictions on media freedoms):* It is difficult to imagine a situation where a general restriction of media freedom is necessary and proportionate to limit the spread of Covid-19. On the contrary, a free press may help to ensure that the government efficiently responds to the

crisis. The media has a watch-dog function through investigating and reporting about government actions, which may push governments to prioritize public health outcomes (Barnes et al., 2008). Furthermore, they disseminate crucial information about the virus to the broader population (Chan et al., 2018; Habersaat et al., 2020). Therefore, we count limitations of media freedoms as a violation of democratic standards which infringes on autonomy and dignity, hinders access to information and disables voice. As illustrated in Figure 1, such restrictions of the media are a combination of illiberal and authoritarian practices. A free media is important for countering government disinformation (e.g. the US, Brazil), whereas in countries with heavily restricted media (e.g. Turkmenistan) disinformation is left uncontested. In some countries, governments justify limits on the media to stop the spread of disinformation, which could genuinely be necessary to ensure that the population obtains correct information about the virus and follows public health guidelines. However, such provisions aimed at limiting the spread of disinformation need to be specific and narrowly formulated to avoid abusive enforcement which may infringe media freedom beyond what is strictly necessary.

### 3.4 The Pandemic Democratic Violations Index (PanDem)

Based on these seven types of violations, we developed the Pandemic Democratic Violations Index (PanDem) to assess the extent to which state responses to Covid-19 contravene democratic standards through authoritarian and illiberal practices. For each of the seven types, countries score between 0 (no violation) and 3 (severe violation) points. We then add the scores and rescale the index on a 0 to 1 range.<sup>3</sup>

One strength of the PanDem Index is that it accounts for a broad variation of violations of democratic standards for emergency measures: On the one side, the conceptualization of several illiberal practices during the Covid-19 pandemic such as discriminatory measures or abusive enforcement captures governments with overly restrictive measures that violate human rights. On the other side, our index also addresses governments at the other extreme that fail to respond efficiently to Covid-19 and spread disinformation campaigns, or even publicly deny the existence of the virus in the first place.

## 4 An empirical overview on the varieties of violations

In June 2020, a team of five research assistants collected data on violations of democratic standards during the Covid-19 crisis for 143 countries with populations over 2 million.<sup>4</sup> V-Dem (Coppedge et al., 2020a; Pemstein et al., 2020) regional managers and volunteer V-Dem affiliated researchers cross-checked their answers for 37% percent of countries. We (the PIs) cross-checked most cases where country/regional managers were unavailable or declined to participate. The Pandemic Democratic Violations (PanDem) dataset and coders' written justification for each coding decision along with a list of sources are publicly available on GitHub.<sup>5</sup> This article uses version 3 of the dataset, which covers the period from 11 March to late June 2020.

The PanDem Index reveals several patterns in how governments responded to the Covid-19 crisis that are not apparent in other datasets (Figure 2).<sup>6</sup> First, violations of democratic

<sup>3</sup>For more details see Edgell et al. (2020).

<sup>4</sup>In v3 of the Pandemic Democratic Violations (PanDem) dataset, we also include data from Libya, North Korea, and Syria. Upon further inspection, we find that there is insufficient information to properly determine the extent of democratic violations in these cases. Therefore, we omit them from the analysis here and will provide an update in v4.

<sup>5</sup>The data is available here: <https://github.com/vdemstitute/pandem>. The codebook is available here: [https://github.com/vdemstitute/pandem/blob/master/codebook/pandem\\_codebook.pdf](https://github.com/vdemstitute/pandem/blob/master/codebook/pandem_codebook.pdf).

<sup>6</sup>For illustrative purposes, we present the data in this map using an ordinalized version. The data naturally cluster due to the ordinal nature of the input scales for types of violations. Specifically, as shown in Figure 6, we

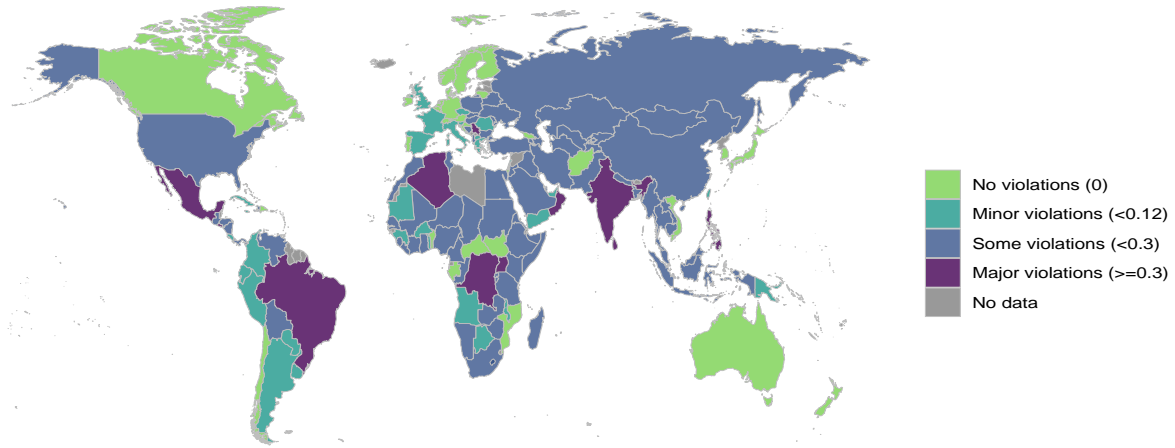


Figure 2: Pandemic Democratic Violations Index (PanDem, v3)

