

Socio-economic and security ramifications of COVID-19 in Zimbabwe.

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Abstract

The outbreak of COVID-19 came with serious socio-economic and national security implications across the globe. While more deaths were recorded in developed countries than in developing countries, socio-economic impacts were, however, more pronounced in developing countries than in developed countries. In this study, we examined the socio-economic and national security implications of COVID-19 in Zimbabwe. The study adopted a mixed-methods design, with 202 participants recruited from Harare Central Business District through quota and purposive sampling techniques. Findings revealed that poverty, hunger and starvation, and rising unemployment were the major socio-economic impacts of COVID-19 in Zimbabwe. In terms of security, domestic violence was considered the most prevalent crime during COVID-19, followed by corruption. The study concludes that restrictive measures during public health emergencies come with a host of negative socio-economic impacts, which require sound mitigatory measures from governments. The study recommends a number of social measures to mitigate this outcome, namely providing social grants to vulnerable citizens, implementing partial rather than total lockdowns, and limiting the powers of law enforcement agents during public health emergencies.

Keywords: COVID-19, crime, national security, socio-economic impacts, Zimbabwe

Introduction

The Coronavirus (COVID-19) pandemic was a major global threat to human health, with millions of deaths recorded across the globe in the first year of the pandemic (Chaka & Okpoko, 2021). The COVID-19 epidemic has undoubtedly been the most disruptive force in our lives since World War II. No region has been spared from the wide-ranging effects of the COVID-19 pandemic. COVID-19 directly affected human health systems, changing patterns of mortality and morbidity with differential distribution across countries (Verhagen et al., 2021). Given the swift pace at which the virus was spreading, governments had to take measures to curb the spread of the virus. Governments sought to limit the spread of the virus and mitigate the negative health outcomes of the disease through various policy measures that included restricted travel, imposed quarantines and lockdowns, and the closure of businesses and schools (Josephson, Kilic & Michler, 2021). The adoption of stay-at-home policies witnessed a change in citizen mobility and routine activities in an instantaneous and unprecedented manner (Langton, Dixon & Farrel, 2021). These policies were aimed at reducing human interaction and

slowing the spread of the virus.

Importantly, governments had to enact various acts of legislation and policies to give legal effect to the restrictive measures, with the security arms of the governments mandated to enforce the laws (Congressional Research Services (CRC), 2021; Mugari & Obioha, 2021). While most of the fatalities were recorded in the developed Western countries, the African continent endured more in terms of socio-economic impacts due to the strict enforcement of restrictive measures. The broad national security, as well as the criminal environment, were also impacted by the restrictive measures.

In this study, we explored the socio-economic and national security implications of COVID-19 in Zimbabwe—a developing Southern African nation. On the 17th of March 2020, the Zimbabwean government declared the pandemic a national disaster and announced a national lockdown to contain the spread of the virus. Emulating the measures by other governments across the globe, the Zimbabwean government responded to the outbreak of the COVID-19 pandemic by banning air travel; closing borders; closing all educational institutions;

banning religious gatherings, sporting events and nightclubs; as well as enforcing social distancing, mask-wearing and stay-at-home orders. To give legal effect to the restrictive measures, the government promulgated Statutory Instrument 77 of 2020 titled: Public Health (COVID-19 Prevention, Containment and Treatment) Regulations, 2020. The Zimbabwe Republic Police and the Zimbabwe National Army were mandated to enforce the lockdown measures. It is important to highlight that most of the socio-economic impacts indirectly arose as a result of the restrictive measures.

The study is underpinned by two research objectives, namely: to document the socio-economic impacts of COVID-19, and to determine the impact of COVID-19 restrictive measures on criminal activities. The study adds to the growing body of literature on the impacts of global health emergencies, with a particular focus on a developing country. There is limited empirical research on the impacts of COVID-19 in Zimbabwe and a few existing studies were based on secondary evidence. However, this study was based on primary data and real-life accounts of the effects of the pandemic from the participants. The study also comes at a

time when the pandemic could be said to be in its final phase, hence the data are based on the participants' experiences throughout the whole COVID-19 era. Findings from this study will assist the government and policymakers in how to respond to public health emergencies. As the health crisis subsides and economic activities resume, policymakers may consider evaluating the various policy approaches in terms of the lessons learned and adopting best practices in addressing similar crises. Lastly, as part of the conclusion, the study proffers some suggestions on how the country can handle public health emergencies in future.

