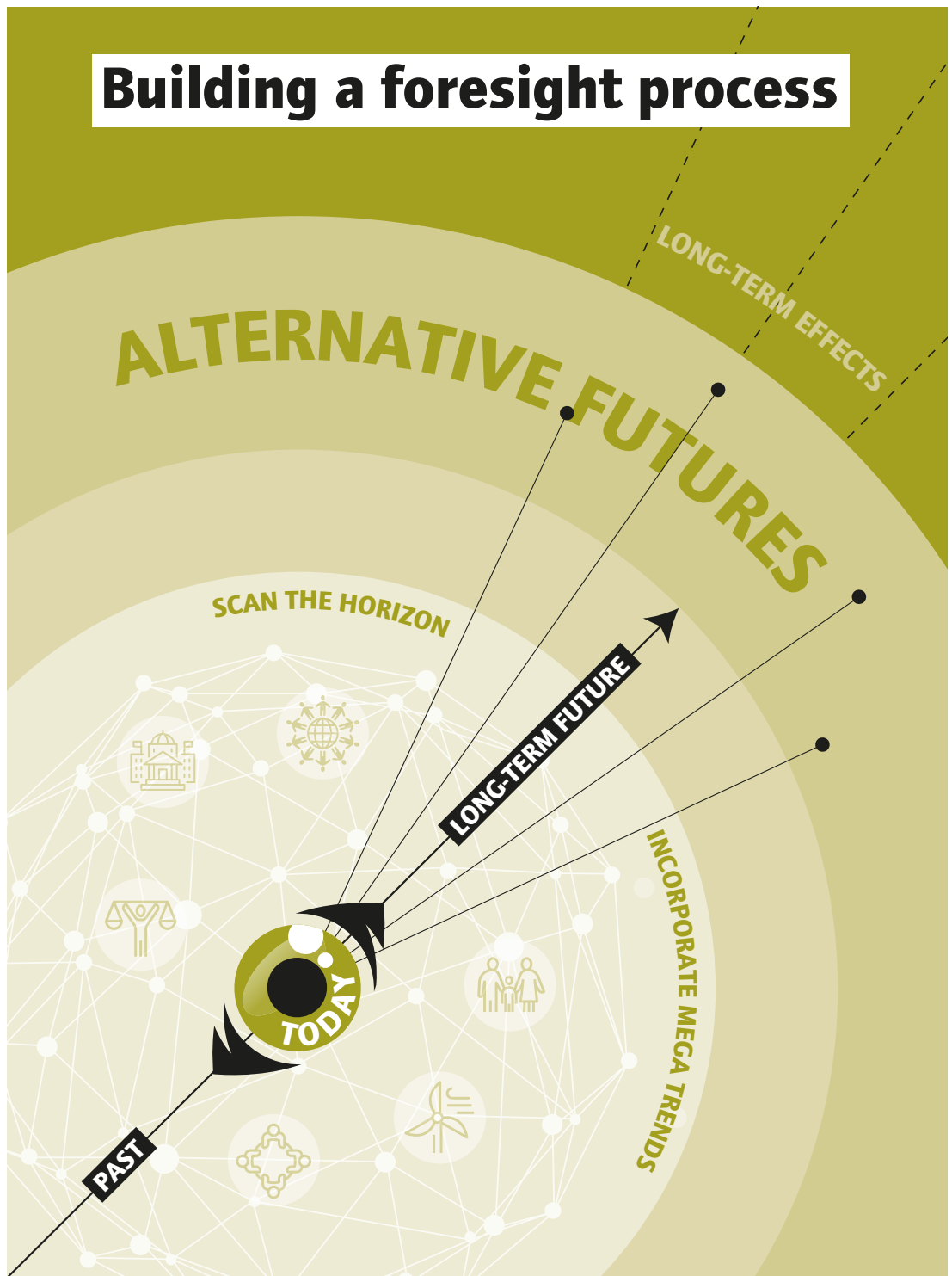


# Foresight: and then what?

## Building a foresight process



Source: Aida Ponce del Castillo (2020) / design: Aymone Lamborelle (ETUI).

### Foresight in fair weather

Before examining the possible transformations in this time of crisis, it should be noted that foresight is also a tool for anticipation even when the weather is fair, so to speak. For instance, a number of studies were published a good while before the outbreak of this pandemic that clearly identified the inherent vulnerability of our societies and, above all, how ill-prepared they were to cope with an event such as this. One of them was published in 2006 by the UK Office of Science and Innovation (OSI, London) as part of a foresight programme it conducted (Brownlie

et al. 2006); a second one was included in the French government's 'White Paper on Defence and Security', published in 2008 (Commission sur le Livre blanc 2008); and a third one was published almost exactly one year before the start of the pandemic, in January 2019, by the World Economic Forum in collaboration with the Harvard Global Health Institute (WEF 2019). These three papers have been highlighted, but many other documents could also have been cited, such as the European Commission's paper (2005) on strengthening coordination at EU level on generic preparedness planning for public health emergencies, or, at the global level, the WHO's guidance (2018) on how to manage pandemics.



