Lindy Heinecken
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Military Operations in Response to Domestic Emergencies and Global Pandemics

Implications for Civil-Military Relations

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🐎 Springer

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Overview of Military Operations in Response to Domestic Emergencies, Global Pandemics, and Civil-Military Relations

Lindy Heinecken and **Christian Leuprecht**

Abstract Domestic military operations in democracies had historically been rare, reserved for extreme emergencies. However, the proliferation of unconventional threats, notably climate change, biosecurity hazards, and terrorism, has significantly increased the frequency, complexity, and duration of domestic deployments. This book provides a global comparative study of domestic military operations, with a specific focus on the COVID-19 pandemic. The diverse 26-country contributions investigate how varying national contexts, governmental systems, and military structures influenced these deployments, as well as the impact on civil-military relations. While the pandemic created similar demands, states responded differently, allowing for the identification of broader patterns. The research examines the legal frameworks for domestic operations, the specific roles militaries played during COVID-19 (e.g., medical support, logistics, security), and implications for civil-military relations. The case studies show that due to their readiness and organizational capacity, militaries across the globe are increasingly called on domestically as a "force of last resort." However, extensive deployments and so-called "mission creep" are straining resources for force generation and sustainment, affecting operational readiness, especially for core combat missions. This trend challenges traditional conceptions of civil-military relations theories, raising concerns about blurred roles and professionalism. The volume draws on principal-agent theory for a more nuanced understanding of civil-military dynamics during the pandemic: political executives used the military as an agent, with heightened risk for "agency slack" or "securitization," depending on civilian oversight. The volume concludes that the armed forces need to be versatile, agile, and adaptable as "guardians of the nation" in response to the evolving security environment.

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1   Introduction

Throughout the Cold War, domestic military operations in democratic states were rare, usually limited to exceptional circumstances when local resources were overwhelmed in response to domestic disasters or (dis)order. As of late, changes in the risks emanating from climate change, biosecurity hazards, terrorism, and irregular migration have precipitated quantitative and qualitative changes in domestic deployments by armed forces (Dahlberg and Dalgaard-Nielsen 2025). This has raised a host of issues related to the domestic deployment of the military in response to emergencies (Matei et al. 2022). In democratizing countries, domestic military use has traditionally raised concerns about democratic backsliding and extra-judicial abuse of coercive power (Plattner and Diamond 1996; Pion-Berlin 2017). These concerns relate to Huntington's theory of civil-military relations surrounding the ideal relationship between the military and civilian authorities in a democratic society, which includes the need to restrain the military's capacity for autonomous action in areas that have political implications or influence (Levy 2012; Kuehn and Levy 2021). One such domain is the increase in domestic deployment which, according to Huntington's logic of civil-military relations, can blur the line between military and civilian roles, distract the military from its primary mission, and undermine its professionalism.

Still, domestic military deployments are on the rise, largely in response to the proliferation of non-state threats that manifest as immigration, border control, civil unrest, and law enforcement, and in response to climate-induced disasters (Miller et al. 2008; Levinson 2008; Head and Mann 2009; Laurie and Cole 1997; Banks and Dycus 2016; Dahlberg and Dalgaard-Nielsen 2025; Larson and Peters 2001; Isacson 2020; Leuprecht et al. 2022; Matei et al. 2022; Kuehn and Levy 2021; Herrera and Croissant 2021; Levy 2022). The increased frequency at which countries call upon their armed forces to respond to domestic emergencies shows the extent to which they have become an integral part of emergency management (Head and Mann 2009; Dahlberg and Dalgaard-Nielsen 2025). The greater frequency and higher pace of deployments have precipitated a qualitative shift in the character of domestic operations. Whereas deployments used to be few, short, and somewhat predictable, they are now longer, larger, more complex, and more demanding. By way of example, militaries are increasingly employed domestically in response to a broad range of natural disasters including storms, floods, wildfires, earthquakes, droughts, etc. These roles are slated to grow in importance and duration as countries increasingly rely on their armed forces for support, a situation that stems from the proliferation of domestic crises that are overwhelming local authorities and for which local administrations are often ill-prepared.

This volume presents a truly global study of domestic military operations, and how approaches and experiences compare. It is a book on domestic deployments in general, though it focuses more specifically on the use of the military during the COVID-19 pandemic. The 26 country case studies situate the domestic deployment of the armed forces within each country's broader national context and its approach to dealing with the COVID-19 pandemic and its impact on civil-military relations. More

generally, the findings offer insights into the resemblances, differences, variances, and similarities among governments' domestic deployment of the armed forces in response to domestic emergencies. Hitherto, actions of armed forces in a domestic situation and their use by civil authorities could be appraised, but only about the specific local emergency that created the demand. At most, these emergencies were regional, as is the case following large natural disasters.

By contrast, this book observes domestic deployments of armed forces in response to the COVID-19 pandemic on a global scale and analyzes what influenced those deployments. The variation in country contributions to this volume enables us to identify patterns that emerge across different governmental and political systems, levels of development, geography, population size, size, structure, behaviour of the armed forces, etc. The pandemic reinforced the extent to which the success of a mission is now inextricably linked to critical concepts, such as "human security," the importance of which the pandemic reinforced and which domestic military operations either mitigated or exacerbated. Accordingly, this study is part of a broader literature on the evolution of armed forces to a rapidly changing security environment. The armed forces' capacity to conform to these challenges—and to the decisions of lawmakers—will emphasize the armed forces' (in)ability to adjust to new missions in their role as the responsible, legitimate, and professional "guardian of the nation." Now that interstate war is just one of many threats to the security of a country, this study also provides an impetus to critically reassess whether conventional theories of civil-military relations are still fit for purpose.

2　Method

The COVID-19 pandemic makes for a unique natural experiment in the variation of the deployment of the military in domestic roles across different jurisdictions. The crisis created similar needs and situations, but states reacted differently. The situation lends itself to a cross-sectional design, comparing the roughly simultaneous domestic deployment of armed forces across an unprecedented range of 26 countries on six continents, but with varying tasks in response to the pandemic. This research project is a comprehensive qualitative cross-country comparison of domestic military operations and thus offers a unique opportunity for research and critical reflection. The conditions that prompted the deployment of the armed forces are relatively similar across the globe, even if the actual forms of employment of armed forces varied. Hence the rationale for this book: is to assemble a consolidated work to understand the domestic role of the armed forces, benchmarked against the response to the COVID-19 pandemic.

The result is a methodologically robust global comparative study of domestic military operations, focusing on military deployment during the COVID-19 pandemic. To enable further within-case comparison, country case studies were divided into five broad categories based on relative similarities, military prowess, regional location, and governance maturity. The first group comprises the "Anglosphere": the United

States of America, the United Kingdom, Canada, Australia, and New Zealand. The second group comprises established NATO allies: France, Germany, Italy, Spain, Portugal, Belgium, the Netherlands, and Denmark. The third category consists of new(er) NATO members: Estonia and Slovenia, as well as Sweden. The fourth category covers East and South Asian partners: Japan, Korea, the Philippines, and Pakistan. The fifth category represents the global south, consisting of Latin American and African countries: Brazil, Nigeria, Sierra Leone, and three countries located in Southern Africa: South Africa, Zimbabwe, and Namibia. The comparative case study research design enabled the identification of similarities, differences, and patterns across these countries to understand how the armed forces were used during the COVID-19 pandemic.

Admittedly, this is hardly an exhaustive list of worthwhile country case studies. Still, to our knowledge, this book provides the broadest publicly available survey of the national reaction to COVID-19 as a domestic emergency in its coverage of countries from across the world's continents and regions. To enable comparative analysis, authors were asked to follow a standardized model in addressing three overarching themes related to the domestic deployment of the military: the framework for domestic operations, the use of the armed forces during the COVID-19 pandemic, and how this affected civil-military relations in their respective countries. The first theme—*domestic deployment*—includes the legal and constitutional regulations under which the military can serve in domestic roles along with the extent of domestic deployment before the pandemic. For the second theme—*COVID-19 and military deployment*—contributors were asked to report on civil-military cooperation and coordination, the roles in which the military served, the resources available, and the readiness and effectiveness of the military response. The third section—*civil-military relations*—addresses the issue of securitization of the pandemic, the nature and extent of civilian oversight and control, the accountability measures, and the impact of the COVID-19 deployment on the military's image. Finally, contributors were asked to reflect on lessons learnt and whether this deployment was likely to precipitate the military's future force design or structure and/or its organizational transformation. The number of case studies required authors and editors to make hard choices on content to keep chapters short and the overall length of the volume somewhat manageable.

The volume's editors analyzed each country case study to draw out the similarities and differences concerning the abovementioned themes. This research design enabled us to be systematic in drawing conclusions about the domestic involvement of their armed forces. We posit there to be sufficient commonality in the reasons for the intervention of armed forces for us to draw comparative conclusions and lessons from around the world in terms of the military's deployment during the COVID-19 pandemic, and attendant implications for civil-military relations.

3 Military Operations in Response to Domestic Emergencies

Typically, the convention has been for the armed forces to be called upon as a force of last resort once other avenues to address an emergency had been exhausted, and thus such call-outs are often ad hoc. As armed forces continue to be structured, funded, and trained for their primary mission (warfare), the extent to which militaries use their capabilities to aid domestic civil authorities rarely matches the commitment to actual domestic operations. Most armed forces have few dedicated resources for domestic operations. As a result, military resources are frequently redeployed from other activities to meet domestic demand, which can be disruptive to force generation, readiness, sustainment, training, and other operations. The underlying assumption is that domestic operations can readily be absorbed as a net cost, subsumed alongside resourced mandates such as territorial defence, alliance obligations, multilateral missions, and peacekeeping and stability operations. However, as the chapters in this book demonstrate, the increasing role the armed forces play in domestic operations poses a growing challenge to the military's ability to fulfill its core mandate.

In most cases, the armed forces perform internal domestic roles within their primary mandate, which gives rise to tensions between growing responsibilities and atrophying capabilities. The United States is the exception as the primary responsibilities of the National Guard are domestic, but they are also deployed overseas (Anderson 2022). Elsewhere, the armed forces are usually ill-equipped and ill-trained for domestic operations: they lack equipment, let alone the right equipment. Yet given that the armed forces are in a constant state of readiness to respond to tasks assigned to them, this makes them the only institution with a large operational capacity to respond rapidly to emergencies (Leuprecht 2011; Isacson 2020). Moreover, members of the armed forces are recognized to be well-disciplined and are already organized by established command structures that facilitate force employment and deployment. Specialized units in engineering, logistics, and health support come with their own equipment, which ensures that they can act independently. The armed forces' ability to operate autonomously away from supporting infrastructure is highly useful in natural emergencies. In both disaster and security response, the military provides the surge capacity and capability to take on large tasks autonomously on short notice, independent of other organizations.

The fact that the armed forces have been reoriented and repurposed from their original mission raises hard questions about the efficiency of this division of labour, especially as soldiers are neither specifically trained nor equipped for these secondary tasks. In addition, the armed forces are often called upon when other departments, agencies, or local levels of government have proven inept at handling the emergency in question—which has led some practitioners to refer to it as "just-in-time delivery" or the "option of last resort." For a region or a government to draw on resources maintained by another organization only in time of need may be efficient but does not bolster national resilience and is often unsustainable. As Dahlberg and Dalgaard-Nielsen (2025, 7) point out, the extensive deployment in domestic roles may result in

countries ending up with "a very expensive, improperly equipped, and overqualified emergency response instrument instead of a functional military force." Despite these concerns, militaries across the world have become the resource of choice for governments facing fiscal restraint in times of crises thanks to their specialist capabilities and organizational and logistical capacities.

Several endogenous constraints govern the domestic rules of engagement. First and foremost is the legislative framework governing the employment of the military and the need to comply with the laws of the state and international requirements. Second is the issue of lethality and whether and under what circumstances the military can use deadly force. This is highly controversial; nevertheless, there may be situations where it becomes necessary to employ force. The third criterion relates to the risk to the soldiers themselves, insofar as members of the armed forces are unique in being subject to unlimited liability and can be ordered into harm's way. A fourth consideration is the readiness of the armed forces to serve in these roles given that the forces exist to defend the state against external threats, and the continuous deployment in these roles can erode primary military skills and resources. The fifth issue relates to cost and the impact on defence budgets and the extent the military is reimbursed for services and support rendered. While central governments often have the authority to recover costs, they loath to do so for political reasons, especially in the aftermath of an emergency deployment to support an already fragile community. The sixth is whether a military deployment enjoys public support and the extent to which a deployment could undermine the legitimacy and image of the military. These issues feature prominently in the various chapters of this book concerning the deployment of the military during the COVID-19 pandemic.

4   The Military Response to the Global Pandemic

The COVID-19 pandemic was a global public health emergency, a biosecurity hazard unprecedented in scale in the twenty-first century, a catastrophic shock that disrupted the state, regions, the world, and civic life. Regular emergency mechanisms and capacities were rapidly overwhelmed by the demands of an escalating number of cases requiring acute medical attention and measures to stem contagion. In an alarming situation that calls for a spectrum of specialized training and skillsets, the armed forces are often called up in line with their duty as "national guardians." They are the only state bureaucracy with broad operational capacity and the ability and assets to deploy on short notice. Across the globe, armed services were commandeered by the *gouvernement en place* to protect citizens and the state from the ravages of COVID-19 (Gibson-Fall 2021; Latici 2020). Demand for military assistance in support of civil authorities during the pandemic came on top of a quantitative and qualitative change and expansion in military missions since the end of the Cold War—changes that had already been stretching military capacity.

In virtually every country across the globe, the military was deployed to support the national response to the COVID-19 crisis. This deployment is incomparable in

scale and range of roles (Kaneberg et al. 2023). Over 95% of the world's countries used their armed forces in some form (Erickson et al. 2023, 357). Outlier countries were either not severely affected by COVID-19 infections, or their militaries were already actively embroiled in internal conflict (i.e., Mozambique and Libya). The roles that the military performed varied, depending on the history, legislative frameworks regulating domestic deployment, nature, and size of their armed forces (Dietrich et al. 2023; Gad et al. 2021; Sears 2020). The roles in which the military was deployed fell into three broad categories: the provision of additional medical capacity, logistics and infrastructural support, and more traditional security-related tasks in support of internal security.

In terms of medical capacity, this involved making a skilled workforce available to assist with testing, offer psychological support, run nursing homes, and disinfect public places. The most extensive of the tasks was logistical support, which included a wide range of jobs that ranged from the construction of field hospitals and shelters to the distribution of food and water and personal protective equipment, and the transport of medicine and essential supplies as well as the transport of patients, including repatriating citizens from abroad and even building and staffing facilities to isolate them upon their return. As evidenced by the surge in demand and the activity at NATO's Euro-Atlantic disaster response coordination centre, this logistical support often extended beyond national borders when other countries needed respirators, transportation, or personnel. Security-related tasks were more controversial in cases where countries enforced domestic restrictions on people's freedom of movement, including through quarantines and lockdowns, and at times using violent coercion to do so. These security-related tasks typically included assignments to support the police in public order duties, law enforcement, and border support. Enforcement tasks included, for example, clearing shops and public spaces, as well as enforcing curfews and lockdowns. There were specific duties involved in border protection, including checking test results or travel documents and ensuring that people abided by the standard border control procedures that were applied during the pandemic. This was more typical in low- to middle-income countries where dense urban populations rely on subsidence economies and where the armed forces often employed draconian law enforcement measures and used excessive force to enforce controls (Gibson-Fall 2012; Mahé and Wilén 2021).

The extent of domestic deployments during COVID-19 aggravated the prevailing logistical, operational, and human resource strains on militaries (Dietrich et al. 2023; Wilén 2021), raising many questions about the effectiveness of the armed forces for such a mission and its impact on the forces' traditional mission. For example, during the pandemic, the armed forces in most countries deployed a massive quantity of their overall capacity in terms of workforce, equipment, and other resources. Such a large deployment raised the question of whether the forces could concurrently uphold their traditional mandate. Could they have defended their state while a large portion of their institutional effort and attention was focused inward? What if these forces were required to wage war against another enemy while simultaneously being committed to responding to the pandemic? These dual demands have given rise to calls within political and military circles to restructure the armed forces and include

domestic security as a core function, with a commensurate allocation of additional funds. This book takes up these controversies and the consequent impact the extensive deployment of the military during COVID-19 had on civil-military relations.

5   Impact on Civil-Military Relations

The deployment of the military in domestic operations has raised concerns, about "the power of the state over citizens, the undermining of democratic and legal rights, and the erosion of civilian control over the military" (Head and Mann 2009). Huntington's premise is that there must be a clear separation between civilian and military spheres to ensure effective civil control. He distinguishes between objective and subjective control to ensure that the military complies with strategic goals and policy directives set by civilians (Huntington 1957). Objective control allows the military to maintain its autonomy and professionalism subject to the purview of political elites. Effective oversight and accountability prevent the military from exceeding its role, namely, involvement in domestic politics. Subjective control is where politicians exercise direct political influence and control of the military, thereby maximizing civilian influence. Huntington holds that when this occurs it upsets the balance of power between civilian and military authorities (Dahlberg and Dalgaard-Nielsen 2025, 8). However, as Janowitz (1960) has pointed out, Huntington's rigid separation theory fails to recognize the need for better understanding and cooperation between civilian authorities and the military, to enable the latter to be more responsive to societal needs. As the COVID-19 pandemic demonstrates, there is a need for a more integrated approach when it comes to the domestic deployment of the military.

As such, existing Cold War theories of civil-military relations fail to adequately explain the developments that emerged during COVID-19 (Gibson-Fall 2021). Contrary to Huntington's position the military did not, in most cases, exercise undue influence in decision or policy-making, or pose a threat to the state, but acted as an *agent* to augment state capacity. However, this varied by country depending on the extent to which the state depended on the military for support and leadership (Passos and Acadio 2021). To understand the dynamic whereby political leaders (principles) came to use the military (agent) to achieve their political objectives, Feaver's (2004) principle-agent theory of civil-military relations is useful. Central to this theory is the extent to which the military in the various countries carried out their mission under the directive of civilians and whether one sees evidence of *agency slack*, given that domestic deployment is not generally a military's primary task. Agency slack is where the military either does not put in the desired effort, otherwise referred to as *shirking*, or where it performs tasks in line with its own preferences, which may diverge from those of the principal and is called *slippage* (Bell et al. 2022).

Agency slack is often exacerbated when the principal cannot accurately assess the capabilities and intentions of the agent due to a lack of knowledge or understanding of the military's capabilities. This may lead to a divergence in interests, where the military may not fully commit to civilian directives, fail to deliver, or pursue strategies not

aligned with the broader public interest (Baker 2007). To counter this moral hazard, there is a need to constantly monitor the military's actions and deliverables (Bell et al. 2022, 704). This requires effective civilian control over the military, which can set "limits on the military's freedom of action so that it corresponds to the political objectives" set out by the "principals," namely, the executive or representative branches of government (Levy 2012, 531). One of the central tenets of Feaver's principal-agent theory is that the level of monitoring and oversight by civilian leaders is a key factor in determining the behaviour of the military and ensuring compliance with directives. Weak civil control of the military may shift the balance of power between military and civilian institutions, increase institutional friction, and precipitate human rights abuses by the military (Desch 1999; Pion-Berlin 2017).

These concerns were reflected in two common trends, although neither second-order effect was universal: the prevalent securitization and even selective militarization of the COVID-19 response (Molnár et al. 2020; Mahé and Wilén 2021). According to Erikson et al. (2023, 363), securitization of "domestic disaster relief may strengthen the military's domestic bargaining position and increase institutional friction in ways that render civilian authorities relatively weaker than they were before." The deliberate framing of the pandemic as a security threat by some political leaders bestowed states with extraordinary emergency powers that go beyond the normal boundaries of political procedures to protect or advance security. Some countries went so far as to leverage extenuating circumstances to legitimize the high-scale engagement of the military in support or replacement of civilian-led efforts, thereby selectively militarizing the response and elevating the status and importance of the armed forces (Passos and Acacio 2021; Kuehn and Levy 2021, 5). Politicians leveraged the "all-purpose tools" that the military possesses to augment government capacity. The principle-agent theory thus informs our understanding of the complex dynamics between civilians and the military response to the COVID-19 pandemic, how oversight and accountability mechanisms function, and how those mechanisms affect civil-military relations in terms of the legitimacy and public image of the military.

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Anglo-Saxon Countries

United States

Jessica Blankshain

Abstract This chapter examines the evolving domestic role of the United States military, challenging the prevailing perception that its sole purpose is overseas operations. Despite its immense size and budget, the US military has historically maintained a professional ethic of non-partisanship and civilian control, which generally mitigated concerns about democratic subversion. However, a significant, though often overlooked, history of domestic deployments exists, ranging from civil unrest to natural disasters. The COVID-19 pandemic expanded this domestic role, with the military's response, while civilian-led, relying heavily on its capabilities under existing legal frameworks like the Posse Comitatus and Insurrection Acts. Under US Northern Command, the military provided extensive medical support, logistical assistance (e.g., Operation Warp Speed for vaccine distribution), and humanitarian aid. Furthermore, the National Guard was widely activated for civil unrest and the January 6th Capitol insurrection. While the military's involvement was largely successful, leveraging its logistical expertise and manpower, it prompted discussions on civil-military relations. Concerns arose regarding the potential for mission creep, resource diversion from core defence functions, and the blurring of lines between military and civilian responsibilities. The pandemic underscored the military's invaluable, yet complex role in domestic crisis response, prompting a re-evaluation of its domestic engagement within the broader framework of civilian control.

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1   Introduction

The United States military looms large in American politics and culture. It comprises more than two million uniformed members (including active and reserve components), plus nearly one million additional civilian employees. The defence budget is over $800 billion—nearly half of federal discretionary spending. Members of the military and veterans are frequently recognized at professional sporting events, community parades, and political conventions. And yet in recent history, there has been little concern that the military would subvert democratic governance. This can be attributed in part to the military's professional ethic of nonpartisanship and obedience to civilian control. But it may also be attributed to a widespread perception within the United States that the military's sole purpose is to conduct overseas operations, and that it has no role to play within the United States. Since the Civil War, wars and major military operations have all occurred overseas: World War I, World War II, Korea, Vietnam, the Persian Gulf, Afghanistan, and Iraq—all instances of the military operating overseas to achieve foreign policy and national security objectives. Even during the Cold War—despite significant concerns about the missile threat to the continental US—the "hot" conflicts occurred overseas. After the terrorist attacks of September 11, 2001, the government responded by creating a separate cabinet department—the Department of Homeland Security, to focus on defending the US homeland, further reinforcing the Department of Defence's external orientation.

Yet the military has been used domestically in a variety of capacities throughout US history, including in the twenty-first century. Many are familiar, for example, with the use of the National Guard to respond to natural disasters such as Hurricane Katrina (2005) and Superstorm Sandy (2012). Some may remember more politically contested uses of the military domestically, such as President Dwight Eisenhower sending the 101st Airborne Division to Little Rock, Arkansas, to ensure compliance with the Supreme Court ruling desegregating public schools, or President George W. Bush using the Marines (among other forces) to respond to civil unrest in Los Angeles in 1992 after police officers were acquitted of using excessive force against Rodney King. The unrest in Los Angeles killed at least 54 people, and the response included 10,000 California National Guard troops, 2000 active army soldiers, and 1500 marines (Schnaubelt 1997).

The COVID-19 pandemic, beginning in the winter and spring of 2020, opened another chapter in the domestic use of the US military. In the early months of the pandemic, the White House and the Department of Defence (DOD), working with the states, determined that the military should prepare for an increased role in an event that was threatening to overwhelm the civilian healthcare infrastructure. In March 2020, initial steps to involve the military in the response included mobilizing two hospital ships and President Trump announcing the activation of the California, New York, and Washington state National Guards (Golby 2020). As reflected in this chapter, the military was primarily deployed to provide medical support, logistics assistance, and humanitarian aid. These activities were generally consistent with existing laws and norms related to the deployment of the military within the domestic sphere.

2   Domestic Operations

2.1   Constitutional and Legislative Framework

There are important legal restrictions on the domestic use of the US military. Specifically, the Posse Comitatus Act of 1878 (subsequently amended to cover all federal military services) prohibits the use of the military to enforce domestic law "except in cases and under circumstances expressly authorized by the Constitution or Act of Congress." As suggested by its date, this law was a product of Reconstruction-era efforts to keep the federal military from interfering in efforts to institutionalize racism in the Southern states (Nunn 2021; see also Cohn 2022, 70–71). While many view the law as a blanket prohibition on domestic use of the military, it is far less restrictive in practice as (a) many circumstances have been deemed to meet the "expressly authorized" exception, and (b) not all domestic military activities qualify as using the military "as a posse comitatus or otherwise to execute the laws." Furthermore, in 1975 a federal court ruled that express authorization was not needed for "passive participation" in law enforcement, such as providing logistical support, intelligence support, or advice to law enforcement agents (Cohn 2022, 79–80).

The largest exception to the Posse Comitatus Act is the Insurrection Act. In this act, Congress granted the president the authority to use active-duty troops or federalize the National Guard if a state requests aid to suppress an insurrection or the president determines a rebellion, insurrection, or other domestic conspiracy obstructs the enforcement of federal law or deprives individuals of constitutional rights (Dickinson 2024). According to a Brennan Center analysis, the Insurrection Act has been invoked in response to 30 crises in American history, many but not all of which involved the deployment of federal troops (Dickinson 2024).

Much military policy is made through the annual National Defence Authorization Act, providing an additional opportunity for Congress to weigh in on the domestic use of the military. Although it is ostensibly a budget bill, because it is "must pass" legislation, it becomes a vehicle for all manner of military and even non-military policy. In the 1980-1990s, for example, Congress used NDAAs to expand DOD's ability to support law enforcement agencies in combating drug trafficking (Cohn 2022, 80–81). Appropriations (the actual allocation of money) also provide an opportunity for Congress to impose legal constraints on the domestic use of the military, particularly because these deployments are usually unanticipated. It is quite difficult to internalize into the Defence Department budget the cost of potential military deployments within the United States so they frequently require supplemental appropriations or reprogramming of funds, which the DOD has only limited authority to do without congressional approval (Mirasola 2024).

The National Guard's special status further complicates restrictions on the domestic use of the military. The National Guard serves two roles. It is organized at the state level and normally under the control of the state's governor. But the Guard also makes up part of the reserve component for the federal military and can thus be called upon to act under federal status. Under federal status, guard units have

deployed overseas frequently over the past two decades in support of operations in Afghanistan, Iraq, and elsewhere. Under state control, the guard's domestic use is limited by state law. When used domestically under federal control, members of the National Guard are treated as other federal troops for legal purposes. There are, however, two grey areas. The first is what is known as Title 32 status when the guard is nominally under state control but performing a federally requested mission for which the federal government is footing the bill. The second is the National Guard for the District of Columbia, which is always under the president's control (usually delegated through the Secretary of Defence to the Secretary of the Army) whether or not it is acting under "state" or federal status (Blum and Dayton 2021; Nunn 2021). When coordinating a domestic action involving both federal and state status troops, DoD may use a dual-status commander to relay orders in both the federal and state chains of command (Congressional Research Service 2023).

The Coast Guard is the military service branch that primarily operates domestically. It is also a law enforcement agency, a regulatory agency, and an emergency response agency (United States Coast Guard n.d.). Normally, the Coast Guard falls under the Department of Homeland Security and conducts a wide range of law enforcement and search and rescue missions within US territory. During times of war, the president can direct the Coast Guard's transfer to the Department of Defence under the Secretary of the Navy.

Federal disaster relief is provided under the authority of the Stafford Act, which allows the president to unilaterally make an emergency declaration and to approve emergency and major disaster declarations requested by states and territories. The type of declaration affects the scope of federal aid authorized, with emergency declarations being more limited. Funds come from the Disaster Relief Fund, managed by the Federal Emergency Management Agency (FEMA) (Webster et al. 2020). Under a major disaster declaration, "Permitted operations include debris removal and road clearance, search and rescue, emergency medical care and shelter, provision of food, water, and other essential needs, dissemination of public information and assistance regarding health and safety measures, and the provision of technical advice to state and local governments on disaster management and control." Federal troops may be used to conduct these authorized operations, but the Stafford Act itself does not authorize the use of the military for domestic law enforcement (Webster et al. 2020). Two additional laws, the Economy in Government Act (31 U.S.C. §1535, referred to as the Economy Act) and Military Support to Civilian Law Enforcement Agencies (10 U.S.C. §§271–284) provide additional authorization for military support to civil authorities under some conditions (Congressional Research Service 2023).

President Trump declared a state of emergency for the COVID-19 pandemic on March 13, 2020, invoking Stafford Act authority for FEMA to provide public assistance emergency protective measures. This was followed by presidential approval of major disaster declarations from all US states and several territories (Webster et al. 2020). These declarations allowed the military to provide defence support to civil authorities in response to the pandemic. The legal situation was somewhat more complicated when the National Guard responded to civil unrest in response to police violence against Black Americans during the early months of the pandemic. In most

cases, National Guard troops were operating under state authority. But as noted above, the DC National Guard, which cleared protestors from Lafayette Square in June of 2020, is always under presidential control even when it not operating under "federal" status.

2.2 Deployment in Domestic Roles

The federal military's primary domestic role is what is formally known as defence support to civil authorities (DSCA). This term is quite expansive: "Support provided by U.S. Federal military forces, DOD civilians, DOD contract personnel, DOD Component assets, and National Guard forces (when the Secretary of Defence, in coordination with the Governors of the affected States, elects and requests to use those forces in Title 32, U.S.C., status) in response to requests for assistance from civil authorities for domestic emergencies, law enforcement support, and other domestic activities, or from qualifying entities for special event" (Congressional Research Service 2023). The Department of Defence evaluates requests for assistance from civilian authorities by assessing requests' legality, the potential for use of lethal force, the risk to DOD personnel, cost, appropriateness, and readiness (Congressional Research Service 2023). The National Guard, under its state status, also performs a wide range of domestic missions. The guard has operated domestically on state active duty (in response to routine snow storms, flooding, and wildfires), under Title-32 authority (providing airport security after 9/11 and conducting missions at the southwest border in 2018), and on federal (Title-10) duty (supporting the desegregation of public schools in Little Rock in 1957 and responding to major hurricanes like Hugo in 1989) (Golby 2020).

2.2.1 Disaster Response

Under the national response framework for responding to disasters, "local and state governments are expected to put forth their best effort during incidents within their jurisdiction. They should only request federal assistance when their resources are overwhelmed. At that point, the DOD may provide support in response to the request for assistance (RFA), typically as part of a broader federal response" (Congressional Research Service 2023). In addition to responding to natural disasters, such as hurricanes or wildfires, DSCA has been provided in response to man-made disasters, such as oil spills, and special events including presidential inaugurations. The military frequently provides logistical and medical support (Congressional Research Service 2023). The Department of Defence had previously supported responses to public health emergencies including the 2016 Zika virus outbreak in parts of the United States (e.g., Hawaii) and the 2015 Ebola virus outbreak in West Africa (Government Accountability Office 2024).

The National Guard is perhaps most well-known for its role in disaster relief, such as responding to hurricanes and floods. FEMA's centre for domestic preparedness provides emergency response training, which includes preparing the guard to "support firefighters, healthcare, law enforcement, engineering, and urban search and rescue" (ASPR TRACIE 2022).

2.2.2 Security and Order Maintenance

The US military has a long history of involvement in domestic policing of various kinds (Cohn 2022). In recent years, military deployments at the US's southern border have supported counter-narcotics and counter-transnational organized crime operations as well as the enforcement of federal immigration law (Cohn 2022, 80–82). The military's border missions have included conducting DSCA in support of the Department of Homeland Security, providing surveillance, construction, transportation, and communications capabilities (Congressional Research Service 2023). State-controlled National Guards have also conducted missions at the southern border, including occasions when doing so has been at odds with federal authorities, as in Texas in 2024 (García 2024). The National Guard also helped state and local authorities provide security during and after major terrorist attacks. Federalized National Guard was deployed to airports and border crossings in the weeks immediately after 9/11 (Cohn 2022, 82). Military police from the Massachusetts National Guard assisted in providing security after the Boston Marathon Bombing in April 2013 (Story 2013). A subset of the National Guard receives training specifically in responding to civil disturbances (ASPR TRACIE 2022).

3 Military Deployment During COVID-19

3.1 Coordination of the COVID-19 Response

The policy response in the United States to the COVID-19 pandemic was civilian-led but relied significantly on the military for execution. It is important to note that given the US federal system, many of the decisions that most directly affected citizens—school closings, stay-at-home orders, quarantine requirements, masking mandates—were made by state and local governments.

At the federal level, President Trump formed the White House Coronavirus Task Force in January 2020, shortly after the first known US case of COVID-19 was reported (Donnelly and Goodall 2021, 7–8). The task force was civilian-led, including the secretary of health and human services, the director of the centers for disease control, the head of the national institute of allergy and infectious diseases, the acting deputy secretary of homeland security, and the surgeon general. The coronavirus response coordinator was Dr. Deborah Brix, an army veteran, scientist, and physician

who also served as the state department's global AIDS director (New York Times 2020). Key civilian participants in the response were the department of homeland security (DHS), especially the federal emergency management agency (FEMA), and the department of health and human services, especially the centers for disease control and prevention (CDC) and national institutes of health (NIH). As will be discussed in more detail below, on federal missions the military often coordinates closely with these agencies, as it did in this case, operating under FEMA's disaster relief authorities and coordinating with DHS on border security and supply chain management (Office 2024). The military also played a significant role in the development and distribution of the COVID-19 vaccine through operation warp speed.

President Trump declared the pandemic a national emergency on March 13, 2020, days after the World Health Organization declared COVID-19 a pandemic and just before confirmation that cases of COVID-19 had been found in all 50 US states (Donnelly and Goodall 2021, 8). Also on March 13, the Department of Defence halted all official travel of military personnel and their families, as well as civilian DOD employees (Donnelly and Goodall 2021, 8). Later in March, Congress passed, and the president signed, the Coronavirus Aid, Relief, and Economic Security (CARES) Act, which included over $1 billion for the army to purchase equipment and supplies that would facilitate social distancing and personal protection from the virus (Donnelly and Goodall 2021, 8).

Within the military, the response to the COVID-19 pandemic primarily fell under the responsibility of US Northern Command (NORTHCOM), which had an existing plan for responding to infectious diseases (Donnelly and Goodall 2021, 9). After the national emergency declaration, "NORTHCOM designated ARNORTH [U.S. Army North]'s commanding general, Lt. Gen. Laura J. Richardson, as the joint force land component commander (JFLCC) for federal military support to civilian authorities during the pandemic" (Donnelly and Goodall 2021, 21–22). The military activated "defence coordinating elements" and associated emergency preparedness liaison officers to coordinate with FEMA at the regional level (Donnelly and Goodall 2021, 22). ARNORTH also had to designate dual-status commanders to facilitate cooperation between military forces conducting the same mission but operating under both state and federal command (Donnelly and Goodall 2021, 24).

The military response was coordinated through the establishment of four regional task forces, each associated with multiple FEMA regions. The military took advantage of the existence of standing Joint Task Force Civil Support (JTF-CS) as headquarters for one task force (Donnelly and Goodall 2021, 22). The task forces were to coordinate with state and local authorities to ensure that military support was aligned with their needs and priorities. JTC-CS later worked with a range of civilian agencies to help administer COVID-19 vaccines throughout the US (Lehman 2021).

Early in the pandemic, the army recognized it needed to balance two goals: "enhance its capability to support civil authorities in the United States while maintaining the readiness to deploy units as required by overseas combatant commands," which in practical terms meant controlling the spread of COVID-19 within the force (Donnelly and Goodall 2021, 10).

3.2   Roles of the Military

The military's primary role in the COVID-19 response was DSCA (as discussed above) under NORTHCOM using a mix of guard, reserve, and active units. Unlike many previous responses, where DSCA was focused on a particular state or region, the response to the pandemic was nationwide (Donnelly and Goodall 2021, 21). In the first months of the pandemic, all 50 states, three US territories, and the District of Columbia mobilized Army National Guard troops in response to the pandemic, primarily under Title 32 authority. Nearly 40,000 members of the guard were mobilized by mid-May before mobilizations began to decline over the summer (Donnelly and Goodall 2021, 32).

3.2.1   Engineering and Construction

A significant component of the military response was designing, constructing, and staffing medical facilities. In March 2020, FEMA tasked the Army Corps of Engineers with providing planning and engineering support for alternate care facilities in communities where hospitals were overwhelmed. The Army Corps of Engineers published design standards, assessed candidate sites, and supervised construction contractors before turning the sites over to local communities to own and operate. One prominent example was the conversion of the Jacob K. Javits Convention Center in New York. Overall, the Army Corps of Engineers made 1155 site assessments, resulting in 38 facilities where the army awarded contracts and 36 facilities where states awarded contracts based on army designs (Donnelly and Goodall 2021, 19–21). Ultimately, authorities realized that the key shortage was personnel rather than hospital beds, leading to a shift in military support from facilities to personnel (Saxton and Cancian 2021, 3; Donnelly and Goodall 2021, 26–27).

3.2.2   Medical Care

As a result, uniformed service members provided health care at field hospitals, on US navy hospital ships, and within civilian medical facilities. The US navy ship Comfort was deployed to New York and the USS Mercy to Los Angeles. The ships were not well suited for treating COVID-19 patients and ultimately treated fewer than 300 patients in total (Saxton and Cancian 2021, 3). In some cases, service members cared for COVID-19 patients directly, while in others they treated non-COVID patients to free up capacity at local hospitals which could then treat critically ill COVID patients (Donnelly and Goodall 2021, 25). The provision of medical services included the creation of urban augmentation medical task forces (UAMTFs) in coordination with the Department of Health and Human Services, based on a plan developed in 2014 (Donnelly and Goodall 2021, 26). The military also worked with FEMA and state emergency management agencies to help provide mortuary

services when cities became overwhelmed with the remains of those who had died from the virus (Radulescu and Lancia 2020; Donnelly and Goodall 2021, 25–26). The military scaled back its involvement in providing medical care once civilian authorities determined that civilian medical facilities were no longer overwhelmed. For example, the governor of New York closed the Javits Center temporary medical facility on May 1, 2020, and all UATMFs were demobilized by June 2020. "In total, ARNORTH had deployed more than 9000 people from all the military services and components, including over 3100 medical personnel, in support of nine alternate care facilities and twenty-four hospitals in nine states" (Donnelly and Goodall 2021, 29–32). While demand for military support dropped and remained lower as civilian capacity adapted, the military continued to provide medical personnel in response to limited local surges (Donnelly and Goodall 2021, 60).

3.2.3 Economic Assistance

In response to the economic effects of the pandemic, members of the guard helped distribute food to those in need and assisted with processing unemployment claims (Donnelly and Goodall 2021, 33). Service members also performed a wide range of other jobs because of pandemic-related labour shortages. In Massachusetts, in the fall of 2021, as many schools were starting their first full in-person school year since the beginning of the pandemic, the governor activated National Guard members to drive students to school due to driver shortages in some school districts as some guard members already had the licenses required for larger classes of vehicles (Neuman 2021). In New Mexico, as school staff shortages continued and worsened into 2022, state National Guard members served in uniform as substitute teachers (Nawaz 2022).

3.2.4 Research and Development

The military also contributed to research efforts in response to the pandemic, including helping to develop 3-D printable nasal swabs, testing the effectiveness of disinfecting solutions, and running a contest to encourage the creation of simple low-cost ventilators (Donnelly and Goodall 2021, 50–51).

The Department of Defence partnered with the Department of Health and Human Services for Operation Warp Speed (OWS), "The national effort to accelerate the development, manufacturing, and distribution of a COVID-19 vaccine" (Lopez 2020). President Trump appointed General Gustave F. Perna, the commanding general of US Army materiel command, to be its chief operating officer (Donnelly and Goodall 2021, 51). In OWS, the federal government took on the financial risk associated with building the capacity to manufacture vaccines that were still in development, and producing them while later stages of clinical trials were still underway (Lopez 2020). In the press conference announcing OWS's success, President Trump used militarized language to describe the virus: "From the instant, the coronavirus

invaded our shores, we raced into action to develop a safe and effective vaccine at breakneck speed" (White House 2020).

3.2.5   Logistical Support

One of the military's main contributions to Operation Warp Speed was logistical support. President Trump emphasized the military's role in facilitating the logistics of vaccine distribution, thanking "A man who's now going to be very important, General Gus Perna. I have no doubt about it, right? (Applause.) Logistics." Trump further noted: "Later today, General Gus Perna will outline the detailed plan to rapidly distribute the vaccine to every state, territory, and tribe." Trump also noted the potential role of the Defence Production Act in facilitating vaccine manufacturing and distribution: "Now, if necessary, I told you, we'll invoke the Defence Production Act, but we don't think it will be necessary. If it is—it's a very powerful act [sic], as you know, because we've used it very, very successfully." "I've worked and invoked the Defence Production Act over 100 times to manufacture essential supplies in the United States" (White House 2020). "Army support for Operation Warp Speed included standing up clinical trial facilities using its Logistics Civil Augmentation Program, managing contracts, transporting supplies, and placing personnel with needed expertise on temporary duty with the operation" (Donnelly and Goodall 2021, 51).

Once the vaccine had been developed and produced, the military—and particularly the National Guard—assisted in vaccine distribution and administration (Donnelly and Goodall 2021, 62–65). President Biden's national COVID-19 strategy called on DOD to "bring its logistical expertise and staff to bear, with the Federal Emergency Management Agency (FEMA) managing set-up and operations [of community vaccination sites]" (Saxton and Cancian 2021, 4).

Members of the National Guard also played a variety of miscellaneous roles during the pandemic, from staffing COVID-19 call centers to facilitating large-scale COVID testing to cleaning and sanitizing nursing homes to screening air travelers for COVID-19 symptoms (Donnelly and Goodall 2021, 32–33).

3.2.6   Order Maintenance

Finally, many states activated their National Guards in response to domestic unrest early in the pandemic. In April 2020 some states saw protests outside their statehouses in response to pandemic mitigation measures such as stay-at-home orders and mask mandates (Andone 2020). However, the activation of the National Guard was primarily in response to large-scale protests of police killings of unarmed Black Americans, which began after Minneapolis police killed George Floyd in May 2020 (Soucy 2021).

Members of the guard assisted local authorities with everything from directing traffic to extinguishing fires (Soucy 2021). In June 2020, "41,398 ARNG [Army

National Guard] soldiers in thirty-two states and the District of Columbia were on active duty to help state and local authorities deal with civil disturbances" with deployments continuing through August and September (Donnelly and Goodall 2021, 33–34). The Trump administration considered also deploying active-duty troops, but ultimately did not.

National Guard troops were again mobilized on January 6, 2021, in response to the insurrection at the US Capitol that attempted to halt the certification of the 2020 election results which rapidly overwhelmed Capitol Police (see Cohn 2022, 84–85). Between January 6 and President Biden's inauguration on January 20, nearly 26,000 members of the guard from multiple states deployed to the national capital region to provide security (Donnelly and Goodall 2021, 66–67).

3.3   Readiness and Effectiveness

The COVID-19 pandemic significantly disrupted the operations of the US military on several dimensions, particularly overseas. In the early months of the pandemic, large-scale exercises and deployments were cancelled. The Department of Defence then shifted to quarantining personnel before deployment, and adjusted exercises and deployments to lower the risk of COVID-19 spread (Cancian et al., 2020). The military paused its recruiting and training activities early in the pandemic, though it did resume them, with increased testing and smaller class sizes (Cancian et al. 2020). A COVID-19 outbreak on the aircraft carrier Theodore Roosevelt in March and April of 2020 as it was deployed in the Pacific illustrated the virus's threat to deployed personnel's physical health and morale, as well as to civilian confidence in the military institution. The outbreak led to more than 1200 sailors testing positive and one dying from the virus. The ship's captain, Captain Brett Crozier, was relieved of command after his unclassified email to navy leadership pleading for assistance was leaked to the press. The Navy asserted that his "handling of the letter led to a loss of trust and confidence in his leadership," a common justification for relief of command. Some analysts interpreted the firing as the Navy asserting that Crozier "showed poor judgment in privileging his loyalty to his people over loyalty to the institution" (Cohn et al. 2020). Acting Secretary of the Navy Thomas Modly also resigned after he visited the Theodore Roosevelt and gave a speech to the crew criticizing Crozier, who had been popular on the ship. His remarks were recorded and leaked to the press, creating public embarrassment for the Navy (LaGrone 2020) A wide range of politicians and retired military officers subsequently criticized the Navy for firing Crozier (Cohn et al. 2020).

The military's participation in the COVID-19 response was largely viewed as a success. For an event of this scale, the military's experience with large-scale production and global supply chains, in addition to its large and adaptable pool of manpower, proved highly valuable. Nonetheless, the military's participation in the COVID-19 response also raised concerns. Some worried that using the military for domestic missions that could instead be handled by civilian agencies risks stealing resources

from core military missions, particularly those that require long-term investments, like shipbuilding: "Serious and likely harmful consequences flow from diverting the armed forces and the resources that support them to missions more appropriately tasked to domestic agencies. Those consequences include distracting the military from its main function—deterring and if necessary fighting America's wars—and blurring the lines between what civilians are trained and resourced to do and what is expected from a professional military" (McCusker 2024). This, of course, assumes that civilian agencies do have the resources to complete these missions, which often they do not. Removing these missions from the military's set of responsibilities does not remove the need to fund them. This parallels a militarization trend already seen in US foreign policy. The military is far better resourced than its bureaucratic counterparts and also has a can-do culture and the legal authority to order personnel wherever they need to be. This leads to the military being a foreign policy tool of first rather than last resort, engaging in a wide range of missions. In a self-reinforcing cycle, the military is then further resourced to continue these missions, to the further detriment of civilian agencies ostensibly tasked with these missions (see, e.g., Adams and Murray 2014).

We could see the same phenomenon emerging domestically, with resources diverted from civilian agencies to the DOD, turning the military into a first responder rather than a last resort, with implications for the military's readiness for other missions. Furthermore, in cases where federal troops (active duty or federalized National Guard) are deployed without the request or consent of the state's governor, coordination with state and local officials can be challenging, particularly when it comes to creating circumstances to end the deployment (Dickinson 2024).

Another concern is that some of the roles and skills required for domestic missions are not part of the military's core competencies. While the military does have capabilities in logistics and even specifically in medicine, public and private civilian institutions also have these capabilities, whereas those institutions do not have the military's expertise and legitimacy in the application of violence to achieve political ends. The military may be able to execute these missions when needed, but perhaps not as well as individuals with other forms of training and expertise. While there is annual training for National Guard units assigned to civil disturbance missions, "due to the lack of preparation, military forces acting on US soil may be at risk of exceeding the legal limits on the use of force and infringing on individuals' constitutional rights, for example, under the Fourth and First Amendments … And the armed forces themselves could find these risks demoralizing" (Dickinson 2024).

Domestic deployments of the National Guard carry an additional two-fold risk. First, activating the guard for domestic missions can interfere with their ability to serve as a reserve for the federal military if needed. Second, most members of the guard have full-time civilian jobs. If they are activated for guard duty, they are not working in their other job which may also be important for the local community. Authorities must sometimes choose between activating guard members—pulling them away from civilian jobs where they are urgently needed—and operating with lower than expected guard capacity. One estimate found that 20 percent of National Guard soldiers were unavailable for the Hurricane Katrina response because they

were already serving in vital jobs (first responders, police, etc.) in their local communities (Golby 2020).

4 Civil-Military Relations

4.1 Securitization of the Pandemic

In the United States, the COVID-19 pandemic was not only securitized but militarized. In addition to declaring a national emergency and mobilizing the military in response, as discussed above, leaders spoke of the virus as the enemy, and of first responders as frontline troops. During a press conference in March 2020, President Trump referred to the virus as "the invisible enemy" and referred to himself as "in a sense, a wartime president" (Elving 2020). Later in March, Governor Andrew Cuomo of New York, a state hit particularly hard early in the pandemic, declared: "The frontline battle is in the health care system… That is where this battle is fought… It's the doctors, it's the nurses, it's the people working in the hospitals, it's the aides. They are the soldiers who are fighting this battle for us" (New York State 2020). One summary of the COVID-19 war metaphor described the situation as follows: "Vaccines and therapeutics have been figured as weapons, and viral surges described as COVID's 'counterattack.' We've been at 'war' with a cartoon spiky orb, and we've been losing" (Nordstrom and Senk 2022). The apparent origin of the virus in China, one of the United States' main geopolitical competitors, combined with widespread mis/disinformation only fueled the portrayal of the virus as an enemy or even a bioweapon (Klepper 2023).

Militarization of a non-traditional threat, like a pandemic, is appealing to leaders for several reasons, but it also comes with risks to society, especially in a democratic system (Blankshain and Lupton 2020; Blankshain et al. 2023). These metaphors have a mixed track record of unifying the public in opposition to a threat (Nordstrom and Senk 2022), which is perhaps a function of not only how well the war metaphor fits, but how closely peoples' views of the crisis mirror existing partisan divides. Referring to the pandemic as a war may lower the political costs associated with invoking the Defence Production Act or mobilizing the military and can insulate policymakers from criticism, which can be discredited as unpatriotic (Blankshain and Lupton 2020). Securitization of crises may increase the likelihood that the government may infringe on civil liberties with limited pushback (Blankshain and Lupton 2020), as evidenced by the bipartisan passage of the Patriot Act after 9/11, legislation that granted U.S. law enforcement agencies broad new authorities as part of what became known as the Global War on Terror.

One of the most significant dangers of securitization, and in particular a response that focuses on military capacity, is that the response will be one of short-term missions rather than long-term structural solutions. For example, the military can quickly design, build, and staff field hospitals, but this does not translate into increased

access to health care in the long run, or improved ventilation in public schools. "Wartime metaphors feel good because they tap into our understanding that wars end," but in doing so they can prevent society from adapting to a new reality (Nordstrom and Senk 2022). "Responding to [chronic problems] properly requires attention to social systems and health infrastructure, neither of which tends to capture the public imagination like victories and heroes do. When we think about chronic problems through a wartime framework, we make them more tolerable, but at the expense of our capacity to solve them. We must stop speaking as if we were all good soldiers and recognize that some human tragedies are just that" (Nordstrom and Senk 2022).

Some hoped that referring to civilian first responders as soldiers in the fight against COVID-19 would increase respect for these workers and increase support for programs that would protect them. Others worried that this rhetoric would only further cement the military as the gold standard of service, rather than broadening the types of service the public recognizes. In a survey experiment fielded during the summer of 2020, when respondents were exposed to militarized language about the pandemic rather than neutral language, they expressed less respect for essential workers and saw them as more motivated by compensation (Blankshain et al. 2023).

An example from 9/11 is revealing. Many civilians were exposed to toxic air near Ground Zero when they sought to get back to normal as quickly as possible, "But while the fantasy of toughing it out in wartime may have helped these patients achieve recognition, it was also what exposed them to danger in the first place" (Nordstrom and Senk 2022). We saw similar dynamics with the securitization of the pandemic—essential workers and even school children who accepted the risk of being exposed to the virus were portrayed as brave soldiers (Nordstrom and Senk 2022).

4.2 Civilian Oversight and Accountability

The Department of Defence, and the uniformed military more specifically, worked closely with civilian, domestically focused agencies throughout the pandemic response: "DoD has properly taken a supporting role by deploying medical personnel to augment civilian hospitals, mobilizing National Guard personnel to provide logistical support, and providing rapid contracting capabilities to tap into the civilian economy" (Saxton and Cancian 2021, 1). In many cases, the military worked to enhance rather than replace civilian capacity, as when "DoD used its extensive expeditionary contracting capabilities" to get government access to private-sector civilian capabilities such as "light construction, transportation, and supplies" (Cancian et al. 2020, 4). One report notes that "Military medical forces were most successful when they augmented the existing civilian medical establishment by providing additional medical personnel and assisting with supplies and logistics, rather than creating new hospitals and facilities" (Cancian et al. 2020, 4).

In addition to the securitization dynamics mentioned above, accountability is complicated by the combined federal and state nature of the domestic response. The

chain of command, and accountability authority, differ between military and civilian actors and the type of orders under which National Guard troops are operating. This is particularly challenging when the response is carried out primarily by National Guard troops operating under state authority in response to a pandemic that crosses state boundaries (Golby 2020). To solve some of these coordination challenges, the National Guard Bureau and USNORTHCOM created dual-status commanders in each state to facilitate state National Guard and active-duty military coordination, as discussed above (Golby 2020).

An area of particular concern for civilian oversight and military accountability is the military's participation in domestic law enforcement and in responding to civil disturbances. The army launched an investigation after members of the guard flew helicopters low over protesters in a June 2020 demonstration in Washington, DC. The investigation found "a very general lack of understanding of how to use, how to employ helicopters in civil disturbance support operations," but it deemed it a performance issue rather than misconduct. The result was corrective and disciplinary actions against those involved and in the implementation of new procedures and protocols for the guard to use when responding to civil disturbances (Cox 2021). There has been significant criticism of the amount of time it took for the National Guard to respond to the Capitol on January 6, 2021, but these have been directed primarily at civilian policymakers (Cohn 2022, 84–85).

4.3 Public Image of the Military

Over the past several decades, the US public has demonstrated high levels of confidence in its military, particularly relative to other governmental institutions, especially those associated with partisan politics. Scholars have theorized that public support for the military is affected by several drivers, including performance, professionalism, partisanship, persuasion, and personal connection (Burbach 2017; King and Karabell 2003; Margulies and Blankshain 2022). This suggests that using the military domestically could affect public views of it in several ways. First, if the military is seen to do a competent job in executing domestic missions, and service members behave professionally in their interactions with the public, confidence in the military may increase. If, on the other hand, the response is seen as a failure and/or military members are involved in scandals, confidence in the forces may decrease. Of course, perceptions of performance and professionalism are not purely objective— they are shaped by rhetoric. In the United States, the response to the COVID-19 pandemic quickly developed a partisan slant. Some analysts have expressed concern that partisan criticism of the military—as the US has seen from the political right after some military members distanced themselves from some of President Trump's proposed domestic uses of the military—may erode trust in the military and its professionalism (Krebs and Ralston 2021).

One study investigated how the public views militarized responses to domestic crises. The study found that the public is, in general, skeptical of military responses

to non-traditional domestic threats. The public was less supportive of government interventions in response to a disease outbreak than to a category-5 hurricane on a range of measures: approval, warmth, legitimacy, appropriateness, effectiveness, and confidence. During a pandemic response, the public was ambivalent between responses from the police or military, demonstrating a slight preference for the state-controlled National Guard. Regardless, they preferred that a response be aimed at logistical support, rather than order maintenance and that the responders be unarmed (Blankshain et al. 2024). However, another recent study found that the public is far more supportive of domestic deployments of the military in response to civil unrest than are members of the military (Hanson and Knuppe 2024).

5   Lessons Learnt

One lesson of the COVID-19 response is that the US military is well-equipped to undertake certain types of short-term missions during a domestic public health crisis. In this case, in the immediate response, the military was operating primarily in support of civilian agencies until those agencies were able to take over the bulk of the response. However, the response also highlights certain dangers. While the military may be equipped to respond to a pandemic, using the military for a longer-term response to a public health crisis may contribute to the further atrophy of civilian public health and emergency response agencies. It may also exacerbate how military service can be elevated over other forms of public service. This can make it harder to hold the military accountable for operational failures or ethical lapses if military personnel is seen as more trustworthy and honourable than civil servants and elected officials. It can also reinforce disparities in military vs. civilian capabilities if the military's prestige (relative to civilian service occupations) makes it a more attractive career and recipient of federal funds. Finally, COVID-19 and other more recent natural disasters have also demonstrated that using the military isn't a silver bullet for avoiding partisan polarization in response to a crisis.

Overall, the response to the COVID-19 pandemic in the US demonstrates that the US military can be deployed domestically to aid in the response to a non-traditional threat without significantly threatening civilian control of policy-making or its standing with the public. However, overreliance on the military may further erode both civilian agency capacity and public trust in civilian agencies relative to the military in the long run. The military is good at accomplishing the missions it is assigned, but it is not designed for long-term domestic deployments (nor would this be desirable). Resources dedicated to a short-term military response can undermine long-term civilian capacity, as we've seen with the militarization of foreign policy. Militarization also raises the eventual possibility of a larger military voice in policymaking crowding out civilian perspectives.

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United Kingdom

Robert Clark

Abstract The British military has a long-established, albeit often debated, role in domestic affairs, primarily through Military Aid to Civil Authorities (MACA) under the Civil Contingencies Act 2004. This framework outlines military support for civil authorities during natural disasters, network disruptions, and even criminal activity, with civil primacy always maintained. This chapter examines the British armed forces' unprecedented peacetime domestic operation in response to the COVID-19 pandemic, the largest domestic deployment in British peacetime history. Their diverse roles included manufacturing and distributing PPE, constructing temporary NHS hospitals, pioneering mobile testing units, providing logistical and planning expertise, and assisting with the rollout of vaccines. While demonstrating the military's immense utility and adaptability, Operation Rescript also highlighted critical issues in civil-military relations. Concerns arose regarding the potential for military overstretch, its impact on combat effectiveness, and the "securitization" of the pandemic through governmental language and military involvement. The experience underscored the need to balance domestic support with core defence responsibilities, especially given recent force reductions and heightened geopolitical tensions.

1 Introduction

Three services comprise the British armed forces: the British army, which is roughly 78,000 strong but which is being reduced to 73,000 by 2025; the Royal Navy at approximately 34,000 in strength; and the Royal Air Force (RAF), comprising 33,000 regular personnel (Ministry of Defence 2021a). All three services maintain a reserve (volunteer) element, bringing the total number of trained personnel to just under 199,000 (Ministry of Defence 2021a). Operationally, the overseas deployment of British personnel is overseen and managed by permanent joint headquarters (PJHQ), part of the strategic command.

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The responsibility to deploy British military personnel domestically lies with the Ministry of Defence (MoD). A defence minister must authorize all requests for defence assistance, which is to have been submitted by a local council authority. Exceptions to this policy include "immediate assistance," i.e., a threat to life. In this instance, military commanders can authorize deployments and requests relating to the defence estate. The Defence Infrastructure Organization, or DIO, is part of the MoD, looking after the military estate, both in the UK and overseas. Depending upon whether the civil authorities' intended use is considered contentious or not, either a senior military officer locally or a senior military officer in the MoD will authorize the request (Ministry of Defence 2021b). Any domestic military deployment within the United Kingdom (UK) and Crown dependencies is made within a broader civilian-led framework, implemented by the home office and usually overseen by the cabinet office (the office of the prime minister's cabinet).

In what became the British military's largest-ever domestic operation in peace-time, Operation Rescript saw the UK armed forces at the forefront of the nation's response to the COVID-19 pandemic. On March 18, 2020, the defence secretary announced the COVID support force (CSF) would assist public services with their response to the coronavirus outbreak. This saw an initial deployment of 20,000 personnel who were at readiness, with up to 4000 committed to daily tasks by the end of March 2020 (Ministry of Defence 2020a). These tasks initially ranged from manufacturing and distributing personal protective equipment (PPE), oxygen, and ventilators to frontline national health service (NHS) staff, to later helping construct temporary hospitals to relieve the NHS where it was most stretched.

The military was thrust into the public eye with the advancement of the mobile testing units (MTU)—pioneered by members of the British army. These units of approximately 10 military personnel at each location provided testing facilities for key front-line workers who carried on working during the UK's first lockdown. While the MTU demonstrated the utility of the UK's armed forces on practical health care and tasks that involved interacting with the public, specialized military personnel were deployed for their particular expertise. This was evident within planning, logistics, and distribution chains, in addition to members of 77 Brigade providing counter-disinformation training across government departments.

This chapter frames Operation Rescript from a historical perspective, viewing UK domestic operations over the last 25 years, while also seeking to shape the future public and political debate around the ability of the armed forces to help bolster national resilience. To gain an insight into the challenges posed during the COVID-19 deployment, we interviewed over 50 members of the UK armed forces involved in Operation Rescript and held further conversations and interviews with members of the NHS, the cabinet office, the Department of Health and Social Care, and the ministry of defence (MoD). These interviews and conversations gave the author insights and knowledge and have directly fed into this chapter and, ultimately, its recommendations and conclusions.

2 Domestic Operations

2.1 Constitutional and Legislative Framework

A fundamental responsibility of any government is the security of its sovereign territory and its population. There is a clear distinction in the UK between the defence of the nation-state against military threats, and UK civil protection, where the UK's armed forces have an active role. De Vore and Finnegan (2022) argue Britain's military traditionally fulfils different functions domestically, certainly much more so than the militaries in other liberal democracies, which often have dedicated police or quasi-military police in charge of domestic security and civil emergencies (De Vore and Finnegan 2022).

The distinctly British approach was once and for all solidified in statute by the Civil Contingencies Act 2004. All military operations undertaken within the UK fall under the title of United Kingdom Operations (UK Ops). This designation includes the MoD contribution to societal resilience, which is provided at the specific request of civil authorities, subject to civil primacy, and requires the authorization of the secretary of state for defence. Typically, UK operations include military aid to the civil authorities (MACA); military operations (MO) in support of the standing strategic and overseas tasks; and military home defence (MHD) of UK territory against an external military threat. In this capacity, the UK armed forces support local authorities in extreme situations when their capacities are stretched or overwhelmed, or when the threat to national security is extremely high.

In terms of domestic deployment, MACA has long been identified as one of the standing tasks of the UK armed forces—as far back as 1969 and the deployment of the British Army under Operation Banner to Northern Ireland in support of the Royal Ulster Constabulary. The role of MACA and Operation Banner has been covered in greater detail elsewhere (Hughes 2011; Warnes 2022). For this research, the more recent roles of MACA were clarified in the 2010 Strategic Defence and Security Review (SDSR) and again in the 2015 National Security Strategy and Strategic Defence and Security Review. The 2015 SDSR set out eight missions for the armed forces, the first of which is to defend and contribute to the security resilience of the UK and overseas territories. This therefore explicitly includes supporting UK civil authorities in strengthening resilience.

2.2 Deployment in Domestic Roles

The majority of UK Ops are likely to be conducted in support of MACA, with specific governmental ministries or civilian agencies requesting military assistance, and in response to a wide range of contingencies and emergencies during peacetime and periods of tension, crisis, and war. All requests for MACA require specific ministerial approval. In extreme situations, the central government may make military resources

available without requiring local agencies to make a formal request. In any event, military support is only provided as assistance and on the basis that the relevant civil agency retains responsibility for and control over the situation and/or emergency (Ministry of Defence 2007). The contingencies fall into 3 main categories:

1. *Natural disasters.* The response to natural disasters, such as floods and severe weather, is most likely to draw on defence resources because of the need for a quick response to protect human life and property and to alleviate distress.
2. *Network failure or disruption.* Within this context, the network describes the inter-connected national infrastructure enablers, such as transportation links, communications, IT, and public services. The consequence of an animal disease epidemic or public service-related industrial dispute may result in network failure or disruption. As such, it could require the allocation of defence resources because of the potentially widespread impact of such disruptions on the safety and security of UK citizens. The extent to which the MoD is engaged would depend upon the nature of the network and the impact of the disruption. However, defence personnel may be required in greater numbers than for other events and may require specialist training.
3. *Criminal activity.* An adequate civil response to criminal activity (including, but not limited to, terrorism) is important to ensure that its impact is minimized. Thus, the response to criminal activity is least likely to draw on defence resources in the first instance, but military force or specialist expertise may be needed in certain circumstances.

When an incident occurs in the UK, the response is directed from the bottom up, with most incidents managed at the local level. If the incident requires further support, it may require a multi-agency response which is guided by a command structure (gold/strategic, silver/tactical, and bronze/operational) and JESIP communication principles. When local capacities are overwhelmed, the government declares a national emergency and the cabinet office briefing rooms (COBR) will lead the response. Here, the military may be called upon to assist in response and recovery efforts. The Civil Contingencies Act 2004 and the Emergency Powers Act 1964 (House of Commons 2020) govern the legal authority to use service personnel in operations under MACA.

The legal framework for UK Ops falls under various civil legislative texts, depending upon which branch of the UK armed forces is being deployed. The Reserve Forces Act 1996 (RFA 96) provides for the call out of reserve forces. This process is also referred to as "mobilization" and serves as the primary mechanism for reservists to undertake military operations or other authorized military tasks. The Armed Forces Act 2006 and the subsequent Defence Reform Act 2014 (DRA 14) amended the RFA 96. The Armed Forces Act 2006 provides the governing guidelines and legal parameters for deploying military force on UK Ops and provides overall legal clarity for the armed forces to deploy on both public order and disaster relief operations. The Act stipulates that:

> An action or operation may be conducted whether as part of an armed conflict or not and can include circumstances where forces are involved in the restoration of public order or disaster relief.

Since the beginning of the twenty-first century, the UK military has engaged in four major UK domestic operations. These included a range of tasks and duties and were enacted through different pieces of legislation. The first was in response to the outbreak of foot and mouth disease across much of northern England. The British army deployed on Operation Peninsula after 25 days of the crisis, which saw more than 2000 personnel deployed at its peak (House of Commons 2008) to disease control centres in April and May 2001 (National Audit Office 2002). Deploying to the worst hit areas including Cumbria and Yorkshire, the army worked alongside locals to control the outbreak and helped with the slaughter and disposal of infected animals (Chrisafis 2001), while also having a central role in managing operational logistics (BBC News 2001). The secretary of state for the ministry of agriculture, fisheries and food asked the prime minister for the army's support. Significantly, the National Audit Office stated in its subsequent report that:

> Many of the stakeholders and agencies we consulted felt that the deployment of troops had had a very positive impact in helping to control the disease and that the armed services should have been called in much earlier. (National Audit Office 2002)

The second major UK Ops deployment was Operation Fresco, from 2002–2003. When the Fire Brigade Union (FBU) went on strike in 2002, 19,000 military personnel were mobilized to help provide crucial capability while the FBU members were off work (UK Parliament 2004). The armed forces provided emergency cover during the strike, using vintage Green Goddess fire engines. During the strike, the military also fielded small breathing apparatus rescue teams (BART) and rescue equipment support teams (REST), headed by professional firefighters from the RAF and staffed by specially trained members from all three services. It is pertinent to note that due to the large numbers of military personnel required to cover the striking fire service, a potentially highly damaging effect was narrowly averted in the run-up to the invasion of Iraq in March 2003. The House of Commons Defence Select Committee concluded that Operation Fresco had a dire effect on the planning process for the build-up to the Iraq War:

> Although the Armed Forces' commitment to Operation Fresco did not prevent them from putting together an effective force package for the operation in Iraq, it did limit the total numbers. It also adversely affected some elements of the force (by for example requiring high readiness units to move at short notice from firefighting to deploying to Iraq). *In the longer term it could have undermined the Armed Forces ability to sustain combat operations* (House of Commons Defence Committee 2004), (author's own italics).

The third major UK Ops deployment of the twenty-first century was assisting civil authorities with flood-relief efforts. Operation Pitchpole occurred in 2013–2014 when almost 5000 personnel were mobilized to help with flood relief in southern England (Hansard 2014). The main military effort was constructing flood defences in residential areas (Army Technology 2014); troops worked alongside the environment

agency using military bulldozers, diggers, and excavators. In particular, members of the Royal Engineers were crucial to this effort (Army Technology 2014).

Following this were the winter floods from 2015 to 2016 when the armed forces worked on constructing flood defences, evacuating vulnerable people, providing helicopter support, and clearing roads in Cumbria, Lancashire, and Yorkshire (Ministry of Defence 2016). In November 2019, 200 military personnel were deployed to South Yorkshire to support flood relief efforts (Ministry of Defence 2019). Once more, they bolstered flood defences, assisted residents, and supported evacuation efforts.

These flood-relief operations were relatively minor in terms of the numbers of personnel physically deployed; typically, a few hundred were deployed, though that rose to 2000 during Operation Pitchpole. However, unlike Operations Peninsula and Fresco, the military was firmly in the public eye for these operations, clearly assisting civil authorities, which had a positive impact on military-civilian relations. The timing of Operation Pitchpole is significant, with UK combat operations having ended in Afghanistan by the close of 2014. The previous 10 years had seen British troops engaged in heavy combat in both Iraq and Afghanistan.

The final major UK Op conducted in the twenty-first century is the ongoing assistance to police authorities with counter-terrorism efforts. In Operation Temperer, military personnel support police officers during a crisis when their resources are stretched. In the event of a crisis, particularly a terrorism incident, military personnel relieve armed police officers at critical national infrastructure sites around the UK, including sites like nuclear power stations, which enables the police to reinforce their response to the ongoing emergency or crisis.

Operation Temperer can only be called by a COBR meeting, chaired by the home secretary. Operation Temperer was first instigated after the Manchester Arena terrorist attack in May 2017, when the UK threat level was raised to "critical," and 984 military personnel were deployed (Gearson and Berry 2021). This role is a more assertive one for the military; it will at times actively patrol British streets, a first since the Troubles in Northern Ireland. However, the relatively low-key role the military plays by relieving police officers at certain sites keeps this operation's visibility very low for the UK public.

3   Military Deployment During COVID-19

3.1   *Coordination of the COVID-19 Response*

In March 2020, just one week before the first national lockdown, the UK government established four new ministerial-level implementation committees and tasked them with coordinating the government's COVID-19 response. These cross-government committees focused on health, public sector preparedness, the economy, and the international response. In turn, these committees provided daily input to a COVID-19 cabinet office meeting, which the prime minister chaired (Department of Health

and Social Care 2019). From the beginning, the UK armed forces had a supporting but organizationally significant role in assisting the government's response, particularly in the health care and general public sector committees, while also contributing to the international committee working with partners and especially British Overseas Territories. The day after the four implementation committees were established, the government received almost 400 separate MACA requests for military support (Ministry of Defence 2020b).

The health care committee, chaired by the health secretary, focused on the preparedness of the NHS, notably ensuring that the critical care system had enough capacity for those worst affected, and enough capacity to deliver medical and social support for those whom the government was providing with the so-called shielding regime (i.e., medically vulnerable people with reduced immunity, such as care homes). The general public sector committee chaired by the chancellor of the Duchy of Lancaster looked at preparedness across the rest of the public and critical national infrastructure (excluding the NHS). The economic and business committee, chaired by the chancellor and with the business secretary as deputy chair, led the economic and business response, including supply chain resilience. Finally, the foreign secretary chaired the international committee and led work on the UK's international response to the crisis through the G7, G20, and other international alliances.

The government's response to the COVID-19 pandemic was described as "hampered by [being] overcentralized, poorly coordinated, and poorly communicated," with local providers and services being sidelined, according to a House of Lords committee report at the close of 2020 (Dyer 2020). The government's response to the pandemic both exposed and accentuated the inequalities, particularly in the health and care sectors, highlighting that a renewed focus on preventative health was urgently required in addition to better provision of local services that provide accessible health care and advice to all communities. Ultimately this means that the government must put an end to the excessive centralization that holds back local expertise and starves community health and social care providers of resources (Dyer 2020).

3.2 Roles of the Military

By March 18, 2020, 399 COVID-19 MACA requests had gone through the MoD (Ministry of Defence 2020a). By June 11, 2020, 3610 military personnel were assisting with 54 open MACA requests. By May 21, 2021, this figure had dropped to around 405 personnel engaged in 19 open MACA requests, with approximately 5000 personnel available to assist if required including 400 vaccinators (Ministry of Defence 2021c). Throughout the pandemic, military support was forthcoming in the following areas (Ministry of Defence 2020a):

> *Planning support.* Military planners were deployed alongside local resilience forums and partnerships, working with the emergency co-ordination centres in Scotland and Wales supporting public services, local authorities, and emergency services. Military officers

experienced in command and control were embedded within civilian structures to support decision-making and resource allocation.

Defence Science and Technology Laboratory (DSTL). Alongside testing, MoD scientists based at DSTL were deployed directly to government departments, local resilience teams, and military headquarters, to provide assistance, insights, and advice to planners and decision-makers. Highly experienced microbiologists were also deployed to increase the capacity of Public Health England and NHS laboratories.

Supporting the national testing effort. The UK's armed forces helped with national testing capacity. This included working with specialists from Boots Pharmacists to train testing personnel, providing military testers to regional testing centres, and delivering vital testing equipment. Scientists at DSTL worked with the defence COVID laboratory and could test at least 2000 samples a day. It was part of a wider capability at Porton Down, where, in partnership with Public Health England, a total of up to 7000 tests per day could be processed.

Mobile testing units. The military helped and indeed pioneered the creation of the mobile testing unit (MTU). The British army designed the units to be set up in less than 20 minutes; each unit could test up to 500 individuals per day. By the end of May 2020, these units had tested over 310,633 people.

Procuring personal protective equipment (PPE). Over 100 staff from Defence Equipment & Support (DE&S) helped the cabinet office and the Department of Health and Social Care identify and purchase PPE. By June 2020 over two million items of PPE had been purchased from orders negotiated by DE&S staff. In addition, the MoD's quality assurance field force helped ensure that any PPE sourced as part of this new supply met the NHS and social care staff specification requirements.

Delivering PPE. Military personnel were involved in delivering over 1.18 billion items of PPE to NHS staff where they were distributed to NHS trusts and organizations across the UK. This included 158 million masks, 184 million aprons, 2.3 million gowns, and 689 million gloves and involved a broad range of military units, drawing heavily on the expertise of the Royal Logistics Corps. This effort included a team from 4 Regiment Royal Logistics Corps, who were embedded within the civilian workforce at the NHS supply chain hub in Daventry. The team helped to organize and coordinate a new e-portal, which allowed customers to order PPE and receive it within two days.

Manufacturing PPE. Personnel from across all three services used 3-D printers to manufacture PPE components for their NHS colleagues on the frontline. At HM Naval Base Devonport and HM Naval Base Portsmouth, Royal Navy personnel manufactured headbands for facemasks in collaboration with other dockyard agencies. They were joined in this effort by a small navy team at RNAS Culdrose, who set themselves the target of producing 10,000 face shields for doctors, pharmacies, care homes, and charities across Cornwall. Meanwhile, army personnel from the 22 Engineer Regiment produced face shields. The Chinook support centre based at RAF Odiham manufactured clips to enhance the comfort of masks when worn for long periods.

Delivering testing kits to care homes. Service personnel worked with the Department of Health and Social Care to provide testing support to English care homes. Working in pairs, military crews helped ease the burden on carers by using military vehicles with climate-controlling capabilities to drop off and collect testing kits.

Ambulance support. Nearly 400 personnel helped support ambulance services across the UK. Drawn from all three services, they provided emergency response vehicles and worked in response centres. In addition, they were all trained in first aid and trauma, which meant that they could support ambulance crews when required.

Temporary NHS hospitals. Military personnel supported the NHS by opening new hospitals and providing infrastructure, logistics, and project management advice and expertise. By

June 2020, the military supported the building of six brand new facilities initially housing over 2700 beds, rising to a maximum capacity of 8,750 beds (Ministry of Defence 2020a). These facilities were designed to take the strain off the NHS across the UK and relieve hospitals of some of their most serious cases.

In addition, military personnel supported the Scottish government and NHS Scotland to determine how the Scottish exhibition centre could be transformed into a temporary hospital. Servicemen and women were also deployed to the Principality Stadium in Cardiff to help build beds at the Dragon's Heart Hospital. Furthermore, military scientists developed a "fit-testing kit," which ensured that PPE fit frontline medical workers. This not only enabled the new Nightingale hospitals to open on schedule but also helped to support the entire NHS system during the first lockdown across the UK between March and June 2020. Military personnel were also deployed to assist NHS staff at these new hospitals, carrying out a wide range of clinical support activities, such as porterage, helping medical staff to robe and disrobe with their PPE, equipment maintenance, and store management.

Support to hospitals. Hundreds of defence medics deployed to hospitals across the UK to work in intensive care units and care for patients in other ways, providing vital care alongside health professionals to help relieve pressure on the NHS and Northern Ireland health and social care services. The defence medics joined the 1600 armed forces personnel embedded within the NHS on a long-term basis. In addition, thousands of general duties personnel supported those doing non-clinical jobs, including porter duties, to help free up NHS staff for clinical roles.

Ventilators. Over 2700 ventilators were distributed to NHS hospitals, of which the majority came through the defence equipment & support (DE&S) fulfilment centre. By June 2020, DE&S distributed over 7500 items of critical medical equipment to the NHS, including oxygen concentrators and humidifiers. In Hampshire, RAF Odiham supported the production of ventilators, providing storage space for medical ventilator trolleys before they entered the next phase of assembly. The trolleys were produced by a civilian consortium, supported by brands that included McLaren and other Formula 1 teams. By the end of June 2020, the consortium was able to produce 15,000 new ventilators.

Oxygen tanker drivers. Over 100 personnel from each of the three services conducted training to subsequently drive and command oxygen tankers at air products facilities in Carrington and Port Talbot. They then filled the oxygen tankers, drove them safely, and deposited their cargo at NHS facilities.

Vaccine support. Defence continued to support efforts to vaccinate people across the UK. Defence deployed 12 military planners to assist NHS England's vaccine task force b after it had provided 42 teams of 6 people in England as part of the vaccine quick reaction force from January 2021. Around 190 service personnel supported the health boards in Wales to establish and operate vaccination centres, and in Scotland, 90 medics and management staff supported the vaccine program there including 24 logistic support staff, mainly from the Edinburgh-based 3 Rifles, who helped health boards run vaccination centres in Grampian, Dumfries and Galloway, Borders, and Lothian. Since April 2021, 100 defence medics supported the Northern Ireland Department of Health with the vaccine rollout. Defence has also helped to deliver thousands of vaccine doses to overseas territories, including Gibraltar, the Falkland Islands, and Ascension Island (Ministry of Defence 2020a).

From June 2021, approximately 275 personnel from the British army, including 144 medics, deployed to assist in the vaccination rollout in the Northwest of England. In addition, 63 personnel were deployed to Scotland to assist in vaccinations, while in Northern Ireland a vaccine task group made up of 100 combat medical technicians and 22 logisticians supported the mass vaccination program for 8 weeks. Alongside their Northern Ireland health and social care counterparts, medics administered almost 121,000 vaccines which saw the military vaccinate 7 percent of the population against the virus. Regular and reservist personnel from

32 units across all three services supported the program at the SSE Arena in Belfast until the end of May (Ministry of Defence 2021c).

Support to overseas territories. The military worked closely with the UK government and its representatives across the British Overseas Territories to ensure that they received the help they needed to manage outbreaks of COVID-19. This included shipments of PPE, ventilators, and the vaccine rollout.

3.3 Readiness and Effectiveness

Operation Rescript is significant for several notable reasons. First, it was not only the largest domestic operation conducted by the UK military during peacetime, but it was the first to encompass a whole-of-government approach to a national crisis. The UK armed forces were used in almost every component of the government's strategy. This is organizationally very different to other domestic military operations conducted over the last 25 years which were far smaller in scope, deployment size, and duration.

The second reason that Operation Rescript is significant is the detrimental impact it had on the military's combat effectiveness. It was telling how, in the wake of the country's foot-and-mouth pandemic which ravaged much of England's cattle and agricultural industry 20 years previously, a government-led review concluded that the large-scale deployment of armed forces personnel and equipment to assist civilian authorities almost irrevocably hindered the planning process for the run-up to the invasion of Iraq in March 2003. This poignant lesson must not be forgotten.

Since March 2021, during the third and final UK lockdown, the defence command paper announced that the size of the UK's armed forces would be reduced further by 9500 personnel. Less than one year later, in the spring of 2022, war returned to Europe. The ongoing conflict between Russia and Ukraine has already led to NATO reinforcing its vulnerable eastern flank, including the further deployment of 850 British troops to the enhanced presence in Estonia. These last two years should serve as a sobering reminder of potential military overstretch, and of the British armed forces' limited bandwidth for expeditionary warfare in an ever-competing environment for military resources.

The third notable factor is the demonstrated utility of Britain's military in domestic operations. The ability of countries to weather threats to their national cyber and media infrastructure and safeguard critical pharmaceutical and PPE supply chains, while also controlling and defending national borders in the face of global emergencies, are all considerations that will increasingly become strategic priorities for any responsible government.

The final notable aspect of Operation Rescript was how personnel reacted. This ranged from highly positive to negative, depending on the length of deployments and time they were deployed. From private to colonel, those interviewed were very positive and pleased to help, particularly at the beginning of the pandemic and during the first national lockdown. However, feelings began to change slightly later into the deployment and the further away geographically some soldiers were sent. For

instance, in interviews conducted by the author, soldiers based in the East Midlands were sent to support NHS Scotland as far north as Inverness in 2021, which they did not view favourably. Equally, when members from the same region deployed to the south coast over Christmas 2021, those personnel also viewed this negatively. While military units were deployed to regions relatively close to where they were garrisoned, it was felt by soldiers interviewed by the author that towards the later stages of the mission, more local units could provide the required support.

4 Civil-Military Relations

4.1 Securitization of the Pandemic

In the UK, the COVID-19 pandemic was securitized through a combination of language, policies, and actions that framed the virus as a national security threat. This allowed the government to justify emergency measures and to mobilize resources, which can be evidenced when applying a Copenhagen School theory as a framework for viewing the UK government's policies. The Copenhagen School theory of securitization views security policy as a speech act to enable emergency policies, and crucially how language is used to position certain issues as threats to a political community. Using this approach, it is evident that the UK government used the language of war (for instance using war metaphors including "invisible enemy," and the need to "fight it") (Schoeneborn et al. 2022), to enact emergency powers (such as the Coronavirus Act 2020). This included sweeping powers to restrict movement, close businesses, and detain individuals Institute for Government 2020), to increase surveillance and data collection (Samuel et al. 2021), mostly done with the consent of the public because the government was successful at treating the pandemic as an existential threat to national security.

While this approach was successful as a securitization practice overall, it led to concerns about privacy and civil liberties (Pugh 2020) and concerns that the approach was excessive, leading to disproportionate restrictions and an erosion of civil liberties. Meanwhile, others defended the government's actions, stating that the emergency measures were necessary to protect public health and prevent the healthcare system from being overwhelmed (Samuel et al. 2021). Furthermore, the role of science and medical expertise as the basis for decisions the government made was also a subject of debate, with some criticizing the government for not following scientific advice consistently (BMJ 2021).

4.2   Civilian Oversight and Accountability

In the UK, there are various mechanisms to ensure both Parliamentary and governmental oversight when deploying the armed forces. Traditionally, the Prime Minster can deploy the armed forces using the Royal Prerogative—the inherent authority afforded to the office to deploy British personnel overseas, bequeathed by the British monarchy (Mills 2018). Since 2011, however, a Parliamentary convention has allowed the House of Commons to first debate any deployment of British forces. This led to Parliament blocking former Prime Minister David Cameron from launching military strikes against the Islamic State in Syria (ISIS) in 2013. Some saw this as a threat to the prime minister's ability to act decisively against urgent matters of national security; others viewed it as a welcome additional layer of Parliamentary oversight and accountability for the use of armed force overseas (Sparrow 2013).

More recently, the new Labour prime minister and former human rights attorney, Sir Keir Starmer, had previously called for all UK military deployments to be first debated and voted on by Parliament, even going as far as to pledge during his leadership campaign that he would establish a new law requiring such Parliamentary oversight (BBC News 2024). Since winning office in July 2024, the Labour government has not authorized any new military deployments. However, in January 2024, Starmer approved of the Conservative government launching strikes on the Yemeni Houthis in response to British and international shipping coming under attack in the Red Sea. Starmer also approved of the government not holding a debate first in Parliament but did insist that the prime minister make a statement to the House of Commons at the earliest opportunity. This would all suggest that the new Labour government intends to carry on using the Royal Prerogative when time is of the essence, but to consult Parliament also.

Regarding the deployment of British military personnel throughout the Op Rescript mission, at the height of the pandemic relief throughout 2020 defence ministers managed to maintain scrutiny and oversight through "regular reporting" (Ministry of Defence 2020b, 2), while such delegation crucially ensured that life-saving and critical support was not unduly delayed. This ministerial oversight culminated with the establishment of the senior defence COVID-19 governance board, with oversight from the secretary of state for defence and his ministers (Ministry of Defence 2020b, 2). More broadly, given the scale and frequency of requests for defence support, both domestically and overseas, the defence secretary took an early decision to delegate the authority to authorize support to civil authorities, and devolved administrations to the regional commanders except for those requests that were novel or contentious. Ministers maintained scrutiny and oversight in these extreme cases through regular reporting (Ministry of Defence 2020b, 5).

4.3 Public Image of the Military

During the conflicts in Iraq and Afghanistan between 2001 and 2014, the British public was supportive of the military. Research from 2012 suggested that the public was overwhelmingly supportive of the service members who served in Iraq and Afghanistan, irrespective of opinions about whether UK military personnel should have been deployed there or not, with the service personnel who had deployed receiving over 80% approval ratings (Alexander et al. 2012). However, a public opinion poll conducted in 2021 by the armed services charity SSAFA found that of the 2000 members of the British public surveyed that year, fewer than 25% admired the role that the British army had played in the pandemic (SAAFA 2021, 32). One possible explanation for this low approval rating is a potential lack of public awareness of the military's role during the COVID crisis. Of those surveyed, 40% said they were unaware that armed forces supported the fight against COVID-19, while 53% said they were unaware that the armed forces helped with the UK's vaccination rollout and administration (SAAFA 2021, 32).

There is space for further research regarding the perceptions of the British public and the domestic deployment of British troops during COVID-19. There was no noticeable public debate about the nature of a domestic military deployment and no concerns were raised. Related to this point, the public remains supportive of the British military when it takes on Op Rescript tasks. In January 2022, Northern Ireland Health Secretary Robin Swann publicly expressed his appreciation for the military taking on a fresh deployment to assist the Northern Irish health services:

> I'm grateful to the military personnel who will provide some much-welcomed practical assistance to our health service in the coming weeks. I know that their presence also serves as a morale boost to our own staff who are understandably fatigued. (Department of Health, Northern Ireland 2022)

There were positive reports on the collaborative nature of the British military. Khorram-Manesh et al. (2022) observed a successful interagency collaboration between civilian and military healthcare systems. That successful collaboration stemmed from the military's previous involvement in international or national armed conflicts, which necessitated these partnerships, in addition to a continuous interest from the British government.

Potentially the fact that there has been little public debate regarding societal attitudes towards a domestic military operation demonstrates the British public's acceptance of it as a norm in UK Ops. The precedent for this societal approach to UK military deployments and the broadly supportive acceptance of such missions was firmly established during the national foot-and-mouth epidemic crises, and then firmly solidified during the military's more recent deployments to help protect regions in the UK affected by adverse weather conditions. The images of British troops over the 2014 Christmas period helping stranded civilians in flood-hit Cumbria, for instance, would have likely been viewed positively by the public. This positive narrative was thus extended further during the COVID-19 pandemic and Op Rescript.

5 Lessons Learnt

The public's positive view of the military and its domestic involvement is particularly pertinent as the gulf between democracies and authoritarian states that seek to constantly challenge, and exploit democracies' social and national resilience levels continues to widen. Despite the lack of capacity that large-scale domestic operations can inflict upon the British military—which is expeditionary and maintains multiple global commitments—there is certainly room for the military to increasingly help strengthen national resilience. Operation Rescript has demonstrated this capability. The challenge is to strike the right balance in this area between potential military overstretch and harnessing defence's evident capabilities, particularly in its people and logistics expertise.

Civilian agencies will continue to require military assistance in future domestic crises of this scale and should be encouraged to do so and supported in their search for help from the armed forces. However, Op Rescript has highlighted how preparations for a non-man-made threat—such as a global pandemic—were given less priority than other security threats, such as terrorism, despite the National Risk Register having assessed such threats as having both a high likelihood and a high impact. The UK government must take steps to ensure that civilian agencies prepare properly for such crises and that defence does not become the default "first responder."

A House of Commons Defence Committee report noted that earlier use could have been made of British defence's unique capabilities and skills, notably in the areas of strategic planning and crisis management (House of Commons Defence Committee 2021). Echoing this chapter's research, the Committee also noted how earlier use of defence assets in national disaster and crisis management had not been utilised by the government sooner during the pandemic. Therefore, the UK government must ensure that defence is consulted as early as possible in future national crises and that other government departments and civilian agencies are fully aware of the range of capabilities defence can offer.

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Canada

Peter Kasurak and **Christian Leuprecht**

Abstract This chapter covers the role of the Canadian Armed Forces (CAF) in domestic operations in general, and the response to the COVID-19 pandemic in particular. Although Canada's defence policy identifies assistance to civil authorities and non-governmental partners in responding to international and domestic disasters or major emergencies as a core mandate, the CAF has no dedicated resources to fulfil this role. During the pandemic, the CAF supported long-term care homes, remote Indigenous communities, and vaccine distribution. These missions highlighted the gap between policy expectations and operational readiness, particularly in health services and capabilities of the Reserve forces. The government did not securitize the deployment and CAF's involvement was well received by the public, which reinforced the high level of public trust Canada's military enjoys. However, the military's senior leadership expressed concern that increasing domestic demands could undermine combat readiness. The chapter also surveys the legal and constitutional framework that governs domestic deployments: Canada's political executive has broad authority and limited parliamentary oversight in deploying the armed forces. While the CAF's pandemic response was effective, it exposed structural weaknesses and raised questions about the sustainability of relying on a general-purpose combat force to deploy during domestic emergencies that seemingly occur with increasing frequency. The authors argue that the CAF's domestic roles be reassessed: to align with policy mandates. Canada needs resources dedicated specifically to domestic operations and civilian disaster response.

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1   Introduction

The Canadian Armed Forces (CAF) had a rather modest role to play in the 2019–2022 COVID-19 pandemic emergency, mainly supporting federal and provincial public health and welfare efforts. The most significant outcome for both the armed forces and the government emerging from the COVID-19 emergency was the clear gap between defence policy, which makes domestic humanitarian and disaster relief a "core" mission of the CAF, and the dual unwillingness of the CAF to create standing capacity in the regular force to address these missions. The apparent unwillingness of the federal government either to provide the military missions with the resources they need, or assign military tasks to a civilian agency instead is a point of contention.

At the time of the pandemic the Canadian Armed Forces was comprised of approximately 68,000 Regular Force and 27,000 Reserve Force members against an authorized strength of 71,500 Regulars and 30,000 Reservists. There are, in addition, 5,200 members in Ranger Patrol Groups. The Canadian Armed Forces are organized as Force Generators and Force Employers under a single Chief of the Defence Staff. The principal Force Generators are the Royal Canadian Navy, the Canadian Army and the Royal Canadian Air Force. They are responsible for training, career progression and welfare within their environments. The Force Employers are the Canadian Joint Operations Command, the Canadian Special Operations Forces Command and the North American Aerospace Command. They employ assigned forces to achieve mission objectives.

