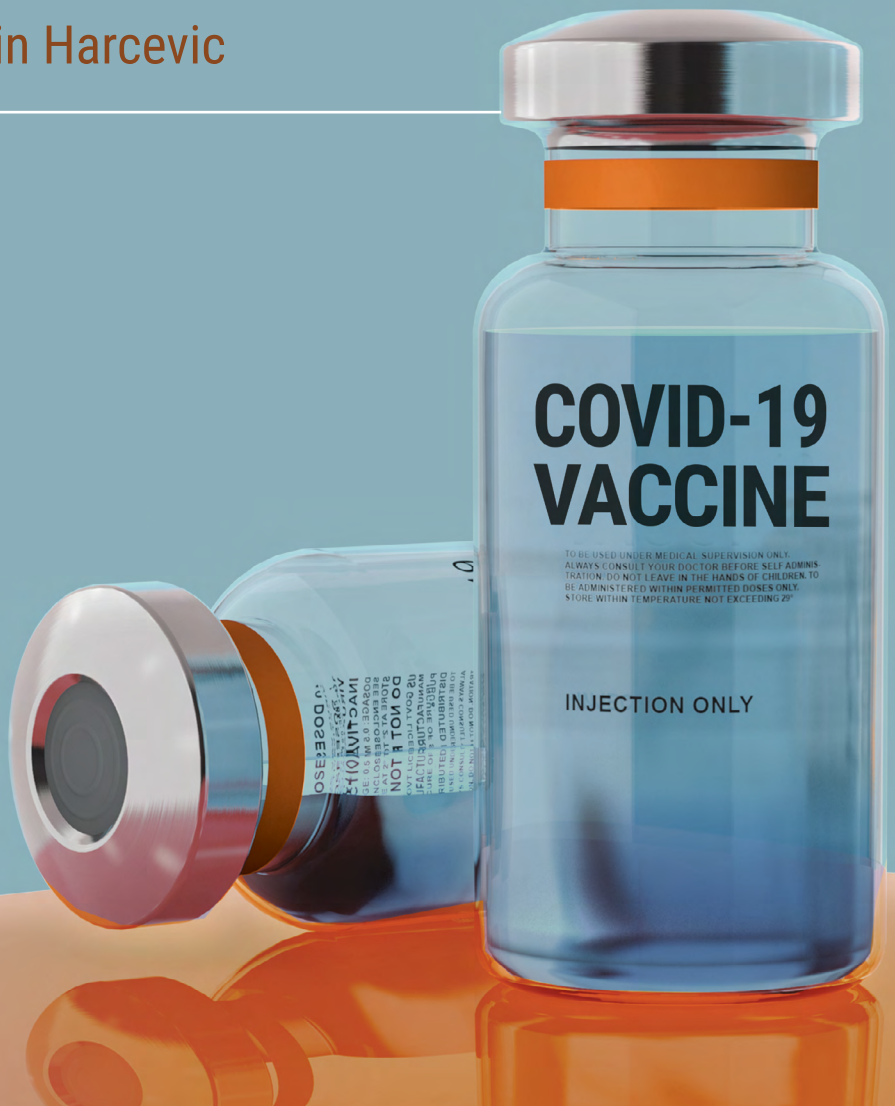


BOSNIA AND HERZEGOVINA

PANDEMIC MANAGEMENT LESSONS LEARNED FOR A MORE SECURE FUTURE

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Methodology

The research was based on obtaining data from primary and secondary sources. With regard to primary sources of data, requests for free access to information were sent to appropriate institutions in Bosnia and Herzegovina. Such an approach sought to remove gaps and ambiguities in the process of obtaining data from secondary sources. From the latter, official reports of international and domestic institutions, scientific and professional articles and online media articles were used.

Background

COVID-19 is a respiratory infection caused by SARS-CoV-2 (a virus that, by its characteristics, belongs to coronaviruses) and first appeared at the end of December 2019 in Wuhan, in the Chinese province of Hubei. In January 2020, an epidemic first broke out in the People's Republic of China and shortly spread worldwide. COVID-19 is transmitted when people breathe in air contaminated with droplets and small airborne particles that contain the virus. The risk of inhalation is highest when people are in close contact, but they can also be inhaled at greater distances, especially indoors. By 15 February 2023, 677,980,081^[1] cases of COVID-19 have been confirmed worldwide, of which 6,784,081 people have died. At the end of 2020, the first vaccines against COVID-19 were developed, and the first vaccine officially approved by the WHO was Pfizer-BioNTech^[2]. Three years after the outbreak of the COVID-19 pandemic, in most countries of the world the situation had been brought under control and the world had returned to the activities and the way of life which existed before the COVID-19 pandemic.