*It is fair to say that the Covid-19 pandemic should not be understood as a 'black swan'."*

## **A perfectly predicted pandemic**

The first of these reports, published by the OSI and involving more than 200 experts and stakeholders, looked at eight major categories of health risks, including acute respiratory infections (ARIs) and coronaviruses such as SARS. This study clearly mentions, as early as 2006, that new ARIs could spread around the world very rapidly (in a matter of weeks) causing millions of deaths worldwide, and tens of thousands in the UK alone (p. 44). The report explains in detail, 15 years before the Covid-19 pandemic, the four reasons why this type of threat must be taken very seriously: very 'fast-moving' infections, infected persons without symptoms (undetected transmission), high transmission potential, and an absence of vaccine or drug treatment once the outbreak is detected. The second study, published by the French government in 2008, stresses that 'over the next 15 years, the emergence of a pandemic is plausible' and that it is necessary to create 'European stocks of medicines and [coordinate] the management of the various necessary safeguards'. And the third report, published as recently as 2019 by the World Economic Forum, delivers a very clear warning: 'The world remains ill-prepared to detect and respond to outbreaks and is not prepared to respond to a significant pandemic threat' (p. 8).

## **A lack of foresight strategy leads to chaotic responses**

These warnings did not, however, prevent a chaotic management of the health crisis that broke out in the early months of 2020, as we saw in many countries. In countries such as the United Kingdom, this was due to delayed, contradictory, or even seemingly whimsical policy responses in the early stages of the epidemic (House of Commons 2020). In certain cases, there were logistical failures affecting the sourcing and stockpiling of personal protective equipment; in France, for example, a journalistic investigation showed how, due to a change in doctrine prior to the crisis and, above all, budgetary cuts, stockpiles of protective masks were still being destroyed as the pandemic was spreading. This investigation has led to the setting up of a parliamentary commission of enquiry (Davet and Lhomme 2020). Then there was the clear inability of certain countries to effectively manage the first surge in the number of patients requiring hospital and intensive care treatment; an underestimation of the health crisis silently developing in care homes and hospices; the various, often haphazard, attempts to develop streamlined and effective test-and-trace strategies; and, last but certainly not least, the budget cuts in the field of health decided on by the heads of state or government at the meeting of the European Council in July 2020, i.e. in the midst of the pandemic. Whatever the specific combination of factors, it is fairly clear that historians will not be

kind when looking back at how the majority of EU Member States dealt with a pandemic that, as noted above, should not have caught them by surprise.

## **Was the EU prepared?**

In the face of this unpreparedness on the part of the governments of the European countries, the EU in itself did not have the necessary powers to harmonise measures. The Constitutional Treaty that was signed in 2004 provided for legislative harmonisation tools to monitor and combat 'serious cross-border health threats', but the treaty was rejected in 2005, and such tools were replaced by 'incentive measures' in the Lisbon Treaty of 2009. The results of such legislative constraint showed in the weakness and inefficiency of policy measures taken at the beginning of the 2020 pandemic. Lessons will need to be learned to lay the foundations for 'a better future for the next generations' (European Commission 2020e).

## **No one is well prepared for what they do not anticipate**

All things considered, it is fair to say that the Covid-19 pandemic should not be understood as a 'black swan'. The term black swan was coined by Taleb in 2007 and refers to a totally unpredictable, rare event with an immense impact. The pandemic, on the contrary, was a totally predictable event which many governments chose not to arm themselves against, often due to budgetary restrictions or, some may argue, even negligence. As lucidly underlined by the European Commission in its first Foresight Report, published in September 2020, 'Health systems in several Member States, as well as the pharmaceutical industry, were not fully prepared, experiencing problems including shortages of personal protective equipment and chemicals required for the production of pharmaceuticals. Notably, Europe struggled to prepare and coordinate when the first warnings began to emerge from China.' (European Commission 2020d; see also ETUI and ETUC 2019: 33). In 2015, in its contribution to the policy debate on the capacities of healthcare systems in Europe following the 2007 crisis, the ETUI pointed out that 'the current emphasis on long-term economic sustainability risks depriving European health systems of what they need to do: to provide citizens with effective and timely access to high quality medical services' (Stamati and Baeten 2015: 183). And as early as 2014, Stamati and Baeten were criticising the fact that while the EU's post-2007 crisis 'fiscal consolidation policies focus on stronger public controls, the EU internal market rules have a creeping deregulatory effect on health systems' (see also chapters 2 and 5 in this volume).

It is beyond the scope of this chapter to examine why 'pre-Covid' foresight studies do not appear to have resulted in improved pandemic preparedness. But the lesson of foresight here is that any society, government or organisation is ill prepared for events that it does not anticipate.