





# Public Policy during COVID-19: Challenges for Public Administration and Policy Research in Central and Eastern Europe

Juraj Nemec<sup>1</sup>, Wolfgang Drechsler<sup>2</sup>, Gyorgy Hajnal<sup>3</sup>

#### **Abstract**

The authors of this text decided to prepare a short article, with the aim to induce further discussion and to orient ongoing and future research efforts in Central and Eastern Europe but also worldwide. The article uses the method of a multi-country case study as the basis for proposing several critical research (and policy) challenges for our region – but many of them of a world-wide character. Four countries are covered by our thumbnail informative sketches – the Czech Republic, Estonia, Hungary and the Slovak Republic. The final part of this article proposes a set of questions suggested by the CEE experience with COVID-19 for future research. Such research will both be necessary and interesting for scholarship and policy in the region, and – as a particularly interesting context and area – helpful, one hopes, for questions and answers globally, concerning the pandemic, as well as public administration and policy as a whole.

## Key words:

research challenges, COVID-19, Central and Eastern Europe

#### Introduction

The ongoing COVID-19 "era" is one of the most critical crises in recent human history and probably the most critical one of this century so far. The whole world is affected; tens of millions of people infected and more than a million deaths by October 2020 – and these are just direct epidemiologic data. Connected socio-economic impacts may be similarly or possibly even much more critical – like econom-

- 1 Faculty of Economics and Administration, Masaryk University Brno, Czech Republic.
- 2 Tallinn University of Technology, Estonia.
- 3 Corvinus University Budapest, Hungary.

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ic depression, growing unemployment, risk of falling into extreme poverty, hunger, deteriorating public services, closed schools, limited social contacts, etc. (see for example the recent joint statement by ILO, FAO, IFAD and WHO 2020).

It therefore comes as no surprise that this global crisis is a focus of interest of current academic literature. Maybe more than a million of articles and blog entries have been already published, hundreds of books and a high number of international journals decided to publish special issues related to COVID-19, and still do.

The editorial board of our journal assessed what is the best option for NISPAcee to join this academic discussion and, in a broader perspective, the entire effort our societies in Central and Eastern Europe (CEE) need to make in order to tackle the unfolding challenge. We decided not to publish a special issue or special edited volume related to the COVID-19 pandemic, although we might do so in the future. Instead, we decided to prepare a short article, with the aim to induce further discussion and to orient ongoing and future research efforts, taking into account especially the fact that in our opinion, too many key questions related to COVID-19 still do not have any definite, or even sufficiently corroborated, answers. The article uses the method of a multi-country case study as the basis for proposing several critical research (and policy) challenges for our region – but many of them of a world-wide character. Four CEE countries are covered by our thumbnail informative sketches - the Czech Republic, Estonia, Hungary and the Slovak Republic. For sure, this is not a representative, but only an illustrative selection, serving the purpose of this article. Instead of devising and following a uniform and strict descriptive-analytical framework for describing and comparing our cases, we chose to focus our country overviews on the specific issues pertinent to the given country possibly relevant for a broader cluster of countries in Central and Eastern Europe (and beyond).

# Cases 1-2: Czech Republic and Slovakia

In terms of the capacity to prevent COVID-19 spread in the first phase, the Czech Republic and Slovakia were doing very well. According to available data we may state that Slovakia was among the most successful country in Europe in preventing the COVID-19 spread in spring 2020. The Czech data were a bit less positive, but still really good in a European comparative perspective.

Why have Slovakia and to a large extent also the Czech Republic been so successful in fighting the first phase of the spread of COVID-19? We assume that Central and Eastern European countries featured a number of commonalities in terms of their substantive policy responses to the unfolding pandemic and – at least partly – contributing to their relative success in handling the Spring wave of the pandemic. Two such core factors should be mentioned in relation to the Czech Republic and, especially, Slovakia. Firstly, the very fast and comprehensive anti-pandemic measures realized by their governments and secondly, the citizen's compliance with