norms are widespread: 83 of the 143 countries engaged in at least some violations of democratic standards ( $\text{PanDem} \geq 0.12$ ). Governments in 11 countries have made major violations of democratic standards ( $\text{PanDem} \geq 0.30$ , or 30% of the scale). Several of these countries harm human dignity through illiberal practices, including discrimination against minorities in Oman, Serbia, and Sri Lanka; violations of non-derogable rights in El Salvador, Philippines, Sri Lanka; and abusive enforcement in Uganda. Others engage in authoritarian practices that sabotage accountability, including the absence of a time limit in Brazil, Oman, and Uganda; restrictions on the role of the legislature, e.g. dissolution or suspension in India and D.R. Congo; and disinformation campaigns such as in Brazil, Algeria, Serbia, Mexico, and D.R. Congo. Finally, with the exception of Sri Lanka, all these cases saw severe restrictions of the media as a result of the government’s response to the pandemic.

Second, we observe democratic violations in dictatorships and democracies alike, with a high degree of heterogeneity within and across regime types. For example, while the PanDem index is negatively correlated with V-Dem’s (Coppedge et al., 2020a) Liberal Democracy Index (LDI) in 2019, the magnitude of the Pearson-r coefficient is only  $-0.40$ , suggesting a weak association at best. As shown in Figure 3, when fitting a loess curve through the observed values for the LDI in 2019 and the PanDem Index, the negative association holds for cases at or above 0.50 on the LDI, what we might consider the democratic end of the spectrum. For regimes scoring below 0.5, differences in LDI scores appear to have no association with democratic violations during the pandemic. Yet, heterogeneity persists across this 0.5 cutpoint, as shown by the plotted observed values.

Third, the types of violations do not strongly correlate with each other (see Table 1). The Pearson-r correlation coefficients are smaller than 0.27 in absolute value across all types (the largest correlation occurs for media restrictions and official disinformation campaigns). A Kaiser, Meyer and Olkin (KMO) test gives an overall measure of sampling adequacy of 0.49, which is below the conventional threshold for factor analysis. This result provides empirical support for our choice of a seven-fold conceptualization of democratic violations. In other words, we find a great deal of heterogeneity in violations of democratic standards during the crisis. Moreover it constitutes further evidence that the PanDem index captures more than simply the level of democracy.

Finally, violations associated with illiberal practices are observed less often than those as-

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empirically observe only 11 unique values on the PanDem Index, naturally giving rise to the cutpoints used in Figure 2.

sociated with authoritarian practices. Figure 4 illustrates this variation. Among illiberal practices, we observe de-jure discriminatory measures in ten countries and derogation of non-derogable rights in just six cases. For instance Bulgaria imposed discriminatory measures in Roma communities (Amnesty International, 2020), and Panama adopted discriminatory gender-based restrictions for quarantine (Ministry of Health Panama, 2020). Meanwhile, security forces in El Salvador violated the non-derogable right to no conviction for a crime which was not a crime at the time of commitment (Article 15, Human Rights Watch, 2020) when they detained hundreds of people for quarantine-related infractions despite a supreme court ruling that such detentions were illegal. Abusive enforcement is also uncommon, being observed often or widespread in only four countries (Uganda, Kenya, Nigeria, and South Africa).

By contrast, authoritarian practices are much more frequent. Twenty-two countries had ongoing emergency measures without an official time limit, spanning most major geopolitical regions and including democracies and autocracies (e.g. Bosnia and Herzegovina, Cambodia, Ivory Coast, and the United States).<sup>7</sup> In twenty-eight countries, the legislature’s ability to hold the executive accountable is severely undermined.<sup>8</sup> For instance, Eritrea and Zambia have adjourned parliament without a timetable for resuming activities (Jere, 2020). In other cases, like Hungary and Ghana, new legislation provides the executive with broad powers to rule by decree, which could be interpreted beyond actions directly related to the pandemic due to vague formulation. Finally, active government disinformation campaigns appear in 14 cases - including high profile examples like Trump in United States and Bolsanaro in Brazil, as well as other prominent denialists like Nkurunziza in Burundi<sup>9</sup> and Berdimuhamedov in Turkmenistan.

<sup>7</sup>Hungary and Panama initially did not adopt a time limit, but have since removed their emergency measures. Therefore, we code these as minor violators on this type.

<sup>8</sup>This also includes countries where no legislature existed prior to Covid-19, such as Saudi Arabia and Haiti.

<sup>9</sup>After being replaced by his chosen successor in the May 2020 elections, Nkurunziza died unexpectedly on 08 June 2020. While official cause of death is a heart attack, many suspect that this resulted from Covid-19 complications (The Economist, 2020; Burke, 2020).