National security: An all-encompassing term

There has been a paradigm shift in the way national security is viewed. During the World Wars, national security was predicated almost entirely on military might. Now, the term national security includes threats of a non-military nature. In 1994, the United Nations Development Program (UNDP) identified seven dimensions of national security, which, "other than military security, include: economic security, personal security, political security, food security, environmental security, and importantly,

health security" (Mugari & Obioha, 2021, p. 2). To this end, national security "is no longer confined to military threats, as health issues are now considered among a host of other non-traditional security concerns which include the economy, the environment, food and energy" (Kamradt-Scott & McInnes, 2012, p. 2). Given the diverse issues that fall within the ambit of national security, we adopt the following definition of national security;

"National security is the measurable state of the capability of a nation to overcome the multi-dimensional threats to the apparent well-being of its people and its survival as a nation-state at any given time, by balancing all instruments of state policy through governance." (Paleri, 2008, p. 5)

This study focuses on the health security dimension of national security which, according to the World Health Organization (WHO), encompasses the "activities required to minimise the danger and impact of acute public health events that endanger the collective health of populations living across geographical regions and international

boundaries" (WHO, 2002, p.1). What is particularly important concerning health security is its link to other dimensions of national security. In this respect, health security "is inextricably associated with other dimensions of national security that characterise it, namely: economic, environmental, food, personal, community and political securities" (Burgess, 2007, p. 4). As will be noted in the succeeding sections, the response to COVID-19 did not only have a bearing on the health security dimension but had significant impacts on other dimensions of national security. Paradoxically though, the national security of states cannot be achieved without first achieving health security (WHO, 2020), hence the establishment of restrictive measures to contain the virus was inevitable.

Socio-economic implications of COVID-19

An acute challenge emerging from the COVID-19 pandemic was how individuals and communities managed to strike the balance between the health benefits and the socio-economic costs of managing the spread of the virus (Josephson et al., 2021). While there has been evidence of success in managing the pandemic through restrictive measures (Mugari & Obioha, 2021; COMESA, 2020; Tang et al.,

2020), the socio-economic impacts of the measures have been significant. In this section, we look at the implications of COVID-19 on economic security, food security and other social circles.

The economic front was perhaps the worst affected sector in the developing world. As countries declared states of emergency, issued stay-at-home orders and advised against social gatherings, hundreds of millions of individuals in low-income countries found themselves out of work, in both the formal and informal labour markets (Josephson et al., 2021; ILO, 2020). The economic challenges were also felt in developed countries. For example, in European countries such as Germany, France, the United Kingdom, Italy and Spain, over 30 million people had, by June 2020, applied for state support (CRC, 2020). This meant that governments had to increase grant funding to vulnerable citizens (CRC, 2020). The World Bank estimated that in 2021, between 143 and 163 million people were pushed into extreme poverty (defined as those living on under \$1.90 per day) (Mahler et al., 2021). The International Labour Organization (ILO) announced that between 5.3 million and 24.7 million jobs were lost because of the economic crisis caused by COVID-19.

Clearly, this deterioration in employment also meant a large loss of income between \$860 billion to \$3.4 trillion by the end of 2020 for workers (WHO, 2020). Of this lockdown-affected workforce, 61% were workers from the informal sector, with the bulk coming from low- and middle-income countries (Panneer et al., 2022). According to Mugari & Obioha, the impact of the restrictive measures on economies was multipronged:

"First, the closure of businesses during lockdown would result in a depressed flow of revenue, yet the revenue would be needed to fund the health sector; second, companies would fail to pay their employees during the period of the lockdown due to lack of revenue inflows; and third, some of the industries could even fail to recover after the lockdown". (Mugari & Obioha, 2021, p. 6)

The pandemic also triggered an unprecedented health and fiscal response in terms of speed and magnitude, reducing the capacity of governments to provide support for vulnerable

populations (Yeyati & Filippini, 2021). As many state borders were closed, inter-country travel and trade were shut, and more than 30 million people fell into poverty in the absence of active policies to protect or substitute income flows to vulnerable populations (Panneer et al., 2022).

