# THE MANAGEMENT OF THE COVID-19 CRISIS BY THE FRENCH AUTHORITIES

# Alexis Troude<sup>1</sup>

Abstract: The health crisis is indicative of France's delays in the health field. The government has not been able to buy enough masks, nor has it been able to stimulate a national mask industry as in Serbia. Then, the decontamination in the summer of 2020 was done without any medical measures, and the testing policy was conducted without rules or isolation of the patients. Finally, even the battle of vaccines was lost by France because the Institut Pasteur failed to create a vaccine, although the laboratories AstraZeneca and Pfizer are led by the French! But this health crisis has also revealed the French administrative burden. Based on a Jacobin model, the French administration was very slow to grant the necessary permits: masks, tests, vaccines. In addition, the measures were badly experienced because they still concerned the entire national territory and made no distinction between contaminated zone and green zone, fraudsters and the majority of French who applied the measures. But all this has given rise to coercive measures that are beginning to weigh on the psyche of the population but also on the fundamental laws. In two weeks, the authorities distributed 177,000 fines, sometimes at 6:03 pm when leaving grocery stores. No public place (cafes, restaurants, theatres, museums) has been open since September 2020, which has led to numerous complaints from private actors before various courts. The health crisis has finally revealed social and economic inequalities in France. Taking up a Marxist analysis, the richest linked to globalization continued to travel, do business and take refuge in telework in their secondary residence in the provinces, and the popular classes continued to be supported by a state which suddenly became protective thanks to a massive and unique system of partial unemployment in the world. Between the two, the middle classes have been sacrificed, continue to go to work, use public transport and undergo traffic restriction measures.

Keywords: health crisis, human rights, public freedoms, social inequalities, France.

<sup>&</sup>lt;sup>1</sup> Professor, The University of Versailles, Versailles, France, troudealexis@gmail.com.

As a leading British periodical rightly wrote in March 2021, a year after the crisis began, "France is the only country that combines British-style curfews, German-style travel restrictions and Italian-style screening. He had forgotten that the French authorities had imposed a measure that was unique in the world: self-authorisation to travel, like an "ausweis" that everyone had to sign before leaving their homes for any reason whatsoever. However, after a year and a half of health crisis, the figures are overwhelming for the French health authorities: 111,000 deaths, 250 days of curfew, nearly 130 billion paid by the State for the partial unemployment scheme, 360,000 jobs lost, not to mention the staggering increase in suicides and depressions.

Even the usually mainstream intellectual Bernard Henry Lévy used the term "coronafolie" at the beginning of the crisis to describe both the fear propagated by the dominant media and the manipulation of this fear by the health authorities. But the world's largest welfare state, which provides 15% of the world's welfare for 1% of the world's population, has been overtaken by events. In the first phase, the 6th industrial power no longer produced masks. Then, a policy of free tests, all over the place but in a haphazard way, did not reduce the contamination. Finally, Pasteur's country was unable to produce a vaccine and had to rely on private Anglo-Saxon firms, which slowed down vaccination.

The French have fallen in the face of the repeated errors and failures of their state. They, who have had complete faith in the regal authorities since Louis XIV and Napoleon Bonaparte, will give much less credence to government measures that contribute to the authorities' legitimacy crisis. The battles between experts and pseudo-scientists, relayed by a media system in search of sensationalism, have severely undermined confidence in medicine and, more broadly, in science. These cracks have serious medium- and long-term consequences for liberal democracies, which are based on a certain degree of public support for thinking heads and experts.

Can we fear a new economic and social crisis?

Has France ever experienced such a restriction of public freedoms in peacetime? Will democracy remain the same after this health, political and social disaster?

# WHAT MISTAKES WERE MADE IN MANAGING THE HEALTH CRISIS THAT THEY DID NOT MAKE?<sup>2</sup>

From the very beginning of the health crisis, the negligence of the State and the administrative mille-feuille prevented any orderly and planned management of COVID-19.

<sup>&</sup>lt;sup>2</sup> Perronne, C. (2020), *Y a-t-il une erreur qu'ils n'ont pas faite?*, Paris, Albin Michel.

In the spring of 2020, France ran out of masks. Indeed, the stock of masks that, according to the Orsec mechanism, is required in the event of a pandemic or chemical attack no longer exists. President François Hollande ordered the destruction of the existing stock for cost reasons, arguing that since the H1N1 crisis, the management of this exorbitant stock has been too expensive. Now, we know that in January 2020, at the first signs of the pandemic by epidemiologists, Agnès Buzyn, Minister of Health, refuses to reconstitute one, even in a minor way. Is it because her husband, Yves Lévy, was President of Inserm (National Institute of Health and Medical Research)? Appointed State Councillor in November 2019, he had to study the texts proposed by his wife as Minister, which leaves doubt about a conflict of interest at the highest level of the State.