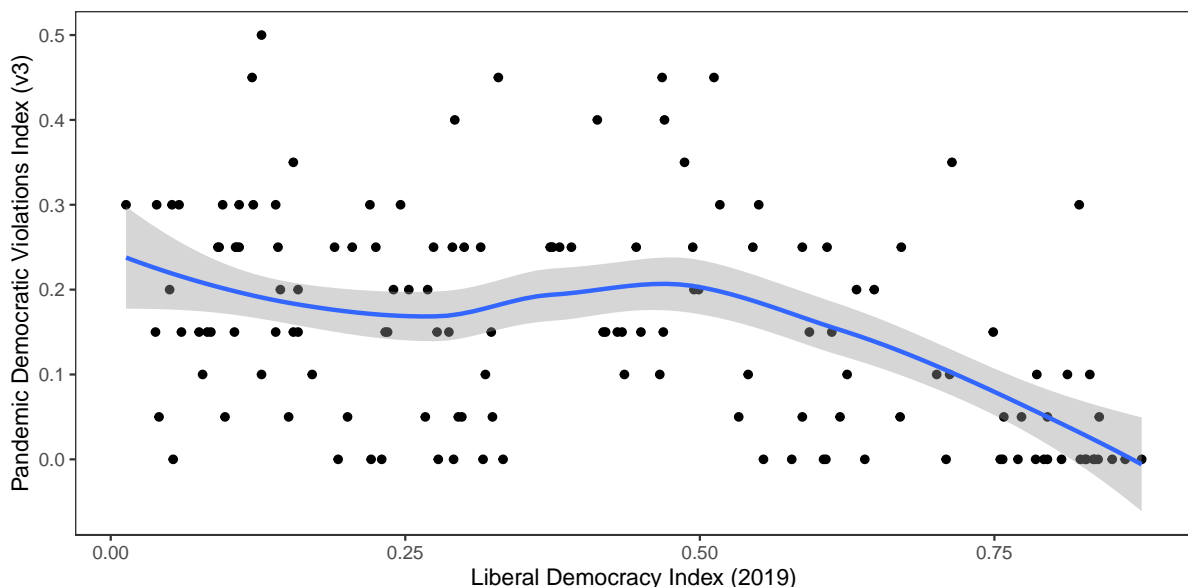


Figure 3: Pandemic Democratic Violations Index (v3) and the V-Dem Liberal Democracy Index (LDI) in 2019 (v10). Observed values with a linear fit and 90% confidence intervals using a loess smoothing function.

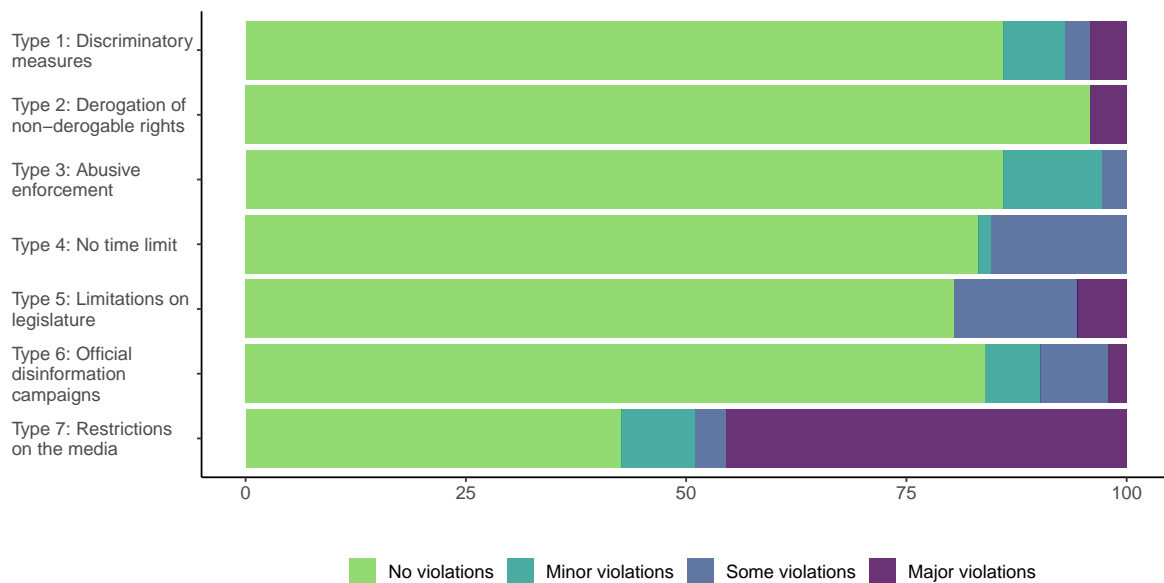


Figure 4: Percentage of countries experiencing each type of violation of democratic standards for emergency measures (based on PanDem v3)

At the intersection of illiberal and authoritarian practices, we observe restrictions on the media most often among the seven types of violations of democratic standards for emergency measures. Sixty-six countries register major violations by restricting the flow of information or engaging in harassment of journalists. For example, in Belarus a journalist was detained for publishing an article that questioned official Covid-19 statistics (Reporters Without Borders, 2020a). And in Tanzania, the government has shut down several news outlets, jailed journalists, and denied access to vital information about the pandemic to both media and the WHO (Committee to Protect Journalists, 2020). Many of these countries also engage in disinformation campaigns. Indeed, all 14 cases where the government often or almost always deviates from official WHO information on Covid-19, the media also faces major restrictions on reporting during the pandemic. In other cases where media restrictions have been imposed, restrictions on the legislature are most common (n=19).

In sum, the PanDem data provides several insights about how countries violate democratic standards for emergency measures during Covid-19. Most countries have engaged in some form of violation, including several democracies, yet there is also tremendous heterogeneity in the violations observed within cases. Moreover, our data suggests that authoritarian practices designed to sabotage accountability through indeterminate states of exception, limitations on the legislature, government disinformation, and restricted access to information are more common during Covid-19 than illiberal practices that undermine human dignity through discrimination, derogation of non-derogable rights, and abusive enforcement.