said measures. When the risks became evident, the Czech and Slovak governments delivered swift and strict responses, which started in Slovakia even before the first case was detected in the country (6 March 2020). Already on 14 February 2020, a system was organized at the Slovak borders to identify people who were ill and on 27 February 2020, the health status border controls started. In early March, schools and universities were closed on a voluntary basis, without a central order. Most other critical measures were implemented very fast in both countries, like restriction of visits in hospitals, social care establishments and prisons, prohibiting any mass activities, closing borders, closing schools, closing shops and services (with exceptions), a special regime in hospitals, limiting non-emergency treatments, compulsory wearing of protective face masks in all public spaces, limiting any kind of mobility, etc. People returning from abroad were requested to stay at home for quarantine, after 6 April in state establishments. Both countries applied limited regional lock-downs. As indicated, the speed and scale of measures was supported by the fact that Czech and Slovak citizens have behaved very responsibly. The slogan "Stay at Home" was promoted and accepted; face masks used regularly.

The Czech and Slovak COVID-19 pandemic results for the first phase were almost perfect from the epidemiologic point of view, however on the costs of a drastic impact of anti-epidemic measures on the national economy. To limit the negative impact of the pandemic on the national economy and on the social welfare, both states realized several measures; however, only an insufficient amount of state subsidies has been "pumped in", especially in Slovakia. Another limit is the fact that the anti-pandemic measures were not coordinated with neighbors and EU member states (for more see for example Nemec and Spacek 2020; Chubarova et al. 2020).

The critical negative specifics of the Czech Republic and Slovakia are connected with the second phase of COVID-19 spread from summer 2020. Despite the experience with effectively managing the first phase, both governments argued till the end of September that everything was under control and the newly growing number of COVID-19 cases (from mid of July) was fully manageable. Before early autumn both countries functioned in relaxed regimes, introduced in early summer, when COVID-19 almost disappeared. Only when the numbers of infected achieved record numbers, the Prime Ministers publicly announced the return to strict anti-pandemic measures, but in a different way. The Czech PM apologized for his delayed reaction; the Slovak PM made the accusation that people's limited discipline was the core source of problems. Because the restrictive measures started too late and people are not ready to comply, in both countries the second wave is not under control and the numbers of infected and deaths are several times higher compared to spring. In both countries the number of newly infected in late October per day was higher compared to the total numbers for the first wave. In October the Czech Republic was one of the world-wide leading countries in relative spread of COVID-19 infections.

#### Case 3: Estonia

Of all CEE countries, Estonia has the image of being the most modern and – especially in Digital Governance – the most progressive and advanced; often, Estonia is even seen as the global leader in governance digitization. And while this is not entirely accurate – the last figures (Ubaldi et al. 2019) even put Estonian e-governance below the global average (and from the CEE region, only Slovenia above it) – Estonia is still doing very well in this area (Drechsler 2018). The expectation was therefore that Estonia coped and is coping very well with the pandemic, premised especially on digital solutions, and journalists were even fishing for corroboration for this perspective (Meaker 2020). But while Estonia handled the first wave of the pandemic quite well, digital governance does not seem to have been the reason.

When COVID-19 hit Estonia, the country reacted with immediate border closings and a moderate lockdown. Since late April, restrictions were gradually lifted, although many remain in place. The political response was more premised on global models (and here by its usual Scandinavian benchmark countries) than on the advice of Estonia's own Health Board. Similar to the German model, current attempts to cope with the second wave are focused on local but rigid interventions, although there are serious policy conflicts between various institutions.

An Estonian specificity in government is that it has three quasi-ministerial, quite autonomous super-bureaucrats – the Legal Chancellor, the State Secretary, and the State Auditor. During the pandemic, the former emerged as one of the most important critics of national and local restrictions and lockdowns, especially on mask wearing, which was pronounced scientifically unsound, together with claims by the main national medical expert – later revised – but against all international evidence (*ERR* 2020a). The State Auditor pointed out during the beginning of the second wave that Estonia lacked the basic capacity to responsibly deal with the crisis (*ERR* 2020b). This would corroborate that the oft-heard claim that regarding the pandemic, Estonia engaged in largely "performative governance" (Ding 2020) in that high outside pressure and expectation met low policy and administrative capacity, but that has hardly been substantially different from many if not most other CEE and European countries, and certainly, Estonian results have been "not too bad" and remain so thus far during the second wave of the pandemic.

Estonian fiscal reaction, contrary to all previous crisis response which had been heavily austerity— and consolidation— oriented, has been an above-European-average stimulus package of 4.5% of the GDP, facing a projected economic downturn of about 10% (Raudla and Douglas 2020).