The economic ramifications of the COVID-19 restrictive measures morph into food insecurity. As citizens lost their jobs and other informal sources of income, they were failing to get adequate food and nutrition (Josephson et al., 2021; Mugari & Obioha, 2021). A study by Josephson et al. (2021) in four African countries (Ethiopia, Malawi, Nigeria and Uganda) estimated that 60% of the adult population, representing more than 98 million adults across all four countries, experienced moderate to severe food insecurity during COVID-19. It was reported that, in 2020, the pandemic had doubled the food insecure population in Africa from 130 million to 265 million, as reported by the World Food Program Executive Director David Beasley (World Food Program, 2020). In Zimbabwe, a report by UNICEF (2021) showed that half of Zimbabweans faced extreme poverty due to COVID-19 in 2020. This was due to the combined effects of increases in the

price of basic necessities, economic contraction caused by the COVID-19 pandemic, and poor harvest (UNICEF, 2021). Another report by the World Food Program (WFP) and the Zimbabwe Vulnerable Assessment Committee (ZIMVAC) confirmed that hunger in Zimbabwe's urban areas increased in 2020 with 2.4 million struggling to meet their basic food needs (WFP, 2021).

While the restrictive measures impacted more on the economic and food security fronts, effects on the social front were also noted. For example, the confinement of people to their homes led to social isolation. Social isolation led to "chronic loneliness and boredom, which affected mental health, human happiness and wellbeing" (Panneer et al., 2022, p. 2). Vulnerable populations struggled to cope with the magnitude of problems, and the incidents of suicide increased due to loss of income, livelihood and other factors (Bishop & Roberts, 2020). Pandemic-induced poverty also widened the gender poverty gap, pushing more women into extreme poverty, as they earn less and hold less secure jobs than men (UNWOMEN, 2020). Children from marginalized sections also had unique negative experiences, as inequalities in the teaching-learning system widened.

Data show that "463 million children did not have access to the internet or digital devices for remote learning during the closure of schools" (UNICEF, 2020, p. 1).

COVID-19 restrictive measures and crime

Along with stagnating economic growth and increasing levels of poverty, the restrictive measures altered the crime landscape, with some offences rising while others declined. Borrowing from the Routine Activities theory, Langton et al. (2021) contend that drastic changes to human mobility are likely to yield similarly drastic changes in the scale and nature of the interaction between potential targets, motivated offenders and capable guardians. For example, most street crimes decreased during lockdown due to fewer opportunities for physical convergence between offenders and targets (Ashby, 2020; Mohler et al., 2020). Similarly, the stay-at-home policy makes people homebound, thus making crimes like burglary risky (Estevez-Soto, 2021). On the other hand, the confinement of people in their households increases the risk of violent crimes such as domestic violence and intimate partner violence (Estevez-Soto, 2021; Langton et al., 2021). A study by Mugari and Obioha (2021) and Piquero et al. (2020) noted an upsurge in gender-

based violence cases during the COVID-19 lockdown period. Cases of domestic violence increased "by more than 100 percent during the first month of the lock-down, with a record 1,200 cases for April, compared to a monthly average of 500 cases for the pre-lockdown period" (Tshili, 2020, p. 1). Some suggest that the widespread shift to home working and online purchasing during the outbreak may have contributed to a shift in crime possibilities from offline to online contexts (Collier et al., 2020; Hawdon et al., 2020). According to study findings from the United Nations Office on Drugs and Crime, complaints of cybercrime surged during the COVID-19 epidemic, and they were especially high during the two months with the toughest lockdown regulations and restrictions (UNODC, 2020a). Further, it has been noted that corruption is one of the major risk factors and impediments in the fight against the COVID-19 pandemic (UNODC, 2020b; Mlambo & Masuku, 2020).

Methodology

This study adopted a mixed-methods design. The study was conducted in Harare (the capital city of Zimbabwe), within the Central Business District (CBD). Several factors were considered to justify selecting Harare as the focal area

of study. First, being the capital city, the COVID-19 restrictive measures were strictly enforced in Harare. Thus, the respondents had first-hand experiences of the COVID-19 situation. Harare is also the hub of economic activities in Zimbabwe and despite the lockdown regulations, a significant number of people were allowed to go into town as they fell into the essential services category. Given that people who work in the CBD reside in surrounding residential locations, the majority of them had to pass through security check points in order to get into the CBD. This enabled them to have a feel of how the security agencies enforced the restrictive measures. Moreover, the researchers also had an opportunity to include some of the informal traders who were having running battles with the law enforcement agencies during the enforcement of the restrictive measures.