## 5 How do the violations of democratic standards relate to public health outcomes?

Are the violations of democratic standards we observe above justified, as they often are by governments, in the name of human life? In this section, we test for the relationship between violations of democratic standards for emergency measures and death rates during the Covid-19 pandemic. To do so, we regress deaths per million (logged) as of 04 August 2020 on the Pan-

Dem data from June 2020 (v3). We also include a set of control variables identified as relevant through a Lasso procedure by another research team (Bosancianu et al., 2020).<sup>10</sup> Specifically, we account for the state’s healthcare system capacity (using health expenditures per capita and an index of health data quality) and overall health of the population (using the share of the population over 65 years, respiratory disease prevalence, and life expectancy), which are the most likely confounders for Covid-19 mortality. We also control for level of democracy in 2019 using the V-Dem Liberal Democracy Index (LDI, Coppedge et al., 2020a), to ensure our models capture correlations independent of existing conditions for civil liberties and executive accountability prior to the pandemic. Because our data cover the period from 11 March 2020 (when the WHO declared a global pandemic) to late June 2020, our measures for democratic violations have about a one-month lag over the death count.<sup>11</sup>

Our main results are presented in Figure 5, which plots the standardized and conditional standardized coefficients with their 90% confidence intervals from bivariate and multivariate ordinary least squares linear regressions (full results are presented in Table 2 of the Appendix). In the bivariate model, the PanDem Index shows a statistically significant negative correlation (at the 90% level) with logged deaths per million. However, once we control for a set of relevant structural conditions related to the regime, the healthcare system, and the health of the population, democratic violations no longer exhibit any statistically significant correlation with deaths from Covid-19. We also test for whether certain types of violations are associated with decreased mortality. Restrictions on the media is the only type of violation that appears significant at the 90% level in the bivariate model (see Table 3 in the Appendix). Again, this result disappears once we control for relevant, independently chosen confounders (see Table 4 in the Appendix).

From the control variables, which we based on work by Bosancianu et al. (2020), we find

<sup>10</sup>Our outcome variable and all controls come directly from the Bosancianu et al. (2020) replication files, version 04 August 2020. This independent selection of covariates is intentional, as we seek to avoid potential confirmation bias that could result from self-selecting model specifications.

<sup>11</sup>Research suggests that case rates often lag behind death rates by 2-8 weeks, putting our data on emergency measures at about the midpoint for this lag (Testa et al., 2020).

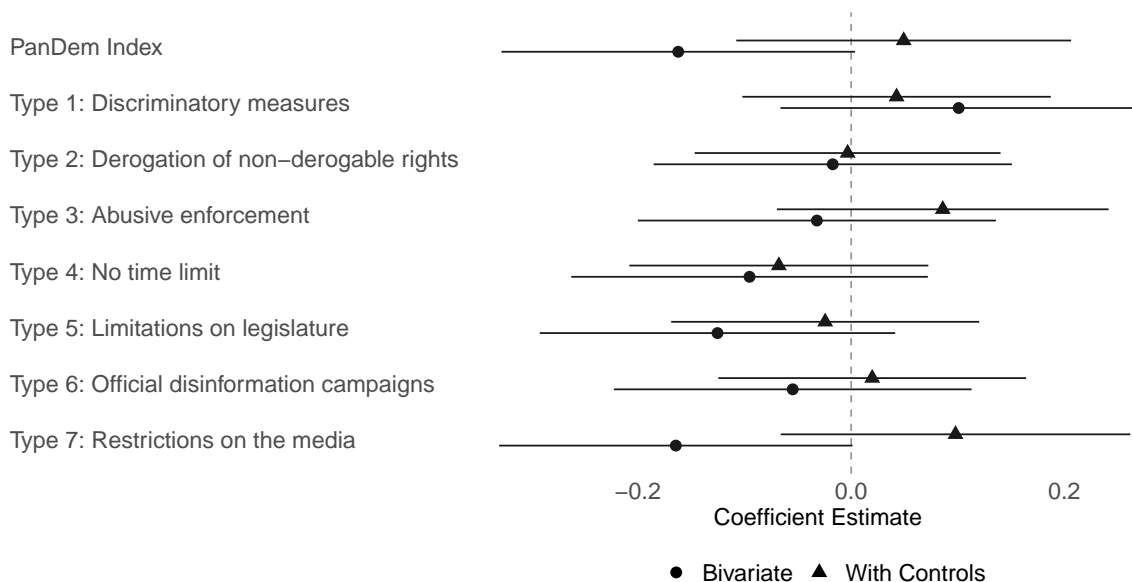


Figure 5: Standardized coefficients and 90% confidence intervals from linear regression predicting deaths per million (logged) as of 04 August 2020. Full results reported in the Appendix.

that the most important correlate of Covid-19 deaths is the overall life expectancy within the country (also see Figure 7 in the Appendix). This variable is robustly significant and has the largest magnitude across all of the models we estimate. The prevalence of respiratory disease is also occasionally significant at the 90% level, but with less than half the standardized coefficient size as life expectancy. Other controls for older population share, health expenditures per capita, and health data quality never meet our 90% significance threshold. Overall, these covariates contribute about 0.30 to the adjusted R-squared, but do not perform as well as expected. This opens up questions for future research about heterogeneity in which factors on average correlate with Covid-19 deaths.

In the Appendix, we report additional robustness checks on our findings. The results hold when we include all types of violations in the model at the same time, which we can do given the low degree of multicollinearity (see Model 4, Table 2, Appendix). We also run a series of sensitivity tests removing one type of violation at a time from the PanDem Index, arriving at the same results. This suggests that the overall findings are not driven by any one type of violation and do not change when the configuration of violations measured is altered (see Figure 8, Table 5, and Table 6).