Regarding digital governance, the tracing app HOIA was developed as a PPP (as in most successful cases) for a very small amount (€ 30,000) and a lot of in-kind contributions, but it came, for many observers, quite late, as it was only launched in August 2020, in time for the second wave. There are now 115,000 downloads

– slightly less than 10% of the population (see Republic of Estonia, Health Board 2020). Estonia's rather strict privacy rules and security concerns, arguably more oriented towards the fear of Russian interference and global audiences than inner-Estonian civil rights worries, were one of the reasons for this delay, and this has also led to several other techno-solutions not even being tried (Meijer et al. 2020). Therefore, Estonia is a case where it would be very difficult to argue for a move towards any form of authoritarianism, in spite of a government coalition that includes a right-wing party, EKRE, which would certainly welcome any such move.

On the other hand, as *Wired* reported, "Estonia's coronavirus response seems unremarkable because its digital capabilities have been blended into the country's bureaucracy. ... Estonia's digital state has also enabled life in the country to continue, largely uninterrupted" (Meaker 2020). The digital capacities, including the ubiquitous digital signature, especially as regards public service delivery, allowed life to go on more easily from home office and home generally and enabled, e.g., remote teaching in schools and universities, if not smoothly, then at least more easily than in those countries which had not yet come around to such digital practices even by 2020.

## Case 4: Hungary

The Hungarian government's responses during the first, spring wave of the pandemic did not differ significantly from those of other V4 countries. Preparatory measures started well before the first registered case (having appeared on 4 March). On 31 January the government created the so-called Operative Group. This high-level monitoring and coordination body, still existing at the time of writing, was headed by the Ministers of Interior and of Human Capacities and consisted of representatives of various uniformed services and public health agencies. In terms of substantive policy responses, this initial period featured some soft measures and recommendations only. Hard measures, including a ban on international travels, lockdown of all education institutions, severe restrictions on (non-COVID-19-related) outpatient health services and a closure of all but non-essential commercial facilities mostly followed within two weeks of detecting the first cases.

It is likely that the effective containment of COVID-19, as well as the relatively low overall case numbers and, in particular, the relatively low frequency of related deaths, can partly be attributed – similarly to other countries of the region – to the indeed rapid lockdown measures. Note, however, that attributing the success of containment to effective social distancing alone is somewhat assailable. In their comparative analysis of Hungary, Poland, the Czech Republic, the Netherlands and Portugal Bartha et al. (2020) estimate, for example, that of these five countries Hungary featured the lowest relative decrease of citizens' mobility as a result of social distancing measures.

Whereas using the COVID-19 crisis to strengthen the – oftentimes autocratically spirited – grip on power is a well-discussed phenomenon in a broad range of countries, Hungary has been, and continues to be, very much in the vanguard of this trend since the early days of the crisis. The announcement (on 30 March) of a time-wise unlimited rule by decree superseding the legislature's oversight capabilities was, probably, the internationally most visible element in this series of measures. Albeit subsequently abolished by Parliament (on 16 June 2020), the corona virus-related special powers (Lührmann and Rooney 2020) are expected to have long-lasting consequences, as substitution bills are still in place.

Specifically, on the same day the institution of so-called "semi-extraordinary legal order" was introduced, providing the government with exceptional authority vis-à-vis Parliament (Mészáros 2020). Further, the Penal Code was modified on 31 March to include a very broad and "flexibly applicable" regulation threatening not only "ordinary citizens" but the news media, too, whereby disseminating false or fact-distorting statements, if capable of "hindering or derailing the effectiveness of the response efforts", was made punishable by up to five years in prison. Within only a matter of two months 131 criminal procedures were launched based on this provision (*HVG* 2020). The funding and authority of local governments – having become a key, and oftentimes successful, arena of the political opposition – have been severely cut back, thereby purposefully threatening and disabling the not-government-friendly local communities, their local governments and, in the final analysis, the opposition parties and the healthy functioning of multiparty democracy (Hajnal et al. 2020).

The first wave of the pandemic resulted, in sum, in minimal human losses, but an almost quantum leap in terms of further entrenchment of the institutions of illiberal rule. Economic losses were, in terms of GDP loss, similar to the EU average, albeit efforts at alleviating them seem to be more modest than elsewhere (Bartha et al. 2020).