A total of 202 respondents from the public were selected to take part in the study, out of which 188 respondents provided data through questionnaires. They were selected through quota sampling and random sampling. First, the CBD was divided into four quadrants which were separated by two major central roads- Julius Nyerere Street and

Nelson Mandela Street. The researchers then randomly selected business premises from where a maximum of two respondents were selected per business premise. The researchers also considered those who were willing to participate in the study. Each of the four quadrants had an almost similar number of respondents. The other fourteen interview participants were purposefully sampled security experts (N=4), health experts (N=4), and civil society representatives (N=6).

A questionnaire and an in-depth interview guide were used to gather data. The questionnaire had a combination of closed-ended and open-ended questions. The questionnaire had three sections, namely: Section A (which dealt with socio-demographic data), Section B (which dealt with the socio-economic impacts of COVID-19 restrictive measures), and Section C (which dealt with the criminal activities during COVID-19 era). Quantitative data were analysed using Statistical Package for Social Sciences (SPSS) to reveal descriptive statistics. The interview guide was semi-structured with each of the interview sessions lasting approximately 25 to 35 minutes. Interview responses were analysed using summative content

analysis and were used to complement quantitative data.

Results

Socio-economic impacts of COVID-19

The first objective was concerned with documenting the socio-economic implications of COVID-19. Respondents were asked to identify impacts they considered most salient from among the given factors. The results are presented in Table 1.

The highest number of respondents (27%) considered poverty as the major impact of COVID-19 in Harare. Hunger and starvation came second, with 21% of the respondents, followed by a high level of unemployment, with 16% of the respondents. Economic decline came fourth with 15%. Disruption of businesses and restrained social movement were the least significant impacts, with 13% and 8% respectively.

Table 1: socio-economic impacts of COVID-19

Impact	Frequency	Percentage
Poverty	51	27
Hunger and starvation	40	21
Unemployment	30	16
Economic decline	28	15
Disruption of business operations	24	13
Restrained social movement	15	8
Total	188	100

Poverty, hunger and starvation were also considered as socio-economic impacts of COVID-19 impacts by all the interview participants. The following were some of the views from the participants.

"In Harare CBD and in Zimbabwe in general, the poverty situation is intense in the economy due to the increased COVID-19 restrictions since it is difficult for

citizens to make a living in a way they had been used to." (Participant #2)

"Majority of the people in Harare are informal traders and by forcing them to close businesses and stay at home, their only sources of livelihoods were closed off, leaving them in abject poverty."(Participant #10)

"Most households failed to put food on their tables because the lockdown could not allow them to fend for their families." (Participant #12)

Unemployment was also mentioned as a significant impact, though the majority of the participants considered it less significant than poverty and hunger. In this regard, two of the participants had this to say;

"Vendors and commuter omnibus drivers are a typical group of people in Zimbabwe that fall within the range of socio-economically vulnerable people and with increased unemployment rate most of them will turn to criminal activities, suicidal thoughts and unfavourable mental health states." (Participant #11)

"A lot of people lost their jobs and incomes during lockdown. Most companies closed and they could not afford to pay employees when they were not operational. The end result was

poverty and failure to feed their families." (Participant #14)

Lastly, some of the participants highlighted impacts such as disruption of business operations and restrained social movement. As regards the disruption of business, they cited the reduced working hours for the businesses that were allowed to operate and the outright closure of some non-essential businesses. They indicated that restrained social movement led to high incidents of stress and boredom. Restrained social movement was considered by participants from civil society as the main contributor to the rise in gender-based violence. Two participants from the civil society also pointed out that citizens were unable to enjoy their constitutional rights of assembly and gathering, as well as the freedom to demonstrate and petition, due to restrictions on the number of persons who could be allowed to gather.

Criminal activities during COVID-19

Respondents were asked to indicate the criminal activities that they considered to be most prevalent during the COVID-19 pandemic. As depicted in Table 2, the majority of the respondents (52%) considered domestic violence as the criminal activity that was most prevalent

during the pandemic. The was followed by corruption, with a third of the respondents considering it to be the most prevalent criminal activity. Other criminal

activities such as assault, theft and unlawful entry were considered less prevalent at 8%, 5% and 2% respectively.