In sum, while simple cross-sectional correlations from observational data cannot provide genuine causal insights, nor do we make any such claims, the lack of correlation between democratic violations of emergency measures and Covid-19 deaths calls into question arguments in favor of such authoritarian tactics to curb the pandemic. Proponents of these tactics tend to point to low mortality rates in a few authoritarian regimes, without accounting for other underlying structural conditions or the extent to which these states actually violated democratic standards during the pandemic. As a result, anecdotes drive much of the authoritarian “success” story during the Covid-19 pandemic. Put simply: our empirical results suggest that pandemic-driven violations of democratic standards in the name of human life are unjustified and lack empirical merit.

## 6 Discussion

Autocrats, pseudo-democrats, and would-be autocratizers alike often present democratic principles and other normative goods as a false dichotomy. During crises, they tout the restriction of basic freedoms and other democratic practices as a necessary evil to preserve human life, advocating for strong (autocratic) leadership to overcome the inefficiencies of (weak) democratic procedures. As with similar myths about the “authoritarian advantage” (Maravall, 1994), our analysis shows that such claims lack empirical merit. We find no evidence of a trade-off between democracy and efficient responses to Covid-19. Rather, those cases that violate democratic standards for emergency measures show no significant reduction in their mortality rates over cases that respond democratically. Violations of democratic standards during crises cannot be justified by better public health outcomes.

In this paper, we have intentionally tested a means-based approach in response to the pro-authoritarian/anti-democratic arguments emanating from politicians, pundits, and other political observers. In doing so, we return to basic theoretical questions about democratic governance and whether its pursuit should be conceptualized as a normatively desirable end or as a means to some other desired outcome(s). Such questions of political theory go beyond the empirical scope of this paper, but are nevertheless important moving forward in an increasingly authoritarian world. Notably, our empirical investigation finds no evidence that during the Covid-19 pandemic, democracy and human life are competing desirable ends.

One limitation of our analyses is that official death rates may not reflect true mortality rates from Covid-19. For example, official statistics might be biased downwards in countries that lack sufficient monitoring or testing capacity or that actively manipulate information. In particular, leaders seeking to downplay the risks of the virus or to appear more capable at con-

taining it may manipulate official death statistics. This would suggest a negative correlation between official death rates and government disinformation. Yet we find no such correlation in our models (see Table 2). Alternatively, while leaders seeking to grab power may initially over-report Covid-19 deaths to justify the need for democratic violations, our empirical results provide no evidence of a significant positive correlation between democratic violations of any type and officially reported Covid-19 deaths.

Excess mortality statistics offer one promising alternative to official death rates (Weinberger et al., 2020). Currently, these data are only available for a few countries with comparatively high healthcare reporting capacity. The quality of such data are likely to improve in the future as governments collect more information from their regional public health authorities and present these publicly. In addition, using excess mortality to estimate the true Covid-19 death toll requires a rather strong assumption that deaths due to other causes remained constant (Beaney et al., 2020). Others raise questions about comparability of excess mortality statistics across countries, especially those that "span very diverse regions with potentially very different timings and incidence of the pandemic" (Aron et al., 2020). Therefore, we do not explore them here but urge scholars in the future to consider excess deaths as a viable alternative to official mortality rates.

Continued measurements are needed to monitor the ongoing development of crisis-driven violations that we observe here and whether these violations have a long-term effect on democracy itself. While we expect (and often imply) that violations of democratic standards during Covid-19 could accelerate autocratization, we admittedly leave that question unanswered for now. As part of our PanDem dataset, we provide the Pandemic Backsliding (PanBack) Index (Edgell et al., 2020). This index builds on previous research, which shows that a country's vulnerability to democratic regression is non-monotonic in the level of democracy: the most vulnerable countries for backsliding are those in the mid-range (being neither fully democratic nor autocratic). The PanBack Index estimates such inverted U-shaped vulnerability to backsliding by weighing more heavily violations of those countries in the mid-range of V-Dem's Liberal Democracy Index of 2019 (Coppedge et al., 2020a; Pemstein et al., 2020).

We see several additional avenues for future research: Single types of violations such as official disinformation campaigns could be further explored with in-depth analyses since there seem to be crucial variations, e.g. governments such as Madagascar (World Health Organisation, 2020) that have "only" disseminated disinformation on treatments vs. regimes such as Turkmenistan (Reporters Without Borders, 2020b) which fully deny the existence of Covid-19 in their country. Analyzing public communication on the Covid-19 pandemic more generally - beyond disinformation campaigns - would provide insights into how different governments justify violations of democratic standards. Apart from this, we still know very little about which socio-economic, political, and structural factors drive high death rates. So far, the Covid-19 pandemic appears to be non-discriminatory, spreading to countries regardless of level of economic development or democracy. While this paper mainly focuses on violations of democratic standards and included several socio-political aspects as control variables, the latter need to be extended and further tested.

## 7 Conclusion

This paper provides a new approach for studying how the world has responded to the Covid-19 pandemic. We introduce a new index to capture the level of democratic violations that countries have engaged in in their responses to Covid-19. Our data complement other projects that seeking to capture government policies and institutional changes due to the Covid-19 pandemic. We contribute to this rapidly growing body of literature by offering a clear conceptualization of what counts as a democratic violation in times of a health crisis and measuring the extent and severity of violations committed across the world. Our new PanDem dataset



shows that a large number of countries have engaged in violations of democratic norms since the beginning of the pandemic. Some states have failed to specify a time limit to their emergency measures, while others have engaged in discrimination, violated non-derogable rights, imposed restrictions on the media, limited the legislature's power, enforced the emergency measures using excessive force, and/or engaged in disinformation campaigns. While more common in autocracies, such violations are also prevalent and various in democratic regimes.