The policy priorities of the second wave were different from those followed during the first wave, and this difference was clear from the outset: in a broadly publicized interview, Prime Minister Orbán said that this time one should assess the government's policy success not on the basis of the number of new infections but, rather, on the basis of corona-related deaths (www.koronavirus.gov.hu). Despite this specific approach, the Hungarian border was closed to foreigners from 1 September 2020 (no other country in the region used this approach in autumn).

This policy is in effect at the time of writing: social distancing measures are largely absent (except obligatory face masks in indoor public settings), and - as a negative result - incidence figures are rapidly growing.

## Questions suggested by the CEE experience with COVID-19

The most obvious question connected to our case studies is – "Why did governments not use the spring experience to limit the impact of the expected second wave and why did they not prepare countries for the second wave better?" The current pandemic effects, especially in the Czech Republic, suggest that such a question is really relevant and should be addressed somehow.

Politics should be one of the dimensions to investigate in relation to this question. Countries in our sample provide a really different picture in relation to political aspects of reactions to the second wave. The Czech Prime Minister publicly apologized for the late reaction (HN 2020), the Slovak Prime Minister's message to people was "you let me down" (TASR 2020), and the Hungarian Prime Minister publicly announced new approaches to COVID-19, whereas in Estonia, the second wave is being addressed as basically a continuation of the first, only with a greater regional focus. Very different reactions, but maybe all of them could be connected to what has often been described as a common, "non-publicized" fact - in the spring, governments (and people, too) greatly overestimated what turned out to be the actual lethal threat, based on severely limited knowledge. For example in Hungary, tens of thousands of hospital beds were suddenly made available with great political and human loss, and none of them were used in the end, 16,000 very expensive ventilators were imported, but none of the equipment has been used). Whether the low numbers were the consequences of other aspects of the severe reactions remains the countervailing question. Another factor, limiting the capacity for fast reaction, could be the fact that political/popular support for harsh measures or even lockdown is much weaker now in autumn compared to spring - more and more people would simply not believe that the threat is real and are especially not any more ready to sacrifice their private rights because of COVID-19, and there is the general "pandemic fatigue" common in cases of elongated threats even such as war.

Another critical element (besides politics) to investigate should be the administrative capacity. In spring, all countries in our sample mobilized their administrative capacities to "over-maximum" level. For example Slovakia, which has occasionally been evaluated as one of the least good administrative performers in the European Union (Palaric et al. 2017), managed tasks connected with pandemic spread in spring really well (at least results suggest so). However, already in spring, the country's capacity to deal with economic and social consequences turned out to be very limited (Slovak socio-economic reactions seem to be the most limited from all four countries in our sample, for example from the point of the total sum and correct allocation of resources pumped into the national economy). The Hungarian case (huge allocations were made from the Disease Management Fund, but not in "proper" areas – for example to finance the usual stadium investments, World Hunting Exhibition, football clubs), however, indicates that the "quality" of

socio-economic responses of governments does not only have to be the result of the level of administrative capacities. The picture from summer, when the systems did not react in time and properly for the pandemic aspects of the COVID-19 crisis, may also suggest that limited administrative capacities may effectively react to an isolated problem, but not overall and in a long-term perspective.

Overall, it seems at the moment (October 2020) that the countries that have dealt with the crisis in a good way are the Confucian and the generally "Weberian" ones, from Taiwan, South Korea and Vietnam to Germany and New Zealand, that are built on administrative competence and state resources (Mazzucato and Quaggiotto 2020). In contrast, those countries where administrative capacity has been dismantled by NPM, first and foremost the United States and the United Kingdom, are failing. This is of course not the only reason for a good pandemic response, nor is it apparently sufficient. It is also true that many East Asian countries were successful because they were prepared due to the SARS epidemic and its response, but the quality of that response, and institutional memory, so far seems to rest on a high-value, high-capacity civil service (Drechsler 2020).

However, it has also been argued that the success of disease control during the first wave was not so much related to the quality of bureaucracies, inasmuch as failures (where they happened) were not so much those of implementation/bureaucracy but failures of policy makers (delays in decision making, controversial decisions and communication, etc.). Yet, the correlation between bureaucracies that are generally deemed capacity-oriented and a good COVID-19 result seems ascertainable so far. So, this is one of the research questions which will be crucial to answer – because what is a public sector worth if it doesn't help its country's people to survive? – but where a global and long-term scale will be important. Since CEE is a region with considerable variety in this respect, regional comparative studies may prove particularly fruitful once their time comes.