Context

In order to explain the challenges faced by the system in Bosnia and Herzegovina (BiH) after the declaration of the COVID-19 pandemic, it is necessary to analyze the structure of the system in BiH, given that crisis management plans, orders and strategies were not adopted at the level of the entire country, but at the entity level [Federation of Bosnia and Herzegovina (FBiH), the Republic of Srpska (RS)] and Brcko District of BiH (BD BiH)]. The first case of COVID-19 in BiH was recorded on 5 March 2020, and until 15 February 2023, 401,499 cases of COVID-19 were recorded in BiH, out of which 16,265 people died^[3]. In February 2021, the first vaccine^[4] (SPUTNIK V) arrived in BiH, and so far, 846,080 people in BiH were fully vaccinated against COVID-19. Currently, there are no measures in force regarding COVID-19 in BiH, and citizens have returned to their usual life activities.

The COVID-19 pandemic and its economic consequences had a relatively large impact on the population and economy of BiH. For this purpose, countries around the world, including BiH, introduced measures to prevent the spread of the disease by imposing certain restrictions on citizens (restriction of movement, closure of state borders for foreign citizens, curfew, prohibition of gatherings, instructions to stay at home, quarantine, mandatory home isolation, encouraging avoidance of close in-person contacts) which in turn led to the restriction of certain individual rights and freedoms of citizens. The emergence of the COVID-19 pandemic posed a serious challenge to both international and domestic systems and their institutions. The measures that were implemented were quite restrictive, and as they were adopted at different levels of government in BiH, they produced a certain kind of confusion among the citizens, which led to the creation of numerous conspiracy theories, both by the media and by the citizens themselves. Thus, in a video that was shared several thousand times on Facebook, citizens were advised not to trust doctors and to treat COVID-19 with honey and propolis because pharmaceutical companies were concealing natural remedies. In the video, a woman explains how tests for COVID-19 take human DNA, and after that doctors create a certain type of a chip. She states that the tests are also proven not to work, *i.e.*, they do not show that someone is sick at all, but simply as soon as a person has a slight fever or feels some weakness, they show a positive^[5]. Also, on 17 September 2020, the N1 portal unfoundedly concluded that the daily balance of newly infected people “broke the records”. The official data of the institutions say that, unfortunately, higher figures were recorded at the end of July 2020^[6]. The fact that the Bosnia and Herzegovina Pandemic Influenza Preparedness and Control Plan has not been updated for 14 years shows how unprepared BiH was to adequately respond to all the challenges that the COVID-19 pandemic brought. The challenges beg the following questions to be asked: Were proper and timely steps taken to prevent the spread of the virus? What was the level of coordination between national and international actors in addressing the emergency? What is the cause of high mortality in BiH from COVID-19?

In an attempt to answer these questions, and by analyzing BiH’s systemic response to the COVID-19 pandemic, it can be said that COVID-19 did a lot of damage to the already fragile health system in BiH. According to the CEOWORLD Health Care Index^[7], which ranks 89 countries according to factors that contribute to overall health, the healthcare system of BiH is in the 75th place. The healthcare system in BiH is characterized by great fragmentation, given the fact that it is organized in different ways in the entities of FBiH, RS, and BD BiH. In terms of organization, this system functions through 13 completely different subsystems at the level of the entities of RS and FBiH, cantons^[8] and BD BiH^[9] which significantly complicates how the necessary health services are provided^[10]. The COVID-19 pandemic exposed the real state of the healthcare system in BiH. According to existing personnel norms in the healthcare system^[11] in FBiH there is a shortage of almost 50% of medical doctors specializing in public health. In the FBiH

entity, an evident lack of human resources was observed both in certain clinical disciplines and in the field of public health, especially in the field of epidemiology, as this entity had 46 epidemiologists and 170 anesthesiologists in 2020^[12]. As for the RS entity, there were 31 epidemiologists and 85 anesthesiologists^[13], and in BD BiH there were no epidemiologists at all, while a total of 6^[14] anesthesiologists were employed in BD BiH in 2020^[15]. Given that BiH is moving towards the EU, it can be said that there is a certain shortage of medical specialists if we take into account the data from neighboring Croatia, which is a member of the EU. Namely, according to data from 2021, Croatia (which has 340,674 more inhabitants than BiH)^[16], had 159 epidemiologists and 715 anesthesiologists.^[17]