The government then tried to buy masks to replenish the stock, but with the reflexes of an omnipotent state. As a result, on the airport tarmac, it is Donald Trump's emissary in person who snatches the deal by paying full price for a shipment! While the population is forced to endure the absence of masks, with the formal prohibition on doctors and pharmacists supplying or even selling them, the shortage is organized by the state. In order to hide these first serious errors in the management of the health crisis, experts explain, with pictures to support it, that for lack of sufficient knowledge, it is, in any case, recommended to people not to wear masks (Dutroux, 2020). Sibeth N'Diaye, Secretary of State, laughs in front of the camera when a journalist asks her if it is necessary to wear a mask, claiming: "it's not necessary, it's useless". Entire sections of what the government has described as "frontline jobs" are unprotected against the virus: bus and metro drivers, maintenance workers, and caregivers (Deweter, 2020). Doctors and hospital staff have very few masks, leading to the unacceptable deaths of dozens of them during the first containment (March-April 2020).

The second negligence is displayed and proclaimed loudly and clearly by the governing bodies to refuse to treat the population. Medicines such as Plaquenil, Ivermectin and even Hydroxychloroquine were banned from use in France for the duration of the crisis. The official line, relayed by the Ordre des Médecins, was that these drugs could cause lesions worse than COVID-19. However, Hydroxychloroquine, a drug used for a long time in Africa against malaria and other types of viruses, taken in time at the first symptoms, can cure COVID-19. The best example of this is the institute run in Marseille by epidemiologist Didier Raoult (IHU Méditerranée) which, thanks to Hydroxychloroquine, treated 13,437 patients between February and September 2020. We also know that the wife of the French President, and even Donald Trump, were lucky enough to be treated with this drug to cure COVID-19. This brings us to the heart of the matter: in 2020, did a well-known, efficient and inexpensive treatment bother certain leaders who preferred to develop tests that

were much more costly for the community, or even by not using this treatment, would it not be an open door to the world's major pharmaceutical laboratories, which could then find a vaccine that was much more profitable?

Finally, the third major failure of the French policy against COVID-19 lies in the tests. It was chosen, according to the sacrosanct idea of the French Welfare State, to carry out massive tests on the population in a random and non-coercive way, relying on the Social Security system to cover the costs. So, from September 2020, millions of free tests were offered, both to the French population and foreigners passing through. But as this testing campaign was carried out without constraint and without any regulatory framework, individuals were tested almost daily, without any symptoms of COVID-19, while patients were not required to undergo any tests. Worse still, with borders remaining open, according to the liberal credo assumed by President Macron, businessmen returning from Brazil, India, or the United States (countries with a high rate of contamination), as well as migrants from the four corners of the world, continued to enter the French territory without any testing or guarantine constraints until Christmas 2020. This haphazard and unrestricted testing policy did not affect the spread of the virus because, instead of forcing carriers into guarantine, they remained free to move around, even when they were declared infected with COVID-19.

The government decided on All Saints' Day 2020 to carry out a large-scale screening campaign for people considered at risk: carers and teachers. Again, the lack of a clear objective and the administrations' amateurism resulted in an impressive waste. Buses with self-tests, based on volunteers, were placed in front of some high schools and not others; in each high school, everyone was free to test or not (Savina, 2021).

As this campaign, which was intended to be national in scope, did not succeed, in the spring of 2021, the health authorities changed their focus and targeted a population hitherto little affected by the pandemic: young people. While time was running out and repeated failures were piling up, the ARS (Regional Health Agencies) thought that targeting the youngest would have a better chance of reducing the rate of contamination. It was a waste of time because the authorities were insufficient, but above all, between the time of the decision and the beginning of its application, the Easter and summer school holidays intervened, putting an end to the government's desire to treat the population. Fortunately, these tests posed a problem of deontology: children were asked to test themselves, which posed a risk of injury (sinuses, brain) but also for teachers to improvise themselves as healers, decidedly without any training! (Murville, 2021).

#### PUBLIC LIBERTIES AND DEMOCRACY: YEAR ZERO

While the French suffered three periods of hard confinement and were obliged either to remain locked up at home (March-April 2020) or prevented from moving more than one kilometre from their homes for a long time (October-November 2020), the external borders remained constantly open. Obeying the Europeanist ideology of borderlessness, the French territory was completely open to the rest of the world for one and a half years, favouring the circulation of the virus. Even when Indian undocumented migrants were quarantined in an annexe of Roissy airport, they were released after a week without being tested or treated, walking into Paris, at a time when the Indian variant was taking its toll in India.