Empirically, we find no evidence of a trade-off between democracy and performance in public health outcomes. We do not find any robust correlation between the number of democratic violations that a country engaged in and the Covid-19-related death rate. This finding suggests that the claim that democratic freedoms must be restricted to protect the population from the virus lacks empirical grounding. The apparent "success" of closed autocracies such as China or Singapore in controlling the virus appears to support the claim that democracy is inefficient for responding to public health crises. However, democracies such as South Korea and Taiwan also maintained low death and infection rates without violating democratic norms (Diamond, 2020; Yamey and Jamison, 2020). The claim that autocracies perform better thus lacks empirical support when considering the universe of cases and important contextual conditions like life expectancy.

Thus, we should be suspicious of claims that violations of democratic norms are a necessary evil for fighting the Covid-19 pandemic, especially when leaders make these claims in already autocratizing countries. In weak democracies and hybrid regimes, violations of democratic standards could be harbingers of autocratization, as leaders take advantage of the pandemic's exceptional context to consolidate power, sideline opposition, and silence critics. Although it is too early to know the extent to which the pandemic will harm democracy, collecting detailed data on democratic violations as the pandemic unfolds is more essential than ever.

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## 8 Appendix

Table 1: Pearson correlations between components of the Pandemic Democratic Violations (PanDem) Index (v3)

	Type 1	Type 2	Type 3	Type 4	Type 5	Type 6	Type7
Type 1	1.00	0.17	0.03	-0.02	0.17	-0.00	-0.14
Type 2	0.17	1.00	0.11	-0.09	0.16	0.02	-0.00
Type 3	0.03	0.11	1.00	-0.05	-0.04	-0.06	0.18
Type4	-0.02	-0.09	-0.05	1.00	-0.04	-0.04	0.06
Type 5	0.17	0.16	-0.04	-0.04	1.00	0.11	0.15
Type 6	-0.00	0.02	-0.06	-0.04	0.11	1.00	0.27
Type 7	-0.14	-0.00	0.18	0.06	0.15	0.27	1.00

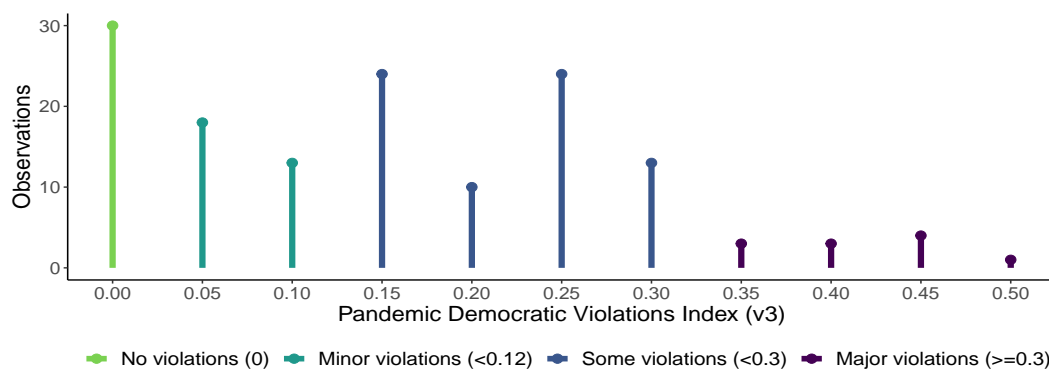


Figure 6: Number of observations for each unique value on the Pandemic Democratic Violations (PanDem) Index (v3). Lines are colored based on the ordinalized versions presented in Figure 2.

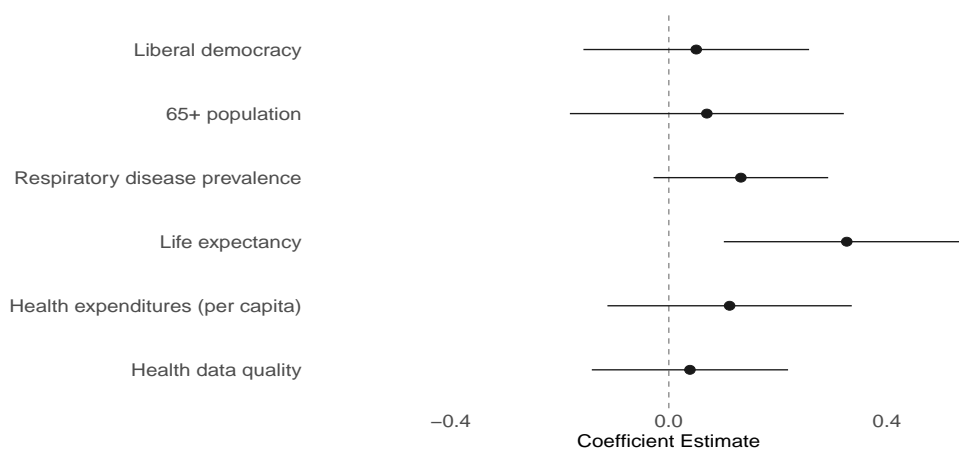


Figure 7: Standardized coefficients and 90% confidence intervals from linear regression predicting deaths per million (logged) as of 04 August 2020. Control variables from Model 1, Table 2

