Introduction to "COVID-19: Politics, Inequalities, and Pandemic"

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The COVID-19 pandemic poses an extraordinary challenge to public health and medical care systems around the world. As the virus has spread, threatening population health, straining medical facilities and providers, disrupting economies, and reordering social relations, COVID-19 has quickly become the dominant issue not only in health policy but also in contemporary public policy and politics.

While this strain of coronavirus is novel, its impact both within and across countries is shaped by familiar social and political institutions, public policies, inequalities, and government actions (and inaction). The path of COVID-19 is varied, its burdens fall unequally on different populations, and governments' responses have diverged. COVID-19 is a medical disease whose containment hinges on rapid advances in biomedical research, the emergence of efficacious clinical treatments, the development and distribution of a vaccine, and the application of public health measures. Yet, as with prior infectious diseases such as AIDS, TB, and Ebola—"modern plagues" in the words of Paul Farmer (2001)—its course will be determined largely by political and social structures.

Why have some countries' responses to COVID-19 been, at least initially, more effective than others? How are structural racism, socioeconomic inequities, federalism, a limited safety net, and unequal access to health insurance impacting the pandemic's path in the United States? In what ways does COVID-19 challenge conventional assumptions about comparative public health and international relations? How has partisanship mediated Americans' divided reactions to public health messaging

around COVID-19? And what policies could we adopt to promote a more effective, just, and equitable response to this public health emergency?

These are the questions explored by authors contributing to "COVID 19: Politics, Inequalities, and Pandemic." These essays mark JHPPL's first effort to make sense of the pandemic as a political, social, and comparative phenomenon that is likely to redefine public health, health policy, and health care politics for years to come.

Reference

Farmer, Paul. 2001. Inequalities and Infections: The Modern Plagues. Berkeley: University of California Press.