Another challenging issue to investigate is, "To what extent are citizens ready to give up their civil rights during a crisis?" This question includes, for example, the time dimension (for how long), the scale dimension, personal differences and also countries' differences (liberal-democratic versus authoritarian states – and here the paradox could set in that in the former countries, as there are more rights, it is easier for them to be relinquished). Resistance against harsh measures, especially if unexplained or arbitrary-seeming, is more and more visible almost everywhere. In some cases, court decisions support such resistance by claiming governmental measures adopted in relation to COVID-19 as illegal. In our sample, this is the reality for the Czech Republic and Slovakia – and this issue is also connected to administrative capacity: In most cases, negative court decisions are based on formal mistakes by the limitation-issuing authorities.

A closely connected issue to the above question is – "How to promote compliance with social distancing rules?" Many researchers dealing with COVID-19  $\,$ 

argue that compliance with the set of anti-pandemic measures by citizens is a critical success factor (from the point of control of the spread of infection). Slovakia, for example, was really successful from this point of view in spring, but not again in summer and autumn. As indicated also for Estonia, even top bureaucrats did not provide a consistent message in this relation. Is popular support for harsh and socially (extremely) costly measures (up to lockdown) possible to obtain and maintain unless a clear and highly visible crisis is there – with real casualties and visible suffering? Will the argument that harsh pandemic measures and health tolls actually do not clearly correlate with the economic performance of countries (*Financial Times* 2020) – as it seems at the time of writing – meet a receptive-enough audience, and if so, for how long? The last but not least important element for this part is the question whether one should rely more on positive motivation to achieve compliance ("We succeed together") or on negative motivation by means of restrictions – but maybe this question does not have a definite answer both from the perspective of country/region and time.

Finally, for the public finance perspective, it will be really interesting to see, not least in the CEE context, what the different financial measures were, why they differed, how they were implemented and what effect they actually had – as with the Global Financial Crisis, we may see a paradigm shift here, and with consequences for decades to come, so studying it in our area will be crucial both for the region and as a global sample.

Before concluding, we also need to stress that in this article all parts where we try to evaluate successes or failures in relation to fighting COVID-19 spread and its socio-economic consequences must be relativized. In reality, it is difficult, if not impossible, to rank countries as successful or non-successful. Even figures which may look very reliable are rather problematic. Let us to look for example at the data about the absolute and relative number of deaths. The approaches of countries how to calculate this figure differs: should we count these who died "with COVID-19", or only cases where COVID-19 was the primary reason of death? In our sample, for example, the figures for Slovakia look problematic – by mid-October, the death toll is much less than 1% – too low in the international comparison. Also, the number of infected is a problematic figure – for example, if few tests are delivered. Do people in evaluated countries really agree with different rankings prepared by international institutions and think tanks - for example in relation to the position/evaluation of their country? The research on many other political, institutional, economic, social, cultural and other consequences of the pandemic would be also really necessary. Just one example from our core area of research – how will the power balance, and the interaction, of different levels of government shift? To what extent will the need for prompt, uniform and uncompromised crisis management decisions become part of our governments' institutional memory and standard operating procedures, and to what extent will these stay institutionalized - possibly even overriding such previously undebated principles as subsidiarity – once the COVID-19 crisis ends?

#### **Conclusions**

As we said in the beginning, it is too early now to find final answers, but what is already possible is to open new lines of investigation and new dimensions in this general direction. Topics like COVID-19 and the possible switch to more authoritarianism, central government, and administration/rule of experts, health versus economy trade-offs, the role of civil society during crises, international co-operation, etc., are really challenging but also just as important. Research about these topics in Central and Eastern Europe will also show us whether it is still possible to speak of the region as a region (Randma-Liiv and Drechsler 2017), but first phenomena seem to speak once again more for than against it. And once more, research in and about CEE will both be necessary and interesting for scholarship and policy in the region, and – as a particularly interesting context and area – helpful, one hopes, for questions and answers globally, concerning the pandemic, as well as public administration and policy as a whole.

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