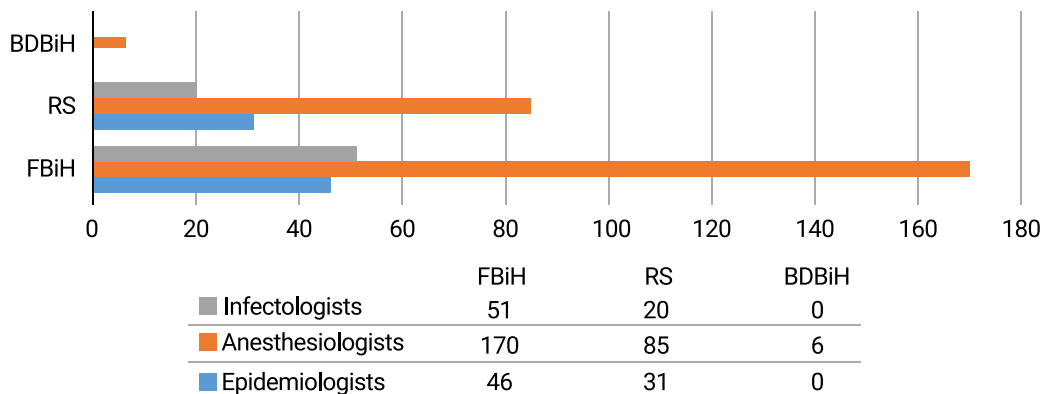


Figure 1 - Medical specialists in BiH in 2020

When it comes to the number of beds and ventilators, 7,850 beds were available in FBiH in 2019 [1 bed per 282 inhabitants (2013 population census^[18])], out of which 533 were designated for intensive care, and the number of available and usable respirators was 212.^[19] Also, in 2019, 4,692^[20] beds were available in RS [1 bed per 261 inhabitants (2013 population census)], while in BD BiH there were 315 beds available [1 bed per 265 inhabitants (census population from 2013)], and they had 4 usable respirators at their disposal. When it comes to the number of beds, BiH lags behind the neighboring Croatia, given that Croatia had 22,618 beds^[21] in 2021, [1 bed per 171 inhabitants (2021 population census)].

The core of the problem for the already damaged healthcare system in BiH surfaced on March 5, 2020, when the first case of SARS-CoV-2 infection was officially recorded^[22]. To prevent the further spread of the virus, on 16 March the governments of BiH^[23] and FBiH^[24] declared a state of natural or other disasters, the government of BD BiH^[25] did so on 31 March, while on 28 March a state of emergency was declared by the government in the entity of RS^[26]. This also meant the adoption of appropriate health and socio-economic measures by the relevant institutions in BiH (FBiH Government, RS Government and BD BiH Government) through established crisis staff (Crisis Staff of the Federal Ministry of Health, Republican Headquarters for Emergency Situations of the entity of RS and Headquarters for the Protection and Rescue of BD BiH).

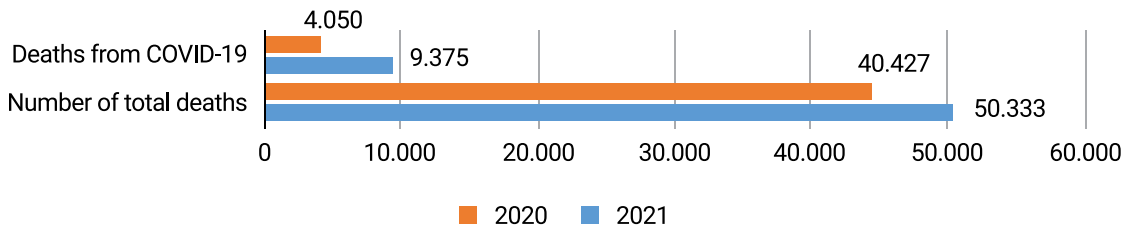


Figure 2 - Death cases in BiH^{[27] [28] [29] [30]}

Despite numerous measures adopted in 2020 and 2021, a total of 92,930 people died in BiH, out of which 13,428 or 14% died because of COVID-19. When comparing the number of deaths, the mortality from the consequences of COVID-19 in 2020 was 9%, while in 2021 that percentage increased to 19%. This figure shows that in 2021, 1 out of 5 deaths in BiH was the result of COVID-19. The increase in mortality raises doubts about the systemic decisions and the way of managing the pandemic by the competent levels of government in the BiH, as well as about the compliance of the population with the measures adopted by the authorities. The total number of deaths in BiH from COVID-19 up to 15 February 2023, is 16,265^[31] making BiH the fourth country in the world in the number of deaths from COVID-19 per million inhabitants^[32]. 19 January 2021 was marked as the day with the highest number of recorded cases in BiH (3,342^[33]), and 30 March 2021, as the day with the most deaths (99^[34]).

