

Politicians must be held to account for mishandling the pandemic

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Politicians around the world must be held to account for mishandling the COVID-19 pandemic, argues a senior editor at *The BMJ* today.

Executive editor, Dr. Kamran Abbasi, argues that at the very least, COVID-19 might be classified as 'social murder' that requires redress.



Today 'social murder' may describe a lack of political attention to the conditions in which people are born, grow, live, work and age that exacerbate the <u>pandemic</u>.

When politicians and experts say that they are willing to allow tens of thousands of <u>premature deaths</u>, for the sake of population immunity or in the hope of propping up the economy, is that not premeditated and reckless indifference to human life, he asks?

If policy failures lead to recurrent and mistimed lockdowns, who is responsible for the resulting non-COVID excess deaths?

And when politicians wilfully neglect scientific advice, international and historical experience, and their own alarming statistics and modelling, because to act goes against their political strategy or ideology, is that lawful?

He acknowledges that any nation's laws on political misconduct or negligence are complex, and not designed to react to unprecedented events, but says after more than 2 million people have died, "we must not look on impotently as elected representatives around the world remain unaccountable and unrepentant."

If citizens feel disempowered, who might hold negligent politicians to account, he asks?

He points out that official scientific advisers have often struggled to convince politicians to act until it is too late or kept silent to avoid <u>public criticism</u>, while much of the media is complicit too, "worried about telling pandemic truths to their readers and viewers, owners, and political friends."

It is this environment that has allowed COVID denial to flourish, for



unaccountability to prevail, and for the great lies of 'world-beating' pandemic responses to be spun, argues Abbasi.

When citizens find no accountability among their leaders, and feel unsupported by experts and the media, the law remains one form of redress, he writes. Indeed, some legal avenues, including criminal negligence and misconduct in public office, are being explored, although proving any such claims will be difficult and drawn out.

What's left then in this circumstance is for citizens to lobby their political representatives for a public inquiry; for professionals in law, science, medicine, and the media, as well as holders of public office, to put their duty to the public above their loyalty to politicians and to speak out, to dissent lawfully, to be active in their calls for justice, especially for the disadvantaged.

"Politicians must be held to account by legal and electoral means, indeed by any national and international constitutional means necessary. State failures that led us to 2 million deaths are 'actions' and 'inactions' that should shame us all," he concludes.

In a linked editorial, Clare Wenham at the London School of Economics asks what went wrong in the global governance of COVID-19?

Looking at the latest report from the Independent Panel for Pandemic Preparedness and Response, she argues that the system we have established for global health security cannot respond adequately to a health emergency.

She calls for collaborative action to fix the identified weaknesses, but acknowledges that given the politicisation of responses globally, any efforts to develop a standardised response to health emergencies will have to overcome serious challenges to secure agreement among all



member states.

"We need a targeted review that names and shames governments, rather than obscuring them with generalisations," she writes. "I look forward to bolder reports from the independent panel that consider not only the economic and social effect of the pandemic but the failure of Western governments too."

More information: Kamran Abbasi, Covid-19: Social murder, they wrote—elected, unaccountable, and unrepentant, *BMJ* (2021). DOI: 10.1136/bmj.n314

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