The CAF became engaged early in the COVID-19 crisis. In February 2020 it chartered a plane to help evacuate Canadian nationals in Wuhan, China. When the Canadian government's civilian partners failed to set up quarantine measures for returning Canadians, the CAF ended up quarantining the returnees from Wuhan and others from the cruise ship *Diamond Princess* at Canadian Forces Base (CFB) Trenton. In April 2020 the CAF's involvement in the pandemic response surged when it became evident that the administration of long-term care homes for the elderly in Ontario and Quebec was faltering. At the same time, the CAF received requests for assistance from remote and isolated First Nations communities and subsequently became involved in the national-level planning and logistics of vaccine distribution. The Department of National Defence (DND) has not disclosed the total number of service members who were deployed on pandemic missions, but about 1700 service members provided support in long-term care homes and approximately 800 Canadian Rangers assisted remote and isolated communities.

The CAF was not employed to maintain public order, although there was some public discussion about possibly using it to end the occupation of the Parliamentary precinct in downtown Ottawa by a self-described "Freedom Convoy" of trucks and heavy vehicles in January and February of 2022.

Canada maintains almost no forces dedicated to humanitarian aid and disaster relief other than the company-sized Regular Force Disaster Assistance Response Team (DART). The Army Reserve also maintains ten domestic response companies and four arctic response company groups. The Canadian Forces' general philosophy

is that disaster and emergency relief missions can be carried out by troops trained for conventional warfare operations. The army is frequently used as a source for such missions if many personnel are required. The RCAF maintains a fleet of five C-17 and 12 Hercules transport aircraft as well as four Chinook heavy and 100 Griffon utility helicopters. The Canadian Forces Health Services employs about 2500 medical professionals and is designed for the care of the forces only. The CAF has only a single field hospital and does not have a domestic hospital, relying on provincial health services for that level of care.

2 Domestic Operations

2.1 Constitutional and Legislative Framework

Canada's version of the Westminster system of government provides wide authority for the domestic deployment of the Canadian Armed Forces, both constitutionally and in statute law. The employment of the military—both domestic and foreign—is vested in the Crown through the assignment of command-in-chief to the Monarch (*Constitution Act* 1867: s.15). This gives effective control of the armed forces to the executive—the prime minister, the minister of national defence, and the cabinet (Lagassé 2013: 209).

Executive authority is regulated by the *National Defence Act* which defines the roles of the defence minister, Governor-in-Council (i.e., the cabinet), and the military itself. The Governor-in-Council can place the Canadian Forces on "active service" to address emergencies, defend Canada, take part in United Nations operations, or uphold treaty obligations. Parliamentary approval is not required, but Parliament must be sitting within 10 days of the Forces being placed on active service (*National Defence Act*: s.31(1), s.32). The Regular Force has been on active service continuously since 1989 (SI/89-103 (P.C. 1988-583)).

In the case of Operation LASER, the main Canadian Armed Forces COVID-19 response, the government employed authority in the *National Defence Act* Section 273.6 (1), which allows the Governor-in-Council or the minister to authorize the Canadian Forces to perform "any duty involving public service." Subsections limit law enforcement assistance to cases where the assistance is of national interest and the matter cannot be dealt with effectively without the military, but do not otherwise constrain the employment of the forces.

Public order emergencies are also addressed elsewhere in the *National Defence Act*. As the Constitution assigns the administration of justice to the provinces (*Constitution Act* 1867: s.92), the Canadian Forces can be called to "aid of the civil power" by the attorney general of the province making an application to the chief of the defence staff (*National Defence Act*: s.274-79) in cases where any riot or disturbance of the peace is beyond the power of local authorities to prevent or suppress.

The *Emergencies Act* also governs the domestic deployment of the forces. It provides the executive with wide powers in public welfare, public order, and international and war emergencies that exceed the ability or authority of a province to deal with or be dealt with under any other law. Public welfare emergencies include those caused by disease. The Governor in Council can declare an emergency, but Parliament must be sitting or sit within seven days of the declaration and must vote to confirm the declaration, otherwise, the emergency is terminated (*Emergencies Act*: s.3, 6, 58).

Finally, the *Emergency Management Act* makes the minister of public safety and emergency preparedness responsible for federal leadership and coordination of emergency services across the federal government and with the provinces. In Canada's federal system, most public welfare functions and authorities are provincial responsibilities. As already noted, the *Emergencies Act* refers to federal intervention when the capacity of the provincial governments has been exceeded. The *Emergency Management Act*, however, does not include such a limitation and allows for federal assistance if a province requests it (*Emergency Management Act*: s.4 (1) (i) (j)). The procedures for provincial requests for federal assistance are set out in the *National Emergency Response System* (Public Safety Canada 2011: 13–14). The use of sec. 273.6 (1) of the *National Defence Act* is, on the other hand, entirely unrestricted.

In general, then, domestic employment of the Canadian Forces is an unrestricted power of the federal executive. It is important to note that the leadership role in an emergency is undertaken by a civil department, Public Safety Canada. Provinces may request humanitarian assistance before their resources are exhausted and the federal government can respond using either the *Emergencies Management Act* or sec. 273.6(1) of the *National Defence Act*. Alternatively, the federal government has the power to act unilaterally.

Parliamentary oversight is mainly ex post facto. Parliament votes for funds to maintain the military and may examine how those funds were employed both during and after the fact. Parliamentary consent is required only if the *Emergencies Act* were to be employed to declare an emergency. Placing the forces on active service requires Parliament to sit, but not to consent. Remember, though, that the Regular Force has been continuously in active service since 1989. Allocation of powers between the federal government and the provinces is perhaps a more important distinction as the forces can only be employed in a public order emergency at the request of a province and when the *Emergency Management Act* has made provincial requests a trigger for federal intervention in other emergencies.

2.2   *Deployment in Domestic Roles*

Over the past decade humanitarian assistance and disaster relief (HADR) operations have become more frequent: there were just six between 1990 and 2010, but 30 between 2011 and 2020. Weather-related incidents (wildfires and floods) have increased from 12 between 1996 and 2006 to 20 between 2007 and 2016, but most

are minor and involve fewer than 100 armed service members. Only three incidents required more than 2000 troops: the New Brunswick, Quebec, and Ontario floods in 2019 which occupied 2500 troops for 47 days; the 2017 Quebec floods that required 2600 armed forces members for 31 days; and the 2013 Southern Alberta flooding that required 2300 troops. Nevertheless, compared to the 1997 Red River flood, which required 8000 military personnel, or the 1998 Eastern Canada ice storm, which absorbed 12,000 personnel, the more recent incidents requiring more than 2000 troops must still be considered relatively small.

Likewise, the duration of HADR assignments is often very short. Of the 23 for which information is available, 8 were less than a week in duration and another 8 were less than 2 weeks. The CAF can be used for three categories of assistance in HADR operations, which can be defined from descriptions available on the National Defence website: general labour, aviation, and specialist assistance. General labour has consisted of sandbagging and diking during floods, and during forest wildfires providing assistance to firefighters and door-knocking and assisting local occupants. There has been a high demand for aviation to evacuate locals threatened by fire or flood and for the transport of emergency workers and equipment. Thirteen of the 30 incidents involved either helicopters, transport aircraft, or both. Specialist troops such as those providing logistics, mobile equipment operators, and engineers have also been employed, but less frequently than general duty personnel, and the numbers cannot be determined from the information available (Canada, National Defence 2021a).

The Canadian Armed Forces has a distinctly ambiguous attitude toward domestic deployment. Defence policy makes provision of assistance to civil authorities and non-governmental partners who are responding to international and domestic disasters or major emergencies one of the armed forces eight "core" missions (Canada, National Defence 2017: 17). The Army took action to implement defence policy only after the COVID crisis occurred. It undertook studies which raised the issues of the requirement for changes in priorities and organizational and doctrinal change to cope with rising domestic employment challenges. There has been, however, no announcement of any significant change (Canadian Army 2019; Gizewski et al. 2020: 24–25).

To date, the CAF has viewed humanitarian assistance and disaster relief largely as an "other included capability" within a general-purpose combat force. As Major-General Trevor Cadieu, director of staff, strategic joint staff, explained in his testimony to the Standing Committee on National Defence, armed forces members are trained for general purpose combat operations and during that training

> they will be exposed to and will receive tools that can be applied in a domestic setting or paradigm as we have seen in Operation LASER, the Canadian Armed Forces response to the COVID-19 situation. For example, when our Canadian Armed Forces deploy on operations abroad, they often have to deal with local populations, other government agencies and departments and partners. They are often called upon to deliver humanitarian aid and provide logistics and transportation support.

> So as part of that general-purpose combat training, they receive a suite of tools that can be applied to activities such as this (Standing Committee on National Defence 2020).

The armed forces have, therefore, put relatively few resources directly into HADR capability. There is a company-sized Disaster Assistance Response Team (DART) which is a Regular Force, but the 10 domestic response companies and four arctic response companies have been assigned to the primary reserve, a component that is plagued by high turnover, inability to reach training standards, and that is available only on a case-by-case volunteer basis (Fejes 2021: 45–52; Canada, Auditor General 2016).

The view has developed within the armed services that humanitarian relief and domestic missions are a threat to their combat role. There is little evidence to this end: while there have been large demands for assistance recently because of wildfires and flooding, demands have been even greater in the past. Requests for assistance have grown in number, but they have required only a few resources for short periods. The COVID pandemic has followed this pattern. Notwithstanding the relatively low impact on the forces of helping respond to the pandemic, Lieutenant-General Wayne Eyre, then Army commander, warned in 2020 that "If this [domestic missions] become of a larger scale, [on a] more frequent basis, it will start to affect our readiness." He further stated that putting too much emphasis on disaster response could hurt the Army's ability to fight, saying

> That's very dangerous. If we become focussed on solely humanitarian assistance, disaster response, when the country needs us when the stakes are very high and we have to fight and we're not ready, that's going to cause casualties, and it's going to cost loss of national interest (National Post 20 January 2020).

At times Eyre appeared more open to change. In an October 2021 speech at Queen's University he stated that although it was the essential function of the Canadian Armed Forces to defend the country, the pressure of domestic humanitarian and relief operations had made it necessary to redefine "defend." He held open the possibility of a domestic role for the Reserves and the possibility that Canada needed troops dedicated to civil defence (Eyre 2021a). More recently, however, Eyre complained to the House Standing Committee on National Defence that while the armed services were supposed to be the resource of last resort for domestic emergencies, they had become the force of first choice (Eyre 2023). Eyre's zig-zags indicate a reluctant acceptance of the reality that the government is not going to change its mind about the domestic role it expects the armed forces to play.

The concern expressed by senior military officials has been echoed by some in the defence academic community, who have suggested that the forces' domestic role be assigned solely to the reserves or to a new civilian domestic disaster relief organization (McDonald and Vance 2020: 12; Fetterly 2020: 8). Parliament's response to the dilemma has been mixed. After examining the issue, the House Standing Committee on National Defence recommended using the CAF as a last resort in domestic emergencies while also recommending that a civilian corps of engineers be created within the armed forces, similar to the US Army Corps of Engineers (Canada, Standing Committee on National Defence 2024: 1).

Regarding public order emergencies, Canadian police services maintain significant capabilities and there has been little call for the CAF to assist them. The Canadian

military's last major public order operation was the 1990 deployment of 4400 troops to manage a violent land dispute in Oka, Quebec (de Lint 2004: 3–4; Kasurak 2013: 226–28). Historically the trend has been to move away from using the armed forces to maintain public order. The creation of strong police forces and changes in public attitude as to what a "proper" role for the armed forces should be accounts for this rather than any changes to the law (Wentzell 2022: 4, 8–9).

3 Military Deployment During COVID-19

3.1 Coordination of the COVID-19 Response

In the Canadian Federation, public welfare emergencies are largely the responsibility of provincial governments, although the federal level has a backup and coordinating role. Hataley and Leuprecht call it a "shared" relationship: institutions coordinate but remain separate, rather than one that "pools" resources. The primary public security agency at the federal level is Public Safety Canada, which has a comprehensive mandate to "keep Canadians safe from a range of risks such as natural disasters, crime and terrorism" (2018: 60, 69). While federal police, intelligence, border security, and corrections report to the minister of public safety, there is no comprehensive public welfare emergency agency. As COVID was a health emergency, it fell to the Public Health Agency of Canada to take the federal lead in focusing on vaccines, providing ventilators and personal protective equipment, and disseminating public information. Actual on-the-ground response remained the responsibility of the provinces and territories.

The scope of the pandemic, however, soon grew to involve the CAF and requests for assistance came from multiple sources including First Nation communities, Indian and Northern Affairs Canada, the Public Health Agency of Canada (PHAC), and Public Safety Canada, which together became part of Operation LASER. The minister of national defence provided broad, open-ended approval and direction to the chief of the defence staff in the spring of 2020. CAF staff coordinated with senior officials as requests were received and missions were assigned based on the minister's pre-approval. Existing emergency response chains of command and mechanisms were used: the CAF employed its domestic command structure under the Canadian Joint Operations Command (CJOC) with its six Joint Task Force headquarters to liaise with provincial and territorial authorities. The CAF also provided support by directly integrating a team with the PHAC to manage vaccine distribution. Major-General Dany Fortin and subsequently Brigadier-General Krista Brodie were appointed Vice-President of Logistics and Operations at the agency and two brigadiers and 54 additional armed service personnel were also assigned to the task (Standing Committee National Defence 2021).

3.2   Roles of the Military

As noted above, the CAF became involved early in the pandemic crisis when in February 2020 it mounted Operation Globe to help Global Affairs Canada and the PHAC return Canadian nationals from China, Japan, and the United States. The forces provided health services personnel to screen passengers and provided in-flight and post-flight care. Over 1000 returning citizens were quarantined at CFB Trenton for several weeks. Overall, 300 armed forces personnel supported the operation (Standing Committee on National Defence 2020).

The bulk of CAF support was organized as Operation LASER and led by the CJOC. The most visible and resource-intensive part of this operation was the provision of care in long-term care homes in Ontario and Quebec where the inadequacies of care and failure to enforce standards led to an immediate crisis and a high death toll. The forces provided support in 54 care homes from April to July 2020. Forces members worked in teams made up of a senior medical authority, six medical technicians, and support personnel. Over 1700 military personnel were assigned to this mission (Canada, National Defence 2021b). In Ontario, Operation LASER deployed 213 health service support personnel along with 284 general service military members; in Quebec, the operation deployed 1120 health service support personnel and 374 general service members.

Most Operation LASER missions, however, centred on supporting remote and Northern communities, most of which are First Nation communities. This part of the mission relied heavily on Canadian Rangers, reserve force members who reside in remote, Northern, and coastal communities. At least 800 of approximately 5200 Rangers were involved in community support which included such duties as wellness checks, transportation and distribution of supplies to community members, assisting municipal and community staff to operate command posts and emergency centres, and supporting community food security through hunting, gathering, and fishing. Most Ranger missions lasted from about two weeks to a month in individual communities, but there were instances of longer-term assistance lasting several months, such to the Hatchet Lake Denesuline First Nation and to the Nishwahbe Aski First Nation. When the Ranger patrol team assistance was insufficient to meet community needs, reserve or regular force personnel augmented their efforts. For example, the CAF deployed a medical support team by C-130 Hercules to the Cross Lake Cree Nation in February 2021 which, at its peak, consisted of 54 members. The team established alternative isolation sites and provided patient care to COVID victims and generally trained and supported incoming staff. Forces personnel were at Cross Lake for 13 days (Canada, National Defence 2021b).

The employment of the Rangers was not without its challenges. An irregular, citizen force established for presence, surveillance, and search and rescue in thinly populated areas, the Rangers found that local authorities did not understand their mandate and capabilities and demands for service had to be negotiated and adjusted. For example, a police request for assistance in enforcing curfews was outside the Ranger mandate and was modified into a public information initiative. Logistics

problems also arose personal protective equipment is not part of normal Ranger gear and supplying it was problematic because civilian transportation routes had been disrupted by the pandemic (Vullierme 2021). However, overall, Operation LASER followed the pattern of previous HADR operations. Missions usually involved small teams of 6–50 personnel for a fortnight to a month. They often used military aircraft. What differentiated these missions from pre-COVID operations was the frequent inclusion of medical staff.

The second major COVID operation was Operation VECTOR, which focused on distributing vaccines. In addition to managing the national distribution effort, the forces delivered freezers to northern communities so they could store the vaccines appropriately. The forces subsequently delivered vaccines and assisted in vaccine administration at Nain, Newfoundland, Watson Lake, Yukon, and at select First Nation communities in northern Manitoba. Support for First Nation vaccination in Ontario involved 105 Canadian Rangers working in 30 communities over three months to administer the necessary two doses. This mission treated over 25,000 individuals and required teams of three to five Rangers to be activated twice for five to seven days. CFB Comox was used as a vaccination site, although no forces personnel delivered vaccines there (National Defence 2021b).

The CAF did *not* enforce public order, although the January–February 2022 occupation of central Ottawa by a "Freedom Convoy" of trucks and large vehicles and the associated blockades of international crossings to the United States in protest of vaccination and masking mandates did result in public discussion of this option. The Ontario provincial government did declare an emergency and the federal government invoked the *Emergencies Act* for the first time since its 1988 enactment, but the armed forces were not deployed. Prime Minister Justin Trudeau, when asked if the army would be used to break up the protests, simply replied that this was "not in the cards right now." The authorities did use powers under the *Emergencies Act* to suppress funding for the protest and to augment police powers. In the end, it was police action that put a stop to the protests (Wentzell 2022: 8–9).

The COVID pandemic did not tax the CAF particularly heavily, although the forces played critical roles, particularly in the provision of health services, logistics, and command and control, including by providing support to the federal government's Operations Centre and the PHAC Operations Centre. Some components of the forces, however, such as the Canadian Forces Health Services, were stressed, as will be discussed in more detail below. The deployment of the CAF peaked between April and July 2020 when there was a large deployment to long-term care homes in addition to other activities. While thus far there has been no official calculation of the maximum demand on the forces during COVID, it would appear to amount to a few thousand personnel out of a total pool of 70,000–100,000 depending on how one estimates the availability of the reserve force.

3.3   Readiness and Effectiveness

Overall, the demands made on the CAF by requests for domestic assistance during the COVID pandemic were relatively minor. The exception was the Canadian Forces Health Services. The health services employs 4656 personnel of whom 3407 are regular forces and 1249 are reserves. Reserves are available only on a voluntary basis. Moreover, only a portion of the health services personnel are medical personnel. The health services establishment includes dentists, physiotherapists, social workers, and general duty personnel. Thus, the support for long-term care homes severely strained the Canadian Armed Forces health system.

How the pandemic itself affected the forces is equally important. The need to protect the forces and apply distancing and infection prevention measures meant that military colleges, schools for recruits, and training institutions were shut down for months, reducing intake to about 25 percent of normal. Individual training was significantly reduced and collective training was severely limited. After a year of the pandemic, recruiting and training slowly returned to normal levels (Eyre 2021b).

Deployments were also affected, although key missions like Operation Reassurance to Central and Eastern Europe remained largely intact and Operation Unifier to the Ukraine experienced only minor disruptions. Other missions also experienced minor disruptions and delays, and a few were cancelled. The ability of the CAF to maintain most operations indicates that its short-term readiness was not greatly affected by the pandemic. However, the CAF expects to see longer-term effects from the cessation of training and recruiting during the pandemic, and the slow restoration of those forces-generation services (Canada, National Defence 2021c).

4   Civil-Military Relations

4.1   Securitization of the Pandemic

In Canada, "securitization" of the pandemic response was a non-issue. Canada employed the military in narrow but key roles that no other agency could fill. Throughout the pandemic, the public face of the federal and provincial governments was civilian public health officials and elected officials. Public order challenges were left to civilian police. The federal government turned to the voluntary sector, notably the Canadian Red Cross, to build additional capacity over the medium term, increasing the civilianization rather than the militarization of the country's pandemic response. The federal government entrusted the CAF to fill the gaps in demand to which no civilian entity could respond effectively in the short term: an expeditious response to the crisis in long-term care homes, access to remote and isolated communities, and the timely delivery of vaccines. This military, for its part, accepted the tasks it was assigned but did not seek to expand them or acquire other domestic roles.

4.2 Civilian Oversight and Accountability

Canada's Constitution and law provide for near-absolute civilian control of the armed forces: the prime minister appoints the chief of the defence staff who serves at the prime minister's pleasure, the Cabinet must approve changes to military regulations, the minister must approve CAF organizational changes, the armed forces has no budget of its own—its budget is part of the civilian Department of National Defence budget, voted on by Parliament, and is controlled by the civilian deputy minister and civilian staff—and while steps have been taken to separate the national headquarters into civil and military components there is no separate Canadian Forces headquarters, but a merged Department of National Defence.

The deployment of the Canadian Armed Forces is an executive prerogative; therefore, the government is only accountable to Parliament (and the electorate) after the fact. This implies that civilian oversight is expost, taking place after an event or operation has concluded. The Auditor General may also independently review CAF expenditures for probity and value-for-money. Indeed, the Auditor General tabled several reports on the government's COVID-19 programs, but none of them addressed the CAF's work or spending. Parliamentary committees did hold hearings and called upon the military to explain its role during COVID-19, and the National Security and Intelligence Committee of Parliamentarians scrutinized the domestic information operations role of the armed services in its pandemic response. Overall though, accountability to Parliament functioned as intended, within the limits of the Constitution. By the end of the crisis, the armed forces were considered the most trusted and reliable government agency. It reliably delivered timely emergency services during the height of the pandemic. That reflects a well-documented high degree of public trust in Canadian government institutions in general and in uniformed services in particular (Statistics Canada 2024a, b).

The CAF's COVID-related operations were overseen in the normal manner by the Minister of National Defence. There was no public indication that the government was anything less than pleased with the CAF's response. The only significant missteps attracting adverse comments were caused by using processes appropriate to foreign combat missions in a domestic operation. Specifically, the CJOC created an information operations plan to "shape" and "exploit" information to convince the public to follow government directions. It was a combination of normal public relations with military "influence operations" activity and appeared to have been drawn directly from the forces' Afghanistan playbook. A separate military intelligence initiative collected information from the public's social media accounts during the pandemic. These operations were quickly shut down and disavowed once they were made public, but did damage the forces' reputation (Pugliese 4 August 2020). However, only six months later another domestic information operation came to public attention in a bizarre incident involving a forged letter from provincial officials warning residents of Nova Scotia to be wary of a wandering (non-existent) wolf pack. This occasioned a second disavowal and intervention by the defence minister (Pugliese 27 October 2020).

The CAF is legally permitted to collect intelligence on Canadian citizens only in support of an authorized domestic operation and only within the authority of the domestic department being supported. Therefore, the operations noted above appear to fall outside the remit of armed forces intelligence. The National Security and Intelligence Committee of Parliamentarians, a government-wide intelligence oversight group, recently reported that CAF internal intelligence directives were unclear and wrongly suggested that collecting information on Canadians was permitted in all military operations. The committee recommended that a clear statutory authority be established for defence intelligence (Canada, National Security and Intelligence Committee 2020: 11, 33, 40).

4.3   Public Image of the Military

Meanwhile, politicians and the general public have been overwhelmingly pleased by the Canadian Armed Forces' response to the pandemic and strongly support their domestic role. Tellingly, the federal government made senior military officials responsible for the distribution of COVID-19 vaccines and the Ontario provincial government hired a former chief of the defence staff to head its COVID response. After the perceived failure of the civil bureaucracy to deal with the COVID health emergency, politicians saw the military as "a safe pair of hands" in which to entrust the critical role of distributing and administering vaccination logistics. Parliamentarians have effusively praised the military response to date and public confidence in the military is high (Standing Committee on National Defence 2021). Nine in 10 Canadians supported using the armed forces to deal with the COVID pandemic (Ipsos 2020) and even during the pandemic, in August 2020, Canadians supported continued spending on defence and the armed forces (Nanos 2020). More recent government polling in August 2021 and January 2022 found little change in public opinion which was solidly in favour of employing the armed forces to relieve natural disasters and viewed its COVID response role very positively (Earnscliffe Strategy 2022). According to other polling, Canadians supported the use of the armed forces to end the "Freedom Convoy" blockades, but only by providing heavy towing equipment to support the police in clearing blockading trucks (Wentzell 2022: 8).

Beyond the House Standing Committee on National Defence, there has been little public or political interest in reviewing the CAF's role in domestic operations. Questions about whether or not a higher priority should be given to forces' capacity for domestic emergencies were overtaken in the public mind by calls for military aid to Ukraine and the resolution of sexual harassment issues within the armed forces.

5 Lessons Learnt

Past is prologue: The CAF does not want to become more involved in domestic operations and has publicly cautioned about the potential impacts of doing so (though the actual evidence is elusive). Academic sympathizers have been bolstering this line of argument. The forces have no plans to develop specialized units or military occupations to deal with any aspect of HADR and seem content with the belief that general-purpose combat training provides all the capability required. The government has shown equal disinterest in changing the status quo. The new defence policy statement, *Our North, Strong and Free*, barely makes passing reference to domestic operations (Canada, National Defence 2024).

The very success of the armed services in dealing with crises in long-term care homes, supporting remote and isolated communities, and managing the distribution of vaccines would appear to support a conclusion that the status quo is good enough. Concomitantly, the immediate impact of the various COVID deployments on the CAF's ability to meet its expeditionary and other operational commitments and mandates appears to have been minimal (Saideman et al. 2021). Hence, the federal government is not looking for an additional role that would take it into the contentious fray of provincial-territorial jurisdiction and saddle it with additional operational responsibilities or associated costs. Post-pandemic, more pressing national security priorities abound: the 2004 National Security Policy requires reanimation, the health intelligence system needs reform, the National Strategic Stockpile requires reprioritization and replenishment, and the health system's supply chain and domestic capacity must be revisited, let alone managing the enormous increase in national debt left by the delivery of emergency services and income supports during the pandemic. Re-defining the military's role ranks low in the order of federal priorities.

The CAF, however, should not succumb to what Richard Betts called the "lure of deferring decision" in his book *Surprise Attack* (Betts 1982). Canada seems to have escaped the worst effects of the pandemic. Death and economic destruction notwithstanding, overall supports were adequate and effective, ensuring that the majority of individuals and the economy survived reasonably unscathed. The pandemic was akin to an earthquake that took down a few office towers and bridges but left most of the city standing. But what would have happened in a health emergency more deadly and disruptive than COVID? The Canadian Forces Health Services is not designed to meet surging demand during a public welfare emergency. How far can and should the military go in assigning a core policy role to the primary reserves without the government first addressing problems with job security and availability in the reserves? The armed services should also be asking themselves whether domestic humanitarian and disaster relief, one of its eight-core roles, can be left without a permanent formation and occupational structure to support it. Finally, the armed services need to consider how to address the intelligence fiasco and the longstanding need to develop and implement a domestic intelligence policy. There is plenty of work to do to ready the CAF for "the big one."

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Australia

Peter Layton and **John Blaxland**

Abstract The Australian Defence Force (ADF) has a long history of deploying domestically in various roles and is often called upon to assist in natural disasters like bushfires, floods, and cyclones. This chapter examines the ADF's extensive domestic deployments during the COVID-19 pandemic and which built on its history of disaster response. Operation COVID-19 Assist was unprecedented in scope and immediately followed significant bushfire relief efforts. Under the Defence Assistance to the Civil Community (DACC) framework, the ADF, engaged in a wide array of non-traditional tasks, including supporting international and domestic border control, assisting with contact tracing, manufacturing essential supplies, providing crucial medical personnel, facilitating mass COVID-19 testing, coordinating and delivering the national vaccination rollout, and supporting city-wide lockdowns. The Australian Signals Directorate also played a unique role in cybersecurity and cyber fraud disruption. The pandemic exposed the tension between the ADF's core warfighting function and its expanding domestic role. Concerns arose regarding military overstretch, the cancellation of crucial warfighting exercises, and potential negative impacts on recruitment and retention. The chapter highlights a civil-military dynamic where the federal government relied on the ADF to compensate for shortfalls in civilian capability and capacity, prompting debate on the cost-effectiveness and long-term implications of using a "boutique" combat force for broad domestic emergency response.

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1   Introduction

The Australian Defence Force (ADF) has a long history of deploying domestically in various roles. The ADF is often called upon to assist in natural disasters like bushfires, floods, and cyclones. It provides critical support such as search and rescue, evacuation, medical aid, and logistical assistance; it had a major deployment in response to the devastating bushfires of 2019–2020 when it provided significant support in firefighting, logistics, and community recovery efforts. The specific nature and extent of ADF domestic deployments can vary depending on the situation and the government's decisions, but its role in supporting the community during times of need remains a crucial aspect of its mission. Just before the outbreak of COVID-19, Australia's prime minister, Scott Morrison, spoke about shortcomings in how the federal government worked with the states on national emergencies. He observed that "the scale of the bushfires this season—not least their simultaneous reach across many borders—has demonstrated to me the limits of these arrangements" (Morrison 2020). COVID-19 arrived the following month before the country could make any changes, or even do much thinking, about the "national" approach Australia might take in response to national domestic emergencies.

For Australia, the pandemic began on January 20, 2020, while major bushfires still raged. On that day, the National Incident Room, the Federal Department of Health's emergency response centre, was activated. ADF staff soon joined the centre to provide clinical and epidemiological advice and support. On January 25, the first case of COVID-19 was detected in Australia. However, it was only on March 18 that the governor-general declared a human biosecurity emergency under the Biosecurity Act 2015, giving the federal health minister wide-ranging powers to restrict movements of people and close businesses as needed (Maclean and Elphick 2020, 3). By this stage two important developments had taken place: the federal government had created a new strategic-level domestic crisis management institution, and the Australian Defence Force (ADF) was deploying across Australia on COVID-19 duties, just as Operation Bushfire Assist was winding up.

The ADF is an all-volunteer force. At the time of the pandemic, the ADF comprised some 60,900 full-time personnel made up of 15,100 navy, 31,000 army, and 14,800 air force together with an estimated 21,000 part-time reservists made up of 1800 navy, 15,800 army, and 3400 air force personnel (Defence 2020a). Many of those who had deployed on Bushfire Assist missions were reservists called up to respond to the national emergency the widespread fires created. During the COVID-19 pandemic in Australia, the entire ADF was called upon to assist in various roles.

2 Domestic Operations

2.1 *Constitutional and Legislative Framework*

The ADF is commanded by the chief of the defence force (CDF) with the three service chiefs subordinate. The ADF is the largest part of the Department of Defence; the secretary of the Department of Defence manages the smaller, civilian component. The CDF and the secretary form a diarchy. They are responsible to the defence minister, although the minister has no command over the CDF, only administrative control; the CDF command relationship is technically, according to the Constitution, to the head of state, which effectively means the governor-general (with the monarch's residual powers having been delegated to their Australian representative late last century).

On advice from the defence minister, the governor-general appoints the CDF under Section 12 of the Defence Act 1903. The military is subordinated to the civilian government in Section 8 of the Act as follows:

(1) The Minister has general control and administration of the Defence Force.
(2) In performing and exercising functions and powers under this Part, the Chief of the Defence Force and the Secretary must comply with any directions of the Minister. (AustLII 2023)

Like other Westminster-style governments, the defence minister is responsible to Parliament. Civil oversight is then through the defence minister. In almost all situations, the Department of Defence (including the ADF) has a symbiotic relationship with the minister of defence, providing advice to the minister and responding to the minister's guidance, which is derived from that advice.

The ADF's assigned mission is to defend Australia and its national interests to advance Australia's security and prosperity. While the main intent of the mission is to ensure that the ADF is prepared for and can undertake combat operations, the mission is sufficiently broad to allow the federal government to use the forces for a range of domestic tasks and offshore emergencies as considered necessary. Regarding domestic tasks, the ADF provides most of the patrol vessels used for regular peacetime border security tasks. The ADF also has within its combat force structure a fleet of aircraft with a secondary maritime search and rescue function so it can bolster the Australian Maritime Safety Agency's capabilities and capacities when needed.

As Australia does not have specific emergency powers legislation, responding to national crises rests on the assumed executive powers of the national government and the equally assumed cooperation of the state and territory governments concerned. In Australia, this has created for some "a situation of considerable murkiness about emergency powers, a legal lacuna that has been maintained despite calls… for legislation or some other legal instrument to clarify the arrangements" (Head 2016, 202). This situation has arisen because Australia's 1901 Constitution does not address emergency management, and therefore, as a residual power, this role remains with the individual states. Australia is thus similar to the United States, where federal

emergency powers rest mainly on the elastic executive powers of the president (Head 2016, 175–201).

The government provides the ADF for use in disaster situations only in response to requests for assistance from state governments. These requests are made through and to Emergency Management Australia, a division within the federal government's Department of Home Affairs; the agency prioritizes requests and then consults with the Department of Defence on its ability to meet them (Department of Defence 2020d, 3). The ADF is within and part of the Department of Defence (henceforth "Defence"). Requests are made under the Defence Assistance to the Civil Community (DACC) manual and the Australian Government Disaster Response Plan. The latter outlines the coordination arrangements for the Australian government's provision of non-financial assistance in the event of a disaster or emergency. The DACC manual, titled Utilisation of Defence Force to Protect Commonwealth Interests and States and Self-governing Territories, is subordinate to Part III AAA of the overarching Defence Act 1903. Importantly, Part III mainly concerns situations of large-scale civil unrest, not natural disasters.

Accordingly, during natural disasters, the ADF's primary guidance comes from the DACC manual, not the Defence Act. The DACC manual outlines the types of disaster assistance Defence can provide and the thresholds to make requests for assistance (Royal Commission 2020, 195). The ADF defines DACC as: "the provision of Defence resources, within Australia and its territories, in response to a request for assistance for the performance of support that is primarily the responsibility of the civil community or other Government/non-Government organisations" (Department of Defence 2017, 2–1). DACC is not authorized by statute. Instead, the assistance that Defence provides normally comes through an internal administrative process under DACC Manual rules and is overseen by the defence minister and the chief of the defence force. This is in essence the approach that Defence took for the ADF's domestic deployment in response to the COVID-19 pandemic.

2.2 Deployment in Domestic Roles

Over the years the ADF has been involved in responding to terrorist incidents (starting with the call-out of ADF personnel following the Sydney Hilton Hotel bombing in 1978), major sporting events (such as during the Sydney Olympic Games in 2000), bushfires and floods (annually, according to the seasons, if not more frequently, notably in response to Cyclone Tracy in 1974), and more (Blaxland 2014). The idea of the ADF being called upon to support the civil power and the civil community is not new and broadly accepted as normal if not completely expected. Immediately before the COVID-19 pandemic, the ADF was deeply involved in bushfire response and recovery. The breadth and scale of the challenge across much of Australia (from Southeast Queensland to South Australia and beyond) presented an unprecedented challenge. It drew in personnel from all the branches: army, navy and air force, to supplement the available resources for rural and country fire services.

The ADF assisted from September 6, 2019, to March 26, 2020, more than two months after COVID-19 began. Operation Bushfire Assist involved logistics support, the use of airbase facilities, provision of transport, medical, communications, and other ancillary support functions to assist existing state emergency and fire services. The ADF's tasks also included catering for thousands of service personnel and those in direct need of assistance, supplying troops and equipment for recovery efforts, orchestrating or supplementing local engineering assistance, undertaking evacuation operations, search and rescue, and surveillance. Some 8200 ADF members deployed during Operation Bushfire Assist (including more than 2500 reservists, mostly army reserve troops) together with some 500 foreign military personnel from Papua New Guinea, Indonesia, and Fiji (Royal Commission 2020, 189). It is notable that in the first half of 2019, before the bushfires started, there had already been sizeable ADF deployments domestically. About 3000 ADF personnel assisted in recovery operations in Queensland after significant flooding in that state in February 2019. In addition, in March of that year, some 200 ADF members assisted with evacuation and recovery operations in the Northern Territory in the wake of Tropical Cyclone Trevor.

Australia also has a track record of responding to obligations in the South Pacific, where the ADF is often deployed on international humanitarian and disaster relief (HADR) operations. Coinciding with the bushfires, in December 2019 Category Five Cyclone Yasa hit Fiji, leading to the deployment of 700 ADF personnel for almost a month (Foreign Affairs 2021). In the week this deployment ended, another 800 ADF personnel were deployed to undertake flood relief in New South Wales (Department of Defence 2021a). Simultaneously, some 1000 ADF personnel were also deployed around Australia to help manage the COVID-19 pandemic. The increasing scale of support needed for disaster relief led the chief of the army in 2019 to formally assign responsibility for leading domestic emergency operations to the 2nd Division—a reserve headquarters previously assigned to preparing forces to supplement the Regular Army forces on deployments abroad (Campbell 2021, 13).

3 Military Deployment During COVID-19

3.1 Coordination of the COVID-19 Response

In February 2020 rain finally arrived and put out the remaining flames across southeastern Australia; by early March 2020, the joint task forces that had been assembled to fight bushfires were wound down and reservists returned to their civilian professions. Then, only a couple of weeks later on March 13, the prime minister announced the formation of a so-called national cabinet, comprising the prime minister, state premiers, and territory chief ministers, to respond to the COVID-19 pandemic.

With this, the Australian Health Protection Principal Committee (AHPPC) and National Coordination Mechanism (NCM) were tasked with advising the national

cabinet. The commonwealth medical officer chairs the long-established AHPPC, which is composed of all state and territory chief health officers (Senate 2020b, 39). The NCM established within the Department of Home Affairs served to coordinate the whole-of-government responses to issues outside the direct management of COVID-19 health issues. The NCM included ADF staff and Emergency Management Australia.

Importantly, the national cabinet primarily had a coordinating function, not a command role. While it made high-level policy decisions to guide emergency responses, state and territory governments remained responsible for implementing these decisions using the special powers available to them through their emergency and public health legislation (Maclean and Elphick 2020, 17). However, on March 27, the federal government launched Operation COVID-19 Assist to help the nation respond to the pandemic. This required sustained responses rather than a short surge. While many reservists had been deployed to the Bushfire Assist operations, the summer season (when reservists tend to be more available) had passed. With the need for a longer-term commitment, the COVID Assist response involved more regular force personnel. ADF teams deployed nation-wide to perform the following roles:

> To work in partnership with state and territory law enforcement agencies to conduct COVID-19 quarantine compliance checks. The ADF will provide logistics support for the state and territory police as they enforce mandatory quarantine and isolation measures… The ADF response is being undertaken through the provisions of the Defence Assistance to the Civil Community (DACC) framework. ADF members have no coercive enforcement powers… Assistance from the ADF is coordinated through the Emergency Management Australia-led Whole-of-Government response to COVID-19. (Reynolds 2020)

The ADF deployment process was legal and followed long-established approaches. This may have been at least partly because the defence minister had served for almost three decades in the Australian Army reserve, reaching the rank of brigadier. Further, the DACC manual is a mere policy document and not a prescriptive piece of legislation, so it did not give ADF personnel any particular coercive powers.

3.2   Roles of the Military

A week after the government formed the national cabinet, the Department of Defence set up a COVID-19 task force under Operation COVID-19 Assist and established a subordinate joint task force (JTF) 629 to command ADF COVID-19 activities at the national level. Headquarters JTF 629 was an augmented headquarters 2nd Division, noted earlier as having a domestic emergency role and being the primary headquarters for army reserve units. From the start of the pandemic until mid-2021, more than 16,000 ADF personnel were deployed on Operation COVID-19 Assist. They did a range of jobs, including many that the ADF had never undertaken before. The following paragraphs briefly describe those tasks.

International border control: The national cabinet closed the nation's international borders and allowed only specifically exempted individuals into Australia. These individuals then had to undergo 14-day mandatory quarantine in state government operated so-called quarantine hotels; these were mostly commercial hotels contracted for this function. The ADF provided many of the security personnel that the quarantine hotels used, although at times private security firms were also employed—with mixed levels of success (Senate 2020b, 143).

Domestic border control: At the start of the pandemic, the five less-populated states and one territory imposed border restrictions on interstate travel (Senate 2020b, 113). ADF personnel then provided border control support to the relevant state and territory police forces. In this, the ADF was not accredited law enforcement officers, so policing remained the responsibility of the various states and territories. In Queensland and the Northern Territory there were also internal border controls set up to monitor people's movements into the remote indigenous communities believed most vulnerable to COVID-19. Again, ADF personnel were involved in this task (Senate 2020b, 3–4). The border control task varied as states and territories opened and closed their borders as the need to control the movement of people possibly carrying COVID-19 oscillated. A particularly large closure occurred in mid-2020 when Victoria experienced a second wave of COVID-19 infections. This was Australia's most serious outbreak of the virus. In this particular situation, some 500 ADF personnel were deployed to support the New South Wales police at 20 border checkpoints designed to stop unauthorized border crossings (Department of Defence 2021c). There were always a considerable number of authorized border crossing points for commercial purposes, interstate freight services, and emergency vehicles.

Contact tracing: A major feature of Australia's COVID-19 suppression strategy involved contact tracing, which each state and territory undertook. When contact tracing was combined with rapid genomic testing, the emergence of a COVID cluster could be quickly determined and affected people rapidly tracked down and ordered into a 14-day quarantine, generally at their home. To be effective, contact tracing consumed a lot of time and personnel; the ADF assisted continuously, though some of the contract tracing processes needed staff with specialized skills. ADF personnel were also needed in the process of selectively checking that people who had been ordered into quarantine remained at home as directed.

Production of supplies: Early in the pandemic the ADF took on some non-obvious tasks. ADF personnel supported Med-Con Pty Ltd, Australia's only producer of surgical face masks, with production, machine operations training, maintenance, repair, and warehousing so the company could boost its production capacity from two million surgical face masks per year to 50 million per year. Nine civilian personnel from Defence Science and Technology joined the Australian government's ventilator response group, which worked to ensure an adequate supply of ventilators for Australian needs (Department of Defence 2020d, 3–4).

Medical support: The nature of the pandemic meant that ADF medical personnel played important roles in supplementing the efforts of civilian medical staff across

Australia. Such support could only be limited, however, as the ADF had just 935 medical staff, half of whom were reservists. By the end of 2020, almost all were deployed to support state and territory medical services (Senate 2020a). As an example of this type of support, early in the pandemic all staff at the North West Regional Hospital in Burnie, Tasmania, had to be placed in quarantine. Contingency plans had been made for such a situation and a team of some 50 ADF doctors and nurses, a pharmacist, a radiographer, an environmental health officer and other generalists, and seven civilian staff from an Australian medical assistance team quickly deployed. The rapid deployment kept the hospital open, providing critical health support to northwest Tasmania until the regular staff could return (Stuart 2020).

COVID testing: ADF personnel were frequently involved in assisting state and territory health professionals in swab testing at sites Australia-wide. Most of these personnel were in support roles such as transport and data management (Dick 2021). However, the ADF deployed small specialist medical teams in the more populous states. Before conducting tests, ADF medical staff typically underwent three days of training with the Australian Health Practitioner Regulation Agency concerning COVID-19 testing and infection-control measures. A typical test site did 600 to 1000 tests a day with 250,000 tests completed nationwide by September 2020.

Vaccination: Australia's vaccination rollout was delayed and then slow to ramp up due to age-related health concerns with the AstraZeneca vaccine and the very limited stocks of the alternative Pfizer vaccine that the country initially acquired. By mid-2021, Australia had the fewest fully vaccinated adults in the OECD, making it the worst-performing country in the OECD (Saunokonoko 2021). The federal finance minister declared that Australia was at "the back of the queue" as far as the Pfizer vaccine supply was concerned (Sullivan 2021).

The government's solution was to move Lieutenant General Frewen into the post of co-ordinator general, the national COVID-19 vaccine task force within the federal Department of Health. The prime minister explained that the move intended to have a "completely new organisational structure for getting a whole of government effect on a very big problem. I think that the very direct command and control structure that has proved to be so effective in the past will add a further dimension…" (Barlow 2021).

Navy Commodore Eric Young gave the solution a further ADF touch when he was appointed as vaccine operations coordinator at the Australian government's vaccine operations centre (VOC) (Department of Defence 2021d). The VOC already included some 20 ADF staff in planning and logistics roles. The ADF staff also developed induction training packages for the VOC so that new staff could become competent as quickly as possible. In the field, ADF staff was initially made up of 12 five-person teams of clinicians and support staff that helped to deliver and administer the vaccine rollout (Department of Defence 2021b). This involvement grew and began to specialize in vaccinating remote Indigenous communities.

Lockdown support: In mid-2021 Australia's largest city, Sydney, with a population of some 5.3 million, had great difficulty controlling the spread of COVID. The

New South Wales government imposed a controversial, suburb-specific lockdown for some four months, with the national vaccination rollout redirected to focus on the city. There were compliance problems, so some 300 ADF personnel were deployed in late July to help the state's police force; an additional 500 were added in August (Xiao 2021; Blair 2021). Importantly, under DACC procedures, ADF personnel were not authorized as law enforcement officers, nor were they able to enforce state health orders; they simply supported the police (Jenkins 2021).

Management support: More than 60 ADF staff were embedded with various Australian government agencies, including the Department of Health and the Department of Foreign Affairs and Trade to undertake planning, operational management, and logistics functions. Additional ADF personnel staff assisted state and territory governments with emergency response planning (Department of Defence 2020d, 3–4).

Australian Signals Directorate (ASD): A less obvious Defence contributor was the Foreign Signals Intelligence Agency. ASD's involvement was primarily through the Australian Cyber Security Centre (ACSC). The centre published COVID-19-specific cyber threat updates including case studies of COVID-19-related cyber scams, online fraud and phishing campaigns, and practical advice for protecting individuals and organizations, particularly while people worked from home and used web conferencing systems. ASD also used its offensive cyber capabilities to disrupt foreign cybercriminals responsible for COVID-19-related malicious cyber activities. ASD disrupted the activities of foreign criminals by disabling their infrastructure and blocking their access to stolen information (Department of Defence 2020d, 3–4).

ASD further engaged with hospitals and health service providers across Australia to provide cyber security advice, share threat information, and help mitigate cyber risks from malware, including ransomware. The ACSC also provided advice and assistance to the digital transformation agency in developing the cyber security of the COVID Safe app, the Australian government's contact tracing application for smartphones (Department of Defence 2020d, 3–4).

3.3   Readiness and Effectiveness

The ADF retains a significant proportion of its regular forces on short-notice standby so it can respond to crises abroad or domestically. ADF personnel deployed during the COVID-19 pandemic had diverse skills and specialities, but all needed some specific, relevant training. The Australian Defence College in collaboration with the joint health command and the three services designed a training course to quickly prepare personnel without a medical background to supplement those with medical training to conduct medical-support tasks and other duties as part of Operation COVID-19 Assist. The course was made available to ADF and Australian government personnel and to Australia's international military partners. Within a month, the online training

course had been taken and completed by nearly 200,000 personnel (Department of Defence 2020b).

The scale of Operation COVID-19 Assist made it necessary to secure a significant commitment from the reserves. In the initial period from March to June 2020, some 50 percent of JTF 629's personnel were reservists. The sudden increase in demand arising from the second-wave outbreak in the state of Victoria saw this proportion drop sharply as a surge of permanent personnel was quickly deployed to meet the emerging situation. By September 2020, reserve numbers rose again to about 40 percent of the overall ADF commitment. In terms of the deployment of military personnel, the army made greater use of reservists than the navy or air force. During Operation COVID-19 Assist, there was no call-out of the reserves as there was during the bushfire emergency. The reservists deployed during COVID were all volunteers and thus the army had a greater pool from which to find individuals both available and willing to deploy for extended periods. The reservists undertook tasks including liaison, planning, logistics, quarantine management, contact tracing, and staffing police control points.

The efforts the army had made to institutionalize the command and control of domestic response activities with headquarters 2nd Division proved important. With such a framework in place, the army was readily able to surge early in the operation. By October 2020, over 3000 reserve forces from the 2nd Division had deployed on Operation COVID-19 Assist; some 3000 had also been involved in the bushfires at the start of that year (Campbell 2021, 10–13). There is, however, a downside to the 2nd Division having the dual role of domestic response and warfighting. Dustin Gold, an army reserve captain, after noting the high rate of effort in recent years, advises:

> Looking back… suggests the Reserve can do both – maintain responsibility and capability for Domestic Military Operations and train for Foundation Warfighting. But it comes at a cost, perhaps most readily seen in force generation ratios that suggest you need almost three times as many Reservists to generate a force element of company size. (Gold 2020)

In the end, ADF personnel could not simultaneously train for war and be deployed on COVID-19 duties. Decisions had to be made about which task had priorities; as part of this, several major warfighting exercises were cancelled with others postponed or greatly reduced in size.

The fundamental reason for Operation COVID-19 Assist was to address shortfalls in the workforces of federal and state governments. In calling on the ADF, the federal government was principally seeking capability improvements whereas the state governments were mainly seeking capacity enhancements. What the COVID-19 pandemic highlighted was that while the national government had policy and regulatory skills, it lacked implementation expertise. This shortfall was most visibly demonstrated by the appointment of Lieutenant General John Frewen as the national COVID-19 vaccine task force coordinator. While contractors could be employed for much of the national-level implementation of the vaccine rollout, they still needed planning, coordination, administration, hiring, and performance monitoring, all of which incorporated lessons learned and saw operations adjusted as circumstances evolved. Frewen and his hand-picked team of military operations and military health

planners performed this task. The use of ADF staff in cross-government management and management support tasks significantly helped address the capability shortfall.

In contrast, the states and territories mostly required more people to meet the increased workload. ADF personnel were again deployed to boost planning capabilities and operations management staff. Major James Eling, a reservist in the army, noted: "A key capability that ADF brings to multi-agency operations is the ability to plan for operations where no one has any previous planning experience" (Eling 2021).

There is incidental and anecdotal evidence that recruitment and ADF personnel retention suffered during this period—although it was difficult to discern which of several possible causes might have been responsible. How much of this could be attributed to the unusual circumstances of COVID, and how much to the laborious and largely thankless and boring work involved in managing COVID quarantine and vaccination facilities?

In addition, during the most intense period—when Operation COVID Assist followed immediately after Operation Bushfire Assist—numerous individual and group training activities were postponed or cancelled. This harmed both the personal and organizational preparedness for the principal tasks for which the ADF is expected to be prepared—high-end military operations in defence of Australia and its interests. In a force where personnel are posted to positions for about two years, the established training routines, which involve periods of dedicated individual training coupled with periods of collective or group training (military exercises), are finely balanced and crucial for effective professional development and coaching for future promotions and other challenging appointments. Those appointments assume that individuals have a level of experience and proficiency developed from individual and collective training opportunities.

The ADF is sometimes described as a boutique force. It is highly professional and well regarded by society, but it is small and, arguably, only a "one-punch" force should Australia need to confront a serious military challenge. Designed essentially for the geostrategic situation following the end of the Cold War, today's ADF is far smaller than the military was at its World War Two wartime peak. In terms of land power alone, the army peaked at 14 divisions in January 1943.

The army of the Bushfire Assist and COVID Assist period consisted of only one regular force division and one reserve force division physically scattered across the continent. In this context, taking troops away from their regular individual and collective training obligations to undertake the kinds of domestic operations that COVID Assist represented leaves them less well-trained for the warfighting tasks which are their core function.

Accordingly, the cost-effectiveness of the ADF undertaking domestic emergency tasks has been challenged. After all, ADF training focused on warfighting is costly and requires that procedures and protocols be practised frequently, notably because of high personnel turnover and the rotation of appointments within ADF units. The federal government has tended to choose the default option of calling on ADF personnel rather than bolstering resources for the state-based fire and emergency

services principally tasked with responding to civil disasters (Hellyer 2019). Essentially, having the ADF focus on environmental issues (such as a pandemic), leaves less time for it to focus on what it is designed for—prepare and conduct operations offshore in defence of Australia and its interests" (Blaxland 2021).

4 Civil-Military Relations

4.1 Securitization of the Pandemic

Overall, there was little securitisation of the pandemic in terms of adopting militarised measures to manage this emergency. From the beginning, the federal government handed the responsibility for implementing most pandemic response measures over to the states. In Australia, the states have no military force equivalent to that of the National Guard in the United States. The states accordingly used their state police forces where necessary, although the smaller states (by population but larger in area) did get some ongoing assistance in the form of additional personnel from the ADF, but not for enforcement duties. These ADF personnel supplemented the individual state security workforces to a limited extent. Post-pandemic, using the ADF to help enforce quarantine measures was considered a poor solution given their inexperience and the constant shuffling of the individuals involved (Department of the Prime Minister and Cabinet 2024, 187). The biggest security failure was in the hotels in Victoria contracted to provide COVID quarantine services, where a security company hired by the state government proved ineffective and an outbreak occurred that then led to a city-wide lockdown (Chodor and Hameiri 2023, 81–89). The federal government at times used media coverage of ADF involvement in the pandemic to highlight that this level of government remained an important actor. With the states mainly responsible, the federal government's role could appear inconsequential.

4.2 Civilian Oversight and Accountability

While the military had a prominent and public-facing role in managing the pandemic, ultimately it remained directly responsible through the COVID task force to the federal government via the minister of health and the prime minister. At the state level, ADF support was tied closely to the specific requirements and lines of responsibility within the respective state governments to which they were assigned. As indicated above, this also provided a convenient mechanism by which civil authorities could distance themselves from problems or complications should the situation deteriorate or get blown out of proportion. By and large, the military behaved in a very creditable manner. Its reputation was burnished by its performance. This was accentuated when the military was compared with poor-performing contractors

who oversaw significant protocol breaches at some of the quarantine facilities. The ADF's response demonstrated not only the well-articulated internal military lines of responsibility and accountability but also its disciplined and professional work; both generated additional respect for the ADF from the community at large.

4.3 Public Image of the Military

The ADF has long been held in high regard by society at large. This continued to be the case during the pandemic. In the middle of the COVID pandemic's first year, for instance, a survey found that 78 percent of the public had a "a great deal" or "quite a lot" of confidence in the ADF. This figure was slightly lower than, but still comparable to that of the UK and US (Evans et al. 2020, 13). However, in late 2020 the Brereton report was released. It examined alleged war crimes committed by some special air service regiment individuals in Afghanistan between 2005 and 2016. Australia's governor-general retired general David Hurley, told the 2020 graduating class of the Australian Defence Force Academy that the ADF now had the task of "reassuring and reaffirming its relationship with the Australian people following the findings of the Brereton inquiry" (Greene 2020).

In bringing ADF personnel into much greater contact with the public, Operation COVID-19 Assist may already have achieved Hurley's objective. Eling writes of his deployment experience that:

> The ADF brand is very strong and members in uniform are highly recognisable. On numerous occasions, actions have been attributed to the ADF when in fact they were supporting other agencies. It is the downside of working for an organisation with such a strong brand and something that everyone needs to remember and ensure that all ranks understand it in an effort to minimise the reputational risk. (Eling 2021)

Politicians, too, are highly attuned to the daily ebb and flow of public opinion. Their current remarkable enthusiasm for deploying the ADF for domestic tasks whenever possible suggests that voters once again hold the ADF in high regard. An example of this is a recent radio interview with host Neil Mitchell talking to federal government minister David Littleproud immediately after serious storms hit Victoria in June 2021:

> the ADF has been stood-up ready to actually engage, to move in on the request of the Victorian Government... we are ready to move. The ADF has been prepared. And I know Defence Minister Peter Dutton has made sure that all efforts have been made to ensure that if that request comes through from Victoria, then ADF personnel will be moved immediately. (Littleproud 2021)

The transcript suggests that the government sees the ADF as a vote-winner in the court of public opinion. This implies that the public is favourable to a more extensive use of the ADF across Australia in a multiplicity of roles. The ADF may have returned to the high levels of public trust mentioned earlier in the survey. In this, at least at present, no incidents concerning the ADF's performance, behaviour, or use of resources during the pandemic have been reported.

5 Lessons Learnt

Overlapping and compounding disasters in Australia are likely to become more common, due both to global warming and the amplified impact of recent changes in Australian society, population distribution, and infrastructure interdependences (Department of Defence 2020e, 22). Human security threats arising from natural disasters cannot be disregarded and responding to them is consuming an increasing level of scarce ADF resources. Such operations create organizational challenges in maintaining the ADF's warfighting skills. Specifically, personnel are unable to undertake necessary training when they are deployed on domestic emergency tasks, and warfighting exercises are cancelled when units are not available. There is a steadily rising demand for ADF personnel (and for state-based police, fire, and emergency services) to respond to domestic emergencies, but the ADF is presently structured and ready for warfighting, not domestic emergencies.

The 2023 Defence Strategic Review (Australia 2023) partly considered these matters, although it only noted the issues; it didn't address them. In the review, the government acknowledged that defence assistance to the civil community affects force preparedness, readiness, and combat effectiveness. Accordingly, the government agreed in principle that "Defence should be the force of last resort for domestic aid to the civil community, except in extreme circumstances." The first national defence strategy in 2024 restated this guidance. However, at odds with this policy that favours state security, in recent years the Department of Defence has been at its most active in protecting the Australian people.

In reality, state and human security needs overlap and both are essential, but Defence has inadequate resources to simultaneously address both sets of tasks given increasing demands from each. There is a case for the ADF to be better resourced in order to it respond to demands to assist in domestic emergencies. This could involve adding a new domestic response component to the ADF that the government could use instead of turning to the warfighting elements of the ADF to respond to domestic situations. Allowing for training and overlapping deployments, this new domestic response HADR element might comprise around 5000 personnel (Layton 2020). Alternatively, it could entail fostering an incentivized voluntary scheme for national and community service to ensure that fire and emergency response agencies have increased capacity to handle future emergencies. (Blaxland 2022).

Australia's current approach, in which the ADF helps respond to domestic emergencies part-time, was developed last century and designed to manage periodic natural disasters. The pandemic highlighted that today's disaster emergency problems are very different in scale, intensity, frequency, nationwide coverage, and duration. It is time for governments at the federal, state, territory and local levels to rethink Australia's response measures to domestic emergencies.

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New Zealand

Bethan Greener and **Steven MacBeth**

Abstract In late 2019 government officials in New Zealand began to prepare for the arrival of the COVID-19 virus. The National Security System was activated on January 27, 2020, and the National Health Coordination Centre shortly thereafter. The first case of the virus was detected in the country on February 28 2020. The Ardern government of the day elected to pursue an elimination strategy, limiting the movement of people both across the border and within the country under a number of different 'lockdown' periods. The NZDF became a significant asset in assisting in the country's overall COVID-19 response. Although staffing Managed Isolation Quarantine facilities (MIQ) was the main tasking, other important activities included logistical assistance, support to police-led roadblocks, military flights for vaccine delivery, and surveillance. These efforts ran from 2020 into 2022. The NZDF's role in pandemic response was viewed positively by the public, but had some negative impacts upon the institution itself

1 Introduction

New Zealand's all-volunteer defence force employs about 10,000 regular personnel. The army typically has approximately 4600 regular force staff, the air force 2540, and the navy 2200. The army is essentially a brigade, the air force a single fixed wing/rotary squadron, and the navy has two frigates with a large ice-breaker vessel and smaller patrol vessels (NZDF nd (a)). Although a 2018 Strategic Defence Policy Statement (Ministry of Defence (MoD) 2018) called for a boost in army numbers (to 6,000 regular forces) and for the creation of a fourth domain—the information domain—to work alongside the existing three services, these aspirations have not

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yet been realized. The NZDF has a small but active reservist units that include useful numbers of both ex-service members and active police personnel.

The NZDF is mandated by the (Defence Act 1990) to defend New Zealand and to protect "any other area New Zealand is responsible for defending" as well as New Zealand's "interests" both at home and abroad. The Act specifically mentions the potential for contributions to collective security treaties, agreements, or arrangements, as well as to the United Nations (UN). Finally, and most importantly for this chapter, it "allows the armed forces to be made available in New Zealand or elsewhere for the provision of assistance to the civil power in time of emergency and of any public services" (Defence Act 1990). This meant that the NZDF was able to be activated to support the New Zealand government's response to the COVID-19 pandemic.

As the pandemic unfolded in China in late 2019 and began to spread across the globe, officials in New Zealand began to prepare for the arrival of COVID-19. The National Security System was activated on January 27, 2020, with the National Health Coordination Centre activated shortly thereafter. The first case of the virus was detected in the country on February 28, and the government elected to pursue an elimination strategy. On March 10, 2020, the National Crisis Management Centre (NCMC) and an operational command centre were activated. The country closed its borders on March 19 and it introduced a new system on March 21 to notify the population of new pandemic alert "levels" ranging from Level 1 (no restrictions) to Level 4 (lockdown). On March 23 the government announced that the country would be moving to Level 4 lockdown conditions at midnight on March 25. It also implemented a national state of emergency, to be renewed weekly in Parliament, and this drew both on the Civil Defence Emergency Management Act 2002 and the Health Act 1956 (McLean et al. 2021). Lockdowns were implemented at various times and in particular sites throughout 2020 and 2021 to try to control the outbreak of the virus, but by the end of 2021, the evolution of the more contagious Omicron variant combined with the country's high vaccination rates encouraged it to move towards management of the virus rather than its elimination.

To control the spread of the virus, the government not only restricted people's movements within the country but also pursued a very strict border control policy. Apart from a short-lived experiment with a "travel bubble" with Australia in mid-2021, those travelling to New Zealand during 2020 and into early 2022 were required to isolate within Managed Isolation Quarantine facilities (MIQ) for at least 10 days. It was in the staffing of MIQs that the government became especially reliant on personnel drawn from NZDF, though personnel were also brought into a range of other support activities during the pandemic. On February 3, 2022, the government released its new plan for opening the country's borders. Travel returned to near normal by late 2022 and the NZDF's commitment to the pandemic response wound down, providing an opportunity to reflect on the pros and cons of its engagement as the organization turned to regeneration.

2 Domestic Operations

The NZDF has become a key asset in responding to a range of humanitarian assistance and disaster relief (HADR) situations both at home and abroad, as reflected in the growing number and range of HADR engagements over the last few decades. Within New Zealand, these activities have ranged from the more usual provision of food, water, and housing to affected populations across the two main islands following numerous emergencies, to the unusual, such as the use of the New Zealand Special Air Services to retrieve bodies after the Whakaari/White Island volcanic eruptions in December 2019.

2.1 Constitutional and Legislative Framework

New Zealand does not have a written constitution per se. In terms of the legislative frameworks that enable the NZDF to respond to domestic incidents, however, there are strong legal constraints that ensure that domestically any military aid to the civil power (MACP) is kept under civilian control. Here, once again, the main document that legitimizes the NZDF's engagement in domestic activities is the (Defence Act 1990). It is worth citing in full the clause that relates to this kind of activity (emphasis from the author).

9. Use of Armed Forces to provide public service or assist civil power

(1) Subject to the succeeding provisions of this section, the Armed Forces may be used in New Zealand or elsewhere—

   (a) To perform any public service; or
   (b) To provide assistance to the civil power in time of emergency.

(2) No part of the Armed Forces shall be used to provide any public service in connection with an industrial dispute except under the written authority of the Minister, and that authority shall specify the part or parts of the Armed Forces that may be used and the public service or public services that may be provided.

(3) No part of the Armed Forces shall be used to provide assistance to the civil power in the circumstances described in paragraphs (a) and (b) of subsection (4) except in accordance with an authority given by the Prime Minister or another Minister under that subsection.

(4) Where the Prime Minister or, if the Prime Minister is unavailable, the next most senior Minister available is satisfied, on information supplied by the Commissioner of Police or a Deputy Commissioner of Police,—

   (a) Either—
   (i) That there is in New Zealand an emergency in which one or more persons are threatening to kill or seriously injure, or are causing or attempting to

cause the death of or serious injury to, any other person, or are causing or attempting to cause the destruction of or serious damage to any property; or

(ii) That such an emergency is imminent; and

(b) That the emergency cannot be dealt with by the Police without the assistance of members of the Armed Forces exercising powers that are available to constables,—the Prime Minister or the other Minister may authorise any part of the Armed Forces so to assist the Police in dealing with the emergency.

(5) Every part of the Armed Forces that is assisting the Police in accordance with an authority given under subsection (4) shall act at the request of the constable who is in charge of the operations in respect of the emergency.

(6) Every member of any such part of the Armed Forces—

(a) May, for any purpose necessary to assist the Police in dealing with the emergency, exercise any power of a constable; and

(b) Shall, for the purposes of civil and criminal liability, have the protections of a constable, in addition to all other protections that the member of the Armed Forces may have.

(7) The Minister of Defence or the Prime Minister or other Minister granting any authority under subsection (2) or subsection (4) shall inform the House of Representatives, forthwith if the House is then sitting or at the earliest practicable time if it is not, that the authority has been given and of the reasons for giving it, and, if the authority was given in writing, shall lay a copy of it before the House.

(8) Any authority given under subsection (2) or subsection (4) shall lapse on the expiration of 14 days after the day on which it was given unless—

(a) The House of Representatives passes a resolution extending the authority for such period as is specified in the resolution; or

(b) If Parliament was dissolved or had expired before or after the authority was given and has not been summoned to meet before the authority would lapse, the Governor-General, being satisfied that it is necessary to extend the authority, extends it by Proclamation approved in Executive Council for such period as is specified in the Proclamation.

In addition to such legislative frameworks, the NZDF can also be bound by other requirements such as those outlined in the National Civil Defence Emergency Management Plan Order 2015 which requires the institution to "develop and maintain capability and capacity to ensure that it can perform its role" when supporting other agencies during emergencies (Sect. 15).

2.2 Deployment in Domestic Roles

As indicated, the NZDF is a small military. Major assets in the army include light armoured vehicles (LAVs); the SAS's highly mobile Supacats; MAN medium and heavy operational vehicles (MHOVs); Pinzgauers (though many of these have recently been decommissioned); and other artillery and infantry assets, including the introduction of a fleet of Bushmaster armoured vehicles in 2024. New Zealand's air force is largely composed of new C-130 Hercules aircraft for lift; P-8 Orions for surveillance; B-757 s for transport; NH-90 helicopters; Seasprite maritime helicopters; and light aircraft. Naval assets include the ice-breaker *Aotearoa*; two ANZAC class frigates (*Te Mana* and *Te Kaha*); the multi-role vessel (MRV) *Canterbury*; offshore patrol vessels (OPV); inshore patrol vessels (IPV) and other small vessels. Important specialist components across the NZDF include medical, dental, intelligence, engineering, logistics and catering capabilities, amongst others, while units such as the army's explosive ordinance disposal team and the navy's operational dive team possess additional extraordinary capabilities.

According to recent reporting, due to these capabilities, the NZDF has frequently been called upon to help respond in search and rescue situations, flooding events (such as in Manawatu in 2004, the West Coast in 2021, and the East Coast of the North Island in 2023), and to address the loss of infrastructure (as a key example, in 2019 the army built its largest Bailey bridge since WWII to help replace the Waiho Bridge). These responses have all been small in scale compared to that provided in the wake of the 2011 Christchurch earthquake (NZDF nd (b)).

A magnitude 6.3 earthquake struck the Canterbury region on New Zealand's South Island on February 22, 2011. Within five hours a city-wide state and a day later nation-wide state of emergency was declared. The government then called upon NZDF to help provide logistical and operational support to the Civil Defence and Emergency Management (CDEM) to assist with the all-of-government response. The Commander Joint Forces (COMJFNZ) was directed to co-ordinate the NZDF response to the emergency with support from single service chiefs who were to provide force elements (FE) —capabilities formed into groups for specific operational purposes—as required (NZDF 2021, 19).

In terms of assigned tasks, NZDF personnel ended up providing humanitarian aid shortly after the quake, with injured civilians being treated by medics and a navy vessel being used to house and feed civilians. Later on, NZDF personnel patrolled cordons in cooperation with the police to prevent people from entering the "red zone." Caterers, medics, and engineers provided aid to civilians; army vehicles (Unimogs, Pinzgauers, LAVs) moved people and goods around the city; three naval vessels housed people and helped to move people and goods in and out of the city; and forces' aircraft surveyed the damage and moved emergency personnel around the city (NZDF nd (b)). In summary, the NZDF provided.

1,768 New Zealand Defence Force personnel made up of 239 Navy, 1,379 Army and 150
Air Force regular and reserve personnel were directly involved in the joint force response
to Christchurch in 2011 [as were] 10 RNZAF aircraft, 77 Unimogs, 47 Pinzgauer Light
Operational Vehicles, 28 Light Armoured Vehicles, 4 RNZN ships. (NZDF (b))

The NZDF learned several lessons from this experience, specifically, that it had a
lack of knowledge about other agencies (and needed to give more priority to the work
of liaison officers), it needed to identify how to improve situational awareness more
swiftly, to improve the tracking of personnel across deployments, and to clarify some
aspects of command and control (NZDF 2021, 19). Following this event, the NZDF
created a deployable joint inter-agency task force (DJIATF) headed by Headquarters
Joint Forces New Zealand (NZDF (b)).

Notably, key strategic documents have recognized the HADR roles that the NZDF
has been playing domestically. The 2018 White Paper, for example, emphasized
that the NZDF operates in three main spheres: community, nation, and the world
(Ministry of Defence (MoD) 2018). The purposeful addition of "community" more
explicitly recognises the many domestic roles that the NZDF have played. For
example, although the NZDF has not yet been deployed to assist in counter-terrorism
efforts (although it has frequently engaged in relevant police-led "lawman" exer-
cises to prepare for such an instance), it has been deployed to assist in other select
security-related or public service support-related instances. For example, in 2001,
1400 personnel from all three services stepped in to replace striking prison guards.
This was not a popular deployment; some personnel admitted publicly "that they
were not keen to guard the prisons, but, as service staff, had little option" (Oliver
2001). Military assets have also been used in extraordinary situations to support other
security efforts. For example, a gunman had shot at, and killed and injured police
personnel in Napier in 2009. To help resolve the situation, the police used one of
the army's light-armoured vehicles (LAV) to protect personnel so they could get
closer to the scene and evacuate nearby civilians (Stuff 2009). The NZDF is also
the *only* agency that specializes in land and maritime explosive ordinance disposal
(EOD). The EOD unit operates out of three sites across the country, and between
2018 and 2022 was deployed anywhere from 124 to 194 times a year responding
to concerns about potentially explosive or dangerous materials (Official Information
Act response 2022).

Thus, the NZDF has been deployed in domestic settings either because it has
unique capabilities and assets (such as Unimogs to move through flooded roads) and/
or because it provides a ready, capable, and disciplined surge capacity for existing
agencies such as the police, search and rescue, or civil defence and emergency
management.

3 Military Deployment During COVID-19

3.1 *Coordination of the COVID-19 Response*

In the overall national coordination of the pandemic response effort, it is important to remember that New Zealand is a unitary state with a parliamentary system where everything is small in scale compared to many other countries. Specific cabinet ministers were assigned certain responsibilities and decision-making rights concerning COVID-19. The minister of health, for example, was responsible for public health decisions, including making Orders under the COVID-19 Act (for example, alert level Orders, and Orders requiring managed isolation for people travelling to New Zealand). The minister of housing was responsible for the operation of managed isolation and quarantine facilities, and the minister of immigration for deciding which non-New Zealanders could travel to New Zealand. In addition to these key decision-makers, the director-general of health was of major importance in shaping the response to COVID by informing Cabinet decisions via discussion documents, providing advice orally in "real time," and making Orders and issuing directions to manage the pandemic (Department of Prime Minister and Cabinet (DPMC) 2020, 9).

Among the first people responding to the COVID-19 crisis were civilians, including the director-general of health, the commissioner of police, and representatives from the ministry of Civil Defence and Emergency Management (CDEM) (Kitteridge et al. 2020). During the pandemic's early phases, the Ministry of Health and the NCMC took the lead, but this was wound down such that the MBIE was handed the lead agency role in mid-2020, and an ongoing working group established within the department of the prime minister and Cabinet replaced the NCMC (DPMC). Hence.

> The system was established and managed by the "All of Government" emergency response with MoH as the lead agency and NZDF co-ordinating the bulk of the tactical response. In July, responsibility was transferred to MBIE as the lead agency with the New Zealand Defence Force (NZDF) continuing to be deployed to MIQ operations. Within MBIE the system is managed by the specifically created Managed Isolation & Quarantine (MIQ) unit. (Jack et al. 2021), 10).

The ongoing nature of the pandemic required the creation of a specific coordinating capacity within the ODESC system. The National Response Leadership Team was established and composed of the chief executive of the Department of Prime Minister and Cabinet (DPMC), the director-general of health, the secretary of the treasury, the commissioner of police, the chief executive of the national emergency management agency, and the deputy chief executive (COVID-19 group) DPMC. Note here the importance of the role of the DPMC. When the initial response-capacity NCMC was deactivated on June 30, 2020, the government created a COVID-19 group within the DPMC to continue the coordination of government efforts. Although the

group did not have any statutory responsibilities, it provided advice to the government, sought to mitigate risks, and took the lead on public communication strategies (Department of Prime Minister and Cabinet (DPMC) 2020, 11).

The MBIE, MoH, NZDF, AVSEC, NZ police and NZ customs also signed an overarching memorandum of understanding in December 2020. This document is not legally binding but does set out the responsibilities of each agency to cover a range of issues from health and safety to information sharing (Jack et al. 2021), 16).

Despite shifts in lead agencies and a shift from a crisis capacity to a more enduring working group, the overall structure of decision-making was always civilian-heavy. From mid-2020, for example, the NZDF provided a brigadier equivalent to lead the NZDF response, but this individual was officially seconded to MBIE—making them also, effectively, a civilian.

3.2   Roles of the Military

The NZDF's unique capacities provided significant value to the pandemic response. Some response tasks were related to the NZDF's capabilities and assets. For example, the NZDF helped to deliver vaccines to Pacific islands; assist with personal protection equipment (PPE) supply chain planning; undertake surveillance flights for the New Zealand police; provide logistics support; and repatriate New Zealand citizens. However, it was personnel that were the most important component of the NZDF's contribution to the pandemic response.

For its first contribution to the pandemic response, NZDF initially provided personnel for a range of planning functions across the government (approximately 80 personnel) to help support the early work of the NCMC. Then, on April 10, 2020, approximately 300 personnel were deployed to help operate managed isolation and quarantine facilities (colloquially known as MIQ) (McGuinness Institute 2021). This commitment soon ballooned. From August 2020 to the end of 2021, the NZDF provided 900–1200 staff on rotation for COVID-related tasks, making this the largest deployment (in terms of the monthly number of troops deployed) since the height of the NZDF's engagement in peacekeeping roles in Timor-Leste (1999–2002) (NZDF nd (c)). The army provided disproportional support to the effort, in part because the other two services centre on platforms (ships/aircraft) that require maintenance and continuous flying and sailing hours to remain operational.

NZDF personnel had three main roles while they were staffing these facilities: security, day-to-day operations within each facility, and leadership roles across regional centres and the national office in Wellington (Scott 2021). The director-general of health, under the COVID-19 Public Health Response Act 2020, granted these personnel specific enforcement powers: they were empowered to give legally enforceable directions (such as requiring a person to stay in their room) and to request that a person provide identifying information (NZDF 2021). NZDF personnel also staffed vehicle checkpoints to support the work of NZ police and provided support to the New Zealand Customs Service in which capacity they were again empowered to

enter areas, buildings, and vehicles, give directions, and request that people provide identifying information (Mark 2020).

There were two main reasons for using NZDF personnel this way. The first was for surge capability—the NZDF had a ready source of people who could be deployed to OP PROTECT, although this placed significant strains on the institution, particularly the army. The second reason was because of an assumed skill set, particularly the ability to follow orders and follow general levels of discipline and professionalism.

3.3 Readiness and Effectiveness

The NZDF was able to respond within all given timelines and was successful in completing operational tasks during OP PROTECT. Due to New Zealand's relative geographic isolation and the frequency of HADR and other events both within the country and within the Pacific region, the NZDF has a well-developed structure and process in place for domestic and regional emergency operational responses.

The NZDF holds headquarters, the Defence Joint Inter-Agency Task Force (DJIATF), and sea, air, and land assets on standing notice to respond to both international and domestic emergencies. These resources are scalable and can respond to shortened "notices to move,"[1] provide command and control, movements, engineering expertise, security, and communications to affected areas. The NZDF used the command-and-control architecture, operated under the DJIATF, as the immediate response to create the framework as the government's COVID-19 strategy was rolled out. The full suite of disaster response equipment, command and control, and domestic response capability was available well within the timelines required to execute the given tasks.

Unlike natural disasters such as the Christchurch earthquake, floods, or the Whakaari/White Island volcanic eruption, the NZDF COVID-19 response graduated and evolved over weeks as the New Zealand government's strategy became clear. This provided space for planners to be able to align resources with given tasks. Where this mission differed from previous aid to civilians was the lack of a measurable "end game." The determined end state and mission completion criteria were unclear. Hence, in its planning considerations, the NZDF had not merely to provide for a temporary surge capacity, as in the case of disaster relief operations, but had to plan to deliver a sustainable, deployed mission encompassing a large percentage of the operational force.

Thus, although the NZDF was fully prepared to deploy in support of the domestic civil power, what was not clear in the early stages of the engagement was whether the inter-agency elements were prepared to accept various military elements and integrate them into the tactical level under civilian control. As NZDF personnel and equipment always remained under the full command of the chief of defence staff,

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[1] These notices to move and the flow of assets are operational information that are restricted and cannot be published in an open-source document.

this created dual reporting lines: one administrative (NZDF) and one operational (lead ministry) for the deployed elements. This required a bespoke solution and the creation of a dedicated task force headquarters that replaced the DJIATF as the Op PROTECT lead. This standing task force received forces from the land, sea, and air elements and provided command and control and liaison to those elements being employed by the lead ministries. This area of civil-military relations and interagency command structures need to be further evaluated to determine which areas need to be improved upon for any subsequent emergencies that demand an extended military presence.

During the pandemic, the New Zealand Defence Force was still able to continue to execute its given international missions and conduct three international contingency operations during this time: the evacuation of non-combatants from Afghanistan (Bayer 2021); stability assistance to the Solomon Islands (New Zealand Defence Force (NZDF) 2023a); and aid to Tonga following the tsunami (New Zealand Defence Force (NZDF) 2023b). Even with these successes, however, there is broad agreement that Op PROTECT had an impact on the NZDF's ability to respond to a major international crisis or to provide effective options to the government.

NZDF policy on HADR emphasizes that.

> Generally, the military intent is for the NZDF to be prepared to provide appropriate operational and logistical support to the Government authorities during any type of local or national disaster or emergency *while maintaining operational outputs and missions.* The end state is determined as having successfully responded to the emergency and redeployed to home locations for reconstitution, ready to provide support to future contingencies. (NZDF 2021, 16, emphasis added by author)

The NZDF executive has broadly acknowledged that Op PROTECT had an impact on the operational options it could provide to the government and produced a significant degrading of the force's core military skills. In June 2021, Kevin Short, Chief of the Defence Force, reported to the minister of defence, Peeni Henare, that.

> "I am conscious that the NZDFs ability to respond to a Christchurch [type] of Kaikōura scale earthquake, or a Pacific event of the size of Tropical Cyclone Winston in Fiji, will remain degraded for the foreseeable future." The ongoing commitment "reduces the capability of the NZDF to respond to another national or regional emergency with previously expected scale or speed," made worse by the "wider" impacts of the pandemic on training and supply chains... (Cited in Patterson 2021)

Op PROTECT was the NZDF's main effort for two years and had an impact on everything from training to infrastructure projects. Engagement in Op PROTECT significantly affected both the institution's ability to maintain other operational roles and keep morale high as personnel became frustrated by the long hours, rolling deployments away from family and lack of time spent on the "core business" of their trades. The Annual Review of the New Zealand Defence Force lists work that was not done in 2020/21, largely because of the impact of COVID and the lack of resources. The list totals more than 50 projects (Knight 2022). Recruitment and basic training courses were protected as key requirements to sustain the force, but the costs of the operation were borne primarily by the land operational force and hurt its ability to "collectively" train.

The shortfalls generated by Op PROTECT meant that while individuals grew their skills the force was not able to practice critical military training functions at a level that would allow for deployment to a conflict zone. As an example, members of New Zealand's armoured unit, the Queen Alexandra's Mounted Rifles, completed between five and 12 deployments—29,800 personnel days in total. The attrition rate for all regular force personnel before the pandemic was just under 8%. In 2022 this rose to over 9% for the navy and air force and to 13.7% for the army, which contributed more than half of all Operation PROTECT staff (Knight 2022).

The Op PROTECT mission was completed effectively and the NZDF has, to date, been able to respond to contingency missions, but what is yet to be determined are the impacts of Op PROTECT, specifically, the hidden costs of replacing experienced members and getting the land element regenerated to a level of collective training that permits deployment and optionality for the government.

4 Civil-Military Relations

4.1 Securitization of the Pandemic

As the work of the NZDF during the pandemic was in a limited supporting role, and because the institution had garnered a positive reputation in responding to previous domestic emergencies, the use of military personnel, in this case, was not overly controversial. This is significant, as the New Zealand public can be cautious about the military's role in society. Instead, the use of NZDF in the MIQ roles, especially, tended to be viewed positively. This is in part because attempts to use other quarantine providers had already failed. Private security operators had initially been more involved in staffing and policing MIQ facilities, but some had been found responsible for privacy breaches or had been caught sleeping on the job (1News 2020). Then-Defence Minister Ron Mark welcomed the government's increasing use of the NZDF in mid-2020, suggesting that "the simple presence of military people onsite does tend to increase public confidence, it does tend to increase the level of public compliance" (Walters 2020).

Notably, too, the NZDF was insulated from other more contentious events during the pandemic that could have escalated. In February 2022, for example, there were rumours that the NZDF may be called on to support police in clearing a major anti-mandate protest related to the pandemic response (protests were brewing in resistance to the range of government-introduced mandatory requirements, such as mask-wearing). Although the army did "pre-position" tow trucks (Cornish 2022), the police managed to disperse the crowd and their vehicles in early March without needing to resort to any further support from the NZDF. For weeks the police had stressed the importance of de-escalation in response to the protest, and there was little government appetite to deploy the NZDF despite some commentators urging it to take a more aggressive approach (Little 2022).

The nature of the activities the NZDF undertook helped to ensure that it remained in less confrontational roles, and the clear lines of accountability for military involvement in any domestic deployment provided additional reassurance.

4.2   Civilian Oversight and Accountability

New Zealand uses an "ODESC system" to respond to emergencies at the national level. The system has three parts: the National Security Council (NSC); the Officials Committee for Domestic and External Security Coordination (ODESC); and, if required, ad hoc watch groups and working groups of senior officials. The NSC is the "key decision-making body of executive government for coordinating and directing national responses to major crises or circumstances affecting national security (either domestic or international)," is chaired by the prime minister, and has the power to act "where the need for urgent action or operational or security considerations require it" (National Civil Defence Emergency Management Plan Order 2015, sect. 15). ODESC provides security coordination at the chief executive level and "during an emerging or actual security event, is responsible for providing strategic direction and coordinating the all-of-government response" (DPMC nd (a)). ODESC advises the cabinet external relations and security committee, exercises policy oversight, advises the prime minister and Cabinet, as well as when activated, the NSC. Membership can change according to the emergency at hand. For example, the Civil Aviation Association (CAA) leadership will attend if the emergency involves aviation issues. Different agencies assume "lead agency" status within this body for different types of national security events, while other agencies provide advice and support for those efforts.

The NZDF's role in any domestic response is always a supporting one, even when playing a large role. In HADR efforts at home, for example, NZDF policy explicitly recognizes that "the lead agency response will be a government department or agency and not the NZDF" (NZDF 2021, 17). This is laid out in the National Security System with agencies such as the National Emergency Management Agency (NEMA) providing the lead in the case of major meteorological and geological disasters, the Ministry of Primary Industries providing the lead in biosecurity emergencies, and the Ministry of Health providing the lead for pandemic response (DPMC nd (b)). The National Civil Defence Emergency Management Plan Order 2015 further states that, when NEMA is the lead, the NZDF is to "co-ordinate, directly or through established clusters," providing a liaison officer, reporting to and operating under the national controller and managing its response in support (sect. 15). Note that in other, less severe emergencies, local commanders also have the discretion to use military personnel and assets to assist authorities i.e., provide staff and vehicles to support evacuation efforts in instances of severe localized flooding.

As noted in the italicized sections in the excerpt above taken from the (Defence Act 1990), the NZDF can also be granted constabulary powers should the commissioner of police request support under certain specified conditions. These might be in

instances of responding to terrorist incidents, for example, in situations where police believe they cannot manage the situation alone. Within the COVID-19 response, the New Zealand defence force never took on the "lead agency" role, nor was it provided any police powers of enforcement. Throughout the pandemic, the NZDF was subordinated to the Ministry of Health, and the Ministry of Business Innovation and Employment, and acted in a supporting role to those enforcing the law and monitoring the country's borders.

In terms of professional conduct and individual accountability, a few instances of misconduct were reported, such as the case of defence force personnel being censured for providing personal phone numbers to those detained in MIQ facilities or sharing explicit images with private security staff (Radio New Zealand 2020), or, more seriously, espousing unprofessional and potentially threatening views to detainees (Block 2021). The former resulted in the individual being removed and provided with "corrective training." The latter led to the MBIE undertaking a review and referring the individual to their commanding officer to investigate. Overall, however, despite these instances, the public view of the NZDF's role in the pandemic response has been overwhelmingly positive.

4.3   Public Image of the Military

Neither the media nor the public expressed any major concerns about the government's decision to increase NZDF involvement in the pandemic response beyond showing some trepidation about the potential diminishment of other military skills. Indeed, given its anxiety about the lack of capacity and lack of professionalism among private security operators, the public was very positive overall about the NZDF stepping in to play a significant role in the pandemic response. The lack of consternation about NZDF's involvement in COVID-19 management is also likely due to the strictly constrained nature of their engagement.

With regards to relationships with civilian agencies, as noted above, NZDF personnel were subordinated operationally to the lead agencies and yet were given key staff and leadership appointments within the organization, indicating high levels of trust and respect. Some individuals in several government agencies have worked together in previous emergency responses or have been employed alongside each other in other institutional roles. Ex-military personnel regularly attain positions within other government departments, while police typically make up almost 20% of NZDF reservists, and the Ministry of Health has engaged in NZDF exercises with its deployable health capability. This means that there are pockets of close pre-existing working relationships that suggest that an "NZInc" approach does exist to some degree.

In the case of the overall COVID response, relationships between political decision-makers, civilian bureaucrats, and military personnel appear to have been well managed. A report on the workings of MIQ in 2021 noted.

> In most instances, the inter-agency arrangements are working well and are evidenced by the speed with which MIQF facilities and processes were able to be established. The embedding of NZDF leadership and resources through the MIQ structure results in a very close operational working relationship. (Jack et al. 2021, 16)

Indeed, rather than the NZDF being seen as the cause of any coordination issues, this report suggested that the relationship between MIQ and the Ministry of Health was the weakest link in the system (Jack et al. 2021, 16). There have been no obvious examples of conflict between the NZDF and civilian organizations. What *is* evident is that the three services had different levels of experience and commitment, and the interactions between ministries and the large numbers of seconded NZDF officers with other elements is a topic for future study.

5 Lessons Learnt

COVID-19 presented both challenges and opportunities for the NZDF. The NZDF provided, in a very tangible way, a response to a national crisis and supported the New Zealand population at great sacrifice in a time of need. Soldiers were deployed for more than 300 days in Operation PROTECT over the two years when the pandemic was at its most intense (Knight 2022). Many of the lessons from this deployment are yet to be analyzed, but three organizational themes emerge from the NZDF's engagement in Op PROTECT.

1. The NZDF may have to reconsider its operational depth. To be able to respond to any other future sustained domestic crisis while still maintaining the capacity for international responses may require change. This specific issue had not been considered before this deployment and should be discussed in future force design and generation. Should the government not regard the NZDF's sustained growth to be acceptable, then it may have to consider where it accepts risk concerning the future (in) ability of the NZDF to respond to multiple international, regional, and domestic demands.

2. The NZDF will need to determine whether the command and control model is fit for purpose for "long task" domestic operations. The NZDF is usually is employed for a short time for specific tasks and capabilities. During COVID-19 it was operational domestically for almost two years. This strained the command and control model and the other operational and force responsibilities it had. The NZDF might need to review the management structure that was established during Op PROTECT and confirm or change it, thereby proposing structures that are not ad hoc and that allow for an all-of-government response. This could enable the NZDF to build a dedicated response to any future pandemic, or demand more resources should the government decide that such a pandemic constitutes a security risk that requires routine NZDF planning and engagement.
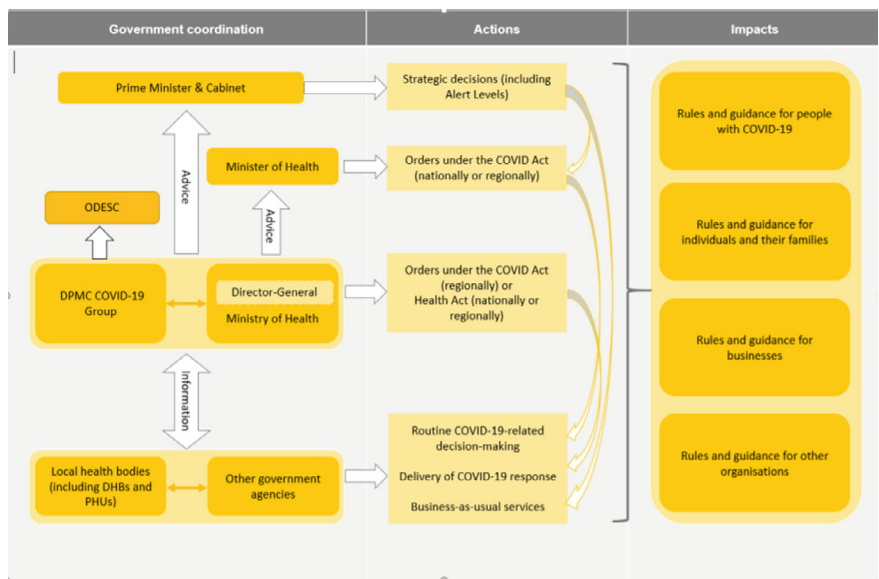
Fig. 1 COVID-19 Decision-making process. Department of Prime Minister and Cabinet (DPMC) 2020 *Source* (, 10)

3. The pandemic will continue to provide context to national decisions and there are indications that the New Zealand government believes that in a world that is already transitioning into a phase of great power competition where the pandemic adds additional strain in the form of issues such as competitive vaccine diplomacy, supply chain concerns, and mistrust around information sharing. The Ministry of Defence stated that:

> The COVID-19 pandemic is intensifying pre-existing trends and security challenges but is only one—albeit particularly significant– in a series of infectious disease events. The pandemic has challenged the abilities of multilateral institutions to respond to complex global challenges where effective responses require agreement between states in competition. COVID-19 has become both a context for and a contributor to strategic competition. (Ministry of Defence (MoD) 2021)

> This theme relates to the first and second points: in a world that seems to be becoming more unpredictable and complex, and with increasing competition between great powers in the Pacific, what is the NZDF primarily used for and how should it be protected as the "nation's reserve" to respond to unforeseen challenges?