Table 2: Deaths per million (logged) and democratic violations of emergency measures

	(1)	(2)	(3)	(4)
PanDem Index		-0.16*	0.05	
		(0.08)	(0.08)	
Type 1: Discriminatory measures				0.07
				(0.08)
Type 2: Derogation of non-derogable rights				-0.02
				(0.08)
Type 3: Abusive enforcement				0.07
				(0.08)
Type 4: No time limit				-0.08
				(0.07)
Type 5: Limitations on legislature				-0.05
				(0.08)
Type 6: Official disinformation campaigns				-0.004
				(0.08)
Type 7: Restrictions on the media				0.12
				(0.09)
Liberal democracy	0.05		0.06	0.11
	(0.11)		(0.11)	(0.11)
65+ population	0.07		0.08	0.07
	(0.13)		(0.13)	(0.13)
Respiratory disease prevalence	0.13		0.14*	0.13
	(0.08)		(0.08)	(0.09)
Life expectancy	0.33***		0.32***	0.33***
	(0.12)		(0.12)	(0.12)
Health expenditures (per capita)	0.11		0.12	0.15
	(0.11)		(0.12)	(0.12)
Health data quality	0.04		0.03	-0.02
	(0.09)		(0.09)	(0.10)
Constant	0.00	0.00	0.00	0.00
	(0.07)	(0.08)	(0.07)	(0.07)
Observations	138	138	138	138
R <sup>2</sup>	0.33	0.03	0.33	0.36
Adjusted R <sup>2</sup>	0.30	0.02	0.30	0.29
Residual Std. Error	0.84	0.99	0.84	0.84
F Statistic	10.90***	3.68*	9.35***	5.27***

Standardized coefficients and standard errors from linear regression. \*p<0.1; \*\*p<0.05; \*\*\*p<0.01



Table 3: Bivariate regressions for each type of violation from the Pandemic Democratic Violations (PanDem) Index

Violation	Coef.	Constant	R <sup>2</sup>	Adj. R <sup>2</sup>	F
Type 1: Discriminatory measures	0.10 (0.09)	0.00 (0.09)	0.01	0.00	1.40
Type 2: Derogation of non-derogable rights	-0.02 (0.09)	0.00 (0.09)	0.00	-0.01	0.04
Type 3: Abusive enforcement	-0.03 (0.09)	0.00 (0.09)	0.00	-0.01	0.14
Type 4: No time limit	-0.10 (0.09)	0.00 (0.09)	0.01	0.00	1.25
Type 5: Limitations on legislature	-0.13 (0.09)	0.00 (0.08)	0.02	0.01	2.17
Type 6: Official disinformation campaigns	-0.05 (0.09)	0.00 (0.09)	0.00	0.00	0.41
Type 7: Restrictions on the media	-0.16* (0.08)	0.00 (0.09)	0.03	0.02	3.78*

N=138. Standardized coefficients and standard errors from linear regression. All variables are z-standardized. \*p<0.1; \*\*p<0.05; \*\*\*p<0.01.

Table 4: Multivariate regressions for each type of violation from the Pandemic Democratic Violations (PanDem) Index

Violation	Coef.	Constant	R <sup>2</sup>	Adj. R <sup>2</sup>	F
Type 1: Discriminatory measures	0.04 (0.07)	0.00 (0.07)	0.33	0.30	9.34***
Type 2: Derogation of non-derogable rights	-0.003 (0.07)	0.00 (0.07)	0.33	0.30	9.27***
Type 3: Abusive enforcement	0.09 (0.08)	0.00 (0.07)	0.34	0.30	9.52***
Type 4: No time limit	-0.07 (0.07)	0.00 (0.07)	0.34	0.33	11.06***
Type 5: Limitations on legislature	-0.02 (0.07)	0.00 (0.07)	0.33	0.30	9.29***
Type 6: Official disinformation campaigns	0.02 (0.07)	0.00 (0.07)	0.33	0.30	9.28***
Type 7: Restrictions on the media	0.10 (0.08)	0.00 (0.07)	0.34	0.30	9.56***

N=138. Standardized coefficients and standard errors from linear regression. Models also include standard set of control variables for liberal democracy, 65+ population, respiratory disease prevalence, life expectancy, health expenditures per capita, and health data quality. All variables are z-standardized. \*p<0.1; \*\*p<0.05; \*\*\*p<0.01.