Table 2: Criminal activities during COVID-19

Crime	Frequency	Percentage
Domestic violence	98	52
Corruption	62	33
Assault	15	8
Theft	10	5
Unlawful entry	3	2
Total	188	100

The majority of the interview participants also pointed out domestic violence as one of the crimes that were committed during the lockdown. While security experts preferred to call it domestic violence, civil society representatives preferred to use the term "gender-based violence", a term which has been widely adopted in contemporary literature. Whilst assault was also mentioned by some of the participants, they mentioned that it was mainly within the context of gender-based violence. However, two civil society representatives mentioned an increased incidence of assault, as recorded by law enforcement agents during the

enforcement of the lockdown. The following were some of the viewpoints of interviewees regarding gender-based violence.

"I tell you, gender-based-violence was the most prevalent crime during lockdown. Imagine having to be confined with the perpetrators in the same house for more than a month. I'm sure cases that were reported were just a drop in the ocean as most victims suffered in silence".(Participant #1)

"The agony of domestic violence was that victims could not move out of their homes to report to the police. On one hand, the police were overwhelmed with enforcing

lockdown regulations and on the other hand, most victims who depended on the perpetrators for survival would not come out". (Participant #10)

Corruption was highlighted as a prevalent crime during COVID-19 by all the participants from civil society and two security experts. They all mentioned corruption in the context of the procurement of personal protective equipment (PPE), as well as corruption by security officers at security checkpoints who encounter citizens on a daily basis. Some of them referred to a case in which a former minister of health was arrested for corruptly awarding a tender for the supply of PPE. Regarding corruption by security officers, one participant made the following remarks. *"The strict lockdown measures created an avenue for corruption by errand police officers. People from non-essential services were allowed to go into town upon payment of bribes. Others paid bribes to get letters of authority to travel. Those who were arrested for failure to wear face masks would pay bribes. Because of the strict lockdown measures, temptation to engage in corruption on the part of law enforcement agents was very high". (Participant #4).*

Discussion

Results of the study reveal that citizens considered poverty to be the most significant impact of COVID-19 restrictive measures. The participants' views can be explained by the socio-economic challenges that characterised the country during the pre-COVID-19 era, with the challenges worsening during the COVID-19-induced lockdown. The lockdown period was also characterised by several protest actions by public servants and the general public over the economic hardship. The findings in relation to poverty are confirmed in similar studies (e.g., Panneer et al., 2022; CRC, 2020; Mahler et al., 2021) in which poverty was regarded as one of the impacts of COVID-19, especially in developing countries. Whilst developed countries were able to provide social grants to assist their vulnerable populations, as observed by CRC (2020), the Zimbabwean government lacked the fiscal capacity to offer sufficient grants to vulnerable members of society due to other pressing issues such as the need to fund the fragile health sector. Importantly, poverty is linked to high levels of unemployment, which were witnessed during the COVID-19 era; little wonder high levels of unemployment came third among the

impacts of COVID-19 restrictive measures.

The poverty levels were heightened by the fact that the majority of Zimbabweans in the urban areas are employed in the informal sector. Others relied on cross-border trading, yet borders were closed during the lockdown period. The restrictive measures meant that the bulk of the urban population lost its sources of income as practically all informal businesses were closed. Previous studies (for example, Panneer et al., 2022; Josephson et al., 2021; WHO, 2020) also confirm that the informal sector suffered more in terms of job losses during the COVID-19 era. Whilst the informal sector was heavily impacted, job losses were also witnessed in the formal sector as companies could not afford to continue paying salaries to their employees when they had closed businesses. This finding is in resonance with Mugari and Obioha (2021) who noted that companies failed to pay their employees during the period of the lockdown due to a lack of revenue inflows, while some companies even failed to recover when the restrictive measures were lifted.