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Larger Established NATO Countries

France

Saïd Haddad

Abstract Like many governments around the world in 2020, the French government mobilized the country's armed forces to help fight the COVID-19 global pandemic. The pandemic hit the country on January 24, 2020, when the first official COVID-19 case was identified and confirmed in the south of France. On March 16 the French president held a televised speech during which he announced a nationwide lockdown for at least 15 days starting the next day. During the same address, he called on the armed forces (the three branches of the military) to support the civil authorities. 4000 military personnel (active and reserve) were mobilized. Operation Resilience was launched on March 25, 2020. This deployment took place within the legal framework for domestic operation in France and is also part of a series of domestic deployments. These domestic deployments, including Operation Resilience, has become part of the military's culture and explain the positive opinion in which the military is viewed among the French public. The military response to the global pandemic encompassed three level of intervention: logistics, protection and health care. The aim of this chapter is to examine the role of the French armed forces in domestic operations, especially during the COVID-19 crisis and to question their role in health crisis. In the light of the global pandemic, the aim of the chapter is also to look at their readiness and effectiveness and at civil-military relations in this country.

1 Introduction

Like many governments around the world in 2020, the French government mobilized the country's armed forces to help fight the COVID-19 global pandemic. The pandemic hit the country on January 24, 2020, when the first official COVID-19 case was identified and confirmed in the south of France. On March 16 the French president held a televised speech during which he announced a nationwide lockdown for at least 15 days starting the next day, on March 17 (Presidency of French

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Republic 2020). During the same address, he called on the armed forces to deploy a field hospital staffed by the MHS, or Military Health Service (*Service de Santé des Armées*—SSA) to help transport the sick from the most affected areas and to intervene to help prevent hospital congestion in some territories. He also ordered stringent restrictions on people's movements. The morning after, at the request of Florence Parly, the minister for the armed forces, the aeromedical evacuation system (the *Dispositif d'évacuation médicale aéroportée Morphée,* or the long-distance air support system for patients in respiratory distress) was put on alert. At the same time, the minister announced that with the support of the army medical regiment, a military resuscitation group (*Elément militaire de Réanimation*—EMR) would be deployed near the Mulhouse Hospital in northeastern France. When Operation Resilience was launched one week later, on March 25, the armed forces were already mobilized.

Operation Resilience mobilized the three branches of the military to support the civil authorities. Some 3100 military personnel and 900 army reserve members were mobilized for the operation (Commission des Affaires étrangères, de la Défence nationale et des Forces armées 2020a, 2020b, 2020c). This represents 4000 personnel out of a total of 269,055 military and civilian personnel. The 205,782 military personnel was composed of 114,667 from the army (55.7% of all the military personnel), 34,676 from the navy (16.8%), and 40,456 from the air and space force (19.7%). The 7594 men and women who serve in the SSA/MHS represent 3.7% of the whole military personnel (Ministry of the Armed Forces 2020). Besides these, there are 2599 personnel from the National Gendarmerie *(Gendarmerie nationale)* who are employed by the armed forces ministry (1.3% of the military personnel) (Ministère des Armées 2021). This deployment took place within the legal framework for domestic operations in the country.

2   Domestic Operations

According to the French Constitution of October 4, 1958 (Constitution du 4 octobre 1958), "the president of the republic shall be commander-in-chief of the armed forces. He shall preside over the higher national defence councils and committees" (art. 15) while "the prime minister shall direct the actions of the government. He shall be responsible for national defence" (art. 21). Further, the "government shall inform Parliament of its decision to have the armed forces intervene abroad, no later than three days after the beginning of the said intervention. Where the said intervention shall exceed four months, the government shall submit [a request for] the extension to Parliament for authorization. It may ask the National Assembly to make the final decision" about whether or not to continue the deployment in question (art. 35).

2.1   Constitutional and Legislative Framework

The mission of France's Ministry of Armed Forces is to protect the national territory, the population, and French interests all over the world. The French national territory encompasses both mainland France (or Metropolitan France) and overseas territories. The ministry is involved in public service missions. Its human and materiel resources are deployed daily to support or supplement the activities of other ministries both nationally and—in emergencies—internationally. Any military intervention on national territory is regulated by law. According to the French Defence Code, which is a compilation of all the legislative and regulatory mechanisms related to national defence since 2005, "no armed force can act on the territory of the republic for defence and civil defence needs without a legal requisition."[1]

The principle of separating those authorizing the use of the forces from those commanding them shapes the requisition of armed forces and dates back to the French Revolution (Boz-Acquin 2020). The interministerial instruction (IM) n°10,100/SGDN/PSE/PSN/NP of November 14, 2017, reaffirms the principle that the armed forces are to be requisitioned by a civil authority (SGDSN 2017a). According to article 18 of this IM, "the civil authority can resort to using the armed forces when the means otherwise at their disposal are deemed to be unavailable (*indisponible*), unsuitable (*inadapté*), non-existent *(inexistant)* or insufficient (*insuffisant*)." These specific conditions (the "4i rule") describe a state of necessity arising from an exceptional situation that allows the civil authorities to call upon the armed forces.[2]

The 2008 White Paper on Defence and National Security (WPDNS 2008) redefined the French strategy "in that it spells out a strategy not only for defence but also for national security," "the traditional distinction between internal and external security [being] no longer relevant" (WPDNS 2008). Among a hierarchy of risks and threats (terrorism, missile threats, cyberattacks, espionage and strategies of influence, and serious criminal trafficking), "natural risks and health risks have become factors of massive destabilization for the population and government" (WPDNS 2008). Facing all these threats and risks, the armed forces should protect the national territory as set out in WPDNS (2008) and WPDNS (2013). This "operational contract of protection" (*contrat opérationnel de protection du territoire national*) applies to the armed forces on national territory. Concerning health risks, the 2013 white paper stresses the risk "of a new highly pathogenic and lethal pandemic caused, for instance, by the emergence of a new virus that crosses the species barrier, or by the escape of a virus from a biocontainment laboratory." The white paper noted that pandemics and health risks serve as "fertile ground" to exacerbate the challenges Europe and France

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[1] Article L. 1321–1 of the Defence Code. Requisition of the armed forces can also happen in case of a state of emergency (*état d'urgence*), to counter an imminent peril or a natural disaster (1955 April 3 Act).

[2] This is to be distinguished from the state of siege (*état de siège*) as mentioned in both the French Constitution (article 36) and the Defence Code (article L2121-I to article L2121-8) which is declared in the event of imminent peril resulting from foreign war or armed insurrection during which exceptional police powers are granted to the military authorities.

were facing (WPDNS 2013). Thus, the 2017 Defence and National Strategic Review reiterated the concerns about the rise of new diseases and the spread of viruses being the cause of several epidemics (SGDSN 2017b) and underlined the risk of biological attacks. The 2021 Strategic Update (*Actualisation stratégique*), as well as the 2022 National Strategic Review (SGDSN 2022), stress the weaknesses of Western states, which were highlighted by the COVID-19 global pandemic and which could be exploited by hostile forces in the future.

This obligation to protect the national territory aims more broadly to improve the resilience of the French nation (Charlier 2009), which the 2008 white paper defined as the "capability of public authorities and the French society to respond to a major crisis and rapidly restore normal functioning" (WPDNS 2008). Resilience here contributes to France's strategic autonomy and goes along with national cohesion, the two constituting the "indispensable basis for [our] freedom of action" (SGDSN 2017b). In 2021, the Strategic Update (i.e., the Strategic Review Update) emphasized the need to pursue the nation's resilience and to strengthen the armed forces' capabilities to "deal with large-scale crises in mainland France or the French overseas territories" (Ministry of the Armed Forces 2021).

2.2   *Deployment in Domestic Roles*

To fulfill their permanent missions and their operational commitments while contributing to Operation Resilience, France's armed forces mobilized all its branches, directorates, and services, which encompass the army, the air and space force, the navy, the national guard, and the *Gendarmerie nationale*, but also the directorate of general armament, the SSA/MHS or the military fuel service (*Service de l'énergie opérationnelle*), for instance.

More than 30,000 military personnel are deployed in operations on the national territory and abroad. The national territory encompasses mainland France and France's overseas territories. For overseas operations (i.e., foreign operations in a war-like setting), 5100 personnel were deployed up until June 2021 in Operation Barkhane in the African Sahel region at which time the French president announced the end of the operation in Mali. The complete withdrawal of the French troops from Mali took place in August 2022, though France still has 2500 soldiers engaged in the region. Six hundred troops are also engaged in Operation Chammal, the multinational joint operation in Syria and Iraq, and a further 720 in UN operations (700 of them in Lebanon). In mainland France and France's territories overseas, 13,000 personnel were deployed. Among them, 10,000 are dedicated to Operation Sentinel (*Opération Sentinelle*) launched in the aftermath of the Paris attacks in January 2015 to protect the population. There are two layers to Operation Sentinel. The first is composed of 7000 personnel who are permanently assigned to the operation, which has its main objective ensuring constant and ongoing security for France's most sensitive and vulnerable places (railways stations, airports, religious sites, concert and sports arenas, industrial facilities, etc.). The second layer is composed of 3000

strategic reserve personnel who can be deployed by the French president. Another 7150 military personnel are deployed in the sovereignty forces abroad (in the French West Indies, French Guiana, Mayotte and Reunion, New Caledonia, and French Polynesia) and 3750 are part of the Presence forces. These personnel help France meet its bilateral defence commitments and also work overseas. As part of bilateral defence agreements (military cooperation) French forces are stationed in Senegal, Ivory Coast, Gabon, Djibouti, and the United Arab Emirates.

The public authorities also call upon the armed forces to provide disaster relief and help in search and rescue operations. For instance, on a multi-year basis, the forces help fight forest fires (Under the banner of Operation Hephaestus since 1984) and assist people affected by natural disasters such as Storm Xynthia in 2010 and Tropical Storm Irma in 2017 (Opillard et al. 2020). Operation Harpie in French Guiana is at the crossroads of the fight against illegal trafficking of gold and environmental issues; since 2008 it has led the fight against illegal gold panning. Alongside the gendarmerie, 350 personnel have worked to dismantle illegal gold production sites and capture gold smugglers, thus helping to preserve the domestic ecosystem.

Heavily deployed at home, French military forces have developed and strengthened their domestic "savoir-faire" and skills by protecting the country through their support of the internal security forces. This commitment to act appropriately and professionally when deployed domestically has become part of the military's culture and explains the positive opinion in which the military is viewed among the French public (see below). Having said that, Operation Sentinel is nonetheless a sensitive topic among military personnel. According to internal reports, this operation is seen as unattractive to many in the forces because of its repetitive tasks; its impact on operational training and on the private lives of those who serve harms; and the morale of those who serve in this operation (Army Inspector quoted in Cour des Comptes i.e. French Court of Auditions or Accounts 2022).

3   Military Deployment During COVID-19

As mentioned above, 4000 military personnel were mobilized for Operation Resilience: 1500 personnel were reassigned from Operation Sentinel to Operation Resilience and 1700 other personnel came from the three branches of the armed forces (Commission des Affaires étrangères, de la Défense nationale et des Forces armées 2020a). Some 900 army reserve members were also mobilized (Commission des affaires étrangères, de la Défense nationale et des forces armées 2020c).

3.1   *Coordination of the COVID-19 Response*

At the national level, the Ministry of Health through the health crisis center (*Centre de crise sanitaire*—CCS) piloted the COVID-19 response during the first weeks of

the pandemic. By March 17, leadership of the response moved to the interministerial crisis cell *(Cellule interministérielle de Crise*—CIC). Activated by the prime minister, this unit is often under the authority of the Ministry of the Interior. At the end of May 2020, to overcome the difficulties created by the health crisis having a dual lead (CCS and CIC), the government created a new unit: *le Centre interministériel de Crise* (interministerial crisis center) to ensure that there was deeper integration between the ministry of health and the ministry of the interior. Many pandemic response decisions were also taken under the authority of the Public Health Defence Council, a body formed by the Defence and National Security Council that is responsible for crisis public management.

This body coordinates national crisis policy and includes the President of the Republic, the Prime Minister, the Minister for Solidarity and Health, the Minister for the Armed Forces, the Minister of the Interior, the Minister of the Economy, Finance, and Recovery, and the Minister of Labour, Employment, and Economic Inclusion; the Council may also be joined by members of major public health institutions. Participants are required to maintain confidentiality.

Operation Resilience took place in the context of the inter-ministerial response to the pandemic. The Defence Department's contribution occurred under the peculiar conditions of the so-called "4i rule." As mentioned earlier, the "4i rule" describes a state of necessity that allows civil authorities to call up the armed forces to respond to exceptional situations. When the military is called upon this way, it contributes to the government response under the direction of prefects who work alongside hospital staff, civil administrators, and other operators. This "4i rule" is subject to a civilian-military dialogue at the central, zonal, and departmental levels (Interministerial instruction (IM) n°10,100/SGDN/PSE/PSN/NP of November 14, 2017). The Joint Territorial Defence Organization (*organisation territoriale interarmées de défence,* or OTIAD) with its specific chain of command was established in 2000 for domestic security, defence security, and public service missions.

OTIAD is divided into seven defence and security zones in metropolitan France and five in overseas territories. Its specific chain of command consists of three levels, which correspond to the three decision-making levels in the government and prefecture (i.e., the prime minister, the defence zone prefect, and the department prefect). The first level is under the authority of the chief of staff of the armed forces who has at his disposal the planning and operations centre of the Ministry of Armed Forces (CPCO) to conduct operations. The second level is under the authority of the general officer who commands the defence and security zone and who is the military advisor of the defence zone prefect. At the third level, the representative of this chain of command is the county military representative (*délégué militaire départemental*) who is also the military adviser of the departmental prefect (Assemblée nationale 2016).

3.2 Roles of the Military

The military response to the COVID-19 global pandemic encompassed three levels of intervention or "domains": logistics, protection, and health care. The CPCO conducts and coordinates each of these domains.

In the logistics domain, the armed forces supported the public authorities in their fight against COVID by supplying transportation via air, land, or sea, by putting military locations at civilian disposal, and by assigning logistics experts to work under the direction of civil and health authorities. Two of the French navy's amphibious helicopter carriers were deployed to deliver protective masks and sensitive sanitary equipment to both metropolitan and overseas territories where sovereign forces were also mobilized to assist the population and the authorities. To help them, they turned to the adapted military service (*service militaire adapté*), which aims to train young people living there and thereby help them enter the workforce. At the branch level, the army deployed health support units to reinforce civilian hospitals and support their general functioning. These units were used to transport patients, for handling, for organizational tasks, and for securing and protecting the sites where they were located (Military Staff Media Relations Office 2020).

The military personnel engaged in Operation Resilience protected sensitive military and civilian sites, provided surveillance, were a deterrence force for the police, and provided security for the medical train (TGV) transferring patients. They were asked to protect, not to enforce the lockdown measures (the police were assigned that task), and were distinct from Operation Sentinel (Military Staff Media Relations Office 2020). Finally, CBRN (chemical, biological, radiological, and nuclear) teams were deployed to provide deep disinfection of all the items used to transfer patients while maintaining other military activities (Military Staff Media Relations Office 2020). Between March 2020 and July 2021, 500 personnel from the Second Armoured Regiment (*2ème Régiment de Dragons*) were involved in 1500 decontamination operations (Chapleau 2021). At the same time, air firemen from the intervention section of NRBC of Air Force Base 120 were working on disinfection of the armed forces's equipment (centers, equipment, planes etc.) (Military Staff Media Relations Office 2020).

During Operation Resilience, the SSA/MHS was mainly focused on deploying a military resuscitation unit (EMR) in the eastern town of Mulhouse. SSA is a joint forces service that falls under the command of the chief of staff. It accompanies the military units engaged in operations around the world and secures a medical chain from the battlefield to military hospitals in France. The MHS mission is bilateral and is outlined in the operational contract (Service de Santé des Armées 2024). It provides health care for armed forces personnel and contributes to national public health (Service de Santé des Armées 2024). The first part of its mission committed the MHS to ensure the good health of personnel by providing emergency and routine health care to wounded and ill soldiers during operations and by "checking up and following up on the state of health of the soldiers for the rest of their lives" after they return to France (Ministère des Armées n.d.). The MHS was involved in the "implementation

of government risk management plans, designed to deal with nuclear, radiological, biological and chemical risks, whether accidental or provoked." The MHS was also involved in post-disaster emergency relief and medical support to those affected by conflicts.

As part of its second mission, the MHS contributes to "the design of government risk-management plans intended to deal with health crises and terrorist threats (Pasquier et al. 2020). During the COVID pandemic, a total of 7594 military personnel were on duty in the SSA/MHS plus 3325 from the armed forces' operational reserve and approximately 4000 civilian personnel. The MHS encompasses 8 military training hospitals (*Hopital d'instruction des armées)*, 17 medical centers, 4 joint medical centers, 3 training schools, a research center, 3 medical logistics centers, one blood transfusion center, a center for epidemiology and public health, and a radiological protection center (Sénat 2020a). In other words, the MHS consists of five functional components: Unit medical support, military hospitals, research, education, and medical logistics. In 2018 and 2019, 1667 and 1966 MHS personnel were deployed abroad. In 2020, 1831 personnel were deployed (SSA 2021). The MSH represents 1%, more or less, of all health care offered in France (Sénat 2020a; Assemblée nationale 2020a).

Among the MHS's eight military training hospitals, one was mobilized during the first lockdown as a "first-line" establishment that was authorized to receive patients with COVID-19 while a second line (4 hospitals) was "fully mobilized to increase the capacities of first-line establishments and receive COVID-19 patients." Once the epidemic had spread, a third-line (3 hospitals) was mobilized and welcomed general medicine COVID-19 medicine patients (Military Staff Media Relations Office 2020). Spread across France, the 8 military training hospitals worked closely and in coordination with civilian hospitals. The director of each military training hospital is the representative of the MHS on the regional health agencies, which are the administrative public bodies of the French state responsible for implementing health policy in each region. For instance, they delivered 20 mechanical ventilators from the French medical supply chain unit to the Eastern France Regional Health Agency (Pasquier et al. 2020).

The MHS was also committed to setting up a 30-bed military intensive care field hospital. Called a military resuscitation unit (*Elément Militaire de Rénanimation—*EMR), the modular medical structure or field intensive care unit was built in 8 days with the support of 121 personnel from the SSA and the Army Medical Regiment (RMED created in 2011) whose missions are to provide front line medical support, to assist the population in metropolitan and overseas France, and to provide medical evacuations.

The military also had the task of transferring patients for which it used its air and sea resources. Patients were transferred from the areas (*départements*) hardest hit by the pandemic to areas where there were fewer cases—and to neighbouring countries (Germany, Switzerland, and Austria). For the first time within its national territory, France used a collective aeromedical evacuation system: A military A330 Airbus, equipped with a resuscitation module for high elevation evacuation (MoRPHEE, or *Module de Réanimation pour Patient à Haute Elongation d'Évacuation*), a system

first used in Kosovo and Afghanistan, that transformed the plane into an intensive care unit (ICU) for a long-distance aero-MEDEVAC (aeromedical evacuation) of critically ill patients (Military Staff Media Relations Office 2020; Pasquier et al. 2020). The French navy evacuated some patients by the amphibious assault ship *Tonnerre* from Corsica to continental France or by tactical helicopter NH90 (army aviation) for evacuation within France or to Germany.

In France, the COVID-19 vaccination campaign started on December 27, 2020. On March 22, 2021, to accelerate the campaign, the French president called upon the armed forces and its MHS to set up vaccination centres around the country (Ministère des Solidarités et de la Santé 2022). Eleven vaccination centres were then opened, eight in the military training hospitals and training schools and three in the military vaccination centres (*Pôles militaires de vaccination*). In these civilian-military centres, the military personnel organized and managed the program while public health caregivers (all civilians) vaccinated patients (DiCOD 2021). The military's participation in the vaccination campaign is regulated by law as described earlier, but is also part of a military tradition; military medicine has been "a laboratory in the fight against epidemics since the nineteenth century" (Vagneron 2021). The armed forces are also the number one consumer of vaccines in France with some 400,000 doses administered every year (Mura et al. 2021), especially for the personnel serving in overseas operations: "theatres of operation where the forces are deployed are geographic areas with multiple risks of infection, and these risks are increased by compromised hygiene conditions during operations" (Mura et al. 2021). Since May 2021, the COVID-19 vaccine is mandatory for the personnel deployed in overseas operations.

Several National Assembly and Senate reports about the pandemic underlined the military's strong commitment to helping in the fight against COVID-19 and deplored the idea of budget cuts and cuts to Military Health Service staff (Assemblée Nationale 2020b). They called for the funding for this service to be increased (Assemblée Nationale 2020a; Sénat 2020a), but the SSA's current situation is the consequence of the reforms imposed on the armed forces (the so-called "modernization plan") that has seen drastic reductions in financial support and staffing, as well as reductions in military infrastructure throughout the French territory mainly between 2007 and 2017 (Opillard et al. 2020; Jakubowski 2013).

3.3 Readiness and Effectiveness

According to the then-chief of staff, General Lecointre, the military readiness to respond to the COVID-19 pandemic can be attributed to the decentralized and vertical functioning (i.e., hierarchical) of the armed forces, which explains Operation Resilience's success. The decentralized aspect of the armed forces helped the military to be closely connected to the local territories and to respond to their needs. The centralized dimension enabled the military to mobilize quickly when called upon to evacuate patients from the areas with the highest concentration of infections to

the areas with the least concentration, for instance. The military's involvement in the COVID-19 response did not affect overseas deployments and no deployments were canceled, probably because the number of personnel deployed for Operation Resilience was small. The military's main priority remained its overseas operations.

Nonetheless, the COVID-19 pandemic did have an impact on military readiness and effectiveness in some ways. First, the recruitment process was affected during the first lockdown (March 17–May 11, 2020), when recruitment centres were closed, which caused a delay in securing 2000 recruits for the army (the aim is to recruit 16,000 men and women each year for the army and 26,000 for the whole armed forces) (Chapleau 2020). By the end of 2020, the army was short by more than 2000 men and women, according to the high evaluation committee of the military condition (Haut Comité d'évaluation de la condition militaire 2021). To counterbalance this impact, the French president signed an order on February 3, 2021, allowing those serving in the military who had reached the age by which they must retire from the services to extend their service for one more year at the most, and for personnel who had been retired for less than three years to continue their service until the retirement age limit. This ordinance was made under the law of November 14, 2020, authorizing the extension of the state of health emergency *(Loi du 14 novembre 2020 autorisant la prorogation de l'état d'urgence sanitaire et portant diverses mesures de gestion de la crise sanitaire).*

On April 7, 2020, the Ministry of the Armed Forces was informed of a COVID-19 outbreak within the French aircraft carrier battle group (*Groupe Aéronaval*—GAN), which had then been on operational deployment since January 21. The battle group consisted of an air-defence frigate, an antisubmarine frigate, a replenishment tanker, a nuclear-powered submarine, and the aircraft carrier Charles de Gaulle (Porte-avions nucléaire/PAN CDG). The outbreak mainly affected the PAN CDG and led to more than 1000 confirmed cases (Guibert 2020). The mission, which had been scheduled to end on April 23, was shortened, and the whole GAN returned to its home ports of Toulon harbour and Brest harbour. At the request of the Ministry of the Armed Forces and the chief of staff, several investigations were ordered to understand what happened on the aircraft carrier CDG: the armed forces inspectorate (*Inspection des Armées*), the navy inspectorate, the SSA, the armed forces' center for epidemiology and public health (*Centre d'épidémiologie et de santé publique des armées*—CESPA, affiliated with the SSA) conducted command and epidemiological investigations (Ministère des Armées 2020; Bauer 2020).

Unveiled by Florence Parly, the minister of the armed forces, before the National Assembly's Commission of National Defence and Armed Forces, the investigations concluded that there were some "errors" but no "faults." The investigations highlighted that the carrier's commander—and the whole health chain—overestimated the capacities of the CDG to manage the epidemic. The reports also underlined the dysfunction in the communication chains. The outbreak highlighted the fact that a health incident or crisis can have operational consequences. When the vessel underwent both a deep disinfection process after returning to Toulon, and renovations during the summer of 2020 to improve health security on board, the French armed

forces had no fallback option as this is the only aircraft carrier that plays a crucial role in France's nuclear deterrence.

Despite facing budget cuts and a reduction of manpower, and being thrust into a critical situation that could be considered grounds for breaking its operational contract (Haut Comité d'évaluation de la condition militaire 2019) the MSH helped in the fight against COVID-19 in metropolitan France and its overseas territories. According to the report conducted by the Commission of Foreign Affairs, Defence, and Armed Forces on the MHS during the pandemic crisis (Sénat 2020a), the MHS "is out of breath."

4   Civil-Military Relations

4.1   *Securitization of the Pandemic*

During his television speech on March 16, 2020, the French president declared several times that "we are at war" and used military rhetoric to declare a "sanitary war" against an "invisible, elusive, and advancing" enemy. The state of health emergency was introduced by Law 2020–290 of March 23, 2020, and was extended until July 31, 2022. This state of health emergency is declared by a decree issued by the council of ministers on the report of the minister of health and it may only be extended beyond one month by law, after consulting the scientific committee (article L.3131–13). The state of health emergency "may be declared in all or part of mainland France and the territories of the local authorities governed by articles 73 and 74 of the Constitution and [the territory of] New Caledonia in the event of a health disaster which, by its nature and severity, endangers the health of the population" (Article L.3131–12). The prime minister may, by a regulatory decree issued on the report of the minister for health, for the sole purpose of safeguarding public health, take several measures (restriction of the freedom movement, lockdown, curfew, requisition goods, and services needed to put an end to the health crisis, introducing price control measures etc.). The use of exceptional measures, the frequency of defence council meetings, the sidelining of Parliament, and the bypassing of the Council of Ministers, criticized by opposition parties and constitutional experts (Faye and Lemarié 2020) are part of the health securitization process. The health and pandemic threat is considered consequently as a security issue, which means that an "issue is presented as an existential threat, requiring emergency measures and justifying actions outside the normal bound of political procedure" (Buzan et al. 1998).

4.2   Civilian Oversight and Accountability

As mentioned previously, civil authorities can call up the armed forces only in exceptional situations. Article 19 of the interministerial instruction (IM) n°10,100 outlines the requisition principle and the role of the French president who, under the auspices of the National Security and Defence Council, decides whether or not the military will be deployed. Once this has been done, defence and security zone prefects can draft the requisitions. The French president's pre-eminent executive power means that the Parliament is only to be *informed* of the armed forces intervention; the Parliament has no *ex-ante* control and does not take a vote to authorize such deployment. Calling up the military is a *domaine reservé* of the president; the only control Parliament has is *ex-post* through debates (without a vote) or through inquiries or information reports conducted by French MPs via the Commission of Foreign Affairs, Defence, and Armed Forces, or, when Parliament is in session, via oral or written questions to the government. During a crisis, the distribution of the roles between the military and civilian stakeholders is governed, as mentioned, by the French Constitution and specified by IM 10,100. There's a civilian-military dialogue through the inter-ministerial crisis cell.

National police were dedicated to enforcing the lockdown and the level of social acceptability remained significantly high despite the opposition of a minority of the population who ostensibly remained outside this new health order, refusing to be confined or wear masks, or who personally took part in demonstrations to oppose the restrictions imposed (Muxel et al. 2022). The role of the police explains why only internal security forces have been challenged before the courts and why the relationship with the public has deteriorated (Conseil d'Etat 2021; Ministère de l'Intérieur et des Outre-Mer 2023). The specific role of the armed forces during this pandemic, and their strict subordination to the political authorities protected them from any action that might have led to protests from the population.

4.3   Public Image of the Military

Since conscription was suspended in 1996, the public has indicated that it respects and trusts the military. In France, the armed forces are the second most trusted institution (83%) behind only health and medical personnel; the armed forces are much more trusted than the police or local and regional authorities (European Commission 2021; ECODEF 2021). Broadly speaking, some surveys indicate that the French public has a high level of appreciation of sovereign functions (*fonctions régaliennes*) i.e., the services of the armed forces, gendarmerie, and police (BVA 2019). The visibility of the armed forces in the fight against terrorism (Operation Sentinel) since 2015 and its assistance to the general French population during natural disasters helps explain why opinion polls give the armed forces an 84% positive rating (DICoD

2018). Consequently, the French public generally supports the military's domestic and overseas operations.

Concerning the COVID-19 crisis and according to some polls (ELABE 2021), in 2021, 40% of the people interviewed wanted the military to be more involved in the fight against the pandemic and in the vaccination campaign while 52% wanted them to maintain their current level of commitment. The deployment of the military during the COVID-19 crisis confirmed the popularity of the armed forces (which doesn't mean that people know or understand what the armed forces do) and, after March 2020, also helped publicize the work of the MHS/SSA: some missions, such as the design of the EMR, were highly publicized, though only a minority of the population was aware of the medical contribution of the armed forces (Muxel et al. 2022). The domestic role of the military, especially Operation Resilience and Operation Sentinel, has had a significant and symbolic function in offering reassurance. There was an announcement in March 2020 that the armed forces would be mobilized to help reassure the majority of the population (Muxel et al. 2022). The military's involvement in managing the pandemic was positively perceived: 91% of those aware of Operation Resilience were in favour of this mobilization (Muxel et al. 2022). As a result, the population is in favour (by 84%) of maintaining the current allocation of the financial budget earmarked for the armed forces (Muxel et al. 2022).

5   Lessons Learnt

Domestic operations tend to have no end date, as can be seen with Operation Sentinel and Operation Harpie. Operation Sentinel was an opportunity to reverse the cuts to military manpower and to increase the budget of the armed forces. The year 2015 was considered to be one of renewal of domestic security stakes after the terrorist attacks carried out by Al Qaeda and the Islamic State in mainland France (Tenenbaum 2016). Given the high strategic uncertainty outlined in the 2021 Strategic Update and the lessons many parties learned from the COVID crisis, the armed forces "must have a versatile and adaptable military to strengthen the nation's resilience" (Ministry of the Armed Forces 2021).

The main limitations of the forces were highlighted as early as June 2020 (Commission des Affaires Étrangères, de la Défense nationale et des Forces armées 2020a): the need to strengthen the interministerial coordination (especially between the Ministry of Health and the Ministry of the Armed Forces), to reinforce the military culture and the knowledge of the military environment in civilian administrations, to increase their responsiveness, and to step up the planning and regular conduct of interministerial exercises to anticipate and manage crises at both national and defence and security zones levels.

On a technical level, the aim for the French armed forces is to reach a new balance between the armed forces' defence and security tasks and the army's ambition to "have a battle-hardened army, ready to face the toughest clashes, including a major confrontation" (Armée de Terre 2020). In other words, the armed forces "may not

be diverted from their original mission, which is defence, and their potential must be maintained" (Commission des Affaires Étrangères, de la Défense nationale et des Forces armées 2020b). This is especially the case for France and the European Union post-COVID as the geopolitical environment has become not just more unfriendly, but very risky following Russia's invasion of Ukraine. On the domestic political level, where society is divided, the aim is to clearly and strictly distinguish what is to come under political and civilian power on the one hand, and under the military institutions on the other.

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Germany

Sven Bernhard Gareis

Abstract The Bundeswehr (German federal armed forces) is the military arm of Germany's security and defence establishment. In Germany, however, the domestic deployment of the military is subject to very strict rules that exclude the Bundeswehr from talking over executive responsibilities except during national emergencies. Germany, its society, and the Bundeswehr have a long history of the armed forces participating in domestic assistance missions. During the COVID-19 crisis the Bundeswehr conducted its largest and longest mission of that kind. This had negative impact on its military readiness – that could no longer be accepted after Russia's full scale aggression against Ukraine and its threats to NATO countries. Against this backdrop, the Bundeswehr will continue to provide administrative assistance in emergencies but will now have to be more selective about where it will assist and for how long.

1 Introduction

The Bundeswehr (German federal armed forces) is the military arm of Germany's security and defence policy. According to the Federal Republic of Germany's Basic Law (BL; Basic Law 2022) the Bundeswehr is composed of the armed forces (Article 87a) and the civilian-led federal military administration (Article 87b). The latter is largely responsible for procurement, use of financial resources, and the legal and administrative oversight of the armed forces. Responsibility for the Bundeswehr lies with the Federal Ministry of Defence and the minister who is the commander-in-chief during peacetime. If the government needs to declare a "state of defence," command over the armed forces passes to the federal chancellor (BL Article 115b).

In its most recent White Paper (Germany 2016), the federal government outlined the Bundeswehr's mission as follows:

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The mission of the Bundeswehr, as part of the whole-of-government approach, is to

- Defend Germany's sovereignty and territorial integrity and to protect its citizens;
- Contribute to the resilience of the state and society against external threats;
- Support and ensure the ability of Germany to take action in matters of foreign and security policy;
- Contribute together with partners and allies to countering security threats to our open society and to our free and safe world trade and supply routes;
- Contribute to the defence of our allies and to the protection of their citizens;
- Promote security and stability in an international framework; and
- Strengthen European integration, the transatlantic partnership, and multinational cooperation (Germany 2016, 90)

The White Paper then specifies the tasks of the Bundeswehr, which include "homeland security, crisis management for German nationals abroad, and subsidiary support in Germany" (Germany 2016, 92). The present chapter takes a closer look at this set of tasks as described in the Bundeswehr Concept of 2018 (Bundesministerium der Verteidigung 2018, 26ff).

As of June of 2022 (Bundeswehr 2022a) the armed forces were composed of 182,058 soldiers, most of whom served in six branches (army, air force, navy, joint support service, joint medical service, cyber and information domain service). A small number of soldiers work in the Bundeswehr's civilian-led structures. Further, there is a pool of around one million volunteer reservists who can be activated. Many of the reservists are assigned to territorial defence units that often support the armed forces during domestic deployments such as disaster relief. Despite its frequent involvement in domestic disaster relief missions, the Bundeswehr does not maintain any specialized forces for those kinds of deployment. Domestic deployment has always been a task that is additional to the Bundeswehr's primary missions: defence and international crisis management. The legal basis for this structure lies in the Basic Law, which stipulates that "all federal and *land* [state] authorities shall render legal and administrative assistance to one another" (Article 35, 1).

During the Ebola crisis of 2014/15 the Bundeswehr supported the United Nations Mission for Ebola Emergency Response (UNMEER) in Liberia by providing logistical and medical expertise (Smiljanic 2014). The 2016 White Paper mentions epidemics and pandemics as challenges for German security policy but describes them primarily as phenomena in remote regions of the world with only an indirect impact on Germany, so it focuses on German efforts to support international bodies such as the World Health Organization (Germany 2016, 44ff). That all changed on January 27, 2020, when the Bavarian health authorities confirmed the first case of COVID-19 in Germany. After two weeks of small, single-digit increases in daily case numbers, by the end of February and into March infection rates began growing exponentially. On March 22, the federal government together with the prime ministers of the *länder* (federal states) imposed the first nationwide lockdown and imposed strict contact tracking and quarantine rules, the closure of businesses, and restrictions on the free movement of citizens.

By February 28, 2020, the Bundeswehr had received its first request for administrative assistance from the *Land* of Mecklenburg-Vorpommern asking for quarantine space (Bundeswehr 2020a), followed by a wave of requests from all 16 *länder*. By the end of March, the inspector general of the Bundeswehr had established a temporary structure for the management of this new crisis, the "Support Contingent Corona" mission (*Hilfeleistungskontingent Corona*), also called "Helping Hands" mission. It became the biggest and longest domestic mission in the Bundeswehr's history (Major et al. 2020, 2). It started with 15,000 soldiers, grew up to a temporary peak of 25,000 Bundeswehr personnel in February 2021, and completed its mission on March 31, 2022 (Bundeswehr-Journal 2022a). The soldiers of the joint medical service remained under the control of its leadership. The deployment of the military in domestic roles and during the COVID-19 pandemic is outlined below.

2 Domestic Operations

In Germany, the domestic deployment of the military is subject to very strict rules that, among other things, exclude the Bundeswehr from accepting executive responsibilities except during national emergencies. To date, all domestic missions of the Bundeswehr, including the Support Contingent Corona, followed the principle of subsidiary administrative assistance that is outlined in this section.

2.1 Constitutional and Legislative Framework

Due to Germany's historical experience with the abuse of centralized power in the so-called Third Reich, the 1949 Basic Law of the new Federal Republic of Germany enshrined a strict decentralized distribution of power under the structural principle of federalism based on three levels: the federation (*Bund*) with the federal government (*Bundesregierung*), Parliament (*Bundestag*), courts (*Bundesgerichte*), and its responsibilities for the national as a whole; the 16 *länder* (federal states) with its governments, parliaments, and judiciaries; and the communes (counties, cities, and municipalities). Consequently, the responsibility for internal security, i.e., the protection of citizens from crime, natural disasters, and other existential risks is with the *länder* (see BL Article 30). According to this system, law enforcement, police, justice, and further public security agencies (e.g., fire brigades) are provided by the *länder* and the communes. Compared to the comprehensive security tasks for which the *länder* are responsible, the federation only has a limited role in maintaining domestic security, a role that includes protecting borders, air space, harbours, railways, airports, and national institutions, or fighting against terrorism and international organized crime (see Möllers 2021).

The Bundeswehr has no role in maintaining internal security. Article 87a, paragraph 1 stipulates that "The Federation shall establish Armed Forces for purposes of

defence…" and continues in paragraph 2: "Apart from defence, the Armed Forces may be employed only to the extent expressly permitted by this Basic Law." The Constitution allows for two cases in which the Bundeswehr may be deployed domestically: states of emergency and administrative assistance (see Deutscher Bundestag 2017).

The Basic Law identifies three states of emergency in which the federal government—in close cooperation with the *länder* and their representation on the federal level, the *Bundesrat*—can confer executive duties to the military: in a state of defence or tension (Article 87a, 3; "external emergency"), "to avert an imminent danger to the existence of free democratic basic order of the Federation or of a *Land*" (Article 87a, 4; "internal emergency"), and if a "natural disaster or accident endangers the territory of more than one *Land*" (Article 35, 3, "catastrophic emergency"). In Germany's history, none of these states of emergency has ever been invoked.

The main constitutional basis for domestic military missions is Article 35, 2 of the Basic Law which says, "to respond to a grave accident or a natural disaster, a *land* may call for the assistance of… the Armed Forces…." In this framework, the Bundeswehr's support is strictly subsidiary, i.e., the capacities of the *Land* have to be exhausted before it can request military help as administrative assistance (*Amtshilfe*). The Bundeswehr can deny support should this effort endanger its primary tasks of defence and crisis management. If the Bundeswehr provides the requested support, any action the military takes is subject to the guidance of and supervision from the civilian authorities of the respective *Land*. Asking the Bundeswehr to take on a police-like function comparable to the role of the French military in that country's anti-terror mission "Vigipirate" is strictly prohibited.

However, in the aftermath of the terrorist attacks on the United States on September 11, 2001, a discussion started in Germany on whether the borders between internal and external security should be blurred—and the role of the Bundeswehr in this context. Terrorism or hybrid forms of warfare can shatter the stability of a country even if they do not meet the threshold of an armed attack; the latter would allow the country to deploy defensive measures based on Article 51 of the United Nations Charter. One important question Germany must ask is which capabilities the Bundeswehr should be allowed to apply in an internal scenario within the administrative assistance framework. When a young man steered a small aircraft through the airspace above Frankfurt without permission a year after the September 11 attacks in the US, the question arose as to what Germany could do in a scenario in which a hijacked airplane was approaching a city centre or a nuclear power plant. After a long discussion, the Bundestag (German Parliament) passed the Airspace Security Bill (Luftsicherheitsgesetz, LuftSiG) on January 11, 2005. In paragraph 14, 3 this law allowed the "immediate impact on an aircraft by force of arms if the circumstances foster the assumption that the aircraft is being used against the lives of human beings, and if this is the last resort against an imminent threat" (author's translation). In its 2006 ruling, however, the federal Constitutional Court fully rejected this definition (Bundesverfassungsgericht 2006, 86ff). It clarified that the killing of innocent people aboard an aircraft is not in compliance with human dignity, the cornerstone of the Basic Law (Article 1) and the right to live and personal integrity (Article 2, 2). The

court also emphasized that the Bundestag did not have the right to pass a law that allows the armed forces to be used beyond administrative assistance, a stipulation enshrined in Article 35, 2 and 3 (Bundesverfassungsgericht 2006 92ff). Furthermore, the court went on to declare that any use of specific military force was inadmissible in cases of natural or catastrophic disasters, thus considerably limiting the potential role of the Bundeswehr in domestic affairs (Bundesverfassungsgericht 2006 Nr. 102ff; see also Schenke 2006, 737; Palm 2007, 102ff).

However, in a plenary decision of its two senates that was issued in 2012, the Federal Constitutional Court concluded that it would not strictly exclude the use of administrative assistance by the military in situations of "catastrophic dimensions" that had already occurred or were imminent and in which the use of military force was the last resort (Bundesverfassungsgericht 2012, 43–48). However, even though more than 10 years have elapsed since this decision, the federal government has made no political effort to establish a legal and procedural framework for civil-military coordination in cases of imminent severe threats to national security that fell below the threshold of an armed attack by another state (see Gareis 2021, 180). In its March 20, 2013 decision, the Federal Constitutional Court confirmed its previous rulings that the decision to use military force in domestic contexts can only be taken by the federal government in consultation with other levels of government—even in cases of emergency (Bundesverfassungsgericht 2013, 49). The *Luftsicherheitsgesetz* had conferred this responsibility on the federal minister of defence alone.

The political and legal debate surrounding this decision illustrates the ambiguous positions that large parts of the German polity and society hold regarding the use of the Bundeswehr. International and domestic missions are both very appreciative of its unarmed assistance, but the use of force is viewed more sceptically (see Graf 2021, 24). To date, all of the Bundeswehr's domestic missions have been unarmed and strictly limited to assisting the civilian authorities.

The Bundeswehr's entire COVID-19 mission was also conducted within the legal and administrative framework outlined above. There was neither a central military command of the mission nor a transfer of executive responsibilities to the Bundeswehr, and the military did not attempt to attain either (see Sect. 3.2).

2.2 *Deployment in Domestic Roles*

Germany, its society, and the Bundeswehr have a long history of the armed forces participating in domestic assistance missions. That participation started in February 1962 when Hamburg and areas of Lower Saxony and Schleswig–Holstein were struck by a storm surge that took the lives of more than 300 people in Hamburg alone. The then home minister of Hamburg and later minister of defence and federal chancellor, Helmut Schmidt, took the initiative and put Bundeswehr units (primarily engineers, army aviation, and infantry) under his control to help address the situation and thus prevent more civilian casualties. This was the Bundeswehr's first major rescue mission, undertaken side by side with thousands of civilian helpers,

and became a historic event in Germany's civil-military relations—even though the proper constitutional and legal norms that would have sanctioned Schmidt's course of action were not in place. However, because it was executed successfully, Schmidt's practice of subordinating military assistance to civilian leadership in disaster management became the basis of the subsequent legislation enshrined in BL Article 35 and the blueprint for all the Bundeswehr's domestic assistance missions that followed.

The role of the Bundeswehr in providing administrative assistance in states of emergency was then enshrined in the Constitution in 1968 (see Norddeutscher Rundfunk 2022). In August of 1975, a major fire devastated more than 13,000 hectares of moors and woodland in the Lüneburger Heide in Lower Saxony. Due to the scale of the disaster, the communal authorities declared a state of emergency and requested support from the federation. More than 11,000 soldiers along with caterpillars, helicopters, and radio communications were sent to assist the 15,000 civilian firefighters. The soldiers coordinated the activities of the civilian fire teams (see Bormann 2022). In another natural disaster, in the winter of 1978–1979, the north of Germany experienced heavy snowfalls that cut off many villages and smaller communities from necessary supplies. Bundeswehr engineers cleared streets, signallers provided communication, and helicopters provided basic help to remote farms, villages, and islands.

During the flood in the Odra region of Brandenburg in the summer of 1997, an entire Bundeswehr division helped—together with army aviation and air force reconnaissance aircraft—to prevent dams from breaking and was credited with saving the region from a major disaster. The Odra mission boosted the popularity of the Bundeswehr across Germany and heightened the population's trust in the capability and readiness of the armed forces to protect German citizens in catastrophes.

In 2021 and parallel to the COVID-19 mission, the Bundeswehr was again called upon to assist with a major disaster in Rhineland-Palatia and North Rhine-Westphalia when a flood destroyed several villages and towns and killed nearly 200 people. About 2000 soldiers were sent to remove mud and rubble, evacuate people, and provide food and water to those cut off in villages (see Bundeswehr 2021a). Besides these major missions, the Bundeswehr regularly provides administrative assistance in smaller or local emergencies. All missions have in common that they are conducted in support of comprehensive civilian efforts to control the situation in question, and they operate under civilian guidance. Furthermore, Bundeswehr hospitals are open to civilian patients and contribute to the public health system, and military helicopters participate in public security services such as alpine or maritime search and rescue. In these areas, the Bundeswehr's "administrative assistance" coincides with the training needs of military personnel. Domestic missions operating under the banner of administrative assistance have always been an important element of the professional identity of the Bundeswehr—and have been a pillar of civil-military relations in Germany.

3   Military Deployment During COVID-19

Due to Germany's federalist structure, the management of the COVID-19 crisis required the close cooperation of the federal government and the *Länder* with their subsidiary communes. This principle of cooperation enabled decisions taken on the national level to be implemented flexibly, in a way that was suitable for regional or local needs—but it also created a patchwork of diverging regulations and policies across the country. When the Bundeswehr was deployed, its regionalized structure and well-established communication channels proved advantageous.

3.1   Coordination of the COVID-19 Response

At the national level, responsibility for the COVID-19 crisis management lay with the federal government and was led by the federal chancellor. The federal Ministry of Public Health was the main body collecting relevant data and research results, conveying information to the public, issuing policy recommendations, and initiating law procedures in the Bundestag in fields such as infection protection (*Impfschutzgesetz*) and vaccination policies (i.e., the prioritization of vulnerable groups when vaccines are in scarce supply). The ministry is supported by the Robert Koch Institut (RKI), the country's top biomedical research institution and one of the bodies most important in maintaining public health (see http://rki.de), operating through boards of experts in virology and epidemiology, and the permanent vaccination commission. The federal government established its interdisciplinary board of 20 independent advisors in December 2021 (see Bundesregierung 2022) to help the federal ministry make decisions, comment on measures taken, and give recommendations.

Apart from the health ministry, practically all federal ministries were involved in helping mitigate the consequences of the pandemic in areas such as immigration and border control policies, finance and public debt, subsidies for the economy, social welfare of employees in affected businesses, enforcement of laws and ordinances, international aid, or the organization of assistance by the armed forces. The Bundestag was responsible for adopting relevant laws based on the statement that Germany was facing "an epidemic situation of national importance." Its Infection Protection Bill was the core piece of a comprehensive legislation package that encompassed all of the above-mentioned areas (Crego and Kotanidis 2022, 12).

In a federalist state like Germany, the national government must cooperate closely with the *länder* (state) governments. The chancellor interacts with the 16 prime ministers and the federal ministers meet collegially with their counterparts in the *Länder* to help find a common consensus or compromise. The conferences of prime ministers and the national legislation mainly provide bases and frameworks for *Länder* policies and law-making. They give latitude for specific regulations that respond to regional or local peculiarities such as, in the case of the COVID pandemic, infection rates or degrees of hospitalization, especially in the critical area of intensive care.

This flexibility is advantageous because it avoids the disproportionate limitation of civil rights. However, different regulations around the wearing of (different types of) masks, closures of schools or businesses, travel restrictions, numbers of contact persons, etc., caused uncertainty and contributed to protests against governmental efforts to control the COVID-19 situation. Initiatives such as general compulsory vaccination or mandatory vaccination for certain professionals (e.g., nurses, doctors, and police officers) failed or happened belatedly. Overall, however, the advantages of Germany's federalist, decentralized system of crisis management prevailed: Certified testing capacities across the country coped more easily with hundreds of thousands of tests per day than centralized systems would have, and the acceptance of limitations tended to grow in correlation with the regional scale of infections.

3.2   Roles of the Military

During the COVID-19 mission, Bundeswehr soldiers and civilian staff had to execute many varied tasks. Especially at the beginning of the pandemic, the Bundeswehr provided logistical aid in distributing all kinds of necessary supplies. The Bundeswehr procurement agency together with the procurement agencies of other ministries assisted the Ministry of Public Health (*Bundesamt für Ausrüstung, Informationstechnik und Nutzung der Bundeswehr,* BAAINBw**)** by purchasing medical equipment, disinfectants, protective suits, masks, glasses, and gloves worth €344 million (Bundeswehr 2020b). Once rapid and PCR tests became available, soldiers helped in testing centres and Bundeswehr medical staff provided support to vaccination centres and set up four centres staffed with its personnel. The air force organized evacuation flights of German and EU citizens from China; it also evacuated dozens of patients from highly affected areas, such as Italy and Romania, for medical treatment in Germany. In addition, thousands of soldiers worked in the regional health centres tracking the contacts of infected persons to break the infection chains. In homes for the elderly soldiers supported existing staff by helping in the daily care of the patients by preparing and distributing meals and providing other services (Bundeswehr 2020c).

When it undertook the COVID-19 mission, the Bundeswehr was able to rely on an existing and well-established framework: The chief of the Bundeswehr's joint support service was—at that time—also the Bundeswehr's national territorial commander. This latter role is responsible for any action the Bundeswehr takes; that action is coordinated with all levels of Germany's civilian administrative authorities. The national-territorial commander could use the services of a territorial tasks command based in Berlin that oversees fifteen *land* commands. Under the *land* commands are administrative-level liaison offices in the districts and counties, most of whom are local reservists who have close relationships with the civilian authorities. Training exercises at the national, *länder,* and communal levels ensure that civil-military cooperation is being permanently reinforced. Because it can quickly provide large numbers of personnel, heavy machinery, and other specific equipment,

the Bundeswehr has been acknowledged as a partner of the *länder* and communes almost since it began.

Right from the start of the COVID-19 crisis, the mere expectation that there would be an increased number of requests for assistance led to the temporary establishment of the abovementioned Support Contingent Corona and a new temporary structure. The soldiers were taken out of their regular units and subordinated to the national territorial commander. Their deployment was then coordinated by four regional commands that were led by two army divisions, the air force, and the navy; the regional commands responded to requests from the civilian agencies. The soldiers served in uniform, but under the guidance of civilian superiors and in close cooperation with their civilian colleagues.

As the mission's informal name "Helping Hands" implies, the bulk of the assistance took the form of providing workers. The mission required neither the procurement of any specific military equipment or logistics nor for the military to take over any administrative responsibilities and functions from civilian authorities. At the beginning of the crisis, the joint medical service seconded a physician at the major general rank to the Ministry of Public Health to effectively coordinate the work of those involved in the management of the pandemic. The commander of the then-territorial tasks command, also a major general, temporarily served as the head of the coronavirus crisis team at the federal chancellery between December 2021 and May 2022 (Bayerischer Rundfunk 2022). Those administrative and advisory functions helped with decision-making in the joint conferences of the federal chancellor and the prime ministers of the *Länder*. When the Helping Hands mission ended, so too did those temporary structures and functions.

3.3   *Readiness and Effectiveness*

As described above, the Bundeswehr mission during the COVID-19 crisis was conducted in a tried and tested legal and administrative setting—and it was as ready to take over this task as it has been in the many cases of military support to civilian authorities it has provided in previous decades. The main difference from the Bundeswehr's previous domestic deployments was the size and the duration of the Support Contingent Corona mission: Over the two years of this deployment, the Bundeswehr received more than 10,000 requests for assistance from all 16 *Länder*. In 430 cases the applicants withdrew their requests and in 580 cases the Bundeswehr declined to provide support due to the mission readiness of its units in genuine military areas (see Bundeswehr-Journal 2022a). The Bundeswehr executed more than 9000 support activities involving 25,000 soldiers through to the end of the mission on March 31, 2022 (see Bundeswehr-Journal 2022b).

Due to its sheer size, however, the COVID-19 pandemic had a major impact on the Bundeswehr's military effectiveness in three major areas that mutually reinforced one another:

- First, some soldiers and civilian staff fell ill with COVID-19 or were in touch with infected persons, which resulted in weeks of quarantine for those individuals.
- Second, the daily routines of the armed forces were greatly affected by the COVID-19 protection and hygiene measures. Headquarters, units, schools, and training centres reduced the number of soldiers and civilian employees allowed to enter those facilities to maintain social distancing and reduce personal contact. Though online meetings, lectures, and presentations were quickly introduced, many practical activities in the vast area of military training could not be conducted virtually. Still, exercises were reduced, and activities were prioritized. To a lesser extent, COVID-19 also affected the missions in Afghanistan, Kosovo, the Mediterranean Sea, and Lithuania. Strict pre-deployment health check-ups and quarantine regimes significantly reduced this impact.
- Third, the sheer number of Bundeswehr personnel employed for the COVID-19 mission had a considerable influence on the soldiers' military readiness and core tasks that had to be fulfilled. For instance, soldiers who worked in testing centres could not go to the rifle range or do other training. Furthermore, apart from the soldiers already allocated to assist, there were ongoing calls to respond to new and sometimes unexpected requests.

In principle, the Bundeswehr's administrative assistance is designed for regional or local high-intensity emergencies that temporarily overwhelm the civilian authorities. The military is not a disaster relief agency that can permanently replace lacking civilian infrastructure (see Deutschlandfunk 2021). However, the COVID-19 crisis proved that the Bundeswehr and its personnel could respond very flexibly and ably in situations that bore no similarity to classical military contexts. The crisis also highlighted the tremendous shortfalls in civil protection at the federation, *Länder,* and commune levels, and was a reminder that Germany needs to invest more on the civilian side in that area (see Sect. 4).

When in August 2021 the Ahr region and other parts of Rhineland-Palatia and North Rhine Westphalia were struck by a catastrophic flood, it was again the Bundeswehr that provided temporary help. It is this kind of assistance that the Bundeswehr is ready and able to provide. A long-term mission such as the Support Contingent Corona cannot be executed without a severe impact on the Bundeswehr's military effectiveness. In his Order of the Day on March 1, 2022, just days after Russia began its second aggression against Ukraine, the Bundeswehr's inspector general stated: "We will therefore considerably reduce our Corona Support Contingent. We need these soldiers for the core mission of defending the country and the alliance. Training gaps that occurred during the pandemic are to be closed immediately" (Bundesministerium der Verteidigung 2022; author's translation).

4   Civil-Military Relations

As was already mentioned, assisting regional and local emergencies is part of the Bundeswehr's identity—and has always been recognized and appreciated by Germans despite their pacifist leanings and their scepticism about military approaches to problems.

4.1   Securitization of the Pandemic

Throughout the pandemic, the federal and the *Länder* governments jointly characterized COVID-19 as a severe if not existential threat to the nation's public health and hence responding to it justified unprecedented limitations of liberal and civil rights and other impacts on the conduct of life for millions of German citizens. The political decision-making procedures and their implementation processes were accompanied by lively and controversial discourses in political, social, economic, cultural, medical and—not least—legal areas at practically all levels of state and society. The deployment of the Bundeswehr in the "Helping Hands" mission, however, was never linked to a securitization approach aiming at transferring larger responsibilities or powers to the armed forces. There was no framing of the fight against the pandemic as a kind of "warfare against an overwhelming enemy" nor any call for the military to take on new roles in such a context. Labelling challenges in terms of military threats is not accepted as a style of political communication in Germany—and has not been throughout the country's history following its restart in 1949. In sum, the COVID-19 deployment of the Bundeswehr was an administrative assistance mission according to Article 35, 2 of the Basic Law.

4.2   Civilian Oversight and Accountability

As explained in detail in earlier sections, domestic deployments of the Bundeswehr are subject to a very strict set of constitutional and legal provisions. Administrative assistance from the armed forces is always delivered under civil oversight and accountability. During the pandemic, the Bundeswehr established new temporary structures of its own to organize this assistance, but these were purely internal and had no authoritative impact on the prevailing civilian structures and procedures that were administered mostly by governmental bodies of the federation and the *Länder*. The only exception was the right of the Bundeswehr authorities to decline a request for support in cases when its capacities were exceeded. Even the above-mentioned secondments of two general officers to the federal chancellery and the federal Ministry of Public Health as senior management advisors and coordinators of high-level teams did not make any exemption to the supremacy of civil oversight

and accountability. Their positions and tasks were fully embedded in the political framework and the civilian-led hierarchies of the governmental bodies they worked for.

4.3 Public Image of the Military

The high esteem in which German citizens hold the Bundeswehr for its domestic assistance in times of crisis corresponds with their preferences for international missions, too. In a national poll taken in 2020, 86% of respondents agreed that assistance to victims of natural disasters and the delivery of medical aid was more important than the traditionally first-ranked task of defending the country against an armed attack (85%). A 47% minority wants the Bundeswehr to only fight adversaries in missions abroad (Graf 2021, 24). Graf et al. (2022, 33) also show that Germans tend to place a higher value on the importance of the Bundeswehr responding to security threats that directly affect the domestic realm—such as the COVID-19 pandemic.

The Bundeswehr's role in the fight against the coronavirus boosted the population's institutional trust in the organization; in 2020, the country's level of trust in the Bundeswehr rose by five percentage points to 85% compared to 2019 (Graf 2021, 17). Amongst 16 public institutions that Germans rated for their trustworthiness, the Bundeswehr has ranked second behind the police for more than a decade (Graf 2021, 17). This high level of trust also explains the German population's high acceptance of the Bundeswehr's domestic missions for which it can offer a wide range of potential services from disaster relief to the fight against the pandemic, to protection against terrorist and cyber-attacks, to assistance and support of refugees (see Graf et al. 2022, 244).

Despite the overall recognition that the Bundeswehr received for its work in its COVID-19 mission, the military police (*feldjäger*) registered an increasing number of incidents directed at the Bundeswehr and its members, including damaged cars, hate speech on social media, and physical attacks on soldiers (Bundeswehr 2021b). This reflects German society's somewhat polarized response to the pandemic and the methods the government employed to cope with it. Amongst those who denied that the pandemic even existed and rejected the measures taken by the government and subsidiary agencies, a (small) number resorted to violence, often because they believe in conspiracy theories (e.g., on vaccination). Attacks were not specifically directed against soldiers but against representatives of the "political system" with which those people disagreed.

In sum, civil-military relations in Germany proved to be stable and mutually trusting during the pandemic. However, it also became clear that the military is not a panacea for the country's deficits and shortcomings in civil protection.

5 Lessons Learnt

The COVID-19 crisis revealed that despite including diseases and pandemics in the catalogue of security risks listed by strategic papers such as the 2016 White Paper, there were no national plans in place to cope with that particular challenge. The crisis also revealed shortfalls in digital communication systems—public health offices in the counties and municipalities had to report their test results and vaccination rates using outdated telefax connections. In the Bundeswehr's role specifically, bureaucratic hurdles hampered its ability to respond quickly to requests for assistance from the communal authorities. Furthermore, the federal government took almost a year to clarify that the Bundeswehr's administrative assistance would be provided free of charge to the requesting institutions (see Zowislo-Grünewald et al. 2022, 22ff). Thus, there were some delays in accepting Bundeswehr assistance. Different chains of command (joint support service with the territorial tasks command, the support contingent, and the joint medical service with the medical personnel) also hampered the Bundeswehr from responding in a timely way (see Major et al. 2020, 4).

One important lesson that the military learned was to propose that a territorial command be established as a "contribution to an enhanced cooperation with relevant agencies and offices such as the Federal Office of Civil Protection and Disaster Assistance" (Bundesministerium der Verteidigung 2021, 21; author's translation). Indeed, in the spring of 2022, the minister of defence and the inspector general of the Bundeswehr announced in a joint Order of the Day the establishment of the Bundeswehr's territorial command (Bundeswehr 2022b). Meanwhile, however, the Russian aggression against Ukraine changed Germany's priorities: the "invasion underlines the necessity to focus the command structure of the armed forces on national and collective defence" (Bundeswehr 2022b). Though the focus is on national and collective defence, the new headquarters is responsible for the operational command of national forces providing homeland security, including administrative and disaster assistance as well as civil-military relations.

The command is directly subordinated to the Federal Ministry of Defence and is not part of one of the six services. The commander also oversees the *land* commands, the homeland security forces, and the centre for civil-military relations. The German elements' contribution to the NATO joint support and enabling command (JSEC) and to the multinational joint headquarters (both based in Ulm/Baden-Württemberg) have been assigned to the new structure in the areas of their territorial duties. The Bundeswehr territorial command can be considered as the domestic equivalent of the joint operational command leading the missions abroad.

The new focus on the defence aspect of Bundeswehr's territorial duties will increase the pressure on the civilian authorities in the federation, the *Länder,* and the communes to improve civil protection in their jurisdictions—something that is part of their central tasks according to the Basic Law. Eva Högl, parliamentary commissioner for the armed forces (*Wehrbeauftragte des Bundestages*), the top representative of parliamentary oversight for the Bundeswehr, put it clearly: "But of course, it is very comfortable for the civilian institutions. The administrative assistance is free

of charge. That was decided at the beginning of the pandemic. So, it is much more comfortable for the respective civilian bodies to say, 'let us get the soldiers again. First, it does not cost us anything, second, excellent performance is guaranteed in the execution of the tasks, and third, there is no need to struggle with personnel that needs to be trained and instructed'" (Deutschlandfunk 2021; author's translation). This statement is fully in line with the views of the military leadership that values the appreciation Germans gave the Bundeswehr for its COVID-19 assistance but rightfully argues that its core missions lie in national and collective defence and international crisis management.

Against this backdrop, the Bundeswehr will continue to provide administrative assistance in emergencies but will now have to be more selective about where it will assist and for how long (see Zowislo-Grünewald et al. 2022, 29ff). Regarding the distribution of work between the military and the civilian authorities, the Parliamentary Commissioner has a clear vision: we need a debate on civil protection capacities, but in the end, let's rely less on the Bundeswehr (Deutschlandfunk 2021).

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Italy

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Karolina Muti , Bernardi Samuele and Francesca Sterzi

Abstract As the first Western country hit by COVID-19, Italy had to develop a nation-wide response to the pandemic before other countries did. Following a well-established tradition of domestic military deployments, the Italian Armed Forces were fully mobilised to provide logistical and medical support, including COVID-19 testing and vaccination, as well as to perform public order and law enforcement activities. The centrality of the Armed Forces in tackling the COVID-19 pandemic was also exemplified by the fact that, in the period 2021–2022, an Army officer performed the tasks of Special Commissioner for the COVID-19 emergency, entrusted with the overall management and coordination of the national response. The COVID-19 pandemic response further strengthened civil-military relations and civilian oversight was performed over the military. Overall, the reliance on the Armed Forces placed additional strain on the military and this reopened the debate on the role, tasks and size of the Armed Forces in Italy.

1 Introduction

Italy was the first European country to be hit by COVID-19. On January 30, 2020, two Chinese tourists in Rome tested positive for the novel coronavirus 2019-nCoV; later that day the World Health Organization (WHO) declared it a "Public Health Emergency of International Concern" (WHO 2020). Accordingly, the Italian Council of Ministers adopted a six-month-long state of emergency on January 31, 2020, and

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entrusted the Civil Protection Department with coordinating national efforts during the emergency (Deliberation of the Council of Ministers 2020). Specific measures to limit the spread of the disease centred first around air and sea traffic and included the authorities setting up tighter health controls in ports and airports (Sanfelici 2020, 196). This concurs with Kenwick and Simmons (2020, E49-E50), who found that "countries responded to the global outbreak first with external controls, and only secondarily with internal control measures." By February 21, 2020, the first COVID-19 cases involving Italian residents who had no history of exposure abroad were identified in Lombardy and Veneto and, therefore, the Italian Government started enacting lockdown measures. The lockdowns applied first to specific territories and then to the whole country (Torri et al. 2020, 2).

The spread of the COVID-19 pandemic triggered a multifaceted crisis that involved both the health sector and the economy. International partners launched several health diplomacy initiatives that consisted mainly of sending medical equipment and personnel and health supplies. Pointing to the "international politics of health" (Fazal 2020, E79), these initiatives notably included China (ANSA 2020), Russia, the United States, and Cuba. Fully-fledged EU support only came later (von der Leyen 2020). In response, the Italian Armed Forces were mobilized to support the overall coordination and management of the crisis. The Forces' support ranged from providing logistics and transport to hospitalizing and curing the most severely infected patients in military hospitals.

In 2021 the Italian Armed Forces were composed of 167,057 personnel in active service (97,087 in the Army, 29,511 in the Navy, and 40,459 in the Air Force).[1] All three branches participated in COVID-19 operations to support the civilian authorities by contributing personnel, assets, infrastructure, and logistics. Involved personnel included, among others, the Joint Operations Headquarters (J-HQ) staff, specialized chemical, biological, radiological, and nuclear (CBRN) units, health-related personnel—military doctors, nurses, health support operators, pharmacists—but also non-specialized personnel from Operation Strade Sicure. Notably, the Army was the branch most significantly involved due to its structure, size, and extensive presence on the national territory.

2 Domestic Operations

2.1 Constitutional and Legislative Framework

Over the last few decades domestic deployments of the military have become a consolidated national practice and require no parliamentary approval. Article 13 of the Civil Protection Code (Legislative Decree 2018, No. 1) states that the Armed Forces are "operative structures" within the national Civil Protection Service. As

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[1] The *Carabinieri* are not included in this calculation.

such, the military is *de facto* incorporated in the civil protection response mechanism, which is activated during emergencies. Article 24 of the Code envisages the possibility of establishing a state of emergency of national relevance that would trigger the mechanism. Indeed, this happened on January 31, 2020, and allowed, by means of order of the Head of Civil Protection, necessary measures to be adopted, such as the prompt acquisition of equipment. Article 89 of the Italian Code of Military Organization (Legislative Decree 2010, No. 66) indicates that the Armed Forces are required to participate in the protection of democratic institutions and in specific tasks in the case of public calamities and other cases of extraordinary need and urgency. The Code lists a vast range of tasks that the military can perform in support of, or together with, civilian authorities in national emergencies. Those tasks range from the publication of meteorological data to the protection of the marine environment to interventions in case of CBRN events to law enforcement and the maintenance of public order.

During the COVID-19 emergency, further measures involving the Armed Forces were approved following the adoption of specific decrees. Article 77 of the Italian Constitution establishes that, in exceptional cases of necessity and urgency, the government can adopt decree-laws (*decreti-legge*) that have the force of law. Parliamentary control is exercised *ex post* and through the conversion of the decree-laws into law within 60 days. Under these special powers, the government can also appoint additional *ad hoc* figures, as was the case with the Special Commissioner for COVID-19 (Decree-Law 2020, No. 18).

Italy's crisis management approach is primarily civilian-driven and relies on two separate but connected mechanisms that are activated depending on the type of the crisis: civil defence and civil protection. Civilian authorities are always in charge in a crisis and it is up to them to request military support and assistance. This entails logistic and operational support, personnel and equipment, and expertise in the prevention phase (Di Camillo et al. 2014). These mechanisms can be triggered if the government declares a state of emergency. The civil protection mechanism is a decentralized and horizontal system, activated to assist the population in natural or man-made disasters. The Civil Protection Department is the key actor at the decision-making and operational levels, leading the organization and implementing response activities; it operates directly under the authority of the Presidency of the Council of Ministers.

2.2 *Deployment in Domestic Roles*

Italy has a well-established tradition of domestic military deployments to provide support in civilian emergencies. Major examples of this involvement include the support provided following the flooding in Florence in 1966, and in the earthquakes in Friuli Venezia Giulia in 1976, in the mountainous region of Irpinia in 1980, and in central Italy in 2016. In brief, the Armed Forces are part of an integrated response

system, which entails constant interaction and coordination between civilian and military authorities and operational entities (Cabigiosu 2005, 68). When a national emergency strikes, the Italian Armed Forces are asked to provide operational, logistical, and technical support, including qualified personnel (see Table 1).

Table 1 Selection of main domestic military deployments in Italy, 2000–2022 (authors' calculations)

Name	Period	Event or emergency	Military personnel	Activities
Primavera	28/02/2000–30/06/2000	Organized crime in Puglia, mainly cigarette smuggling	1300	Anti-smuggling activities on the coast; patrolling and sweeping target areas
Domino	13/11/2001–1/07/2006	Terrorism threat after 9/11	4000	Surveillance of sensitive targets in public service and transport facilities across the national territory
Strade sicure	4/08/2008-ongoing	Crime and terrorism	3000 (at the outset)	Surveillance of target sites and patrolling across the national territory
Giotto	2009	G8 Summit in L'Aquila	2500	Ensuring security during the G8 summit, surveillance of sensitive targets, transport of foreign delegations, health assistance
Gran Sasso-Aquila	3/05/2009–31/03/2010 (*Gran Sasso*) 1/04/2010–31/12/2014 (*Aquila*)	2009 earthquake in Abruzzo region	700	Surveillance and control of the territory, collecting and transporting building debris, support to population
Sabina	24/08/2016–08/06/2017	2016–2017 earthquakes in central Italy	1800 (2500 at its peak)	Surveillance and control of the territory, collecting and transporting building debris, support to population
Naxos	1/05/2017–28/05/2017	G7 Summit in Taormina	2900	Ensuring security at the G7 summit, enforcing national borders, support to organization
Fidelium	18/03/2020–24/04/2020	COVID-19 emergency	100	Carrying coffins out of Bergamo
Igea	2020–2021	COVID-19 emergency	1400	Setting up drive-through and delivering COVID-19 tests
EOS	2020–2022	COVID-19 emergency		Delivering and administering vaccines
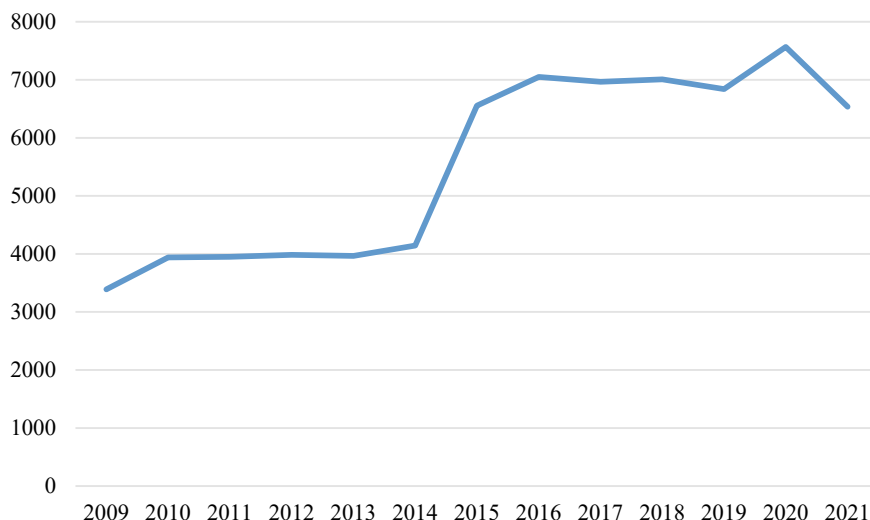
Fig. 1 Number of military personnel deployed in Operation Strade Sicure, 2008–2021 (data: Esercito Italiano 2016, 2017, 2018, 2019, 2020, 2021)

Types of deployments have changed over time. In the 1990s, Italy faced a wave of attacks by organized criminal organizations against people and institutions with bombings and targeted killings aimed at undermining the state's stability. Over time, the violent impact of this internal threat was reduced, but the armed forces continued to perform public order and law enforcement tasks, along with other operations, as Fig. 1 briefly summarizes.

A key domestic operation that has been ongoing since 2008, Operation Strade Sicure (Safe Streets), involves deploying the military to guarantee law enforcement and public order, protect sensitive sites, and counteract criminal activities. Over the past 25 years, Strade Sicure has been the Italian Armed Forces' largest, most personnel-heavy, and longest mission, involving approximately 6000 personnel as of 2022 (Camera dei Deputati Servizio Studi 2022). Armed forces employed in this operation perform the functions of public agents and directly respond to the local Prefect, prompting the consolidation of a coordination mechanism with Prefectures which represent the Central Government at the local level. The characteristics developed for Strade Sicure made it particularly functional for supporting civilian authorities during COVID-19. During the pandemic emergency, the Government authorized the deployment of an additional 753 units. It is worth noting that, as stated by former Army Chief General Farina, each soldier directly deployed in Strade Sicure translates into the employment of two additional ones: one that is preparing to be deployed and one that undergoes a post-deployment assessment and regeneration (Camera dei Deputati 2020b, 25).

3 Military Deployment During COVID-19

3.1 Coordination of the COVID-19 Response

In the first phase of the COVID-19 pandemic, Italy's Presidency of the Council of Ministers assigned to the Civil Protection Department the leading role in coordinating and implementing the response activities. Even though it remains a civilian entity, in March 2021 the post of Special Commissioner was transferred from a civilian, Domenico Arcuri,[2] who had been appointed in March 2020, to a military appointee, General Francesco Paolo Figliuolo. This change was a political choice that the government made after Mario Draghi took office. Nevertheless, it raises some interesting considerations about the continuous expansion of the military's responsibilities and the role the military. First, when he became Special Commissioner, General Figliuolo maintained his role as the army's logistics commander. Second, those assigned to be part of the Commissioner's supporting structure were appointed by General Figliuolo and nine out of the ten top posts were given to Army officers (see Fig. 2 for details). On January 19, 2022, Gen. Figliuolo assumed command of the Italian J-HQ (Ministero della Difesa 2022a) and left the logistics Commander's office and he kept his role as Special Commissioner.

The Special Commissioner depended on and reported to the Presidency of the Council of Ministers. During the first phase of the pandemic, when the first wave of COVID-19 hit Italy heavily, the situation required the Commissioner's structure to handle the operational aspects of the response to the emergency. It could be argued that Commissioner Figliuolo inherited a less dramatic crisis situation to be managed in comparison with Commissioner Arcuri, due to a lower number of casualties and reduced pressure on the national healthcare system after the first emergency phase, and the availability of successfully tested vaccines that were not available initially. Nevertheless, the second phase presented different but no less challenging issues, notably related to the definition, organization, coordination, and implementation of the national vaccination plan, the responsibility for which rested entirely with the Commissioner and the structure supporting the work of his office.

In early 2022 when the COVID-19 emergency "normalized" and most of the Italian population had been vaccinated, the Government lifted the state of emergency; it officially ended, by decree, on March 31, 2022. The Special Commissioner's assignment and the support structure for the Commissioner's office concluded on the same day; special powers were transferred back to the Head of Civil Protection, Fabrizio Curcio, and they ceased with the end of the state of emergency.

Whereas regional authorities and health care structures were autonomous and could conduct and organize vaccination campaigns at the regional level, they nonetheless turned to the Special Commissioner when they lacked equipment, vaccines, or

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[2] When he was appointed as Special Commissioner, Domenico Arcuri was CEO of the National Agency for Inward Investment and Economic Development, part of the Italian Ministry of the Economy and Finances.

Commissarial Support Structure Organizational Chart
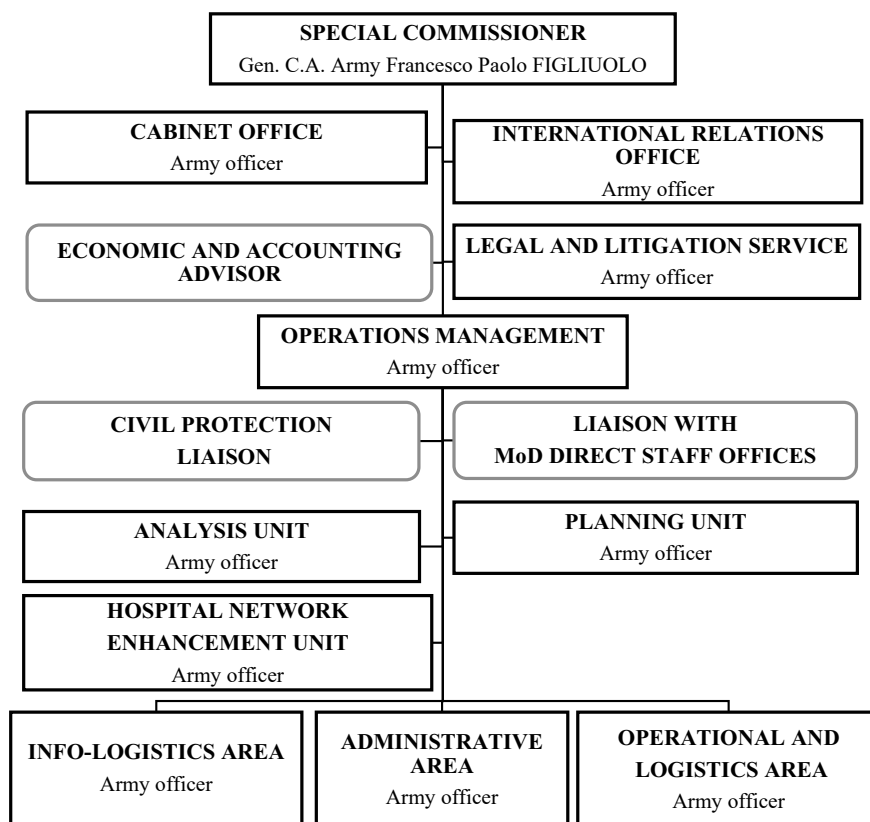
Fig. 2 Initial composition of the Support structure of the Special Commissioner (translated from Presidency of the Council of Ministers (nd))

when they needed support to implement the vaccination plan—for instance when they needed help reaching remote areas. A permanent operational group was activated. It was composed of the Commissioner's supporting structure, the Civil Protection, and authorities from regional and autonomous Regions. When General Figliuolo took office as Special Commissioner, he set an official target of 500,000 administered doses of vaccine per day nationally, with the goal of vaccinating 60–80% of the population by September 2021.

Due to the gravity of the situation, especially during the first wave of the pandemic, Minister of Defence Lorenzo Guerini adopted a proactive approach in offering the Armed Forces' full support. The Ministry of Defence (MoD) strengthened intra-ministerial coordination and cooperated with the Ministry of Interior, the Ministry of Health and the Civil Protection Department. The then-Italian Chief of Defence, Gen. Enzo Vecciarelli, appointed the Armed Forces J-HQ as the sole point of reference

to manage the health crisis. Within the J-HQ, a dedicated 24/7 COVID-19 situation room was established that coordinated the Armed Forces' operations and cooperated with civilian authorities. The Civil Protection Code provides for the institution of such a joint structure in case of nation-wide emergencies, tasking the J-HQ with direction, control, and coordination of operational efforts by the Armed Forces and other authorities (Camera dei Deputati, Servizio Studi 2021, 4).

As a result, the J-HQ worked with several civilian actors. It interacted with the Department of Civil Protection, and the Ministries of Health, Transport and Foreign Affairs and engaged with regional authorities and health care systems, such as hospitals, to provide military health care assistance. The J-HQ also coordinated with the Special Commissioner for the COVID-19 emergency and his support structure. Beyond this, they engaged with the Department of Firefighters, Public rescue, and Civil defence in disaster relief tasks, as well as with the Police and Prefectures for public order and law enforcement.

The military are generally used to interacting with civilians during national emergencies. Nevertheless, the health care aspect of the emergency, its scale, and the organization of Italian health care functions similarly to a federal organization, necessitated the military coordinating with a number of civilian entities that may not have interacted with uniformed personnel before, thus requiring the military personnel to be highly flexible. Conversely, civilian entities had to adapt in their interactions with uniformed personnel who were unused to the complexity of local, regional, and national levels of Italian health care.

The military nature of the Special Commissioner and his office was most likely beneficial for the response to the emergency and the implementation of the national vaccination plan. The centralized command and control structure typical of armed forces, the Armed Forces' widespread presence—especially in the case of the Army—on the national territory, the expertise the Commissioner gained in dealing specifically with the Army's logistics, the availability of the Army's transport vehicles and equipment, and finally, the military's preparedness, rapidity, and planning capabilities, even for worst-case scenarios, made the appointment of General Figliuolo an effective choice. Operational advantages relate also to the direct involvement of the J-HQ, which puts together the expertise, assets, and capabilities of each branch of the Armed Forces.

3.2   Roles of the Military

The armed forces devoted considerable human and material resources to helping Italy tackle the pandemic health emergency. As of April 2020, 24,500 military personnel were deployed, using 2378 military vehicles (including ambulances), 313 helicopters, aircraft, and trucks, as well as 111 military facilities (Camera dei Deputati IV Commissione Difesa 2020a, 14–15). Several tasks were performed (Adebahr 2022). First, a total of 350 military doctors and nurses were seconded to the national and regional health care systems (Ministero della Difesa 2021b). During the first

phase of the pandemic, 126 military doctors and 167 nurses were employed and military medical teams were sent to the most affected areas (Camera dei Deputati IV Commissione Difesa 2020a, 15).[3] Their numbers were boosted following a call for up to 320 doctors and nurses to be temporarily enrolled in the Army through a fast-track acceptance basis, as introduced by Decree-Law (2020), No. 18. One of the main challenges during the first phase of the COVID-19 emergency was to find facilities where contagious patients could be isolated and hospitalized. A COVID-19 hub was established at Celio military hospital in Rome (Ministero della Difesa 2020a), while another 50 places were made available at the Army's military hospital in Milan, and 22 places at the Navy's military hospital in Taranto (Ministero della Difesa 2021c. The Army and Air Force set up their own field hospitals. Six military forensic medicine departments (DMML) were also fully mobilized. The military employed 42 inflatable tents for triage tasks during border checks and in hospitals (Ministero della Difesa 2021c). Finally, the military helped to produce masks, sanitizing gel, and medicines at the Military Pharmaceutical Institute in Florence, which manufactured and distributed over 35,000 L of sanitizing materials.

Second, space in some military buildings was made available for quarantined citizens. In the early stages of the pandemic, the Ministry of Defence provided more than 3000 rooms in military buildings (Camera dei Deputati IV Commissione Difesa 2020a, 15). The first 56 Italian citizens evacuated from Wuhan by the Air Force were quarantined at the Cecchignola military facility near Rome (Ministero della Salute 2020). In total, the air force operated four flights to evacuate 84 Italian nationals and some EU citizens from China and Japan at the early stages of the pandemic (Aeronautica Militare nd, 39). The Armed fFrces provided bio-containment transport of patients, and transport of medical staff and materials across the national territory and abroad. For aerial inter-regional PPE and medical material transport, a number of assets were employed (see Table 2).

The Air Force estimates having employed 1573 flight hours in 2020 and 662 in 2021 for pandemic-related transport tasks (Aeronautica Militare nd, 39). In 2020, the Army used 43 military aerial vehicles (38 helicopters and 5 planes) to transport 60 tonnes and 250 heavyweight vehicles to carry 1030 tonnes of material (Esercito Italiano 2020, 31). The Army was also essential in accomplishing Operation Fidelium, whereby 100 soldiers transported 957 coffins out of Bergamo on 50 of the Army vehicles (Esercito Italiano 2020, 26). During the first phase of the pandemic when breathing machines and ventilators were scarce, military engineers produced these devices to boost their numbers in Italy. For example, 25 Army technicians were dispatched to Siare Engineering (a health service company nearby Bologna) to help produce 2000 ventilators in 4 months (Siare 2020).

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[3] As of April 7, 2020, 35 military health personnel were sent to Lodi, 6 to Macerata, 12 to Brescia, 51 to Bergamo, 5 to Padova, 18 to Enna, 29 to Piacenza, 7 to Milano, 21 to Roma, 8 to Novara, 25 to Cuneo, 14 to Sassari, 22 to Jesi and 21 to the Regional Health Service in Piedmont.

Table 2 Deployment of air force assets in the early stages of the pandemic (Data retrieved from Ministero della Difesa 2022b)

Armed forces	Military assets
Army	38 helicopters 2 Piaggio VC 180 aircrafts 3 Dornier DO 228 aircrafts
Navy	3 SH-90 helicopters 1 P180 aircraft
Air force	2 KC-767 aircrafts 1 P-180 aircraft 2 C-130J aircrafts 2 C-27J aircrafts
Carabinieri	9 AB412 helicopters 1 A109E helicopter 12 A102N helicopters

Moreover, the Armed Forces proved essential in sanitizing hospitals and medical facilities. In this respect, the Army's 7th CBRN Defence "Cremona" played a critical role, as they, alongside Russian military forces, cleaned residential care institutions near Bergamo (Esercito Italiano 2020, 29). Military personnel from the Joint CBRN Defence School were also deployed in some care institutions located in Rieti (Bergamini 2020). Meanwhile, the terrestrial sanitization plan was enacted involving 81 sanitization teams and 7 decontamination teams, operating 1759 sanitization interventions (Esercito Italiano 2020, 33) across the national territory in 2020, and 3964 in 2021 (Esercito Italiano 2021, 73).

Italy's Armed Forces also played a crucial role in COVID testing and vaccination. The J-HQ organized and conducted several initiatives. One involved Operation Igea, which started on October 23, 2020 and involved setting up about 200 COVID-testing "drive throughs" and carrying out 2.8 million COVID-19 tests as of May 2021 (Ministero della Difesa 2021a). A second initiative, Operation Athena, involved screening students and teachers in schools to avoid the implementation of distance learning in some cases, for a total of 31,646 COVID-19 tests administered in 2021 (Esercito Italiano 2021, 73). Another initiative, also launched by J-HQ, was Operation EOS, which focused on guaranteeing the storage and distribution of vaccines at the request of the Special Commissioner and in cooperation with his support structure, which gathered the data about vaccine demand at the national level from regional health authorities. The J-HQ ensured the vaccines were appropriately stored at the national hub located at Pratica di Mare airport, distributed to the 21 regional sub-hubs, and delivered to local facilities. Moreover, the COVID-testing "drive throughs" were adapted to become vaccination centres and 200 mobile deployable vaccination teams were deployed to reach remote areas of the country based on requests from regional authorities. Each team consisted of military personnel including one doctor, one nurse, and a health operator providing logistics. Finally, Operation Minerva was launched to facilitate the vaccination of military personnel; 163,737 doses were injected in 2021 (Esercito Italiano 2021, 73).

Third, the Armed Forces, and in particular the Army, also performed public order and law enforcement tasks. Specifically, an additional 253 personnel, which was increased to 753, were deployed under Operation Strade Sicure. The scope of the mission was expanded to guarantee compliance with COVID-19 containment rules (Senato della Repubblica 2021, 162), which resulted in 1,875,749 people and 372,473 vehicles inspected (Esercito Italiano 2020, 17). Strade Sicure personnel controlled internal borders and "red zones." on a normal basis, patrolling activities are performed by other forces, including the *Carabinieri.* Operation Strade Sicure involves the deployment of Army's personnel—not the *Carabinieri*—to perform patrolling activities on the national territory.

3.3   Readiness and Effectiveness

Domestic military deployments in case of emergency have been a constant feature in Italy. This has ensured a high level of expertise, experience, and operational readiness for various emergencies, including flooding, earthquakes, and volcanic eruptions. Exercises and drills for domestic interventions are conducted routinely in coordination with all civilian and uniformed personnel who are part of the civil protection mechanism. Hence, when the COVID-19 pandemic arrived in Italy, the military was prepared to deploy promptly in support of civil authorities. Assisting civilian authorities and the population at large is well-ingrained in Italian military culture and most on-duty personnel had experienced domestic deployments before COVID-19.

The military's deployment to undertake different tasks during the pandemic was helped by its culture of adaptability, readiness, and service to the Italian population and institutions. Nevertheless, in Italy there is an over-reliance on the military to deal with emergencies to cover gaps and inefficiencies of civilian authorities. The public wants the military to engage in an even broader variety of domestic, non-emergency issues. However, military personnel generally perceive this negatively; they see the assigned tasks in domestic operations as a downgrade for personnel who are specialized and combat-trained.

In fact, the deployment of Armed Forces personnel to deal with COVID-19 placed an additional strain on the military. Having to perform emergency tasks (including bio-containment transport) brought Armed Forces' members into direct contact with health structures and populations during the highly contagious phases of the pandemic. By June 2020, after the first wave was over, 1,233 military personnel had been infected by the virus (Lastilla et al. 2020). This, and the need to deploy more personnel on the national territory meant that plans for deployments abroad had to be revised. Such circumstances were a challenge for the Armed Forces and put their effectiveness under stress despite their high level of preparedness. On a positive note, COVID-19 was an opportunity to speed up procurement procedures that had slowed down, or been blocked, by bureaucratic obstacles (e.g., the procurement of field hospitals for the army).

Further, the Armed Forces' recruitment processes were suspended from February through May 2020, except for additional military health personnel enrolled in support of the National Health Service (Senato della Repubblica 2021, 18–21). However, this did not disrupt military readiness significantly, except for some delays with the Army's volunteers and the *Carabinieri* corp (Senato della Repubblica 2021, 27). The more important effect was on military training as several bilateral and multilateral exercises were cancelled, especially in 2020, which affected readiness (Esercito Italiano 2020, 4; Molle 2022, 60). This was alleviated to some extent with simulations and distance learning. Finally, the number of personnel deployed in international missions was reduced, and their activities were limited (Camera dei Deputati 2021). Overall, the armed forces showed a remarkable degree of resiliency in their response to the pandemic (Senato della Repubblica 2021, 112).

4 Civil-Military Relations

4.1 Securitization of the Pandemic

The deployment of the military in response to the COVID-19 emergency is part of a continuum in which the Armed Forces is regularly involved in supporting internal security tasks, including law enforcement. Interestingly, the military (especially the Army) also played a relevant role in the second phase of the emergency with the appointment of an Army General as Special Commissioner for the COVID-19 emergency. In recent Italian history, appointments of Special Commissioners are frequent, but from an institutional standpoint, they are civilian tasks. Special Commissioners are usually civilians. The head of Civil Protection is often nominated for this role by decree. The Commissioner responds directly to the President of the Council (government), and his/her tasks are defined through a decree-law. In the past two decades, there are few examples of Special Commissioners coming from the military.[4] The fact that the Commissioner was appointed from the Army has given that branch, in particular, a significant influence through coordination, planning, and management tasks.