The choice of freedom of movement for individuals, a purely ideological position and not a sanitary one, was a position of principle of the government based on the idea that the virus has no borders. This resulted in neither isolation of the sick nor guarantine: it was not until May 2021 that the first guarantines of travellers from India were issued, thirteen months after the start of the pandemic. At the same time, the French were subjected to a number of restrictive measures, in terms of human rights, unequalled in the world. First of all, an exit permit sheet that every citizen, whoever he or she may be, had to sign to leave their home. Since the beginning of the first confinement in March 2020 and until the end of April 2021, each exit, for professional, leisure, shopping, or family reasons, had to be justified by this self-authorization. Just like the "propiska", the document required to travel from one region to another in the defunct USSR, the French found themselves in a situation where their freedom of movement was strongly controlled and limited, on pain of a 135 euros fine. As during the German occupation, the French had to have an "ausweis" and show a white coat to the police, who took great pleasure in carrying out these controls. This allowed the government to put a stop to all political and social protests. This measure put an end to the opposition movement to the pension reform of the winter of 2020-2021 (Bodin, 2021). More profoundly, the systemic crisis of the yellow waistcoats, a nationwide popular movement that had been going on since October 2018, ran out of steam in the face of these restrictions on freedom of movement never before experienced in France. This was all the more inefficient and unfair as businessmen continued to fly. As in the heyday of French cinema during the Second World War, the film industry was in full swing for a year and a half and media intellectuals continued to travel the world filming. Thus, in an interview given in June 2021, the charismatic Bernard Henry Lévy boasted that he had never been confined, having spent more than a year travelling to the main conflict zones to make his latest film "Another Idea of the World": Afghanistan, Nigeria, and Ukraine.

As this did not seem to be enough, the government decided to impose a curfew for all citizens for 250 days, which was unique in the world during this entire crisis. Between 17 October 2020 and 20 June 2021, the French government imposed a curfew at 6 pm, then at 7 pm, then at 9 pm and finally at 11 pm (Sanchez). The medical effects have not been proven, but the political effects have. This maintained very strong social control, which is demonstrated by the fact that the curfew was completely lifted two weeks before the regional elections! Furthermore, these constant changes in rules and schedules have destabilized a population that is already deeply depressed as a result of the confinements: once again, the infringement of public liberties is combined with a grip on the minds that benefits the power in place. The icing on the cake: successive confinements, with draconian rules forbidding movement beyond a certain perimeter, completed the task of marking the population and definitively eliminating any rule of public freedom.

The first lockdown in March-April 2020 prevented the French from moving more than one kilometre from their homes. This was justified by the authorities by the lack of hospital beds and the pressure on the emergency services. But a year and a half later and three confinements, the government has maintained a very low level of beds (5000) and has not created any intensive care beds; Olivier Véran, Minister of Health, has even suppressed 1863 intensive care beds over the same period (Dupont, 2021). So, the goal was elsewhere. From the second containment in October-November 2020, then in February-March-April 2021, one could not move more than 10 km, then more than 100 km. These purely bureaucratic measures were supposed to restrict the circulation of the virus. Above all, they created a divide between citizens, as city dwellers were confined to areas where the virus was circulating strongly, with several people in a two-room apartment without a balcony, whereas a large part of the population could take refuge in their second home a few hours before the announced confinement (as Parisians did in Brittany).

## A DEEP LONG-TERM ECONOMIC, SOCIAL AND HEALTH CRISIS

The "whatever it takes" policy introduced by President Macron in autumn 2020 is an economic and social fiasco. After a year and a half of the health crisis and more than 8 months of massive support to the economy, the balance sheet is as follows: 118% of debts, 454 billion spilt, 130 billion of direct aid to partial unemployment and supported sectors (restaurants, museums, conferences, and the congress sector). As a well-known politician put it, for a year and a half we have had the impression of witnessing an "organized strike" by the government (Wapler, 2021). Both to extinguish the fire of social discontent (yellow waistcoats and pension reform) and as a purely electoral measure (regional elections in June 2021,

presidential and legislative elections in April 2022), the government has decided to put a large part of the economic fabric on monitored rest. Teleworking, which was supposed to reduce the spread of the virus, has led millions of employees to stay at home for many months. In the civil service, the prefectures, which are supposed to welcome citizens as a public service, closed their offices. Ironically, while the French people found the doors to their administrative offices closed (gates closed with padlocks), the migrants waiting for their papers to be regularized were received in due form! Some post offices, due to a lack of staff, opened in the morning or in the afternoon, with opening hours changing almost daily. But more generally, the advent of telework, in addition to the changes within the company that it has brought about (social distancing, closed offices, direction of traffic in the corridors), has profoundly changed production methods. The Gafa giants have seen their profits explode and their production units in France grow as the crisis has developed. The giant Amazon has hired 100,000 people and opened new units over the period from October 2020 to January 2021 to meet the end-of-year holiday purchases.