When it comes to personal protective equipment (PPE), it was in short supply in healthcare facilities at the beginning of the pandemic. Thanks to donations from the EU, UN, WHO, UNDP, USA and numerous European and Asian countries, the situation with medical equipment and PPE has stabilized^[35]. The initial deficit with PPE was used by the BiH authorities to non-transparently procure the PPE from companies that had no previous experience in the procurement of medical and PPE equipment and that are not in the public register of sellers of medical equipment of the BiH Medicinal Products and Medical Devices Agency. Due to the emergency, the institutions conducted procurements according to accelerated procedures, without active competition, and numerous cases of abuse were noticed in that process, as the BiH Public Procurement Agency warned. Medical equipment and PPE were purchased from companies engaged in non-related sectors such as construction, agriculture, tourism, furniture production, etc.

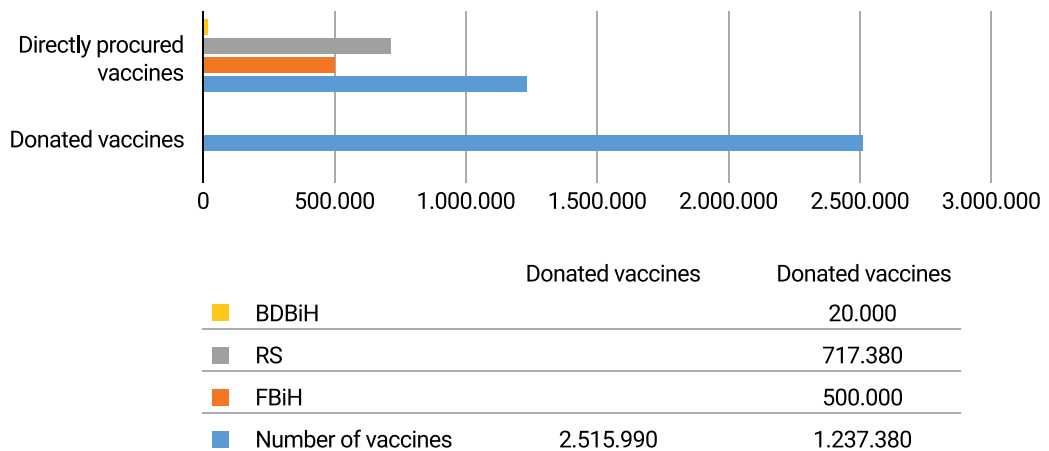


Figure 3 - Vaccines in BiH

Vaccines and ventilators were procured following the same pattern. The largest number of vaccines delivered to BiH came through donations from other countries (2,515,990), and the largest donations came from Austria (498,800), Poland (328,770) and Bulgaria (308,570). Through direct purchase, the RS Government (Sputnik V – 397,380, Sinopharm – 320,000), the FBIH Government (Sinopharm – 500,000) and the BD BiH Government (Sinopharm – 20,000) acquired a total of 1,237,380^[36] vaccines.

A share of the vaccines directly procured by the FBIH Government (500,000 Sinopharm) was characterized by the non-transparency of the procurement procedure. The FBIH government avoided implementing the BiH Public Procurement Law in this procurement process under the emergency justification, even though the vaccine procurement process had lasted over three months, which is contrary to the legal provisions that define exemption from the public procurement process due to urgency. Furthermore, the said contract was marked with secrecy for a period of 10 years. In addition, there are researchers who indicated that the delivery of Chinese vaccines was delayed due to the diplomatic actions of BiH's officials in condemning the violation of human rights of the Uyghurs, but also due to the suspension of the Block 7 energy project in Tuzla (FBIH) in which a Chinese consortium participated.^[37] On the other hand, the Chinese authorities delivered all of the ordered doses to the entity of RS on time. Thus, BiH joined those countries that were pressurized by the Chinese authorities to achieve other foreign policy goals^[38]. When it comes to vaccination rate, 943,394 people or 26.7% of the population (census 2013) of BiH received at least one dose, and 846,080 or 24% (census 2013) of citizens are fully vaccinated. By comparing data from neighboring countries, it can be established that the population of BiH received the lowest number of vaccines against COVID-19.