The paradox is that with the increase in the role played by the military, civilian organizations may be dissuaded from implementing positive change and improving their crisis management abilities. The effectiveness of the military in tackling domestic crises could thus discourage preparedness by civilian authorities. Additionally, the appointment of Special Commissioners that take over the leadership of the process, or act as substitutes for existing mechanisms, limits the progress that could be achieved systemically as it favours a fragmented, case-by-case approach that loses sight of the systemic dimension.

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[4] The *Carabinieri's* General Giuseppe Vadalà was appointed for a 2017 operation related to illegal landfill sites, and Admiral Aurelio Caligiore was appointed in 2019 for an operation devoted to recovering plastic waste lost in the Follonica Gulf by the motor vessel "Ivy."

4.2   Civilian Oversight and Accountability

The Armed Forces are integrated into the Civil Protection Service's operational structures and their deployment is established in coordination with the Department of Civil Protection. Other organisations involved include the Police, the Red Cross, and national health care structures, among others.[5] For the military, the link with the Department of Civil Protection is guaranteed by the Defence staff at the national level, and by regional Military Commands at the local level. The J-HQ is the entry point for all requests for military intervention coming from civilian public authorities. The Armed Forces, together with other public entities, are operational instruments, maintaining their own competencies and regulations under a civilian authority in a legally established framework. Nevertheless, Commissioners' widespread responsibilities based on the special legislative power of the Executive gave the Army especially an unexpected centrality at operational and strategic levels.

From the legislative standpoint, the government mainly managed the early stages of the health emergency in Italy by issuing decrees that carry the force of law (decree-laws), decrees of the President of the Council of Ministers (DPCM), and ordinances of the Minister of Health. On previous occasions the government has turned to Article 77 of the Constitution and article 24 of the Code of Civil Protection. Taken together, these norms guaranteed enough flexibility and complemented each other as the legal basis for addressing an unprecedented crisis. The decree-laws enabled the Executive to take actions that were otherwise not legally possible, such as limiting freedom of movement or introducing lockdowns (Diaz Crego and Kotanidis 2020).

Parliamentary control was regularly exercised in the first place through the exam of Decree-Laws, which have to be transposed into law, as previously recalled. Consequently, the Defence Committee of the Senate and the Defence Committee of the *Camera dei Deputati*[6] analysed government-issued measures within their remit and delivered their related opinions, including the authorisation of Prefects to employ Armed Forces in the fight against COVID-19, at the local level. Nevertheless, numerous observers noted how in the last decades Decree-Laws have been "abused" by Italy's governments (Diaz Crego and Kotanidis 2020).

Secondly, concerning the military's role in the COVID-19 emergency, the IV Committee of the Senate and the IV Committee of the *Camera dei Deputati* organized both formal and informal Parliamentary hearings (*audizioni*), which included the hearing of the Italian Minister of Defence on May 13, 2020 (Camera dei Deputati 2020a). These hearings are publicly available on institutional websites. The COPASIR committee, in charge of intelligence, heard the Special Commissioner for

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[5] The department ensures assistance to the population in case of emergency. This role has been further strengthened with the approval of the Civil Protection Code. In addition to the armed forces, other operational structures of the National Service are the national fire brigades, the police forces, the scientific community, the national health service structures, the organized civil protection volunteer service, the Italian Red Cross, the National Corps of Alpine and Speleological Rescue, the national system for environmental protection, and the structures responsible for managing meteorological services at a national level (see Dipartimento della Protezione Civile (nd).

[6] The Lower Chamber in the Italian Parliament.

COVID-19 emergency Domenico Arcuri on May 7, 2020 (Comitato Parlamentare per la Sicurezza della Repubblica 2020). Members of Parliament used a third tool as well: they could interrogate government members, which proved fundamental in gaining further insight into several defence-related issues, such as the territorial distribution of military personnel at the early stages of the pandemic (see Camera dei Deputati IV Commissione Difesa 2020a).

In this process, civilian oversight over the military is guaranteed at the local level. The Prefects rely on the support of the Armed Forces to ensure the implementation of emergency measures and law enforcement, but it is the Prefects' direct responsibility to inform the Ministry of the Interior and local Military Commands. The legislative and political dimensions of the overreliance on the military remain to be assessed and must consider several factors. The first factor is the multi-level role played by the military in the pandemic (including the enlargement of its responsibilities after the appointment of Gen. Figliuolo), coupled with a trend for governments and the public to over-rely on interventions by the Armed Forces. The second factor is the tendency to devolve vast powers to Special Commissioners (while establishing an ad hoc supporting structure outside the existing crisis management framework), and relying mainly on decree-laws to legislate.

Official sources reported no incidents of human rights violations from the military as it was carrying out COVID-19-related tasks, nor did the military overstep the mandates of civilian authorities. Conversely, working conditions for military personnel in domestic deployments presented challenges that a 2020 Parliamentary inquiry analyzed (Camera dei Deputati IV Commissione Difesa 2020b). Following Feaver's principal-agent theory, it could be argued that the primacy of military personnel in charge may point to *slippage*—that is, performing tasks in line with their preferences, which may diverge from those of the principal (political leader). However, it is very likely that, under the authority and special powers of a military Special Commissioner, if tasks were performed in line with a military mindset and preferences, it is unlikely that such preferences were divergent from the political authority (principal). It is likely instead that Gen. Figliuolo was appointed precisely because a military mindset and preferences were needed to successfully manage the COVID-19 pandemic response, a point emphasized by his having already been preceded in the role by a civilian. His special powers ceased with the end of the state of emergency, though the successive government subsequently appointed Gen. Figliuolo as Special Commissioner again, this time to respond to the emergency arising from the floods in central Italy in June 2023. In July 2021, Gen. Figliuolo presented publicly available data related to his Commissariat's use of funds during his initial appointment as COVID-19 Special Commissioner. In March 2024, a Parliamentary Committee of inquiry was established to examine the COVID-19 emergency management and measures undertaken by previous governments (Law 2024, No. 22; Camera dei Deputati 2024). The Committee expects to present a report with its findings by the end of the current legislative period.

4.3 Public Image of the Military

Among the Italian public, there is a lack of interest in national Foreign and Defence policy, which is coupled with an anti-militaristic sentiment present in some groups of civil society. Consequently, the Armed Forces seem to be better appreciated when they are assigned tasks associated with assistance to the civilian population (both national and foreign), rather than when they perform tasks in line with defence and international peace and security. In fact, the Armed Forces are among the most trusted institutions in Italy, particularly in the case of domestic relief efforts. However, according to a poll, the level of trust and appreciation for the Armed Forces seemed to decrease considerably between 2020 and 2022 during the COVID-19 deployment. Results showed that 66.5% of Italians trust the Army, 68.7% the Air Force, and 70.3% the Navy. The *Carabinieri* score 55%, whereas the Civil Protection scores 79%. Despite being the most "visible" military force deployed, the Army's appreciation score was the lowest percentage of all the Armed Forces (Eurispes 2022). A possible explanation for the Army's lower score might be related to its visibility and presence, which exposed this branch to closer scrutiny by citizens as it was most in the spotlight.

5 Lessons Learnt

The Armed Forces played a fundamental role in the pandemic emergency in Italy, which has provided governments and analysts with an opportunity to reflect on the military's future needs and investments to maintain their efficiency. The availability of military equipment and assets needs to be restored to pre-pandemic levels. Some of the lessons learnt include the Armed Forces' need to strengthen military logistics and to increase its investment in military health care. There is also the need to advance the military's transformation into a joint structure, increase interoperability with the National Healthcare Service, and improve preparedness against any emerging CBRN threat (Ministero della Difesa 2022b). Moreover, the country's defence capacity needs to be enhanced to facilitate a more structured cooperation with universities and research institutions. This was recently done in Tuscany with the establishment of a Research and Development Centre for the production of vaccines and antibodies. More investments are also requested for military operational infrastructure, which have acted as "multipliers of effectiveness" during the pandemic; and to increase the accommodation, stocking, and distribution capacity, particularly in key areas of the country.

Finally, the various activities the Armed Forces performed during the pandemic have reopened the debate about its assigned tasks—in particular in the context of Operation Strade Sicure (Mazziotti di Celso 2023) —and the size of the military; the Defence Chief of Staff recently called for an increase in the number of military personnel, up to 170,000 from the current number of 150,000 (Camera dei Deputati IV Commissione Difesa 2023, 15). The severe worsening of the international security

situation calls for the Italian military to concentrate on its primary missions—defence of the state and of the Euro-Atlantic area—but this clashes with its massive domestic involvement, particularly given its limited resources. This remains a contentious issue as contrary to other NATO allies Italy did not plan to exponentially augment its defence budget to reach the target rate of 2% of GDP by 2024 or 2028, which implies that it will face increasing operational overstretch.

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Spain

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Abstract   Although quite a few strategic documents had warned about the threat of a pandemic in Spain, when COVID-19 first appeared in 2020, it caught the Spanish authorities almost by surprise. An exceptional measure was quickly introduced with the decree of a state of alarm, and the country's armed forces were given an especially prominent role with regard to auxiliary work. These decisions were made against the backdrop of two particular features that characterize Spain. Firstly, its society is, in general, apprehensive of issues related to defence and, in particular, there is little sympathy towards the domestic deployment of the armed forces. Secondly, since 2007, the Military Emergencies Unit (UME)—a specialized military corps trained to act quickly and autonomously in the face of natural disasters at home and abroad— has been operational. Despite the lack of organizational preparedness on the part of political leaders and societal hesitation about military action on national territory, the final result was highly satisfactory. This study explains: 1) the legal and institutional framework that, despite the initial lack of readiness, was able to act quickly and efficiently; 2) the actions that constituted the military response and the way in which the structure of the joint operational command and existence of the UME played a crucial role in the success of the operation; and 3) the positive impact in the media and society resulting from this deployment.

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1 Introduction

On January 31, 2020, a German tourist hospitalized on the island of La Gomera became the first COVID-19 case in Spain. The director of the Coordination Centre for Health Alerts and Emergencies (CCAES), in an optimistic tone that matched that of Law 17/2015 of 9 July which had led to the establishment of the National Civil Protection System five years earlier, that the Wuhan epidemic was in retreat and that Spain would have only one isolated case of the illness. On March 14, 2020, with almost 8,000 recognized infections, more than 300 deaths, and the near collapse of the health system's emergency and intensive care unit (ICU) wards, and with nursing homes overwhelmed by the speed of the contagion, the government declared a state of alarm and ordered all citizens, except those providing essential services, to confine themselves to their homes. The epidemic had become a pandemic and infections and deaths in Spain began to far exceed the ordinary capacities of the country's health care system.

When the pandemic arrived, the political authorities were taken almost completely by surprise. Not even the worst-case scenarios had predicted one-tenth of what eventually happened. An emergency of a disproportionate magnitude was taking place in which the lives of Spain's citizens and the operation of essential services were both seriously threatened. There was talk that this was a singular "black swan" event, an argument that was difficult to make since the 2017 National Security Strategy had warned that one of the main threats facing the country was a pandemic (Jordán Enamorado 2020).

The pandemic's unexpected arrival and severity led the Spanish government to use the military to support other public sectors. Spain's military is composed of around 121,000 troops, mainly deployed in the army ($\pm$ 80,000), but also in the navy ($\pm$ 20,000), and air force ($\pm$ 18,000). There are also 3500 members in the military emergency unit (its acronym is UME) (Ministry of Defence 2020). Since 2000, the armed forces (AFs) have been a professional and all-volunteer force that has an expeditionary background for operating overseas (Martínez 2007a; López-Rodríguez 2022). Spain's AFs have been deployed under the flags of NATO, the United Nations, the European Union, the Organization for Security and Co-operation in Europe, and even as part of ad hoc multilateral agreements (Marrero Rocha 2007; Martínez et al. 2013; Durán and Ávalos Méndez 2013; Durán et al. 2016). Today, these operations abroad are the main activity of the Spanish Armed Forces (Martínez 2007b) and one of the principal reasons for the great social trust in them (Martínez and Durán 2017). Their functions are regulated by the Constitution and Defence Law; those itemized in National Defence comprise their main mandate.

Spain's armed forces generally focus on external missions, though there are exceptions, including for domestic deployments where they can provide rapid help in emergencies. In fact, except for some interventions such as air traffic control or railway surveillance to help prevent terrorist attacks, the armed forces have only been deployed within Spain in response to natural disasters or major accidents. In these exceptional cases, their activation is the central government's responsibility.

2 Domestic Operations

2.1 *Constitutional and Legislative Framework*

The Spanish Constitution of 1978 establishes the mission of the armed forces: to guarantee the sovereignty and independence of Spain and to defend its territorial integrity and the constitutional order (Art. 8). The same precept specifies Parliament as the competent authority to determine the legal regulation of military organization and operation according to the country's constitutional values and principles. This mandate has since been updated; as of 2005 the forces can go beyond the literal interpretation of the constitution and respond to new demands and needs, both national and international (Expósito 2022). Organic Law 5/2005 of November 17 on National Defence established the legal framework for military action and the organization of the armed forces within the country's overall defence policy. Specifically, the forces are to act in "the protection of the whole of Spanish society, of its Constitution, of the higher values, principles and institutions enshrined in it, of the democratic and social state of law, the full exercise of rights and freedoms, and the guarantee, independence and territorial integrity of Spain" (Art. 2).

The organic law included two substantial changes to the constitutional functions of the armed forces. First, for the first time, missions abroad could be undertaken only provided they fit into one of two very specific contexts: "to contribute militarily to the security and defence of Spain and its allies within the framework of the international organizations to which Spain belongs" and for "peacekeeping, stability and humanitarian aid" (Art. 15).

Second, from a domestic perspective, the law consolidates the AF's actions in cases of natural disasters and hazards. Military intervention in the civil sector is not new, as it was provided for in Organic Law 6/1980 (Arts. 21 and 22) as well as in National Defence Directive 1/2004 of December 30, which refers to collaboration "with the civil protection system and, along with the other state institutions, particularly the state security forces, the preservation of the safety and well-being of the citizens." Most of the AF's operations on Spanish territory have been of this nature and have also been provided for in legislation on civil protection. On the other hand, in its day, Organic Law 6/1980 (since repealed), which outlined the basic criteria for military organization and defence, codified that all non-military human and material resources were permanently available to the military should it need them in the fight against every type of extraordinary catastrophe (Art. 21). Conversely, the law also established that military resources were at the disposal of the civil authorities in the event of "grave risk, catastrophe or calamity or any other similar public need" (Art. 22). In other words, to solicit military assistance, the situation in question did not need to be extraordinary, but the law made it clear that these were to be irregular collaborations in which the versatility of the armed forces was a big asset.

In October 2005, the Council of Ministers agreed to create the military emergencies unit (UME), which was to become fully operational by 2008.[1] It was no surprise then, that when Organic Law 5/2005 on National Defence was passed the next month, the duty to protect citizens in the event of grave risk, catastrophe, calamity, or any other similar public need became a primary mission for the armed forces (Art. 15.3). A theoretical debate arose around whether this activity was part of civil protection, or if it made sense to maintain an emergency corps as an integral part of the armed services.

The organic law also envisions UME intervention for more specific civil protection duties, for instance, severe forest fires (RD 893/2013), situations of radiological hazard (RD 1564/2010), and tsunamis (RD 1053/2015). These and other actions fall perfectly within the functions assigned to the unit in the UME Intervention Protocol, which was approved by Royal Decree1097/2011 of July 22 and that, additionally, envisions that the UME will be deployed in emergencies caused by terrorist attacks or by illicit, violent acts, environmental pollution, or any other situation as decided by the prime minister. There is no doubt that in the area of civil protection, the UME has become one of the essential state resources in the emergency system.

2.2 Deployment in Domestic Roles

Since the country transitioned to democracy in the late 1970s, Spain's armed forces have played an almost imperceptible role on Spanish territory. Only four times has the military been called upon to intervene under its original, fundamental purpose. The first was a defensive mission in 2002 when Moroccan troops occupied a small island off the coast of North Africa that is under Spanish sovereignty but disputed by Morocco (Jordán Enamorado 2018). The military was also deployed in 2010 during an air traffic controllers' strike; the strikers' work stoppages threatened Spanish air space, so the military took over air traffic control functions until the strike ended. The third and fourth times the military was called up was in response to terrorist threats: to patrol the rail lines being built in 1992 to prevent terrorist actions, and after the jihadist attacks of 2004 in Madrid and 2005 in London, as part of the Terrorism Prevention and Protection Plan.

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[1] Council of Ministers Resolution of October 7, 2005: "Under the Ministry of Defence, the Military Emergencies Unit is a highly qualified and highly available military unit. It was be made up of 4,310 troops under the command of a general officer. It was expected to be fully deployed by the end of 2008, although in the first phase, before the end of 2006, the unit contained 25% of the total personnel. In the second phase, before the end of 2007, the unit expanded to 75% of the final total. Permanently available on every day of the year, the Military Emergencies Unit's mission consists of swift, autonomous intervention in any place on Spanish territory, when so decided by the prime minister, to assist citizens in the case of forest fire, heavy snowfall, floods, earthquakes, rescue and evacuation, and detection and decontamination in the event of chemical and biological hazards, among others."

Table 1 Some of the military emergency unit's noteworthy domestic operations

Natural disaster	Location	Date
Floods	Canary islands	2009
	Andalusia	2010
	Catalonia	2014
	Murcia	2016
	Madrid	2019
Earthquake	Murcia	2011
Snowfalls	Madrid	2008
	Leon	2008 and 2009
Fire hazards	Galicia	2017
	Canary islands	2019
Volcano eruption	Canary islands	2021

Source Prepared by the authors using data from web UME (www.defensa.gob.es/ume/)

The last and most common activity for the military on Spanish territory is to assist in natural disasters. The AFs have deployed in 596 operations from 2007 to 2021. Table 1 lists some of the most noteworthy deployments, but most have focused on firefighting (72.5%), floods (7.7%), snowfalls (6.9%), and technological hazards (6.9%). From time to time, the AFs have also cooperated with security forces and have assisted in earthquakes and CBRN (chemical, biological, radiological, and nuclear) incidents.[2]

The UME is made up of some 3300 troops, with five intervention battalions, one transmission battalion, a support intervention regiment, and two aerial groups (helicopters and hydroplanes). It is equipped with a large variety of material resources and modern telecommunications systems which, in addition to allowing the unit to manage emergencies efficiently, makes it easy for the UME to join the different national and autonomous community alert networks[3] (Martínez Mejide 2020). Since it became fully operational in 2007, the UME has intervened on more than 560 occasions on Spanish territory which, when its international activity is included, adds up to nearly 600 actions and, as Fig. 1 shows, it has seen the activation of its forces increase since its creation.

The UME's interventions during Operation Balmis were the most numerous and could only have been undertaken because of the unit's previous experience in other domestic deployments. This unit was ready to deploy when the pandemic hit

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[2] Data from https://www.defensa.gob.es/ume/intervenciones/index.html.

[3] Air resources, communication, fire engines, snowplows, mobile camps, transportation, sensitive material decontamination stations, heavy and light engineering machinery, transportation vehicles for staff and supplies, inflatable bridges, high-capacity cranes, water storage units, vehicles for reconnaissance, interventions and CBRN (chemical, biological, radiological, or nuclear) decontamination, water purifiers, ambulances and mobile ICU units, different types of watercraft, and canine and electronic teams for search and rescue (Military Emergency Unit 2022).
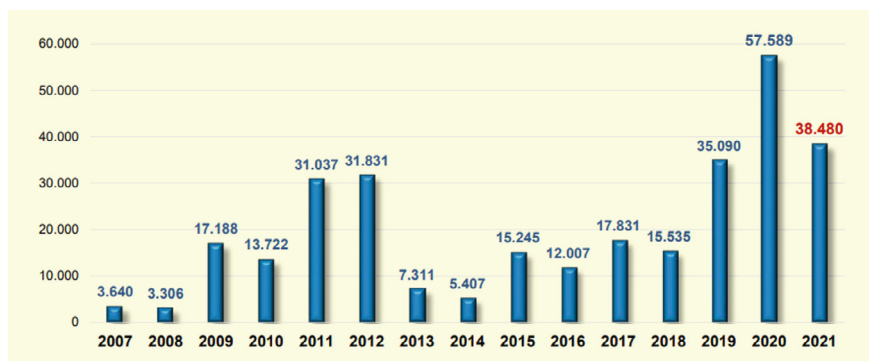
Fig. 1 UME military personnel deployment. *Source* UME (www.defensa.gob.es/ume/)

because its members had been trained to perform similar activities related to CBRN decontamination.

3 Military Deployment During COVID-19

3.1 Coordination of the COVID-19 Response

Royal Decree 463/2020, which declared the initial state of alarm, established the four ministries that were to be responsible for addressing the pandemic: the Ministries of Health, Defence, the Interior and Transport, and Mobility and Urban Agenda. The corresponding civilian authorities for each of the four ministries were empowered to ask for the AF's intervention under the legal concept of "agent of authority." To ensure that the operations ran smoothly, and all activities were coordinated among the ministries, the Ministry of Defence set up a single, main command. That command was made up of these four ministries, headed by their ministers, all under the direction of the prime minister (the chair). This unique group decided to incorporate military capabilities in the response to the pandemic, which was being formulated by the public administrations in health and public safety.

The day after the government declared the state of alarm, March 15, 2020, the Ministry of Defence adopted an order, published in the Official State Gazette that same day, establishing measures to put the management of the health crisis caused by COVID-19 under the authority of the ministry of defence. The regulation had three clear aims: 1) to specify the measures necessary for the AF's intervention and to identify the health resources available in the military health care network that would be needed to implement Royal Decree 463/2020 (Art. 2); 2) to guarantee that throughout the national territory the AFs and their health resources would act in accordance with the measures in the decree and would coordinate to provide the

needs as determined by the government; and 3) to provide the competent authorities with the military capacities of the UME and other units related to the military police to supply land and air transport and housing logistics, the establishment of military camps, and so forth. The instruction expressly obliged all military personnel to be permanently available for service related to the current state of alarm (Art. 3a). The military was a key, symbiotic complement to the civilian and political response to the pandemic and was essential for implementing the measures that the government had adopted. The AF's support for the civil authorities was organized in three days; the response began on March 22 and was called Operation Balmis.[4]

3.2 Roles of the Military

The Spanish armed forces' military response to COVID-19 was organized in two different operations between 2020 and 2021. The first was Operation Balmis (March–June 2020) in which the forces were more involved in the activities; the second was Operation Baluarte (September 2020–May 2021), which focused more on tracking the incremental change in infections during the pandemic's second wave. Operation Balmis was a support operation focused on: (1) providing health support from military personnel and resources to alleviate the stress on hospitals; (2) providing logistical support by receiving and distributing health care supplies and transporting the ill and deceased; (3) disinfecting facilities, medical centres, nursing homes, airports, ports, stations, penitentiaries, administrative facilities, and public buildings; and (4) providing security support and collaboration with police forces, though this role was quickly suspended as the police forces—and along with them the paramilitary civil guard—were already performing this task and did not require the help. Also, the Ministry of the Interior did not consider it to be a useful role for the AFs.

During this first operation, the Spanish military had no specific role in ensuring that the population complied with the lockdown regulations. The Military Emergency Unit was the main military asset deployed during Operation Balmis and its highest priority was to contain the illness to save lives. The UME worked to reinforce the public health system throughout the country, acquiring, distributing, and even producing disinfectants and protective equipment. The Ministry of Defence undertook the operation. It was led by the chief of the defence staff (JEMAD) through the commander of the operations command (MOPS) in collaboration with the health inspector general. In turn, four component commands supported the operations command: the traditional land, air, and maritime armies and a special emergencies unit, the UME (Fig. 2). Periodically, other units, such as the Royal Guard or the Cyber Defence Joint Command, also collaborated (Navarro 2020).

The procedures for civil authorities to request military collaboration were more agile when the institutional communication structures of the army and the Ministry

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[4] IN homage to Francisco Xavier de Balmis y Berenguer, a Spanish military doctor who led a vaccination campaign against smallpox in the early nineteenth century.
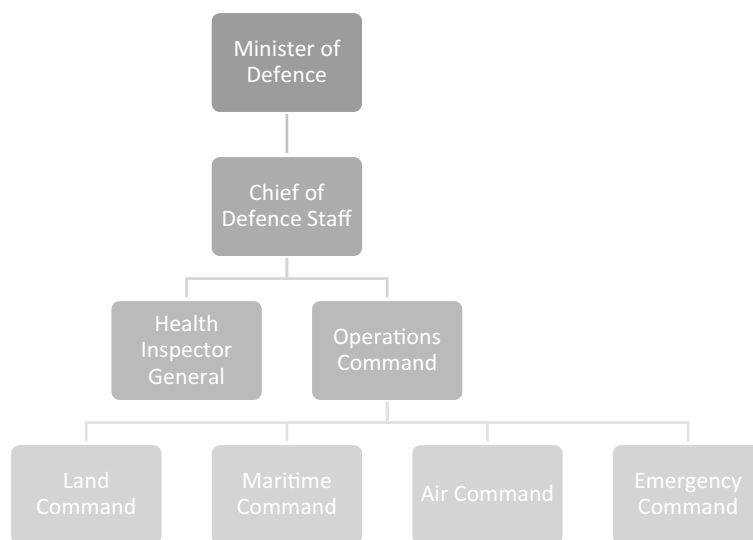
Fig. 2 Operation Balmis command and control. *Source* Prepared by the authors using data from Navarro (2020)

of Defence were integrated with the usual ones between administrations. In every province,[5] the Ministry of Defence had defence offices and army officers—named military commanders (COMIL) —providing guidance to the civil authorities about how to make requests. In any case, the early days were chaotic because there was a risk that the requests were being duplicated (Palacios Zaforteza 2020, 4–6).

Operation Balmis was Spain's largest peacetime deployment of the military and confirmed the military's expertise in protecting civilians during situations of national emergency (Izquierdo Carrasco 2020, 326). The number of troops deployed varied and was determined by operational needs that were based on the number of COVID-19 infections as they increased or decreased in Spain's cities. A total of 188,713 troops participated during the 98 days of Operation Balmis, an average of 1928 troops per day, or a quarter of the members of the UME (Martínez Mejide 2020). During the most intensive weeks of the operation, estimates are that the UME carried out some 550 performed activities a day in around 200 towns and cities and involved some 7800 troops, 300 of whom came from the military health unit (Navarro 2020, 10). Operation Balmis not only required a large number of forces and supplies but also organizational adaptation because units had to combine the preparation of their troops for relief missions abroad with the new requirements the pandemic presented. The near impossibility of providing enough prepared staff for both requirements at the same time was in the end resolved by extending the deployment of the troops abroad by two months (see Table 2).

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[5] The sub-regional administrative decentralization unit that divides Spain into 51 units.

Table 2 Activities the military performed during operation balmis

Support activities performed	Number of interventions
Disinfection of buildings	10.540
Health system support	959
Building provisional shelters	677
Logistics	428
Surveillance and reconnaissance	5297
Support to police forces	572

Source Revista Española de Defensa (2020)

Although the initial processing of the requests for action between the civil and military authorities was somewhat chaotic, it improved quickly, and all the requests for assistance were soon handled without any need to radically alter or expand the system. By mid-April 2020, the AFs had disinfected 1353 nursing homes, 500 hospitals and health facilities, 64 airports, 22 ports, and 247 metro, train, and bus stations (Palacín de Inza 2020, 22). Fourteen weeks after Operation Balmis began, the data were even more impressive: 20,000 operations in 2300 cities and towns in every autonomous community and city, of which more than 11,000 were disinfections of buildings. Interventions took place in some 5300 nursing homes, 4817 hospitals and health facilities, and 1300 community centres. Around 70 flights carried some 160 tonnes of medical equipment from abroad to locations around the country. No one can deny the commitment the AFs showed their fellow citizens. The spirit of service, reflected in the ideology of the UME, was constant and often above and beyond the call of duty. This effort and dedication, particularly during the pandemic's most critical and uncertain times, explains why Spanish society now holds health workers, the police, and the AFs in high regard.

When Operation Balmis ended in July and August 2020, the Ministry of Defence trained some troops in preparation for the anticipated second wave. The troops were trained to serve in the autonomous communities to trace infections and were in charge of early control and transmission detection (Fiter 2020). Their deployment for this task officially began with Operation Baluarte, which expanded slightly to focus on tracing and epidemiological oversight throughout Spain to prevent the uncontrolled spread of the pandemic. Operation Baluarte handled requests for support made to the military. The requirements of this second operation were lower than for Operation Balmis, but still involved more than 2000 troops. The secondary importance of Operation Baluarte for the military was reflected in the fact that while it was underway, the units kept preparing for their deployments abroad, unlike during Operation Balmis.

3.3 Readiness and Effectiveness

The AF's responsiveness during the first three intense, dramatic months was quite effective. This success can be ascribed to: (1) the existence of a defence staff operation command that quickly took control of the situation; (2) the operational adaptability and agility displayed by the different participant units; (3) the vast range of activities performed in a very short space of time without requesting new resources; (4) consistently well-planned actions that embraced all good ideas; and (5) the values of the AFs in general, and the UME in particular.

Part of the military's success during Operation Balmis was a result of its skills at deployment, manoeuvrability, command, and expansion across the territory under its control. Because it is equipped and ready to operate in demanding situations such as wartime, the Spanish military was able to perform operations related to the pandemic with a lower security risk than other bureaucracies. Normally, international deployments take three or four weeks to prepare for. While Operation Balmis did not involve the same logistical challenges as an international deployment, the military had to organize its pandemic activities in much less time. Part of the military's adaptability during the COVID-19 crisis was possible because the UME had already been trained, equipped, and organized for the challenges posed by the pandemic (Sánchez Tapia 2020).

The impact of COVID-19 on Spain's military deployments abroad was diverse. The NATO missions in Turkey, Latvia, and Lithuania were unaffected by the military's national involvement in the pandemic. In contrast, operations that involved contact with local forces were cancelled and included cooperative security operations in Senegal and Mauritania. Other training missions such as EUTM (Central African Republic, Somalia, and Mali), and Spain's contribution to Operation Inherent Resolve in Iraq and Afghanistan were paralyzed, as was the cooperative dimension of UNIFIL (the United Nations Interim Force in Lebanon), which was restricted to patrolling and surveillance (Spanish Operation Command 2021). Another powerful driving force behind the effectiveness of the AF's involvement was the analysis it made of the pandemic scenarios before it acted. Not only did the forces plan, prepare, and deploy across the entire country, but they rapidly reacted to the demands coming from the central operations command. Moreover, Operation Balmis required the operations command and the defence department's health inspector general and its network of centres to work jointly. Generally, the job was done quickly and efficiently.

Despite the military's effectiveness during the domestic deployment, some controversial questions arose and required consideration. First, effectiveness should not be confused with suitability. The armed forces were efficient in fulfilling the civilian authorities' requests during the pandemic, but as some politicians pointed out, their essential function is defence and taking action abroad. Second, especially during Operation Baluarte, the AFs spent so much time tracing infections that doing so knocked the normal activities of the units out of balance.

Another controversial point corresponds to the military nature of the UME. Part of the role of the UME is civil: to assist in natural disasters. The training and materials

used in this unit are not the same as those used in the rest of the armed forces; they are more like those used in civilian emergency units. As happened with the paramilitary civil guard, it seems appropriate to explore the possibility that the UME might remain part of the military but no longer be considered part of the armed forces. Should this happen, the unit could fall under the Ministry of Defence but functionally could answer to the Ministry of the Interior—as part of civil defence.

4 Civil-Military Relations

4.1 Securitization of the Pandemic

This case study includes two main trends that must be considered. First, there is a constant appeal for security to confront social issues -securitization- such as drug trafficking, health care, migrations, and natural disasters (Balzacq et al. 2016; Frenkel 2019). Second, in many countries, there is an increasing tendency for the armed forces to be assigned improper tasks -militarization- related to development, environmental protection, public security, or even the protection of prisons. None of these tasks are related to defence or deterrence. According to Martínez and Bueno (2024b) there are four drivers, combined or not, of securitization and/or militarisation: (i) Militarism (Lleixà 1986) reflects the persistent influence of military institutions; (ii) Discursive Militarisation (Kuehn and Levy 2020) legitimises their expanded role in missions requiring an auxiliary use of military force; (iii) Wildcard Administration (Jenne and Martinez 2022) sees the military filling gaps in state capacity, particularly in weaker governance structures; and (iv) Reverse Khakiwashing (Bueno and Martínez 2024) highlights how these missions reshape the military's image while reducing its traditional combat focus.

However, the military deployment during the COVID-19 pandemic cannot be understood as an *ex-novo* securitization process. It can, however, be explained by the previous six global state alerts in the several last years,[6] and because it was included as a national security threat in the 2017 National Security Strategy. Regarding the militarization process, the intervention of the military emergency unit could be a hint of this dynamic as the consolidation of this unit implies the militarization of civil protection services (Bueno and Martínez 2024). Nonetheless, the extraordinary nature of the COVID-19 pandemic, the absence of response mechanisms against it, as well as the limited nature of military functions at the time, indicate that the armed forces can play an auxiliary role in any extraordinary situation in which the state's usual mechanisms are overwhelmed.

Thus, the case of the Spanish military's involvement in the COVID-19 pandemic response cannot be understood as a militarization or a securitization process but more as the activation of the auxiliary role of the armed forces. This assessment is

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[6] SARS, A/H5N1 virus, A/H1N1 virus, wild polio virus, Ebola virus, Zika virus.

reinforced by the lack of protest about the military's involvement from political elites and society, who not only accepted and acknowledged the military's deployment but as we will later show, did so with gratitude. This was a case of neither securitization nor militarization, but rather the activation of the auxiliary role of the armed forces.

4.2   Civilian Oversight and Accountability

According to Spain's Constitution (Art. 97), military administration and defence policy are under the command of the executive power. This constitutional mandate is essential for a country that was once ruled by military authoritarianism. Not only does Article 97 define who is responsible for this policy, but it also makes it plain that the armed forces are part of public administration and have no political power. As stated earlier, the Spanish military has no domestic role except to provide emergency assistance according to the Constitution (Art. 8) and Organic Laws 6/1980 and 5/2005. This formal codification of the AF's powers and reporting structure can be at least partly explained by Spain's history, including its bloody civil war and Francoism. Due to its history of internal conflict, Spain's Constitution imposes a lot of restrictions and controls on the activation of the armed forces. According to the OL 5/2005, deployments of Spain's military can only be authorized when requested by other nations or under the EU, NATO, or UN mandates. Before the AFs deploy abroad, the government must request authorization from Congress to do so and, once the deployment is approved, provide accountability to Congress.

In asking the AFs to help respond to the pandemic, the Spanish government chose to enact the "states of exception" in Article 116 of the Spanish Constitution. Organic Law 4/1981 has developed this article for three types of exceptional states: alarm, emergency, and siege. Thus, Royal Decree 463/2020 declared a state of alarm in March 2020 due to the COVID-19 pandemic; a succession of decrees extended it to June 20, 2020. The Congress of Deputies again authorized an additional state of alarm for six months, until May 9, 2021. It is up to the government, authorized and controlled by Congress, to activate states of alarm or states of emergency within the nation. During the pandemic, the government did activate a state of alarm, but the military cannot provide a core role in this type of exceptional state—only when a state of siege has been declared. Therefore, the military had to collaborate with the civil protection service. Generally, the armed forces' main domestic task has been to assist during hazards, risks, or natural disasters, though this role has become more focused since the creation of UME. As well as deploying in exceptional cases, the military can act under two principles: (a) subsidiarity—armed forces act if the responsible autonomous (regional) government cannot deal with the threat in question, or if the emergency is national—and (b) temporality—their action cannot be unlimited in time, they are only empowered to act for a previously determined period (Martínez and Díaz 1999).

Transparency was one of the pillars of the government's communications goals during the pandemic. Both the prime minister and other members of the executive

branch appeared before the media on numerous occasions to provide information about the measures they adopted. However, most of the public information campaign fell on the technical management committee, made up of the technical directors of the Ministries of Health, the Interior, Defence, and Transportation, included the chief of the defence staff, the adjunct operational director of the national police and the adjunct operational director of the civil guard. During the first months of the pandemic, these people appeared daily to provide information. In fact, during the first 11 weeks of the pandemic, they made 166 appearances to relay information to the public; 43 of them featured the technical management committee, 17 were by the prime minister, and 74 by other ministers.[7]

The government also reported to Parliament, particularly the Congress of Deputies. The prime minister appeared twice in March 2020 to explain the measures adopted to manage the emergency. Later, requests to extend the state of alarm were followed by parliamentary debates before any authorization was given, in compliance with Organic Law 4/1981 and the Regulations of the Congress of Deputies (Art. 162 ff.). For the last six-month extension, which was adopted by the Resolution of October 29, 2020, the Congress of Deputies ordered the government to introduce a new provision on accountability in Royal Decree 926/2020. Article 14 of RD 926/2020 stated that the prime minister would ask to appear before a plenary session every two months—and the minister of health before the Consumer Commission of Congress every two months—to respond to pandemic data and account for the government's management of the state of alarm. Likewise, there was a provision that after the extension had been in effect for four months, the conference of the regional government presidents could then propose that the state of alarm be lifted following a review of the epidemiological, social, and economic indicators.

Apart from the declaration of a state of alarm, Parliament performed its ordinary duties of directing the government's activities; among them, those related to the management of COVID-19. In the Congress of Deputies alone, this manifested itself in the form of 12 urgent inquiries, 27 oral questions in plenary sessions and more than 1000 in front of commissions, more than 6000 questions requiring a written response, and four government appearances before the plenary and more than 200 at commission proceedings. Of all of them, intervention by the AFs was the focus of 19 questions to the government requiring a written response and eight appearances by the minister of defence before the congressional Defence Commission. Additionally, the Senate adopted almost 90 government control procedures, of which a dozen sought information about the armed forces' actions related to the management of the pandemic. All this data, which is housed in the databases of the two chambers, the Congress and the Senate, and which is publicly accessible, demonstrates the government's transparency and accountability during this period.

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[7] Ministry of Health:
https://www.sanidad.gob.es/areas/alertasEmergenciasSanitarias/alertasActuales/nCov/videosPrensa0320.htm

4.3   Public Image of the Military

Since the beginning of the transition to democracy until today, thanks above all to missions abroad, the image of the armed forces has improved greatly among the Spaniards.

There is little data from surveys from which to draw firm conclusions, but some data are relevant and significant. In 2017, 65% of Spaniards surveyed had a "good" or "very good" opinion of the armed forces (CIS 2017), a number that by 2019 had decreased to 52% likely due to a generalized decline in public opinion toward the state's institutions. When opinion polls were conducted after the first three states of alarm in October 2020, 53% of Spaniards had a "good" or "very good" opinion of the armed forces; practically unchanged (Sociométrica 2019; 2020). Only 52% claimed to have a better opinion of the armed forces due to its activity during the pandemic crisis, whereas 55% had a higher opinion of the police, and 55% also thought more highly of the civil guard (CIS 2020).

In 2019, when questioned about the cooperation between the UME and autonomous communities in catastrophes, 47% of the Spanish population said they wanted to see more cooperation. However, 78% considered it better for the government to create a civil service to intervene in cases of great risk or catastrophe, which rose to 83% in October 2020. Spaniards view the UME positively, but they still prefer that the civil service perform those duties (Sociométrica 2019; 2020). Spanish society has a positive view (85%) of the armed forces' participation in the pandemic crisis. Despite this, more than half of the population (53%) warns that the performance of the military during the pandemic did not lead to them improving their opinion of the armed forces. When broken down by ideology, 94% of those defined as right-wing held positive perceptions of the military whereas of those identifying as left-wing, just 78% held positive perceptions. An analysis of the autonomous communities reveals further divergences. While in the 17 territories the perception of the military is highly positive, in Catalonia and Basque Country, the positive views of the military are above average at 63% and 71% respectively. This correlates perfectly with the fact that in 2019 and 2020, two-thirds of Spaniards polled believed that the armed forces were a necessary institution, whereas only 41% in Catalonia and 40% in Basque Country agreed with that statement (Sociométrica 2019; 2020).

Although preliminary, these data show that Spaniards prefer civilian agencies to assist in catastrophes and calamities and that more people in autonomous communities with a higher non-Spanish background reject military institutions. This correlates with the views of Mario Kölling, who warns that "the Kingdom of Spain is one of the most decentralized countries in the world" (2019; 170) and "the Spanish model lacks an institutionalized cooperation mechanism among administrative levels" (Kölling 2019, 189). In any case, the data seem to demonstrate that the initial perception of Operation Balmis is generally positive.

5 Lessons Learnt

The management of the COVID-19 pandemic was a particular success for the Spanish armed forces. The UME had learned lessons from previous emergencies that contributed to its good performance during Operation Balmis. At the same time, the AFs faced difficulty maintaining active operations abroad during the pandemic. This has given rise to debates about whether or not the military should be used in domestic activities, the risks of militarizing security, the confusion between effectiveness and suitability, the growing risk of political influence over the military, and finally, whether or not the UME should continue to form part of the AFs, even if it is clear that it needs to be made up of military personnel.

Moreover, the COVID-19 pandemic highlighted the lack of available forces in other areas of public administration, like emergency services and police units, who could serve during crises. Coordination between agencies must increase, and it may be time to consider the possibility of integrating the Ministry of Defence and the Ministry of the Interior into a single ministry of security. At the same time, interesting debates are emerging about the need to have or to not have, civil service or reserve units that can be trained to do tasks similar to the work of Operation Baluarte. If the military could learn from civilian personnel experienced in data analysis, social patterns, and human behaviour, it would contribute not only to the readiness of military units but could provide experts in their fields, thereby reducing the negative impact of crises such as COVID-19. The debates that sprang up amid the crisis are probably here to stay. There is no doubt that legally declaring a state of alarm was not the appropriate way to begin to address the COVID crisis, but declaring a state of siege seemed politically excessive. For that, adequate legislation is yet to be designed and implemented.

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Smaller Established NATO Countries

Portugal

Helena Carreiras

Abstract Following the onset of COVID-19 in Portugal on March 2, 2020, and the declaration of a national state of emergency on March 18, 2020, the armed forces were tasked with an expansive range of domestic support roles, exceeding their typical crisis response. This chapter analyzes the scope and nature of these interventions, contextualizing them within Portugal's civil-military history. It argues that the successful execution of these duties, influenced by specific historical, social, and organizational conditions, strengthened civil-military relations and enhanced public trust in the military.

1 Introduction

In Portugal, the first cases of COVID-19 occurred on March 2, 2020, when two citizens who had traveled to Italy returned home and tested positive. Shortly afterward, on March 16, over 1000 cases and the first 12 deaths were reported, prompting the government to declare a national state of emergency on March 18, 2020. Numerous emergency measures ensued, including a mandatory lockdown and a stay-at-home rule, with restrictions on social gatherings, cultural events, and the working hours of restaurants and bars (Fernandes et al. 2021). However, following the initial successful handling of the pandemic (Ames 2020), in September infection numbers increased once more and reached an alarming rate by the end of the year. A second lockdown began on January 14, 2021 (Ames 2021), due to record infection and mortality rates (Belga 2021), coupled with the near breakdown of the National Health Service, as the country registered the highest number of infections per million inhabitants (Violante and Lanceiro 2021). In response, the Portuguese government, through the health ministry, put the military in a state of readiness to help fight COVID-19.

All branches were asked to support the public health emergency and were called upon to perform a wide range of domestic roles, sometimes greatly beyond what

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they had done in past crises. Political leaders turned to the armed forces to provide multiple services, from producing and distributing medical equipment to decontaminating sites, setting up mobile hospitals, and coordinating the vaccination process. Although these actions involved unprecedented deployment levels and heightened public visibility, the trend is hardly novel. Especially since the end of the Cold War (and like most other militaries), the Portuguese armed forces have amplified their roles in response to a changed security environment where new and complex threats have emerged. Beyond the traditional core mission of territorial defence—which itself has been reenergized considering the current great power competition—the military has prepared to, and increasingly intervened in, complex emergencies, both at home and abroad, taking on an ever-growing number of tasks.

In this chapter, I argue that the Portuguese military's involvement in the response to the COVID-19 pandemic had a dominantly positive impact. Analyzing the reasons for this assessment requires a short journey into the underlying conditions, starting with the role of the military in the construction of Portuguese democracy.

2   Domestic Operations

To understand the Portuguese armed forces' domestic role, it is necessary to provide a historical overview of the military's political involvement during the country's transition to and consolidation of democracy. This social and political context is crucial to explain the prevailing legal and political reluctance to allow the armed forces to intervene in homeland security, except in extraordinary circumstances. It is therefore useful to briefly examine Portuguese civil-military relations and the conditions that surrounded the military's involvement and subsequent withdrawal from the political scene (Carrilho 1985; Carreiras 2022).

As in all other political transitions in Portugal throughout the twentieth century, the military had a central role in the transition from authoritarian rule to democracy in 1974 (Carrilho 1985; Ferreira 1992). Unlike the transitions in other southern European countries such as Spain or Greece, Portuguese democracy did not emerge from a pact between elites. It was the direct result of a military intervention in a coup, that overthrew a 48-year-long authoritarian regime, and ended a 13-year-long colonial war. Signaling the start of the third wave of democratization in the world (Huntington 1991, 3), Portugal's *Carnation Revolution* inserted the military as a central element of political power for over a decade. The transition phase (1974–1976) was extremely complex and characterized by the military's intense participation in politics, institutional turbulence within the armed forces, and social turmoil. In 1976 when a new constitution came into force, the role of political parties in the process of democratic consolidation was strengthened, and the military's intervention in politics would gradually dissipate. However, until the first constitutional revision of 1982, Portugal's young democracy experienced what some called a *guided democratic consolidation* (Carrilho 1985), where the military's victorious sectors retained their power, mainly through the existence of the revolution council, an unelected body,

responsible for legislating matters related to the armed forces and for giving it wide political and constitutional powers.

In 1982, the first constitutional revision extinguished the revolutionary council, and the National Defence Law set the basis for a new institutional defence architecture, where the semi-presidential nature of the regime became salient. One fundamental change was the move to assign co-responsibility for defence matters to three sovereign organs—the president, parliament, and government. Analysts see this co-responsibility as fundamental to determining the nature of Portuguese civil-military relations, specifically its integrated pattern[1] (Egnell 2009; Amorim-Neto 2017; Bruneau 2016). Following these institutional reforms, the armed forces became gradually subordinated to political power and, although the stabilization of civil-military relations took another decade (Maxwell 1995), the formal institutions of a democratic regime were in place.

The full integration of the armed forces into the democratic political system evolved along some fundamental lines. First, fears of excessive "governmentalization" of the armed forces waned thanks to a political practice that ensured the non-partisanship of the military and the consolidation of a democratic culture according to which the military must remain strictly apolitical, even when advancing professional claims. Second, the armed forces became relatively marginalized within state institutions due both to geopolitical changes and to reforms that saw a reduction in the forces' numbers and an organizational restructuring that took place from the early 1990s onwards. Third, traditional military missions were redefined; their scope was widened beyond territorial defence to include collective defence, crisis management, peacekeeping, and humanitarian missions (Branco et al. 2010; Teixeira 2005). Fourth, and closely connected to the former, Portugal's participation in international organizations and alliances (UN, NATO, EU) took on a growing salience as did an increasingly closer link between how the armed forces projected itself internationally and the country´s foreign policy (Pinto 2010; Vitorino 1998; Teixeira 2019).

It is against this historical background of initial military intervention in politics followed by the full integration of the armed forces in the democratic state and the more recent reorientation of military missions towards peacekeeping that we can understand present defence policies, public debates on military missions, and the involvement of the Portuguese armed forces during the COVID-19 pandemic.

2.1   Constitutional and Legislative Framework

The Portuguese armed forces are an all-volunteer force of some 23,000 active-duty military personnel, of which 15% are women. Most of the personnel are in the army (54%), followed by the navy (26%) and the air force (20%). Like other Western

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[1] According to Egnell (2009), an integrated pattern relies on the existence of a comprehensive approach at the strategic level, and an inclusive command structure, bringing together all actors, both civilian and military, to military planning, thus encouraging its effectiveness.

democracies, Portugal bases its defence system on the principle of subordination of the armed forces to political power and has fundamentally oriented the forces' mission towards combating external threats and, since the mid-1990s, promoting international peace and security.

According to the Portuguese Constitution, national defence aims to guarantee democratic institutions and international conventions, national independence, territorial integrity, and the freedom and security of populations against any external aggression or threat. The armed forces, as a pillar of national defence, are responsible for fulfilling the international military commitments Portugal has assumed and participating in humanitarian and peace missions within the framework of the international organizations to which Portugal belongs.

The constitution also states that "the Armed Forces may be responsible, under the law, for cooperating in civil protection missions, in tasks related to the satisfaction of basic needs and the improvement of the population's quality of life, and in the field of technical-military cooperation within the framework of the national cooperation policy" (art. 275). The legislative framework thus accepts the forces' domestic missions, albeit in a limited way, during exceptional states of siege or states of emergency, or under the coordination of civil protection authorities when they are directed towards satisfying the basic needs of the populace and improving its quality of life.

These provisions are detailed and replicated in the National Defence Law as well as in the laws related to the structure and organization of the armed forces. The Ministry of Defence is responsible for all actions related to cooperation between the armed forces and other security forces and services. However, Article 48 of the National Defence Law reinforces that the armed forces can collaborate in matters of internal security under the constitution and that the chief of the general staff of the armed forces is to oversee the operational delivery of services along with the general secretary of the internal security system. Meanwhile, Article 24(1), states that the security forces are obligated to cooperate in combating aggression or transnational threats (Art. 24(1) LDN). If a state of war or exception is declared, the operational command of the security forces also falls on the chief of the general staff of the armed forces, (Law No. 44/86 of 30 September).

Additionally, a protocol of collaboration between the armed forces and security forces was signed on February 28, 2020. This agreement aimed to systematize operational measures and to deepen and optimize cooperation in particular contexts, specifically combating terrorism, while stressing that the use of the armed forces in support of internal security missions must respect the rules of engagement governing security forces. However, because specific rules have not been implemented, it has been hard to keep accountability. The only exception is the armed forces' involvement with civil protection missions, whose basic law (Articles 53–58, Law 27/2006 of 3 July) contains clearer standards on shared responsibilities and division of labour. Here, the Portuguese armed forces are considered "agents of civil protection."

Table 1 Portuguese armed forces support for the protection and safeguarding of people and property, 2020

Missions	Number
Medical evacuations	534
Search and rescue	316
Human organ transportation	30
Support for civil protection and to those fighting, monitoring, and dealing with the aftermath of wildfires	3440
Other support to populations	833
Provision of beach lifeguards	144
Area interdiction to ensure firefighting aircraft can scoop water safely	93

Source EMGFA (2021)

2.2 Deployment in Domestic Roles

Under this legal framework, the armed forces have been regularly deployed in civil support missions. This has been the case with flood relief and support to civil protection authorities in the fight against wildfires. In this latter role, the armed forces were particularly visible during the extremely volatile wildfires that tore through the country in 2017, when the army performed surveillance tasks. This participation imposed a considerable strain on an organization already dealing with significant personnel shortages.

Until 2014, civil support missions were called "other public interest missions." After that, they were renamed "missions in support of the development and welfare of the people," a term that focuses on protecting and safeguarding people and property. Beyond classic homeland defence activities, such as surveillance and control of areas under national sovereignty (the navy and air force act as maritime and air space authorities), the Portuguese armed forces have been regularly assigned a variety of civil support and disaster relief missions, namely, preventing and fighting wildfires, offering medical evacuation, transporting organs intended for transplant, and conducting search and rescue services. These latter missions have been particularly critical for the inhabitants of the Azores and Madeira islands. Table 1 lists the variety and number of such missions in 2020.

The Portuguese armed forces routinely conduct these sorts of operations which have become increasingly relevant since 2018, just as the responsibility for the management of all aerial firefighting means was transferred from the national civil protection authority to the air force.[2] All were ongoing at the time the pandemic broke out.

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[2] In 2018 the Portuguese air force became responsible for the centralized management of those means, although not the direct operation of the majority, which is still the responsibility of civilian contractors under the coordination of the national civil protection authority (ANEPC).

3 Military Deployment During COVID-19

3.1 *Coordination of the COVID-19 Response*

In Portugal, the coordination of the COVID-19 response relied on a chain of command and control involving different government ministries under the general leadership of the health minister and the prime minister himself. At the operational level, the institution responsible for the national action plan was the directorate-general for health, which, in close coordination with the regional health administrations (ARS) and the autonomous regions (RA), monitored the process of updating contingency plans throughout the country to ensure that the public health responses were cohesive. As the national health authority, the director-general for health, in addition to monitoring the national epidemiological situation, was responsible for declaring alert levels and articulating the responses of the different bodies in both the private and public health systems. The government created a specific task force for COVID-19 in which the Portuguese armed forces had a significant and publicly visible role. Any military intervention was in line with constitutional provisions and took place under the direction of other relevant national bodies and institutions, such as health authorities or police forces. The armed forces responded to requests from civilian authorities—the National Authority for Emergency and Civil Protection (ANEPC) or the Health Ministry—and did not help maintain public order.

3.2 *Roles of the Military*

Military support was visible in the following major areas (Pires 2022):

(a) *Strategic/operational planning and monitoring capacity.* Liaison officers were sent to support state secretaries responsible for government leadership at the regional level, to monitor and help plan the national response. In addition, a permanent capacity for planning and alert was guaranteed at the higher command level of the three services' operational centers.

(b) *Decontamination and disinfection capacity.* Through chemical, biological, and radiological defence (CBRN), hundreds of critical facilities were decontaminated (health units, social centers, and care homes) and disinfections were carried out by dedicated teams in schools, medical vehicles, and various state facilities.

(c) *Sanitary capacity.* This was the most visible of all deployed capacities. It involved the

- Installation of emergency military support modules (with inpatient beds and ventilators), through the armed forces hospital (HFAR, Lisbon, and Oporto centers) and the various health centers and units; implementation of rapid testing units; holding of hemodialysis sessions to support other hospitals.

- Quick transformation of a former military hospital in the Lisbon area of Belém into a COVID-19 military support center with capacity for 150 beds.
- availability, in response to direct requests from the National Health Service (SNS) and the National Emergency and Civil Protection Authority (ANEPC), of around 6150 beds and 85 tents, in support of 719 facilities in 256 municipalities (among others, hospitals, health centers, nursing homes, municipal councils, and civil protection agencies, as well as the distribution and storage of medical supplies.
- Conducting SARS-CoV-2 tests through the military laboratory unit for biological and chemical defence.
- Daily production of 4000 L of disinfectant gel and medicines at the request of the National Health System (SNS), and support in the storage, management, and distribution of the strategic reserve of medicines and medical devices of the SNS through the military laboratory of chemical and pharmaceutical products.
- Management, planning, and coordination of the national vaccination task force through an appointed coordinator (a vice-admiral) and a dedicated general staff with around 30 personnel from the three branches of the armed forces. It also involved ensuring that hundreds of soldiers throughout the territory were available to help administer vaccines.

(d) *Support for the homeless, refugees, and other citizens in need*. In this context, the armed forces distributed food and masks throughout the country and provided support to people in reception centers on the mainland and islands, in regiments, and on-air and naval bases which welcomed migrants (including those infected with COVID-19). The forces also supported the elderly, immigrant communities, and health professionals.

(e) *Transport capacity.* The forces activated a joint logistics center, which was responsible for planning air transport for medical material, and for patients between the mainland and the islands. In addition, the air force and navy sent health protection equipment to several Portuguese-speaking countries; the army transported personal protective equipment (PPE) and other materials by land between the Lisbon airport and the military laboratory (strategic reserve of medicines from the Ministry of Health); it also distributed PPE and disinfectant gel to 537 schools.

(f) *Training, teaching, and awareness-raising capacity.* The armed forces carried out 566 awareness-raising actions in schools, fishing ports, and prisons.

(g) *Capacity to increase and reinforce existing personnel by recruiting reservists and volunteers.* During the pandemic, more than 8,000 volunteers with different skills were mobilized to support the SNS and the armed forces.

Although the military was asked to work on many diverse tasks during the pandemic, the most visible of them was the above-mentioned coordination of the vaccination taskforce by Navy Vice-Admiral Henrique Gouveia e Melo, who took

over from a previous civilian coordinator on February 3, 2021. His charismatic leadership was later perceived as contributing to the huge success of the vaccination process. After leaving the task force, he became head of the Portuguese navy.

Two years after the start of the pandemic, in February 2022, many of these tasks, most notably the coordination of the vaccination taskforce, continued to be carried out by army officers under the direction of the national health authorities.

3.3 Readiness and Effectiveness

Although concerns have been expressed by analysts about the country's ability to ensure the readiness of the armed forces to be deployed internationally and their readiness to perform other critical domestic tasks (search and rescue, air and sea monitoring, wildfire fighting, medical evacuations), the public expressed no major opposition to the forces' focus on pandemic tasks. As in other countries, military training and exercises for the Portuguese armed forces were substantially reduced, but international deployments were not particularly affected. A report issued in 2022 stated that, "the readiness of deployed forces remains high. In all missions… restrictive protection measures were adopted, to avoid contagion from personnel coming from Europe. On a case-by-case basis, and still ongoing, some staff who provided services in non-essential functions, or who have seen their activities suspended, were being partially withdrawn. Support to national authorities, sharing of good practices, and identification of support measures within the scope of Defence Cooperation projects" (DGPDN 2022).

New recruitment calls for contract soldiers were limited, but the number of candidates grew, and existing contracts were prolonged to make up for the lack of new calls. Military schools and training institutions adjusted to hybrid teaching methods and many events included in the National Defence Day initiative were postponed.

4 Civil-Military Relations

4.1 Securitization of the Pandemic

The Portuguese media gave significant coverage to the support the armed forces provided during the COVID-19 pandemic. One of the most relevant features of this coverage was the way it helped build the profile of Vice-Admiral Gouveia e Melo, a submarine commander who coordinated the vaccination task force between February and September 2021. The mission he led was very successful (in October 2021, 98% of the eligible population and 86% of the total population were vaccinated against COVID-19) and his performance was considered exemplary. Although many factors explain the country's quite high early vaccination rate (i.e., strong historical support

for vaccination, the absence of relevant anti-vax movements, and the high quality of the national health system), the vice admiral's performance was, in the eyes of the media and the public, a decisive element in producing that result.

Always seen in uniform, Vice-Admiral Gouveia e Melo's image was that of a highly competent leader, a "tough guy" focused on the mission, and leading by example. His communication style was very clear and firm, and he conveyed his messages unambiguously. In the middle of a pandemic, where decision-making processes are contingent on extremely volatile and evolving circumstances, the country particularly valued his assertiveness. The admiral described the work of the task force in military terms: "For me it is a war, a personal combat, a group combat, [in which] the combatant on the other side is not a human being, but a virus, and we have to pull all the resources we have to fight this virus." (RTP 2020). But Melo also often emphasized that this was a civilian task and that the military's involvement was only a complement to the efforts of public health authorities. Nevertheless, Melo's performance (supported by nearly three dozen military from the three branches of the armed forces) helped consolidate the idea that the armed forces have a variety of planning and operational capacities that can and should be used in internal emergencies, thus reinforcing public support for the military taking on domestic assignments.

Surprisingly, given the above, there was limited public debate about the admiral's strong military persona; some even occasionally idolized his "heroic" trajectory. He was indeed a media phenomenon, both nationally and internationally; elected as one of the most powerful persons in the country in August 2021 by the *Jornal de Negócios*, he was decorated by the president of the republic and received awards from other civil society organizations. According to some analysts, his charismatic leadership of the task force and good use of the media contributed more to the positive image of the armed forces than any of the forces' previous communication campaigns.

4.2   Civilian Oversight and Accountability

Reactions to this new role for the military have been overwhelmingly positive at all levels, from politicians to the military organization itself to the Portuguese public. No one has publicly questioned the appropriateness of this kind of mission or its potential to clash with the requirements of the military's core missions as defined in Portugal's constitution; nor has the armed forces' overall adequacy for such a mission been the object of policy debates.

As far as civil oversight and accountability for the armed forces' actions are concerned, Parliament retained an important oversight role. The legal dispositions found in the constitution and national defence legislation reserve the right for Parliament to monitor the government's execution of national defence policies, including the use of the armed forces. That involves, for example, assessing decisions taken by the government about whether to station military forces abroad in international missions, which need to be communicated to parliament beforehand. Parliament's National Defence Commission must hold hearings with the Minister of National

Defence and conduct investigations of its own, if need be, through committees of inquiry.

During the pandemic, the Parliament exercised constitutional oversight through the National Defence Commission, which regularly sought information about the roles of the armed forces, both from the defence minister and the chiefs of staff in parliamentary hearings. One hearing involving the general chief of staff of the armed forces and the director of the national police questioned an isolated incident involving police and army police soldiers who were imposing a security perimeter to secure a decontamination zone around a care home at the end of 2021.[3]

While there have been other, and thus far inconsequential, attempts at legislating the use of force by the military inside the country, and while the topic raised concern among the defence community, politicians and military authorities alike were extremely careful to frame the military's role in the COVID-19 response as a complementary one that supported civilian authorities and that was conducted under the rule of law. The forces grabbed the opportunity to raise their public profile—and to use the situation to help make up for previous scandals related to ammunition thefts, the death of two special forces' recruits during training, and allegations of corruption related to supply management.

4.3 Public Image of the Military

As measured by public opinion surveys on defence and the armed forces that have been carried out since the 1990s, the Portuguese population was highly supportive of the military's domestic role during the pandemic. Such support echoed equally high levels of trust in the armed forces and a particularly strong support for non-military missions. All existing surveys show general support for the existence and importance of the armed forces throughout the entire democratic period. The percentage of those who consider the armed forces unnecessary is minimal among the Portuguese population. In 2009, 83.2% of those surveyed considered the armed forces necessary and saw them accomplishing an important role in the country's defence. Following a European trend (European Commission 2000), the armed forces were the institution the Portuguese public trusted the most, even if trust levels were not overwhelming (6.98/10); this contrasted sharply with trust in political parties (3.35/10) and even the government itself (4.57/10). In 2021, support dropped slightly but was still strong, with 69% considering the armed forces as very necessary and 28.8% admitting that although they did not feel the forces were very necessary, they should nonetheless exist; trust in the armed forces, in turn, remained high (7.41/10) if compared to the courts (5.0/10) or Parliament (5.12/10) (DGRDN 2021).

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[3] In this incident, some soldiers carried their personal firearms and the police required them to identify themselves. The fact that no force was actually used (which the military is legally prohibited from doing in domestic operations) and that such procedure was allowed and already routine during the transportation of dangerous substances, led to the issue being quickly dismissed (see Vitorino and Rodrigues 2020).

However, when questioned more specifically about participation in military activities, there has been a consistent decline in approval levels among the Portuguese public. Although attitudes remain positive, people are not interested in taking part in military service, displaying the so-called "without me attitude" that sociologists have observed in other European contexts (Manigart 2003). When asked, "Would you recommend military service to a friend or family member?" public attitudes have been more restrained than when evaluating the overall necessity and prestige of the armed forces, but the percentage of those who replied "yes, in any circumstance" was still 38.9% in 2009 and 50.2% in 2021.

A less positive response comes when the public is asked about funding for the armed forces' resources and equipment. Surveys indicate that military budgets, equipment, and material resources are perceived as scarce and lacking in modernization. In 2009, where survey respondents could evaluate the armed forces, the availability of means and equipment was the factor that received the most negative evaluations. Symmetrically, a higher percentage of those thought the military budget was too low (17.3%) than those who considered it excessive (10.6%). (Meanwhile, 26.4% considered it was appropriate, and 45.5% did not have an opinion.) In 2021, 41.7% of the respondents considered the number of soldiers too low while 61% perceived the defence budget as insufficient.

Public attitudes about military missions reflect two interrelated trends. First, there is growing support for missions to widen their scope—from the traditional constitutional mission of territorial defence to international missions supporting defence alliances, preventing terrorism, offering humanitarian relief, or domestic missions in support of populations. Second, the public sees peacekeeping missions as legitimate. This approval has shifted from "clear but not enthusiastic" (Matos and Bacalhau 2001, 122) in the 1990s, to a very positive view by the end of the 2000s. After over a decade of continuous participation in international military missions, the Portuguese kept showing their support for this type of mission, which the public considered to be among the most important, immediately after territorial defence and combatting terrorism (Carreiras 2011). However, seeing peace support missions as legitimate should be understood in a larger context: that of growing support for non-military missions aimed at promoting peace, defending human rights, providing emergency relief, and supporting the population's quality of life, which run parallel to the public's disapproval of traditional combat operations and the use of force (Vaz Pinto 2014, 31; Carreiras and Teixeira 2022; DGRDN 2021).

5   Lessons Learnt

A 2022 report from the Ministry of Defence suggested that the military's role during the pandemic could lead to better cooperation between different actors (DGPDN 2022). This includes the military, universities, research organizations, businesses, and other relevant groups. The goal is to work together to identify weaknesses in the

country's defences and find ways to strengthen them. This could then lead to a more coordinated system to respond to future crises.

The report highlighted a few key areas for improvement: better information sharing; assessing our weaknesses: strengthening critical infrastructure such as transportation, energy, and communication systems; updating emergency plans and improving crisis management by focusing on predicting and preventing crises, rather than just reacting to them.

Finally, the report suggested that the military should play a greater role in helping international organizations like NATO and the EU prepare for crises. This could involve sharing expertise, providing resources, and coordinating efforts in areas such as stockpiling essential supplies; creating a dedicated command to handle humanitarian missions; establishing strategic reserves, and setting up a planning cell for future crises.

The COVID-19 pandemic provided the Portuguese armed forces with a chance to emphasize its legitimacy in the eyes of the public, raise its public visibility, and strengthen its overall military health capacities. Questions remain, however, about whether the institution will be able to sustain such diverse roles in the future, especially considering that the armed forces have been facing significant challenges in the form of personnel reduction, recruitment and retention difficulties, budgetary constraints, and technological obsolescence (Carreiras and Teixeira 2022). Additionally, the geopolitical shifts following the war in Ukraine will certainly place pressure on the armed forces to focus more on its core missions and conventional operations.

Regardless, the Portuguese case fits with Wilén's analysis: "While taking on… domestic support roles may undermine the military's capacity to perform core tasks in the long run, such roles can also increase the public's understanding of military versatility and increase its domestic popularity. These supportive tasks may therefore help to improve civil-military relations and increase the armed forces' legitimacy" (Wilén 2021, 29). This result was made possible by the confluence of different factors, both structural and procedural: strict respect for the constitutional provisions regarding the military's support role, framed by an integrated pattern of civil-military relations; high support among the public for the armed forces' domestic support missions and high trust in the military, and effective military leadership of the vaccination process.

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Netherlands

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Abstract This chapter examines the role of the Netherlands armed forces in supporting civilian authorities during the COVID-19 crisis, focusing on their motivations, development, and coordination of military support. It begins with an overview of the composition and domestic role of the Netherlands armed forces, after which it delves into the constitutional and legislative frameworks. Next, the chapter maps the role of the Netherlands armed forces, particularly during the COVID-19 crisis. It details the evolution, nature, and dynamics of military support activities and how this extensive involvement influenced civil-military relations. The findings highlight that effective civil oversight and accountability stemmed from a balance of trust and control, emphasizing the importance of open dialogue, collective goals, and connected organizational structures. Additionally, empirical data underlines that the Dutch armed forces has become a structural partner in crisis response, challenging the premise of last resort. This chapter concludes that maintaining the role of last resort requires a careful balance between domestic- and classical tasks (defending the state) to guarantee operational readiness.

1 Introduction

This chapter describes and analyzes the role of the Dutch armed forces in their support of civilian authorities during the COVID-19 pandemic. The COVID-19 crisis severely affected vital functions of Dutch society which posed challenges for public administrations that were trying to meet the new and emerging conditions. Traditional crisis

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organizations, toolkits, and contingency plans proved ineffective in responding to this crisis (Boin et al. 2020). The Dutch government called upon voluntary organizations and the military to support overwhelmed emergency services (Zijderveld and Kalkman 2023). The Dutch military answered the call and provided additional medical supplies, personnel, and expertise. It became the most extensive military domestic operation since World War 2. Each service of the Dutch armed forces, but especially the army, provided resources to the national COVID-19 response. The findings of this chapter are based on research conducted by the first author; the data contain 152 hours of observation in civilian and military emergency operation centres, 31 interviews (transcribed) with military and civilian crisis response managers in 2020 and 2021, and a document analysis consisting of military operation orders and daily situation reports from military deployments (see Zijderveld and Kalkman 2023).

The Netherlands armed forces consist of the army, navy, air force, and the Royal Netherlands Marechaussee (RNLM) (royal military constabulary) led by the central staff and supported by the joint support command and the defence materiel organization. The RNLM is a gendarmerie-type force (police organization with military status). Its tasks are border control, security and surveillance, and international and military police tasks. The Ministry of Defence has around 74,000 employees, including both military and civilian personnel with a current budget of around €12.5 billion (Ministerie van Defensie 2022a). Based on recent geopolitical developments and the war in Ukraine, the government has announced a budget increase of €5 billion in 2022. Consequently, in 2024 the Netherlands should meet the NATO target for defence spending (2% of GDP).

Since the suspension of conscription in 1997, the Netherlands has had an all-volunteer force. However, every Dutch 17-year-old (including girls) receives a letter explaining that they could be conscripted up until age 35 if conscription needs to be reactivated. The Dutch armed forces aim to become more scalable, aiming for two-thirds professional soldiers supplemented by one-third reservists and part-time personnel. In 2023, the Netherlands armed forces had 6500 reservists, a number that is expected to grow to approximately 20,000 in 2035.

2 Domestic Operations

2.1 Constitutional and Legislative Framework

The role of the Dutch armed forces is guided by Article 97 of the Constitution (2018) which states: "There shall be armed forces for the defence and protection of the interests of the Kingdom, and to maintain and promote the international legal order. The Government shall have supreme authority over the armed forces." The Constitution's explanatory memorandum specifies the protection of the interest of the kingdom: "support to the civilian authorities (in all circumstances) in public order

management, law enforcement, and disaster and crisis management, both nationally and internationally." Domestic support to civil authorities is further specified in the Law for the Safety Regions (article 51) and in the ministerial decree for military support in the public interest (*Regeling Militaire Steunverlening in hetOopenbaar Belang* 2014 (MSOB), *Wet Veiligheidsregios* 2010). This form of military support usually emerges when emergency services in the safety regions (i.e., public bodies that include the fire department and medical services) lack sufficient manpower, supplies, or expertise. Examples of such support include the evacuation of citizens in case of flooding or firefighting in a nature reserve (Neuteboom 2017). The Law for the Safety Regions was recently evaluated, and the report concludes there are no specific points for improvement in the legal provisions concerning the armed forces (Evaluatiecommissie Wet Veiligheidsregio's 2020).

Domestic support to civil authorities for police tasks is specified in articles 58 and 59 of the Police Law 2012 (Politiewet 2012). Article 58 states that "in special circumstances" the armed forces can support the police. Article 59 forms the basis for the special intervention service, a combined unit of police and military personnel. This special forces unit consists of intervention and arrest teams and is used in cases of terrorism or the arrest of high-risk individuals. During the COVID-19 pandemic, most requests followed the MSOB procedure.

2.2 *Deployment in Domestic Roles*

The Netherlands has a long history of domestic deployments of the armed forces, mainly in natural disasters and other emergencies, such as the big floods of 1953 and the housing riots in the 1980s. However, it was not until after the Cold War that the military's domestic role began to grow, albeit slowly (Kalkman 2016). As of 2005, governmental letters to Parliament describe how the armed forces' domestic role should develop, evolving from a "safety net" and a "last resort" to a "structural safety and security partner," which implied a larger domestic role with guaranteed funding (Ministers van Defensie en van Binnenlandse Zaken en Koninkrijksrelaties 2005). In addition, the military was also to share the knowledge, skills, and resources that it had acquired in expeditionary operations. These skills are valuable and can be deployed in cases of domestic security threats and disasters. In 2006, the government further specified these measures (Ministers van binnenlandse zaken en koninkrijk-srelaties en van defensie 2006). The most profound change it announced was the guaranteed availability of those with specialist capabilities (4600 military personnel) under civilian control.

With these capabilities, the armed forces would be able to support civilian authorities in public order management, anti-terrorism, surveillance, border control, protection of harbors, explosives detection, and disaster management (in addition to "regular" crises and disasters). Regional military commanders, assisted by 25 military liaison officers who are posted in the 25 safety regions coordinate the civil-military support (see Fig. 1). Kalkman and de Waard (2017) characterized these developing
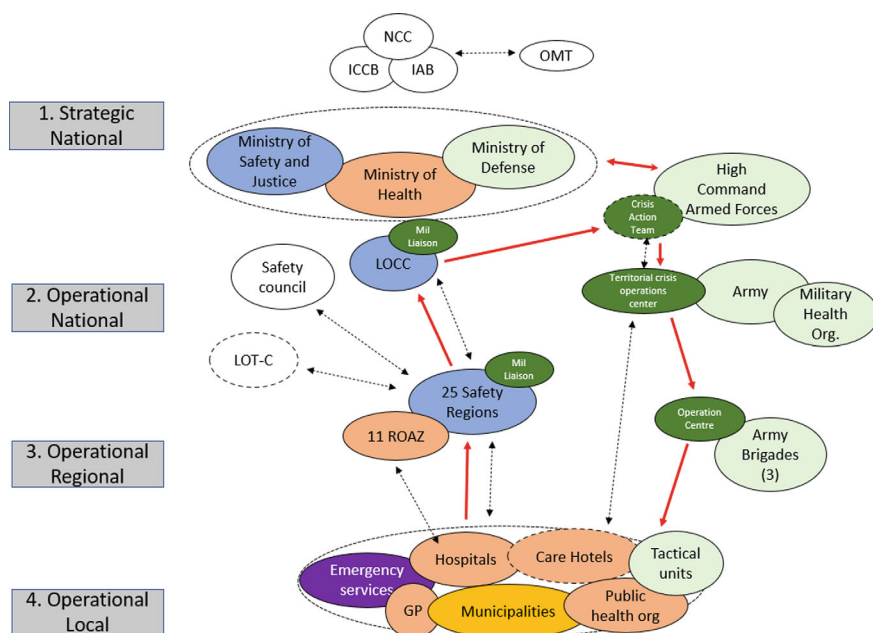
Fig. 1 The four organizational levels of the civil-military health network

relationships as an evolution from policy-oriented control-based relationships in 2003 toward action-oriented, trust-based collaboration with civilian partners in the safety regions as of 2012.

Table 1 shows the number of armed forces' domestic deployments between 2020 and 2023 (Tweede Kamer der Staten-Generaal 2021, 2022, 2023). This table lists the number of operations only. Caution should be taken in interpreting these numbers because some operations are short and involve few personnel while others take a long time and involve a lot of personnel (long commitments to Dutch hospitals or HNS). The COVID-19 crisis stands out in this respect, and the financial impact was consequently very high (approximately €20 million in 2020 versus €1.5 million in an average year).

3   Military Deployment During COVID-19

3.1   *Coordination of the COVID-19 Response*

In contrast to the military, the Dutch safety system is complex, fragmented, and organized as neither top-down nor bottom-up; it consists of multiple layers (Wolbers et al. 2018). To unravel this complexity and explain civil-military coordination

Table 1 Number of domestic operations

Domestic deployments of the armed forces				
	2020	2021	2022	2023
Explosives on land	2185	2291	2261	2105
Explosives in the North Sea	60	69	51	23
Diving assistance	4	4	2	–
Law enforcement	63	44	47	43
Interception air QRA	1	0	2	2
Public order management and security	19	36	67	44
Law for the safety regions	22	12	13	9
Military support in the public interest	7	7	26	9
Support of the Caribbean islands	14	25	24	15
Host nation support (HNS)	2	2	1	3
COVID-19				
Military support in the public interest	107	15	–	–
Support of the Caribbean islands	7	4	–	–

during COVID-19, Fig. 1 gives a basic outline of the civil-military network during the pandemic crisis. The strategic civil-military level comprises the Ministry of General Affairs (Prime Minister), the Ministry of Defence (MoD), the Ministry of Health and Sport (VWS), and the Ministry of Justice and Security (including safety) (J&V). During the COVID-19 crisis, the government deployed the National Crisis Committee (NCC) to provide "operational support" at the national strategic level. The main strategic goal was to find a balance between continuing (economic) activities and preventing the healthcare system from becoming overburdened (Dijsselbloem et al. 2022). The goal at the national operational level was mainly to integrate the regional crisis response efforts. At this level, the national operational crisis centre (LOCC) is the organization primarily responsible for managing national crises and prioritizing and approving military support requests. However, during the COVID crisis, this organization was neither equipped nor prepared to coordinate the national operational response on a scale of this magnitude.

Therefore, the national operational team COVID-19 (LOT-C) emerged to support the national crisis response system by managing COVID-19 information flows between national and regional stakeholders. The core of Dutch crisis management lies in the regional-level safety regions. This is a networked administrative body consisting of emergency managers with different operational backgrounds (Boersma et al. 2012). During the COVID-19 crisis, the safety regions scaled up to the highest alert level for more than two years, which amounted to permanent military representation in the safety regions (Duin et al. 2020). In addition, the network of the country's health organizations, which are organized into 11 health regions (ROAZ), enables the health partners to collaborate in times of crisis. Most military support was

coordinated through the existing crisis response structures, but in the case of COVID-19, this crisis response chain was ill-prepared for the long-lasting nature of the crisis (Dijsselbloem et al. 2022; Duin et al. 2020). For instance, there were insufficient operational connections between the regional-oriented crisis response structures and the national government. Therefore, different national operation centres were developed with the support of military officers including the LOT-C (Zijderveld and Kalkman 2023).

In Fig. 1, the red arrows show the request routing for military support. In general, most requests for assistance were collected in the safety regions. Signed requests should be prioritized by the LOCC. However, in practice, the LOCC had limited capacity, and almost all requests were directly passed through the armed forces high command, which assessed the possibility, desirability, and legality of the request. If the military granted the request, military planners on their respective levels organized the resources and provided an operational order, including its necessary limitations. Whereas the armed forces high command assessed the requests, the Netherlands army coordinated most domestic operations on a national level. To cope, the national territorial operation centre reorganized its organizational structures, added 150 military planners and supporting personnel, and joined civilian crisis response networks to coordinate most domestic COVID-19 support from the military at the national level.

3.2   Roles of the Military

Based on the COVID-19 infection waves and military operation orders, we divided military support during the COVID-19 crisis into four phases (see Table 3).

3.2.1   Phase 1, February 2020: An Unknown Virus Appears

After the initial COVID-19 outbreak in Wuhan, China, the Dutch armed forces supported the repatriation efforts of Dutch civilians abroad by setting up an airlift and a quarantine location in February 2020. With images of empty streets in Wuhan and overcrowded hospitals in Italy in mind, civilian and military leaders felt they needed to act quickly. Consequently, the general staff of the Dutch armed forces decided to keep military medical personnel and reservists from the military health organization in civilian hospitals as much as possible. They did this both to provide support to hospitals, which they believed were going to become overloaded, and to gain experience in COVID-19 care in case the military ended up being the "last person standing." At the end of February 2020, the first local outbreaks began in the southern part of the Netherlands.

3.2.2   Phase 2, March – June 2020: The Crisis Overwhelms the Crisis Response Structures

Infection rates increased dramatically in March 2020 and the media began to call for the military to get involved, which underlined the severity and urgency of the COVID-19 outbreak (Kalkman 2020). At the same time, all missions and military training were scaled back or cancelled, and recruitment was stopped. This freed up many military resources for COVID-19 support. On March 17, 2020, the minister of defence stated: "The military is ready to help wherever and whenever." Soon thereafter, the military launched the COVID-19 Order "Resilience" to support civilian authorities. The RNLM increased its border patrols, the medical branch deployed the emergency hospital and provided respiratory machines to civilian hospitals. At the regional level, medical planners organized the first patient evacuation and coordination cell (RCPS) to coordinate the civilian distribution of patients between hospitals in the southern provinces.

Based on its role as helper of last resort, the military's assistance took several weeks to fully unfold as the military had to wait until the civilian medical system was overburdened and military support became a necessity (Bos 2020). Because of the uncertainty of the situation, the military was initially hesitant to provide large-scale support as it had to keep resources in reserve so it could act as the last person standing. The military also hesitated to provide support to nursing and residential care homes because infection risks were high, and the military faced the risks of bad public exposure. Therefore, different arrangements had to be made for these facilities, including the military forming hygiene teams and implementing additional hygiene protocols.

At the end of March 2020, the situation in nursing homes was worsening because of understaffing. On March 29, 2020, medics from the 43 Mechanized Brigade were the first to give support to a severely infected nursing home. The military medics on site referred to this situation as "a silent battlefield behind closed doors." Infection rates stabilized by the end of April 2020; however, by that time hospitals had also become increasingly understaffed. Therefore, the military increased its support and acted as a backup at the request of hospitals when they had become overwhelmed. This support consisted of military planners, doctors, and nurses who the military provided to increase the national intensive care (IC) capacity in hospitals. Their tasks were primarily aimed at COVID-19 care. The military planners developed work schedules for the hospital staff. During the first COVID-19 wave, the military provided hospitals with all of its available ventilators. In addition, a national emergency hospital was deployed on April 7, 2020, to further increase IC-bed capacity.

By March 2020, crisis response organizations were also increasingly asking for military expertise. Several examples can be found at different organizational levels. First, logistical specialists supported the development of new logistical supply lines that enabled the distribution of preventive COVID-19 supplies like facemasks and splash goggles (LCDK). Second, within a few days, medical officers developed the organizational outlines of a national crisis response centre for the coordination of COVID-19 patients (LCPS). This emergency operation centre was based on a military

model. It oversaw the IC capacity of all Dutch hospitals and enabled patients to be transferred, when needed, to hospitals that had availability. In March 2020, the national operational team COVID-19 (LOT-C) was established to manage COVID-19 information flows between national and regional stakeholders. Military and former military officers heavily supported the development of this operation centre and soon found themselves in leading positions. Third, on an operational level, a small military medical team, together with health providers and a hotel owner, coordinated the development of the first low-care COVID-19 hotel.

At the grassroots level, military and civilian personnel worked together easily, mainly because military liaisons gave specific instructions to the tactical teams and underlined the importance of maintaining a service attitude and remaining sensitive to civilian concerns. During the support, a shared goal developed: that all were there to fight COVID-19. To our knowledge, civilian health providers were positive about the support the military provided, as daily reports, interviews, statements in the media, and personal letters of appreciation all demonstrate. According to personnel in nursing homes, the soldiers' attitude and work ethic provided them with hope. The presence recover Anders created temporary relief for the permanent staff, allowing them to take a breath and recover slightly, enabling sick civilian personnel to recover, and helping prevent new cases by sharpening each facility's COVID-19 prevention measures. After May 2020, the COVID-19 crisis began to be increasingly under control, and military support was steadily reduced in the weeks that followed.

3.2.3 Phase 3, July 2020 – December 2020: COVID-19 Support Combines with Improving Military Readiness

During the summer of 2020, COVID-19 infections were relatively low. However, by September 2020, infections had increased once more, even as resources for domestic operations were scarce due to the resumption of large-scale military training. To effectively allocate military resources, the military needed to reorganize and reprioritize so it could balance domestic operations with training requirements. As a result, medical support for hospitals became centralized, and support for nursing homes was downscaled. This led to multiple dilemmas. A Senior Planner (D06) at the strategic level explains the dilemma of ceasing support to nursing homes in late summer 2020: "We cannot support all nursing homes. There are more than 700 of them. Moreover, the Ministry of Defence could not gain from it anymore (in terms of publicity). We could no longer make a difference there. It is a drop in the ocean."

A Senior Officer for Domestic Operations (D020) adds that the Ministry of Defence had additional considerations to stop:

"*Military capacity was diminishing due to the resumption of military training and the prognosis for survival was too limited to make a difference in nursing homes. However, we couldn't say this out loud, as it would immediately hit the media and result in parliamentary questions. To provide effective support, we decided to centralize our medical capacity in a hospital. In hindsight, that was an easy choice, but the greatest need was in the nursing homes, and that's where we were most needed.*" A military liaison (D025) working in the safety regions, faced

different dilemmas due to the decision to stop supporting nursing homes: "*We are willing to support hospitals but not nursing homes.*" Yet, it was in the nursing homes where we truly made a difference according to this liaison.

In September 2020, the National Employers' Organization (VNO-NCW) started to develop XL-COVID-19 test facilities. The development of these centralized facilities with higher capacities was led by a nationally well-known retired army general. Initially, the military provided experienced staff officers to support the planning process. A few weeks later, in October 2020, the military dispatched 1000 regular personnel to Operation Order Raphael. This generous support led to great discontent within the safety regions, as applications for support from nursing homes were denied even though nursing homes were still in dire need. This led to frustration on the work floor, a Senior Officer for Domestic Operations (D026) summarize all grievances and explained: "*In nursing homes, where people were simply dying, and we did nothing* (after the summer of 2020). *And while there was no real need* (in the COVID-19 testing centers), *we deployed 1000 personnel and told the nursing homes we had no capacity.*"

3.2.4   Phase 4, January – June 2021: The Country Oscillates Between an Endemic and Full-Blown Crisis

In January 2021, a new COVID-19 variant (B1.1.1.7) emerged. It was more contagious than previous variants and was expected to lead to overburdened hospitals. To cope with this so called 'black- scenario,' the Netherlands army released the COVID-19 Ultimatum. This order was a far-reaching example of the military's last-resort role. It described the preparation and execution of plans it had developed for a time when vital structures in society failed. Based on this analysis, the army developed a last-resort plan for the armed protection of medical facilities and support to the police in case of riots.

Also, that month the Minister of Defence reiterated and underlined her pledge in the national media that the armed forces had 1000 troops ready to support civilian authorities for the COVID testing and vaccination campaign (Operation Autumare). However, military support for this campaign was rather limited because civilian vaccination personnel were already recruited and consequently the need for military support diminished over time. As of March 2021, the end of the COVID-19 crisis appeared in sight thanks to the increased availability of effective vaccines. However, waves of infections continued to flare up, leading to recurring calls for military support in the months that followed.

In the first and second phases of the COVID-19 crisis (which lasted 5 months), 80 support missions were executed, the equivalent of 38,000 working days (Tweede Kamer der Staten Generaal 2021b). According to military crisis managers, the military provided all available medical resources to civilian authorities. During the third and fourth phases (which lasted 12 months), 55 requests for support were granted,

Table 2 Overview of military tasks during the COVID-19 crisis in the Netherlands

	Medical context	General crisis context
Specialist resources	1. Doctors and medics reinforce hospitals and nursing homes. Provision of testing laboratories, respiratory machines, and the activation of the military emergency hospital. One navy vessel with medical facilities supports overseas areas. Helicopters repatriate patients from the Wadden Islands	2. Crisis response experts support national crisis response organizations and the development of new crisis response organizations. They provide expertise to develop the testing and vaccination campaign and support for COVID-19 experiments, a COVID-19 app, and COVID-19 passports. Military liaisons provide ongoing advice and assistance from the safety regions
General resources	3. Dutch citizens abroad are repatriated and quarantine locations are provided. Logistical planners work with hospitals and nursing homes, and a night guard is provided for nursing homes. Personnel assigned to testing and vaccination national health service (GGD/GHOR). Bailey bridge deployed to increase the accessibility of a COVID-19 test facility	4. The military provides additional supplies and personnel for food banks and increased border patrol gendarmerie

consisting of a total of 34,125 working days. (Table 2) summarizes the most important domestic activities the military undertook in response to the COVID-19 crisis based on the nature of the support and the context in which it was provided.

During the COVID-19 crisis, we observed fundamental, functional, political, and altruistic reasons to deploy the military domestically. First, based on the rule of law, the military was domestically deployed based on its duty to support civilian authorities during crises (see Sect. 2). Second, a dire need emerged in medical facilities for additional resources and expertise, and according to civilian healthcare professionals, the military could sometimes make a difference in relieving overburdened hospitals and nursing homes. From a military perspective,[1] commanders sought to ensure the continued employment of personnel and by providing meaningful tasks, as military training was cancelled and many soldiers were sent home due to COVID-19 restrictions. However, this functional perspective cannot fully explain why the military supported medical organizations on this scale because the increase in working days is relatively limited. Therefore, political and altruistic reasons were more powerful motivators for why and how the military was deployed. From a political perspective, the military's presence bolstered political leadership. Domestic deployments also meant good exposure for the military; the military communication department

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[1] In 2020, the Netherlands military supported with an equivalent of 160 full FTE (38,500 working hours), while approximately 1.3 million people work in the Dutch healthcare system.

Table 3 Timeline of military support for COVID-19 efforts

Phase	Characteristics	Highlights of military efforts	Role of the military
1. February 2020	COVID-19 spreads like a peat fire: invisibly. Government emphasizes that there is no reason to panic, that everything is under control	Repatriation and quarantine locations set up and staffed	Last resort; connected in safety regions
2. March–June 2020	First COVID-19 wave. Crisis declared, state of emergency implemented. Civilian crisis response structures are overwhelmed, the country is partly locked down, an economic recession ensues	Military provides medical and logistical personnel and materiel and experts for emerging civilian Emergency Operation Centres (EOC). Navy vessel sent to the Caribbean. Gendarmerie increases border patrols. Operation COVID-19 Resilience set up	Reactive and eager to support. Permanently connected with regional and national civilian crisis response networks
3. July–December 2020	October 2020: Second COVID-19 wave COVID-19 is increasingly controllable and endemic in society. Crisis structures are permanently embedded. Large-scale testing possibilities develop	As above plus centralization efforts for medical support. Hesitation about continuing support in nursing homes. Support testing campaign set up (1000 soldiers on notice to move). Military training continues (straining resources). Operation COVID-19 Persistence (continuation) and Operation Raphael (testing) both set up	Proactive and hesitating to support. Ibid network
4. January–December 2021	Third COVID-19 wave. Vaccination campaign starts. The new COVID-19 (B 1.1.1.7) variant could collapse the Dutch health system. Far-reaching measures: lockdown and curfew. Large riots in Eindhoven	As above plus contingency planning in Operation Autumare. Vaccination campaign starts. The military develops contingency plans in Operation Ultimatum, the "dark scenario" (i.e., the collapse of the health system and vital societal functions); plans to act as the "last person standing."	Last resort contingency planning; Ibid network

successfully organized tremendous media coverage and probably as a result recruitment numbers increased after 2020. Lastly, from an altruistic perspective, the military engaged in various COVID commitments because both crisis managers and military leadership felt an urgency to support civilian authorities.