In fact, only the first- and second-line workers really ensured their services during the three periods of containment. True heroes because of their constant work and daily contact with the pandemic, bus and metro drivers, cleaners, and hospital staff were the spearhead of the economy. With no real protection at the beginning and always in a fragile position, they kept the services afloat. In the second line, teachers maintained the continuity of public services and ensured the sustainability of national education, allowing parents to do their work.

The health crisis thus profoundly transformed work habits and made society as a whole evolve. The habits formed as a result of the three confinements have had an impact on leisure activities. After a period of euphoria and relaxation, the French, who used to cook at home and fed on Netflix series, have deserted the terraces of cafés and restaurants and have not rushed to the theatre or cinema. Paris, the city of lights and the world capital of cinema and theatre, will never be Paris again: just look at the famous waiters desperately waiting for customers! It has already been decided that 30% of small cafés and restaurants will close. The aim is to maintain the chains and the big structures and to let the small establishments disappear. In the provinces, entire streets are already deserted with shops with closed curtains. In Paris, the Rue de Rivoli is a desert in the city centre (just a stone's throw from the Elysée and the Louvre!).

We are witnessing a profound change in society in France. Following the second and third confinements, we have seen significant migratory movements from large metropolises to small and medium-sized towns. In the outskirts of these cities, the sale of houses with gardens has already jumped by 20% in one year. The aim is to create a two-tier society. On the one hand, a majority of "workaholics" who work several jobs in order to pay taxes, charges, and multiple credits (residence, car, children's education), at an increased risk of "burning out"; on the other hand, a growing mass of people who are helped, thanks to the largest social aid system in the world (1% of the population receives 15% of the social aid) and who receive (what is going to be applied very quickly) the universal income.

The social and health consequences of this crisis and the containment measures are very serious in the long term. France has already lost more than 111,000 of its citizens due to the lack of treatment/testing/vaccination. And while the fourth wave has not yet arrived, the Delta variant is already on its way. But more broadly, the systematic wearing of masks outside as well as in all public buildings from September 2020 to June 2021, as well as the self-authorisation and the three confinements with restrictions on movement, have created very strong and lasting psychic breaks in the population. Psychiatric services were overwhelmed during the whole period. A generalized depression took hold of the population as a whole and suicide attempts increased sharply among adolescents.

According to a British study, 34% of patients who contracted COVID-19 developed a neurological or psychiatric disorder within 6 months of infection (Campon, 2021).

#### CONCLUSION

The authorities have been consistently outmanoeuvred. Fabrice Di Vizio, a lawyer and leader of an association dedicated to the defence of bereaved families, has already called for the prosecution of various Ministers of Health. More broadly, the entire decision-making structure centred around the Regional Health Agencies and the Committees of Epidemiological Experts is being questioned and will be altered. Worse, while the health measures were justified by the need to avoid overcrowding the 5000 intensive care beds, we learnt at the end of June 2021 that Olivier Véran had withdrawn 1863 of these beds in the midst of the COVID-19 crisis, rather than expanding hospital capacity. Trust in epidemiological doctors or media experts who constantly change their minds (Martin Blachier) has been severely shaken.

But even more seriously, the liberticidal measures taken in the name of managing the health crisis deprived 67 million French people of their most basic freedoms for many months (freedom of movement and assembly). From January to June 2021, the government was able to rule the country by decree, with the parliament stripped of its legislative rights.

### REFERENCES

- Bergeron, H. (2021), *Covid-19, une crise organisationnelle* [Covid-19, an organizational crisis], Paris, Presses de Sciences Po.
- Galloway, S. (2021), *Post-corona, de la crise à l'opportunité* [Post-corona, from crisis to opportunity], Montreuil, Pearson.
- Perronne, C. (2020), *Y a-t-il une erreur qu'ils n'ont pas faite*? [Was there a mistake they didn't make?], Paris, Albin Michel.
- Moati, J.P. (april 2020), The French response to Covid-19: intrinsic difficulties at the interface of science, public health and policy, *The Lancet*, 5(5), p. 255.
- Meurens, F (2021). Points forts, limites, risques...décryptage de la technologie des vaccins à ARN [Strengths, limitations, risks... decryption of RNA vaccine technology], *The Conversation*, retrieved from https://theconversation.com/ points-forts-limites-risques-decryptage-de-la-technologie-des-vaccins-a-arn-152333. Accessed 5 august 2021.
- Dubois, M (2021). Les Français et la science, une histoire de confiance [The French and science, a story of trust], *The Conversation*, retrieved from https://the conversation.com/les-francais-et-la-science-une-histoire-de-confiance-158929. Accessed 25 july 2021.
- Godeluck, S. (20 march 2020) Coronavirus: la France s'engage dans une stratégie de dépistage massif [Coronavirus: France commits to a massive screening strategy], *Les Echos*, retrieved from https://www.lesechos.fr/economie-france/ social/coronavirus-la-france-sengage-dans-une-strategie-de-depistage-massif-1190362. Accessed 27 March 2020.