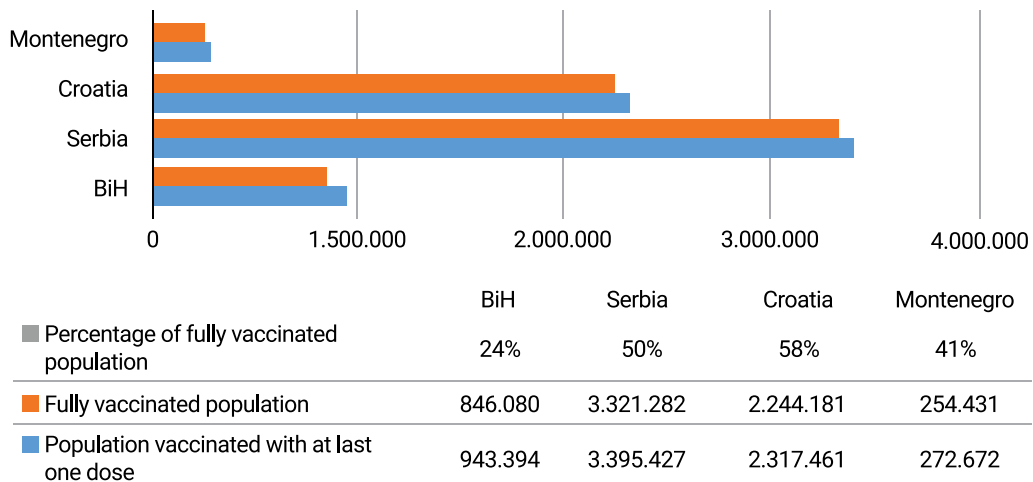


Figure 4 - Vaccination Progress by Country^{[39] [40] [41]}

Conclusion and Recommendations

The lack of a coordinated proportional response, government institutions that independently issue orders without intra-state coordination, lack of respect for human dignity, lack of consideration for the needs of the most vulnerable persons and numerous scandals in the public procurement process marked the response of the authorities in BiH to the COVID-19 pandemic. The introduction of various types of restrictions and measures meant that the rights and freedoms of citizens of BiH were seriously affected and restricted for a relatively long time. The measures that were implemented were quite restrictive and proved, to a certain extent, effective in suppressing the spread of the virus. They fulfilled, again to a certain extent, the obligations of ensuring the right to health in the country. However, the restrictions imposed were not based on scientific data, nor were less restrictive measures considered, and often the restrictions were not time-limited, which resulted in human rights violations. The easing of restrictions was implemented in the same way as their adoptions, resulting in the increase of distrust of the general population towards the authorities.

Certain problems also existed because citizens often did not know where to find relevant information due to the eruption of “clickbait media” and groups on social networks promoting pseudoscience, and trust in state-generated information was not at a highest possible level^[42].

Another problem in the overall situation surrounding the COVID-19 pandemic in BiH is the very questionable legality and constitutionality of decisions made by authorities at different levels, as well as the lack of a time limit for certain decisions. This kind of situation, in addition to exceeding the powers and disproportionately derogating human rights, represents a major legal and factual violation of the law and constitution in BiH, as well as taking too much power into their own hands by state authorities, at the expense of citizens. Taking these findings into account, in order to ensure a better response to the pandemic in the future, the authorities in BiH should consider the following recommendations:

- Coordinating approach to adopting measures at the state and entity level;
- Ensuring transparency and consolidation of all relevant information in one place and easy access to relevant rules and guidelines issued by competent authorities;
- Updating the existing Bosnia and Herzegovina Pandemic Influenza Preparedness and Control Plan, which has not been updated in the past 14 years - since its adoption in 2009;
- Adopting mechanisms of proactive and transparent communication with citizens during a crisis as a way of capturing an advantage that will not be achieved if the government decides always to defend its work, i.e., not to admit its mistakes^[43].

- Maintaining the security of information, allowing access to information, directing the communication process, using various adequate communication channels, being available to all media and the public, and maintaining a connection with them.
- Promoting dialogue and innovative cooperation of the government with the business sector, civil society, citizens, media, etc.;
- Increasing transparency of public procurement contracting and information about the contract implementation process, whenever possible;
- Taking care of vulnerable and marginalized citizens in times of crisis, including victims of violence, through adoption of measures and recommendations for expedient action;
- Including representatives of the Center for social work in the crisis headquarters in order to ensure that recommendations will not further endanger vulnerable groups of citizens.

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