4 Civil-Military Relations

4.1 Securitization of the Pandemic

Although military support indirectly bolstered the decisiveness of political leaders, there are no indications of direct military involvement in making the COVID-19 crisis a security issue in the Netherlands. Military leaders kept their distance from civilian leaders in the public debate, while civilian leaders avoided using war language and instead turned to phrases like "*standing side by side*" and "*together we will get COVID-19 under control.*" Setting up a land information maneuver centre (LIMC) (in other words, a centre that analyses information to ultimately influence people's beliefs) might have suggested securitization, but it was driven by the army's interest in gaining experience in analysing disinformation rather than having any civilian objectives. Additionally, although a retired general led the operational implementation of XL testing facilities, he was not prominent in public debates, and the country maintained civilian oversight of military involvement in the crisis response. The military was generally reluctant to deploy in sensitive areas such as public order management. For example, in 2021, riots erupted in Eindhoven in response to the government's COVID-19 prevention measures, including lockdowns and curfews. During those riots, the military advised the police that deploying military personnel would increase public concerns and further fuel unrest. Similarly, the military provided limited support for COVID-19 tracing apps and vaccination verification.

4.2 Civilian Oversight and Accountability

The Dutch Constitution gives the government supreme authority over the armed forces. Civil oversight and (objective) control *before* and *during* military support operations are based on those legal provisions, follow a strict request procedure (MSOB), and ensure that civil authorities are the decision-makers. Within the military, military lawyers assess all civilian requests while operation orders specify the boundaries of an operation. At the strategic level, Parliament is the highest authority for monitoring the execution of domestic operations in the Netherlands. Parliamentary oversight for domestic operations generally takes place *after* the operation, contrary to international operations which must be approved before missions start.

As for subjective control, civilian representatives and military officers supervise operations.

While strategic decision-making takes place at the political level, those working on the ground have the discretion to make operational decisions. However, in the current culture at the Ministry of Defence, the tendency is to let most decision-making take place at the political level (Muller et al. 2017). In addition, the Dutch armed forces are generally considered to be very loyal to the government in general and the Minister of Defence in particular. Some scholars even suggest that the armed forces should speak out more in public debate (Muller et al. 2017; van Vark 2021).

In addition to civilian oversight, the Dutch military criminal and disciplinary law forms the basis for the accountability of individual military personnel. For military criminal law, a special department at one civilian court (the "military chamber" at the court in Arnhem) deals with all military cases. Based on military disciplinary law, the commander of an individual soldier can impose disciplinary punishment (or declare the soldier guilty without imposing punishment) (Ducheine and Walgemoed 2017).

During the COVID-19 pandemic, the Dutch Parliament discussed and examined the legality of COVID-19 emergency laws and measures. In addition, the Dutch Safety Board conducted extensive reviews of the first COVID-19 year. In these evaluations, the military was generally not the subject of inquiry. However, there were two cases where civilian control was under pressure. First, the National Emergency Center LOCC (see Sect. 3) did not assess and prioritize requests for military support. Consequently, the military de facto prioritized the civilian requests, which is undesirable. On the one hand, this creates a risk of agency slack in terms of shirking or slippage (see Bell et al. 2022; Feaver 2005). In such a case, military support could be allocated based on military reasoning and the chance for good exposure rather than the degree of need and human suffering. On the other hand, when the military prioritizes requests, cherry-picking and shirking can become more likely.

Second, the LIMC, which operated from March to November 2020, was an innovation and information hub within the Dutch army. Throughout this period, it generated 87 reports addressing the healthcare situation during the COVID-19 crisis in the Netherlands, officially to advise the commander of the army. However, the LIMC also provided COVID-19 reports to civilian emergency organizations. From June 2020 onward, it also focused on monitoring and analyzing disinformation that had the potential to create social unrest. During the entire eight-month duration of its operation, the LIMC conducted unauthorized processing of personal data and it functioned without a legal foundation for deployment because there was no formal request for assistance (MSOB) from a civilian emergency service or administrative body. Through its involvement in disinformation activities, the LIMC ventured into the realm of intelligence services, which are governed by distinct and far more stringent organizational and legal frameworks than the MSOB arrangements.

The LIMC emerged for altruistic reasons—to support civilian authorities in response to the COVID-19 crisis. However, the turbulence caused by COVID-19 and active campaigning by the Netherlands armed forces to gain experience with information manoeuvre tactics has led to fragmented responsibilities and a lack of

overview of democratic oversight and civilian control. After engaging in an analysis of disinformation in June 2020, without civilian oversight and democratic control, the LIMC is guilty of slippage. This occurs when the agent (LIMC) acts primarily in their own interest. Moreover, critical frontline voices were silenced, and military lawyers and officers who tried to provide and control legal boundaries were actively opposed (Brouwer 2022).

4.3   Public Image of the Military

There is a historical disconnection between the Dutch armed forces and society (Moelker 2007). As a result, the armed forces have a relatively low profile among the public and in public debate. Twice-yearly surveys measure public support for the Dutch armed forces. The most recent report evaluates the first half of 2022 (Siebelhoff and Fastenau 2022). It shows that support for the Dutch armed forces has remained at a constantly high level since 2017, around 7 (on a scale from 1 to 10). The public sees the armed forces as a necessary institution for the Netherlands, a view that rose in 2022 (to 7.8 out of 10). When analyzing the underlying statements, this rise can be mainly attributed to support for the statement that the armed forces are necessary to protect economic interests (from 45 to 57%) and that due to the growing security threats strong armed forces are more important than ever (from 63 to 71%). The Dutch are increasingly proud of their armed forces, with the score rising from 6.6 in 2017 to 7.0 out of 10 in 2022. Public appreciation for the performance of its three core tasks has gone up as well, with the third core task (domestic support to civilian authorities) getting more support (7.5) than the first (6.8) and second (7.0).

While the armed forces were supporting civilian authorities during the COVID-19 pandemic in 2020, appreciation for the third core task peaked at 7.7. Dutch citizens appreciate the military's domestic role. However, that they recognize its necessity is no guarantee that it will support a specific mission, nor that it necessarily leads to a higher budget or more personnel. How people feel about the armed forces does not say much about their knowledge or interest in the military, either (Van der Meulen 2015). Scholars argue that there seems to be no resistance in Dutch society to the armed forces serving in domestic roles. An increased domestic role for the military may even be desirable and necessary from a legitimacy and visibility perspective (Muller 2017; Muller et al. 2017). If there is any resistance to the armed forces serving in a domestic role it would be found within civilian and military elites than within the general population or from military personnel at the tactical level. At these higher levels, bureau politics and budgetary competition seem to play a role in respondents' views. On several occasions this hesitation has led to delays in military deployments or discussions about the length of the deployment, with civilian actors sometimes complaining that military deployments ended too soon, while military actors were hesitant to commit personnel for a long time, fearing the consequences for operational readiness.

5   Lessons Learnt

Military support by the Dutch armed forces during the COVID-19 crisis provided valuable lessons for both scholars and practitioners. First, the literature on civil-military collaboration indicates that there are differences and tensions between the two (Winslow 2002; Franke 2006). However, during the COVID-19 crisis, these tensions rarely occurred on the operational level; most civilian organizations were highly appreciative of the military's involvement. Civilian and military efforts to address the pandemic were complementary, as our examples have shown. Tensions that occurred were mainly caused by differences in strategic goals (Bollen and Kalkman 2022; Janse et al. 2022) and unrealistic expectations about the military's roles and capabilities that came about because of a lack of connection and understanding. This underlines the importance of liaison, information sharing, and the promotion of an open dialogue between the two partners.

There is another theoretical implication about the motivations for deploying the military. Besides socio-political and functional reasons to deploy the armed forces (see Edmunds 2006), there were fundamental and altruistic reasons to deploy the military. Some military crisis managers referred to duties, laws, and agreements in explaining why they deployed the military, without considering deeper motivations. Other military personnel underlined altruistic reasons for deploying the military; they felt deeply connected with society, which resulted in a strong urge to help. Domestic support during the COVID-19 crisis also shows that the Netherlands military is versatile in different ways. First, it has proven to be a reliable force multiplier in times of crisis and the military's presence in crisis response activities has become normal. Second, military expertise and doctrine proved valuable in supporting civilian decision-making and organizational development at different phases of the COVID-19 crisis. However, there are limitations and boundaries to civil-military collaboration, as illustrated by the extensive search for new tasks and roles in the information domain, which ended up derailing the LIMC, as we showed.

The COVID-19 crisis demonstrated the need for improved domestic civil-military coordination on a *national* level in responding to (transboundary) crises. Although military and civilian operation centres integrated organizational functions during the COVID-19 crisis, a civil-military operation centre with dedicated military resources for domestic operations never gained traction. However, well-prepared national crisis response structures that include the military could be beneficial in response to major crises; it could further integrate civil-military efforts, speed up requests for military support, and increase civilian oversight and control during major crises. At the same time, how domestic roles for the armed forces work on the ground is also food for thought. If domestic tasks are as important as policy documents indicate, they should become more integrated into national civil-military strategy, procedures, and exercises. The process of shaping future civil-military relations requires ongoing dialogue between civilian and military personnel (Bollen and Kalkman 2022).

In the future, we see different ways in which the domestic role of the armed forces could develop. On the one hand, we expect the domestic role of the armed

forces to grow, particularly given the changing and ongoing threats in both the safety and the security areas. Climate change and related extreme weather will also have consequences that will affect future trends (Stott et al. 2016), as will urbanization and increased risks for future pandemics (Wilcox and Gubler 2005), and the blurring lines of internal and external security (Lutterbeck 2005; Schnabel and Krupanski 2013), including the growing risk of grey zone threats in both physical and cyber domains (Hughes 2020).

Notably in other European countries as well, the Russian invasion of Ukraine has put more of a spotlight on the armed forces, especially in public debate. The military has also increased its political profile; for instance, after many years of discussion, the Dutch government has decided to set up a national security council (including participation by the military), and in 2023 it published an integrated security strategy that focuses on both internal and external safety and security threats. The military's increased immersion in public administration and strategy will increase the likelihood that it will be involved in domestic support operations. A recent example of the latter is the joint guarding of a court building by police and army personnel during the trial of an organized crime figure (Ministerie van Defensie 2022b; Ministerie van Justitie en Veiligheid 2022). On the other hand, we also see indications that the role of the armed forces will not expand further. The invasion of Ukraine has led to an increased focus on the traditional role of the Dutch armed forces. This includes the training necessary to defend national and allied territory and the provision of host nation support (i.e., support to nations that need help with peacekeeping or in times of crisis). Reshaping and refocusing the armed forces require a lot of effort, particularly after years of cutbacks, which could make it reluctant to accept long-term domestic commitments.

In conclusion, over the last two decades, the Dutch armed forces have evolved into a structural safety and security partner. This became very clear during the COVID-19 crisis as the military executed its most extensive operation on Dutch soil since World War 2. Although the public received most military deployments during the COVID-19 crisis with great satisfaction, the Dutch military was accused of shirking its support to nursing homes, a concern that was further exacerbated by the lack of civilian direction and the prioritization of military support at the national level. Additionally, the LIMC example illustrates slippage, which occurs more easily when there is a perceived urgency to act and when established control mechanisms are absent in times of crisis.

The immersion of civilian and military domains in the Netherlands cannot continue indefinitely; it is time for the Netherlands to find a new balance in this evolving process. Doing so requires open dialogue (Bollen and Kalkman 2022) and clear agreements between military and civilian partners. Doing so also necessitates operational definitions of "last resort" and permanent domestic partnership roles. In other words, to be successful, the process must clearly define operational conditions and the (legal) boundaries of domestic support, which is in the interest of both the military and civilian authorities. On the one hand, the military must avoid becoming the "one-size-fits-all" and backstop solution, which would lead to an over-use of military resources and possible distraction from its core war-fighting duties. On the

other hand, civilian authorities must remain aware that they can become vulnerable if they come to rely increasingly on scarce military resources.

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Belgium

Check for updates

Delphine Resteigne, Gwenaëlle Belpaire and Mathias De Roeck

Abstract Since the 2016 terrorist attacks in Brussels, the Belgian Defence has undergone a significant shift in operational focus, increasingly taking on domestic missions. This evolution has been reinforced by major crises, such as the COVID-19 pandemic and the floods of 2021, which expanded the military's presence and visibility in civilian life. This chapter examines the broader transformation, emphasizing how the BAF has moved beyond traditional military roles to assume internal responsibilities, including counter-terrorism, disaster response, and public health support. While this reflects a wider evolution in the military's role within democratic societies, the chapter focuses specifically on the COVID-19 crisis. In Belgium, the pandemic response emerged within a complex federal governance structure and exposed the lack of a clear legal framework for domestic military involvement, resulting in largely improvised, "ad hoc" arrangements. Despite institutional and financial constraints, the Belgian Defence offered vital support while mobilizing medical personnel, providing logistical assistance, and coordinating repatriations. Ultimately, the chapter highlights the importance of building societal resilience through coordinated responses, emphasizing that effective crisis management relies not solely on the military but on the vital collaboration with civilian and political actors.

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1 Introduction

The roles of the Belgian armed forces range from conventional warfighting to counterinsurgency to maintaining or enforcing peace in unstable regions of the world, to fighting international terrorism abroad (and more recently at home), and responding to other threats including natural disasters, technological warfare, and (domestic) health crises. While the diverse nature of the post-modern armed forces' missions is important, the fact is that national military organizations do not have a monopoly on fighting these new threats. Other specialists work with or alongside the military, including private security agencies, firefighters, health personnel, NGOs, embassies, and the like. Their involvement, in turn, implies a high degree of national and international cooperation. The security of a contemporary country depends on a multitude of actors and serves a combination of purposes: first, it must help maintain global stability; second, it must defend the territory against external threats (national defence); and finally, it must protect the territory internally (homeland security and safety).

Compared to other European states, several features make Belgium unique, which is why emphasizing the Belgian case is important, particularly the work of the Belgian armed forces (BAF). First, Belgium has a very specific (and complex) governance structure. It is a federal state in which various regions (Flanders, Brussels, Wallonia) and communities (Dutch, French, German), have substantial autonomy. They each have their own legislative bodies and governments. Belgium is a constitutional monarchy led by a king or queen, who is the head of state, and a prime minister, who is the head of government. Furthermore, Belgium is a relatively small country of 11.6 million people with an exceptionally high population density (World Bank 2021). Moreover, it hosts key European institutions such as the EU Commission, the EU Parliament, and the EU Council, as well as NATO. Belgium is thus the heart of the European Union and the Transatlantic Alliance. All this makes Belgium an important political hub that attracts people, particularly to its capital, Brussels. Belgium's high population density meant that it was hit severely by the COVID-19 pandemic. The COVID-19 outbreak took place at a very delicate time for the country as it had no elected federal government. The interim prime minister, French-speaking Sophie Wilmès, had to handle the crisis in a country that is historically fragmented and marked by political and regional divisions.

The outbreak began early in February 2020 when nine Belgian citizens and three of their relatives were voluntarily repatriated from the Chinese province of Hubei whose capital city Wuhan was at the epicentre of the COVID outbreak. Belgium reported and confirmed its first case of COVID-19 when one of these nine Belgians tested positive on February 4, 2020. This person was immediately evacuated to the Brussels St. Pierre hospital which specializes in just such emergencies; the other eight travellers were quarantined in a military hospital located near Brussels. From that point on, Wilmès activated emergency measures to contain the outbreak. On March 12, the government declared a state of emergency and imposed federal restrictions on the country to try to contain the pandemic. In the end, Belgium not only went through

distinct waves of COVID-19, but with 223.75 deaths per 100,000 inhabitants, it also had one of the highest mortality rates in the EU at that time (2021). It is within this specific context that the role of the Belgian armed forces in domestic deployment and during the COVID-19 pandemic needs to be understood.

2 Domestic Operations

2.1 Constitutional and Legislative Framework

Belgian Defence is an all-volunteer force composed of around 26,000 personnel (24,538 military and 1573 civilians as of January 1, 2022) (DGHR 2022). As one of the country's main pillars of stability and security, the BAF has five main missions: national readiness and resilience, collective defence, deploying forces abroad to contribute to collective security, defence diplomacy, and aid to the Belgian society (Update of the Strategic Vision 2021, 2). In the government's last strategic plan (STAR-Plan), Minister of Defence Dedonder underscored the significance of domestic operations and identified global terrorism as a substantial threat, including within Belgium, where both state and non-state actors use terrorism to destabilize the country and achieve political goals (Ministry of defence 2022, 14). This element highlights the critical role of defence in securing national territory, echoed in the growing number of governmental agreements and policy statements. As the update of Belgium's Strategic Vision (IRSD 2021, 8) articulates, the internal deployment of the military in Belgium should only be considered on an ad-hoc basis and after a careful analysis of the identified threats and risks.

2.2 Deployment in Domestic Roles

The domestic roles of the Belgian Defence include activities that provide "aid to the Nation." The BAF aims to ensure it can offer permanent support for a variety of activities, including demining services abroad (SEDEE), airspace protection (quick reaction alert), and rescue at sea (search and rescue). The Belgian defence plays several crucial roles domestically, focusing on both security and support functions. One of the primary roles of the Belgian defence is ensuring national security and defence. This includes counter-terrorism efforts where the military collaborates closely with local law enforcement agencies to combat terrorism through intelligence sharing, sometimes by patrolling and maintaining a state of readiness to respond to any terrorist threats. The Belgian defence also assists in border security, particularly in response to heightened security threats. On January 7, 2015, following the terrorist attacks in France in which gunmen attacked the offices of Charlie Hebdo magazine, Belgium's council of ministers decided to deploy military personnel on the nation's streets to

support police surveillance missions. The armed forces were assigned two tasks: to undertake street patrols to help protect all users of public spaces and to staff fixed posts at stations to protect sensitive places.

The November 2015 terrorist attacks in Paris also reminded Europeans of the vulnerability of cities and critical infrastructure. Belgian society is very accommodating and open and has depended on this openness to host important European and international organizations and events. The flip side is that these organizations and events have become targets for foreign infiltration, espionage, and misinformation. After the terrorist attacks that took place in Brussels on March 22, 2016 and which killed 32 people, Belgian defence launched Operation Spring Guardian (OSG), in part to support Belgium's police forces. In addition, between 2015 and 2021 Belgian military personnel were deployed under Operation Vigilant Guardian (OVG). Both missions, OSG and OVG, are good examples of the blurring between the military and the police (Resteigne 2019, 2021). That ambiguity points to the need for a more integrated national security strategy that identifies and delineates responsibilities between the different services, from prevention to early detection and intelligence, disruption, dissuasion, defence, prosecution, and re-integration. For some years now, the majority of Belgian citizens have seen terrorism as one of the country's main (perceived) threats. When asked, the population overwhelmingly supports the defence of the Belgian territory from potential terrorist attacks.

Another significant role of the Belgian defence is disaster relief and emergency assistance. In the event of natural disasters such as floods and other emergencies, the military provides immediate assistance. During the severe flooding in Liège in July 2021, the Belgian defence played a crucial role in disaster response and relief efforts. This involved conducting search and rescue operations, supporting evacuations, and providing logistical aid and medical assistance. Belgian Defence also provided support for the fight against COVID-19. From the very outset of the pandemic, the Belgian government asked the defence forces to help with the COVID-19 crisis. Once that request was made, the minister of defence agreed to respond and then allocated the resources to do so. Belgium has no protocol to formalize the BAF's support of the Ministry of the Interior. According to Lagasse 2017), this absence of clear guidelines results in an ad hoc approach to civil-military cooperation and can create ambiguities in roles, responsibilities and coordination during domestic operations. The general motto of Belgian defence is "We will not impose, but we're ready to provide quick and effective help when the federal government asks and when we can add value" (Euromil 2020, 2). This statement emphasizes that the lead in the COVID response was taken not by the armed forces, but by the government.

The National Security Council (NSC) served as Belgium's central decision-making body and brought together key government officials, including representatives from the health, interior, and defence ministries to ensure that the strategy they developed was effective. This council was responsible for making critical decisions on lockdown measures, public health guidelines, and the deployment of resources. It was headed by the prime minister who, at that time, was Sophie Wilmès (Liberal). At the strategic and operational levels, the National Crisis Centre (NCC) oversaw managing policy decisions and coordinating the operational crisis units. The NCC

was responsible for translating the NSC's policy decisions into actionable plans across various levels of government and sectors.

The Belgian defence also offers support to civil authorities. This includes maintaining public order during major events such as large-scale public gatherings, protests, or strikes. In times of heightened threat, the military protects critical infrastructure, including airports, power plants, and other vital facilities. This role ensures the stability and security of essential services and infrastructure across the country.

Furthermore, the Belgian defence engages in training and capacity-building. Through civil-military cooperation, the military conducts joint training exercises with local emergency services to ensure that the response to various emergencies will be coordinated and efficient. Defence also supports youth development and civic education programs like the service of collective utility (SUC: *service d'utilité collective* in French). In terms of humanitarian assistance, the Belgian defence provides crucial support during refugee crises. This includes offering logistical aid to manage the influx of refugees, such as setting up and maintaining temporary shelters to ensure the well-being and safety of displaced individuals.

Currently, there is no constitutional framework guiding Belgium's defence forces when it undertakes missions for domestic operations (or operations abroad) (Lagasse 2017). The country has no law that clearly defines which missions Belgian defence can execute and how it is to do so. Article 12 of the Belgian Constitution states that "no one can be prosecuted except in the cases provided for by the law, and in the form that it prescribes," so, surprisingly, Parliament has been vague about the commitment of military personnel in maintaining law and order in Belgium and abroad (Lagasse 2017). However, internal documents such as the Belgian Common Defence Doctrine describe the deployment of the armed forces within the country; those documents list 10 scenarios that circumscribe the use of the military apparatus (ACOS Operations and Training, 2010). These scenarios centre around providing emergency assistance regardless of the cause (natural disaster, industrial accident, hostile intent) and participating in the fight against all forms of crime (including terrorism) that may damage society in the broadest sense or endanger the rule of law.

According to the guidelines for operations undertaken in Belgium as formulated by the BAF headquarters (ACOS Operations and Training, 2010), a homeland operation can be any unarmed or armed deployment of defence forces and equipment in times of peace or crisis to help combat or mitigate the consequences of a terrorist threat and/or attack, forms of crime that damage society or the legal order, an accident or event with serious adverse consequences for the population, a natural disaster or, finally, situations of general social interest. These situations can be grouped into four categories: (1) defence of territorial integrity and national independence, (2) participation in the maintenance of law and order within the country, (3) support to judicial police missions, and (4) rescue and other support and assistance missions (Lagasse 2017, 53). The Constitution foresaw and enshrined the armed forces' support to the police. Article 167 of the Constitution gives the crown (and by extension the government) the capacity to use the armed forces to support the police when they are maintaining public order within the country. Several legal provisions govern how the military can be deployed within the country, namely, the law of December 7,

1998, which organizes an integrated police service, and the law of August 5, 1992, that outlines police functions (articles 7/5, 37 and 38), the law of May 20, 1994, that itemizes the periods and positions of military personnel in the reserve forces and delineates the implementation and preparation of the armed forces (article 3), and the program law of August 2, 2002 (article 151) (Birmann as cited in Resteigne 2021). The engagement of the Belgian defence in support of the police is governed by the principle of subsidiarity, which assumes that the Belgian defence cannot see itself as a substitute for the tasks of the police.

3 Military Deployment During COVID-19

3.1 Coordination of the COVID-19 Response

The armed forces of almost all European countries were among the first responders fighting the spread of the virus. The COVID-19 pandemic has shown that a more coordinated approach to any crisis is critical and, in that regard, on April 6, 2020, EU defence ministers discussed the role the armed forces played in member states' responses to the pandemic. They called upon the European External Action Service (EEAS 2020) to create a task force to share information among all EU member states' armed forces on how military assistance could support civilian authorities. They also asked the task force to share best practices and lessons learned to increase solidarity and cooperation among Europe's armed forces.

The Belgian defence staff, led by the chief of defence (CHOD), coordinated military operations and support efforts across the country. This staff was responsible for integrating the military's capabilities with the broader national response to the pandemic. The "crisis centre" of the Belgian defence was also instrumental in managing the military's logistics and operational support. It worked closely with other governmental and non-governmental agencies to ensure that the military's contributions were effectively integrated into the overall crisis response to the pandemic. Ensuring that military efforts were well-integrated with the broader national response required clear communication and collaboration across various sectors. And because of the changing nature of the pandemic, it meant that military personnel had to remain flexible and adapt their tasks in response to these changes, which required constant reassessment and adjustment for new domestic roles as they arose.

3.2 Roles of the Military

A key task for Belgian defence was to offset critical personnel shortages elsewhere, such as in retirement homes and vaccination centres, and to give support to homeless

people in several cities (Euromil 2020). Staff working in vaccination centres and retirement homes faced a lot of pressure to work overtime during the pandemic; the arrival of military personnel kept the system from collapsing (see Table 1).

The BAF forces also offered logistics and aid in securing medical supplies during the pandemic. Most importantly in this regard, in April 2020 the NSC, led by Prime Minister Sophie Wilmès, pledged to supply every Belgian with a reusable face mask. The Belgian government assigned Belgian defence to purchase about 18 million masks for distribution around the country. The military base at Peutie offered logistical support by providing a safe and central storage and distribution centre for medical equipment, including face masks (Verboven 2021). However, this initiative was not without its challenges. For instance, Belgian defence was strongly criticized for buying face masks from the firm Avrox in a public procurement process. Some months after it had received them, it appeared that the masks contained traces of metals that the firm had not declared were present. As a precautionary measure, the government subsequently advised people to no longer use the masks, which left the public viewing Belgian defence negatively. Military personnel also took material aid to triage centres. Not only was the army mobilized during the pandemic, but so was the air force, which was responsible for repatriating Belgians and EU citizens from abroad using military aircraft. These repatriations came from countries as diverse the Canary Islands, Mali, Nigeria, Rwanda, Burundi, and the Democratic Republic of Congo (Euromil 2020). Twelve Belgians were also repatriated from Wuhan, China, on February 2, 2020 (Verboven 2021).

Table 1 Overview of some of the main BAF responses to COVID-19

Action	Summary
I	• Providing reinforcement of personnel in various places of need (e.g., retirement homes, vaccination centers, and homeless shelters)
II	• Providing logistical and material support to the Belgian government, including the purchase of face masks for the entire Belgian population
III	• Repatriating Belgian and other EU citizens from abroad (including from China, Nigeria, Rwanda, Burundi, and DRC (Congo)) using military aircraft
IV	• Providing Belgian hospitals with additional respirators; • Mobilizing medical and non-medical personnel in Belgian hospitals; • Delegating medical planners to federal (crisis) departments; • Increasing medical transport capacity; • Increasing the capacity of the burn department of the military hospital so it could accept burn patients from other (civilian) hospitals, thereby freeing up capacity at those hospitals; • Opening a vaccination center at the military hospital; • Disinfecting tourist and repatriation airplanes; • Installing temporary accommodations to help with the response to COVID-19 outbreaks and to help maintain social distancing; • Sending medical equipment to partner states

Note The actions listed in the table are not exhaustive

During the pandemic, the BAF medical corps played a major role. It provided overflowing Belgian hospitals with additional respirators to help them manage the arrival of COVID-19 patients needing help. In addition, a significant number of non-medical and medical personnel were mobilized to provide medical support, including patient transport. Medical planners (liaison officers), who have expertise in coordination and crisis management, reinforced staffing at the federal crisis centre and the federal department of public health (Euromil 2020). Further, the Queen Astrid military hospital in Brussels played an important role in managing the crisis in Belgium. Following agreement from the BABI (Belgian Association for Burn Injuries), from March to December 2020, the military hospital's burns department was expanded and accepted burn patients from other hospitals to free up capacity in those hospitals. In December 2020, the federal government also asked the military hospital to become a vaccination centre. It did so and administered around 1000 vaccinations a day.

Other units were mobilized as well, including those assigned to chemical, biological, radiological, and nuclear defence (CBRN). CBRN was put in charge of disinfecting passengers and the airplanes used for repatriation. The field accommodation unit (FAU), a unit specialized in constructing temporary accommodations, installed offices, showers, and other facilities to manage the sanitary crisis and to maintain physical distancing (Verboven 2021). Belgium also provided international aid during the pandemic. Through emergency aid groups such as B-FAST (Belgian First Aid and Support Team), the country sent medical and protection equipment to other countries in need, such as Guinea, Namibia, Nepal, India, and Slovakia. At the beginning of June 2021, for example, Belgium sent one million surgical masks and about 2000 nasal oxygen catheters to Nepal (Federal Public Service Foreign Affairs 2021).

A look at the missions that Belgian Defence executed during the COVID-19 crisis reveals a certain lack of coherence and clarity in terminology. Parliament did not, for example, define the meaning of "aid to the nation." It simply specified that such aid is a matter of public utility service for cultural, patriotic, or humanitarian purposes (Lagasse 2017, 118–119). Another difficulty relates to the potential beneficiaries of "third party benefits," a term that continues to be largely imprecise. This term refers to individuals, groups, or organizations that receive indirect advantages or support from the Belgian defence for activities which are not primarily aimed at traditional military objectives. Without clear and tangible legislative criteria, some missions could therefore be considered "aid to the nation" or "a service for third parties." This lack of clarity in the normative framework leaves some space for a subjective interpretation from the executive branch; in this case how they can "involve" Belgian defence. This ambiguity stems from the absence of precise legislative criteria defining "aid to the nation" versus "services for third parties." Consequently, the executive branch has considerable discretion to decide which missions or beneficiaries qualify under these categories.

3.3 Readiness and Effectiveness

Although Belgian defence was very involved during the COVID crisis and provided as much support as it could, its overall budget (around 1.1% of GDP despite NATO guidelines of 2%) restricted its capacity and partly explains why the Belgian armed forces could offer only limited support (Schoofs 2020). For years, the BAF budget has been decreasing, on average by 1.26% a year (in constant euros), between 1981 and 2019 (Update of the Strategic Vision 2021, 16). When Belgium's GDP shrunk because of the crisis, the BAF budget also continued to decrease—it reached only 1.1% of GDP in 2020 and dropped by 0.89% in 2021. The government's ambition is to increase its defence expenditure to 1.24% of pre-COVID GDP (Update of the Strategic Vision 2021, 16). Some departments faced tougher budget cuts than others during the pandemic. Those involved in security and health saw their cuts limited to 0.89%, while others saw cuts of 2% to their personnel and operating costs. The pandemic not only contributed to the mobilization of the BAF but has had an impact on the defence budget that will be felt for years.

The COVID-19 crisis had differing impacts on parts of the BAF. For instance, the pandemic led to a delay in the start of several international missions, though many of the ongoing missions and operations were maintained even as military personnel stepped in to provide national aid (Bilitis and Puttemans 2022). There was no formal interruption of military training during the pandemic. Military training programs, like the MIF (military initiation phase), mandatory for any incoming recruit, were maintained during the COVID-19 crisis (Velaerts 2020), though there was a rise in e-learning and e-teaching. In some institutions, like the Royal Military Academy, cadets started their education on virtual platforms. Different platforms like Teach @ Distance, were implemented to make this switch easier for instructors (DG HR 2020). However, the pandemic did affect recruitment.

During 2021, recruitment increased by 45% compared to 2020. Even though some physical tests were necessarily limited, the BAF kept up its recruitment campaign through the crisis and included information campaigns, job days, internships, and other initiatives (Bilitis and Puttemans 2022). An assessment of the recruitment and training efforts, and the missions that were deployed, indicates that military effectiveness was maintained throughout the destabilizing COVID-19 pandemic. Because of the impacts of the crisis on the BAF, the Belgian Ministry of Defence (2020), announced several new resolutions in its General Policy Note. First, the government decided that Belgian defence would make a greater contribution to Belgium's socio-economic recovery through innovation, scientific research, and technological development. Second, the ministry suggested some changes to optimize recruitment. The BAF is to implement new recruiting processes and open its doors to those with more diverse backgrounds, like the NEETs (young people who are Not in Education, Employment or Training) (Guisset et al. 2023). These people faced an increasingly difficult social and employment situation during the pandemic. Finally, the General Policy Note explains that the Defence Department intends for the BAF to provide

more assistance nationally. The BAF's role in Belgian society will receive more priority even as its existing contributions abroad will be maintained.

4 Civil-Military Relations

4.1 *Securitization of the Pandemic*

In the context of civil-military relations, it is pertinent to examine the securitization of the pandemic. Understanding how the pandemic was framed as a security issue provides insights into the military's expanded role. Unlike some neighbouring countries such as France, which framed the pandemic with war-like narratives (*"Nous Sommes en Guerre"*), the Belgian narrative focused on addressing a "care crisis" (Dumoulin 2020). Media communications emphasized the importance of "societal unity" to build greater resilience (Dumoulin 2020). The military was not central in communicating to Belgian society about the pandemic; it functioned more as a bit player, providing complementary help. Dumoulin (2020) explains how the Belgian defence acted discretely backstage. Notions of "reinforcing," "supporting," and "providing help" are the most recurrent descriptions of the military's actions (Dumoulin 2020). This aligns with the military role of "aid to the nation" mentioned above.

4.2 *Civilian Oversight and Accountability*

Civil oversight is a critical element of civil-military relations in Belgium because it ensures that military actions remain accountable to democratic institutions and the public. Referring to Feaver's (1998) principal-agent theory, the civilian principal holds political power in Belgium and delegates security tasks to the specialized military agent. The principal's challenge is to ensure the appropriate behaviour of the military agent and prevent what Feaver calls "shirking" (not doing what the civil principal requests). To avoid situations of shirking the civil principal must ensure civil oversight while avoiding intrusive monitoring, ensuring that the military can maintain a certain degree of autonomy. In Belgium, the continuous presence of civilian decision-makers such as the civilian minister of defence plus a combination of parliamentary scrutiny, executive control, and legal frameworks all help maintain civil oversight. The Ministry of Defence is accountable to the Belgian Federal Parliament, which exercises oversight through the Defence Commission where defence policies, budgets, and operations are discussed, ensuring that military actions align with laws and democratic principles.

During the pandemic, this oversight remained in place but other civilian entities, like the National Security Council, also played significant roles. The involvement of civilian authorities in decision-making processes ensured that when it took on

domestic operations, the military was under civilian control, reflecting the core principles of democratic oversight. The Belgian defence motto, "We will not impose, but we're ready to provide quick and effective help when the federal government asks and when we can add value," reflects how the military sees itself as a servant of the government. That is the needed attitude to avoid situations of shirking according to Feaver (1998) and ensuring a balance between civilian control and military effectiveness. Belgian defence was at the service of the civilian principal, providing infrastructure, personnel, and help where needed during the pandemic, but did not take decisional power (Verboven 2021). In that way, the military's involvement during the COVID-19 crisis was conducted under the control of civilian authorities, maintaining the balance Feaver advocates.

4.3 Public Image of the Military

The pressure of the COVID-19 pandemic had a double impact on the armed forces, both internally among the Belgian defence personnel and externally from the public. Regarding the first, military personnel can find it difficult to be deployed primarily in domestic situations as many sign up with the expectation that they will be sent on missions abroad, which is, after all, the BAF's primary objective. However, surveys conducted among the military and civilian personnel of Belgian defence regarding their deployment (Belgium, ministry of defence 2021), reveal that they generally support the idea of taking on national assignments. Some 87% of the respondents endorsed participating in domestic operations (help in case of a disaster or emergencies), which are among the top three core functions assigned to Belgian defence. Domestic operations ranked just behind protecting the national territory (91%) and demining tasks (91%). It is also interesting to note that "support to the police" (which BAF provided during the OVG and OSG missions described previously) figured last in the ranking and only received the support of 45% of the respondents.

How did public support for the Belgian Armed Forces evolve during the pandemic? To answer this, we turned to longitudinal quantitative data from the Eurobarometer (EB) Surveys (Eurobarometer Data Service 2021). What is interesting for our purposes is that the EB survey also looks into national support for Belgian Defence. More specifically, the EB asks: "I would like to ask you a question about how much trust you have in certain institutions. For each of the following institutions [THE ARMY], please tell me if you tend to trust it or tend not to trust it." Participants can respond in three ways, i.e., "tend to trust," "tend not to trust," or "don't know." Although strictly speaking trust in the army is not the same as public support, both concepts are nevertheless close and trust can be seen as one specific dimension of public support (Hobolt and Vries 2016).

Figure 1 shows trends in trust for Belgian Defence between 2015 and 2020. As is clear from the graph, with the start of Operation Vigilant Guardian came a boost in public trust in the Belgian army; trust in it rose from 72% in the spring of 2015 to 82% in the spring of 2016. During the OVG operation, the Belgian armed forces were
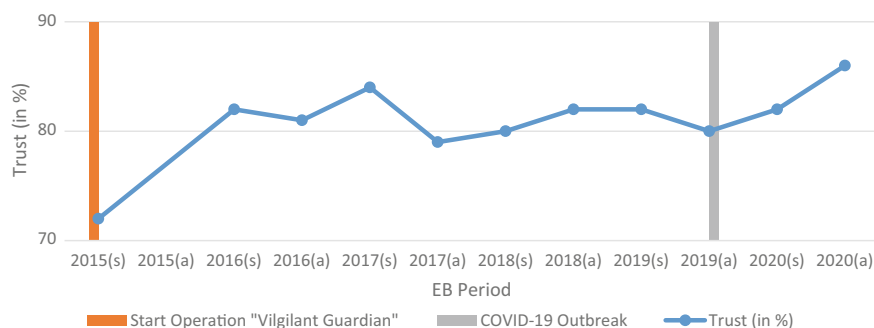
Fig. 1 Public trust in the Belgian armed forces, 2015–2020. *Notes* Data on public trust in the BAF from autumn 2015 is missing. Weighted data are based on Eurobarometer guidelines. Eurobarometers are biannual surveys, with (s) standing for "spring" and (a) standing for "autumn." For 2020 only, (s) indicates summer and (a) winter. This adjustment, however, does not undermine comparability over time

highly visible in providing national security; they collaborated closely with the police, securing sensitive public places (stations, shopping centers, hospitals), government institutions, and strategic locations (power plants, borders), among others (Resteigne and Manigart 2019). By October 2016, around 2000 soldiers were mobilized across the country (Lasoen 2017) in what can be considered a highly effective domestic security operation (at least in terms of a decline in the number of terrorist attacks).

Figure 1 is important because it shows the evolution of public trust in the BAF after the COVID-19 outbreak. The figure shows a positive upward trend: from 80% trust some months before the COVID-19 outbreak in Belgium, to 82% during the first COVID-19 wave (March–June 2020), to 86% during the (more intense) second and third waves (from August 2020 to February 2021).[1] This means that during the period when COVID-19 was at its height Belgium, at least in the period under investigation, public trust in the BAF rose by 6 percentage points. Although public trust in national armies across the EU as a whole rose during the pandemic (from 72 to 74%), increases in public trust in Belgium is are nevertheless amongst the highest in the EU (European Commission 2021). As with Operation Vigilant Guardian, the rise in public trust went hand-in-hand with the increase in the Belgian military's domestic role during the COVID crisis, as discussed earlier.

These results raise the question of whether the rise in public support for the Belgian defence during COVID-19 stemmed from the measures it undertook during the pandemic itself, or whether it was an outcome of other trends.[2] Although confounding trends cannot be ruled out, there are nonetheless reasons to believe that the BAF's response to COVID-19 played an important role in improving its trust ratings. First,

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[1] It is worth mentioning here that the fieldwork for the EB autumn 2020 report was conducted between February and March 2021, as indicated in the report itself, meaning that data for the autumn 2020 report bridges into 2021.

[2] Such as unemployment, rising inflation, economic recession, migration, geopolitical threats, changes in data collection methods under COVID-19, and so forth.

there was a similar positive trend in public support for other organizations at the forefront of the fight against COVID-19. Like the Belgian defence, these other institutions were highly visible in the national media. Public support for medical personnel in Belgium, for instance, rose from 88% in the summer of 2020 to 96% in the spring of 2021.[3] Similarly, support for the national government rose from 30 to 41% in the same period. Support for the Belgian police, by contrast, remained relatively stable at 75%. The fact that public support for the police did not increase during this period is most likely related to its ambiguous role: on the one hand, citizens recognized that the police supported the fight against COVID-19; on the other hand, the freedom of ordinary citizens visibly dwindled during the pandemic.

Although several confounding trends occurred simultaneously with the COVID-19 outbreak (like an economic recession and rise in unemployment), it is nevertheless fair to say that COVID-19 dominated the lives of most Belgian citizens—certainly much more than any other policy issue at the time. Hence, it is no surprise that, given a clear threat to the nation, those government institutions that stood on the front lines and fought the pandemic gained legitimacy because of their efforts. Finally, Fig. 1 also indicates that public trust in the army fluctuates with the rise and fall of national security threats. Apart from the jump in public trust during the COVID-19 crisis, there was a similar increase in public trust once Belgian society was afflicted by international terrorism. These arguments notwithstanding, we leave it to future research to unearth the (cross-national) determinants of support for the military and the role of COVID-19 in this context. Suffice it to say here that we found evidence that public trust in the BAF increased significantly during the COVID-19 pandemic.

5   Lessons Learnt

Belgium was able to rely on its armed forces to help tackle the effects of COVID-19 right from the start of the coronavirus crisis. Like the effect of the terrorist attacks in Europe in 2015, the COVID-19 crisis prompted military organizations to update their missions and deploy their personnel for domestic operations. In the meantime, Belgium maintained other operations in foreign countries including Afghanistan, Niger, Mali, and Lithuania. Notwithstanding budgetary and personnel constraints, Belgian defence was nevertheless able to mobilize about 1500 soldiers early on in the pandemic to assist the nation. These soldiers helped caregivers in homes for the elderly, carried out repatriation and evacuation missions, and provided support during the vaccination campaign. Personnel who were not involved in essential tasks were asked to stay home.

The additional constraints brought on by the pandemic on the defence budget will be felt for years to come and will push the organization to make some difficult operational choices. With its greater visibility and geographical proximity during

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[3] Questions about public support for medical personnel were only asked from the 2020 EB summer report onwards.

the crisis, public support for Belgian defence rose during the pandemic. While the COVID-19 crisis slowed military recruitment for over a year, it has spiked considerably since 2021, in a way that is reminiscent of the surge following the 2008 global financial crisis. This is not to imply that the military now has a full complement of new personnel; recruitment is still a top priority for this dramatically understaffed organization.

As was the case for other recent domestic operations, the pandemic has also raised questions about the division between internal and external security, both military and civilian, and the role of the military as a first responder in case of domestic crisis. Above all, the crisis has shown that the country needs to have a defence force capable of strengthening the resilience of Belgian society and complementing civilian efforts when confronted with crisis situations.

The COVID-19 crisis provided several lessons for the Belgian defence in terms of domestic operations. First, the pandemic highlighted the importance of flexibility and adaptability within the military, as the military organization had to quickly pivot from its traditional roles to supporting public health efforts. Second, it underscored the need for robust inter-agency collaboration, as effective crisis management required cooperation between military and civilian authorities. Third, the crisis highlighted the significance of logistical preparedness to rapidly mobilize and distribute medical supplies. It also reinforced the need for resilient supply chains and strategic reserves of critical supplies (like masks). The challenges posed by globalization and a multipolar world will only increase in the coming years as new centres of power, climate change, and waves of migrants challenge countries worldwide. The current period of transition is already causing increased friction and uncertainty. Growing inequities in our societies can lead to increased social and political discontentment. As a result, democratic governments may struggle to satisfy their populations' demands for security and prosperity, which will pose additional political challenges. To adapt to such a rapidly changing environment, military organizations will have to play a role not only in expeditionary operations but also in protecting democratic values at home and maintaining good governance to ensure their countries are resting on strong domestic foundations.

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Denmark

Rasmus Dahlberg and **Niels Bo Poulsen**

Abstract This chapter examines the role of the Danish Defence in responding to the COVID-19 pandemic, focusing on the first eight months of 2020. It analyzes the military's domestic deployment under Denmark's constitutional and legislative framework, highlighting how armed forces supported civilian authorities through logistics, transportation, quarantine facilities, and crisis management. The study explores challenges in coordination, particularly the military's adaptation to ad hoc crisis structures and its integration with civilian agencies. It also discusses the securitization of the pandemic in political discourse and the implications for civil-military relations, oversight, and public perception. Lessons include the need for improved crisis planning, inter-agency cooperation, and the military's role in national emergency preparedness. The chapter concludes that while Danish Defence deviated from established protocols, its flexibility contributed to an effective national response to the pandemic.

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1   Introduction

This chapter investigates the contributions of Danish Defence to the efforts of Denmark's authorities to mitigate the effects of the COVID-19 pandemic in the country.[1] The scope of the report is limited to eight months beginning in early January 2020 and ending in late August of that year. While this chapter offers insights into activities that occurred after that date, the main focus is on the early stages of the pandemic. In Denmark, as elsewhere, the early months of the pandemic were a period of trial and error, which included defining an appropriate role for the Danish Defence forces in addressing this acute societal crisis. Hence, it may be argued that this study of the first months of the pandemic demonstrates both how and to what extent existing contingency plans for a national emergency were implemented and also offers insights into the ability (and potentially inability) of the Danish authorities to improvise during the unfolding crisis.

The chief of defence, also the main advisor to the minister of defence on military matters, heads the Danish Defence command. According to official web pages, Danish Defence employed approximately 21,000 people in 2020, including 5170 civilians. The Danish Home Guard, a volunteer military organization, includes approximately 15,000 active members and 30,000 reserves. During COVID-19, volunteers from the Home Guard contributed a very significant number of personnel hours; the time it spent on pandemic response efforts far surpassed those that the army contributed. The minister of defence informed Parliament's defence committee in June 2020 that members of the home guard had devoted more than 50,000 h to the COVID-19 deployment from March 6 to May 27 alone; the total for 2020 was around 105,000 h distributed amongst approximately 3000 individual home guard soldiers. In its annual report, the Home Guard command calculated that a total of 275 person-years was allocated to COVID-19 deployments in 2020 (staffing a call center, supporting the health authorities, and aiding the police with temporary border control) (Forsvarsministeriet 2020; Hjemmeværnskommandoen 2021, 3).

Most of Denmark's armed forces belong to one of three branches: the Royal Danish army consists of nine regiments with a superstructure of two brigades. One brigade is being readied for future NATO deployments while the other trains and educates personnel. The Royal Danish Navy comprises 12 major ships including five frigates.

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[1] Our chapter is based on a report prepared by the Royal Danish Defence College for the chief of the defence staff at the Danish Defence command in the spring of 2021 (Forsvarsakademiet 2021). The report was based on sources generated by the units responsible for addressing the pandemic at the Danish Defence command and the national operational staff (NOST), the main crisis management organization in the Danish system whose remit spreads over several departments. The authors reviewed preparedness plans, evaluation reports, and lessons learned documents from the relevant authorities. To supplement the written sources, the authors carried out approximately 20 qualitative interviews with military and civilian authorities. All of those interviewed were given the opportunity to comment on the report before approving their contributions. However, it must be stressed that the current text does not represent a consolidated official perspective from the Danish Defence forces on the pandemic but offers the authors' evaluation of the subject. Victor Brohuus Erichsen contributed with valuable editorial comments and assistance.

It is organized around three squadrons: the 1st squadron produces ships and crews for deployment to the North Atlantic (Greenland and Faroe Islands waters), the 2nd squadron for international operations, and the 3rd squadron for national operations (the Baltic Sea and internal Danish waters). The Royal Danish Air Force operates F-16 fighter jets that will be replaced with F-35As from 2023 onwards. Fourteen EH101 Merlin helicopters perform search and rescue operations and troop transport, while nine MH-60R Seahawks operate from navy vessels in the North Atlantic. Eight older AS550 Fennecs have been converted from their original antitank role to provide observation and support for the police. Finally, the Royal Danish Air Force also operates four CL 604 Challenger business jets to provide VIP transport, maritime surveillance, and other services, and it also has four C-130 J Hercules transport aircraft.

The defence command staff is responsible for coordination and development within the Danish armed forces, while the joint operations staff plans, deploys, and supports operations. The Joint Arctic Command inserts military assets in and around Greenland and the Faroe Islands, while the special operations command deploys Danish special forces. In terms of its defence priorities, in early 2020, Danish Defence was two years into a political six-year defence agreement that governs its priorities, organization, and financing. Central to this agreement was a slight increase in funding intended to strengthen (1) Denmark's contribution to NATO's collective deterrence and defence, (2) international operations, (3) domestic security, (4) cyber defence capabilities, and (5) the national emergency services. At the operational level, the agreement stated that among other tasks, in 2023 Danish Defence should be able to deploy a brigade under NATO command while still providing army units to support the police on short notice for anti-terrorism operations. The latter stood out as a noticeable priority in the Defence Agreement, which stipulated that defence funding would be earmarked for specific support to the police. Copenhagen had seen its first post-9/11 terrorist attack in February 2015, and events in France and other European countries had created a security environment previously unseen in Denmark, requiring the army and home guard soldiers to patrol the country's streets and borders.

In the spring of 2020, Denmark was—as were most other countries in the world—hit by a global pandemic of a magnitude not experienced since the 1918 Spanish flu. Danish authorities monitored the situation closely after the first cases of the new coronavirus were diagnosed in China in December 2019, and beginning on January 26, 2020, the Danish Ministry of Foreign Affairs advised citizens against travelling to Wuhan province in China, which had been identified as the epicentre of the epidemic. A week later all non-vital travel to China from Denmark was banned. On February 27, 2020, the first Dane tested positive for the disease now known as SARS-CoV-2 (Severe Acute Respiratory Syndrome Corona Virus 2) after returning from a holiday in Lombardy, Northern Italy. One week after the discovery of Denmark's "Patient Zero," the Danish health authorities announced that 10 Danes had tested positive for COVID-19. That number doubled in two days, and on March 9 59 positive cases had been confirmed in the country. In the days following, selected public schools and high schools began closing down as pupils and teachers tested positive (Folketinget 2021, 66–67).

The Danish government opted to respond firmly to the growing health crisis. On the evening of March 11, 2020, during one of the most-watched televised press conferences in decades, Prime Minister Mette Frederiksen declared that significant parts of Danish society would be shut down as of the following day (Frederiksen 2020a). Schools, daycare institutions, workplaces, public transportation, and many other public services closed, marking Denmark's transition from containing the pandemic to mitigating it. At that time, preventative tracking of the contagion was replaced with active measures implemented on a much broader scale; the goal was to prevent the Danish health system from being completely overwhelmed as had happened in Italy and Spain. Parliament passed emergency legislation enabling forced quarantine and other mitigation tools. March 2020 also saw the beginning of the execution of a complex crisis management system in which many authorities at different levels of society participated.[2]

2 Domestic Operations

2.1 Constitutional and Legislative Framework

Traditionally, support from the Danish armed forces to civilian authorities has fallen into two main categories: (1) so-called "ordinary assistance," which involves transportation, logistical support, etc., and (2) "special assistance," in which the police receive armed support through the temporary transfer of limited constabulary powers to military personnel under police authority and leadership. During the Cold War, the military provided a third category of support, but this "disaster assistance" (i.e., army support following disasters, such as snow storms, severe flooding, etc.) disappeared in the early 1990s around the same time as the Danish civil defence authority was restructured to become the Danish emergency management agency (DEMA). This latter authority, which is responsible for emergency management and disaster preparedness in Denmark, moved from the Ministry of Interior to the Ministry of Defence in 2004. Today, DEMA employs approximately 550 regular staff (analysts, advisors, and operational staff) with a conscript force of around 420, who are trained as firefighters, etc. Danish special operations forces provide "special assistance," which in 2018 was renamed "military assistance with special powers," to the police intelligence service in cases of terrorism, organized crime, etc. Meanwhile, "military assistance" (which is how the revised Police Act in 2018 relabeled what previously was called "ordinary assistance") is typically provided by the Royal Danish Air Force (aerial transport and surveillance), the Royal Danish Navy (maritime transport and diver assistance), or the Royal Danish army (tracked vehicle transport, etc.).

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[2] For a discussion of the broader perspectives on Danish crisis management during COVID-19, see Trautner 2020, Lauta 2021, Folketinget 2021 and forthcoming findings from the Nordic research project RESECTOR (http://www.resector.org).

2.2   Deployment in Domestic Roles

The Danish armed forces have a long history of domestic deployments. The navy, founded in 1510, has traditionally carried out many civilian tasks along with its military functions, not least because Denmark does not have a dedicated coast guard. Those tasks include fishery inspection, search and rescue, environmental pollution control and, especially in the Arctic, general support to society as a whole. Denmark has a standing army since 1614 and various units have over the years given support to non-military authorities: the Hussars, for example, helped the police crackdown on workers protesting in Copenhagen in 1872, while the special forces have assisted the Danish police in antiterrorism operations since the early 1970s. The Royal Danish Air Force, founded in 1950, has traditionally supported the police by providing helicopter transport and supported health services by providing medical evacuations (which, since 2010, has been supplemented by a dedicated helicopter emergency service (HEMS) that the Danish health regions operate). Nevertheless, it is safe to say that within the armed forces, especially the army, homeland security is, by and large, seen as a sort of sideshow that carries with it the risk of distracting the personnel from their core mission: defending the Danish state against external threats.

Denmark does not have a dedicated border guard service. Since 1969, the Danish police have been responsible for controlling the movement of people across its borders, while the customs service has been responsible for controlling the influx of goods into the country (Dahlberg and Stevnsborg 2021, 138). Denmark had already posted temporary patrols at the border with Germany following the irregular migration wave of 2015; military personnel deployed in Operation GEFION then supported the police when COVID-19 hit Denmark in the spring of 2020. The Danish defence forces have also been involved in protection duties at sensitive sites in Copenhagen following the February 2015 terrorist attack. These domestic deployments, however, ended shortly after the Russian invasion of Ukraine on February 24, 2022. Besides these deployments, Danish Defence is regularly involved in smaller-scale domestic activities such as search and rescue, transport duties for the police, etc.

The most recent example of a contagious disease requiring action from Denmark's armed forces occurred during the Ebola outbreak of 2014. Back then, the civilian health services worked with Danish Defence to develop a joint plan for evacuating Ebola patients using transport aircraft, special containerized equipment, and specially trained civilian and military personnel. However, once the Ebola crisis was over this service was not maintained as it was no longer used or deemed necessary—and only a very few patients with Ebola had been transported. As late as 2019, the sanitary command notified the defence command that ending this service would have consequences if Danish Defence was ever called upon to support the Ministry of Foreign Affairs and other ministries in case of an outbreak of a contagious disease. But the defence command opted not to maintain a service that none of its underlying authorities or civilian partners had requested. In the end, Danish Defence encountered challenges in its domestic deployments during COVID-19, most notably over patient

transportation. Only six years after the Ebola outbreak, it had become ill-prepared to transport patients.

3   Military Deployment During COVID-19

3.1   *Coordination of the COVID-19 Reponse*

The Danish defence command's internal preparedness plan, which was updated on March 4, 2020, states that the defence command "must be able to handle all types of extraordinary events within its area of responsibility as well as support the Ministry of Defence and other authorities under the Ministry of Defence, eventually including support to other emergency actors" (Defence command 2020). The plan follows the structure that DEMA recommended in its guidelines and lists 24 types of crises that may require military involvement. Thirteen of these are based on scenarios outlined in the 2017 Danish National Risk Register, also published by DEMA. One is entitled "Highly Virulent Diseases" and provides a detailed description of how a SARS-variant could affect Danish society, including by overwhelming the health sector.

The internal preparedness plan stipulates that in times of crisis, the defence command must establish a crisis management organization centred around a crisis management staff chaired by the chief of the defence staff (second in command at the defence command and ranking just below the chief of defence). Indeed, in February 2020 the crisis management organization was activated and the crisis management staff held two meetings before the chairman decided to delegate responsibilities to the joint operational staff. On February 27, 2020, the joint operational staff created a joint action team within a J35 structure (NATO terminology for a temporary merger between "current operations" (J3) and "plans" (J5)) to ensure swift coordination between different areas during the crisis. This concept is well-known to Danish military personnel who have experience in international missions and who have NATO staff training, but it was never part of the defence command's preparedness plan, nor were partners from civilian authorities familiar with the J35 structure or terminology. J35 coordinated closely with the crisis management staff at the Ministry of Defence. On March 4, 2020, the ministry established "Task Force COVID-19" (TF19) at the department level and took over from the designated crisis management staff. While the TF19 was not formally organized as a crisis management group, it nevertheless functioned in that capacity almost round the clock until June 30 when the Ministry of Defence resumed handling the pandemic within its basic structure. J35 was disbanded as early as May 11, 2020, when the defence command went from daily to weekly coordination meetings.

Why did the Danish defence command choose a crisis management organization not described in its preparedness plan and unbeknownst to its civilian partner authorities? The best explanation for why the joint operational staff under the defence

command opted for this structure is that the J35 concept had been used during a missile attack on an air base in Iraq where Danish soldiers were stationed. The structure was, in the words of a joint operational senior officer, "ready at hand" when the COVID-19 crisis emerged. This crisis management process was almost heuristic: If under pressure, do not do what the guidelines say, but do what worked well last time there was a crisis, no matter if the crisis is entirely different this time.

The Danish crisis management system is centred around the National Operational Staff (NOST), a coordinating body with standing as well as ad-hoc members that is chaired by a senior police officer (DEMA 2021). The defence command is a standing member of NOST. The role of the liaison officers in NOST is to coordinate among the crisis management staff in various departments and the internal crisis management systems of their respective sectoral authorities. NOST has no independent authority and serves only as a coordinating forum, but following the seven official principles of Danish crisis management, all authorities are required to coordinate and share information.

In March 2020, however, the Danish national police, by order of the government, established a dedicated operations staff with four subordinate committees to ensure swift and efficient crisis management during the COVID-19 pandemic. To some extent, this novel concept sidetracked NOST by creating a parallel organization with a similar, but farther-reaching mandate. This organizational change to the crisis management system during the pandemic forced the defence command to deviate from some of its long-term planning. Another challenge for the Danish armed forces was that it had to respond to a large number of time-consuming enquiries because of inefficiently filtered requests for information from a wide range of civilian authorities not accustomed to working closely with the military. Coordination with health authorities took place in the national operation staff according to the National Preparedness Plan, but at the same time, an ad hoc coordination forum at the departmental level also undertook some coordination, resulting in duplicate work.

3.2 Roles of the Military

In the early phases of the COVID-19 pandemic in 2020, Danish Defence aimed to fulfill two missions: (1) maintain its capability to deploy military assets, and (2) provide support to Danish society as a whole during the global health crisis. While the first mission continued to be important, the second quickly rose to the top of the agenda.

As the Danish Defence forces had to function under the same restrictions as other public sectors in Denmark, the military had to execute its tasks in close cooperation with the police and the health authorities but with a limited workforce and under various constraints due to quarantine and other restrictions. Staff needed to wear facemasks in public areas and on public transportation, physical attendance by non-essential staff at workplaces was limited, and some personnel were isolated to their barracks, air stations, or naval bases after local outbreaks had an impact on the daily

routines of the Danish Defence forces—in much the same way that other public and private sectors in Denmark and other stricken countries were affected.

As discussed in more detail below, during the first phases of the pandemic Danish Defence contributed in seven main areas: (1) quarantine facilities, (2) call centers, (3) border control, (4) test facilities, (5) assistance to other parts of the Kingdom of Denmark (i.e., Denmark plus Greenland and the Faroe Islands), (6) air transport, and (7) other transportation. Early on in the process, Danish Defence also supported the Danish national police in coordinating the crisis management efforts on the ground: it dispatched six large containerized sleeping facilities to the national operational staff headquarters outside Copenhagen.

3.2.1 Quarantine Facilities

In the early stages of the pandemic, Denmark, like many other countries, feared that it was facing a worst-case scenario and that it would have an overwhelming number of citizens in quarantine, in isolation, or under treatment in a severely stressed healthcare system. In late February 2020, the joint operations staff convened initial meetings to go over a set of plans activated by the five Danish health regions. The existing quarantine plans had been negotiated locally, and while they were very detailed, not all of them were entirely up to date. For example, a building compound at the old naval base in Copenhagen that had at one time belonged to the Royal Danish Navy and that featured in Copenhagen's existing quarantine plans had been sold off without relevant updates being made to its plan. A fast-working planning group quickly resolved these issues, and within a week and a half, Danish Defence was able to provide somewhere between 5000 and 10,000 quarantine beds, 3500 of them in a mere 72 h. The need for civilian quarantine facilities on that magnitude never arose, though the defence command eventually used the facilities at one of its air bases to host personnel it was quarantining before their deployment on international missions.

3.2.2 Call Centers

COVID-19 began in Denmark as a health crisis, but it gradually evolved into a broader societal crisis, prompting a wider response from many sectors. The health sector is responsible for providing information and support to the public on health issues. However, it needed assistance from the police and armed forces to accomplish that task. From early in the process as many as 40 military personnel assisted at the temporary call center that the board of health established at the Copenhagen police headquarters. On March 6, after the call center had been bombarded by a great number of calls each day, it was moved to a former military facility in Jonstrup and reinforced with an additional 30 to 40 military personnel from the home guard.

3.2.3   Border Control

Shortly after the government decided to close Denmark's borders to foreigners on March 14, 2020, the police submitted a request through the national operational staff to the defence command for border patrol support. The police specifically asked Danish Defence to deploy soldiers to provide border patrols at various Danish ferry ports and at the bridge between Denmark and Sweden. However, because the borders were closed during COVID, the Danish Defence forces were generally less involved at the border than usual from March 14 to May 1, 2020, after which Operation GEFION returned to its pre-pandemic level.

3.2.4   Test Facilities

In mid-April 2020 the Danish government decided to expand its testing capacity so it could monitor the spread of the disease more closely. Danes with symptoms would be tested at clinics and hospitals, while healthy citizens would be referred to a network of local test centers under the newly established TestCenter Danmark. The national police requested that Danish Defence deploy as many as 10 soldiers to each of the local test centers to assist with health-related tasks under medical supervision. Regular soldiers from the army and volunteers from the home guard shared this duty. On May 1, 115 personnel from the army were deployed to 18 test centers spread around the country. As of the end of August 2020 the Danish emergency management agency took over the defence command's contributions to this staffing.

3.2.5   Air Transport

At the end of January and into early February 2020, the defence command helped the Ministry of Foreign Affairs by airlifting back to Denmark some Danish citizens stranded abroad. Using both a C-130 J Hercules and a CI-604 Challenger from the Royal Danish Air Force (RDAF) in close collaboration with the Air Transport Wing (ATW), the Armed Forces Medical Command, and civilian health authorities, 15 people were transported. The armed forces medical command generally observed stricter health precautions than their civilian counterparts as military pilots and planes were seen as a limited, high-value resource. One precaution it took was to quarantine all transport planes for 48 h after they had flown in from risk areas, even though the airlifted citizens were not diagnosed nor suspected of being infected with the virus.

The country also made preparations for transporting suspected or infected Danish citizens from abroad. An operational plan was developed by the Intensive Care Air Transport Team (ICATT), a highly specialized unit under ATW that focuses on the evacuation of wounded or sick personnel using aircraft from the RDAF or other providers. The need for international airlifts of this kind never arose—but the need did arise domestically and with significant consequences. Before COVID-19, there were no existing procedures for transporting EpiShuttles (pressurized closed stretchers

designed to move contagious patients) with Danish helicopters. This equipment does not fit into the small ambulance helicopters operated by the civilian health authorities, so the only option for patients in an EpiShuttle is to move them by air using the RDAF's larger EH-101 Merlin transport helicopters.

In early March 2020, the Armed Forces Medical Command presented the Joint Rescue Coordination Center (JRCC), which is responsible for sending the Merlin helicopters on search and rescue (SAR) missions, with an operational concept. It stipulated that to transport suspected or infected patients, SAR helicopters should fly first to Aarhus University Hospital to pick up equipment and medical personnel, and then head to the pickup location, and finally on to the destination hospital, then return to Aarhus to let off the EpiShuttle and the specialists. This procedure could, in extreme cases, extend the mission's time from 3 h to 7.5 h, which would be challenging for the SAR helicopters, a sparse resource in any country. This created some tension between military and civilian authorities as each had their own perception of priorities.

The RDAF flew a total of 25 COVID-19-related EpiShuttle missions from January to August 2020, 11 of which were diverted or cancelled while in flight. The operational staff sought to minimize the impact on SAR helicopter readiness by returning equipment and personnel to smaller helicopters or vehicles to free up the Merlins. By the end of March, the defence command fast-tracked the procurement of four EpiShuttles to be positioned on SAR bases and in Greenland and the Faroe Islands to prepare for the eventuality of COVID-19 evacuations from remote parts of the kingdom.

3.2.6   Other Transportation

The Royal Danish Air Force's Joint Movement and Transportation Organization (JMTO) provided logistical support to civilian authorities during the first phases of the pandemic. It made buses available to the police when Danes from abroad arrived at Danish airports in early March 2020, and early on in the pandemic Danish Defence also transported tests to the Serum Institute. The police inquired about whether Danish Defence could provide alternative transportation for up to 300 employees from the health sector if the ferry service between Elsinore and Helsingborg north of Copenhagen should stop running; the request was processed but never executed.

3.2.7   Kingdom of Denmark

Greenland and Denmark, together with the Faroe Islands, form the Kingdom of Denmark. Greenland established self-government in 2009, but Copenhagen still manages some responsibilities, including defence and police matters, while health services are the responsibility of Greenland. In early March 2020, Greenland's police force helped the area's government develop a Greenlandic pandemic preparedness plan. The Joint Arctic Command participated in this work by lending military personnel to a temporary entity set up by local civilian authorities that was tasked with

coordinating Greenland's response to COVID-19. The preparedness plan took into account Greenland's very limited health resources. Extreme distances, harsh weather conditions, and weak organizations challenge evacuations, facilities for quarantine and isolation, and crisis coordination and communication.

Contingency plans were prepared for the deployment of a company of Danish army soldiers in case of a severe outbreak of COVID among Greenland's police officers. The Greenland police would train these military personnel for two days in Nuuk and then dispatch them to remote settlements as reserve police officers. The Greenland police also inquired through the national operation staff about the availability of sanitary platoons to support the Greenlandic health services should the worst-case scenario unfold. If it had done so, it would have required several transport aircraft and helicopters to be deployed from the Royal Danish Air Force to Greenland to help with evacuations. Finally, Greenland also asked Danish Defence about the possibility of the latter sending a "hospital ship" to Greenland, specifically an ABSALON class frigate with sanitary personnel and equipment.

In the end, no long-distance evacuations of COVID-19 patients from Greenland to Denmark were needed, nor did Danish Defence dispatch troops, aircraft, or ships to Greenland during the pandemic's first phases. Even though the inquiries from Greenland to Danish Defence for support never materialized into specific requests, the process identified valuable lessons. For example, Greenland's preparedness plan presupposed that Air Greenland (the national carrier) and Danish Defence possessed what was required for transporting COVID-19 patients domestically in Greenland, and to and from Denmark. However, this assumption did not align with Danish Defence's initial (lack of) plans for transporting patients by military aircraft as described above.

3.3 *Readiness and Effectiveness*

Airlifting citizens stranded abroad back to Denmark, staffing a national call center, conducting border protection, managing logistics, procuring critical supplies, controlling traffic and information management at hospitals and recycling facilities, protecting designated sites from vandalism, etc., was an enormous series of tasks for Danish Defence. Further, on top of this work and simultaneously, the armed forces carried out planned surveillance, protection, and patrolling tasks in Denmark, all while still maintaining the country's contributions to international missions. Training and educational activities were especially hard hit by the extraordinary circumstances brought on by the pandemic, which resulted, for example, in a four-month delay of Denmark's 2021 NATO contribution.

Another lesson Denmark was able to identify early on in its pandemic response was that it faces the risk of "mission creep," which is inherent in any long-term deployment of military forces in support of civilian authorities. Those from inside the Danish army explained that private companies, like the Copenhagen Airport, sent home trained security personnel during the lockdown leaving the army, sometimes

simultaneously, to allocate personnel to undertake work that the airport security personnel could have done. The government saw the military as an important tool in its toolbox—but allocating a significant number of military personnel to civilian support tasks necessarily interferes with planned activities, readiness for deployment, etc.

4 Civil-Military Relations

4.1 Securitization of the Pandemic

When Danish Prime Minister Mette Frederiksen enacted a country-wide lockdown in March 2020, the pandemic effectively became a security matter (securitized), meaning that all attention and resources devoted to emergency measures should be focused on dealing with this new existential threat (Berling et al. 2021). In March 2020, Frederiksen addressed the nation in a televised press conference, describing the COVID-19 pandemic as a threat to both Denmark and world health (Frederiksen 2020a). On at least one occasion, the prime minister also used the term "front-line troops" when referring to health staff (Frederiksen 2020b), and the minister of health, Magnus Heunicke, frequently used strong language to describe the pandemic, comparing it to a "war" or a "battle." This militaristic rhetoric contributed to the securitization of the issue, emphasizing the gravity of the situation.

The government's framing positioned the pandemic as a security issue, necessitating extraordinary measures, and the policies and measures that followed demonstrate the securitization of the pandemic. The Danish government invoked emergency powers, amending the Danish Epidemic Act that allowed for the restriction of civil liberties, such as freedom of movement and assembly, and the closing of public facilities. Furthermore, the government diverted significant financial resources to the healthcare sector and to provide bailout packages for businesses. Meanwhile, it launched extensive public communication campaigns to emphasize the severity of the pandemic, which contributed to creating a climate of fear and urgency (Dittmer 2020).

By examining the speech acts and policies, it becomes evident that the Danish government framed the COVID-19 pandemic as a security threat, justifying extraordinary measures to protect public health and the nation's well-being. Professor Mikkel Vedby Rasmussen, then dean of the faculty of social sciences at the University of Copenhagen, even coined the phrase "crisis society" in a book about the pandemic and how it affected Danish society, describing how leading politicians and senior officials used the crisis as a driver for social change and power negotiation (Rasmussen 2021). However, Professor Jens Elo Rytter, also from the University of Copenhagen and an expert on human rights and constitutional law, discussed the Danish government's approach and rhetoric in April 2020, pointing to the fact that no authorities—nor

the government itself—had even suggested evoking the national emergency provisions mentioned in Sec. 23 of the Danish Constitution. Overall, he found the use of crisis discourse well-balanced when compared to the severity of the situation (Rytter 2020).

4.2 Civilian Oversight and Accountability

In terms of civil oversight, the pandemic highlighted deep controversies about oversight and accountability in the Danish political system. The prime minister convened the government's security committee (R-SIK), which represents the highest level of crisis management in Denmark, on February 27, 2020, shortly after the first Danish COVID-19 cases had been reported. Meetings of the R-SIK are held in a secure facility in the prime minister's offices, no notes are taken, and all participants are bound by life-long oaths of secrecy about the agenda and the contents of discussions. However, a rare leak from this meeting was subsequently reported in the Danish media, positively emphasizing the role of politicians while criticizing senior officials from the health authorities. Contrary to tradition, the government chose not to launch a legal investigation into the breach. After the pandemic, criticism was raised about the oral practice of the R-SIK committee and the aura of secrecy enveloping the higher echelons of Danish crisis management (Krog n.d., Lund 2024).

No specific issues regarding civil oversight and accountability of the Danish armed forces have been identified concerning the management of COVID-19. Since the Emergency Act was passed in 1993, crisis management in Denmark has followed the principle of sectoral responsibility, meaning that social sectors responsible in peacetime are also responsible for crisis management and continuity of service within their respective sectors in times of crisis or war. It follows from this principle that each sector must develop preparedness plans and maintain crisis management systems within their area of responsibility (Emergency Act sec. 24). DEMA publishes guidelines for this and assists authorities at the state, regional, and local levels with planning, audits, training, exercises, etc. Strict adherence to the sectoral responsibility principle, however, means that DEMA can only serve as an advisor for other governmental agencies, authorities, and municipalities on crisis management and preparedness matters.

Denmark's minister of defence authorizes the domestic deployment of the armed forces with parliamentary approval from the defence committee. In cases where "military assistance with special powers" is required, the police or the Ministry of Justice, depending on the scale of the situation, must also give their approval. It is noteworthy that our research has revealed no occurrences of relevant military assistance of this kind during the country's response to the COVID-19 pandemic. However, it should also be noted that no thorough investigation of the management of COVID-19 was carried out in Denmark—only the so-called Grønnegård Report, which Parliament published in January 2021. While the Corona Commission in

Norway and Sweden interviewed key people involved in the pandemic fight for their reports, no such access was granted to the Danish investigation.[3]

4.3   Public Image of the Military

Baseline trust among the public in Denmark's military was relatively high: A survey from just before the pandemic showed that the Danes' trust in the armed forces had risen from below 40% to almost 80% from 1981 to 2017, while their trust in the police remained steady at 90% (Ellemann-Jensen 2019). To our knowledge, there was no specific survey of the Danish population's perception of the role of the armed forces during the first wave of COVID-19. However, a report published by the HOPE Project in March 2022 takes a broader approach to measuring the behaviour and attitudes of Danes during the pandemic (Nielsen et al. 2022). Based on this, we do have a sense of public opinion more generally.

Denmark traditionally scores high on trust, and this was upheld during COVID-19. The police and the health authorities generally enjoyed a high degree of trust from the populace, while the media and the government scored lower. That being said, most Danes thought that the government followed a necessary and required path when it enforced strict regulations and initiated a society-wide lockdown in March 2020. While we acknowledge the lack of specific data, we find no reason to assume that the public's opinion of the Danish armed forces differed significantly from the population's sentiments towards the police and the health authorities. An annual poll conducted in 2024 showed that trust in the Danish military decreased from 2023 to 2024 (this particular question was not asked before 2023). While this decrease follows the downward slope in Danes' general trust in public institutions, trust in the military remains slightly higher than in public administration as a whole (TrygFonden 2024).

5   Lessons Learnt

When the pandemic hit, Danish Defence deviated to some extent from its well-established crisis management plans and structures, but it nonetheless found workable solutions to the challenges it faced and learned valuable lessons throughout the COVID-19 deployment. The lessons it learned during the early phases of the pandemic (from the beginning of 2020 to August of the same year) point to a need for Danish Defence to strengthen its crisis management capabilities. Authorities under the command of the chief of defence should be better represented in those

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[3] RESECTOR, a research project funded by NordForsk and led by the authors, currently (2023–2026) examines challenges to the principle of sector responsibility in Norway, Sweden, and Denmark during COVID-19. More information about the project can be found at www.resector.org.

crisis management fora whose roles cut across departmental lines. To ensure efficient and effective collaboration, vertical coordination between the defence command and the department in the Ministry of Defence must be synchronized with horizontal coordination with other sectors such as health in any future crisis similar to COVID-19.

In addition, Danish Defence also needs to improve its ability to lead and work offsite using virtual platforms. Finally, it needs to better align with non-military partners, particularly by using more uniform language and terminology when communicating with non-military personnel. Danish Defence experienced—as did many other authorities—a period of uncertainty and a heavy workload early on in the pandemic. Routines were disrupted, plans had to be revised or discharged, and novel approaches to crisis management at the national level challenged well-established practices for control and coordination. However, these uncertainties had more to do with the novelty of the phenomenon than the scale of the Danish Defence forces' overall involvement, which, according to the joint operational staff, was not at the level of a large military operation. The fact that much coordination with other ministries took place in the Ministry of Defence even as the defence command was coordinating its involvement and interaction with other authorities resulted in a considerable amount of overlapping effort. The defence command nevertheless found that establishing a task force at the departmental level in the Ministry of Defence generally contributed greatly to efficient coordination and management.

Our findings show that adequate pandemic preparedness plans were in place before COVID-19 hit Denmark, but it became readily apparent that locally negotiated plans are difficult to keep updated and relevant. A good example of this is the quarantine plans that relied on military facilities; when activated, those plans revealed weak spots. Luckily, there were no dire practical consequences from these failings and the issue was resolved. Later in 2020, two health regions suggested replacing the country's decentralized plans with one plan that all five regions and the defence command could agree upon. That initiative was implemented within a few months, which enhanced the coordination of future quarantine issues.

Looking back at the early phases of the management of the COVID-19 crisis in Denmark, many of the decision-makers who were interviewed along with the involved managers from Danish Defence stated that they saw the situation as a "dress rehearsal." When asked to elaborate, some participants explained that in their opinion, the early phases of COVID-19 offered valuable lessons that would benefit the nation's crisis management plans in future emergencies. Specifically, Danish Defence faced coordination challenges because of the strong involvement of civilian authorities in the pandemic. That involvement to some extent resembled Denmark's new role in the NATO alliance as a "host nation," i.e., providing support to and security for allied forces travelling through Danish territory in times of crisis and war. The tasks involved in host nation support (HNS) are more similar to those carried out by the Danish Defence during COVID than would be the case in a strictly military operation in an anti-terrorism scenario, for example. From this perspective, the early phases of COVID-19 gave the defence command valuable insights into the

potential friction that might emerge from large-scale HNS activities—for instance, how to establish and maintain secure communication with civilian authorities.

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New NATO Countries

Sweden

Joakim Berndtsson and **Sofia Ledberg**

Abstract In this chapter, we investigate the deployment of armed forces personnel in Sweden during the COVID-19 crisis. Our point of departure is the return of "total defence" planning in Sweden in 2015 and how military support to civilian organizations during the COVID-19 pandemic can be seen as a test of peacetime crisis management capabilities, but also of the state of total defence readiness and organization. Empirically, we discuss legal frameworks for domestic deployment of the military, the specific actions and tasks by the Armed Forces during the pandemic, and the potential impact of this experience in terms of civil-military relations, public opinion, and the role of the military in Swedish society.

1 Introduction

In recent years, and in response to a deteriorating regional security situation, Swedish security policies have seen a significant return to territorial defence, with a renewed focus on national defence (Swedish Defence Commission 2017). On December 10, 2015, the Swedish government resumed a coordinated "total defence" planning (Swedish government decision, 2015). The idea of total defence was developed in the post-WWII period and served as a cornerstone of Swedish defence thinking and organization during much of the Cold War (e.g., see Angstrom and Ljungkvist 2023). Total defence concepts are basically "whole of society" approaches to national security, often covering the entire spectrum from peacetime crisis management to heightened states of alert and war (Wither 2020).

In Sweden, the concept refers to the mobilization of the combined resources of the military and civil defence including regular troops and conscripts, reservists,

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home guard forces, police and rescue services, as well as businesses and civilian agencies to maximize the country's defence in the event of war. Although the primary mission of the Swedish armed forces (SAF) is to defend Sweden against military aggression, peacetime assistance to civil authorities in times of crisis or disaster is part of the military's wider remit (e.g., see Swedish government decision, 2020). From this perspective, military support to civilian organizations during the COVID-19 pandemic is not only a test of peacetime crisis management capabilities but also of the state of total defence readiness and organization.

According to its 2023 annual report, the SAF employs around 37,000 full-time and part-time personnel, of which just over 9500 are officers, around 7000 are reserve officers, and about 10,000 are civilian employees. The home guard consists of an additional 20,000[1] members; over 6000 conscripts[2] who started basic training in 2023. The officer corps has around 10% women but by 2023, 19% of the conscripts starting basic training were women. As of February 2023, 439 SAF staff were deployed on international missions, notably in Mali (SAF annual report, 2023).

The COVID virus was confirmed to have reached Sweden on January 31, 2020, although some evidence suggests that the virus could have arrived as early as December 2019. Community transmission was confirmed on March 9, 2021, in the Stockholm metropolitan area, and the first death was reported two days later. The virus had spread to all regions of Sweden by March 13, 2020. However, compared to other countries, the armed forces were less involved in the COVID-19 crisis even though Swedish law permits peacetime domestic deployment of SAF personnel and resources under special circumstances and for specific tasks, as discussed below.

2 Domestic Operations

2.1 Constitutional and Legislative Framework

Contrary to many European states, Sweden does not have a gendarmerie, and the armed forces do not carry out domestic law enforcement duties. Up until the early twentieth century, however, it was common for the military to support the police. However, this changed after 1931 when five workers at a demonstration were shot dead by military troops under police command. The incident, referred to as the shootings in Ådalen, did not result in a legal prohibition against the military assisting the police (Holmström 2006), but there was a broad parliamentary consensus that the military should not be deployed in such a way. It was not until the late 1960s that the legal basis for the government to use the military to uphold law and order was

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[1] The home guard is currently (March 2022) experiencing a major increase in applications, and hence the number of soldiers may increase in future (Swedish Television 2022).

[2] The Swedish system of (all-male) conscription was first initiated in 1901. In 2010, the system was temporarily abolished in favour of an all-volunteer force (AVF). However, in 2017, the Swedish government decided to reinstate a system of conscription (this time gender neutral).

removed. This changed in 2006 when legislation again allowed the police to request military assistance in anti-terrorist operations. The domestic deployment of the SAF for non-military tasks is regulated by several legal provisions:

- Civil Protection Act 2003:778 (*Lag 2003:778 om skydd mot olyckor*);
- Regulation 2002:375 on the armed forces providing support to civilian functions (*Förordning 2002:375 om Försvarsmaktens stöd till civil verksamhet*);
- Regulation 2017:113 on the armed forces supporting the police with helicopter transportation (*Förordning 2017:113 om Försvarsmaktens stöd till polisen med helikoptertransporter*);
- Act 2006:343 on the armed forces' support to the police in combating terrorism (*Lag 2006:343 om Försvarsmaktens stöd till polisen vid terrorismbekämpning*).

Normally, the SAF receives requests for support directly from the agency or regional authority in need of support, such as the police authority or the security services (*Säkerhetspolisen*) in the case of Regulation 2017:113, or a county administrative board (*Länsstyrelse*). The SAF has no designated resources to support civilian functions, and when it does so, such undertakings should be incorporated within the regular activities of the military and should not adversely affect them (Swedish Civil Contingencies Agency and Swedish Armed Forces, 2021).

2.2 Deployment in Domestic Roles

The SAF, especially the Home Guard and conscripts, have a long history of providing emergency relief. The Home Guard was established in 1940 and played an important role in Swedish defence during World War II. It conducted surveillance, guarded military installations, protected against airborne invasions, and was engaged in fire-fighting (Åkerstedt 2020). During the Cold War, support for society during crises and emergencies continued, but it was not until 1996 that such activities were formally included as one of the SAF's main tasks (Swedish government bill 1996). As the security situation in Europe evolved after the Cold War, Sweden adopted a broader view of security which expanded the tasks and responsibilities of the SAF. Concurrently, the defence budget shrunk, the number of troops and military facilities was decimated, and Western governments struggled to make use of (and thereby remain motivated to maintain), their armed forces (Ledberg 2018).

Although the legal framework for using the military domestically was expanded after the Cold War, the government has been reluctant to use the SAF for domestic law enforcement. Act 2006:343 allows the military to assist the police domestically, but the initial interpretation of this law limited this support to air and sea strikes. In 2015, however, a reinterpretation of the Act opened up the possibility that the military could be of more support to the police in more and different ways (Reuterskiöld 2015). Yet the police can request support from the SAF only if the situation requires special resources that the police lack (Swedish police authority 2017). For example, in 2017

Table 1 Swedish armed forces' support to civilian agencies 2014–2023 (deployment frequency)

Legal framework/type of support	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Civil protection act (2003:778)—e.g. firefighting, searches for missing people	80	70	96	60	138	64	54	31	45	45
Regulation on the armed forces supporting civilian functions (2002:375)—e.g. clearance of ammunition and explosive devices, surveillance, traffic coordination	n/a	30	64	36	48	19	141	81	53	51
Regulation on the armed forces supporting the police with helicopter transportation (2017:113)[3] (the numbers exclude training and exercises)	n/a	n/a	10	3	1	–	1	1	5	1

Sources SAF annual reports from 2016–2023

when Stockholm suffered its deadliest terrorist attack in decades, the police did not request the SAF's support (Swedish police authority 2017).

As mentioned, other state agencies, regional authorities, and municipalities can request SAF support under the four main acts and regulations. Such support generally includes sea and mountain rescue, assistance in missing persons cases, ammunition and explosives clearance, flood relief, and support from helicopter units. In the years preceding the pandemic, the SAF provided such support regularly, as Table 1 shows. No support has been requested under the provision of the Act on the Armed Forces support to the police in combating terrorism (2006, 343) in the given period.

In Table 1, higher numbers reflect occurrences of extraordinary events during which more support was requested from the military than in normal years. Before the pandemic, the greatest variations occurred in support provided in conjunction with accidents. In the summer of 2018, Sweden suffered several outbreaks of forest fires in multiple locations, which explains the increased number of requests for military support that year. In helping respond to these fires, the SAF made 90 contributions of support under the Civilian Protection Act. This support included, for example, providing fuel, equipment, air space coordination, and aircraft transportation. According to the SAF, during the summer of 2018, the armed forces provided more than 270 helicopter flight hours and 220,000 working hours by home guard soldiers and regular units. Most of these efforts were devoted to firefighting (Swedish Armed Forces 2018). Yet the number of support contributions does not necessarily capture the whole picture.

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[3] Support missions have also used helicopters under other legal provisions.

In 2014, the SAF provided substantial support fighting forest fires in Västmanland, but since the fires that year were at fewer locations and a smaller area than in 2018, the number of SAF contributions was not as dramatic. Still, these forest fires engaged 1500 personnel from the SAF—most of them from the home guard—and 12 helicopters (Asp et al. 2014). Similarly, quantitative data do not necessarily cover the scope and variety of SAF tasks. In 2015, for example, the number of refugees seeking asylum in Sweden rose substantially, which increased the demand for SAF assistance. The military supported the Swedish migration agency by providing temporary housing, personnel for transport and small-scale services, and bolstered staff levels of the Swedish migration agency (SAF Annual Report 2015).

3 Military Deployment During COVID-19

3.1 *Coordination of the COVID-19 Response*

Swedish central state agencies are comparatively large when compared with the small ministries. They are semi-autonomous, and a minister cannot interfere in the daily running of an agency and overrule its appointed director general. When SAF support is requested, it generally comes from other central state agencies, counties, or municipalities, but remains under military command.

Several Swedish central state agencies and multiple actors on other levels are assigned to handle disease control and pandemics. Nationally, the public health agency (*Folkhälsomyndigheten*) coordinates efforts to prevent the spread of disease, and this agency had the most central role in Sweden's response to the COVID-19 pandemic. Locally, regional authorities and municipalities are responsible for the operational aspects of disease control. Another central state agency that was important during the pandemic was the National Board of Health and Welfare (*Socialstyrelsen*), which is responsible for health and medical services, patient safety, and epidemiology. During the COVID-19 pandemic, the board was responsible for questions about health care and medical treatment, and for coordinating requests for military support from counties, central state agencies, and municipalities.

The Swedish model of semi-autonomous state agencies became the subject of debate during the pandemic, with the opposition accusing the government of hiding behind the public health agency and its general director. The government was accused of escaping responsibility by referring to the "expert agency" as death tolls rose, and some questioned Sweden's somewhat different approach to dealing with the pandemic (Swedish Television 2020). An evaluation commission assigned to review efforts by the government, the counties, and municipalities to curb the spread of the coronavirus reached similar conclusions. In its final report, the commission wrote: "The government had too one-sided a dependence on assessments made by the public

health agency of Sweden. Responsibility for those assessments ultimately rests on a single person, the agency's director general" (Swedish government official report 2022:10, 10; authors' translation[4]). The commission concluded that this was not a suitable model for decision-making during this crisis. An additional problem the commission identified was that the many actors involved, on different administrative levels, created a decentralized but fragmented system with unclear responsibilities (Swedish Government Official Report 2021:89, 148).

3.2 Roles of the Military

The demand for SAF assistance peaked in number and scope in 2020, but some deployments continued during 2021 and were not dismantled until early 2022. In 2020, there were 245 requests for support from the SAF, mostly from central government agencies such as the National Board of Health and Welfare, the Public Health Agency, and the Swedish Agency for Economic and Regional Growth (*Tillväxtverket*), but also from healthcare regions and county administrative boards. Altogether the SAF gave support on 196 occasions, compared to 82 in 2019. It turned down 49 requests, either because they were withdrawn, did not follow protocol, or were not covered by the legal provisions. Several requests for support were denied for operational reasons (SAF Annual Report 2020, 42–3). For example, the SAF turned down a request to transfer medical staff to civilian hospitals in the Norrbotten healthcare region due to the scarcity of resources there (Swedish Radio 2021). As Table 1 shows, during the pandemic, assistance from the SAF was mostly requested under Act 2002:375 which governs the armed forces' support to civilian functions; support under this provision was far more substantive in 2020 and 2021 than before and after the pandemic. All tasks that the SAF completed at this time were executed under regular peacetime regulations.

In 2021, most of the SAF's support consisted of providing materiel and personnel, including safety masks, protective clothing, and medical technical equipment, as well as staff officers and specialists. The SAF also provided qualified intensive care transportation by helicopter, aircraft, and ambulances, along with administration related to vaccination and testing. Beyond this, in 2020, the SAF also assisted the police authority as Sweden closed its borders to Norway due to the increased spread of COVID-19. As Swedish military personnel are prohibited from using force or coercion against individuals, SAF support was limited to surveillance, documentation, and reporting at eight border crossings. Another form of support was the vaccination of its personnel, both staff and conscripts as well as military personnel on overseas deployments (SAF 8 May 2021). This was done after a request from four of Sweden's healthcare regions, which provided the SAF with the vaccine and the vaccination equipment (SAF 2020, 2021).

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[4] Unless otherwise stated, the authors have supplied all Swedish-to-English translations

During the pandemic, two of the SAF's undertakings in 2020 stand out as exceptional because they engaged the armed forces in new ways domestically, with higher public visibility than previously. The first was the military's participation in the large-scale testing program known as Operation Gloria, and the second was the construction of a field hospital in each of Gothenburg and Stockholm. From March 2020 to January 2022 the SAF and the public health authority cooperated in large-scale testing for COVID-19. This civil-military disease control operation required planning, coordination, and the distribution and analysis of large numbers of tests. The participation of the SAF's CBRN (chemical, biological, radiological, and nuclear threats and risks) company, including conscripted junior NCOs, made this contribution unique. The CBRN company not only assisted with COVID-19 testing but also instructed other central state agencies about the handling of tests. The company set up a staff within the public health authority that was not dismantled until January 2022 (Sundgren 2020). The SAF also operated a permanent staff within the National Board of Health and Welfare as part of Operation Gloria. The large-scale testing operation engaged large numbers of SAF staff, mostly from the home guard, and from all military regions in the country (SAF 2021).

