Sweden’s policy in the Corona crisis has been subject to a lot of discussion in international media recently. Some point to the country portraying “the Swedish way” as a valid policy alternative to the forced lock-down of society, others criticize the Swedish government for being imprudent. Given the pace with which the virus spreads and considering the volatility of current events, it is premature to draw any definite conclusions. But it is certainly time to start an informed policy discussion. The webinar “The Swedish Exceptions: Early Lessons from Sweden’s different approach to COVID-19, jointly organized by the Stockholm Institute of Transition Economics (SITE) and the London School of Economics (LSE) on April 22, 2020” brought together academics from different relevant disciplines from Scandinavia, the UK and the US. The webinar allowed to discern a few of the motivations behind the Swedish policy choices as well as a number of criteria which will serve to measure the success of governments’ responses to the Covid-19 pandemic in the future.
Understanding the Swedish Approach to Covid-19

Much has been written and said about the Swedish reluctance to impose a strict lock-down on the country: the Swedish government has so far relied mostly on expert recommendations, avoiding from more stringent policies such as the strict lock-downs imposed by for instance Sweden’s neighboring countries Norway and Denmark (more on Sweden in the Covid-19 crisis here). The majority of the speakers in the webinar agree that the Swedish policy in the Corona crisis has been an outlier, even with respect to traditional Swedish policy: Peter Baldwin, historian and professor at the University of New York and the University of California, Los Angeles, argued that Sweden has had an interventionist tradition with respect to social and health policy in the past. “Native policy traditions” therefore do not explain why Sweden has chosen this policy course in his view.

While it seems difficult to pin down historical or ideological reasons behind the Swedish policy stance with respect to Covid-19, Lars Trägårdh, professor of social history at Ersta Sköndal Bräcke University College in Stockholm, pointed out that even though the legal differences may seem stark, the difference in the policy impact may be smaller than expected, the crucial factor being the degree of compliance with a certain measure or recommendation and not its legal force. Trägårdh further argued that, since it may take many months to develop a vaccine, the sustainability of a given policy strategy is essential. According to him, a policy relying on voluntary compliance as the Swedish one rather than legal obligation, may therefore yield comparable effects in the short and medium run and could even turn out to be more successful in the long run.

Trägårdh argued that the true exceptionality of the Swedish response to the global pandemic has been the choice to not close elementary schools. This policy choice can be explained above all by the concern for children’s rights: for smaller children, digital learning simply is not a valid option. As declared by the government on several occasions, another reason is that parents working in professions such as healthcare may be induced to stay at home if schools are closed. Finally, Trägårdh cited a recent study from Iceland which suggests that the effect of closing schools on limiting the spread of the virus may be relatively small.

Later in the discussion, another potential argument in favor of the Swedish strategy emerged: Professor Sara Hagemann from the LSE School of Public Policy described the difficulty of leaving a lock-down, which Denmark is currently experiencing. The question which measures are to be lifted and which sectors of the economy are to be opened first has caused considerably more controversy than imposing the initial lock-down. In contrast, the public debate in Sweden can immediately focus on dealing with the long-term consequences of the crisis according to Trägårdh.

The significance of the concept of “herd immunity” (meaning the protection from disease arising from large percentage of the population having developed immunity) for the Swedish strategy is unclear. Baldwin pointed out that even though Swedish authorities have declared not targeting herd immunity, many measures implicitly seem to be aiming for this outcome.
Results of the Swedish Approach Until Today

Tom Britton, professor of mathematics at Stockholm University, agreed that the Swedish response to the Covid-19 crisis came late and that there has been too little testing. However, he argued that the government’s policy has been consistent, focusing on reducing the spread of the virus and protecting risk groups and especially the elderly. Whether Sweden has achieved the latter goal is still up to discussion, though. As of April 2020, reported infections and deaths in nursing homes had increased, which according to Trägårdh has been the major failure of the Swedish policy response up until today. Yet, the speakers agreed that the Swedish government’s measures have received a lot of public support within Sweden so far, which is a non-negligible factor for the long-term success of the strategy.

General Policy Conclusions

Professor Ole Petter Ottersen, president of the Karolinska Institute in Stockholm, Sweden’s largest centre of medical research, stressed the speed with which the virus has been spreading: the rapid development forces policymakers to quickly take decisions based on limited information. Given the lack of data, Ottersen called for politicians to practice humility and acknowledge the uncertainty surrounding policy choices. According to him, it will take years to evaluate whether the Swedish model or the Norwegian model of a quick and strict lock-down is better suited to fight the pandemic.

Policymakers around the globe face a dilemma: for sustainable crisis management and given countries’ interdependency, measures meant to fight the spread of Covid-19 should be aligned internationally and taken cooperatively. Yet, as Hagemann pointed out, it is clear that one policy cannot fit all: countries differ for instance with respect to their socio-economic structure, health care quality and availability, demographics, and with respect to the point in time when they were hit by the virus. This is not only the case between countries, but even within countries, which could justify a differentiated approach between rural and urban areas in some instances. In other words, all models and policy recommendations have to be adapted to the specific local setting. A strategy which allows for making local adjustments while maintaining a global perspective will be a major challenge for policymakers in the coming months and, likely, years.

Britton stressed the importance of understanding the limits of the models being used. Their predictions depend on a lot of assumptions regarding for instance how individuals behave and to what extent rules and regulations are being respected. Anti-body tests will soon provide more data on the actual spread of the virus, but even then, major questions, such as how to treat a potential trade-off between preventing deaths from Covid-19 vs. the socio-economic and health costs caused by a lock-down, will remain unanswered. This trade-off is country specific as well: Hagemann argued that Sweden and the other Nordic countries have quite successfully implemented remote working and learning options. This, however, will not be feasible in most developing countries, for instance, which necessarily affects the cost-benefit analysis of the available policy options.
Further, data collection and availability undoubtedly need to improve. As long as no better instruments of analysis are available, both scientists and politicians should be transparent about the simplifying assumptions and models they base their policy recommendations and decisions on.

Finally, despite their different academic backgrounds, all experts agreed on the need to take into account the indirect consequences of both the spread of the virus and the policy measures implemented to fight it. Covid-19 is likely to reinforce social inequities. For instance, it has been shown that in Stockholm, immigrant communities have been hit the hardest. As soon as the imminent health crisis is under control, the policy focus therefore has to shift towards the socio-economic consequences of the crisis.

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Ole Petter Ottersen, Karolinska Institute, Stockholm
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