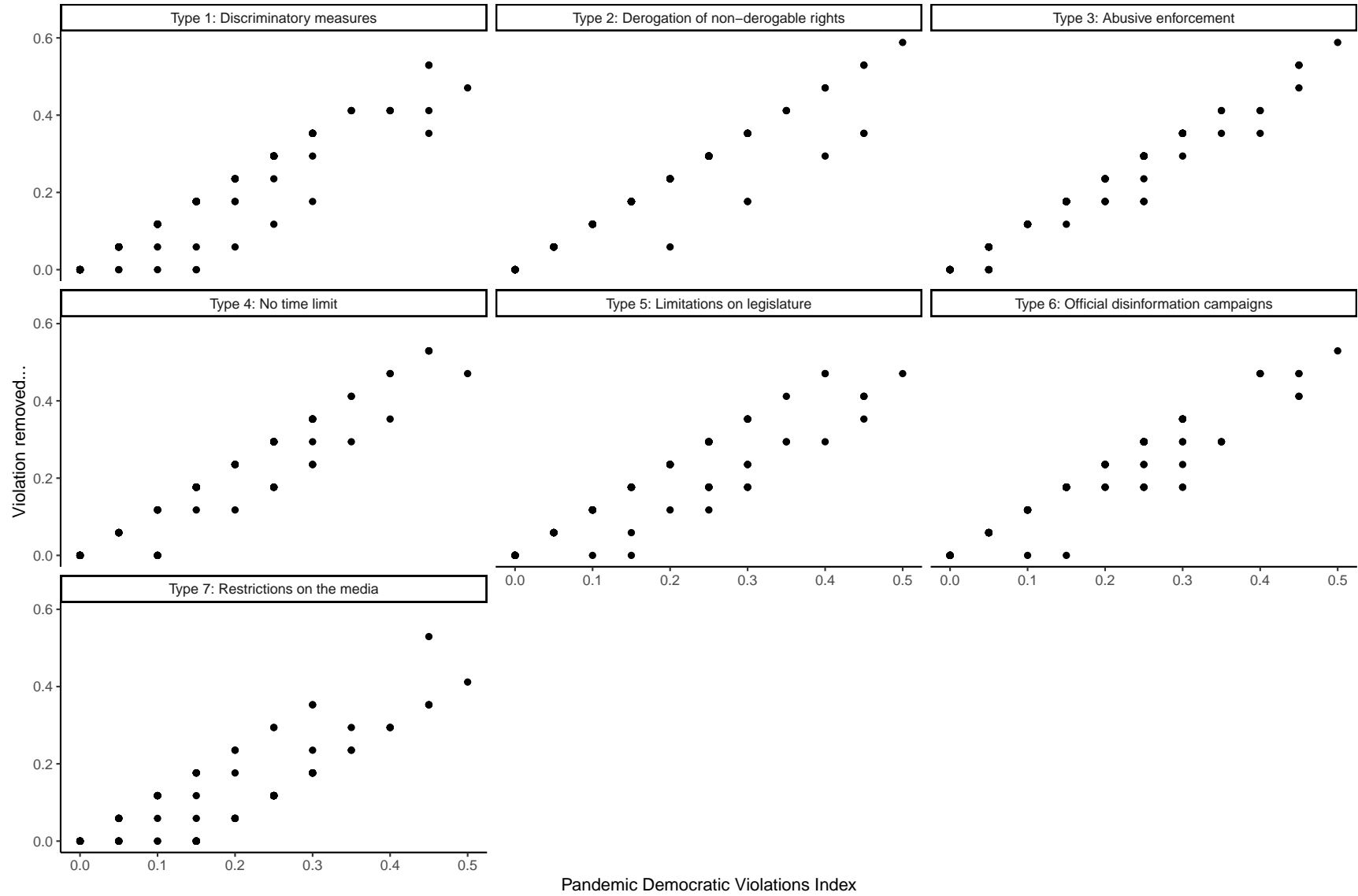


Figure 8: Comparing Pandemic Democratic Violations (PanDem) Index to a reduced version with each violation removed

Table 5: Sensitivity test using bivariate regressions with one type of violation removed at a time from the Pandemic Democratic Violations (PanDem) Index

Violation removed...	Coef.	Constant	R <sup>2</sup>	Adj. R <sup>2</sup>	F
Type 1: Discriminatory measures	-0.15** (0.07)	0.00 (0.08)	0.03	0.02	4.03*
Type 2: Derogation of non-derogable rights	-0.14* (0.07)	0.00 (0.08)	0.03	0.02	3.75*
Type 3: Abusive enforcement	-0.14* (0.07)	0.00 (0.08)	0.03	0.02	3.66*
Type 4: No time limit	-0.14* (0.07)	0.00 (0.08)	0.03	0.02	3.54*
Type 5: Limits on legislature	-0.14* (0.07)	0.00 (0.08)	0.03	0.02	3.59*
Type 6: Official disinformation campaigns	-0.14* (0.07)	0.00 (0.08)	0.03	0.02	3.73*
Type 7: Restrictions on media	-0.14* (0.07)	0.00 (0.08)	0.03	0.02	3.56*

N=138. Standardized coefficients and standard errors from linear regression. All variables are z-standardized. \*p<0.1; \*\*p<0.05; \*\*\*p<0.01.

Table 6: Sensitivity test using multivariate regressions with one type of violation removed at a time from the Pandemic Democratic Violations (PanDem) Index

Violation removed...	Coef.	Constant	R <sup>2</sup>	Adj. R <sup>2</sup>	F
Type 1: Discriminatory measures	0.04 (0.07)	0.00 (0.07)	0.33	0.30	9.34***
Type 2: Derogation of non-derogable rights	0.04 (0.07)	0.00 (0.07)	0.33	0.30	9.35***
Type 3: Abusive enforcement	0.04 (0.07)	0.00 (0.07)	0.33	0.30	9.34***
Type 4: No time limit	0.05 (0.07)	0.00 (0.07)	0.34	0.30	9.37***
Type 5: Limits on legislature	0.05 (0.07)	0.00 (0.07)	0.34	0.30	9.36***
Type 6: Official disinformation campaigns	0.04 (0.07)	0.00 (0.07)	0.33	0.30	9.35***
Type 7: Restrictions on media	0.04 (0.07)	0.00 (0.07)	0.33	0.30	9.34***

N=138. Standardized coefficients and standard errors from linear regression. Models also include standard set of control variables for liberal democracy, 65+ population, respiratory disease prevalence, life expectancy, health expenditures per capita, and health data quality. All variables are z-standardized. \*p<0.1; \*\*p<0.05; \*\*\*p<0.01.