The SAF made another significant decision early in 2020 as the spread of COVID-19 skyrocketed, especially in the Stockholm and the Gothenburg regions. The growing number of hospitalized COVID-19 patients required a 50% increase in intensive care unit (ICU) capacity. In Stockholm, authorities asked the SAF to build a field hospital in the capital.[5] Regional authorities in Västra Götaland made a similar request for a military field hospital in Gothenburg, the country's second-largest city (Swedish government official report 2021:89, 465). The temporary hospitals were intended to increase total capacity and enable COVID-19 patients in intensive care to be separated from other ICU patients. The Stockholm field hospital was constructed inside an exhibition centre (*Stockholmsmässan* in Älvsjö) and had a capacity of 550 beds (including 140 for intensive care). The hospital in Gothenburg was set up in connection with Sahlgrenska University Hospital and could accept 50 patients, 20 of whom could be in intensive care (Roos and Löfström 2020). It was the first time field hospitals had been erected to provide care within Sweden (Myhrén 2020). The SAF delivered the equipment and provided training for staff from healthcare regions who were working at the facilities. The construction involved several civilian and military bodies, including the armed forces HQ, the centre for defence medicine in Gothenburg, the central regional command, the home guard, and the logistic regiment in Skövde. The SAF was responsible for setting up and equipping the field hospitals, whereas the centre for Defence Medicine in Gothenburg was responsible for providing the field hospital in that city with power, water, ventilation, and heating (Roos and Löfström 2020). The armed forces did not staff either of the units.

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[5] The National Board of Health and Welfare sent the original request for a field hospital to the SAF HQ and the joint support staff. The field hospital was originally planned to be placed in Uppsala, a city northwest of Stockholm. However, as the need for additional ICU spaces was deemed higher in the Stockholm region, the hospital was eventually constructed in Stockholm Älvsjö instead (Hedlund and Lönngren 2021, 16–17, 31–39).

It took only two weeks to set up the field hospital in Stockholm, and three days for the one in Gothenburg (including the 20 ICU beds)—a feat that others involved saw as extraordinary (Owetz 2020; Hedlund and Lönngren 2021; Roos 2020). The facility in Gothenburg was up and running between March and May and was dismantled in late August 2020. However, despite the rapid erection of these facilities, the Gothenburg field hospital only received 26 patients (Roos and Löfström 2020).[6] The hospital facilities in Stockholm were operational as of April 9, 2020, but closed before admitting any patients (Hedlund and Lönngren 2021). Considering the high levels of COVID-19-related deaths and hospitalizations in Sweden at the time, to not admit patients to the purpose-built facility in Stockholm, and then later dismantle it, appears remarkable. Yet it turned out that regional and local hospitals and care facilities were able to scale up their capacity, thereby reducing their reliance on field hospitals to resolve overflow problems.

3.3   Readiness and Effectiveness

According to the Ministry of Defence's official assessment, the military's support of civilian agencies did not undermine the core duties of the SAF (Sahlin 2022, 106). However, the Swedish Armed Forces' 2020 and 2021 annual reports both stated that the "support and preparedness [for the pandemic] has partly limited the development of military units and military capability" (SAF, annual reports 2020 and 2021). For example, training new helicopter pilots and planned developments for the SAF's procurement and purchasing functions were both adversely affected (SAF, Annual Report 2020, 18, 71). As noted above, the SAF also turned down some requests for support due to a lack of resources (e.g., helicopters and medical equipment).

The cooperation between the public health agency and the SAF during the large-scale testing campaigns of Operation Gloria has been praised as an example of successful civil-military cooperation by participants of both agencies (Sundgren 2020; Dahlberg 2020). The SAF has also been acknowledged for its quick response and preparedness to test and analyze those tests compared to, for example, the public health agency (Gummesson 2020). Interestingly, the armed forces were initially reluctant to appear in uniform during the operation, but as the COVID response campaign was scaled up, SAF representatives stressed the benefits of the SAF being visible when supporting society (Sundgren 2020).

In their report on the Stockholm field hospital, Hedlund and Lönngren (2021, 9–10) provide important insight into what they call "a case study in actor collaboration in a time of crisis." They point to serious friction and even competition between regional and local health authorities and care providers, particularly around staffing issues, information sharing, responsibilities, and decision-making authority

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[6] According to the coronavirus commission, the hospital was dismantled after a few months as the strain on ordinary health care turned out to be less than initially feared (Swedish government official report 2021:89, 466).

(Hedlund and Lönngren 2021, 40–44). The authors also observed internal SAF friction, chiefly between commanders on the ground and regional and central level command, mainly to do with access to situation reports from different parts of the organization (Hedlund andab Lönngren 2021, 48). On the other hand, collaboration between the SAF and civil authorities at the national and regional levels appears to have worked well. Overall, and despite organizational and cultural differences, relations between SAF personnel and members of local healthcare organizations, the construction management company, and care providers appear to have been mainly positive (Hedlund and Lönngren 2021, 51–56).

There was one main criticism of the SAF, but it was related to the standard of their medical equipment. Several health professionals expressed concern about the standard of the respirators and beds the SAF provided, which they feared could lead to complications and unnecessary risks for seriously ill COVID patients (Hedlund and Lönngren 2021, 57). A similar critique was levelled at the field hospital in Gothenburg, where doctors signed petitions complaining about the working conditions for medical staff and the standard of equipment. At the time, the press also reported that there were serious conflicts between hospital staff and healthcare management about the use of field hospitals (e.g., Hedberg 2020; Bornmann 2020). In their report, Hedlund and Lönngren (2021, 72) observe that across-the-board civilians generally saw the SAF as well-functioning collaborative partners. Again, the greatest criticism of SAF relates to the standard of equipment. In the end, Hedlund and Lönngren conclude that the Stockholm field hospital was at once a highly successful example of civilian-military collaboration in a crisis, and a hospital that "nobody wanted" (Hedlund and Lönngren 2021, 72).

4   Civil-Military Relations

4.1   *Securitization of the Pandemic*

In Sweden, the military's activities during the pandemic (which was an extraordinary event in itself) were conducted within existing legal boundaries and did not challenge the historically sensitive issue of using the armed forces domestically in coercive roles. In addition, because the bulk of the military's involvement in the pandemic response focused on largely uncontroversial support for health services, there was no need for political or military leaders to move beyond the realm of "normal politics." Even as the military's involvement increased, there were no changes to the legal basis for its involvement. Thus, the Swedish response to the pandemic, and particularly the use of the armed forces in that response, is not the result of a securitized process that justified extraordinary measures, such as legislative changes or a broadened scope of military engagement, but rather a growing demand for services the military already provided.

4.2 Civilian Oversight and Accountability

Decisions to deploy the military are made within the general framework of the Swedish national executive organization, which is characterized by administrative dualism and institutional autonomy. Whereas ministries are comparatively small, a major part of the national executive is organized into large and semi-autonomous central government agencies (Ahlbäck Öberg and Wockelberg 2015). This semi-autonomy does not apply to the same extent to the SAF (Ledberg et al. 2021), which is subject to detailed regulations and governance from both parliament and government (National Audit Office 2016). During the pandemic, oversight and accountability were conducted by regular means, including government appropriation directions, the budgetary process, and annual audits. There are no reported incidents of the military shirking, overstepping its mandate, or engaging in other forms of military misconduct during the pandemic.

4.3 Public Image of the Military

In the wider context of civil-military relations, the public's perception of (or trust in) the military is arguably one-factor underlying democratic control or influencing the level of "concordance" (or agreement) between the political and military elites and the citizenry regarding the role and use of the armed forces (Shields 2020; Schiff 2008). To understand issues related to domestic military deployment in Sweden during the pandemic, it is instructive to first consider the general issue of public trust in the military.

In recent years, public trust in the SAF has increased dramatically. The shift is visible in the annual surveys of the SOM (society, opinion media) Institute at the University of Gothenburg. Figure 1 shows the evolution of public trust in the SAF from 1986 to 2020.

In the 2020 survey, 46% of people had moderately high or very high levels of trust in the SAF, and the balance (see the note under Fig. 1) was the highest level recorded since measurements started (Berndtsson et al. 2021). Several factors may explain this shift, including the reinstatement of conscription in 2017, increased defence spending, and the (2015) shift towards renewed and improved territorial and total defence capabilities (Berndtsson et al. 2021, 2017). The public regarded territorial defence, protection against terrorism, and support to society in times of crisis as the SAF's most central tasks (Berndtsson et al. 2021, 312). Public perceptions of the SAF during the pandemic should be viewed against the background of this generally positive trend.

As described, the SAF was directly involved in several support missions during the pandemic, including building two field hospitals and mass testing under Operation Gloria. Several opinion polls during 2020 and 2021 suggest that public trust in the SAF increased further during this period—at least temporarily. In one special survey
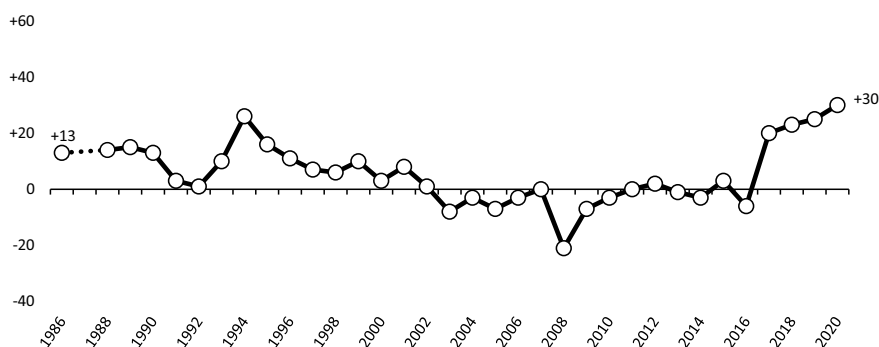
Fig. 1 Public trust in the Swedish armed forces, 1986–2020 (balance). *Note* The question was: "What is your level of trust in the way in which the following institutions and groups perform their work?" The alternatives are "very high level of trust," "moderately high level of trust," "neither high nor low level of trust," "moderately low level of trust," and "very low level of trust." The balance measurement is the share of positive (high and very high) minus the share of negative (low and very low) and can theoretically range between −100 and + 100. *N* (2020) = 1755. *Source* The national SOM surveys 1986–2020; Berndtsson et al. 2021

the SOM Institute conducted between April and June 2020, the level of trust was found to be even higher than in the annual survey, with a positive balance of + 48 (Berndtsson et al. 2021; Bengtsson et al. 2020). Similar figures have been reported in the continuous tracking of public opinion during the pandemic, for instance by the Swedish Civil Contingencies Agency (MSB). In a survey conducted from March to May 2020, among 7386 people aged 18–79, 57% had a high or very high level of trust in how the SAF were dealing with the pandemic (Swedish Civil Contingencies Agency 2020). A little more than a year later, the number had dropped to 44% (Swedish Civil Contingencies Agency 2021).

Thus, when the SAF was initially deployed in early 2020, the impact on public opinion seemed to have been positive. Yet measuring public trust or confidence in public institutions is notoriously difficult. The increased levels of trust are likely related both to an assessment of the *actual work* of the SAF during the pandemic, and a result of higher *visibility* and media coverage of that work. This is also the interpretation that the SAF made (SAF Annual Report, 2020, 29). The decreased levels of trust reported by the end of 2021 might signal a general waning of trust in SAF support capabilities, a result of a decline in visibility, or they might be related to specific issues related to SAF operations during the pandemic.

The increasing levels of trust between March and May 2020 may thus be partly explained by the considerable media coverage in conjunction with the construction of the field hospitals in Stockholm and Gothenburg. As we have seen, other partners generally saw the SAF (in the case of the Stockholm field hospital) as an adaptable and well-functioning collaboration partner, yet still levelled serious criticism at the medical equipment. One reason why this criticism did not spill over to become a negative opinion of the SAF itself was perhaps that the apparent lack of modern equipment was seen more as a function of years of neglect and underfunding of

Swedish defence, readiness, and crisis management capabilities, rather than a fault of the SAF as such.

5 Lessons Learnt

During the pandemic, several SAF units helped civil authorities. On the one hand, these deployments were successful, displaying the usefulness and expertise of the SAF across several areas of crisis management. The SAF's domestic operations during the pandemic also increased the organization's visibility in society, and the response among the Swedish public was mostly positive. Yet this test of civilian-military collaboration was not without problems. In particular, the SAF's ability to provide emergency assistance was hampered by a lack of up-to-date medical equipment suitable for the treatment of COVID-19—at least according to many medical professionals. Additionally, while the construction of the two field hospitals was seen as successful, these collaborative missions also indicated the lack of clearly defined roles, areas of authority, and decision-making. Even though the SAF was not chiefly responsible for this situation, the problems surrounding the field hospitals reflected negatively on Swedish crisis management response and readiness in general.

Experiences from the pandemic as well as the deteriorating security situation in Europe are likely to shape how the SAF's support to society is organized and developed in the coming years. This includes access to resources and equipment, clearly defined roles and responsibilities, as well as structures for collaboration both within and across military and civilian organizations and groups of individuals. In this context, the SAF's ability to support society continues to be a priority. Concurrently, and not least because of the ongoing war in Ukraine and Sweden's recent (7 March 2024) NATO membership, the political pressure to rebuild Swedish territorial defence is mounting, placing the issue of society's support to the military in the event of war at the forefront of the discussion. The increased demand on the armed forces for protection against military threats may also give rise to a discussion about the cost efficiency of using the SAF for civil crisis management.

Taken together, the SAF, Sweden's political leadership, and other parts of the Swedish crisis management and total defence organization face the challenge of preparing for both non-military and military threats. While not a new situation, the perceived importance and gravity of threats will shape decisions about SAF's organization and priorities. From this perspective, further strain on the SAF and its personnel caused by increasing demands for peacetime assistance could be a source of civil-military friction, especially if this is seen as harming SAF readiness or war preparedness efforts.

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Estonia

Meelis Oidsalu and Targo Lusti

Abstract The COVID-19 pandemic significantly reshaped Estonia's crisis management approach, prompting closer cooperation between civilian authorities and the defence forces. A new, integrated command-and-control structure was established, facilitating smoother collaboration in both military and civilian medical response. The crisis also exposed gaps in preparedness, resulting in leadership changes and the drafting of a new Crisis Readiness Act aimed at enhancing emergency responsiveness and situational awareness at the governmental level.

1 Introduction

After the Soviet Union collapsed and the Republic of Estonia regained its independence in 1991, Estonia had to build up its military forces from scratch. In the first half of the 1990s the biggest armed organizations in the country were not the regular military, but paramilitary voluntary organizations, namely, the Estonian Defence League (EDL or *Kaitseliit*) linked to the Ministry of Defence and the Estonian Domestic Defence Organization (abolished in 1996) linked to the ministry of the interior. For most of their activities, both organizations supported internal security operations (providing backup to border guards and police) and provided disaster relief services (fighting forest fires and responding to large-scale accidents). The regular armed forces focused mainly on building up their units, re-establishing conscription, and participating in UN peacekeeping operations in the Balkans. The only domestic services that military organizations provided were the militarized border guard service and the militarized rescue companies, both of which were subordinated to the Ministry of the Interior. They were staffed with conscripts who were organized

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under a military ranking system similar to that of the regular army. In 2005 military rescue companies were abolished and their responsibilities were consolidated with the civilian rescue board. In 2010 the same happened to the militarized border guard when border services were transferred to the newly established civilian police and border guard.

In 2010 Estonia's Parliament adopted a new defence strategy that introduced a whole-of-government approach to defence throughout the country. The strategy established six major roles for defence: military defence, civilian support to defence forces, international military cooperation, internal security, protection of critical services (including cyber security), and psychological defence. Within this strategy, all ministries were assigned tasks they would execute during actual wartime. According to this concept, the Estonian defence forces (EDF) were focused mainly on providing military defence. (Estonian Parliament 2010) Disaster medicine was the exception—the Estonian Defence Academy provides civilian medics with disaster medicine training. The Estonian Defence League, a voluntary military organization, is the main provider of civilian domestic security and disaster relief. COVID-19 put a great deal of stress on the civilian crisis management system and civilian medical services; both the EDF and EDL provided domestic services at an unprecedented scale.

The EDF has around 4000 active service personnel and about 25,000 reserve personnel. It consists of two infantry brigades, a small special operations forces service, an air force (mainly focused on air surveillance and an air base operation), a navy (specializing in mine warfare, counter-mine warfare, and maritime surveillance), a cyber command, and a logistics command. As part of the Estonian Defence Forces the EDL is composed of military territorial defence units (which in wartime operate under the defence forces and which is composed of 9000 personnel). Added to that, 2700 members of the women's voluntary defence organization (*Naiskodukaitse*) focus on civilian defence services (mass evacuation, civilian defence education, staff support) and support the rescue board (under the Ministry of the Interior) (Estonian Defence Forces 2023).

The EDF was an early participant in the response to the COVID-19 crisis. It began by helping civilian agencies set up and run their crisis response organizations and by deploying a military field hospital to Estonia's largest island, Saaremaa. As there was a shortage of masks and other personal protective equipment (PPE), the EDF's wartime mobilization stocks were made available to civilian agencies. The civil medical system was ill-prepared for the pandemic, so the defence forces played a crucial role in supporting the whole government. While the EDL's contribution to the country has always been visible, particularly during forest fires and floods, Estonia's regular armed forces have been more focused on preparing for the country's military defence. COVID-19 changed all that. It turned the public image of Estonia's armed forces upside down and proved that the EDF is a well-integrated contributor to civil preparedness.

The first case of COVID-19 was confirmed in Estonia on February 27, 2020, and four new cases of coronavirus infection were identified on March 11. In the days following, the number of new cases increased, and the first confirmed coronavirus

death occurred on March 25. The government established a state of emergency in Estonia late in the evening of March 12, which led to schools switching to distance learning, and sports clubs, entertainment facilities, and shopping centers being closed. The first confirmed coronavirus infection within the EDF was identified on March 13 after a Kalev infantry battalion conscript participated in a volleyball tournament in Saare County. In the following weeks, new cases appeared among both active service members and conscripts (Olveti 2021, 17).

The threat from the COVID-19 virus was at its most severe in the first few months after the pandemic had been declared, in April 2020 when COVID-19 cases on Estonia's largest island, Saaremaa, skyrocketed. The island was quarantined for some weeks and the local hospital in Kuressaare ran short of patient treatment rooms that were equipped with oxygen concentrators. To prepare for the possible impending emergency, in April 2020 the EDF deployed its military field hospital to Kuressaare, together with personnel to staff it. EDL members were also involved in patrolling Saaremaa Island as the Estonian government had declared a country-wide state of emergency on March 12. The government's measures, which the EDL implemented successfully, flattened the curve of infections on Saaremaa Island. In hindsight, the initial overall response to the first wave of the virus might be considered an over-compensation, but it was driven by the lack of knowledge about the deadliness and other attributes of the new virus. Also, Estonia had learned from Bergamo, Italy, where the local municipality's ability to treat patients fell drastically short, which resulted in numerous reported COVID-19 deaths. That example inspired the Estonian government to be very serious in implementing preventive measures.

During the most serious COVID-19 wave in October 2020, around 100 military personnel were sent to civilian hospitals to assist medical personnel in emergency departments, intensive care units, and family medical practices (Hiir 2020, 10). The main problems in the civilian medical system were a lack of medical equipment (personal protective equipment, respirators), a lack of medical staff, and insufficient laboratory resources with which to detect the virus (Olveti 2021, 18). Consequently, the military helped provide those ancillary services (testing, medical equipment, individual protective materiel, and testing centres) throughout the crisis. However, the deployment of the military field hospital to Saaremaa was the most visible military intervention during the COVID-19 pandemic in Estonia from the spring of 2020 to the spring of 2022.

2 Domestic Operations

2.1 Constitutional and Legislative Framework

Estonia's defence legislation (the 2008 Estonian Defence Forces Organization Act) allows the EDF to be involved in responding to civilian emergencies, but "only if the relevant authority cannot perform this function promptly or at all and there are

no other means for performing the function" (Parliament of Estonia 2008). Should such armed forces involvement entail the use of force, the decision to do so must be made by the Estonian government and approved by Estonia's president. Otherwise, the Chief of the Defence Forces or the Chief of the Defence League makes that decision, usually in coordination with the Minister of Defence (although there is no legal obligation for either to do so).

Domestic deployment is also governed by Estonia's 2017 Emergency Act, which obliges civilian authorities to include in their crisis management plans "the procedure for co-operation with the defence forces and the national defence league" (Parliament of Estonia 2017). The Estonian Parliament does not have the authority to decide to deploy the military in civil emergencies. There are two alternative processes for doing so. A ministry or a government agency can apply directly to the military for support under the Administrative Co-operation Act of 2003 by sending a support request to a military organization. However, they can only use this procedure when the request is of a non-military kind and does not entail the use of force. If a military organization refuses such a request, the requesting organization can appeal to the Ministry of Defence, which will then decide whether to assist. If the request entails the use of force of any kind, the Law Enforcement Act of 2011 applies. It states that the government and Estonia's president are the ones deciding whether a military organization can be used in any law enforcement operation (i.e., border security, intelligence, surveillance, critical infrastructure protection, prevention of certain crimes, disaster relief, or rescue operations). The government and president must also decide upon the length of the support operation (30 days maximum, though that period can be extended by up to 30 days at a time, each time requiring separate government approval) and the number of military personnel to be deployed in support of the civilian law enforcement operation.

2.2 Deployment in Domestic Roles

The voluntary military organization EDL was heavily deployed following the mass riots that erupted after the Estonian government decided to remove the Soviet war statue known as the "Bronze Soldier" in April 2007. Hundreds of Defence League members were hastily registered as voluntary police officers. The Estonian government refrained from using any military personnel on the streets of Tallinn, the capital of Estonia, to control the rioters because the removal of the Soviet-era statue had led the Russian Federation to start a major disinformation operation against Estonia and it was heavily interfering in political developments in the country; using the military against the rioters may have escalated those tensions.

The EDL also played a crucial role in rescuing people during a major snowstorm in December 2010 when around 600 people found themselves trapped in their vehicles in a deep valley in Padaorg in northeast Estonia. The EDF sent 30 personnel and 10 recovery and other vehicles to evacuate people in that crisis (Koort 2020, 132). Similarly, the EDF played a prominent role in the spring of 2010 when a Polish

AN-26 cargo plane made an emergency landing on the ice on Lake Ülemiste near the Tallinn airport. The defence forces used heavy machinery to help recover the plane from the lake, which is also the main source of drinking water for residents of Tallinn. Besides this, EDL members and the Estonian Air Force have routinely helped fight major forest fires, some of which have started in military training areas.

The EDL also cooperates closely with the civilian border guard service; its members have repeatedly helped civilian authorities patrol the eastern border which Estonia shares with the Russian Federation. Border security is not a permanent military task; usually, a maximum of 200 to 300 personnel is included in operations of this kind. From October 2010 to January 2011, when Estonia joined the Eurozone, the EDF assisted the Central Bank of Estonia in securely importing cash notes worth hundreds of millions of euros. Earlier, in 2006, the EDF had deployed several armoured vehicles and 40 personnel to Latvia to help Latvian police secure the NATO summit in Riga. Estonian forces supported the Latvian police by helping prevent possible terrorist attacks during the summit.

3 Military Deployment During COVID-19

3.1 Coordination of the COVID-19 Response

The responsibility for addressing public healthcare emergencies in Estonia lies with the Estonian Health Board. Estonia's civilian medical system had no crisis management experience before COVID-19 and was therefore not prepared for the challenge the pandemic posed. The Estonian health board's crisis organization was created from scratch with the assistance of the EDF and the EDL (Vaiknemets 2021). The real-time, daily coordination of the steps Estonia took to counter the pandemic crisis occurred in the Estonian state chancellery under the supervision of the security and intelligence coordinator. The Estonian government soon took over the management of the crisis and on March 12, 2020, for the first time since it regained its independence, the government declared an emergency, which gave it the right to impose restrictions on people's freedom of movement and to give directions to the local municipalities. The Estonian rescue board acted as a coordinator between the local authorities and the central government; it assisted municipalities with crisis management advice and helped set up a coherent crisis management structure at the local level. Some municipalities, such as Tallinn, had relatively strong crisis management capabilities, but many smaller municipalities struggled with the challenge and needed immediate assistance setting up their crisis processes.

EDL regional units quickly stepped in and supported the municipalities that needed support. Soon after the virus outbreak began, Estonia's largest island, Saaremaa, found itself incapable of managing the crisis so the rescue board sent a crisis management team to assist in Saaremaa County. The team helped the local municipality set up its crisis management headquarters and helped identify the

support it required, then coordinated with central government agencies and ministries to secure that support (Oidsalu 2022).The police and border guards reinstated border controls with EU countries; they patrolled streets and inspected public spaces, homes, and companies to ensure that everyone was adhering to the COVID-19 restrictions. The police were nearly overwhelmed trying to carry out functions that the health board was supposed to undertake, so the Estonian Parliament adjusted the relevant legislation to allow the health board to fine inhabitants who were not willing to follow instructions issued by the government and the health board.

The COVID-19 pandemic also revealed that there was no country-wide crisis coordination system in place among Estonia's four major regions. Consequently, the government made legislative adjustments to create such a system because hospitals are private entities in Estonia and the medical system had no crisis management command structure (Talving 2021). Problems occurred early in the pandemic when tensions arose between the Saaremaa Hospital and the Northern Estonian Regional Hospital, which was directed by the health board to supervise the northwestern region (including Saaremaa). Since the health board, which was responsible for the crisis management component of the COVID response, is a civilian authority, it did not have a crisis headquarters, so Col. Ahti Varblane from the Estonian defence forces was appointed as medical chief of the health board crisis staff. He served in this position for a year until a civilian was able to take over. Members of the women's voluntary military organization (*Naiskodukaitse*) also acted as crisis assistants on the health board.

There were some mild tensions between the military leadership and the state chancellery due to the latter's initial lack of basic crisis management routines. In the first two months, crisis coordination meetings were chaotic, with unclear goals and poorly assigned tasks, leading to mistrust among senior military leaders who saw the civilian management as disorganized. Although the EDF chief sent a colonel to advise on strategy, the effort yielded no tangible results. Despite this, no significant civil-military frictions were recorded, except for the far-right Estonian Conservative Popular Party (EKRE) accusing Chief of Defence General Martin Herem of violating constitutional rights with his vaccination requirement policy for servicemen (Laine 2023).

The state chancellery's situation awareness centre grew rapidly in the first weeks of the pandemic, becoming a strategic asset for the Estonian government. Despite the lack of a clear list of critical information requirements at the outset, the centre successfully designed effective SITREP (situation report) formats. These reports proved valuable to planners by providing detailed information on the situation in Estonia and offering an overview of other countries' counter-pandemic measures.

COVID-19 demonstrated that the Estonian defence forces are both willing and capable of providing rapid support to civilian authorities. However, the crisis also highlighted a lack of standardization in civil-military communication in times of a non-military crisis. Civilian authorities often struggled to draft clear assistance requests, sometimes requiring multiple rounds of consultations between the military and civilian agencies to reach a mutual understanding of what was needed.

3.2 Roles of the Military

Infection rates on Saaremaa skyrocketed at the very beginning of the pandemic and the island found itself short of intensive care beds. The EDF deployed its modular mobile role 2 field hospital (produced by the Estonian defence industry company Semetron and hosting 20 ICU beds) for integration with the Saaremaa hospital. The field hospital was transported from the mainland to Saaremaa and placed in front of the existing hospital building. Medical personnel from the 1st Infantry Brigade were subordinated to the Saaremaa Hospital's civilian administration. The hospital ended up treating just 19 COVID-19 patients, but the EDF demonstrated its readiness, and the deployment was deemed to have had a positive psychological effect on Saaremaa's inhabitants.

At the outset of the pandemic, the civilian health board had no individual personal protective equipment in stock, so the EDF gave the majority of its 700,000 masks and other materials to civilian authorities (Riik 2020). The EDF also provided civilian hospitals with several oxygen concentrators.

The police and border guards had, for the first time since Estonia joined the Schengen area, and had reinstated border controls with Latvia. Tens of EDL members were involved in patrolling Estonia's southern border. The EDF assisted the border guards with their UAV-based surveillance capability which operated in concert with two R-44 Robinson helicopters from the Estonian Air Force that were also patrolling the border. Members of the EDL were also deployed in ports and airports to maintain public order and to dispense COVID-19-related information to travellers. EDL members initially showed up for their assignments armed with their automatic firearms, but the weapons were soon removed as it was a civilian support operation and allowing military personnel in the airports and ports to be armed proved to be an overreaction.

On Saaremaa Island, EDL members also joined some of the police patrol units and, for the first time, police patrols consisted of a police officer and an armed EDL member. There were no problems or abuses of power during these patrol operations as EDL members were instructed and overseen by police officers. When the vaccines began arriving in 2021, EDF paramedics opened mobile vaccination centers in several Estonian cities for a few weeks. EDL volunteers (mainly from its sub-organization, the women's defence organization) assisted at some of the national testing sites (in the two largest cities, Tallinn and Tartu) and provided personnel for the Ministry of the Interior's national call centre. The EDF did not provide direct general logistical support for the distribution of vaccines. Around 100 conscripts from the EDF with paramedic backgrounds assisted civilian hospitals by providing basic nursing.

Overall, around 1600 EDF members and over 200 EDL members (including 100 conscripted paramedics in training) contributed to Estonia's COVID-19 emergency response measures in 2020 and 2021. The armed forces proved themselves ready to deploy in support of civilian services. The ordinary chain of command was suitable for running the support operation; no special structure had to be established. The EDF activated its operations planning group when the COVID-19 crisis began to provide

situational awareness for the country's military leaders (Lusti 2020, 14). In comparison to previous domestic deployments, the COVID-19 support operation was much longer (the military was deployed with varying capabilities for around 10 months during the first and second waves), whereas previous domestic deployments had lasted for a few weeks at most.

3.3   Readiness and Effectiveness

Because the support operation was moderate in size, domestic deployment of the EDF in response to the pandemic did not affect military effectiveness or readiness levels. The only risk that the military had to take was at the very beginning of the pandemic (March 2020), when the EDF handed over almost all of its wartime personal protective equipment (masks, etc.) to civilian authorities since they held almost no stocks of such items. There was no recorded impact on the EDF's other ongoing military operations.

The COVID-19 pandemic demonstrated that Estonia's armed services treat domestic assistance as a legitimate role for the military, but as the April 2020 Ministry of Defence directives indicate, the military had two main tasks: to maintain its military readiness during the pandemic and to support the civilian authorities. These efforts complemented each other as high infection rates in civilian society would have also meant higher infection rates amongst military personnel, conscripts, and reservists and that would have had a direct impact on Estonia's military readiness.

The key EDF personnel decision was to send half of the active troops home to work remotely and send the other half to barracks on the military campuses. This measure aimed to limit the spread of the disease, to continue military training, and to maintain combat readiness. The 1st and 2nd Infantry Brigades were quick to use reserve doctors from the military and the military academy's disaster medicine centre to address the crisis. The involvement of the medical officers from both brigades ensured that the commanders had competent medical advice to rely on for their planning and decision-making. The 1st Infantry Brigade headquarters quickly developed an initial COVID-19 patient management manual which, with some additions, was later introduced to the whole EDF (Olveti 2021, 18).

The Estonian Military Academy's Centre for Military and Disaster Medicine updated its guidance materials on the EDF e-learning portal ILIAS. Before the peak of the pandemic's first wave, the EDF's infantry brigades offered two courses in which personnel were taught to correctly use personal protective equipment. Those who had been trained were then tasked with monitoring the correct use of personal protective equipment elsewhere. Those monitors or watchmen were called "watsons" and were used by one of the largest civilian hospitals in Estonia, the Northern-Estonian Regional Hospital. According to one of the hospital's doctors, the medical staff there appreciated that this service was conducted by those outside of the civilian medical system as people were more apt to obey their instructions (Lusti 2020, 14–15).

Before the COVID-19 pandemic, the EDF had a universal pandemic response plan in place. It was developed in 2006 in response to SARS and influenza outbreaks and since then the military has kept on hand adequate medical supplies and personal protective equipment (Hiir 2020, 9; Lusti 2020, 14). Right across the defence forces, before COVID-19, every battalion had the capability and experience to isolate the sick from the healthy. Earlier experience has shown that units can quickly and efficiently adapt to an outbreak of viruses: the barracks spaces can be transformed into isolation units and accommodations can be rearranged as needed (Hiir 2020, 10).

The Estonian Military Academy's Center for Military and Disaster Medicine developed guidelines and training materials on the correct use of personal protective equipment. Appropriate training of defence forces' medical personnel started immediately after the virus arrived in Estonia. The USAG's Italy Forza Handbook (COVID-19 Response), issued by the US Army's Italian garrison, was of great help to the EDF in developing effective training. It provided medical planners with clear guidelines based on real experience (Olveti 2021, 18). The EDF also enhanced its hygiene and cleaning regimes in the barracks, used personal protective equipment, and introduced the use of bactericidal lamps (Hiir 2020, 9).

From the very beginning, the EDF isolated conscripts who were exposed to or suspected of being exposed to COVID-19. Pauses in conscript training were kept to a minimum. The EDF decided to continue with off-road training for whole units, minimizing their contact with civilians (the usual weekend "city pass" enjoyed by conscripts was postponed for some weeks). Although outdoors it is not always possible to ensure that hygiene conditions are comparable to those available indoors, the terrain of the countryside provides a "natural isolation," which has a positive effect in preventing the spread of infections. According to the EDF medical center, examples of this effect can also be found in the past in non-pandemic situations when the spread of infectious diseases was curtailed (e.g., so-called "stomach viruses," and the like). In this most recent pandemic, there was at times more freedom of movement (at least in terms of sports and leisure activities) in the EDF units than in the civilian environment (Hiir 2020, 11).

An important part of the EDF response to the COVID-19 crisis was the early vaccination of critical personnel. EDF personnel were amongst the first to get vaccinated. The defence forces quickly achieved a vaccination level of 80% and by autumn 2021 the vaccination rate among the forces was 30% higher than the national level. The EDF's measures gave the Ministry of Defence's (MoD) military and civilian personnel in the governance area significant protection during the third wave, particularly compared to the rest of society, as was apparent from the difference in the number of new cases among MoD personnel compared with the rest of society (Lusti 2021, 20–21).

Among EDF personnel, COVID-19 had the greatest effect on those involved in international missions and serving in defence cooperation groups, including having some impact on the international military exercises that had been planned to take place in Estonia in the first year of the outbreak. Despite the pandemic, troops based in Estonia attended exercises in Latvia and Lithuania in 2020. The most dramatic situation arose during a US air-to-ground bombing exercise in Estonia, during which

12 Americans were diagnosed with COVID-19. The exercise continued and the EDF still managed to prevent the Allies from passing the virus on to Estonian troops. When the exercise was over, the Allies remained in Estonia until the sick soldiers had recovered (Suurkask 2020, 11).

4   Civil-Military Relations

4.1   Securitization of the Pandemic

The debate over COVID-19 pandemic crisis management in Estonia was mildly securitized at the political level. The Estonian media has retrospectively questioned whether the government's decision to impose a state of emergency to combat the pandemic was justified. On March 12, 2020, when the state of emergency was declared, there were only 27 known cases of COVID-19 in Estonia (Kiisler 2023). Prime Minister Jüri Ratas (Centre Party) later stated that he was alarmed by TV footage from Bergamo, Italy. Despite this, Ratas was more sceptical about imposing the state of emergency than his right-wing conservative coalition partners, Isamaa and the Estonian Conservative People's Party. Isamaa's Minister of Justice and Chancellor of Justice Ülle Madise also opposed declaring a national state of emergency, as it had never been applied post-Soviet occupation (Äripäev 2020). The liberal opposition leader, Kaja Kallas, also criticized the Centre Party's hesitation at the time (Alas 2020). As the prime minister's party was more cautious about implementing stringent measures than the other parties, there were no direct attempts to impose top-down securitization in Estonia. Additionally, Jüri Ratas's conservative government was replaced by a liberal coalition on January 26, 2021. Prime Minister Kaja Kallas, who succeeded Ratas, was deemed more reluctant to impose COVID restrictions than the previous conservative government.

4.2   Civilian Oversight and Accountability

At the very beginning of the pandemic the permanent secretary for the Ministry of Defence issued a three-part strategy for the ministry's area of governance: (1) To keep infections under control among the defence forces to preserve defence readiness; (2) To support civilian agencies coping with the pandemic; (3) To maintain the pace of military capability development and to minimize any delays caused by lockdowns and travel restrictions that hindered the delivery of critical military materiel. The scale of the COVID-19 crisis was unprecedented, and early on the state chancellery discussed making extensive use of the military (mainly conscripts) to enforce lockdowns. Some of the plans it initially considered entailed establishing checkpoints on main crossroads; doing that would have used most of the 3000 conscripts that were

at that time serving in the defence forces. Some civilian authorities also played with the idea of using military logistics to deliver food and other essentials to vulnerable segments of society, but in the end, this idea was nixed because civilian private-sector food delivery services were well developed.

The only political controversy involving the EDF concerned mandatory vaccination in the defence forces. The chief of the EDF, Major General Martin Herem, imposed a vaccine mandate on all active service members. After doing so, he was the subject of some public criticism from the far-right opposition party, the Estonian Conservative People's Party, which vehemently opposed vaccine mandates. General Herem's decision was nevertheless in line with the Estonian government's direction and approximately 50 servicemen were relieved of their duties after refusing to be vaccinated.

4.3   Public Image of the Military

The spread of infections led to some changes in the internal practices of the defence forces: for some time, conscripts and the active service members training the conscripts were not allowed to leave their garrisons. This caused some tensions amongst the conscripts, but they were manageable.

Some of the defence procurement projects faced moderate delays, but overall, defence industries in some countries (as in Estonia) were exempted from forced lockdowns and were generally able to fulfill their contracts with few unimportant exceptions. The Estonian defence procurement agency (a separate civilian agency under the ministry of defence) also procured some personal protective equipment at the outset of the pandemic and the ministry of defence proposed consolidating all government procurement under this agency. However, the ministry of economics rejected the offer and instead enhanced the responsibilities of the governmental stockpiling agency, which also began work to procure medical stock for future medical emergencies.

The public image of the military was already quite high in 2019: 80% of Estonian residents trusted the defence forces, which ranked third in terms of trustworthiness after the rescue services and the police and border guard. According to a survey published in 2021, two years later, support for the defence forces had declined by one percentage point (79%). In 2021, compared to the previous year, the trustworthiness of the Estonian president, prime minister, government, parliament, and local governments had also slightly decreased, but the decline was not significant, and the survey results for the trust in state institutions remained largely at the same level as in the spring of 2019 (Eesti Uuringukeskus).

5   Lessons Learnt

The COVID-19 crisis gave the Estonian defence forces an unprecedented amount of experience cooperating with civilian agencies. Most notably, the command-and-control arrangements became much clearer and for the first time civilian authorities created and activated crisis management structures. It is fair to say that the national medical emergency command-and-control structure was created from scratch during the first six months of the pandemic. The integration of military advisors into the civilian medical system was eased by the fact the Estonian Defence Academy offers war medicine professionals the training they need to be able to respond to both civilian and military disasters. Common training ensured that close cooperation could begin quickly.

The COVID pandemic also revealed a lack of crisis management preparedness at the strategic level. The director of the Estonian Health Board was released from her duties soon after the pandemic began, as were some senior officials in the Ministry of Social Affairs. The Estonian government soon began drafting a new Crisis Readiness Act that would bring military and civilian crisis management cultures and processes closer together, make them leaner, and allow faster integration of military and civilian crisis managers during a nationwide emergency.

The state chancellery developed a government-level situational awareness system, SITIKAS, during the pandemic, as the Estonian government found that verified information was an essential requirement for accurate decision-making. COVID-19 had an impact on the way situational awareness reports were delivered to government ministers—and not just for medical matters. Estonia learned hard lessons about the importance of stockpiling medical supplies. The Estonian defence forces were the only organization that possessed a reasonable amount of personal protective equipment and civilian service providers used the EDF's wartime reserves. It also became evident that the country needed a distribution plan and a directing authority to be able to supply the most critical service providers with personal protective equipment promptly. Based on the lessons learned, the Estonian government established the Estonian stockpiling agency on July 1, 2021, which was given the responsibility of managing the stockpiling and storage of vital goods necessary during emergencies; it will take care of organizing the supply of those goods.

In the future, Estonia should give more serious consideration to the creation of a health protection capability as part of the Estonian defence forces medical centre, which might include involving health protection specialists in the military structure. Estonia is also considering creating a defence forces laboratory service, separate from the civilian system (Hiir 2020, 11). The importance of crisis logistics became evident after the Estonian Ministry of Social Affairs faced significant challenges in distributing vaccines and organizing vaccination networks promptly. At the beginning of the vaccination effort, there were also signs that governmental and private medical organizations distrusted each other's logistical ability. Some CEOs of prominent private entities tried to advise and assist government officials with the design of their vaccination logistics, but the officials ignored their advice. As a result of the

pandemic crisis, the Estonian Ministry of Defence has decided to ask academics specializing in logistics to evaluate the logistical efficiency and survivability of the military mobilization system.

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Slovenia

Ljubica Jelušič

Abstract Operating under the Ministry of Defence, the SAF plays a crucial role in Slovenia's security sector, with its domestic deployment roles clearly defined by law and national emergency plans. This framework enables military support during natural disasters and epidemics, with government approval being paramount. During the COVID-19 pandemic, the SAF played a crucial role in the national response across all phases. Despite initial governmental improvisation in crisis management, the SAF consistently provided essential support, including preparing military medical facilities, deploying CBRN units for disinfection, offering logistical aid, and assisting nursing homes. The military's mobile laboratory tested quarantined citizens, and medical personnel quietly supported civilian hospitals. While effective, challenges emerged from an overreliance on foreign aid and a perceived reluctance from some civilian health institutions to fully integrate military expertise, even when offered. The government's "securitisation" of the pandemic, though symbolic, drew mixed reactions. Crucially, strong civilian oversight, through Parliament and NGOs, supported the SAF's humanitarian roles while resisting any expansion into law enforcement. This sustained public trust in the SAF underscores its vital contribution to national stability and crisis management.

1 Introduction

Domestic assistance has been an important source of social legitimacy for the armed forces throughout Slovenia's history. In the former Yugoslavia, which ruled Slovenia between 1945 and 1991, the Yugoslav People's Army (YPA) had the reputation of being the first responder in cases of natural disasters in the country. Citizens saw disaster relief as a task, comparable in importance to the country's defence. Whenever the military understood and acted under this vision, citizens were willing to accept its presence and give its activities legitimacy (Jelušič 2005). When the Slovenian

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armed forces (SAF) were established in 1991 following Slovenia's independence, people viewed its core tasks in a corresponding light.

The Slovenian security sector is composed of defence (Slovenian armed forces), security (Slovenian police, intelligence) and disaster relief services (civil protection). Disaster relief services are organized by the Republic of Slovenia's Ministry of Defence to protect citizens in cases of natural and other disasters. Directives on which services and agencies can be deployed in emergencies are specified in the national protection and rescue plans. Every conceivable disaster has a specific national plan which is activated when the government declares a state of emergency. This activation procedure is also implemented in the cases of epidemics or pandemics of infectious diseases in humans, as was the case of COVID–19.

The first confirmed COVID-19 case in Slovenia was on March 4, 2020, and on March 12 the Slovenian government formally declared a pandemic. To slow the spread of the virus, the government immediately put in place several restrictions that affected public life. In the beginning, the restrictions appeared to be effective, and the number of cases dropped by April 2020, with the government ending the pandemic status on May 14, 2020. Newspapers and government publicists later called this period the first wave of the pandemic. Anxious to return to a sense of normalcy at the beginning of summer 2020, Slovenians started to travel abroad for their vacation. Many returned homesick, which resulted in a sharp increase in infections in August 2020, signifying the start of the pandemic's second wave. The second wave officially started on October 19, 2020, at which time the government declared another "state of pandemic"; it put in place even harsher restrictions than during the first wave in an attempt to limit social contact. After this, in December 2020, mass testing began, followed shortly thereafter by the arrival of the first vaccines. Medical staff and older citizens, specifically those living in nursing homes, were the first to be vaccinated. At the time, the public expressed significant interest in being vaccinated.

Despite these measures, by March 2021 there was a rising number of COVID-19-positive cases (and deaths), largely because of the Delta variant of the COVID-19 virus, which marked the beginning of the pandemic's third wave. Summer 2021 brought a brief respite in the number of cases, but they began to climb again in September 2021, which is regarded as the beginning of the fourth wave. The beginning of 2022 brought an unprecedented number of cases, largely due to the prevalence of the Omicron variant marking the fifth wave of the pandemic. In February 2022 the situation began to improve; the number of cases fell and as did the number of hospitalized individuals, partly because of vaccination. By mid-2022, 58% of Slovenian adults had been vaccinated (COVID-19 Sledilnik 2022).

The SAF actively participated in pandemic management throughout every wave of the pandemic. The SAF is an all-volunteer force with a regular and contract reserve component. In August 2022, there were 6254 active-duty servicemen and servicewomen, with an additional 766 on contract reserve (Slovenska vojska 2022). Slovenia has no national guard. During all phases of the COVID-19 crisis, around 200 service members were engaged at any one time providing different support services to the civil protection and health agencies. Juvan (2022) reported that each day approximately 50 members of the SAF, totalling around 900 during the first wave

of the pandemic, were involved in various tasks supporting the civil protection and health services. This was not without controversy; there were questions about how best to include the SAF in the management of the pandemic. While some argued that the military should be more involved in more activities, others were doubtful that the military had any useful experience in managing a pandemic. Nonetheless, Slovenia has broad-ranging legal and other regulations that permit the military to be deployed in cases of natural disaster, as the following section will discuss.

2 Domestic Operations

2.1 Constitutional and Legislative Framework

The Slovenian military's role is defined in the Defence Act, which was approved by Slovenia's Parliament in December 1994 and came into effect in January 1995 (Defence Act 1995). The chapter on the SAF's tasks and organization, particularly Article 37 (para. 1), regulates all basic military functions, which are: to execute military education and training for armed combat and other forms of military defence; to ensure the expected level of military preparedness; to execute military defence in case of an attack on the country by an outside force; to fulfil the responsibilities that the country has undertaken as a member of international organizations and international agreements. Another of the SAF's core tasks is to use its organization and equipment to cooperate in rescue and protection missions in cases of natural and other disasters. The Defence Act clearly defines the SAF's supportive domestic deployment role as it interacts with other national security agencies. In all cases of domestic military deployment, the government is the final decision-maker.

The third paragraph of Article 37 defines the relationship between the government, the SAF, and civil protection forces. The latter leads the services in rescue and protection operations. In a crisis, the minister of defence may decide to deploy the military, following a proposal or request from Slovenia's civil protection commander. Article 37, para 4, defines the relationship between the SAF and the police for border control. The SAF may cooperate with police in broadly protecting the state border. However, it must do so inside the state's territory (not physically standing on the border) and only in line with the government's decision. Military personnel do not have police authority when executing these tasks (Defence Act 2004).

An exception to this was the 2015 European migration crisis, when a migration route through the Balkans was established so that migrants could navigate through the Balkans with relative ease and speed, using public transport and without being stopped at border crossings, until they arrived at the Slovenian-Croatian border. The Slovenian border control police had strict measures in place for checking passports and personal documents but were unable to keep up with the increased demand because they were too short-staffed. At the time, the Defence Act did not allow the SAF enough freedom to assist the border control police, so the government added an

urgent amendment to the Act—Article 37A. Article 37A (Zakon o dopolnitvi Zakona o obrambi 2015) defines the SAF's scope of authority when assisting the police at the border, specifically when dealing with crowd control. The article made it lawful for the SAF to be involved in border control management, though military personnel still had to work together with police officers in mixed police-military patrols.

When the COVID-19 pandemic arrived, the National Protection and Rescue Plan in the Event of a Communicable Disease Epidemic or Pandemic in Humans, version 2.0 (2020) defines the roles of the Ministry of Health, the National Agency for Public Health, units of Civil Protection, and all other agencies and organizations that have the equipment and personnel to react in pandemics. Only the government can declare a state of the pandemic. The Ministry of Health prepares the proposal to activate the national plan. The state commander of civil protection decides to activate the plan, including the role the civil protection units will play, and informs the public.

2.2   Deployment in Domestic Roles

The task of proving domestic military assistance is a balancing act involving complex relationships among the Slovenian public and its opinion, the SAF, defence actors in rescue and protection, and official state policy. The Slovenian military's participation in rescue and protection operations at home is one of its most important sources of social legitimacy and the public has long supported its role in this task (Malešič 2015).

In the last decade, the SAF has often been deployed to support civil protection missions in cases of natural disasters. The units most frequently deployed were infantry units and logistical units with specific dual-use military equipment (mobile hospitals, floating bridges, transport facilities, etc.), and helicopters. It is important to note that the military has never been deployed to take on law and order tasks or to support the police, except to help with border control during the illegal migrations from 2015 and 2023. The military ended its border control assistance role in 2023 after neighbouring Croatia entered the Schengen Agreement. Croatia stopped the migrants on its border with Bosnia and Herzegovina.

As domestic deployments of the military in Slovenia are more regularly connected with disaster relief, it is useful to consider some details of two natural disaster cases (floods and snowstorms) that have affected the country. The year 2010 in Slovenia was very rainy and there was severe flooding; the worst of the floods were in central Ljubljana and in southwest Dolenjska. The state civil protection commander had to call upon every available resource from regions that were not affected by the floods and transfer them to the regions that had been flooded. All available military personnel and equipment were immediately activated, specifically the boats and divers, while the logistical unit helped with evacuation, emergency housing, and mobile kitchens. Infantry units helped fill sandbags, and military trucks delivered them to the affected areas to contain the flood. Once the water subsided, infantry units were dispatched to help clean up affected basements and cellars. Liaison officers from the SAF were

dispatched to every civil protection outpost where military units facilitated the flow of information to ensure that the military's cooperation with the civil protection authorities was orderly. The difference between the professionalism of the military and civil protection (a voluntary role) was apparent but was overlooked to avoid potential conflict between the two services.

The SAF was also deployed domestically following the ice storm that hit Slovenia from January 30 to February 10, 2014. Apart from two smaller regions, it affected the whole country. Trees froze, which caused them to snap and fall onto electrical wiring, roads, and houses. The electricity network was so damaged that 250,000 inhabitants (out of two million) were left without electrical power, and roads were closed and damaged. The damage to the electricity and transportation infrastructure was estimated to be close to €130 million. The forests were also heavily affected, with the total devastation caused by the ice storm estimated at between €300 and €500 million. Before this event, ice storms were not listed as potential natural disasters, though they were added afterwards (B.V. and A.Č. 2014). Because they were not listed as a disaster in Slovenia, there were no formal strategies for dealing with them. The civil protection and other rescue services, including the armed forces, had to find innovative ways to help people who were living without electricity in the middle of winter.

Between February 1 and 14, 2014, the civil protection commander activated the national plan for dealing with floods as it contained the most useful steps for helping to deal with the ice storm. Representatives from the telecommunication and electricity companies also helped salvage the disaster by coordinating the responses from both state and private companies, especially in allocating electric generators. These latter were in short supply, so the Slovenian government asked the European Commission's civil protection mechanism for its assistance.

During this event, the SAF helped mostly by providing emergency housing and setting up a mobile kitchen, transporting materials, cutting down trees and clearing roads, and supplying electric generators. Until February 9, 2014, a total of 3884 military personnel worked for 31,684 h (an average of 8.2 h per person) to respond to the disaster. In addition, the SAF dispatched 650 terrain and transport vehicles, 147 light-armoured wheeled vehicles (4 × 4 s and 6 × 6 s) and drove a combined 51,278 km, using 13,777 L of fuel (Svete and Malešič 2014, 32–33).

Despite the military's positive contribution in this and other collateral roles, the civil protection system has a history of not using and managing the military's rescue capabilities to their full capacity. This leads to a feeling among the public that the SAF is not engaged enough in disaster management. The public expressed a similar sentiment about the SAF's involvement in the COVID-19 pandemic. An exclusivist approach to such missions during the Slovenian military's early years has led to operational problems that have hampered a more effective use of the military in such operations (Malešič 2015).

3 Military Deployment During COVID-19

3.1 Coordination of the COVID–19 Response

When the COVID-19 virus hit Slovenia, the government declared a state of epidemic following the World Health Organization's (WHO) decision to declare a pandemic on March 11, 2020. With that declaration of an epidemic, the government activated the National Protection and Rescue Plan, version 1 (No. 84200–1/2016/5, 11 February 2016). The Slovenian government communication office reported 89 cases of infection (Vlada Republike Slovenije 2020). The declaration of a state of epidemic was declared on March 12, 2020, under Article 7 of the Infectious Diseases Act (2006). This Act regulates the declaration of an epidemic and outlines the different types of infectious diseases and special measures to prevent and control their spread. It also regulates monitoring, supervision, the role of the police, vaccination, and liability. Although initially considered a health crisis, the COVID-19 epidemic in Slovenia quickly became a complex crisis according to the Government of the Republic of Slovenia Act (2005). The government's response to a complex crisis should be conducted by a special crisis management structure composed of several government bodies that have different roles and responsibilities. The government remains the decision-maker in a crisis, with the National Security Council acting as a consultative body. The National Security Council secretariat may coordinate the response to a complex crisis and prepare response proposals. The national crisis management centre provides information and communication support for the government and other bodies, its interdepartmental analytical group provides analytical and professional support, and the government communication office ensures crisis communication coordination (Republic of Slovenia Act 2005, Article 20).

The National Protection and Rescue Plan specifies that the government conduct a risk assessment in the event of an epidemic or pandemic. The government manages the deployment of protection, rescue, and relief forces. Aside from the direction it gives to other bodies, the plan specifies the roles the SAF has to undertake. In this version of the plan, the Ministry of Health coordinated the overall response to the epidemic or pandemic while the state civil protection commander should lead the operational forces. This arrangement would have been sufficient had the size and scope of the COVID-19 epidemic stayed within the capacities of these two stakeholders to respond (Ferlin et al. 2021, 638).

Instead of turning to the existing solutions and activating the crisis management structure that the national plan laid out, Slovenia's very new national government, sworn in on March 13, 2020, established a new improvised structure—the crisis staff—which the prime minister led. Thus, instead of following the existing procedures that were well-known to the included agencies, all had to adapt to the government's new improvised structures and personalities.

In addition, the government soon realized that its new plan was too general to address the complex pandemic situation and was forced to decide upon and conduct many activities separately from the plan in an improvised manner. Once the first

lockdown ended and it had learnt some lessons, the government decided to improve the National Protection and Rescue Plan (2020), and in doing so it applied some solutions from the existing crisis management structure. As an integral part of the new, upgraded version of the plan, there are detailed action plans for individual stakeholders. This also includes some necessary documents that help facilitate the work of all government bodies during an epidemic.

3.2 Roles of the Military

The SAF's first role, as mentioned in the amended National Protection and Rescue Plan in the Event of a Communicable Disease Epidemic or Pandemic in Humans (2020), concerns the military's own protection. It says that the SAF must be prepared to survive one month autonomously during a pandemic. In addition to that, the SAF must be (1) Ready to deploy military medical facilities (Role 1 and Role 2 Light Manoeuvre) and military psychologists for public need; (2) Ready to deploy units for nuclear, radiological, chemical, and biological (CBRN) defence; (3) Ready to deploy water purification units; (4) Ready to deploy helicopter capabilities for logistics; and (5) Ready to deploy other logistic capabilities.

Besides the national protection and rescue plans, which are prepared for different disaster situations, the SAF has internal plans called VIHRA for supporting national institutions during different national disasters that have been declared by the government. VIHRA plans are the formal basis for any orders that unit commanders issue during a state of domestic deployment. In the case of COVID-19, several activities were immediately identified as priorities and implemented as soon as the national protection and rescue plan was put into effect. The medical unit and infantry, together with civil protection units, established an isolation and capacity area at the Role 2 LM hospital in the Edvard Peperko barracks in the capital city of Ljubljana (Juvan 2022). The logistic units organized the transportation of medicine and essential supplies, as well as the transport of patients. The medical unit organized support for nursing homes as they were the institutions that were hit the hardest. Chemical, biological defence, radiological, and nuclear (CBRN) units used their capabilities to disinfect public spaces and vehicles. The SAF also offered some support by distributing food and water, offering psychological support, and providing security support on the country's borders. It is important to note that the SAF did not offer any support to law enforcement in terms of upholding public order (Force Command, 2021). The SAF had an estimated 200 personnel on constant standby to support health institutions and civil protection.

The SAF prepared the mobile hospital (Role 2 LM) within the military barracks to accept patients. However, it was not used in that capacity; only the X-ray machine was moved to the city's main hospital where it was used for scanning COVID-19-positive patients. The disinfection equipment was deployed where needed as were military ambulance vehicles and equipment to transport patients. In addition, the military medical unit organized a mobile laboratory to test citizens returning from around the

world for COVID-19. These citizens were quarantined in hotel resorts throughout the country and a mobile military laboratory unit visited them to check whether their COVID-19 tests were positive. Military medical teams supported the activities of the main hospital in Ljubljana (the University Clinical Centre) by carrying out triaging COVID-19 patients at the hospital's entrance. Because military medical personnel were not in uniform when they worked in this capacity, the patients were not aware of whom they were in contact at the entrance to the hospital. However, their skills in de-escalating conflict were very important, especially when some patients started to become abusive or even violent as they requested special treatment.

Besides this, the military provided considerable logistical support as part of the pandemic response. Military buses, trucks, mobile kitchens, and laundry and shower rooms were available for all professionals and volunteers working in the civil protection and health institutions because they were working long hours in the field. Military support to nursing homes was limited to transferring the patients between different zones of infection and a military psychological team supported military personnel and their civilian relatives. If a patient needed higher transport or transfer capacities between different hospitals the SAF deployed its military transport capacities and infantry personnel. These activities were most significant in the pandemic's first and second waves.

3.3   Readiness and Effectiveness

Immediately after the government declared a state of pandemic, the SAF was aware that it had to follow all restrictions and health advisories to ensure that military personnel stayed healthy. The military medical unit established an internal system of tracing contacts of infected personnel, and all employees who showed symptoms or had close contact with an infected person were sent home to self-isolate. As the first tests became available, military personnel were frequently tested and their temperature monitored. The SAF also founded an internal advisory group for COVID-19; the group was charged with gathering information and advising force commanders about the restrictions that had been enacted to contain the spread of the virus. As the first vaccines arrived, the SAF formed an operational team that would oversee and plan vaccinations for the armed forces.

However, in the first and second waves of the pandemic, military effectiveness was constrained because of the COVID-19 restrictions within the barracks. Tracing all close contacts of military personnel resulted in growing numbers of quarantined service members, who couldn't participate in everyday military tasks like training. In the first wave, the military was successful in containing the spread of the virus: a total of only seven members became sick. More of a challenge were members deployed on peacekeeping missions where 329 members were spread out across 12 missions in 14 different countries and faced the risk of contracting the disease and bringing it back home (Force command 2021). Military families were very concerned about the health of their family members while out on missions, so the medical unit made itself

available to answer questions and offer psychological support (Vuga Beršnak et al. 2020). As part of its role to offer assistance within the NATO alliance, Slovenia sent a team of medical workers to EUFOR in Bosnia and Herzegovina and to the NATO headquarters in Sarajevo (Juvan 2022). In addition, deployed medical units helped partnered countries in KFOR (Kosovo) and EUTM (Mali) with personnel testing and vehicle disinfection.

For military personnel deployed in peacekeeping missions, testing was available and executed very strictly. Mission participants had primary access to available vaccines and everyone was expected to be vaccinated if they applied for deployment; only those who had been vaccinated were allowed to deploy abroad. The measures that the SAF adopted to stop the spread of infection were very successful. The restrictions were the same as they were for the rest of the country; however, they were more effective in the military setting because of their very strict respect for all measures.

Military effectiveness in dealing with the pandemic resulted in another benefit. When it became clear that the state epidemiological services were unable to cope with the influx of information during the second wave of the pandemic, military personnel offered their expertise in tracing close contacts of infected civilians.

Eventually, the civilian epidemiological services were unable to process the amount of information they received daily, which led them to decide to stop tracing close contacts altogether. As a result, a person who had been in close contact with a COVID-positive individual wasn't formally sent into isolation because there was no one to officially confirm it or to offer financial compensation to companies that would cover the costs of employees remaining at home. It seems strange that even though epidemiological services knew they were unable to keep on tracing close contacts, they did not contact the military experts for help—experts who had offered their services multiple times and who were successfully doing the same job on a smaller scale in the SAF. The health institutions were sometimes unwilling to cooperate or ask for assistance from military personnel; they didn't see the military members as equal or trustworthy in dealing with the disease. Similarly, civilian medical staff had some reservations about the medical expertise of military personnel. The logistical and medical assistance that the military personnel gave to the civil protection units and the health services did not affect the military's readiness to perform its core functions. The military itself had to follow strict measures to stop the spread of the virus and was not able to carry out its usual exercises, training, and other activities, except for preparing contingents for deployment in international operations and missions.

4   Civil-Military Relations

4.1   Securitization of the Pandemic

Malešič (2021) stated that there was a paradox in the institutional response to the COVID-19 crisis in Slovenia. In a decade-long project, scientists, practitioners and politicians made a comprehensive model of crisis management in Slovenia in which the roles of different stakeholders were defined and in which coordination among them was greatly improved. However, in 2020, when the worldwide pandemic arrived and a national epidemic was declared, the government ignored this model completely. This resulted in a high level of improvisation. Specifically, in the pandemic's first wave, the situation was constantly presented as a state of emergency, though the government made no official declaration to that effect. Politicians described the virus as the "enemy," and health agencies confronting the virus were the "first frontier" against it (Malešič 2021, 204). The motive behind such strong language was to ensure that citizens behaved compliantly when strict measures were imposed on them. Of course, some citizens were not easily swayed by this rhetoric and remained non-compliant with the measures. The role and tasks given to the police grew as it became more important for them to keep the civilian population in check. As they were stretched increasingly thinly, some politicians called for the military to be given additional roles, especially in border control, to free up the police to better fulfil their new tasks of enforcing the government's strict measures and sanctioning the violators.

The securitization of the COVID-19 crisis was also present in certain government communications. Specifically, at the end of the first wave of the pandemic, the government used military facilities to show the symbolic victory over the "COVID-19 enemy." In June 2020, the Slovenian Air Force joined the American Air Force in organizing a military aeroplane flyover to honour the official end of the pandemic. The aeroplanes started their journey from the military base in Aviano, Italy, and flew over hospitals in Slovenia to symbolically demonstrate gratitude to medical workers in hospitals for their role in "combating" the pandemic. The flyover was meant to highlight the feeling of optimism in Slovenian society at the belief that the pandemic was finally over, and to signify a return to "normal life" (Mihajlović 2020). However, by the end of summer 2020, this was a distant dream. The pandemic began to spread and was soon out of control; by August 2022 it had caused 6790 deaths (in a population of 2 million) and all of the romantic sentiment that the flyover might have inspired had turned into ridicule, as the gesture was seen as wasteful and self-congratulatory.

4.2   Civilian Oversight and Accountability

In Slovenia, there are political (governmental and parliamentary) and non-governmental (civil society, media) approaches to overseeing the domestic deployment of military units. When natural or other disasters occur and there is an urgency to deploy different rescue services, the government (consequently by the defence minister and general chief of staff) and the state civil protection commander decide to deploy the protection and rescue units. The SAF is one of the numerous stakeholders included in rescue activities and they are all subject to the political oversight of Parliament. When the SAF executes domestic assistance tasks for different agencies, it is firmly under parliamentary oversight, which is expected during and after its domestic deployment. The parliamentary defence committee receives reports and pays visits to the military facilities. During the COVID-19 crisis, members of parliament (MPs) did not have many opportunities to travel around the country to visit facilities due to the measures imposed to help against spreading the virus. However, they regularly discussed the reports prepared by the Civil Protection and Ministry of Health. Opposition MPs were very reluctant to endorse the Ministry of the Interior's proposals to increase the number of border control activities the SAF would take on so that the police could increase their presence in the cities. Civil society criticized the intention to deploy many service members in border control because it was understood as a manoeuvre that would enable police to strengthen the already strict measures in place in the cities and make them harsher.

In addition to political oversight, there is also very broad control over SAF deployments from non-governmental organizations, media, and ad hoc groups of citizens. During the COVID-19 crisis, they supported the increase in the number of service members included in humanitarian and rescue activities but, opposed any government attempts to increase the military's involvement in law-and-order functions, which it expected still to be executed by the police and not the military.

The migration crisis in 2015, when police were unable to control masses of illegal migrants crossing the Slovenian-Croatian border, was a test of control over the military in a domestic assistance role. The political parties and the public wanted clear regulations to keep the military under firm control when it was to be involved in border control activities. Now if a crisis occurs on the border and the police are unable to control the situation, Article 37A of the Defence Act requires that the military receive additional authorization before it deploys. In such cases, the government proposes to Parliament that the military be used and if a two-thirds majority of MPs support the decision, Parliament will give its authorization, and the military units can be deployed to assist with border control. The authority is limited to three months. If the issue persists, Parliament must again vote to prolong the military's deployment. The 2015 migrant crisis case has shown that the Slovenian public and the country's political decision-makers are very critical and suspicious of the military being deployed to help manage domestic law and order, but in contrast, both groups have great support for the military's humanitarian and rescue assistance.

4.3   Public Image of the Military

As noted earlier, Slovenian citizens have always supported and accepted the military's domestic deployment to provide disaster relief. The expectation that the military should help in times of crisis is a common sentiment among all generations. Older citizens who lived in the former Yugoslavia remember that the Yugoslav military (YPA) helped as a first responder in natural disasters such as floods, forest fires, and earthquakes. The YPA was also involved in some crucial public infrastructural projects, like the construction of water pipelines.

In Slovenia, an analysis of public opinion polls shows that nearly 90% of respondents see domestic humanitarian assistance as the military's most important task given that many Slovenians consider themselves not in immediate danger from outside forces or foreign militaries (Malešič 2011). However, the public firmly opposes using the military for law and order tasks, which it finds completely unacceptable.

The main reason for the public's strong distaste for using the military for law-and-order tasks originates from a 1991 military intervention the YPA staged in Slovenia to suppress an independence movement. Before then, the YPA had a lot of support among the people, as its conscripted soldiers were considered the "Face of the Nation." Seeing that same army turn against its people during the 1991 Slovenian independence movement was a bitter experience for many. Hence, the military's domestic roles in the newly independent state of Slovenia were restricted and were limited to humanitarian rescue and protection services. This only changed in 2004 with Slovenia's entry into the European Union, when the fourth paragraph was added to the Defence Act, which allowed the military to assist the police with border disputes and duties. It changed again in 2015 when the migration crisis showed that the police needed the military's assistance for some border control tasks.

Although the Slovenian public has always been very receptive to the deployment of the SAF on domestic soil for rescue and disaster relief operations, this same sentiment isn't necessarily shared by the other organizations and institutions involved in disaster relief. This is largely due to the incompatibility of organizational cultures between the civil protection services and units, which operate on a volunteer basis, and the professional military culture. Civil protection is forced to decentralize its operations to include all volunteers who are ready to help (when there are a great many prepared to help) or to motivate an additional number of volunteers when there are mobilization shortages. On the military side where professionalism is important and all activities are scrutinized for cost-effectiveness, the leaders oppose such improvisations, as they are prepared to deploy an exact number of individuals or units. Also, leaders of both organizations are always competing for public attention and trying to use the media to influence the public perception of their importance in disaster relief and the provision of national security.

5   Lessons Learnt

Knowing that the military's legitimacy has improved in the past when it has participated in disaster relief, the COVID-19 crisis feels like a missed opportunity for the SAF. The SAF tried to be a role model for stopping infections and it contributed substantial support for civilian logistical and medical tasks, yet it seems that these contributions were not acknowledged anywhere. Even the revised state strategies for pandemics do not include the military in any significant way. Dismissing the contributions of military personnel this way has an impact on morale. Military personnel sacrificed their time and their health to support their country in a fight against a disease likely to affect people for years to come. However, the seeming lack of public support or recognition of the military's contribution is linked to broader distrust in government. From the very beginning, citizens had a very low level of trust in the government and these low trust levels dropped further as the situation became more chaotic and as more unsubstantiated restrictions were put in place. The SAF was pushed into participating in the ineffective measures the government instituted, even though those measures made no sense to the public and became part of the public's critique of the handling of the pandemic.

The important lesson learnt from the pandemic was that the country under-utilized the military's capacity to respond and provide support during the pandemic. For example, the military was very effective in vaccinating its members, in supporting them, and in contact tracing those infected. The inter-service rivalry between the various players was another problem, as were the low levels of trust between the various stakeholders. Hence, there is a need to improve the coordination and cooperation among those who will be called upon to deal with disasters, especially where particular government departments need the "surge capacity" that the military can provide during catastrophic events.

COVID-19 is a disease. But in the future, as we look back at this time, we might realize that its massive scale and fast spread was only a symptom of the failings of the whole Slovenian protection system. COVID's devastating impact on Slovenia resulted from the inability of state services to work together towards a common goal. The incompetence of the governing bodies, who were unwilling to trust the experts in the roles they were ready and able to play, has led to dissatisfaction within the military, whose personnel executed all their assigned roles—and expected to be given additional ones.

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East and South Asia

Japan

Atsushi Yasutomi and **Saya Kiba**

Abstract The Japan Self-Defence Forces (JSDF), despite a constitutional clause renouncing war and maintaining armed forces, have become overwhelmingly recognized by the Japanese public for their crucial role in domestic disaster relief. This public trust, consistently highlighted by media portraying the JSDF as heroes, stems from their ardent commitment to humanitarian operations in disaster-prone Japan. The JSDF's mobilization during the COVID-19 pandemic, under disaster relief orders, exemplified this, with personnel assisting in quarantine, medical support on a cruise ship, and operating large-scale vaccination centers. While highly effective, this increasing reliance on the JSDF for domestic tasks raises concerns among experts inside and outside the JSDF and Ministry of Defence. Critics question if such deployments always adhere to the principle of being a last resort when civilian alternatives are unavailable, potentially overburdening the forces and compromising their primary defence capabilities in a rapidly evolving East Asian security landscape. Despite these concerns, the JSDF's unwavering dedication to disaster relief continues to foster strong public trust, demonstrating a unique civil-military relationship in Japan.

1 Introduction

Many Japanese people believe that the most important and primary mission of Japan's Self-Defence Forces (JSDF) is domestic disaster relief. While the Japanese public is divided over the rearming of the forces and the amendment of the Constitution, particularly the 9th Article that renounces war as a sovereign right of the nation and prohibits the use of force to resolv e international disputes, it is almost unanimous in

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appreciating the JSDF's contributions to disaster relief operations. Indeed, the media, which calls the JSDF a national hero in this disaster-prone country, has regularly highlighted the forces' ardent commitment to domestic disaster relief.

Legally speaking, Japan possesses no armed forces. Article 9 of the Constitution of Japan of 1946 stipulates that Japan forever renounces war and maintains no land, sea, or air forces.[1] Despite this peace clause, the JSDF emerged in 1954 as a transformation of the *keisatsu yobitai*, the national police reserve, which the United States established after the Korean War. The JSDF is staffed by approximately 230,000 men and women (MoD 2021a), roughly the size of the German *bundeswehr*. It has approximately 50,000 volunteers in its reserve force. The coast guard (approximately 15,000-strong) does not belong to the JSDF but operates under the Ministry of Land, Infrastructure, Transport and Tourism. Article 3 of the Self-Defence Forces Law stipulates that the primary mission of the forces shall be to defend the nation against direct and indirect aggression to preserve peace and the independence of the nation. The same article states further that the forces shall maintain national security, and if necessary, take charge of maintaining public order.[2]

Since January 2020, the JSDF's response to the novel coronavirus (hereafter, COVID-19) has been conducted under the auspices of the disaster relief dispatch orders issued by the defence minister. The first case of COVID-19 in Japan was reported on January 16, 2020. As infection numbers soared, the Japanese government declared a state of emergency on April 7. As the current legal system does not allow the government to enforce lockdowns, it only *requested* that restaurants, bars, and other businesses shorten their opening hours and that residents stay home. Accordingly, and unlike some countries in the West, the police were not mobilized to implement lockdowns, nor did the JSDF play any role in assisting in lockdown enforcement.

The JSDF was, however, engaged in providing medical facilities and transporting patients from airports to civilian hospitals. In April 2021, Prime Minister Yoshihide Suga instructed the defence minister to mobilize the JSDF to set up and operate large-scale vaccination centres in Metropolitan Tokyo and Osaka. The JSDF's medical officers and military nurses operated these vaccination sites until March 2023.

In this chapter, the authors discuss how the JSDF's domestic deployment has been confined to disaster relief operations, and how over the past several decades this assistance has secured it the public's firm trust. However, the public's increasing reliance on the JSDF to provide disaster relief risks undermining the defence capability it needs to respond to the rapidly changing security environment in East Asia.

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[1] The 9th Article reads, "Aspiring sincerely to an international peace based on justice and order, the Japanese people forever renounce war as a sovereign right of the nation and the threat or use of force as means of settling international disputes. In order to accomplish the aim of the preceding paragraph, land, sea, and air forces, as well as other war potential, will never be maintained. The right of belligerency of the state will not be recognized." The English translation of the Constitution of Japan is available at https://japan.kantei.go.jp/constitution_and_government_of_japan/constitution_e.html.

[2] The provisional English translation is cited from Eldridge and Musashi (2019).

2 Domestic Operations

2.1 Constitutional and Legislative Framework

The scope and role of any domestic and overseas mobilizations of the JSDF are defined in the Self-Defence Forces Law and specified in its 21 distinct dispatch orders (Eldridge and Musashi 2019).

Article 3 of the Self-Defence Forces Law defines the roles of the JSDF as follows[3]:

The primary mission of the JSDF shall be to defend the nation against direct and indirect aggression to preserve peace and the independence of the nation, and to maintain the national security and, if necessary, to take charge of maintaining public order. In addition to the provisions of the preceding paragraph, to the extent that any impediment or hindrance is not caused in the accomplishment of the principal duties of the same paragraph, and, to the extent to that the threat of or use of force is not conducted, the JSDF must also be tasked with carrying out the actions listed below pursuant to the provisions of the separate law.

(1) Activities conducted in the regions surrounding Japan that contribute to the safety and peace of the nation in response to the current state of affairs provide an essential influence on the security and peace of Japan in the region surrounding Japan.

(2) Activities that contribute to the preservation of peace and security of the international community, including Japan, through the promotion and understanding of international cooperation and other contributions to the effort for international peace with a focus on the United Nations (Eldridge and Musashi 2019).

The conditions under which the JSDF is mobilized can be categorized into 21 types of mobilization. Categories 4, 5, and 6, outlined in Table 1, are domestic operations that respond to domestic natural and other disasters.

Of the 21 categories under which the JSDF can be mobilized, disaster relief dispatch (no. 4) is most frequently ordered. Recent dispatches include rescue and rehabilitation in floods, storms, typhoons, and earthquakes, as well as livestock quarantine operations (such as at hog farms after outbreaks of swine fever have been detected). The JSDF's mobilization in response to COVID-19 was also a disaster relief operation.

2.2 Deployment in Domestic Roles

All the past JSDF domestic deployments have been limited to disaster relief-related operations. To date, the JSDF has never been deployed to deal with Japan's internal

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[3] The discussions in this article are based on the latest amendment of June 16, 2021. This provisional English translation is cited from Eldridge and Musashi (2019).

Table 1 The legal basis for the JSDF's mobilization (excerpt)

1. *Defence operation* (boei shutsudo)			
Legal basis	Article 76	Procedure	Parliamentary approval required
When	When it has been confirmed that it is necessary to defend Japan against an armed attack or when an armed attack is imminent	Ordered by	Prime minister
		Tasks	Dispatch of the whole or part of the JSDF

2. *Public security operation* (chian shutsudo)			
Legal basis	Article 78	Procedure	Prime minister must submit the order for the operation to Parliament within 20 days after its issuance and obtain parliamentary approval
When	When it is deemed that public security cannot be maintained by ordinary law enforcement in the event of indirect aggression or other such emergencies		
		Ordered by	Prime minister
		Tasks	Dispatch of the whole or part of the JSDF

3. *Guard JSDF facilities, etc.* (keigo shutsudo)			
Legal basis	Article 81-2	Procedure	The prime minister must ask the opinion of the governor of the related prefecture and also consult with the defence minister and the National Public Safety Commission and ahead of time shall designate the area to be guarded and the period in which the guarding will take place
When	When special measures are deemed necessary to prevent damage caused by individuals intent on engaging in destructive activities based on a political or other ideology with the intent to inflict damage on the country or people, or instill fear or panic, or who kill, or damage important JSDF facilities or other objects or areas of the United States Forces in Japan		
		Ordered by	Prime minister
		Tasks	Guard designated JSDF facilities. Guard designated objects and areas of the United States Forces in Japan

Table 1 (continued)

4. *Disaster relief dispatch*			
Legal basis	Article 83	Procedure	Prefectural governors and individuals prescribed by Cabinet order make a request to the defence minister or individuals designated by him or her to dispatch units. However, if it is recognized that there is no time to wait for such a request, the defence minister can make an immediate order
When	When it is deemed necessary for the protection of lives and/or property because of natural calamities and/or other disasters		
		Ordered by	Defence minister or individuals designated by defence minister
		Tasks	Dispatch of the JSDF units
5. *Earthquake disaster relief dispatch*			
Legal basis	Article 83-2	Procedure	By request from the director-general of the earthquake disaster warning headquarters
When	When the director-general of the earthquake disaster warning headquarters makes a formal request		
		Ordered by	Defence minister
		Tasks	JSDF units are dispatched for support operations
6. *Nuclear Disaster Relief Dispatch*			
Legal Basis	Article 83-3	Procedure	By request from the director-general of the nuclear disaster response headquarters chief
When	When the director-general of the nuclear disaster response headquarters chief makes a formal request		
		Ordered by	Defence minister
		Tasks	JSDF units are dispatched for support operations

Source Self-Defence Forces Law (Eldridge and Musashi 2019)

security. Unlike many other countries in the West, the JSDF has never helped the police implement crowd control or maintain public order. Nor was it deployed to ensure that citizens remained isolated at home in the first stages of the COVID-19 crisis, although it did provide quarantine and vaccination services as will be discussed later.

As Japan is particularly vulnerable to natural disasters, every year the JSDF deploys repeatedly to respond to disasters like floods, earthquakes, and volcanic eruptions. Table 2 lists the frequency and the size of disaster relief operations for which the JSDF was mobilized during the 5 years between 2016 and 2020. On average, the JSDF takes part in disaster relief operations approximately 500 times each year. A large-scale disaster relief operation takes place at least once a year,

sometimes involving hundreds of thousands of soldiers as, for example, with the July 2018 and 2020 floods.

Apart from the JSDF's disaster relief operation in response to COVID-19 (more about this later), it is noteworthy that it was deployed in the following specific instances, also under the auspices of disaster relief.

Transportation to hospitals located in larger cities of critically ill or injured patients residing in remote areas: As Table 3 shows, a detailed look at some of the JSDF's disaster-related operations for one year, 2018, reveals that approximately three-quarters of the dispatches involve transporting critically ill or injured patients residing in remote areas to hospitals in large cities. Such dispatches often take place in remote islands in Okinawa where few doctors are available and public transportation is limited.

The subway sarin gas attack in 1995: The JSDF conducted a decontamination operation in 1995 when a religious cult attacked the Tokyo Metro with the deadly nerve agent sarin. Immediately after the attack the government invoked a disaster relief operation in the contaminated areas and ordered, amongst others, the central nuclear

Table 2 JSDF disaster relief deployments, 2016–2020

FY	2016		2017		2018		2019			2020	
disaster	Kumamoto earthquake	Other disasters	Flood in Kyushu	Other disasters	July flood	Other disasters	Typhoon No.15	Typhoon No. 19	Other disasters	July flood	Other disasters
# of mobilizations	1	515	1	501	12	430	1	1	447	1	530
total # of soldiers deployed	33,123	814,200	81,950	23,838	957,000 (estimated)	22,665	150,000	964,000	43,285	411,000	58,828
vehicles	5,824	-	7,140 (estimated)	3,340	49,500	3,090	19,000 (estimated)	49,400 (estimated)	7,597	13,000 (estimated)	8,132
aircraft	725	2,618	169	792	340	644	20 (estimated)	1,610 (estimated)	707	270 (estimated)	567
ships	11	300	0	39	150	11	20 (estimated)	100 (estimated)	9	4	4

Source Defence White Paper 2021 (MoD 2021b)

Table 3 Type and number of disaster relief operations conducted in 2018

Type of disaster relief operations	Number of mobilizations	Share (%)
Transportation of emergency patients to larger hospitals	334	75
Large-scale firefighting in natural disasters	49	11
Relief operations following storms, floods, typhoons, and earthquakes	17	4
Search and rescue of trapped victims during natural disasters	17	4
Others	26	6

Source JSDF joint staff 2019

biological chemical weapon defence unit to lead the mission in collaboration with the police and the fire departments.

The Fukushima nuclear power plant accident in 2011: The JSDF was also mobilized to respond to the 2011 Fukushima nuclear power plant accident following an earthquake. In response to the accident, the government invoked a nuclear disaster relief dispatch (Self-Defence Forces Law, Article 83-3). This operation included using military transport helicopters to inject seawater into the damaged coolant system in the reactor. In collaboration with the local governments, the forces also helped evacuate residents trapped in the affected area.

Response to infectious animal diseases: The JSDF has been mobilized under a disaster relief operation to respond to infectious animal diseases such as bird flu and foot-and-mouth disease. It was first mobilized for this purpose during the 2004 bird flu crisis in Kyoto when it sterilized affected areas. It did similar tasks following the foot-and-mouth disease infections in Miyazaki prefecture (in the south of Japan) in 2010 in which 18,700 JSDF soldiers culled infected swine and sterilized swineries. While early on specialists and critics debated about the legal interpretations of the operations (Tanabe 2020), these tasks were carried out based on Article 100 of the Self-Defence Forces Law, which allowed the JSDF to assist in civil engineering works. All the later sterilization operations have been conducted as part of disaster relief operations.

3 Military Deployment During COVID-19

3.1 Coordination of the COVID-19 Response

Responsibility for responding to the COVID-19 crisis was given to the Cabinet secretariat, headed by the prime minister. Since 2002 the secretariat has the authority to respond to serious national crises, which has enabled it to gather information and quickly issue top-down decisions that are then implemented by ministries at both central and local levels. The 2011 Great Earthquake in East Japan is a prime example of this crisis management structure playing a decisive role in responding to a national calamity.

However, the country's response to the COVID-19 crisis was characterized by two inconsistencies that distinguished it from the 2011 earthquake case (Machidori 2020). The first concerns competition for leadership of the crisis between the Cabinet Secretariat and the Ministry of Health, Labour and Welfare (hereafter MoH). Through its expertise in epidemiology and access to nationwide medical information about symptoms and treatment, the MoH was better positioned than the Cabinet Secretariat for crisis management intelligence. Though it ended up being the Cabinet secretariat that gave nationwide crisis management orders, it did so by relying on information that the MoH provided. Accordingly, for the first few months of the COVID-19

response, the MoH took virtual leadership of the national crisis management, not the Cabinet secretariat.

The second inconsistency concerns policy implementation at central and municipal levels. While the Cabinet secretariat addressed the state of emergency and requested that governors prepare medical facilities and secure the resources necessary to meet local medical demands, the governors found themselves without such resources and did not have the necessary expertise and knowledge to effectively respond to the disease. As a result, they were unable to follow the central government's orders within the short time frames given (Takenaka 2020). Thus, although the Cabinet secretariat could issue centralized commands, local municipalities lacked the structures to implement them, which made the municipalities unable to meet residents' urgent medical needs (Nagata 2020).

Importantly, the JSDF did not perform a coordinating function in the pandemic. In normal disaster relief, it often coordinates with local governments and civilian fire departments. In responding to the pandemic, however, the JSDF simply received orders from the central government office via the MoD and performed its assigned duties.

3.2 Roles of the Military

The JSDF was given the following five tasks to help the country respond to the COVID-19 pandemic. The country treated COVID-19 as a natural disaster and thus the JSDF was mobilized in the context of natural disaster relief under Article 83 of the Self-Defence Forces Law (No. 4 in Table 1).

(1) *Assist in the repatriation of Japanese citizens (January–February 2020)*: The first call-out order for COVID-19 measures was issued on January 31, 2020, to help repatriate Japanese citizens and their family members from Wuhan, China, when the first outbreak in the region became apparent. The JSDF provided support services for the returnees on their arrival in Japan, provisionally housing them on a private vessel chartered by the Ministry of Defence (MoD 2020a). Also in January 2020, following a request from the Ministry of Health, Labour and Welfare, the JSDF sent 8 military nurses from the Self Defence Central Hospital (the JSDF's military hospital, hereafter Central Hospital) to help repatriate Japanese citizens and their family members from Wuhan on government-chartered aircraft. The nurses assisted with on-board quarantine (MoD 2021a, 275).

(2) *Provide quarantine support at major airports (March 28–31, 2020):* The Ministry of Defence issued another deployment order for a 4-day quarantine-related task on March 28, 2020, wherein JSDF personnel were stationed at major airports in Japan to assist in quarantining, collecting samples for polymerase chain reaction (PCR) testing, and transporting infected travellers to quarantine facilities. These personnel also conducted infection-prevention training for

employees in local governments and hotels. In this operation, approximately 8670 active personnel were mobilized, of whom 610 were engaged in quarantine assistance, 2920 in transportation assistance, 3490 in life support services, and 1650 in command and coordination tasks (MoD 2020d).

(3) *Offer clinical support aboard a cruise ship (February 2021):* On February 6, 2021, the JSDF's medical officers were dispatched to provide clinical support to infected passengers on the cruise ship *Diamond Princess*, anchored at the Yokohama Port (MoD 2020b). A total of 691 JSDF personnel including medical officers provided medical support while 1305 JSDF personnel delivered and distributed daily necessities to the ship, disinfected quarantine venues, and transferred Japanese and foreign passengers to medical facilities, accommodation facilities, and airports (MoD 2020c). This operation ceased on March 15, 2021.

(4) *Help local health authorities provide measures against COVID-19 infections*: By February 12, 2022, 35 prefectural governors had requested the JSDF's assistance in providing COVID-19-related measures. In response, the JSDF helped with such tasks as transporting infected patients, providing infection-prevention training to local government workers, and collecting samples for PCR testing (MoD 2022a).

(5) *Set up and operate staff vaccination centres (April 2021 March 2023):* This operation was mobilized neither at the request of local governments nor following a decision by the Ministry of Defence, but by the prime minister's instruction to the defence minister. In April 2021, then-Prime Minister Yoshihide Suga instructed Defence Minister Nobuo Kishi to set up and operate a large-scale vaccination centre in Metropolitan Tokyo, instructing him to mobilize the JSDF to conduct the operation because it was the only national organization capable of successfully managing such a large-scale medical endeavour. Accordingly, Defence Minister Kishi held an executive meeting of the Ministry of Defence and ordered the JSDF to mobilize for a 3 month-vaccination operation from May to July 2021. The first vaccination centre was set up in Tokyo and staffed by medical officers and nurses working in Tokyo's Central Hospital (Nikkei Shimbun 2021). Another centre was subsequently established in Osaka on the same day.

3.3 Readiness and Effectiveness

Despite the plaudits extended to the JSDF for their response to the COVID-19 crisis and general support from the public and media, a variety of experts, including retired JSDF officers and journalists, raised questions about the conditions of these deployments. One of their central questions was whether deploying the JSDF for COVID-19 operations was a convenient stopgap that the government relied upon instead of turning to other, more appropriate services. The JSDF is to be deployed for disaster relief operations only and under very specific conditions. The principles of the JSDF

deployment for disaster relief specify the following three conditions: (1) the situation is urgent; (2) the JSDF is only deployed when no other alternative civilian means are available; and (3) the deployment is for the public good.[4] The second condition in particular specifies that civilian services such as the fire department and police must be unavailable or ill-equipped for the task.

Questions were raised about whether the response to COVID-19 was a proper use of JSDF assets. Those queries build on previous objections that JSDF deployments for operations such as culling infected poultry and swine, and aerial evacuations of sick individuals (including non-emergency cases) from remote islands to city hospitals, have not complied with the limited conditions of deployment. In the case of COVID-19, critics made the argument that while deployments were necessary and effective in the preliminary stages of the crisis, prolonged engagements are inappropriate and are better conducted by civilian services. More importantly, critics are also concerned about the expectation developing in Japanese society that requests for JSDF disaster relief are granted automatically, notwithstanding the three conditions of deployment, particularly the condition that the JSDF is deployed only when no other alternative civilian means are available. Furthermore, critics worried that the current over-reliance on the JSDF's assets could overburden the JSDF and compromise its capabilities for national defence.

In his article in Gekkan-Hanada, "The JSDF, the Handy Helper—Is This the Right Choice?" JSDF Gen. Iwata also explains that JSDF cannot, in reality, reject any dispatch requests its receives from governors seeking assistance for local emergencies like the disinfection of facilities contaminated with bird flu. This is not only because the current legal system mandates such domestic deployments upon a governor's request, but because such deployments are gestures of the JSDF's solidarity with residents in times of difficulty, which garners their future support for the JSDF (Iwata 2021).

There is general agreement among JSDF troops that frequent deployment for disaster relief (including the COVID-19 response) interferes with regular operations and training. However, no data are available on the specific challenges, such as which missions are being hindered, or how much overtime JSDF personnel are working due to the increased disaster relief efforts. The troops also widely share the narrative that the image of the JSDF sweating through disaster relief operations significantly improves its public image and increases young people's aspirations for a career in the JSDF. However, no data shows a correlation between the frequency of disaster relief and the recruitment of new personnel.

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[4] Chapter 5 "Framework for Activities of the SDF and Others," Defence White Paper 2021 (English version) (MoD 2021b) p. 240 reads, "in the event of a natural disaster, the Minister or the designated officer will make a judgement based on a comprehensive consideration of three conditions (urgency, lack of alternatives, public good) and dispatch the units if it is deemed necessary for the SDF to respond to the disaster."

4   Civil-Military Relations

4.1   Securitization of the Pandemic

Leaders of many other countries securitized the pandemic to legitimize the mobilization of every possible (including legal and extralegal) policy measure to fight against COVID-19. However, the Japanese government neither attempted to securitize nor implemented strong measures such as lockdowns to control the virus's spread despite the majority of the population recognizing that the actions it did take were not enough. Nor did the government use war-related terminology to describe COVID-19 (Adachi 2024).