With poverty coming top among the socio-economic impacts of COVID-19

restrictive measures, it is logical that hunger and starvation were also considered as significant impacts. This is because as citizens lost their jobs and other informal sources of income, they were failing to get adequate food and nutrition, a situation that has also been pointed out by the World Food Programme (2021) and Mugari & Obioha (2021). Similar findings regarding hunger and starvation were reported by Josephson et al. (2021) in four other African countries, namely Ethiopia, Malawi, Nigeria and Uganda where an estimated 60% of the adult population across all four countries experienced moderate to severe food insecurity during the COVID-19 pandemic. Moreover, a report by the WFP (2021) confirmed that 2.4 million Zimbabweans faced hunger, starvation, and food insecurity during the pandemic. Despite previous findings that the economic front was the worst to be affected by COVID-19 (Josephson et al., 2021; ILO, 2020; WHO, 2020), findings surprisingly reveal that citizens are more concerned with issues that affect their livelihoods. Thus, they are more concerned about reducing poverty, accessibility of food and the availability of employment opportunities.

In what confirms the findings from previous studies (e.g., Estevez- Soto, 2021; Langton et al., 2021), domestic violence was found to be the most prevalent crime during the COVID-19 lockdown period. This was largely because the victims and perpetrators were confined within the same premises for a prolonged period. The problem was compounded by the fact that the victims had no option but to endure the violence as the law enforcement agencies did not have safe houses to accommodate victims of abuse. The rise in gender-based violence during the lockdown in Zimbabwe has also been noted by Mugari and Obioha (2021) and Tshili (2020). Corruption was also considered as another prevalent crime during the COVID-19 pandemic. Corruption was mainly in the context of demand for bribes by the security agents to gain free passage into town and to obtain exemption letters for movement, as well as the procurement of PPE. Corruption was also cited by the UNODC (2020b), as well as Masuku and Mlambo (2020), as one of the risk factors during COVID-19, although they cited corruption in the context of the distribution of vaccines and the procurement of PPE. The limited movement of people coupled with confinement to their homes led to a

reduction in crimes of concern such as theft and unlawful entry. This resonates with the findings of previous research (e.g., Estevez-Soto, 2021; Ashby 2020; Mohler et al., 2020) which noted that most street crimes decreased during lockdown due to fewer opportunities for physical convergence between offenders and targets, while the stay-at-home policies made people homebound, thus making crimes like burglary risky. While previous studies (e.g., Collier et al., 2020; Hawdon et al., 2020; UNODC, 2020a) report that cybercrime is one of the dominant crimes during the COVID-19 era, cybercrime was never mentioned by participants of this study. This might be attributable to the fact that the Zimbabwean cyberspace is not as advanced as in other developed countries.

Conclusion and policy implications

While the policy measures of social distancing and lockdown were critical to saving people's lives and combating the spread of corona virus, these measures came with several socio-economic and security implications for Zimbabwe and other developing countries. Given the highly informal nature of the Zimbabwean economy, the restrictive measures closed off people's sources of livelihood, plunging them into different

levels of poverty. The closure of informal and formal businesses led to high unemployment. The high poverty and unemployment levels were felt through hunger and starvation, as households struggled to put food on their table. Surprising, the findings of the present study have revealed that during times of public health emergencies, people are more concerned with their livelihoods than the economy. Regarding criminal activities during the COVID-era, findings revealed that domestic violence was the most prevalent crime, which was largely due to the confinement of perpetrators and victims for a prolonged period. Corruption was also regarded as another prevalent crime, and it was mainly perpetrated by law enforcement agents and government officers responsible for procuring PPE.

Given the unintended socio-economic impacts of the COVID-19 restrictive measures, there is a need for a different approach when the nation deals with future public health emergencies. The study shows that a blanket approach in implementing restrictive measures will have disastrous consequences on citizens' livelihoods. To reduce the impacts of restrictive measures on citizens' livelihoods, there is a need to avail social

grants to vulnerable citizens. Where social grants are not feasible due to limited fiscal space, the government should consider the implementation of partial lockdowns. For instance, in the current scenario, the government should have allowed the partial opening of the informal sector in order to reduce the heightened incidence of poverty, hunger and starvation. There is also a need for the state to avail resources to care for the victims of gender-based violence, especially the construction of safe houses. To curtail the incidence of corruption by law enforcement agents and other government officers (especially those responsible for procurements), the powers of the law enforcement agencies need to be checkmated during public health emergencies. For example, it should not be the duty of the police to issue travel permits to citizens during lockdowns, as such powers are often abused. Lastly, citizens' input should be solicited whenever the government comes up with policies during public health emergencies. Given that the COVID-19 pandemic now seems to be in its last phases, further similar studies can be conducted when new public health emergencies emerge in order to draw comparisons in the analysis of their impacts.

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