The reason for such reticence is that Japan's prime minister and politicians reflected on the country's past when strong state powers resulted in the country rushing into militarism and reckless war in 1940. There is a strong belief in Japan that the power of the state must be limited as much as possible. In April 2020, three days after Japan issued its first state of emergency since WWII (but without legal measures to restrict people's actions), famous journalist Soichiro Tahara met with then Prime Minister Abe and recognized that "the current situation is 'wartime.'" He said to the prime minister, "In Europe and the United States, under a state of emergency declaration, there are penalties for disobeying the government's requests. Fines or even arrests are possible. However, in Japan, there are no penalties. This means that many people will not follow the rules." Abe reportedly replied, "Japan's postwar system is not to impose penalties at times like this." He felt that stronger restrictions would be oppressive (Tahara 2020).

4.2   Civilian Oversight and Accountability

Until recently, debates about civilian control over the forces in Japan have mostly centered on the extent of the JSDF's involvement in the decision-making process within the MoD. Under the earlier Defence Ministry Installation Act, JSDF staff in the MoD were restricted from directly reporting to or advising the defence minister. Instead, they were obliged to do so via MoD civilian bureau staff who in turn would report to the minister of defence. This structure, which reflects lessons learnt from WWII when the imperial army had immense political power, was designed to maintain strict civilian control measures by preventing top JSDF decision-makers from directly influencing the defence minister and prime minister; it made MoD bureau staff superior to JSDF staff. For example, planning for various operations was designed and drafted by civilian bureau staff, while JSDF staff provided only supplemental technical details from the military perspective.

However, this structure has proved inefficient in the 21st century's drastically changing security environment. In 2015, a legal reform lifted the "superiority" status granted to MoD bureau staff and gave JSDF staff equal footing with civilian bureau

staff in policy-making discussions. Security experts have welcomed this change arguing, amongst other things, that more direct communication between JSDF staff and the minister of defence ensures that decision-making about military operations is more efficient and effective (e.g., Ito 2020). In contrast, others, particularly liberal critics, have argued that this change breaches civilian control, and fear it could give the JSDF more political influence over defence policy (e.g., Nikaido 2016).

Another notable discussion about civilian control has to do with legal reforms that address the interception of incoming missiles launched from countries like North Korea. The earlier version of the Self-Defence Forces Law required each of the National Security Council and the Cabinet to hold meetings to discuss the measures they should take against such attacks. Estimates are that ballistic missiles launched from North Korea can reach Japan within a matter of 10 minutes. This short period does not allow the Japanese government to convene emergency meetings, and so successfully intercepting incoming missiles requires that typical civilian control procedures be bypassed. To address this problem, a set of legal reforms in 2015 allowed the defence minister to issue a prior order allowing the JSDF to destroy incoming missiles under special conditions. This change is reflected in Article 83-2 of the Self-Defence Forces Law.

Compared to these events, the COVID-19 response has not changed Japan's civil-military relationship. The JSDF's domestic deployments for COVID-19-related tasks have raised a number of questions about the legal accountability and transparency of the deployments.

For instance, questions have been raised about the legal grounds by which JSDF soldiers were sent to the vaccination centres in Tokyo and Osaka in 2021. Not only were 90 military medical doctors and 200 military nurses deployed to the centres, but so were 160 other soldiers who oversaw logistics and other related tasks. The centres were open between May 24 and November 30, 2021, and inoculated more than one million people. The centres reopened in February 2022 (MoD 2021c).

Although the uniformed service members have various opinions about the operation or the "abuse" of the JSDF, the situation that Feaver (2004) has referred to as "agency slack" has not occurred. In the parliamentary arena, civilian politicians are pursuing this issue.

Some parliamentarians criticized the government's decision to use the JSDF to run the vaccination centres. In the budget committee hearing of April 30, 2021, for instance, Takashi Uto, a member of the House of Councillors, asked the minister of defence and the vice minister of health, labour, and welfare whether vaccination tasks and provision of life support for COVID-19 patients properly fell under the mandate of the JSDF. He criticized the government for not complying with the three principles of deployment for disaster relief (see earlier sections) when it chose to deploy the JSDF for COVID-19 (Sangiin 2021).

4.3 Public Image of the Military

Public confidence in the JSDF has always been high, which has much to do with its strenuous commitment to domestic disaster relief operations. In general, the media is appreciative and respectful of the JSDF's work in disaster relief. Reports frequently describe the arduous work of JSDF soldiers who are serious and relentless in providing services in difficult and trying circumstances. The 2011 earthquake that hit the eastern part of Japan is a case in point; almost half of the JSDF forces were sent to help with relief operations in that crisis. Media coverage showed scenes of JSDF soldiers giving their own warm food to survivors while they ate dry, cold, ready-to-eat meals (MREs) instead. Viewers also saw soldiers treating recovered bodies with the utmost respect, bowing deeply with eyes solemnly closed and hands clasped together in prayer. Reports also spotlighted soldiers whose own family members' whereabouts were unknown, yet who were devoted to searching for and rescuing others in the wreckage. Similar scenes of JSDF soldiers appear whenever a large-scale disaster hits Japan. Numerous books, journals, and testimonials have appeared recently praising the JSDF's disaster relief work, and the appreciative tone of these plaudits is nearly unanimous regardless of the political affiliations of the authors and publishers (for example, Inoue 2019; Futami 2021).

As recent opinion polls demonstrate, its dedication to relief work has garnered the JSDF substantial trust from the Japanese public. Indeed, according to polls conducted by the Central Research Services (CRS) between 2000 and 2021, the JSDF has always ranked highly amongst the national groups and institutions the public trusts most. As Fig. 1 illustrates, the public's confidence in the JSDF rose significantly in the 2012 survey (conducted immediately after the 2011 earthquake) and remains high as demonstrated by the most recent figures from 2021 (CRS 2022).
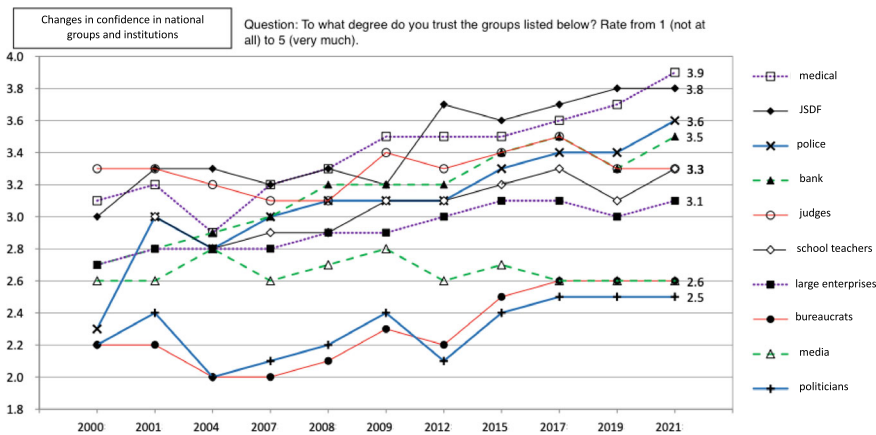
Fig 1 Surveys of public confidence in national groups and institutions. *Source* CRS 2022

Opinion polls regarding the JSDF and defence issues have been conducted by the Cabinet Office of Japan since 1972; they similarly reflect the public's high appreciation for the JSDF. According to a poll conducted in 2018 (see Table 4), more than 67% of those surveyed answered that they were interested in the JSDF in general, and approximately 42% said that this was because of the JSDF's involvement in people's everyday lives through its internal deployments such as disaster relief operations. To the question, "Do you have a positive or negative view of the JSDF?" no less than 90% of the 1671 respondents had a positive or rather positive image of the JSDF. When asked to explain what they expected from the JSDF, 79.2% of respondents answered that it was disaster relief, whereas only 60.9% answered: "national defence" (Cabinet Office of Japan 2018).

As discussed earlier, the JSDF's domestic deployments in response to COVID-19 were conducted under the rubric of disaster relief operations. As of February 2022,

Table 4 Public opinion polls regarding the JSDF and defence issues

1. *Are you interested in the JSDF? (select one)*	
Very much	14.9%
To some extent	52.9%
Not much	25.9%
Not at all	5.5%
2. *Do you have a positive or negative image of the JSDF? (select one)*	
I have a positive image	36.7%
I have a rather positive image	53.0%
I have a rather negative image	4.9%
I have a negative image	0.7%
3. *For those who answered "I have a positive image" or "I have a rather positive image" in the question 1, what is your reason? (select one)*	
Protects Japan's peace and independence	32.2%
Contributes to international peace and stability	52.9%
Involved in people's everyday life through disaster relief and other important activities	41.7%
Media reports on the JSDF	2.5%
The JSDF uses taxpayers' money	2.3%
The JSDF is not necessary	0.9%
4. *What roles do you expect from the JSDF? (multiple answers possible)*	
Disaster relief	79.2%
National defence (security in the air and seas of Japan's territory, security against attacks in the islands)	60.9%
Internal security	49.8%
Defence against ballistic missiles	40.2%

Note Questions in the table are excerpts. Translated into English by the authors. *Source* Cabinet Office of Japan (2018)

no formal polls or informal surveys of the public's appraisal of the JSDF's COVID-19 operations were available. Nonetheless, judging from the public's assessment of previous operations, one can reasonably assume a positive appraisal.

Indeed, as with other operations, the media's coverage of the JSDF's COVID-19-related tasks is generally supportive. Some journalists documented the difficult but effective repatriation of Japanese nationals from Wuhan, China, in January 2021. This operation saw 2 military nurses board each of four chartered aircraft and allowed the Central Hospital to accept and accommodate COVID-19-infected passengers (e.g., Ishidaka 2021). Other journalists reported the tireless efforts of military MDs, nurses, and other logistics officers who were mobilized to provide passengers trapped on board the *Diamond Princess* cruise ship with medical support and other kinds of help including laundry and food delivery (e.g., Inada and Jihiki 2020). The Yomiuri Shimbun, Japan's largest-circulation conservative daily newspaper, also detailed how the JSDF's administration of vaccination centres provisionally set up in Tokyo and Osaka greatly contributed to the protection of the Japanese people, describing the centres as a "last fortress" against the virus (Yomiuri Shimbun 2021). Criticisms did appear in liberal newspapers such as the Asahi Shimbun and the Mainichi Shimbun, in which reporters expressed concerns about confusing procedures at the vaccination centres (e.g., Asahi Shimbun 2021), but none of these criticisms has thus far amounted to any serious misgivings about the JSDF's COVID-19 response. Rather, the general public in Japan appears as grateful for the JSDF efforts during the pandemic as it has for previous disaster relief operations.

5   Lessons Learnt

The Japanese public is highly appreciative of the JSDF's domestic deployments for disaster relief and disaster-related operations. Opinion polls highlight the public's continued trust in the JSDF's commitment to relief work, particularly as the public repeatedly sees images and hears in-person interviews about the JSDF's self-sacrifice and passion for safeguarding Japanese citizens. In a country prone to large-scale natural disasters, it is common for many Japanese to have witnessed JSDF soldiers on relief missions at least once in their lives. In this respect, it is no surprise that the JSDF's operations to respond to the COVID-19 crisis were widely and amicably welcomed. For many, these deployments were even expected as standard procedure in case of any nationwide crisis.

However, as the analysis in this chapter reveals, small but emerging communities of critics—including soldiers on active duty, retired soldiers and officers, practitioners, and journalists – are voicing concerns about Japan's over-reliance on the JSDF for situations that do not warrant their involvement. The responsibility for this situation lies with both civilian bodies and the military. On the one hand, in the interest of maintaining and fostering support for its defence responsibilities and recruitment activities, the JSDF often takes on tasks that do not appear to comply with the three principles of disaster relief deployment. On the other hand, civilian

authorities enjoy having access to the JSDF's capacity to accomplish difficult tasks in short order and with willing efficiency. This *quid pro quo* presents risks as well as advantages. Critics warn that this informal compact may sacrifice the JSDF's defence capability – a capability that the country requires to respond to the rapidly changing security situation in East Asia and beyond.

The JSDF's deployment to respond to the COVID-19 pandemic has raised questions both within the JSDF itself and amongst the Japanese public about how JSDF assets should be used for domestic relief operations. The reliance on the JSDF during the pandemic is once again challenging the applicability of the three principles of disaster relief deployment, particularly the condition of "no other alternative civilian means available." Both the JSDF and the Japanese public need to confront what they understand as the purpose of the JSDF's domestic deployments and what actions are *bona fide* in fulfilling the values of that mandate as it stands.

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South Korea

Insoo Kim

Abstract This study examines the domestic deployment of the Republic of Korea (ROK) Armed Forces, with a focus on its expanded role in disaster response and public support, particularly during the COVID-19 pandemic. While the ROK military has traditionally been tasked with national defence, its responsibilities have evolved to include non-military missions under the framework of comprehensive security. The paper analyzes the constitutional and legal basis for domestic military deployment, the institutional mechanisms governing its operations, and its historical precedents. It highlights how the COVID-19 crisis accelerated military involvement in public health responses, raising concerns about the infringement of conscripted citizens' rights and the broader implications for civil-military relations. The findings reveal that, despite the military's contributions to pandemic control, public perceptions of military service and institutional reliability remained largely unchanged. The study concludes with policy recommendations to balance military involvement in public crises while ensuring civilian oversight, legal accountability, and the protection of service members' rights.

1   Introduction

The Republic of Korea (also known as ROK or South Korea) has one of the largest militaries in the world. In 2024, the total number of active service was about 480,000, and its military power ranked sixth in the world (Global Fire Power 2024). The army, navy, air force, and marines comprise the ROK Armed Forces. Each service branch, including the reserve forces, consists of citizens conscripted for mandatory military service as well as professional officers. The mission statement of the ROK Armed Forces is to protect the freedom and independence of the Republic of Korea. Article 5 of the Framework Act on Military Status and Service stipulates that the armed forces will work together to defend the state, protect its liberal democracy, contribute to the

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unification of South and North Korea, and further contribute to world peace. However, the ROK Armed Forces is involved in more than deterring external security threats; it also carries out civilian support missions such as disaster relief, medical assistance, logistical support, search and rescue operations, and support for law enforcement. These missions are typically undertaken when civilian resources are overwhelmed or require additional support from the military.

For two reasons, the culture of the ROK Armed Forces enables it to accept civilian support missions as a legitimate role—one with a status equal to combat. First, Korea has operated for centuries under the Confucian ideology, which sees the state as an enlarged family. Historically, this cultural legacy has led to the military practice of helping people in need of labour, even in non-national emergency and disaster situations. For example, Korean troops have traditionally helped with rice planting and harvesting every spring and fall. The military placed 113,000 soldiers in public support roles in rural villages in 1960. Conscripts, predominantly from rural backgrounds, contributed labour to neighbouring farms because their civilian support was, in essence, extending the same assistance they would offer to their own families back home. The scale of labour assistance provided to farms increased significantly to 485,000 personnel in 1980 even though Korea's transformation from an agrarian society to an industrial society had already taken place (Hwarangdae Research Institute 1992, 164). This large-scale increase in soldiers assisting civilians would have been impossible without the country's shared belief that the military must help its people. This cultural tradition continues to this day.

Second, the ROK Armed Forces have developed a military doctrine that highlights the importance of winning the hearts and minds of the local people. For example, the Army objectives are as follows: (1) contribute to the war effort, (2) achieve victory in all ground battles, (3) serve the people's interests, and (4) build a strong and elite force (Republic of Korea Army 2024). The third objective in particular encompasses civilian support missions like "damage restoration and prevention of contagious disease, public order, preservation of industrial order, and support in the case of national events" (Republic of Korea Army 2024). It was during the Korean War that the military learned how to win the hearts and minds of the local people they served. Later, in the Vietnam War, Korean troops fighting the communists organized similar civil operation missions based on their experiences and the lessons they had learned from the Korean War. The military's continuous focus on winning public support is evident in UN peacekeeping operations. From their inception, the South Korean UNPKO units comprised medical support groups and engineering support groups to provide humanitarian assistance to local people.

Following these traditions, the ROK Armed Forces assisted civilian populations during the COVID-19 outbreak in 2020, offering medical aid, logistical assistance, and public health measures. South Korea had its first confirmed case of COVID-19 on January 20, 2020. Over the next month, the number of patients increased rapidly from 30 to 104 and reached 8,652 in March 2020 (KDCA 2024). In response to the incontrovertible spread of infection, the ROK Armed Forces provided full-scale civilian support, mobilizing all available resources, including troops, equipment, and facilities. The ROK Armed Forces successfully supported pan-government responses to

the pandemic while simultaneously blocking the influx of COVID-19 to the barracks. However, along with its democracy maturing in recent years, the cultural atmosphere in South Korean society has also changed, and people have begun to question the military's mission of providing support to the public. Accordingly, the ROK Armed Forces came under massive criticism during the pandemic, which made it harder for the military to mobilize conscripted citizens to give public support. Consequently, instead of listing numerous success stories celebrating the military response to the pandemic crisis, this study will examine the infringement on the fundamental rights of conscripted citizens by the ROK Armed Forces in the name of civilian support for two reasons. First, this inquiry is worthy of exploration because there are many fallacies in the current discourse on the military's response to the COVID-19 outbreak; those fallacies ignore the risks and costs that the military's civilian support mission has imposed on individuals within the military. Second, the COVID-19 outbreak brought the latent problem of deploying conscripted citizens to respond to national emergencies and disasters to the surface, revealing its dark side.

2   Domestic Operations

2.1   *Constitutional and Legislative Framework*

In South Korea, Article 5 of the constitution stipulates that "the Armed Forces shall be charged with the sacred mission of national security and the defence of the land." By constitutional provision, Article 5 of the Framework Act on the Status and Service of Soldiers specifies that the military shall carry out its assigned mission to protect the lives and property of the people. Under these legal obligations, the South Korean government has recently enhanced the role of the military in disaster relief, adopting the concept of "comprehensive security" (MND 2020, 71).

The enhanced role of the military began with the Roh Moo-hyun government (2003–2008), which established the Crisis Management Center at the Blue House, the president's office, as a central hub to integrate and control the efforts of government agencies. Accordingly, the Ministry of National Defence (MND) assumed the military's new mission to support safety and disease management at the national level. This policy orientation continued in the Moon Jae-in government (2017–2022). In particular, the Defence Reform 2.0 policy led to the establishment of a cooperative system with related ministries and agencies at home and abroad, promoting the military's role in achieving comprehensive security against transnational and non-military threats. Finally, in 2020, the Moon Jae-in government revised the Framework Act on Disaster and Safety Management (Disaster Safety Act) to authorize the disaster management agency to request support from the military.

In case of disaster or emergency, the executive branch authorizes the domestic deployment of the military. Figure 1 shows how the MND stipulates the procedure of deploying troops to provide public support in Disaster Countermeasure Service
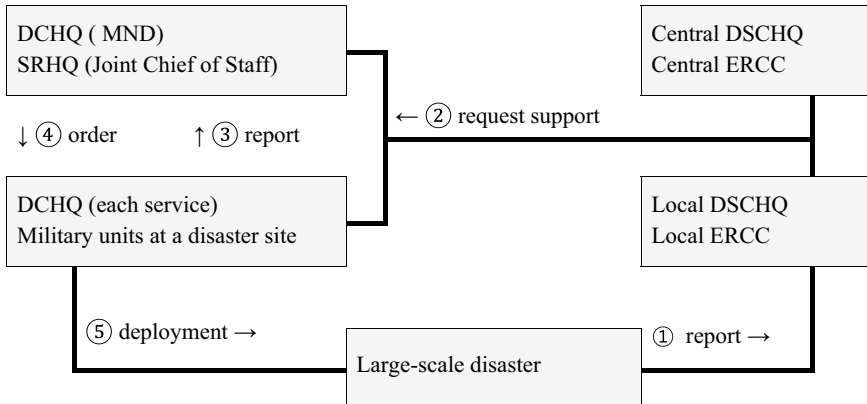
Fig. 1 Process of securing military public support. *Source* MND (2005) "Disaster Countermeasure Service Directives."

directives. First, when a large-scale disaster or emergency occurs, the national and local governments establish DSCHQ (Disaster and Safety Countermeasures Headquarters) and ERCC (Emergency Rescue Control Centers) to oversee the overall responses. Then, the military sets up DCHQ (Disaster Countermeasures Headquarters) in the MND and within each service. In the meantime, the Joint Chief of Staff (JCS) has formed SRHQ (Search and Rescue Headquarters) because JCS approval is necessary to deploy troops and military equipment to a disaster site. Third, if the local government asks for support directly from the DCHQ in each service, it is reported to the DCHQ in the MND. Fourth, DCHQ and SRHQ guides give guidance to each service on civilian support operations. Finally, each service deploys the military units that are available for disaster and emergency relief.

This institutional structure has thoroughly subordinated control over the military to civilian bodies for two reasons. First, the military can deploy troops only when requested by the civilian government. Except for providing support to people in need, the military's role is minimal in civilian settings. In terms of command authority, Article 44 of the Disaster Safety Act stipulates that the local head of government at the disaster site shall control troops and equipment. Second, there has been no conflict between the military and civilian government because the military neither claimed jurisdiction over disaster or emergency relief nor refused to be directed by civilians at disaster sites.

2.2 Deployment in Domestic Roles

The domestic role that the ROK Armed Forces carried out before the COVID-19 pandemic was divided into two. First, as Stepan (1973) suggested, in the new military professionalism model, the ROK Armed Forces developed a civil operation

doctrine to fight a war against communists. In particular, the military carried out civil operations to separate residents from communist guerrillas instigating rebellion against the South Korean government in rural areas before and after the Korean War (1950–1953). However, once the middle class was enlarged by the country's rapid economic growth, widespread protests against military rule intensified, frequently forcing the military government to deploy troops to ensure the regime's survival. The most tragic event in recent Korean history occurred in 1980 when Special Warfare Command violently suppressed protesters in Kwangju, killing citizens. Therefore, even after the military retreated from politics in the 1990s, concerns about military intervention lingered whenever political turmoil threatened public order.

For example, in 2017, the National Assembly impeached President Park Geun-hye. As supporters and opponents of impeachment flocked to the streets to protest, concerns arose that they would not accept the constitutional court's judgment and would cause disturbances. The media reported that the commander of the Defence Security Command (DSC) proposed declaring martial law to defend President Park Geun-hye, assuming that the constitutional court would overturn the impeachment. Although the DSC could not implement the alleged martial law plan because the constitutional court decided to impeach the president, the military's attempt to infringe on democracy led to a barrage of criticism. In particular, when requested by the head of local government in case of disaster or emergency, by garrison decree the army chief of staff still could deploy troops on domestic soil to protect any army buildings and facilities. The Moon Jai-in government abolished the garrison decree in 2018, one of the legacies of military rule, so there remains no solid legal basis for the military to carry out internal public security missions without the permission of the National Assembly. Consequently, domestic deployment of the military to restore public order is not justified in South Korea.

Second, as Pye (1967, 80) contended, the South Korean officer corps, "baptized by Western civilianization," attempted to modernize their country by transforming soldiers into modernized men. Like the military in other developing countries, armed with modern weapons, technology, and equipment, the ROK Armed Forces were the most modernized organization in South Korea in the 1960s. The intellectual capabilities of the officer corps become clearer if we compare the make-up of those studying abroad. There were more than twice as many military officers as civilians studying abroad in the early 1960s (Hwarangdae Research Institute 1992, 203). The ROK Armed Forces served as an educational institution where young men from rural villages could access modern technologies and skills. Furthermore, the military government played a crucial role in national development, constructing hospitals, schools, roads, and bridges for the country (Hwarangdae Research Institute 1992, 168).

However, the military role in national development has gradually shifted to focus on disaster relief for two reasons. First, thanks to rapid economic growth, the number of civilians studying abroad increased dramatically such that by the 1980s there were more than 20 times the number of civilians as military officers being educated outside the country, which enabled civilians to catch up with the military's technological

superiority. Second, although its technology and equipment levels had become inferior to those of some private companies, the military was capable of providing the necessary support to people in isolated areas or disaster situations. The history of military assistance in fighting a pandemic goes back to the 1950s when cholera and typhoid were the most deadly infectious diseases in Korea. Even in the 1980s, after the medical system's rapid improvement, the military quarantined civilians from time to time and undertook vaccination campaigns, such as the vaccination of about 50,000 people in that decade (Hwarangdae Research Institute 1992, 168).

Table 1 shows that although the total number varies from year to year according to the frequency and intensity of disasters, more and more troops have taken part in epidemic control in the past five years. For example, after 2015, when the MERS pandemic infected 168 patients and caused 38 deaths in South Korea, the MND continued to provide medical personnel to treat and nurse patients. In 2019, ASF (African Swine Fever) hit pig farms, which led to the culling of more than 10,000 pigs. In response to the crisis, the military carried out an operation to block the movement of pigs through the DMZ by which the ASF virus was flowing from North Korea. In 2020, the ROK Armed Forces provided the greatest number of troops ever to help address two situations. Exceptionally heavy rain hit the entire Korean peninsula for 54 days that year. The aftermath of the flood created about 8,143 victims (MPAS 2020). Also that year, COVID-19 arrived, which triggered the military's full-scale involvement in the pandemic response.

Table 1 Number of service members deployed for civilian support by the disaster in five years (Park 2020)

Disaster	2016	2017	2018	2019	2020	Total	%
Typhoon, heavy rain	53,139	35,931	13,854	64,739	114,090	281,753	33.3
Heavy snow	5,437	11,673	7,848			24,958	3.0
Earthquake	2,956	5,801				8,757	1.0
Heatwave, drought	321	3,072	2,271	6		5,670	0.7
Search and Rescue	2,111	2,473	1,165	4,208	4,141	14,098	1.7
Wild fire, conflagration	5,180	23,707	8,970	22,442	1,916	62,215	7.4
Epidemic	5,238	29,185	10,175	358	271,213	316,169	37.4
Livestock epidemic				107,927	23,963	131,890	15.6
Total	74,382	111,842	44,283	199,680	415,323	845,510	100

3   Military Deployment During COVID-19

3.1   *Coordination of the COVID-19 Response*

The Korea Disease Control and Prevention Agency (KDCA) is the central administrative agency in Korea in charge of quarantine, investigation, testing, and research on infectious diseases. The origin of KDCA goes back to the 2003 outbreak of Severe Acute Respiratory Syndrome (SARS). At that time, the Ministry of Health and Welfare's National Health Center had only two or three experts in charge of infectious diseases and quarantine. The necessity of establishing a professional organization to provide more systemic pandemic countermeasures resulted in the establishment of the Korea Center for Disease Control (KCDC) in 2003. However, the KCDC was severely criticized in 2015 following the outbreak of MERS as it proved unable to prevent the pandemic. Therefore, when the COVID-19 crisis hit in 2020, the KCDC was promoted to KDCA, which monitors pandemic movements and occurrences 24 h a day and analyzes pandemic information.

When the COVID-19 crisis broke out in 2020, the government entrusted the Central Quarantine Countermeasure Headquarters (CQCHQ), headed by the KDCA commissioner, with the responsibility for managing quarantining and made the Central Accident Management Headquarters (CAMHQ), headed by the minister of health and welfare, responsible for providing support to the CQCHQ. Furthermore, the government established the Central DSCHQ with the prime minister as the head of the headquarters. As prescribed by the Disaster Safety Act, the Central DSHQ was authorized to request personnel from the defence ministry to provide support to the public. In January 2020, one month before the launch of the Central DSCHQ, the defence ministry organized the Quarantine Countermeasure Headquarters (QCHQ) to mobilize military personnel, equipment, and facilities at the government's request. The MND responded to the Central DSCHQ at unprecedented speed and intensity with support from the Armed Forces Medical Command and Defence Rapid Support Groups in charge of medical and non-medical support. However, as the Central DSCHQ allocates military resources at the request of local governments in need, the military did not have the authority to decide what to provide and whom to support. Figure 2 shows the organizations that were in charge of the COVID-19 countermeasures.

3.2   *Roles of the Military*

In South Korea, the pandemic began in February 2020, when the number of patients affected ballooned to hundreds a day. In particular, Daegu, South Korea's fourth-largest city, suffered from a higher infection and death rate than other regions despite the government's efforts to prevent the spread of the disease. Daegu was virtually locked off from the rest of the country because Daegu's residents refrained from

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                    │ Office of the President      │
                    │ (Secretary for Social Policy)│
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│ CQCHQ                    │              │ Central DSCHQ            │
│ (KDCA Commissioner)      │              │ (Prime Minister)         │
└──────────────────────────┘              └──────────────────────────┘
┌──────────────────────────┐              Request
│ CAMHQ                    │              public support
│ (Minister of health and  │                  ↓
│ welfare)                 │
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                    │ Defence QCHQ                │
                    │ (Minister of Defence)       │
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│ Armed Forces Medical     │         │ Defence Rapid Support    │
│ Command (medical support)│         │ Group (non-medical       │
│                          │         │ support)                 │
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┌──────────────────────────┐         ┌──────────────────────────┐
│ 1) Hospital Preparedness │         │ 1) Immigration quarantine│
│    for COVID-19          │         │    support               │
│ 2) Medical personnel     │         │ 2) Disinfection support  │
│    support               │         │ 3) Transportation support│
└──────────────────────────┘         └──────────────────────────┘
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Fig. 2 Organizations in charge of COVID-19 countermeasures

going out as much as possible, and other people did not visit Daegu due to fear of infection. This situation led the Moon Jai-in government to call for unprecedentedly robust measures to prevent the COVID-19 outbreak from spreading. Accordingly, on February 28, 2020, Defence Minister Chung Kyung-doo ordered the military to put all available resources into Daegu and Geyongbuk, where 84.5% of the confirmed cases occurred (KDCA 2024).

From the outset of the COVID-19 outbreak, the MND moved quickly to provide medical support when other national agencies requested it. First, the MND designated and operated military hospitals dedicated to COVID-19 patients, simultaneously deploying military doctors and nursing officers to treat civilian patients. In February 2020 there were not enough negative pressure wards at the military hospital in Daegu to accommodate all the patients that needed them. To address the shortage, the MND had an army corps of engineers construct a negative pressure ward, which shortened the expected construction timeline by a third. In addition, to respond to the early shortage of medical facilities, the army set up and operated mobile medical units.

Second, the MND responded to the lack of medical personnel by postponing and reducing military training for 742 new public health doctors and 96 new military doctors to quickly boost the number of medical personnel. In addition, the Armed Forces Nursing Academy sent 75 of its cadets, who were due to graduate in February 2020, to Daegu Hospital (Jeong 2020). Later, in December 2020, the MND put the third-grade cadets into the COVID-19 treatment center to provide medical support.

Korea had not put cadets in the field before they had graduated since the outbreak of the Korean War in 1950. In addition, the MND deployed military doctors and nursing officers to the airport and port quarantine stations, the front line of the COVID-19 response. With the help of interpreters in military uniforms, the military's medical staff performed basic epidemiological investigations, and influenza diagnoses, and collected samples. The MND assigned CBR (chemical, biological, and radiological) units under the Armed Forces CBR Defence Command to disinfect facilities where the risk of COVID-19 spread was high such as at the residences of confirmed patients and in public facilities. In addition, some soldiers volunteered to oversee the immigration process and were in charge of classifying passengers, writing health status questionnaires, installing self-management diagnostic apps, and checking domestic contacts.

The forces helped in other ways, too. Early on in the COVID-19 crisis, people suffered from a shortage of masks because there was a lack of workers producing them, and truck drivers refused to go to places where COVID-19 outbreaks had occurred. Military personnel helped produce and deliver medical supplies to civilians. For the first time in the history of the ROK Armed Forces, the air force used its own transportation, such as C-130 aircraft, to import medical supplies after commercial airlines suspended their operations.

3.3   Readiness and Effectiveness

The MND states in its guidelines for civilian support that the ROK Armed Forces shall provide the necessary assistance to the civilian population upon request and within a scope that does not interfere with the performance of military operations. This meant that the ROK Armed Forces could not prioritize the COVID-19 response over the fundamental mission of national defence. North Korea has demonstrated its nuclear attack capability by conducting nuclear tests. Even at the height of the spread of COVID-19 in 2020, North Korea continued to conduct missile test launches in its quest to secure nuclear-capable missile systems. The ROK Armed Forces had to maintain full war preparedness due to North Korea's military threats. Accordingly, conscription and boot camp training continued. It was inevitable that some military training and exercises were reduced or postponed to curtail the increased risk of infection through contact with civilians because soldiers living in groups are vulnerable to infectious diseases. In 2020, the MND instructed that mandatory field exercises be implemented only at training grounds where civilians would not come into contact with soldiers. In the same vein, and for the first time in the reserve forces' 52 years, the MND reduced the training for the reserves from two nights and three days to four hours. It was only in the second half of 2022 that the reserve force training went back to its normal implementation.

The ROK Armed Forces successfully lowered the risk of infection and participated in the pan-government response to COVID-19. For this purpose, the ROK Armed Forces took measures to ensure that the epidemic did not harm its combat

readiness. Even before the government implemented its social distancing policy, the ROK Armed Forces began banning all military personnel from leaving their homes and barracks after work. Moreover, when they returned from vacation, personnel who had been in contact with civilians had to submit negative PCR test results twice before they were permitted to return to their units. The MND started vaccinating military personnel in April 2021, earlier than other social groups, and their vaccination rate reached 94.5% in December 2021. As a result, the accumulated number of confirmed cases amongst all the troops was only 2,713, just 0.45% of forces personnel (Bae 2021). Compared to the 1.01% infection rate for the civilian population, these achievements were impressive.

4 Civil-Military Relations

4.1 Securitization of the Pandemic

The South Korean government's response to COVID-19, often called the K-quarantine model, was widely praised for its effectiveness in controlling the spread of COVID-19. South Korean politicians frequently presented this strategy at international forums and meetings as an innovative and effective model for other countries. By promoting the K-quarantine model, they aimed to increase their popular support, although civilians in Korean society credited a strong sense of community and collective responsibility as the main reasons the K-quarantine measures were supported and successfully implemented. Being a mature democracy made the Korean people more sensitive to the welfare and equality of others, which in turn sparked debates about the potential infringement of the K-quarantine measures on individual rights. Concerns about the fundamental rights of conscripted citizens were no exception.

Figure 3 shows that non-combat deaths decreased as social rights and equality increased in South Korea. Non-combat deaths are a measure of the number of soldiers who died by accident or suicide during active service. Most of them are conscripted citizens. Although the data does not measure the death toll from public support activities, it reflects how well the military respects service members' fundamental rights and safety. Social rights and equality indicate the extent to which South Korea has realized basic welfare and equality (IDEA 2022). In the 1990s, when the social welfare and equality index was low, more soldiers died because the military put troops into risky situations that threatened their lives and safety. Since then, the number of non-combat deaths has decreased dramatically as the social rights and equality index increased. The negative correlation between the two indicators suggests that the more mental and physical burdens civilian support operation imposes on conscripted citizens, the more likely it is that civilian support operations provided by the military will become a national concern.

For example, on December 26, 2021, the Republic of Korea Army's Facebook page posted an image of army troops engaged in public support activities in areas
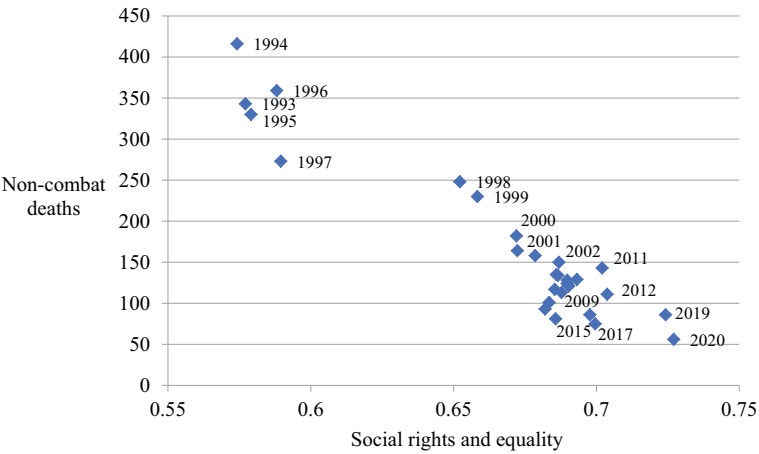
Fig. 3 Correlation between non-combat deaths and social rights and equality, by year. *Data* (1) Non-combat deaths: Statistics of Korea 2022a; (2) Social rights and equality: IDEA 2022

where heavy snow had fallen. In the image, public officials were ordering conscripts to clear away the snow while officers took pictures. More than 1,000 people commented on the post, criticizing the military for abusing conscripted citizens in the name of a civilian support operation. Indeed, most comments on the posting asked why soldiers, not the town's public officials, were clearing snow and criticized officers for taking pictures for publicity purposes without caring about the soldiers suffering from hard work (see Lee 2021). Since South Korea has evolved into a society where conscripts' lives and individual rights matter, people do not necessarily consider the military practice of mobilizing conscripted citizens to assist the civilian population as legitimate or desirable.

4.2 Civilian Oversight and Accountability

In South Korea, people have become increasingly concerned about human rights violations occurring in the forces' barracks. Although the government has argued that civilian support operation is inevitable if it is to reduce the cost of national projects, controversy has arisen over whether it is legitimate to send troops to disaster sites other than training grounds. The situation has been made worse by the fact that there is no legal basis for deciding when the military can legitimately mobilize conscripted citizens to assist the civilian population; the only guidance is a military code of conduct stating that soldiers must protect the lives and safety of the people. In 2016, when the railway strike occurred, the government ordered the military to send those military personnel who were trained to operate trains to the rail yards, arguing that the suspension of rail operations was a disaster. In response, the National Railroad

Labour Union filed a lawsuit against the government. The court judged that it was illegitimate for the government to deploy military personnel in that situation because the railway strike was not a disaster situation requiring the mobilization of military personnel.

The military's response to similar types of disasters and emergencies varies from time to time and is affected by public opinion. For example, when the foot-and-mouth disease outbreak swept through South Korea in 2011, the MND deployed 338,000 soldiers to farms where the government worked to bury 3.5 million livestock, including pigs (Ban 2020). After that, some of the conscripts who had slaughtered the animals suffered post-traumatic stress disorder. The media criticized the military for indiscriminately putting young soldiers into civilian support roles that were unrelated to military operations. In 2016, when the Avian Influenza (AI) outbreak again swept through South Korea, the local government asked the MND to help slaughter poultry on farms to block the further spread of AI. However, the MND had to refuse the request because of the severe backlash from parents with sons and daughters serving in the military at the time. The MND announced that troops would not be involved in killing, transporting, and burying livestock, though it did deploy 2,683 soldiers and 274 decontamination vehicles to disinfect roads and operate mobile control posts (Kim 2016).

Throughout the COVID-19 outbreak in 2020, the military repeatedly committed the same faults it had committed previously. When it deployed 71 soldiers to help a private company produce masks, the MND promoted this case as an example of the military's contribution to addressing the mask shortage. However, it triggered a severe controversy because the private company took all the profits from the sales of the masks without paying the soldiers appropriate compensation. This incident quickly reminded Koreans of the military's past wrong practices. For example, in 2010, the government organized an engineering unit staffed with conscripts to implement a government-led civil engineering project in much the same way as the military government had constructed the first highway in the 1960s. Service members in this unit had to work for 10 h a day, six days a week, without receiving any monetary compensation (Ban 2020). Following that incident, the military could no longer deploy troops to private companies unless they paid service members a reasonable allowance.

More importantly, the COVID-19 outbreak revealed the dark side of military culture—the side that violates fundamental rights to achieve an overarching purpose. Human rights organizations and advocates argued that the military neglected the rights and well-being of soldiers, treating them as mere tools for infection control rather than individuals with rights and worthy of dignity. For example, the army training center violated trainees' rights by restricting their use of toilets and showers, the rationale being that this served as a previontion of COVID-19 (Hankyeoreh 2021). Moreover, the MND was severely criticized for providing soldiers in quarantine facilities with poor meals, leading Defence Minister Seo Wook to apologize to the public when visiting a meal site.

In 2020, the National Assembly pointed out the problems of the military's civilian support operation. Although the Disaster Safety Act stipulates that national agencies

may request civilian support, the law does not clarify which disasters the military must provide support for, or how many soldiers the military must deploy upon request. In other words, the scope of military engagement in civilian support is too broad. Consequently, the National Assembly criticized the military for putting troops on the ground at the request of the government and social organizations in situations that were unrelated to disaster or emergency relief. Ironically, the more conscripted citizens are seen in national disasters or emergencies rather than on military training grounds, the more likely civil society is to raise concerns that the military is abusing conscripted citizens in the name of assisting the civilian population. As long as citizens remain that critical, no matter how much the military takes on civilian support roles, the military's public image will not improve.

4.3   Public Image of the Military

In 2021, Korea's Ministry of Culture, Sports, and Tourism (MCST) surveyed citizens to determine the image that came to mind when they were asked to think of conscripted citizens discharged from active service. Respondents had a five-point scale from which to choose, ranging from very negative to very positive. People who felt positively about discharged soldiers outnumbered people who thought of them negatively. However, the greatest number of people chose "moderate" on the scale, as shown in Table 2. Compared to 2013, when the mean score for people's perceptions about conscripts' contribution to the nation was 74.9, the score dropped in 2021 to 70.5 (MPVA 2013). If the scale of civilian support operations was a decisive factor affecting the extent to which people think conscripted citizens deployed from active service contributed to the nation, the mean score should have increased in 2021 because the number of service members deployed for civilian support operations was more than four times larger that year.

Table 2 Public perception of conscripted citizens discharged from active service

Perceived image		Contribution to the nation	
Very negative	1.1%	Strongly disagree	1.6%
Negative	5.3%	Disagree	6.9%
Moderate	46.5%	Neutral	29.1%
Positive	35.9%	Agree	32.9%
Very positive	11.2%	Strongly agree	29.5%
Total	100%	Total	100%
Mean (5-point scale)	62.7	Mean (5-point scale)	70.5

Note Mean = average score measured on a 5-point scale (0, 25, 50, 75, 100)
Data MCST 2021, 11–12

The findings of the MCST survey are echoed in results from other surveys. The South Korean government publishes a reliability index each year. It indicates how well each national institution operates and represents the needs and desires of citizens. This index measures the proportion of people who have positive perceptions of each national institution's performance. In 2020, the medical community was ranked first, with a reliability index score of 71.7% (Statistics of Korea 2020b). Compared to the medical community's 62% score in 2019, the index increased by 9.7%, implying that people thought highly of the medical response to the 2020 COVID-19 pandemic crisis. Given the increase in the medical community, it is worth examining the change in the reliability index for the military following its large-scale public support efforts to respond to the COVID-19 outbreak in 2020.

Figure 4 shows that the reliability index for the military increased slightly from 48% in 2019 to 51.5% in 2020. However, the increase in the reliability index was not significant if we consider that the number of service members deployed for public support doubled from 200,000 to 400,000 in the same period. Furthermore, contrary to expectations, the scatter graph in Fig. 4 shows a negative correlation between these two indicators. The correlation coefficient was strong but not statistically significant (Pearson correlation coefficient $= -0.477$, p-value $= 0.231$). Consequently, when the military provides civilian support for disasters, it does not necessarily improve the military's public image.
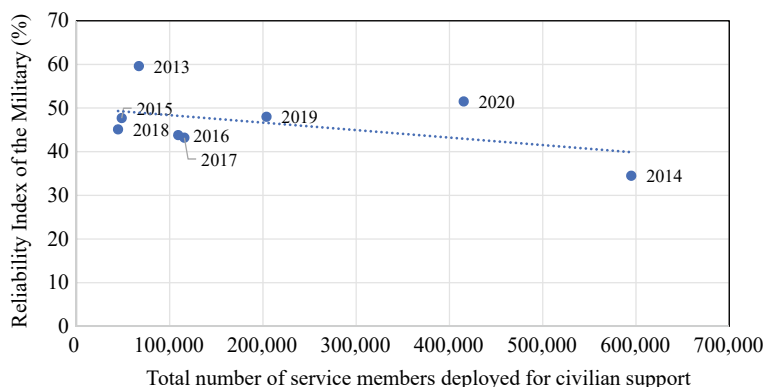
Fig. 4 Correlation between the reliability index and the scale of civilian support from the military. *Data* (1) Total number of service members deployed for public support (MND 2020, 174) (2) Reliability index (Statistics of Korea 2022b)

5 Lessons Learnt

In response to COVID-19, the ROK Armed Forces contributed decisively to preventing the spread of the virus; it invested all available resources, including medical and non-medical support, in supporting the pan-government response. As a result, South Korea is undoubtedly an exemplary case of the domestic deployment of the military to deal with the pandemic crisis. In particular, South Korean soldiers from all over the country successfully carried out the assigned missions. However, COVID-19 not only revealed what South Korean society wanted from the military but was also a turning point in improving civil-military relations. The, findings from this study suggest there are some things to be considered for future improvement.

First, in a pandemic crisis, the military is the only group that is always prepared, rapidly deployable, and self-sustaining. However, in planning and preparing for some future pandemic response, the government should not fix the domestic deployment of the military as a constant variable. The shared belief that blind obedience to the state is a sacred national defence mission has vanished. For example, controversy over homosexuality and conscientious objection, which were taboo in the military, has demanded that conscripted citizens be treated respectfully and have their fundamental rights and freedoms protected. As the perception of human rights has rapidly changed, the MND has had to take care not to infringe on conscripted citizens' fundamental rights and safety. Therefore, in developing any plan to cope with public emergencies, the military should allow soldiers to participate in civilian support efforts voluntarily, not by coercing them to do so. Otherwise, there could come a time when the domestic deployment of the military for public support becomes impossible.

Second, in the COVID-19 response, all of the military's available assets and resources had to be prepared and provided in a short time. The MND made it possible for that to happen by declaring the COVID-19 outbreak a crisis, similar to wartime. In the past, the Korean people were indifferent to what happened to conscripted citizens in their barracks. Recently, however, in situations that call for military support over prolonged periods, the military cannot count on being able to sustain the number of personnel. Without the legal and legislative backup of laws and systems, it may be challenging to impose risks and burdens on service members. To this end, the government must revise laws and regulations related to mobilization and establish an integrated support system for service members who devote themselves to people in need.

Finally, the minimal effect on the military's public image from its commitment to the COVID-19 countermeasures highlights the importance of media coverage of public support projects. Newspaper articles about military activities were one of the most significant ways to affect the public's perception of military activities (MCST 2021, 11). For example, the MND publishes a newspaper called *Kookbang Ilbo* (or, in English, *Defence Daily*), which highlights for the public the activities of soldiers. *Kookbang Ilbo* announced that the ROK Armed Forces decisively reduced the severity of the COVID-19 outbreak, providing medical and non-medical support

in response to the pan-government initiatives, while still maintaining war preparedness. However, no matter how avidly the defence media expressed their deep gratitude for the dedication and hard work of the soldiers, other media was not interested in covering the military's public support efforts in responding to the COVID-19 pandemic. Clearly, the MND needs to expand its strategic communication with public media outlets.

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Pakistan

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Abstract This chapter explores how Pakistan's military shapes country's political, governance and disaster management under a hybrid system. The COVID-19 highlighted military' dual role in policy formulation and enforcement, especially when the federal government was hesitant to impose strict measures. The 1973 Constitution provides the legal framework for the military's domestic deployment, particularly in disaster management. By responding to humanitarian emergencies, such as during the 2010 floods, the military has also influenced the course of civil-military relations. These expansive roles of the military underscore the need for developing a legislative framework to balance civil and military responsibilities, ensure effective coordination and oversight. Political governments need to adopt an oversight outlook towards military's institutionalised role in disaster management and managing health emergencies.

1 Introduction

Decades of military and quasi-military rule have made Pakistan's military a principal stakeholder in the country's political and administrative system. This has led to the ascendancy of the military and when decisions are taken at the highest level, its preferred policy choices are prioritized. This is often because the military is the most organized institution in the country (Aguilar et al. 2011). Externally, major powers have recognized the strategic significance of the Pakistan army for the nation's stability and regional security (Staniland et al. 2020).

At its independence from the British Raj in 1947 Pakistan inherited part of the British Indian Armed Forces and since then Pakistan's military has followed those traditions (Nawaz 2008). Pakistan's armed forces are organized into three separate services: the army, navy, and air force. The Pakistan armed forces have a current strength of over 600,000, with the army having the bulk of that count at nearly

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538,000 soldiers. The air force is the second largest service with a standing strength of nearly 45,000 personnel. The navy is the smallest service of the three but still boasts nearly 25,000 sailors.

The country's highly developed military institution and its periodic military interventions have served as an impediment to Pakistan's democratization. However, that outcome is not solely the responsibility of Pakistan's military culture. The inability of politicians to set firm boundaries within which the military is to work combined with the lack of an effective political culture has given the military the room it needs to govern the country. One consequence of that has been that the military has made deep inroads into areas that might reasonably be considered part of the civilian domain, including emergency rescue, relief, and disaster management. This role is not particularly unusual: when faced with natural emergencies governments worldwide have looked to their militaries to manage the response, including rescue and relief services. This, in turn, empowers the military in those countries and enhances its prestige within the polity.

Pakistan was affected by the COVID-19 pandemic in mid-February when the virus arrived through air and overland routes. In mid-February 2020, when Iran reported a mass COVID-19 outbreak, thousands of Pakistani citizens were in that country for business or religious tourism. When Pakistani pilgrims returned home, they transmitted the virus, forcing Pakistan to screen passengers at airports, then suspend flights from Iran, and eventually close the border. The first COVID-19 case in Pakistan was confirmed on February 26, 2020, when a student returning from a pilgrimage in Iran tested positive (Gul 2020b). The government then closed the border and established a temporary isolation center to quarantine returning pilgrims. They were kept in overcrowded, makeshift conditions. Later, when they were allowed to return to their own homes, they did so before being sufficiently isolated and or before being effectively tested. This led to the virus spreading throughout the country.

Two weeks later, on March 11, 2020, the provincial government of Punjab, the most populous province, delayed canceling the annual congregation of a religious group, and nearly 100,000 devotees gathered outside Lahore. Two days later, when the gathering was called off, participants left and returned to their homes across the country, which led to the further transmission of the virus (Chaudhry 2020). From that point onwards, clusters of local transmissions began to appear and grow in the large and densely populated urban centers of Karachi, Lahore, Faisalabad, Peshawar, and Rawalpindi. The disease spread during March, and the military was called in by the end of March to enforce lockdowns. Subsequently, COVID-19 cases spiked by the end of April 2020. They then exploded in June 2020 and began to slow by July and August 2020.

2 Domestic Operations

2.1 *Constitutional and Legislative Framework*

The legal framework governing the military's role in Pakistan is derived from the 1973 Constitution. Earlier two constitutions, the 1956 Constitution and, later, the 1962 Constitution, were silent about the role of the country's armed forces. Prime Minister Zulfikar Ali Bhutto, who led the Pakistan People's Party (PPP) government, recognized the importance of codifying the military's role within the constitutional scheme. Part XII and Chapter 2 of the 1973 Constitution deals with the armed forces. Article 243 states that "the Federal Government shall have control and command of the Armed Forces." This is followed by Article 245(1), which directly states that "the Armed Forces shall, under the directions of the Federal Government, defend Pakistan against external aggression or threat of war, and, subject to law, act in aid of civil power when called upon to do so" (Senate of Pakistan 2018).

The constitutional role of Pakistan's military is thus two-pronged: First, it is to defend Pakistan—a fairly traditional role. Second, it is to assist the civilian government, when tasked to do so. This second role assumes that the military can perform a function that the federal government is not capable of performing and for which it might require support at some stage.

Pakistan's higher judiciary has deliberated about these functions. In 1999, the Supreme Court of Pakistan observed that Article 245 only permits the federal government to call upon the armed forces to maintain law and order and to provide support in case of natural calamities. Essentially, Article 245 gives the armed forces only limited authority and it can only "act in aid of civil power"—in other words, it assumes that "civil power is still there; it is neither supplanted nor effaced out." Moreover, the Court has held that "civil power is to be preserved and invigorated through the employment of the armed forces" (Shah 2014). More specifically, in cases of natural disasters or emergencies, an act of Parliament called the National Disaster Management Act of 2010 authorizes the federal government to deploy the military for disaster management (Ministry of law and justice 2010). Hence, Pakistan's military is responsible for the country's disaster management under the current legal framework.

As the transmissions of COVID-19 spread and lockdowns were announced, the military functioned at two levels: first, it drove the day-to-day policy direction of the response from a national command and operations centre (NCOC); and second, it implemented on-the-ground lockdowns and enforcement measures to help the civilian administration. Thus, the military became both the leader of the national response against COVID-19 and a key support to the civil administration. The dual role emerged from the initial reluctance of then Prime Minister Khan to embrace tough measures to "flatten the curve" of the virus.

Meanwhile, when the empowered provincial governments saw the federal government's ineffectiveness, they sought assistance directly from the military. The Federal Ministry of the Interior authorized the military's deployment only after the provincial governments and the army headquarters reached an understanding of the military's

role. The political leadership's reluctance to lead the national response served to enhance the military's overall role. In turn, the civilian principals—the prime minister and provincial chief ministers—did not seek oversight and control over the military's actions on the ground as they were the ones who had empowered the armed forces.

2.2 Deployment in Domestic Roles

Pakistan has deployed its army multiple times domestically in recent years to deal with law and order situations and to provide humanitarian assistance and disaster relief. The military's role falls into one of two activities.

One key activity for the military is acting as the first responder in disaster relief and emergencies. Over the decades, Pakistan's military has built up an institutional capacity to respond when called upon to support the civilian administration. This "organizational setup" is specifically designed to respond to floods, which are frequent in Pakistan. Army command has instituted a three-tier "army flood protection and relief" structure constituting: (i) a general headquarters-based flood relief centre under the general staff branch (engineer directorate); (ii) corps flood control centres; and (iii) commander corps engineers that liaise with respective provincial authorities and district administrations (Pakistan Army n.d.).

The 2010 floods provide a good example of the military's role in disaster relief. That year the waters of the Indus River basin rose precipitously following heavy monsoon rains, leading to the worst flooding in Pakistan in years. The flooding submerged nearly one-fifth of Pakistan's land, causing more than 2000 deaths and affecting 20 million people across 84 districts with a loss of 1,070,000 residential properties (Polastro et al. 2011). According to a World Bank and Asian Development Bank survey, the cumulative economic loss of the 2010 floods was estimated to be around US $9.7 billion (World Bank 2010).

First responders (i.e., the local populace, local administration at the district level, local military commanders, and local philanthropists) mounted the initial response to the floods. Political leaders were slow to act, but the military moved in quickly. The military's response was comprehensive; the army deployed nearly 50,000 troops to join the rescue and evacuation operations (Doucet 2010). The general headquarters and corps headquarters directed the relief efforts throughout the affected areas. Army aviation command took the lead from its forward helicopter bases across the country and ran helicopter rescue and relief operations in coordination with civil authorities and foreign militaries. It also spearheaded the Joint Aviation Coordination Cell (JACC) established in coordination with the National Disaster Management Authority (NDMA) and the military which had as its goal providing "timely rescue and relief" by prioritizing "fixed wing and rotary wing flying" in support of relief operations (Ali et al. 2021).

The army ran a rescue and relief operation that evacuated around 850,000 people using 600 boats, helicopters, and C-130 planes. The evacuees were provided emergency health facilities and sheltered in around 100 relief camps. The army deployed

infantry battalions and army medical corps units for the relief and rescue operations. The air force and navy, comparatively smaller services, were also active in the rescue and relief efforts. Pakistan's air force (PAF), particularly, focused on Skardu and Gilgit in the north and Hyderabad, Nawabshah, and Thatha in the south. PAF crew flew nearly 1300 C-130 sorties and 550 helicopter flights. The PAF also flew 20 reconnaissance flights to assess the damage in the affected areas. The air force reportedly rescued nearly 23,000 people (NDMA 2011, 45). Meanwhile, the navy established its own emergency response and coordination centres (ERCC) at the naval HQs and HQ Commander North. The navy's rescue efforts focused on districts adjoining the coastal belt in Sindh province. Running its 200 ships and six helicopters along with other specialized equipment, the navy rescued more than 200,000 people and the navy's medical teams aided nearly 60,000 people (NDMA 2011, 45).

Law and order operations are another key role of the military. When called upon to help maintain law and order, it liaises closely with local law enforcement authorities and district administrations. Deployment of the army is seen as the last line of defence in such operations; generally, the army focuses on lending support to police and law enforcement authorities to help maintain peace and security. For instance, in 2014, in anticipation of the law and order situation arising out of political protests, the federal government deployed the army in Islamabad, the federal capital, for three months. The military dispatched five companies of the 111 Brigade stationed in Rawalpindi to secure key government installations and ensure the city's security. However, political parties viewed this deployment as the federal government seeking the military's support while the interior ministry held that the military would function as a "rapid response force" (Haider 2014).

3 Military Deployment During COVID-19

3.1 Coordination of the COVID-19 Response

The federal government's National Security Committee (NSC) developed the initial response strategy to COVID-19 in Pakistan. The prime minister chairs the NSC, which includes key cabinet members, the chairman of the joint chiefs of staff, and the heads of the three armed services. On March 13, 2020, the NSC held its first meeting on the subject of the health crisis, and the decisions taken there formed the core of the Pakistan Tehreek-e-Insaf (PTI) government's response to the pandemic (PMO 2020a). Foremost among those decisions were: (a) to set up a national coordination committee (NCC) for COVID-19 with representation from all provinces and relevant civilian and military authorities; and (b) to make NDMA the lead operational agency and task it with coordinating the efforts of the provinces and district authorities to implement preventive and enforcement measures.

The NCC focused very broadly on policy formulation and providing political support for the response. The prime minister of Pakistan, being the chief executive,

chaired the NCC, which included key federal ministers, the chief ministers of all four provinces, and top brass of the Pakistan army (Jabbar and Makki 2021). The NCC was a symbol of national coordination.

The NCC, in turn, established an NCOC, which emerged as the "nerve center to synergize and articulate [the] unified national effort against COVID-19" (PMO 2020b). The federal minister for planning led the NCOC and a senior military officer was the national coordinator for its day-to-day operations. The other members included the health and interior ministers, representatives of the provincial governments, and key military organizations. As it was an organization staffed by military personnel, the NCOC passed directions to the military formations deployed on the ground. It directed military units to address specific needs as they emerged. This created a synergy between policy formulation and its implementation on the ground. The NCOC focused on data gathering, information dissemination, and developing track, trace, and quarantine protocols. Based on an in-depth analysis of data and trends, the NCOC forwarded policy recommendations to the NCC, which in turn shared them with the federal cabinet.

The PTI government opted to manage the crisis with centralized decision-making and without seeking consensus from Parliament or the Opposition. Prime Minister Khan publicly questioned the logic of imposing a nationwide lockdown as he felt it would have a disproportionate impact on the poor (Aljazeera 2020). Therefore, the NCC's smart-lockdown approach differed from that of the Opposition PPP-led Sindh provincial government's policy of imposing a province-wide lockdown. Sindh's lockdown policy imposed strict restrictions on public movements, businesses, and markets. The federal government's lockdown policy in Khyber Pakhtunkhwa, Punjab, and Balochistan followed looser restrictions that allowed certain business activities and construction sectors to operate during that period (Crisis Group Asia Briefing 2020).

3.2   Roles of the Military

In Pakistan, the first case of COVID-19 was reported on February 26, 2020. The number of cases steadily increased during subsequent weeks. The country's initial reaction was to monitor the developing situation, scramble to build a testing infrastructure, and develop a response mechanism with support from the World Health Organisation (WHO) and Chinese health authorities[1] (Javed et al. 2020). However, when the coronavirus transmission spread and the situation intensified, the PTI government was slow to respond. Prime Minister Khan held his first cabinet meeting on the subject on March 13, weeks after the first confirmed case (Khan 2020). The

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[1] The Pakistan army maintains close defence cooperation with People's Liberation Army (PLA). This was apparent during the early stages of pandemic when in June 2020 the PLA sent medical supplies including N-95 masks and protective suits to the country and a 10-member PLA medical team visited Pakistan and shared their experience of disease management with the Pakistan army's medical branch (see APP 2020).

government turned decision-making into a skirmish. This prompted the military to fill the void and start playing a leading role in setting the country's policy response and implementing those policies at the national level.

From the public comments of civilian and military leaders, it is apparent that both sides sought to portray the military's deployment as helping to prevent the spread of the deadly virus. For instance, then Prime Minister Khan announced that the army had been tasked to "come out on the streets" to "ensure people are strictly following COVID-19 SOPs [standard operating procedures] including wearing masks" (Syed and Khan 2020). The messaging from the military echoed this theme. When announcing the army's deployment, Maj. Gen. Babar Iftikhar, the army spokesperson, stated that the army was tasked with ensuring that "government directives are effectively implemented" (Gul 2020a). Thus, the direction of the military was that it was to enforce preventive measures.

To undertake these duties the army deployed available troops in cities and towns across the country. The deployment under Article 245 meant that the army was deployed at every administrative level. Army teams were led by brigadiers and lt. colonels at the division and district levels, respectively. Army officials have claimed that troops from all the services were deployed in their immediate duty stations. Further, Army Medical Corps (AMC) officers and soldiers had to deploy, too, as they were engaged in field hospitals and emergency centers set up to provide medical consultations to COVID-19 patients.

When it is called in to assist civil administrators to perform specific duties the Pakistan Army normally claims a special allowance for doing so. For instance, in 2018, the army was paid PKR 9 billion for providing security and performing specific tasks during the 2018 general elections (Chaudhry 2018). However, in 2020, when it was deployed for COVID-19 duties, the army announced that it would not claim any "internal security allowance" (Malik 2021).

When the military was deployed to combat COVID-19, it engaged in seven specific activities:

(a) When lockdowns were in place, army patrols ensured that those lockdowns were being enforced;
(b) Military and intelligence capabilities were deployed to trace, track, and quarantine suspected cases;
(c) Troops managed quarantine facilities in Lahore, Karachi, and other cities;
(d) Entry and exit points of cities and provincial boundaries were jointly patrolled and staffed by military personnel;
(e) The military made its medical infrastructure and resources available to civilian authorities;
(f) The military distributed nearly 350,000 relief and assistance packages containing basic food items across the country to help low-income people; and
(g) The NDMA procured personal protective equipment (PPEs), ventilators, oxygen cylinders, and other medical supplies from abroad and distributed them across the country through the army's logistics system.

The military was deployed to perform these tasks because the army is a very efficient, professional force. Given that the response to COVID-19 required the efficient and urgent implementation of services with logistics and distribution working smoothly and effectively, the army's discipline, ability to enforce strict measures, and undertake complex, large-scale operations helped a great deal. Even the local civil administration acknowledged that the army's presence on the streets helped curtail the spread of the virus. Islamabad's then-top administration official, Hamza Shafqaat, noted that "people are fearful of the army and their symbolic presence is enough to make people follow rules" (Bari 2021).

Despite the announcement of partial measures including closing down educational institutions and banning large gatherings, COVID-19 continued to spread, which put pressure on the military to act. On March 22, 2020, Army Chief General Qamar Bajwa convened a special corps commanders conference with a single agenda item: COVID-19. According to the military's media wing, commanders "deliberated the army's readiness to assist the civil administration to contain the pandemic." As a result of decisions made at the conference, "army troops and medical resources across the country" were "tasked to be ready to assist activities in concert with civil administration on short notice" (ISPR 2020b) This announcement paved the way for country-wide lockdowns to be instituted, and for the military to undertake the responsibility of enforcing those lockdowns.

The next day, on March 23, at the request of four provincial governments and two regional administrations (Azad Kashmir and Gilgit Baltistan), the federal government's Ministry of the Interior issued separate notifications to authorize the deployment of the army under Article 245 of the Constitution and 131-A of the Criminal Procedure Code (CrPC) (Syed and Khan 2020).With these decisions, military and provincial governments effectively overruled Prime Minister Khan. His spokesperson, however, tried to project that Khan had approved the provincial governments' requests for military aid to the civil powers. Meanwhile, spokesperson Awan underlined that the "option of partial lockdown is left to the provinces" and would be enforced on an as-needed basis under Article-245(A). Nonetheless, this deployment was unprecedented as it marked the first time in Pakistan's national history that Article 245 of the 1973 Constitution was invoked throughout all of Pakistan.

On March 28, 2020, the military reported that it had completed its deployments "across the country in aid of civil power under Article 245" (Syed 2020). Military command emphasized that "All points of entry (POE) [were] being manned and monitored, the establishment of joint Check Posts and joint patrolling with other Law Enforcement Agencies (LEAs) [were] being carried out effectively. Contact tracking, tracing to identify and isolate suspected individuals [was] being done to ensure containment of COVID-19 spread" (ISPR 2020a), and the army deployment came from infantry units across the country. From each of Pakistan's 56 cantonments (military bases), infantry troops were called in to patrol urban cities and nearby towns. Further, intelligence units were asked to undertake surveillance of locales that showed a high prevalence of the coronavirus. Based on input from those intelligence units, infantry troops and local law enforcement jointly implemented quarantine measures by isolating suspected locales. Meanwhile, troops belonging to the AMC

were mainly deployed at makeshift hospitals and quarantine centers to render urgent medical services. The AMC was stretched thin during the pandemic deployment as it also had to meet the army's internal requirement of staffing the military hospitals and medical centers.[2]

Geographically, army troops were deployed across the country, which includes four provinces, the two regions of Azad Kashmir and Gilgit Baltistan, and the Islamabad capital territory (ISPR 2020a, b). In Balochistan, infantry units were deployed in nine districts across the province, including in far-flung towns. Further, the army closed down the Chaman border crossing with Afghanistan and the Taftan border with Iran. The army managed the quarantine facilities adjacent to both border crossings.

In Khyber-Pakhtunkhwa, infantry troops were deployed in 26 districts across the province. Infantry units also secured four border terminals and staffed inter-provincial boundaries to restrict the movement of people from outside the province. Across Khyber-Pakhtunkhwa field intelligence units tracked and traced nearly 4000 suspected cases of COVID-19 and isolated them.

In Punjab, infantry units were deployed in all 34 districts of the province. They focused on staffing both the joint checkposts and the entry and exit points of the districts to contain the movement of people. Meanwhile, medical battalions along with infantry troops managed four quarantine and isolation centers in the province. The provincial government also engaged infantry troops to disinfect various public spaces including airports, train stations, and major markets. In Sindh, infantry troops were deployed in 29 districts across the province. Here, the army delegated most tasks to the Pakistan Rangers Sindh, a paramilitary force commanded by serving army officers, to control district boundaries and restrict the movement of people. Infantry units patrolled major urban centers to enforce those measures instituted by the provincial government.

It was in the Gilgit-Baltistan region, which borders China, that the army had to deploy helicopters along with infantry troops and field medical battalions. Infantry units were deployed in 10 of the region's districts to enforce screening and the testing of suspected cases. The army also deployed helicopters through Khunjareb Pass to transport medical equipment sent from China, which included ventilators, testing kits, medical suits, and face masks.

These Pakistan Army infantry units, field medical battalions, and field intelligence units were deployed twice. The first time was in March 2020 to enforce lockdown and other measures when the first wave of COVID-19 hit. Most of the infantry units and field intelligence units were withdrawn by early June 2020, when the lockdowns were lifted and Pakistan moved towards smart lockdowns. The second time was in April 2021 when army troops were deployed to enforce lockdowns when a third wave of COVID-19 emerged. During the second round, troops were deployed for nearly a month in major cities.

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[2] From a private conversation with an army officer engaged in COVID-19 deployment, June 23, 2022, Islamabad.

4 Civil-Military Relations

4.1 Securitization of the Pandemic

The pandemic, which at its core was a public health emergency, was interpreted as a public security issue in the language of security. A large-scale outbreak of disease has long been viewed as high-level and requiring a state response. The framing of COVID-19 as a security threat enabled policymakers to implement extraordinary measures to protect the public at large. To an extent, domestic audiences also accepted such framing, particularly political parties and civil society. When the civilian government, including the prime minister, raised questions about the necessity of enforcing lockdowns, society, and the political elites looked to the military brass to assure them of public health security measures. Consequently, as Pakistani policymakers implemented military-led measures to enforce lockdowns and ensure disease surveillance via intelligence units, political parties, civil society, and the media accepted those measures as necessary to protect society. In a way, Pakistan's hybrid political-military governance system enabled a securitized response as military leaders already had an outsized role in public policy decision-making.

4.2 Civil Oversight and Accountability

In Pakistan, civilian oversight of the military is still in a transitory state. Decades of direct military rule, and the expansive role of military leaders in national decision-making often make military brass co-equal to civilian principals. Constitutionally, the federal government exercises "command and control" over the armed forces. The prime minister, being the chief executive, advises the president to appoint military chiefs under Article 243(4-b) among the top senior military officers. The prime minister's advice is binding. Administratively, the all-military headquarters (army, navy, air force, and joint staff) function under the Ministry of Defence. In practice, however, the military exercises a considerable degree of policy and operational autonomy. The army chief engages directly with the prime minister on national and regional security matters, while different branches of the military coordinate closely with the Ministry of Foreign Affairs on external affairs. Some prime ministers have pursued "collective decision-making" via the national security committee of the Cabinet, where both civilian principals and military brass are present. This forum brings a degree of oversight to national security policy-making.

This blended civil-military functional arrangement was on display during the policy-making when COVID-19 emerged. The then prime minister convened a meeting of the national security committee and afterwards, the military enjoyed operational autonomy in implementing decisions the NSC had reached. Later on, as the need arose, the military adjusted the national response and decided to scale the military deployments across the country. At NCOC, the military coordinator took

the lead in "coordination" across different layers of governments and military organizations. Both the prime minister and the army chief provided the NCOC senior leadership with policy guidance on handling the pandemic.

While the military took the operational lead in implementing the national COVID-19 response, it required constant political support from the civilian ministers. This provided civilian principals with an opportunity to engage the military and advance their preferred policy choices, though there is no evidence from the public record as to the extent to which civilian ministers and advisers did so.

In terms of accountability, civil society members, such as labour rights activists and human rights activists cautioned against empowering the military to enforce preventive measures. Human rights activists argued that domestic deployment of the military under Article 245, which shields the army from legal challenges in the High Court, has implications for civil rights and dissent (Shende 2020). Civil society also viewed the army's enhanced role and its deployment as a continuation of the hybrid system that had been in practice from 2018 onwards and with the support of then Prime Minister Khan.

4.3   Public Image of the Military

The domestic deployment of the military had its critics and supporters. Both the government and the opposition parties in Parliament welcomed the initial announcement that the army was going to be deployed to enforce lockdowns. The then prime minister was hesitant to impose a lockdown but when provincial governments, including PTI-led governments in Punjab and Khyber-Pakhtunkhwa, requested the army's assistance, the prime minister did not object. Meanwhile, the parliamentary Opposition, led by the Pakistan Muslim League–Nawaz (PML–N) and the Pakistan People's Party, expressed confidence in the military's handling of the national response to the pandemic. Similarly, the medical and business communities lauded the military's role. Public sentiment was broadly supportive of the military's deployment to control the spread of the virus.

The military's public image during the pandemic, and while it was deployed domestically, remained positive. The pandemic gave the military a way to evade criticism from political parties for its interference in the political process and its support of the PTI-led government. Through its proactive role in charting and implementing the national response to the pandemic, the military gained the public's support as an entity. It came to be seen as not only ready but able, to come to the rescue of people in difficult times. However, the military had to walk a fine balance in deciding which decisions to make during the pandemic. As religious leaders called for restrictions to be eased to allow congregations to assemble for Ramadan, the military let civilian ministries engage with the clergy and make the decision. In a way, the military sought to insulate itself from criticism that could emanate from religious communities.

For future civil-military relations to work effectively to respond to other pandemics or natural calamities, the NCOC provides a template. The military has given itself

a permanent institutional space that will enable it to deal with public health and natural emergencies. During the COVID-19 pandemic, Pakistan's armed forces called for uniform policies and enhanced coordination among the national and provincial governments, but it came at the cost of provincial autonomy. In a way, the military sought to centralize decision-making. Thus, its role in governing the country has been further strengthened, and it comes at the cost of the limited gains made during the democratizing process that has been taking place since 2008. Meanwhile, civilian authorities have become complacent as they know that the military will step in if and when it is needed. The increased friction between the national government and the provinces also allows the military to intervene and act as an arbiter. However, it is up to the political chief executive to shape the response of both the civil and military spheres during the next public health or natural emergency.

5 Lessons Learnt

The military's role in the national disaster management authority and the NCOC is now part of a regular process of disaster management policy in Pakistan, including any health-related emergencies in post-COVID Pakistan. It has become a template for dealing with future emergencies, at which time the present model will be replicated if the need arises. In a way, the military's role has evolved so that is now a permanent part of any national response to health emergencies.

The blend of civil and military roles in the COVID-19 crisis has had an influence on the collective public perception of the military as a stakeholder in the country's health sector. Pakistan's COVID-19 management policy is now pivoting to include civil-military relations in health care management more generally. However, at the same time, the military's humanitarian intervention emphasizes the urgency for Parliament to legislate a framework of federal and provincial coordination and assign responsibilities to civilian and military agencies with oversight from Parliament. Pakistan's Constitution is clear about the parameters and the limits of the military's involvement in the country's emergencies. For instance, long-term rehabilitation management and infrastructure restoration in Pakistan after the COVID crisis should be considered in the civilian domain, not part of the military's responsibility, to prevent the military from having a sustained influence in civilian administration.

Pakistan's military has become more strategically significant in non-traditional security areas over time because the country's unorganized political culture has not stopped the military from intervening frequently in civil affairs. Where crisis and disaster management were once seen as non-traditional roles but part of a national security imperative, they are now part of the new domain of civil-military cooperation. The civil-military blend of administration, particularly to manage the country's pandemic response, has ensured that the military will be a key stakeholder in any future health-related emergencies in Pakistan. The civilian administration's disease management capacity gap forced the political principals to rely on the military as a stakeholder of last resort in the emergency crisis. This situation has expanded

the military's administrative functions, which now range from health emergency monitoring to humanitarian assistance, disease management, decision-making, and implementation. The army has become central to the coordination of humanitarian assistance and disaster relief operations in Pakistan's political system. This has been a gradual process wherein over time the military has been inserting itself into crises such as earthquakes, floods, rescue and relief, and now, the health crisis.

Military deployments during the COVID-19 emergency did prove to be a viable policy option for Pakistan. Nevertheless, these innovations in civil-military relations may not be considered "military intervention" because the military-led disaster management authority has de facto recognition from the public and de jure status under Pakistan's constitutional framework and the succeeding Acts and Laws of the National Disaster Management Act of 2010, hence widening the scope of military activities.

However, the military's humanitarian intervention during the pandemic makes it urgent for the country to frame a constitutional reference covering the specific actions of the military when it intervenes in healthcare emergencies. Taking into consideration the sensitivity of Pakistan's political system to military regimes, it is imperative to curtail the broadening scope of military influence in civilian domains of authority. This can be done by restricting the rehabilitation and long-term management roles in health care to civilian governments, and not allowing them to be undertaken by the military.

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Philippines

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Abstract Philippine civil-military relations (CMR) have long tipped towards the military despite established constitutional and legislative frameworks ensuring civilian supremacy. The Philippines' COVID-19 pandemic response, characterized by war metaphors, strong police and military presence, and the appointment of retired military generals in key posts, highlighted the need to revisit the country's unique CMR dynamics. This chapter explores the military's expanded role in the COVID-19 pandemic response and its implications for an already tenuous Philippine CMR. The military's expanded role put it in a prominent position to further redefine and recalibrate its position with broader civil society. It breached the traditional institutional barriers between civilian and military organizations, especially at the local level, which proved valuable during the pandemic. However, the implementation of safeguards remains challenging. This chapter underscores the need to revisit and update existing policies on civilian oversight over the military, given the unique CMR context in the Philippines and the military's shifting focus to external defence.

1 Introduction

The modern Armed Forces of the Philippines (AFP) traces its roots to the country's United States (US) colonial heritage. On December 20, 1935, the National Defence Act, which stipulates the organization, training, and maintenance of the Philippine army, was approved (Jose 1992). Due to the changing nature of the internal and external threats after the Second World War, the Department of National Defence (DND) was put in charge of the country's overall defence program. It had three branches of service: the Philippine Ground Forces, the Philippine Naval Patrol, and the Philippine Air Force. In December 1950, the AFP was reorganized into four

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service branches: the army, constabulary, navy, and air force (Agustin 2012). To professionalize the military, the Philippine constabulary merged with the country's national police force in 1990, thereby reducing the AFP's major branches back to three: the army, the navy, and the air force, and this structure remains in effect today.

Territorial Defence is the primary responsibility of the AFP. However, national security threats can come from international and domestic sources, which means that the AFP must focus on both. The emphasis on internal security operations has emerged partly from the country's law-and-order problems. The Philippines has one of the longest insurgency problems in the world, with threats posed by various groups such as the communist-inspired New People's Army (NPA), Abu Sayyaf Group (ASG), ISIS-aligned elements of Bangsamoro Islamic Freedom Fighters (BIFF), and rogue elements of the Moro Islamic Liberation Front (MILF) (US Department of State 2021; AFP 2017). The AFP's emphasis on internal security operations is further codified in the AFP Development and Security Support Plan, which adopts an intertwined strategic approach to development, governance, and security issues (AFP 2017).

The AFP's international engagements are linked to UN peacekeeping efforts. After serving an initial stint in the Congo in 1963, the Philippines has contributed thousands of so-called blue helmets in the collective quest for global peace and security. Filipino soldiers served with other countries in UN peacekeeping missions in Cambodia, Timor-Leste, Syria, Golan Heights, Sudan, Burundi, South Sudan, Abyei (between South Sudan and Sudan), Darfur, Liberia, Côte d'Ivoire, Kosovo, and Georgia. The Philippines also sent contingents to take part in other UN-authorized missions to repel aggression by one state against another, such as in Korea, Iraq, Nepal, Lebanon, and Afghanistan (Hermoso and Belleza 2015). Overall, the Philippines has sent about 15,000 personnel to different UN peacekeeping missions. The number has dwindled over the past decade, and as of May 2023, there were only 28 Filipinos in the UN peacekeeping force (Domingo 2023).

According to the AFP's Office of Strategic Studies (2022), as of December 31, 2022, the AFP was composed of more than 100,000 personnel. Of this number, 9% were officers, and the rest were enlisted personnel. The Philippine army, comprising almost 69% of the AFP, still dominates the Philippine military. Among the operational branches of service, the Philippine Air Force (roughly 13%) is the smallest, followed by the Navy at 16%. Around 2% serve in the technical service. These are the medical doctors, nurses, dentists, lawyers, and veterinarians in the active service of the AFP. Not surprisingly, women only represent 20% of the officers and an even smaller percentage—7%—of enlisted personnel. While women are now allowed in most of the service's specializations, it will take some time before there is a more balanced sex ratio within the AFP.

With the outbreak of COVID-19 in the Philippines on January 30, 2020, the military, given its numerical strength and diversity, was drawn in to respond to the health crisis as part of an interagency task force on emerging infectious diseases (IATF-EID). As an intersectoral body, its mandate is to provide guidelines on managing COVID-19, including those in health quarantine. On March 8, 2020, with COVID-19 cases increasing, President Duterte placed the Philippines under a state of public

health emergency. Barely a week later, on March 16, 2020, he issued Proclamation 929, declaring the whole country under a state of national calamity. These proclamations, supported by the constitutional mandate designating the president as the chief of the armed forces of the Philippines, enabled him to deploy military personnel for COVID-19-related duties.

The country's highly militarized pandemic response was characterized by military personnel deployed in various COVID-19 roles and former generals leading the IATF; they were operating under the dictum that they were fighting a "war against a vicious and invisible enemy," with healthcare workers on the front lines combatting the virus (Gibson-Fall 2021; Gillis 2020; Lasco 2020). This extensive deployment had a major impact on other main internal security operation functions, including the deployment of much-needed personnel and resources for traditional military functions. Given the historically tenuous balance between the civilian and military spheres in the Philippines, a central concern was how this would affect the country's civilian control, oversight, and civil-military relations.

2 Domestic Operations

2.1 Constitutional and Legislative Framework

Section 3 of the Philippine Constitution contains one of its most important provisions; it states that civilian authority is always supreme over the military. It affirms that the AFP has a mandate to protect the people and the state and that its goal is to secure the sovereignty of the state and the integrity of the national territory. As a citizen armed force, the AFP's military members are to undergo training, and the state shall maintain a regular force to protect its security. The Administrative Code of 1987, which defines the country's main governance structure, further stipulates that the AFP shall:

(1) Uphold the sovereignty, support the Constitution, and defend the territory of the Republic of the Philippines against all enemies, foreign and domestic;
(2) Promote and advance the national aims, goals, interests, and policies;
(3) Plan, organize, maintain, develop, and deploy its regular and citizen reserve forces for national security; and
(4) Perform such other functions as may be provided by law or assigned by higher authorities.

With a longstanding insurgency problem in the country, the AFP has been at the forefront of counterinsurgency operations. Under Republic Act (RA) 6975, ratified on December 13, 1990, internal security, which includes counterinsurgency operations, was the main responsibility of the Philippine national police (PNP), with the AFP providing a supporting role. By shifting internal security to the PNP, the AFP could then focus more on external security threats as its main contribution to national

security. However, in 1998, under RA 8551, the internal security functions were again given back to the AFP, with the police providing supporting roles (Gonzales 2021). Since then, the AFP has been mostly preoccupied with internal and not external security operations (Advincula-Lopez 2019).

International deployments of the AFP were primarily as part of the UN peace-keeping force. Participation in international peacekeeping and peace-building operations under the auspices of the UN is governed by Executive Order No. 97, or the Policy Framework and Guidelines for Philippine Participation in United Nations Peacekeeping Operations issued on 23 April 2002 by then President Gloria Macapagal Arroyo (Hermoso and Belleza 2015). Overall, the president of the Philippines has full control over the executive branch of the government, including the AFP. Section 18 of Article VII of the Constitution states that the president is the commander-in-chief of the AFP and may call on the armed forces whenever necessary to prevent or suppress lawless violence, invasion, or rebellion. In case of invasion or rebellion, when public safety requires it, the president may suspend the privilege of the writ of habeas corpus or place the Philippines or any part thereof under martial law for a period not exceeding 60 days.

Regarding disaster response, the AFP is an official National Disaster Risk Reduction and Management Council (NDRRMC) member under RA No. 10121. The council play roles in disaster prevention and mitigation, preparedness, and response, focusing on inter-agency collaboration to increase resilience and search, rescue, and evacuation operations (Office of Civil Defence, 2020).

The PNP also provides support in internal security operations, including information gathering and combat operations, through RA No. 8551 and Executive Order No. 546 (s. 2006) (President of the Philippines, 2006). A joint Peace and Security Coordinating Council (JPSCC) was set up to facilitate the coordination of the two agencies. By 2022, this included the Philippine Coast Guard (PCG) (DND 2022). The JPSCC acted in its coordinating role during the AFP and PNP deployments in the COVID-19 response.

2.2 Deployment in Domestic Roles

Aside from combat operations, the AFP also implements the Community Support Program—Preventing and Countering Violence Extremism under the National Task Force to End Local Community Armed Conflict (NTF-ELCAC). Referred to as civil-military operations (CMO), these non-combatant operations include socioeconomic and psychological activities (AFP 2014). Originally conceived as a counter-insurgency measure, these activities are undertaken with civilian counterparts to ensure internal stability as the foundation for economic and human development. As such, they include programs such as health assistance, engineering, disaster relief, educational assistance, and environmental protection. As a policy, therefore, the AFP has expanded its functions despite concerns about its limited resources (Hall 2004; Acop 2008). Related to this, the AFP's Development Support and Internal

Security Plan "*Kapayapaan*" 2017–2022, for example, highlights its commitment to nation-building, law enforcement, civil-military cooperation, and peacebuilding.

In support of law enforcement, the AFP was tasked to establish "civil security and control" by enforcing curfews, arresting those posing threats, establishing checkpoints, and conducting regular security and maritime patrols in the southern island of Mindanao when it was under martial law from 2017 to 2019. Proclamation No 216 went into effect in May 2017 after members of the ISIS-affiliate Maute group attacked Marawi City in Lanao del Sur. (President of the Philippines, 2017; DND 2020). More recently, the Commission on Elections (COMELEC) deputized the AFP, through Resolution No 10755, to ensure the success of the 2022 national and local elections (COMELEC 2022). The AFP, PNP, and PCG signed a joint peace and security coordinating council letter, Direct No 02–2022, that provided guidelines on their deployments concerning their original mandates (De Leon 2022).

Humanitarian and disaster relief (HADR) remains one of the AFP's most recognizable, uncontroversial, and expected roles. The National Disaster Risk Reduction and Management Plan includes the AFP as part of the search, rescue, and retrieval cluster where it plays a big role in logistics, such as undertaking evacuation measures and transporting relief goods and people (Hall and Cular 2010; Trajano 2016). Notably, the AFP was involved in search and rescue operations during Typhoon Ondoy in 2009, the Taal volcano eruption in 2020, Typhoon Haiyan in 2013, and Typhoon Odette in 2021. The AFP also sent contingents to the earthquake response in Turkey in 2023 (De Leon 2023).

The dynamics of Philippine humanitarian civil-military relations remained unchanged until Typhoon Haiyan (Yolanda) in 2013. It hit the country's Visayas region, leaving behind thousands of casualties and more than Php 36 billion in damages (about US $615 million). Local responders were quickly overwhelmed, leading the national government to step in. The AFP was extensively deployed in the response, conducting search and rescue operations and distributing relief goods (Trajano 2016; Canyon et al. 2019). Trajano (2016) observed that this made government officials realize the importance of improving coordination mechanisms with other stakeholders, including the AFP. The cluster system was revamped, and the AFP dedicated one battalion per service branch solely to HADR missions. Moreover, the civil-military coordinating centers were established, linking the AFP with local and international stakeholders and providing a central hub for coordinating responses.

3 Military Deployment During COVID-19

3.1 Coordination of the COVID-19 Response

Following the confirmation of the COVID-19 pandemic by the World Health Organization (WHO), the Philippines activated the IATF-EID on January 28, 2020. The Department of Health (DOH) served as its chair, with representatives from the Department of the Interior and Local Government (DILG), Department of Foreign Affairs (DFA), Department of Justice (DOJ), Department of Labour and Employment (DOLE), Department of Transportation (DOTr), Department of Information and Communications Technology (DICT), and Department of Tourism (DOT). The IATF-EID was later expanded to include the environment, social welfare, education, finance, and agriculture departments, as well as state security agencies.

Memorandums dated March 16 and 18, 2020 (Office of the President, 2020a, b) , directed agencies, including the AFP, PNP, and PCG, to "adopt, coordinate, and implement" the guidelines set out by the IATF-EID's Joint Resolution No. 13 (s. 2020), on specific rules and regulations on the movement of goods and people under the quarantine (IATF-EID, 2020). The same resolution also activated the NDRRMC's response clusters, which the AFP and PNP are part of, at the national, regional, and local levels. Furthermore, the National Action Plan against COVID-19 was released in March 2020, adopting a "prevent, detect, isolate, treat, reintegrate, adapt" strategy and creating four task groups—response, resource management and logistics, strategic communication, and food security (UN Women, 2020). These were mandated to provide the public with clear public safety guidelines, build quarantine facilities and testing sites, enforce community quarantine, and ensure continued availability of supplies.

As the strategy shifted to economic recovery, two task groups – returning overseas Filipinos and recovery, were added. The former focused on bringing overseas Filipino workers (OFWs) back to the country, while the latter addressed economic and social issues. This move came with the signing of RA 11494 or the Recover as One Act.

3.2 Roles of the Military

The AFP's COVID-19 tasks primarily reflected its roles in the Philippines disaster management system—providing human resources and logistical support. a national joint task force-coronavirus shield was established through the PNP-AFP-PCG-BFP Joint Implementing Directive No 1–2020, establishing policies and guidelines for maintaining peace and order among the security agencies. Alongside over 100 military mobility assets, 11,965 AFP personnel (8% of the force) were deployed to staff quarantine checkpoints and enforce social distancing rules. Personnel were deployed at swabbing facilities, research centers, and testing centers. Almost 100 AFP health service personnel were sent to hospitals in the National Capital Region,

Cebu and Bacolod in central Philippines, and Davao in southern Philippines to help with testing, contact tracing, and case management (DND 2020, 2021). AFP personnel also collaborated with the health department and the Philippine Red Cross in collecting, encoding, validating, and relaying of results of COVID-19 tests (OSG 2023). Some 154 security teams helped government officials distribute government subsidies in communities (DND 2021).

Because public transportation was unavailable during the nationwide lockdown, the AFP provided trucks for the "*libreng sakay*" ("free rides") programs. AFP land, sea, and air assets brought 1.9 million overseas Filipinos back to the country (DND 2021). The AFP also used these same assets to distribute essential supplies such as face masks, face shields, isolation gowns, collapsible tents, cot beds, thermal scanners, and disinfectants (DND 2020). Almost 200,000 vaccines were transported across the country using navy vessels and aircraft such as Black Hawk helicopters, especially to geographically isolated and disadvantaged areas, which are many in an archipelagic country like the Philippines (DND 2021).

Beyond the usual roles, the AFP contributed to the analysis of COVID-19 data. The AFP medical service collaborated with the health department and the United States Armed Forces Research Institute for Medical Sciences (AFRIMS) in monitoring data and providing insights when new policies were created. The AFP health service also steered military facilities nationwide in converting gymnasiums into temporary isolation and quarantine facilities, conducting sessions on proper hygiene, sanitation, and cough etiquette, and providing mental health and psychosocial support to personnel. The office of the joint staff for logistics (OJ4) worked to provide supplies to frontline personnel at checkpoints and medical facilities (OSG 2023).

The AFP's expansive role in COVID-19 management further affirms its description as a "do-it-all" military (Hall 2012). Overall, the Philippine military played several prominent roles in managing the pandemic in the country—from policing to transporting goods and people, analyzing data, providing medical services, and providing community services. In addition to providing external support to the IATF and national task force, the AFP implemented internal initiatives to ensure the well-being of its soldiers and civilian personnel.

3.3 Readiness and Effectiveness

The AFP has both internal and external security and development responsibilities. Instead of whittling down its roles as other countries have done, the AFP's functions expanded despite concerns over these being a burden on the military's limited resources (Hall 2004; Acop 2008). Soldiers who assumed various roles during the pandemic insist that doing so did not adversely affect their resources or overall effectiveness in providing security. They attributed this to their ability to "transform to their environment" depending on the situation (Carlos 2022). They appear to have been successful; the AFP received a 90% satisfaction rating for its pandemic response efforts compared to other government agencies. Next to the AFP, the

national police received an 88% rating, while the DOH received 68%, according to a survey conducted by RLR Research and Analysis Inc. (Nepomuceno 2020).

Despite this, former AFP chief of staff Lt. Gen. Gilbert Gapay admitted that the reallocation of the AFP budget to provide a COVID-19 response affected its ability to end local armed conflicts. Much of the AFP's budget went to COVID-19 instead of the existing programmed socioeconomic programs for counterinsurgency (Garcia 2020). This is notable, considering that most of AFP's operations are focused on addressing internal security matters (Advincula-Lopez 2019). While the AFP has proven its capability in disaster response and was recognized for its COVID-19 response, its involvement in the latter begs the question of suitability for such roles (Carlos 2022). The next section focuses on civil-military relations in the Philippines during this time.

4 Civil-Military Relations

4.1 Securitization of the Pandemic

Numerous concerns were raised by civil society organizations about the deployment and conduct of the AFP, concerns that were rooted in the framing of the pandemic as a war, the task force's leadership, and the AFP's expanded roles. The task force was led mainly by former military officers—Carlito Galvez Jr. (chief implementer; former AFP chief of staff), and DND Secretary Delfin Lorenzana (Chair, NTF, former army commander), Eduardo Año (vice-chair, IATF; former AFP chief of staff) and Benjamin Magalong (contact tracing; former deputy chief, PNP). Critics pointed out that none had any public health credentials, only combat experience, which contributed to them viewing the pandemic as a security problem rather than a health crisis (Solomon 2020; Agojo 2021).

The prominent role of the police and military forces in managing the coronavirus was criticized as overly "militarized" (Imbong 2022; Gibson-Fall 2021) and "war-like" (Hapal 2021; Agojo 2021). According to Hapal (2021), the war narrative during COVID-19 was a mere extension of President Duterte's "war on drugs" campaign. The framing of the pandemic as a "war against the unseen enemy" aimed to foster a sense of urgency to fight this "war." Such terminology is applied not just to the pandemic, nor is it unique to the Philippines. The United States and Brazil used similar rhetoric—and it has also been used to refer to other issues (Lasco 2020; Gillis 2020; Jetly et al. 2020).

According to Maru (2020), Duterte appointed as many as 40 former police and military personnel in various cabinet positions when he assumed office. This is not problematic, as there are enough civilian government leaders to balance the numbers. However, when former military generals were appointed as members of the IATF-EID, which initially had been headed by the health secretary, the balance was tipped in favor of the military (Imbong 2022; Agojo 2021). Eventually, the IATF-IED was

relegated to a mere policy-making body under the NTF, led by retired military officers. These arrangements expanded the military's power to areas beyond its traditional expertise, providing it with extensive powers and effectively subordinating various government agencies (Imbong 2022).

The war and military metaphors are dangerous because they effectively exclude "alternative ways of understanding the disease and what fuels it" (Gibson-Fall 2021, 168). Further, expanded police and military power can become routine during prolonged lockdowns (Chen 2020). While there are indeed concomitant dangers in the military's assumption of non-traditional roles, the next section will look at the extent of civil oversight and accountability that work in practice to curb the power and influence of the military.

4.2   Civilian Oversight and Accountability

The 1987 Constitution of the Philippines provided several safeguards to ensure that the military is subservient to civilian authority. One such mechanism is the Committee on Appointments (CA), an independent constitutional body that moderates the president's appointment powers. The CA acted as a "check and balance" during President Marcos' martial law years, where he single-handedly appointed the country's executive, judiciary, and legislative members. The CA is a 25-member independent body composed of members of the Congress (Vera Files 2022). Section 16, Article VII of the 1987 Constitution requires the president to seek the consent of the CA when appointing heads of the executive departments, ambassadors, consuls, or officers of the armed forces from the rank of colonel or naval captain and higher, and other officers whose appointments are vested with the president. According to Acop (2013), this has politicized the promotion process, allowing politicians to exert undue influence and intrude into the AFP Board of Generals' merit system and fostering political patronage in the system for promoting AFP officers.

The framers of the 1987 Constitution provided another safeguard to prevent military rule. Section 18 of Article VII states that within 48 h from a proclamation of martial law or the suspension of the privilege of the writ of habeas corpus, the president shall submit a report in person or in writing to Congress. In turn, the Congress, voting jointly, by a vote of at least a majority of all its members in regular or special session, may revoke such proclamation or suspension, which the president may not set aside.

As indicated in Article 11 on Accountability of Public Officers of the 1987 Constitution, an office of the ombudsman was created to investigate "on its own, or a complaint by any person, any act or omission of any public official, employee, office, or agency, when such act or omission appears to be illegal, unjust, improper, or inefficient." A deputy ombudsman oversees the military and other law enforcement offices (MOLEO). In November 2014, a memorandum of agreement between the office of the Ombudsman and the AFP stipulated that the Ombudsman would have

sole jurisdiction in cases involving military personnel accused of graft and corruption, plunder, procurement and red-tape violations, crime against state laws, crimes committed by public officers, and falsification of public documents (Office of the Ombudsman, 2014).

Further, Article VIII of the 1987 Constitution emphasizes the importance of social justice and human rights. It stipulates that the Commission on Human Rights (CHR) has the power to investigate, on its own or after a complaint by any party, all forms of human rights violations involving civil and political rights. Thus, on May 5, 1987, by Executive Order No. 163, an independent National Human Rights Institution (NHRI), was created. The CHR issues clearance for police and military personnel to be promoted and to attend professional courses outside the country (President of the Philippines, 1987). The same clearance is needed for enlisted personnel to re-enlist. As a government entity conducting counterinsurgency operations, the AFP is beset with complaints regarding human rights violations (Advincula-Lopez 2012) and extrajudicial killings by police and other security forces (US State Department, 2022). These concerns accompanied the military deployment during the COVID-19 crisis.

During the pandemic, Bayanihan 1 (RA 11469), or the Heal as One Act, was the government's major legislation to grant emergency powers to the president to realign the national budget and expedite the procurement of essential supplies. Oversight was established by the president submitting detailed weekly reports to Congress detailing the use of those powers. When Bayanihan 2 (RA 11494) was passed, the reports were changed to monthly ones and were also submitted to the Commission on Audit, which oversees the use of government funds.

Bayanihan 1 also created the Defeat COVID-19 Ad Hoc Committee within Congress, dedicating a space for addressing pandemic response issues. Among the clusters included, the peace and order cluster were approved with little debate regarding the scope of the security sector. As Van Rensburg et al. (2022) pointed out in a report on the parliamentary COVID-19 response, oversight over the role of the security sector was not a major endeavor. Rather, it focused on anti-discrimination policies toward COVID-19 patients and frontliners.

Meanwhile, the CHR documented reports of human rights abuses. In Davao City, curfew violators were reportedly punished by being made to do physical activities such as "duck walks" and push-ups and thrusts. Sometimes they were struck with batons and even ordered to swim in the sewer. The CHR, in response, urged greater transparency and oversight, calling on security forces to exercise restraint and uphold human rights. In 2020, the United Nations Office of the High Commissioner for Human Rights (UNOHCHR) expressed concern about how police and military in the Philippines used violence and even lethal force to enforce the COVID-19 quarantine without due consideration for most vulnerable segments of the population; it recommended an independent, impartial investigation on the ground (UNOHCHR 2020). However, in its response, the Philippine government claimed that the characterization of a "highly militarized" COVID-19 approach had no basis. In principle, the AFP had no police powers. The enforcement of curfews was the responsibility of the police and the local government units (LGUs), with the AFP personnel supporting only the

PNP at selected checkpoints and at the request of the LGUs. The government took any report of abuses and violations by law enforcers and local authorities seriously. It provided hotlines 8888, 911, and the DILG public assistance and complaints center for the public to report abuses and violations (OHCHR 2022). Further, the Philippines' Commission on Human Rights monitored, received, and investigated reports and cases of quarantine violators who had died or were tortured as punishment by security officials (Philippines, Commission on Human Rights 2021).

The AFP has a human rights office, which promotes human rights and, in partnership with other organizations, initiates dialogues on peace and development among its personnel. However, neither the AFP human rights office nor the deputy ombudsman for military and other law enforcement offices (MOLEO) formally investigated any reported human rights issues attributed to the AFP during COVID-19. The lack of transparency through detailed committee reports limits the analysis of whether the oversight mechanisms function as intended and what appropriate actions were taken to correct errant behavior (van Rensburg et al. 2022). Despite incidences of human rights violations, the public still held the military in high esteem.

4.3 Public Image of the Military

Public trust in the AFP has been on the rise since 2015. Social Weather Stations (SWS) survey data from 1998 to 2016 shows that the AFP's net trust ratings were moderate before hitting a record high of +66 in 2016. Interestingly, the AFP's ratings saw significant declines during military restiveness, and scandals happened, for example, in 2003 following the Oakwood Mutiny, and in 2012 at the height of former AFP comptroller Major General Carlos Garcia's corruption scandal.

One of the major drivers of the AFP's improved satisfaction ratings is its role in disaster response (SWS 2017). This upward trend continued throughout the Duterte administration, from +62 in 2017 to +74 in 2019 before dropping to +67 in 2021 (SWS 2020; Nepomuceno 2023). Despite concerns, the roles the military undertook during the pandemic buoyed its popularity. Its disaster response role contributed to its overall excellent +76 satisfaction rating in December 2022. The military also received satisfactory ratings for achieving its internal and external security goals. It received a net confidence score of +76 for quelling local terrorist groups and +62 for defending the West Philippine Sea against foreign threats (Nepomuceno 2023). These remarkable results show that despite the public's reservations about the military's expanded influence in COVID-19 management, it is not particularly concerned. On the contrary, the results of these national surveys illustrate that the public is overwhelmingly satisfied with the AFP's performance.

The military's expanded roles in COVID-19 management breached the traditional institutional barriers between civilian and military organizations, especially at the local level, which proved valuable during the pandemic. Based on interview data with military officers, local government leaders, and civil society representatives,

physical and geographic proximity and personal ties led to more informal civil-military relations. Both parties maximized and banked on their social capital through their networks to ensure trust and accountability. Their COVID-19 roles resulted in an even greater appreciation of the military's role in CMO as a vehicle for achieving its overall institutional goals (Carlos 2022).

5 Lessons Learnt

The persistent imbalance favouring the military that characterizes Philippine civil-military relations stems from a long history of expanding and legitimizing the military's societal roles so they are normalized, routinized, and even expected. While safeguards are in place to maintain civilian supremacy in the country, its implementation remains challenging. Philippine society has deep-seated structural features that prevent the complete separation of the military and civilian spheres (Lee 2020; De Castro 2013; Advincula-Lopez 2019; Paras 2022).

This chapter has illustrated how this pattern continued and expanded during the Philippine government's COVID-19 pandemic response. As such, the roles the military took on during COVID-19 have provided yet another opportunity for it to redefine and recalibrate its relationship with the broader civil society. Given the unique structural foundations of the country's CMR, what then should be the character of the country's CMR that would provide sufficient institutional safeguards for the civilian population while at the same time being cognizant of the unique socio-historical foundations of the military's location within Philippine society? Within the context of a pandemic, maybe it is now time to update existing government policies on civilian oversight over the military to make better sense of the unique and, at times, anomalous CMR in the Philippines.

Lastly, with incidents in the West Philippine Sea increasing and the country's internal security situation improving, the AFP should consider refocusing its resources and activities on external rather than internal defence (Bordey 2023). While no one can deny that the AFP's organizational setup and resources provide valuable logistical support in disaster situations, national security interests dictate that the AFP should give more weight to its external defence functions. The shift is expected to hasten the organizational maturity of civilian agencies, making them less dependent on the AFP for disaster response and mitigation. While the AFP's HADR roles remain its biggest source of popularity, the shift will allow the AFP's "can-do-no-wrong" attitude to be tempered, thereby providing a clearer delineation of military and civilian functions.

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Latin America and Africa

Brazil

Veronica Azzi and Celso Castro

Abstract This chapter examines the extensive involvement of the Brazilian armed forces, especially the Army, in the national COVID-19 response and its implications for civil-military relations. Building on a history of domestic civic-social actions (ACISO) and law-and-order operations (GLO), the military under President Jair Bolsonaro's administration assumed a central role in pandemic management. Military personnel were mobilized to undertake tasks such as border control, disinfection, logistical support for medical supplies and vaccines, and public awareness campaigns. While the military's professional approach garnered some public approval for its humanitarian efforts, the chapter reveals a deeper "militarization" of public health, where military officials held key decision-making roles, often aligning with Bolsonaro's controversial directives that diverged from international health guidelines. This politicization led to widespread criticism, allegations of mismanagement, and even corruption investigations, reportedly uncovering irregularities in health budgets. The case highlights how military involvement in civilian functions can both enhance operational coordination and expose the institution to political controversy and public distrust.

1   Introduction

The Brazilian armed forces are composed of the army, navy, and air force, and are defined as a national permanent and regular institution that comes under the authority of the president of the republic. The mission of Brazil's armed forces is to guarantee the defence of the nation, its constitutional powers, and, by the initiative of the latter, law and order (Brazil, MoD 2012). Primarily due to the country's mandatory conscription, the size of the Brazilian military is second only to the United States in the Americas. There are approximately 1,340,000 reserve forces and 356,000 active

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personnel (Global Fire Power 2022), including the military police, in charge of the security of the country's federal units.

Considering the relative absence of interstate wars, the armed forces in Latin America has been essential for boosting social cohesion and embodying nationalistic ideals; it has acquired the professional skills necessary to perform domestic roles (Castro 2001).

Besides Brazil's inherent militarized state apparatus, recent political circumstances have caused the country to make a shift to the right, especially following the election of Jair Bolsonaro, a former army officer who was forced to retire following disciplinary problems. In 1988, after he retired, Bolsonaro was elected city councillor for Rio de Janeiro and was repeatedly reelected as a federal deputy until 2018, when he won the presidential race. Throughout his political career Bolsonaro consistently reinforced his links to the army and pledged his allegiance to the institution; several of its members, both retired and on active duty, have openly supported him. When he assumed the presidency on January 1, 2019, Bolsonaro rewarded his supporters by appointing multiple military personnel to official governmental positions. The number of military officials holding federal government positions that had formerly been exclusively occupied by civilians more than doubled, rising from 2765 in 2018 to 6157 during his mandate in 2020 (Castro 2021).

The increasing presence of armed forces personnel in key governmental agencies had a major impact on the health strategies that Brazil formulated to face the COVID-19 pandemic; those strategies took on a particularly strong militarized character.

By March 13, 2020, there were just over 100 confirmed cases of COVID-19 in Brazil, of which 98 had been officially reported by the Ministry of Health (hereafter referred to as MoH) and nine by individual federal units. On March 16, 2020, the MoH provided approximately US $78.6 million for efforts to tackle the pandemic as the number of confirmed cases more than doubled (Brazil 2021). The first official death from COVID-19 was registered on March 17; two days later, there were roughly 600 people infected and seven deaths (G1 Notícias 2020a). By the end of the month, the numbers had risen to 5812 infected countrywide and 202 deaths (G1 Notícias 2020b). By March 20, following presidential guidelines, the Ministry of Defence (hereafter MoD) enacted Operation COVID-19, which by June 2021 saw the mobilization of roughly 34,000 military members.

Since President Bolsonaro relied mainly on active military personnel to combat the coronavirus, this chapter will emphasize the activities of Operation COVID-19 and Bolsonaro's reluctance to follow many of the internationally established guidelines set by the World Health Organization (WHO), which affected the nation's response to the pandemic.

2 Domestic Operations

2.1 *Constitutional and Legislative Framework*

The Brazilian armed forces fall under the supreme authority of the president of the republic. Its mandate is to defend the nation, guarantee constitutional powers, and implement law and order by using any of the powers granted to it since Brazil's independence. In addition to its traditional role as a defence organization, since 1999 the military could also be asked to perform subsidiary activities for national development and civil defence by engaging in preventive and repressive actions, sometimes in coordination with other governmental agencies, by request of Brazil's executive, legislative, or judiciary (Presidency of the Republic, Complementary Law 97).

The Brazilian military has traditionally always engaged in ACISO, or civic-social actions (*ações cívico-sociais*) that promote the well-being of civilians. ACISO is defined as a set of temporary community assistance activities designed to solve immediate problems following disasters, strengthen national unity, and promote integration among the forces and municipal, state, and federal agencies, and the population, among other functions. The 2022 defence budget for ACISO was set at approximately U$116.4 million.

2.2 *Deployment in Domestic Roles*

Following the expanded powers it received from Complementary Law 97 in 1999, over the past decades Brazil's armed forces have engaged in a series of domestic, public security-related initiatives at the request of the executive. Since 1992, this has taken the form of law and order enforcement operations (Op GLO) intended to tackle urban violence, to cover the activities of the military police (PM) when they are on strike or when these forces were deemed insufficient, to guarantee peoples' ability to vote and a clean vote count during each election cycle, and to secure large events like international sports competitions.

For the military to be deployed for law-and-order incidents, this can only happen after the instruments designed to preserve public order and the safety of the people and the country have already been formally considered exhausted, unavailable, nonexistent, or insufficient to perform their regular constitutional mission (Presidency of the Republic 2004). In cases where the president orders the military to be deployed domestically, operational armed forces agencies must be activated to perform the preventive and repressive actions necessary to conduct law-and-order operations. These operations need to follow a few requirements, namely, to be isolated episodes and not run recurrently; to refer to a previously established, circumscribed area; and, when they are announced, to last for a pre-determined and limited time. Since 2010, the state of Rio de Janeiro alone has received nine of the 23 nationwide urban violence

Op GLOs. They have run for 52 months, equivalent to 4 years and 4 months of continuous military deployment—in addition to the military personnel used to secure official events (Azzi 2020), mobilizing up to 4000 members of military personnel.

In addition, regardless of regime changes, all three branches of the military have traditionally conducted humanitarian deployments to carry out social assistance missions to promote community well-being, especially in remote locations like the Amazon or geographically isolated areas the state cannot easily reach. Such deployments range from navy ships providing medical assistance to residents along the rivers in the remote Pantanal region (Brazil, navy 2021) to more exceptional actions, such as the air force and army aircraft and personnel, along with firefighters, searching for bodies in the aftermath of air crashes, and working to rescue those affected by the Brumadinho landslide disaster in Minas Gerais in 2019 (Defesa Net 2019).

Another example of domestic military deployment is Operation Welcome (*Operação Acolhida*), which coordinates border control with humanitarian assistance in Pacaraima, a city between the Northern Brazilian state of Roraima and Venezuela, to assist refugees coming into the country. *Acolhida* provides medical triage, vaccination, and asylum, and acts in conjunction with state and international agencies such as the UNHCR. By 2022, *Operação Acolhida* had deployed more than 7200 members of the military and had been acknowledged by the UN for its humanitarian activities (Brazil 2022).

Since civilians are accustomed to seeing the military engaged in socially oriented initiatives, they are familiar with and expect military engagement to occur when needed. This could well explain why civilians found it natural to see the military perform various social tasks during the pandemic under the auspices of Operation COVID-19. It may even be that many civilians would have had a hard time differentiating the military's ad hoc actions to tackle COVID-19 from its traditional ACISO actions.

3 Military Deployment During COVID-19

3.1 Coordination of the COVID-19 Response

When the COVID-19 pandemic was formally acknowledged as a nationwide crisis in Brazil in March 2020, the federal government set aside a special budget to address it. The MoD issued an official statement saying that it would deploy the military to help mitigate the consequences of the COVID-19 pandemic and that, in line with the guidance from the World Health Organization, government authorities considered the issue a national public health emergency.

President Bolsonaro requested that the armed forces conduct a series of measures he deemed necessary. Following the guidelines established by the presidency, the MoD created and administered an official initiative named Operation COVID-19

(*Operação COVID-19*, or *Op COVID-19*) to fight the coronavirus in Brazil. As the new operation followed the regular procedures regarding military deployment, there was no conflict between Op COVID-19 and the military cadre since the various agencies were already performing similar activities and since its structure relied on interagency cooperation.

The MoD activated a joint operations center (COC) in Brasília to coordinate and plan the deployment of the combined armed forces to fight the pandemic. It established 10 joint commands headquartered in Brazil's major cities and encompassing the country's five geographically administrative regions. The joint commands together planned logistics and intelligence, coordinated their communications, and integrated their action plans to support health and public security agencies under the MoD's umbrella—along with the aerospatial command (COMAE), which is responsible for airborne support. Each joint command directly reported to the general staff of the armed forces. Overall, 34,000 members of the army, navy, and air force were mobilized and deployed for Operation COVID-19.

3.2   Roles of the Military

On March 18, 2020, the MoD issued Ministerial Ordinance Number 1232, mobilizing the armed forces to act in their general subsidiary competence to cooperate with national development and civilian defence under the 1999 Complementary Law Number 97 (Brazil 2020). Because it was supporting the actions of public health and security agencies, the military was authorized to act throughout the whole country to support the federal government's planned measures to mitigate the consequences of the pandemic by conducting the various tasks that had been recommended by the MoD's armed forces general staff.

In light of the rising contamination rates, Congress issued a legislative decree on March 20 declaring a state of public calamity in Brazil. The federal government requested the MoD to coordinate and plan a military deployment to tackle the coronavirus pandemic. On the same day, the MoD authorized the armed forces to act in close coordination with the incumbent governmental health and public security agencies through Ministerial Ordinance Number 1.272, which formally allowed Operation COVID-19 to begin (Brazil 2020). The mobilization for Operation COVID-19 did not affect regular recruitment (which remained unchanged due to conscription) or other military operations; the military carried on with its usual activities as normal, sometimes acting in coordination with other state agencies.

The military performed border control initiatives and disinfected and sanitized public spaces. The government also considered using the armed forces to support public security agencies to control borders; deploy biological, nuclear, chemical, and radiological disinfection mechanisms; provide logistical, intelligence, and communications support; establish ties with the agencies responsible for conducting sanitation actions; and assist in screening potentially infected people and then refer them to hospitals. The armed forces also carried out a COVID-19 awareness campaign, were

responsible for producing facial protection masks and distributing vaccines and cooperated with other sectors and health and security organs to enhance the capacity of the public health sector (Defesa Notícias 2021a). Operation COVID-19 did not fall under the scope of law enforcement; rather, it was an operation within the MoD's umbrella to act on health-related issues.

The overall budget earmarked for fighting the pandemic included economic aid to vulnerable social groups and health investments. The publicly disclosed total cost of addressing the pandemic was U$97.2 billion in 2020 and U$22.4 billion in 2021, of which the MoD received U$96.3 million in 2020 and US$26.2 million in 2021 (Brazil 2021). Part of that amount was allocated to Operation COVID-19.

3.3   Readiness and Effectiveness

In March 2020, the armed forces laboratories increased their production of alcohol gel and chloroquine as among their first efforts to tackle the pandemic. At first, the production took place jointly with the navy's chemical pharmaceutical laboratory and with the participation of all three forces, all located in Rio de Janeiro (Defesa Notícias 2020a). By September 2020, six months after Operation COVID-19 began, 28,729 members of the military had been mobilized to help fight the pandemic. Among their accomplishments were establishing 2445 screening stations, decontaminating 6249 sites, and conducting 6722 awareness campaigns and 11,255 border actions (Lisbon 2020).

In that context, the military carried out 16 missions in Indigenous communities, helping to provide care and awareness campaigns on COVID-19 in collaboration with the special secretary for Indigenous health (*sesai*), an agency of the MoH (Defesa Notícias 2020b). In 2020, the Alto Solimões in Amazonas state was the last of these missions and assisted roughly 1700 indigenous people and conducted 6500 procedures locally so that the residents of the communities did not need to commute to the cities to be treated.

By April 2021, the MoD had 34,000 active military members employed in Operação COVID-19; a higher number than was sent to WWII (Defesa Notícias 2020e; Istoé 2020). On January 18, 2021, the air force began to distribute vaccines and deliver shipments to states. Supplies arrived in the state of Amazonas by navy ship and were transported on air force planes (Defesa Notícias 2021b).

The many casualties among the personnel engaged in the mission indicate that they were not necessarily vaccinated against the coronavirus before being sent into the field, particularly early on in the mission when no vaccines were available. Even later on in Op COVID-19, the presidential decision to postpone the purchase of vaccines made the overall environment less safe for the military than it could have been. Of the total number of military members deployed on the mission, approximately 20,000 contracted COVID-19 while serving. While 18,000 of them had recovered by June 2020, at least 32 had died of the virus (Lima 2020).

Much civilian cooperation took the form of punctual, coordinated efforts to fight the pandemic. One example of civil-military cooperation was the partnership of the Technological Center of the Navy Seals (CTecCFN) in Rio de Janeiro with a civilian enterprise that in April 2020 assigned its 3D laboratory to boost the production of 3D protection masks (Defesa Notícias 2020c). Another example was the Eastern Joint Command's decision, in partnership with Duque de Caxias's city hall and Rio de Janeiro's archdiocese, to train 120 people in disinfection techniques. Those being trained included local city hall employees, priests, and lecturers (Defesa Notícias 2020d).

4 Civil-Military Relations

4.1 *Securitization of the Pandemic*

As the pandemic became acknowledged as a threat, Operation COVID-19 was Brazil's primary mechanism for fighting it in the country. Op COVID-19 was designed to incorporate the scope of the MoD. Even though all ministers of defence are supposed to be civilians, while Op COVID-19 was in place all ministers of defence were members of the armed forces. In this capacity, they acted in conjunction with other government agencies. However, the military flavour of the health policies implemented during the pandemic has proven to be enduring and supports the long-standing argument that health care in Brazil has been militarized.

Since Bolsonaro's mandate began, many military members have been assigned key governmental positions. This trend became conspicuous during the pandemic, especially in offices that had roles directly related to COVID-19-fighting efforts, such as the MoD and the MoH. This trend speaks to what some have argued to be a militarization in the public health response to the pandemic in Brazil, as the responses were "characterized by the presence, acting and leadership of active or retired members of the armed forces in various roles of the state, especially those normally conducted by civilian expertise" (Rodrigues et al. 2021).

This imbalance in military members occupying institutions central to the defence decision-making process has resulted in a few implications for civil-military relations. For one, many decisions have required that military institutions be directly in charge of roles that would otherwise be performed by civilian experts—especially concerning health. For another, Bolsonaro requested the production of additional chloroquine in March 2020. The army's chemical pharmaceutical laboratory carried out the request and produced 3.2 million chloroquine pills, spending R$1.1 million (approximately US$200,000) of public resources to do so (Folha 2021a).

Furthermore, during the pandemic, a few ministers were replaced, and the MoD and MoH became increasingly staffed by military members appointed by the executive. This increased the military presence in the decision-making processes surrounding health policies. Yet even with so many ministers from the military, there

was ongoing disagreement because of Bolsonaro's unwillingness to abide by—and refusal to follow—the international health guidelines set by agencies such as the WHO. Those disagreements led to Brazil having three different ministers of health over the three months from March to June 2020, either because they resigned or were replaced. One of them, Minister Mandetta, who was from the military, left the position after disagreeing with Bolsonaro over the use of chloroquine. In October 2020, army general and minister Eduardo Pazuello intended to use 46 million doses of the CoronaVac vaccine, but shortly after that, Bolsonaro went over his head and vetoed the decision.

The lack of consistency in ministers resulted in the perception that health policies were politicized—specifically, that the armed forces and its members were establishing and carrying out most policies that the incumbent civilian authorities would have otherwise led. The government seemed to trust the armed forces and its members to handle the country's health policies in a way that aligned with the president's requests more than it did any civilian institution during the pandemic; conversely, this significantly eroded the institution's legitimacy. One reason for the erosion of legitimacy was that the military was not only in charge of implementing many policies and receiving direct funds from the MoD to do so; it was later accused of mismanaging and misusing the funds it was allocated. In 2021, investigations by the Federal Court of Accounts (TCU) claimed to have found irregularities regarding a R$41 million budget earmarked for health efforts that had been diverted and used to purchase unrelated goods and services (O Globo 2021a).

In addition, the media frequently reminded Brazilians that the president's recommendations for addressing the pandemic were contrary to international health recommendations. Those recommendations included ordering the distribution of medications to tackle the disease that proved to be ineffective; encouraging people to assemble to carry out political protests; protesting the purchase of vaccines; spreading false information about COVID-19; and advocating that the public disobey recommended protective measures such as the use of face masks and social isolation (Folha 2021b). Eventually, the disagreement between Bolsonaro and different federal units led the federal Supreme Court (*supremo tribunal federal*) to enact a piece of legislation that allowed local and state authorities to enforce lockdown policies and social distancing norms if these were deemed necessary—despite the president's refusal to follow these guidelines himself. This judicial decision contributed to an overall lack of coordination between federal units and the federal government, which in turn reinforced political instability. Yet, despite these instabilities and Bolsonaro's recklessness, there was still some civilian oversight during Operation COVID-19 under the MoD umbrella and in initiatives from the judiciary such as the example above.

For the reasons outlined above, Bolsonaro's political disputes directly affected the balance of civil-military relations in the country. By March 2021, a year after Op COVID-19 was in place and vaccinations were at least partially available for the population, Bolsonaro lost some political support, including amongst the military. For the first time in Brazilian history, three commanders of the armed forces asked for a sitting president's resignation. The primary sources of discord revolved around the fact that Bolsonaro had been demanding that there be political demonstrations

favourable to him to support his idea that he should enact a state of defence to prevent lockdowns from occurring across the country (which by then had been implemented across the country and enforced by local and state authorities following the high contamination rates). Bolsonaro also stirred discord by stating that "his army" would "not allow such actions to take place." As the armed forces commanders resigned, they reaffirmed that the military would not participate in any coup attempts nor cross the limits of established democratic principles of government that Brazil had pledged to follow when it re-democratized in 1985 (Folha 2021c). Events like these have significantly shaken civil-military relations in the country, but they have also revealed that key military members understand the place of the armed forces as an institution of Brazilian society and are clear about their long-term intention not to intervene in political decisions.

In June 2020, army general Eduardo Pazuello was still on active duty and was appointed interim minister of health. He graduated as an administrative officer (*oficial de intendência*), was considered a logistics specialist, and was greatly honoured for overseeing *Operação Acolhida* from February 2018 to January 2020. However, under his watch as the acting minister of health from June 2020 onwards, pandemic cases mushroomed to unthinkable numbers, mainly due to the government's delay in buying vaccines or taking additional necessary, timely measures to mitigate the effects of the ongoing crisis. One example of the critical situation in parts of Brazil occurred in the city of Manaus, the capital of Amazonas state. In December 2020 after months of official investigations, the city's health system collapsed due to the demands imposed on it by COVID-19. Accusations against Pazuello included charges of negligence stemming from a shortage of oxygen in hospitals in Manaus, which led to several deaths (O Globo 2021d). From January 2021 on, the Amazonas health secretariat allegedly contacted Pazuello to explain that there was a shortage of respiratory oxygen and that such shortages had been a problem since December 2020. Yet before taking any official measures to solve the oxygen shortage, Pazuello insisted on disseminating what the government called the "early treatment" policy, solely recommending the intake of chloroquine, hydroxychloroquine, and azithromycin—which by then had already proved to be ineffective.

4.2   Civilian Oversight and Accountability

Much of the information available on Operation COVID-19 in Brazil has been—and continues to be—disclosed, or not disclosed, exclusively by the MoD's official communication channels as part of its official records and communication services. These records document the positive effects and achievements of the military's involvement in fighting the pandemic. Nevertheless, while the MoD is lauding its significant success with Operation COVID-19, several other accounts, these more negative, have denounced the way the Bolsonaro administration adopted its overall health guidelines from the beginning of the pandemic.

These negative accounts included Operação COVID-19 as part of the package of health policies advocated by the executive. Given Bolsonaro's ties to the army, much criticism revolved around his nomination of army generals to the posts in the MoH and the MoD, his refusal to adopt preventive measures, and his reliance on vaccination policies that the international community did not believe were scientifically proven to be effective. Amidst the accusations, the media pointed out that there were also a series of corruption charges against members of the military for their conduct regarding overall health policies during the pandemic. Official government investigations brought to light a series of possible irregularities carried out mainly at Bolsonaro's request, such as the production of ineffective medications, sometimes with a budget initially allocated for the purchase of vaccines.

On January 17, 2021, a key Brazilian newspaper claimed that killing many people was Bolsonaro's project and that the army was "back to killing Brazilians" during the COVID-19 pandemic (O Globo 2021c)—a clear reference to the period when Brazil was under a military dictatorship. Two days later, on January 19, 2021, Army General Richard F. Nunes, chief of the CComSex, the army's communications center, officially demanded the "immediate and explicit retraction" of the claim by the newspaper, requesting that it remove "any distrust of complicity regarding the repugnant conduct of the author and for having transformed itself into a mere biased and inconsequent pamphlet" (Teodoro 2021). Despite the official demand, the newspaper never issued any retraction. For the first time in its history, and from then onwards, the Brazilian army began to use a hashtag in social media channels referring to the "Brazilian Army preserving lives" to highlight the many civic and social activities the army performs (Brazil, army 2021).

In April 2021, the Brazilian Federal Court of Auditors stated that Pazuello had resigned the month before. General Walter Braga Netto, who was nominated to be minister of defence in 2021, was among the first to be summoned to the investigation hearings. Charges against Braga Netto claimed that he did not act to "preserve lives" as he led a COVID-19 crisis committee in the civilian house (*casa civil*) (Estadão 2021). In May 2021, an investigation indicated that the army had begun to produce chloroquine even before the MoH consented to it, per the request of Braga Netto as minister of defence. In July 2021, after being quizzed, the ministry contradicted the army's official statement and declared that it had not ordered the production of chloroquine in the laboratory (Oliveira 2021).

4.3   Public Image of the Military

Regarding Operation COVID-19 itself, there was no question that the military needed to be deployed to help tackle the pandemic. Its engagement in public spaces and public security during the pandemic has, in a way, contributed to solidifying the Brazilian military's humanitarian role, which was previously displayed in such initiatives as its involvement in the MINUSTAH UN mission for the stabilization of Haiti. Brazil's military interpreted its role in Operation COVID-19 as part of its overall mission,

which speaks directly to the domestic element of its work. The armed forces accept as legitimate their role to supply domestic assistance—it is considered a "related duty" and speaks directly to the forces' mission as a civilizing influence that acts with professionalism that is, in turn, inherent to its identity.

The oxygen shortage case in Manaus culminated in Pazuello being charged with mismanagement and illegal conduct related to the measures he imposed for fighting the pandemic, which could have contributed to a rising number of deaths from COVID-19 (Folha 2021f). The case also led to his administration being strongly criticized by civil society and the media; it became a target of mockery and memes on the internet.

Despite this criticism, the armed forces' professionalism left the public with an overall positive view of the military's involvement in Op COVID-19. In this sense, one could argue that its engagement in such health-related missions and tasks has somewhat boosted the force's reputation; the services it performs are seen as legitimate. Overall, the efforts of the armed forces were regarded as effective—at least as broadcast by the MoD. Nevertheless, due to the charges that the military administration of public health policies during the COVID-19 pandemic (especially in the case of Pazuello) were incompetent, the public image of the forces was harmed, particularly regarding their technical efficiency and logistical capacity.

In addition to the scandals surrounding Pazuello as minister of health, Bolsonaro's denial of the pandemic's severity caused him to suffer a drastic loss of public trust compared with his trust ratings at the start of his term in office (Rodrigues et al. 2021). Charges of irregularities regarding the procedures for vaccine production, its administration, and the president's refusal to follow international health guidelines only heightened the public's distrust of his management of health policies.

Official investigations were established to assess whether there was evidence of corruption regarding the health policies implemented during Bolsonaro's administration. As a result, by May 2021, the army publicly stated that it was concerned about the involvement of its officials in government health positions, as acting in this capacity could significantly harm the army's image and reputation since the officials under investigation were acting in Bolsonaro's interest (O Globo 2021b).

5   Lessons Learnt

One of the main consequences of Operation COVID-19 was its legacy. Operation COVID-19 was very well structured and demonstrated good interagency and multi-sector cooperation among the three forces, leaving a standard of force design and organization to be implemented for future missions. This integration resulted from increasing collaboration, discussion, and coordination amongst the three forces, civilian agencies, institutions like the Catholic church, and the 10 joint military commands, all working together to ensure their actions were effective. Coordination also took place among other government agencies, civil-international organizations, and local and international NGOs. In that sense, this interagency structure enhanced

coordination at the federal and local levels, assembling various agencies for common, unified policy implementation purposes.

Despite that, the Brazilian case also illustrates how military participation in civilian endeavours can bring a potentially negative political dimension to the image of the armed forces as an institution, particularly when the pandemic led to health care becoming politicized. In May 2021, investigations from the federal court of auditors pointed out that the army had "set aside the vaccination budget for military hospitals, ineffective medications, and secret expenses" after a provisionary emergency measure was issued in December 2020 to authorize R\$20 billion (approximately US\$3.7 billion) for the purchase of COVID-19 vaccines (Folha 2021d). A week after the money was authorized, a news item disclosed that through a partnership, the MoH had transferred to the MoD the resources, and the responsibility, for the latter to fight the pandemic with the help of the armed forces. For some people that meant that the COVID-19 vaccination had been militarized in that it foresees military involvement in health policies associated with the pandemic that could last for up to five years (Folha 2021e).

By 2022, Brazil's Operation COVID-19 was clearly a case where there was intense military involvement in executive measures and overall governmental policies to fight the pandemic. The strategic placement of military members in policy-making positions that civilians have traditionally performed has resulted in a conspicuous increase in the militarization of health in the country. Thus, the military's involvement in tackling the pandemic in Brazil had clear political undertones, which did some damage to the image of the armed forces.

Nonetheless, it seems that members of Brazil's armed forces are well equipped and trained to effectively perform humanitarian tasks to promote society's overall wellbeing. So long as their deployment is transparent and overseen by the incumbent civilian authorities, the armed forces will remain a central institution that can be called upon when needed in the service of the state.

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Nigeria

Sallek Yaks Musa

Abstract When Nigeria confirmed its first COVID-19 case on February 27, 2020, the government deployed the military to enforce movement restrictions and public compliance measures. With an extensive presence in domestic security operations across multiple states, redeployment required minimal effort. While some new operations were established, many overlapped with existing deployments. Two new regulations expanded the powers of security agencies, further integrating the military into the national pandemic response. This chapter examines the securitisation of Nigeria's response to COVID-19, focusing on the military's role in enforcement and crisis management.

1   Introduction

The principal mandate of the Nigerian armed forces is to defend Nigeria against external threats and aggression to ensure that external forces do not breach the country's territorial integrity. Nigeria's armed forces consist of three branches: the army, the air force, and a naval unit. The three branches together employ over 223,000 personnel, with the army accounting for more than two-thirds of this total (Macrotrends 2022). The figures represent a 137 percent increase from 2003 when the combined forces had 94,000 personnel (Gbor 2003, 61). The increase points to two indicators: a growing demand for the armed forces to counter the increasing and worsening security situation in Nigeria, and the lack of a reserve force that the state can readily call upon in times of emergencies. Nevertheless, due to high levels of youth unemployment and the prestige and status attached to military service in Nigeria, the armed forces always attract a pool of candidates, often exceeding the numbers needed, whenever the institution is recruiting.

On February 27, 2020, Nigeria confirmed its first case of COVID-19, two days after the arrival of a traveller from Milan, Italy. Two months later, the infection rate

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had soared, and the country had about 2,000 confirmed cases. This created both panic and a health crisis because the demand for isolation centres and treatment facilities was high and further strained the already poorly maintained, decaying, and ineffective Nigerian health infrastructure (Aborisade 2021). To reduce the spread of the virus, the national and subnational governments put in place containment measures such as social and physical distancing and the use of face masks in public places. However, the level of compliance was negligible. The government also put in place more stringent measures such as isolation and quarantining of infected patients, contact tracing, the imposition of widespread inter-state travel restrictions, and the subsequent closure of international borders (Ibekwe and Adebayo 2020). The government further strengthened containment measures by, for instance, closing market squares, a majority of which are busy market stalls, but this led to public criticism, condemnation, and controversies.

Critics argued that the government was inconsiderate and failed to ameliorate the suffering of most Nigerians who must work daily to earn income to pay for their upkeep. The critics further argued that shutting down the markets without offering any monetary support would only worsen the living conditions of the poor (Chidume et al. 2021). When the national government allocated food assistance as palliatives to subnational governments across the country, some chose to hoard or delay its distribution rather than promptly distributing it. This provoked public anger, leading hungry citizens to break into and loot warehouses where the food was stored (Akinyemi et al. 2020).

Similar reactions followed the directive that all social events were to be banned, including religious and cultural gatherings such as funerals and wedding ceremonies. Conspiracy theories, civil disobedience, and in some instances demonstrations and protests followed the imposition of this measure (Anyanwu et al. 2020). In Plateau State, for instance, popular Islamic cleric Sheikh Sani Yahaya Jingir and his followers staged a protest demonstrating against the state government's lockdown measures over what he considered to be Western deceit and a conspiracy against Muslims.

Passive resistance and disregard for the protocols compelled the government to deploy the military to enforce compliance and to ensure public orderliness and adherence to all the prescribed containment measures. However, this deployment raised numerous concerns, key among which was the heavy-handedness that has become the norm for Nigerian military actions (Gulleng and Musa 2020). Other concerns included the abuse and violation of civilians' human rights and an "extortion bazaar" of commuters (i.e., bribes demanded of motorists, especially those flouting the presidential order) on main highways (Musa 2021; Ibekwe and Adebayo 2020).

2 Domestic Operations

2.1 Constitutional and Legislative Framework

Although using the military within Nigeria leads to numerous challenges for the government, Section 217 (2) of the 1999 Constitution of the Federal Republic of Nigeria (as amended) makes provision for the internal deployment of the military where the need arises. It stipulates the purpose of the military as:

(a) defending Nigeria from external aggression; (b) maintaining its territorial integrity and securing its borders from violation on land, sea, or air; (c) suppressing insurrection and acting in aid of civil authorities to restore order when called upon to do so by the President, but subject to such conditions as may be prescribed by an Act of the National Assembly; (d) performance of such other functions as may be prescribed by an Act of the National Assembly (Federal Government of Nigeria 1999).

In addition to this statute, Section 8 (3) of the Armed Forces Act 2004 provides an additional mandate for the operational use of the armed forces "for the purpose of maintaining and securing public safety and public order" (Federal Government of Nigeria 2004). The government often relies on this statute when it wants to deploy the armed forces internally to counter a breach of security (Peterside 2014).

In terms of civil oversight, section 217 (2) of the 1999 Constitution of the Federal Republic of Nigeria [CFRN] (as amended) legitimizes the internal deployment of the military when needed, and section 218 grants the president the authority to authorize such deployment. As the commander-in-chief of the armed forces, the president determines the military's operational use. To ensure checks and balances and prevent abuse of this power, subsection 4 of section 218 gives the National Assembly parliamentary oversight for any military deployment. This oversight requires that the National Assembly make laws that regulate the president's power when the president is acting as the commander-in-chief of the armed forces. Essentially, while the president has the mandate to authorize military deployment, the legislature controls its operational use (Arowosegbe and Akomolafe 2016, 5).

2.2 Deployment in Domestic Roles

Since the country's independence in 1960 and beginning with its first deployment that year, the Nigerian military has frequently played a significant domestic role. The military is readily available for political elites to use to execute various tasks in times of crisis or during civil disputes. At least 46 deployments have taken place since the Cold War, on top of another 17 before this period. Publicly available records indicate that the military has been deployed internally for numerous operations, including suppressing protests and demonstrations and containing civil disputes and conflicts.

It has been common practice for both civilian governments and military dictators who have usurped political power in the past to deploy the Nigerian military domestically. My analysis of these deployments shows that the military has been used to respond to several categories of domestic issues involving: (1) protests, demonstrations, and civil actions; (2) criminality and violent conflicts (ethnic, political unrest, resource conflict, communal violence, and criminality including banditry); (3) natural disaster relief efforts; (4) electoral duties; and (5) in response to insurgencies and rebellion.

Domestic deployments in Nigeria have varied in approach. In some instances, the military has been deployed on a short-term basis to respond to public order emergencies, quelling protests, demonstrations, or riots without maintaining a long-term presence at the locations involved. More commonly, military operations are authorized for brief, short-term, and medium—to long-term deployments, depending on the nature of the security problem and the ability of the state to resolve the conflicts or security incidents. A notable example is Operation Safe Haven, the over 11-year military deployment responding to violent conflicts and attacks in Plateau State. These extended deployments not only militarize the state but have also led to the military being labelled "armies of occupation" (Dode 2012, 416).

Despite the variations, there is a discernible pattern in the type of operations conducted. For instance, a thorough examination of the deployments reveals that numerous operations had no codenames. Typical among these is the deployment resulting in the massacre at the #ENDSARS protest in October 2020 and the deployment to address the Ali Must Go University Students' Protest of 1971. Such deployments are quick, repressive, and meant to quell civil actions or uprisings and disperse protesters or demonstrators. These operations are rarely named because they generally do not last long and may not have followed the various legal requirements. Odoemene (2012, 234–235) described such deployments in Ogoniland in the Niger Delta as "assuming the form of direct repression using military and mobile police personnel (popularly known as 'Kill and Go' operations) … to do 'whatever it would take.'" Notably, in 1977, celebrated Nigerian musical activist Fela Kuti recorded and released the song "Sorrow, Tears and Blood" in which he rightly described the quick, short-term pattern of domestic military deployments in this capacity.

Given the government's penchant to often deploy the military "to do whatever it takes" to disperse protests and demonstrations and to suppress conflicts, tracking the different short-term deployments and determining the authorization and the terms of reference of such operations is immensely difficult. In some cases, the military's instantaneous, short-term deployment means there has been no established formal authorization for that deployment beyond a verbal order to move in, use force, and then leave the scene immediately. Such deployments raise numerous challenges, among which are violations of the legal provision for deployment and complications for the institutionally sanctioned criminal justice procedures (given that the military does not form part of the criminal justice system). Even more challenging is the instantaneous, short-term, and arbitrary nature of the deployments without any clear rules of engagement to juxtapose military actions with applicable terms of reference (Musa 2018, 137).

Since Nigeria's return to civil rule in 1999, the internal deployment of the military has increased in most parts of the country, particularly between 2015 and 2018. The European Asylum Support Office (2018, 19) noted that "in 2017 and 2018, several security operations were launched, while others already underway were continued by Nigerian security forces." While criminality and insecurity in the country appear to be on the increase, more relevant is the fact that the Nigerian military has become a major player in the domestic security architecture of the state. Musa (2021, 118) succinctly noted this when he remarked that "from the Niger River and across the six geopolitical zones of Nigeria, military checkpoints are an unmistakable presence, albeit a complex hub of corruption."

Between 2015 and 2020, the Nigerian military conducted over 40 domestic security operations in over 30 of Nigeria's 36 states (Mac-Leva 2020; Iroegbu 2016; Ogundipe 2016). Many of these deployments are still active today. Beyond responding to insecurity, civil actions, and protests, the military has also been deployed in disaster relief efforts. For instance, in 2003, the military supported relief efforts in response to the overflow of the River Kaduna in Kaduna State. Similarly, the Nigerian Navy provided disaster relief in Rivers State in 2022, transporting flood victims and distributing relief materials. The Nigerian military's disaster response units primarily support natural disaster emergency relief efforts.

In 2014 the government deployed the military to help respond to the outbreak of the Ebola epidemic in West Africa. As Kwaja et al. (2021) noted, the military helped manage the Ebola crisis in numerous ways, including maintaining security, supporting the provision of health services, and providing logistics support for the emergency response. This included fostering security and peace, ensuring that they were maintained during the emergency period and supporting the provision of health services and the provision of logistics support for the emergency response. During the COVID-19 pandemic, the military again played a central role, maintaining law and order and ensuring a strong presence on busy streets, major roads, and highways (Ibekwe and Adebayo 2020). However, these frequent domestic deployments have created significant challenges. The military's operational capacity, particularly that of the army, has been overstretched due to the high demand for personnel. Soldiers often face extended missions without leave, beyond the regular 6 to 12 consecutive-month deployment period. This overstretch is further compounded by a lack of equipment as limited military infrastructure must be distributed across various missions based on operational requirements.

One illustration of the extent of overstretched of manpower and the dearth of equipment is the numerous recorded instances of desertion by soldiers in the war against Boko Haram in northeast Nigeria (Onuoha et al. 2020). Further, the insurgents have overrun many military formations, prompting the military to resort to using a "supercamp" formation strategy in which small units are merged into central formations with more manpower and equipment to reduce fatality levels and the loss of equipment and so they can withstand attacks from armed opposition groups (Zenn 2021). However, the super camp strategy has made small civilian communities vulnerable to attack; many have been attacked and easily overrun by armed groups, prompting many to seek shelter in garrison towns as internally displaced persons.

Similar to the terrorist insurgency in northeast Nigeria, the Nigeria Police Force and its specialized armed unit, the Police Mobile Force, have historically been overwhelmed by the scale and scope of security incidents and the breakdown of law and order in the country (Dambazau 2014). The ability of the police to secure the nation has been undermined by high-levels of corruption and extortion within the service, inadequate policing equipment, poorly trained personnel, and a fractured relationship with citizens (Musa 2018; Hills 2008). Consequently, the government has often relied on the military to support or even lead efforts to restore internal security during violent outbreaks.

As previously noted, the domestic deployment of the military is routine in Nigeria, with the military rarely hesitating to comply with directives, even when those directives lack constitutional authority. This reflects a cooperative relationship between the military and political elites, highlighting a failure of the military to question illegitimate orders from political leaders. However, the nature of these deployments has been a subject of debate and criticism. Critics have raised concerns about the legality of these directives, particularly regarding compliance with constitutional and legal standards. This raises questions about the proper oversight and accountability of military actions, an issue that will be further examined in the civil oversight and accountability section.

3 Military Deployment During COVID-19

3.1 Coordination of the COVID-19 Response

The discovery of the first case of COVID-19 in Nigeria and the subsequent community transmission of the virus throughout the country was met with differing public reactions and resistance to the government-imposed preventive regulations. To keep the public informed about the government's effort to contain the spread and mitigate the impact of the virus, on March 17, 2020, President Muhammadu Buhari established the Presidential Task Force on COVID-19 (PTF) to coordinate, lead, and oversee Nigeria's multi-sectoral, inter-governmental efforts. The secretary of the government of the federation chaired the committee. Its key mandate was to coordinate and maintain oversight of all COVID-related matters.

In addition to the PTF, the National Emergency Operations Centre at the Nigeria Centre for Disease Control led the public health response and collaborated with and supported the response efforts of the different Nigerian states. The PTF acted as the lead and decision-maker on all COVID matters, while also offering the president recommendations for ratification and public communication. The relationship and interaction between these key bodies was cordial while the task force lasted.

3.2   Roles of the Military

When COVID-19 was first reported the government needed to enforce more controls on people's movements and public compliance. With the measures it enacted, it turned to the military, which needed little effort to mobilize. The military continued to provide security and enforce restrictions in the areas where it was already operating. The only new military operation was established in the nation's capital, Abuja. In states with an existing military presence, operations overlapped with current ones. The national government further legitimized the containment measures, including curfews and movement restrictions, by enacting two new regulations to empower the security agencies. The COVID-19 Regulations, 2020, were enacted under the president's authority granted by Sects. 2, 3 and 4 of the Quarantine Act. Later, the Coronavirus Disease (COVID-19) Health Protection Regulations 2021 was also enacted.

In several states where the Nigerian military was deployed internally, soldiers took over security management duties, particularly by enforcing curfews and restricting movements. The military was also crucial in enforcing the ban on all trading activities in open markets and social gatherings, a task that would have quickly overwhelmed the Nigerian Police. Ordinarily, such tasks are a deviation from the conventional notion of security in which the police are the domestic specialists, and the military focuses on the traditional function of defence (Reiner 1992; Weiss 2011), thereby securitizing the pandemic (Musa 2021).

Besides law enforcement tasks, components of the armed forces also provided appreciable support to the government's response and management effort. The military implemented a multifaceted response to the COVID-19 pandemic, addressing critical areas such as logistics and enforcement, public health infrastructure, public awareness, and research and development. This comprehensive approach was crucial in mitigating the impact of the pandemic and it demonstrated the military's capability to adapt and support public health emergencies effectively.

During the pandemic, the Nigerian military played a crucial role in the COVID-19 response, particularly logistics and enforcement. This role was made possible in part by the Ministry of Defence Health Implementation Programme (MODHIP), originally established in 2005 to address HIV/AIDS within the military (Lee et al. 2023). In March 2020, MODHIP set up a COVID-19 public health emergency operations centre (PHEOC) to coordinate efforts in testing, surveillance, case management, risk communication, and logistics.

The Nigerian Air Force provided a vital service in airlifting medical supplies and equipment within Nigeria and to other West African countries. This logistical support addressed the challenges of inadequate healthcare infrastructure and ensured that frontline healthcare workers received essential supplies promptly.

The Nigerian military enforced lockdown measures, helping to limit the spread of the virus. It also enhanced the country's public health infrastructure. MODHIP reconfigured the military labs for SARS-CoV-2 testing and designated specific military hospitals as COVID-19 treatment centres (Ayemoba et al. 2022). Over 220 military medics were deployed to support the healthcare system, helping to address

the shortage of healthcare workers. Infection prevention and control measures were implemented across military formations, with surveillance systems established at facility entrances to prevent individuals infected with COVID-19 from spreading the virus to active personnel. These measures helped in the early detection and isolation of cases, curbing the virus's spread within military and civilian populations.

The military also contributed significantly to public awareness of COVID-19. MODHIP conducted awareness campaigns to educate the public on preventive measures like hand hygiene, mask-wearing, and social distancing. These campaigns were crucial in informing the public and encouraging compliance with health guidelines. Additionally, military personnel were trained on effective community engagement and health education, ensuring they could disseminate accurate information and engage with communities effectively.

Research and development were central to the Nigerian military's COVID-19 strategy. MODHIP's research pillar played a key role in forecasting the pandemic's trajectory and guiding response activities (Ayemoba et al. 2022). The program developed research proposals for validating antigen-based SARS-CoV-2 rapid test kits and conducting COVID-19 seroprevalence studies, which were crucial in understanding the virus's spread and developing mitigation strategies. MODHIP's Clinical Research Centre was selected as a Tier 1 site of the Africa CDC Consortium for COVID-19 Vaccine Clinical Trials, collaborating with various partners to study vaccine efficacy and safety. Insights from these studies contributed to the broader understanding of COVID-19 and informed vaccine development and distribution.

Despite these commendable efforts, the Nigerian military faced several challenges in its COVID-19 response. It lacked a dedicated military public health emergency response plan and emergency funds, and cooperation from different military hierarchies was suboptimal (Ayemoba et al. 2022). In addition, the enforcement of lockdown measures posed further significant challenges.

3.3   Readiness and Effectiveness

The COVID-19 pandemic significantly impacted the effectiveness and readiness of the Nigerian military, primarily by reorienting their focus towards public health response and introducing new operational challenges (Yanet et al. 2022). The most significant impact was the redirecting of traditional combat roles to support public health. For example, the military was tasked with airlifting medical equipment and supplies, healthcare professionals, and distributing oxygen and other relief materials, which placed a strain on the military.

Significant redirection of military resources towards the public health response undoubtedly influenced the availability and nature of military deployments during the pandemic (Owonikoko 2021). The redirection of resources and personnel to the COVID-19 response impacted critical military operations such as the counterinsurgency in northeast and domestic operations in the northwest and northcentral regions (Iweze 2020). The Nigerian military faced the challenge of sustaining pressure on

non-state armed actors such as dealing with the deadly actions of Boko Haram on the one hand and dealing with the public health insecurity on the other. As a result, Boko Haram and its affiliates exploited the diversion of military efforts toward lockdown enforcement and the resulting decline in counterinsurgency manpower to intensify civilian abductions and bolster fighter recruitment and training (Iweze 2020). The group expanded its ranks and renewed offensives against both military units and civilian communities, resulting in increased ambushes and fatalities among security forces. A notable incident occurred on March 21, 2020, when officers and more than fifty personnel were attacked en route to Alagarno Forest in Borno State, underscoring the insurgents' exploitation of this gap.

In terms of the impact on readiness and training, like most militaries, the need to enforce physical distancing, meant that many ongoing military training programs were suspended, leave passes suspended, and parades were limited in size. This likely affected routine training schedules and skill development. The precise number of Nigerian military personnel affected by COVID-19 that directly prevented their deployment on traditional missions are not widely publicized. However, the impact on ongoing domestic missions were apparent.

The COVID-19 pandemic significantly altered the operational landscape for the Nigerian military. While it presented challenges related to training and resource allocation, it also highlighted the military's adaptability, its capacity to contribute to national health security, and the critical need for robust public health preparedness and strong civil-military cooperation in the face of widespread crises. Thus, while the crisis revealed some challenges, lessons derived from this period should inform efforts to enhance the synergy between defence and public health institutions in anticipation of future systemic shocks.

4 Civil-Military Relations

4.1 Securitization of the Pandemic

Securitization is the process of framing an issue as a security threat, using specific tools and strategies to shape public perception (Rychnovská 2014; Balzacq 2011). A "securitizing actor"—such as a government or leader—employs metaphors, policy tools, stereotypes, and emotional appeals to highlight a "referent object's" vulnerability, whether it be national security, public health, or the environment. This framing convinces the public that the issue poses a critical, immediate threat, justifying the need for urgent policy action.

The COVID-19 pandemic in Nigeria was securitized, framing the health crisis as an existential threat necessitating extraordinary measures. The government swiftly implemented a nationwide lockdown and established the PTF on COVID-19, which coordinated response efforts, including the deployment of the military. These actions bypassed normal political processes, reflecting the securitization approach. With its

deployment to respond to COVID-19, the military became even more stretched, and criminal enterprises, including terror groups like Boko Haram, exploited this opportunity. Boko Haram spread false information about the virus, condemned public health measures, and used its influence in areas with weak government control to disrupt health care efforts, thereby worsening the impact of the pandemic (Bukarti 2020).

The pandemic also destabilized Nigeria's security structure, leading to increased crime rates, including armed robbery, especially during lockdowns. Boko Haram further exploited the situation by recruiting new members from the economically vulnerable, specifically those left jobless by the pandemic's fallout. The diversion of military attention and the ensuing rise in criminal activities highlighted the complex challenges of relying on the military to manage a public health crisis.

4.2   Civilian Oversight and Accountability

A robust framework of civil oversight and accountability is essential. In Nigeria, the judiciary plays a crucial role in maintaining checks and balances on the deployment of the military. It subjects the legislative powers and functions, including laws enacted on military deployment, to effective oversight (Aluko 2015). The judiciary has the authority to adjudicate cases involving the military, including human rights abuses and unlawful conduct. Courts-martial and military tribunals operate under judicial oversight to ensure due process and adherence to legal standards. Although Nigeria has a legal framework designed to ensure checks and balances on military deployment, in practice loopholes exist. The president can deviate from constitutional requirements, and the legislature can fail to exercise its mandate when the executive contravenes established legal standards. Indeed, this was the case during the military's response to COVID-19 in Nigeria.

The lack of clear authorization for the military to assist or lead the enforcement of restrictions became a major issue. In his public address on March 29, 2020, President Buhari declared a lockdown curfew and a ban on all interstate and intercity travel, starting with Abuja, Lagos, and Ogun states. The president vaguely mentioned that the "heads of security and intelligence agencies have also been briefed" (Tunji 2020) without clarifying whether the military was included, the extent of its deployment, or its specific roles. Despite this lack of clarity, the coordinator of the military's Defence Media Operations held a press briefing announcing that the military would enforce movement restrictions across Nigeria. Major General John Enenche stated that the military was ready to implement the "directive given by President Buhari during his address to the Nation on the COVID-19 pandemic" (Ajibola 2020). This situation illustrates two key issues and two possible scenarios.

First, it highlights the ambiguity both in the chain of command and the scope of military involvement in internal security matters. Second, it underscores the potential for executive overreach and the necessity for more explicit legislative and judicial oversight to ensure that military deployment complies with constitutional and legal

standards. Addressing these concerns is essential if Nigeria is to maintain democratic governance and uphold the rule of law. Furthermore, despite numerous abuses and violations committed by soldiers enforcing lockdown restrictions, there was a complete absence of civil oversight of the military by the executive or the legislature during this period.

One possible scenario is that the military was never given any formal briefing or authorization to deploy and assumed any role in the effort to combat COVID-19. The choice of words (we (the military) are ready to enforce the COVID-19 lockdown in Lagos, Abuja, and Ogun in reaction to the president's address) is not a response to an invitation. As historical evidence shows, had the military been invited, it would have indicated its readiness by deploying immediately, as it has always done.

The second possible scenario is that the military was indeed briefed as part of the security agencies as the president noted. However, if it had been, it would have been most appropriate for the military coordinator to mention the briefing. On the contrary, the military's decision to act was hinged on the president's ambiguous political statement. The ambiguity and arbitrariness of the military's deployment as announced by the defence coordinator raise questions about both the legitimacy of the deployment and the authorization for it.

Besides the question of the legality of the military's deployment and the failure of both the executive and legislature to allay the fears and concerns of Nigerians over this ambiguity, a key challenge with the deployment pertains to the military's role. Clearly, the absence of any formal authorization meant that there were no applicable terms of reference or rules of engagement for the soldiers to follow during this period, and a lack of guidelines can foster military unprofessionalism, as discussed below. In states where the military already had an established presence before this deployment, a modification of the rules of engagement (if any were provided) would have been the minimum acceptable standard. The lack of formal authorization or rules of engagement had an impact on the military's image and on public opinion and further undercut the military's already eroded legitimacy.

4.3   Public Image of the Military

The military response to the COVID-19 pandemic in Nigeria was marred by its excessive use of force against civilians. Soldiers punished civilians who violated curfews and movement restrictions, often humiliating and degrading them. Medical workers, including doctors and nurses, were not spared. In Plateau State, for example, a taxi driver in Jos was severely beaten by soldiers from the Operation Safe Haven Special Task Force for breaching curfew hours. He died from the injuries he sustained in the incident. By the end of the first two weeks of the military enforcement of lockdowns, soldiers had killed 18 civilians, whereas the virus had claimed only 12 lives (Eboh et al. 2020). These actions were clear human rights violations, committed without recourse to the rule of law.

Corruption among soldiers was also recorded, with many taking advantage of their deployment to extort and coerce civilians, especially long-distance truck drivers performing essential duties. Soldiers at military checkpoints extorted commuters and truck drivers on essential duties (Ibekwe and Adebayo 2020). Despite having movement permits, truck drivers had to pay soldiers bribes to be allowed to continue their journeys. Commuters without permits faced even greater extortion (Musa 2021). This behaviour was widespread, indicating systemic problems within the military's internal operations during the lockdown. The extortion attracted public criticism of the military, further diminishing the already low esteem in which many Nigerians held it. The use of excessive force was rampant, continuing a pattern of such behaviour when dealing with civilians.

Friction between the military and government agencies was also evident. On June 13, 2020, soldiers harassed members of the Borno State Committee on the Prevention of the Spread of COVID-19. The committee had closed the Damaturu-Maiduguri Road so it could screen commuters, but the military convoy forced the gate open, bypassing the screening. This aggression resulted in one death, several injuries, and significant property damage. Soldiers even harassed police personnel attached to the unit.

The conduct of soldiers during internal security operations significantly affects public trust in and support for the military. In Nigeria, friction between the military and civilians or civilian agencies frequently arises during domestic deployments. Scholars attribute this to military culture, which contrasts sharply with civilian societal norms. Soldiers, accustomed to using force, often violate human rights as they try to impose compliance; they lack the persuasive communication skills that civilians value (Musa and Heinecken 2022; Okros 2013; Esterhuyse 2013; Soeters et al. 2006).

Given this, the military's announcement that it was going to deploy and enforce COVID-19 restrictions sparked public consternation and debate. While some, including the Speaker of the House of Representatives, supported the deployment, human rights activists like Femi Falana opposed it, citing concerns about the legality of the deployment as it was not authorized by the president as required by law. The National Human Rights Commission also raised an alarm, labelling the military and police as the top violators of human rights during this period. The direct involvement of soldiers in administering punishments that led to the deaths of 18 Nigerians in the first two weeks of lockdown restrictions became a focal point of public outrage (Odigbo et al. 2020). Despite these harsh actions, perpetrators were rarely punished as the government often failed to hold the military accountable for unprofessional conduct. Even when the military indicated it would try the perpetrators according to military law, the victims or their families seldom received justice as the outcomes of military trials were rarely made public. Moreover, while the Air Force established an ombudsman in 2021, other branches did not have dedicated offices for such issues, leaving many complaints unaddressed.

The reputational damage to the military arising from rights abuses is significant. Many civilians perceive the Nigerian armed forces as a source of pain and suffering. Some have even labelled soldiers as monsters because of their disproportionate use of

force and human rights violations (Musa 2018). This unenviable reputation undermines the military's ability to succeed in domestic missions where a cooperative relationship with civilians is crucial. For instance, efforts at contact tracing during the COVID-19 pandemic were hindered by the military's aggressive image which made civilians reluctant to identify and isolate individuals who had contact with positive cases. Fear and panic among civilians when they encounter soldiers (Peterside 2014) complicate the military's role in internal security management. Additionally, some civilians refuse to cooperate with the military including by shielding, hiding, and denying security forces access to communities for lawful operations.

The disdain for the military and the reluctance to interact with it further complicated efforts to enforce interstate travel restrictions. Violators were not promptly identified, and for a long time, the government remained unaware of the alternative routes civilians used to evade detection. This facilitated the community's spread of the virus. Corruption and extortion by soldiers at checkpoints exacerbated the situation. In Plateau State, for example, the first COVID-19 case was a traveller who had violated interstate movement restrictions, leading to significant community spread, culminating in Plateau becoming among the top five Nigerian states with the highest number of COVID cases.

These actions all had implications for civil-military relations in Nigeria. The ambiguous nature of the deployment made it difficult to identify the resources earmarked for this effort. The quadrumvirate interaction theory (Musa 2024), which emphasizes the interplay between the military, government, and society, suggests that the military's excessive use of force and corruption during the COVID-19 response damaged public trust and cooperation. This erosion of trust complicates future internal security missions where civilian collaboration is crucial. Furthermore, the government's failure to hold the military accountable for its actions exacerbates the situation, reinforcing perceptions of impunity and undermining democratic governance.

5   Lessons Learnt

The Nigerian military maintains certain prerogatives over civilians and civilian institutions, typical among which is a high level of unquestioned impunity in what Stepan (1978, 101) describes as a situation of an "unequal civilian accommodation." The COVID-19 deployment has further emphasized to the public that the military operates as a law unto itself, without regard to established due processes. This view was reinforced following the military's violent conduct in the commuter screening disruption incident in Borno State. Similar conduct by soldiers continues to play out in different locations throughout Nigeria where the military is deployed for domestic operations—indicating that effective civil control of the armed forces is absent (Ojo 2006; Odoemene 2012).

The Nigerian government is failing to maintain effective parliamentary oversight over the military to ensure that it operates under constant checks and balances to

curtail its excesses. As a result, because the state is failing to hold the military accountable for the actions of its personnel—and for the institution's behaviour generally—the civil liberty of civilians is neither well protected nor guaranteed. The right of the citizenry to demand justice and to protest ill treatment from government institutions has been stifled by the authoritarian actions of state institutions in Nigeria. As such, a recurring cycle of abuse and the violation of civilians' human rights is likely to continue until the military is subjected to effective civil control and oversight (Ojo 2009).

Ultimately, the military's attitude and behaviour and the inability of the state to guarantee justice to civilians both played a significant role in undermining the ability of the Nigerian government to immediately contain COVID-19 before it spread across the country. In states where soldiers took control of inter-state borders, their bribery and corruption encouraged desperate civilians to violate movement restrictions; civilians paid bribes to soldiers at checkpoints and interstate borders so they could violate the regulations with impunity. Such behaviour undermined Nigeria's ability to curtail and prevent the circulation and community transmission and spread of the virus. In other instances, the heavy-handedness of the military discouraged civilians from providing useful information that could have ensured that non-formal entry points into different states were successfully controlled. Thus, it is apparent that while the military was deployed to enforce compliance with COVID-19 restrictions, rather than successfully achieving this, soldiers became a part of the problem and contributed to an increase in the community spread of the virus in Nigeria.

A conclusion from a previous study summarizes the problems with the military's deployment to address the COVID-19 response in Nigeria: "there is a need for an improved civil control of the military, across the various arms of government. As the representatives of the people … an improved parliamentary oversight by the National Assembly which is empowered to ensure the military complies with the regulations guiding its missions would improve compliance. This can also include making publicly available the military rules of engagement for every internal security operation in the country. The benefit of this is that it will improve accountability, ensure compliance, and serve as the standard by which to assess the performance and activities of personnel deployed" (Musa 2018, 174).

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Sierra Leone

Maggie Dwyer and **Osman Gbla**

Abstract Sierra Leone's prior experiences with Ebola and other health crises, coupled with its relatively underdeveloped healthcare system, prompted a swift and military-inclusive response to COVID-19. The Republic of Sierra Leone Armed Forces (RSLAF)'s roles during the pandemic were extensive, encompassing the establishment and staffing of treatment centres, enforcement of quarantine measures, logistical support, border control, and ensuring public health compliance. The "securitization" of the pandemic, with military leadership at the forefront, has become the norm for crises in Sierra Leone, raising questions about the capacity building of other civilian institutions. Despite minor incidents of heavy-handedness, public trust in the RSLAF remains consistently high, reflecting a remarkable turnaround from its pre- and civil war reputation. This extensive domestic role, however, also raises concerns about potential imbalances with civilian security forces, such as the police.

1 Introduction

When COVID-19 was detected in Sierra Leone in March 2020, the government quickly invoked the military to play a central role in the response efforts. The military's responsibilities extended far beyond the more traditional roles that state armed forces often play, such as border control efforts. Rather, as a brigadier general noted, "military personnel are engaged in almost all the activities of the different pillars established for the response to COVID-19 at the national, district and chiefdom levels."[1] This chapter will explain how the role given to the Republic of Sierra Leone armed forces (RSLAF) is part of a growing pattern of military involvement in

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[1] Interview with a brigadier general, August 18, 2020.

domestic emergency response efforts. This pattern stems from the increased capabilities, professionalism, and trust within the civilian population following significant security sector reform efforts in Sierra Leone.[2]

The RSLAF is an all-volunteer force of 8500 personnel, much reduced in size from the 17,000 personnel in the forces before Sierra Leone's civil war ended in 2002. When the civil war ended, the post-war country deemed a 17,000-strong military to be unnecessary and unsustainable, so it was downsized to 10,500 in 2006, and finally to its current size in 2010. The RSLAF is an army with a naval and air wing. It has three stated defence missions, including: to defend the sovereignty and integrity of Sierra Leone (Defence Mission A); to support the civilian authorities and the population with reconstruction, emergency response, and ceremonial duties (Defence Mission B); and the promotion of wider national interests, which includes peacekeeping (defence mission C) (https://mod.gov.sl/rslaf-navymaritime.html). As will be expanded on later, the RSLAF's role in COVID response efforts falls under Defence Mission B.

Sierra Leone reported its first case of COVID-19 on March 31, 2020 (https://www.afro.who.int/news/sierra-leone-confirms-first-case-covid-19). Yet in light of the situation unfolding in the rest of the world, the government had already begun implementing preventative measures before any cases were recorded. For example, on March 16, 2020, the country restricted international travellers from countries with cases; on March 22, 2020, it suspended all air traffic. President Maada Bio declared a state of emergency on March 25, 2020, and on March 27, 2020, all of the country's borders were officially closed (Jones 2022, 456–457). Like most countries, the rate of infections shifted over time in Sierra Leone, as did the government-mandated restrictions. Compared to many Western countries, the required "lockdown" periods were shorter, usually just a few days. This is probably due to weaker economic conditions in which the government was unable to provide the type of financial support that often-accompanied long lockdown periods in other countries. Still, a wide range of other measures affected daily life in Sierra Leone, including periods of restricted inter-district travel, evening curfews, required closure of some businesses, limitations of the length of religious services, and banning events that were anticipated to attract a large attendance. These were in addition to other hygiene measures and mandatory face mask wearing in select settings (https://mohs.gov.sl).

As of March 2022, Sierra Leone had reported 7600 cases and 125 COVID-19 deaths since the outbreak of the pandemic (https://graphics.reuters.com/world-coronavirus-tracker-and-maps/countries-and-territories/sierra-leone/). Compared to many other countries, including others in Africa, these figures are low. Still, even these relatively low rates put pressure on the country's underdeveloped healthcare system. Additionally, its devastating experience with Ebola led the country to take swift action in response to COVID-19, including involving the RSLAF. The RSLAF's involvement in the COVID-19 response built on its experience in other domestic

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[2] This chapter expands on our section of Facing a pandemic: African armies and the fight against COVID-19, the IRSEM/EGMONT report number 91 (Mahé & Wilén 2021). For full details, see the reference list.

deployments including responses to cholera outbreaks (2012), Ebola (2014 to 2016), and flooding or mudslides (2017). The RSLAF has also been deployed to supplement the police to provide security during elections. On the one hand, these missions demonstrate the flexibility and broad capabilities of the armed forces and represent a dramatic shift from the abusive reputation they developed during the civil war. On the other hand, these missions raise questions about the longer-term implications of a military that is becoming increasingly domestically oriented and suggest that there is a growing imbalance between the armed forces and the country's other security forces, such as the police.

Research for this article involved conducting interviews with leading military members of the COVID-19 response efforts in and around Freetown in August 2020, with follow-up interviews in March 2022.[3] It builds on a wider research project conducted by the authors related to the RSLAF, which has included multiple rounds of interviews over many years.[4]

2 Domestic Operations

2.1 Constitutional and Legislative Framework

Sierra Leone has clear regulations about the deployment of the military for domestic missions. Most of these regulations were developed as part of the security sector reform (SSR) process following the civil war. The most relevant regulations for the RSLAF's COVID-19 deployment are found in the Republic of Sierra Leone armed forces defence missions (DM) and military tasks (MT) as contained in the Defence White Paper (https://mod.gov.sl/docs/MODDefenceWhitePaperSierraLeone.pdf). This document lays out "Defence Mission B: Support to the Civil Authorities," which outlines how the military is to provide military aid to the civil authorities (MACA) in Sierra Leone during peacetime, crises, or emergencies. It is under this defence mission that the military was engaged in the COVID-19 response. The appropriate mission task for their role in COVID is mission task (MT) 6, Military Aid to Other Government Departments (MAOGDs). This task is designated for the RSLAF to assist in maintaining supplies and services essential to the life, health, and safety of the community.

The Defence White Paper places restrictions and conditions on the use of the military in public emergencies. The provisions for the use of MACA are allowed in the following conditions: that the primary task of the RSLAF is to defend Sierra Leone's territorial integrity against external aggressors (para 400); that the RSLAF

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may undertake internal security functions when ministers have given explicit autho-
rization, and invariably acting under police primacy and control (para 40002). Three
main criteria also guide MACA: that the military is to be used as a last resort; that the
military can be used when the civil authority lacks the required level of capability
to discharge the function; and finally, when the civil authority has the capability but
the need to act is urgent and it lacks the readily available resources to do so.

While the Defence White Paper clarifies the conditions for MACA, another docu-
ment, Military Aid to Civil Authorities: A Guide to Operations in Sierra Leone spells
out how MACA is to be authorized. To summarize, it involves a specific request from
the appropriate civil authorities which is subject to civil primacy and requires the
authorization of the National Security Council (NSC), the highest security body in
the country, chaired by the president of Sierra Leone. These military-specific regu-
lations are aligned with the National Security and Central Intelligence Act (NaSCIA
2002), which is the core framework for civil protection. It defines the security struc-
ture that responders should use as they prepare to respond to an emergency. The Act
stipulates that the National Security Council has overall ministerial responsibility for
the safety and security of the population within Sierra Leone and should therefore
be responsible for emergency preparedness and response.

Finally, Section 29 of the 1991 Sierra Leone Constitution gives the president the
power to declare a state of emergency to quell either an armed insurgency or to
mitigate the effects of natural disasters. Section 165 (2) of the Constitution obliges
the RSLAF to guard and secure Sierra Leone and preserve the safety and territorial
integrity of the state. As noted, the president declared a state of emergency at the
start of the COVID-19 pandemic, a status that lasted for a year. This was the third
time a state of emergency had been declared in Sierra Leone in six years, leading
some to criticize that the provision was being overused (Jones 2022, 457).

These regulations demonstrate that there are legal provisions for domestic deploy-
ments and the armed forces cannot simply be used ad hoc in a domestic context. The
government's use of the Sierra Leone military to help with the COVID-19 response
followed these regulations. While there is a process in place to secure the military's
assistance, including restrictions, it is not an overly arduous process and has been
used many times as the following sections will detail.

2.2   Deployment in Domestic Roles

The expansive role that RSLAF played during the COVID-19 pandemic can be linked
to security sector reform (SSR) efforts that have shifted the capabilities, focus, and
image of the forces from earlier decades. When Sierra Leone emerged from its
11-year civil war, the army was undisciplined and operationally ineffective, and
the civilian population saw it as abusive. Even before the civil war, the military
had a poor reputation owing to a series of coups and counter-coups (Dwyer 2017).
Therefore, "a pressing requirement for post-war reconstruction was to transform the
army into a stabilising force that could protect the country's territorial integrity and,

most importantly, to establish for it a clear and meaningful role outside of politics" (Albrecht and Haenlein 2015, 28). Reforming the armed forces was one element of a much wider state-building effort following the war (Albrecht and Jackson 2014).

The army reform involved an extensive (re)training, advisory, and institution-building program led primarily by the UK through its International Military Advisory and Training Team (IMATT). IMATT was actively engaged in Sierra Leone's defence sector from 2000 to 2013, with over 150 personnel in the country at its peak (Haenlein and Godwin 2015, 6).[5] Although challenges remain, the long-term commitment to rebuilding the Sierra Leone army has largely been viewed as successful in developing a more effective, apolitical, and professional force.

The reform process involved more than the technical training of troops; it also saw the defence sector being restructured to bring the forces under democratic civilian control. Previously the Sierra Leone Ministry of Defence (MOD) had been a centrist and bureaucratic organization controlled by the military, which led to corruption and a lack of professionalism (Gbla 2007, 23). Following the reforms, civilians held senior positions in the military administration, which led to "a closer working partnership between civilians and military, with the two sections being regarded as a fully integrated team (Gbla 2007, 23–24)." Many senior members in the MOD have significant experience in both the military and civilian sector which likely assists in collaborative efforts such as the COVID-19 response and the past Ebola response.[6]

Domestic deployments of the RSLAF have become routine following emergencies or periods of perceived tension. This has included military deployments to support peaceful elections, respond to natural disasters such as mudslides, and assist in medical emergencies. A key reason the Sierra Leone Government Defence White Paper (2005) quickly called on the RSLAF to assist with the COVID-19 response was their significant relevant experience gained during the Ebola outbreak. The Ebola response efforts were initially led by the Ministry of Health but it soon became apparent that the organization lacked the structures and experience to lead a nationwide containment effort. A public emergency was declared 4 months into the epidemic, which formally brought the armed forces into the response effort (Gbla 2018, 6). The RSLAF's responsibilities grew several months later when the National Ebola Response Centre (NERC) was established and led by the minister of defence at the time, Alfred Palo Conteh.[7] The NERC acted as a command-and-control centre; the RSLAF was represented by a range of personnel including international organizations and international military personnel (primarily British).

In addition to its national role in the Ebola crisis, the army also operated district command centres, placing them in coordinating and active response roles throughout the country (Gbla 2018). The wide range of tasks that soldiers were involved in

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[5] IMATT was then replaced with a much smaller international security advisory team (ISAT).

[6] For example, the interim coordinator of NaCOVERC is the minister of defence, Kellie Conteh. Conteh is a retired brigadier general and held the civilian position of national security coordinator from 2000 to 2012.

[7] Similar to the example of Kellie Conteh, Alfred Palo Conteh also had a background as a military officer before moving into civilian leadership roles.

included enforcing home quarantines, constructing treatment centres, providing security for hospitals and medical centres, staffing checkpoints, conducting health checks on public transport, enforcing public order alongside police, and assisting burial teams (Haenlein and Godwin 2015). Apart from taking action during times of crisis, the RSLAF also takes on more routine domestic-focused roles, particularly its maritime wing. These roles include search and rescue missions, anti-piracy operations, anti-smuggling operations, and surveillance to protect the fishery in Sierra Leone's waters (https://mod.gov.sl/rslaf-navymaritime.html).

The army's reform achievements have not been fully mirrored in the Sierra Leone Police (SLP). A range of challenges remain for the SLP including politicized recruitment and chain of command, lack of professional ethos, significant divisions within the force, and a poor reputation with the public (Godwin and Haenlein 2013, 34–35). For example, polling data has indicated that the force is one of the least trusted state organizations in the country and the public views it as highly corrupt (Godwin and Haenlein 2013, 35). While it is beyond the scope of this chapter to provide a full comparison with other bodies, the important result of this analysis is that over time, the army became a stronger institution than the police in terms of training, command structure, resources, and morale. The army has the remit to support the police in exceptional circumstances under the military aid to the civil authorities (MACA) framework, which was invoked in the COVID-19 circumstance.

The RSLAF's substantial role in several emergency response missions in recent years—particular, its leadership role in the COVID-19 response—draws attention to the imbalances between it and other domestically oriented response organizations, such as the police and rescue services. A former deputy inspector general of the SLP has warned that the regular involvement of the army in domestic situations has at times created tensions and resentment between the police and the army, which could hinder other missions that require their coordination (Kamara 2019, 30–32).

As one British military advisor noted, "the army is almost a victim of its success, the military is now the default setting for any situation, they call on them almost too early."[8] While the foreign advisors were part of the reform that brought closer engagement between military and civilian leadership, there was also a sense that the military could become over-engaged in domestic matters, a topic we will return to in the conclusion.

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[8] Interview with the author November 24, 2016.

3 Military Deployment During COVID-19

3.1 Coordination of the COVID-19 Response

When the COVID-19 outbreak began, Sierra Leone established the National COVID Emergency Response Centre (NaCOVERC), which led and coordinated the national response efforts. Its first coordinator was the minister of defence, Kellie Conteh. NaCOVERC managed the full response effort, not just the involvement of the security forces, and therefore having the minister of defence lead the efforts signalled the importance of the security sector in the response. Conteh held the position until May 2021. The role was assigned by the president and approved by parliament. As of March 2022, there had been two other coordinators after Conteh: Sheku Bangura and Dr. Amara Jambai.[9] Military personnel at times led many other pillars of the NaVCOVERC structure including operations, the situation room, quarantine, and logistics.[10]

3.2 Roles of the Military

The RSLAF held many roles related to the COVID-19 response, ranging from treatment to enforcing domestic regulations and monitoring borders. The military hosted one of the main COVID-19 treatment centres in the country, staffed by both military and civilian health professionals. The country's military hospital, 34 Military Hospital, was responsible for treating the country's first case (on March 1, 2020) and subsequently established Sierra Leone's first COVID-19 treatment centre within its facilities,[11] headed by a military doctor, Colonel Sevalie.[12] The 34 Military Hospital's central role in the COVID-19 response was related to the facility's longstanding, strong reputation and its doctors, many of whom had been trained abroad as part of ongoing military exchange programs with partner countries. The well-established military medical system is an advantage unmatched within the police force.[13]

Once the COVID-19 centre was set up at 34 Military Hospital, two other COVID-19 community centres were set up within military bases. These included treatment facilities but were also meant to provide a space for self-isolation for members of informal settlements whose living environment made self-isolation especially challenging (https://www.mayorsmigrationcouncil.org/mmc-city-spotlight/freetown-sierra-leone). While these centres were located in military facilities, they are intended to serve both civilians and military personnel. Additionally, when civilian medical

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[9] Author interview with an RSLAF lieutenant colonel, March 3, 2022.

[10] Author interview with RSLAF colonel, August 19, 2020.

[11] Author interview with RSLAF lieutenant colonel, August 21, 2020.

[12] Author interview with RSLAF lieutenant colonel, August 19, 2020.

[13] Author interview with RSLAF lieutenant colonel, August 19, 2020.

staff went on strike in July 2020, patients from other civilian hospitals, including from the infectious disease unit at Connaught Hospital in Freetown, were transferred to military-run facilities (Bailey and Farrant 2020).

Apart from providing treatment for COVID-19, the RSLAF was also involved in quarantine measures and enforcing other government policies related to the virus. In Sierra Leone, those with COVID-19 were required to quarantine in their homes. The military played a large role in enforcing quarantines and assisting those who were not allowed to leave their homes.[14] For example, along with police and other members of the case management teams, they delivered food, water, and toiletries to quarantined homes, collected and transported testing samples, and delivered test results. Similarly, the RSLAF was involved in surveillance functions by providing security and facilitating the work of contact tracing teams.[15] The military also helped transport patients from their homes to treatment facilities.[16] One officer involved in NaCOVERC estimated that 90 percent of the government vehicles used to assist in the COVID-19 response were manned by military personnel.[17]

Soldiers were involved in the compliance enforcement mechanism system (CEMS), which involved teams that enforced preventative measures in public spaces such as insisting that the public wear face masks and adhere to other government-issued orders.[18] While sustained lockdowns and curfews were not the norm in Sierra Leone, they did occur and RSLAF was involved in their enforcement. This included specific protocols and operations under the code name Operation Snowball for lockdowns and Operation Mark Fish for curfews.[19] Finally, the armed forces played what could be considered more traditional military roles through the enforcement of national border control points. There was a concern that an increase in cross-border movement could lead to higher rates of COVID-19 in Sierra Leone, which led to the military deploying additional troops to 51 border chiefdoms including 144 border crossing points. During a period of restricted internal domestic movement, the armed forces also enforced inter-district movement restrictions.[20]

The RSLAF's international engagements and ongoing role at the frontlines of the COVID-19 response meant that military personnel were especially susceptible to the illness, particularly in the earliest phase. For example, some of the earliest cases of COVID-19 in Sierra Leone were military personnel who had been attending an intermediate staff course with international military personnel. Similarly, the first case reported in Koinadugu district was a soldier who had returned from deployment.[21]

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[14] Author interviews with NaCOVERC personnel in August 2020; also highlighted in Musa (2020).

[15] Author interview with RSLAF lieutenant colonel, August 19, 2020.

[16] Author interview with RSLAF lieutenant colonel, August 19, 2020.

[17] Author interview with RSLAF lieutenant colonel, August 19, 2020.

[18] Author interview with RSLAF lieutenant colonel, August 21, 2020.

[19] Author interview with RSLAF lieutenant colonel, March 3, 2022.

[20] Author interview with brigadier general August 18, 2020.

[21] Author interview with RSLAF lieutenant colonel, August 21, 2020.

Military leaders reported that the majority of military personnel who got COVID-19 recovered.[22]

3.3 Readiness and Effectiveness

The readiness of the RSLAF to respond to COVID-19 is closely linked to their experience with the Ebola response. Interviewees highlighted that much of the organizational command structure replicated similar structures established during Ebola and many of the tasks that soldiers were engaged in were similar. Yet they also pointed out that there were significant differences, areas they struggled with, and aspects of the response that were intentionally changed from the way they were done during Ebola. One of the differences between the two health response efforts that members of the RSLAF noted had to do with "the character of the disease."[23] Nearly all interviewees noted that there was a much higher degree of denialism about COVID-19 among the populations they engaged with due to the much less visible symptoms of the virus and its significantly lower mortality rate compared with Ebola. This made it harder to convince many people to adhere to the required precautionary measures and led to even more objections to quarantines than were seen during Ebola. A lieutenant colonel in a senior role in the COVID-19 response commented that there was a need to move away from the "usual militarized response" when engaging with individuals who may have COVID-19. He explained that "we now have a strategy of using psychosocial staff members that go around preparing the minds of positive cases for moving into the treatment centres rather than using a military approach."[24]

The readiness of the RSLAF may also have been related to past experiences with international peacekeeping, which placed them in roles that focused on civilians. The RSLAF was able to use its African Union Mission in Somalia (AMISOM) deployment experience and preparation in its Ebola response. In 2015 many of the same peacekeeping soldiers who returned from AMISOM were immediately deployed to the Ebola response efforts, specifically to be part of Operation Northern Push which occurred in the final phase of the epidemic (Dwyer and Gbla 2022). These individuals had important operational experience from the peacekeeping mission, and some had received specialized medical training as part of the deployment.[25] Additionally, the battalion that had been planned to replace the first AMISOM deployment was converted to an Ebola response battalion (Albrecht and Haenlein 2015, 32).

For the COVID-19 response, the RSLAF was likely able to continue to build on the skills it had learned from AMISOM, which were further expanded during Ebola. Additionally, during the COVID-19 response, the peacekeeping mission training

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[22] Author interview with brigadier general August 18, 2020.

[23] Author interview with RSLAF lieutenant colonel, August 21, 2020.

[24] Author interview with RSLAF lieutenant colonel, August 21, 2020.

[25] Author interviews with members of LEOBATT1, Sierra Leone's first peacekeeping battalion to the AMISOM mission, November 2016 and February 2020.

centre was repurposed and used as one of the community treatment centres for those with the infection.[26]

While Sierra Leone had a range of practical experiences upon which to draw in its response to COVID-19, resources were a concern. As one of the poorest countries in the world, Sierra Leone is highly dependent on foreign assistance. This also applies to the COVID-19 situation. The key international actors involved in supporting Sierra Leone's COVID-19 response include UNICEF, the European Union, the UK Foreign, Commonwealth, and Development Office (FCDO), the World Food Programme (WFP), the World Bank, the US Department of State, and the German Development Agency GIZ. While research has identified these as the major players, many other organizations and bilateral engagements have assisted Sierra Leone in its response (Grieco and Yusuf 2020, 5).

Financial constraints and its reliance on external assistance shaped Sierra Leone's COVID-19 response. For example, the country was unable to order longer periods of "lockdowns" as the government could not risk measures that would further undermine the livelihoods of a population very reliant on the informal economy. The president and some advising partners feared "strong restrictions on social and economic activity will plunge a large part of the population into further economic distress" (Grieco and Yusuf 2020, 7).

While much of the foreign assistance destined for Sierra Leone was not earmarked for the RSLAF, it likely benefitted from those donations due to its central role in the response efforts. For example, some of the donated equipment and supplies likely went to the armed forces in their response roles. Additionally, some international supplies were directly intended for the armed forces. For instance, the US provided personal protective equipment (PPE) and medical equipment specifically to the RSLAF (Sierra Leone Ministry of Defence 2020) (https://mod.gov.sl/usembassy donation.html) and the Chinese army donated 40,000 vaccines to the Sierra Leonean armed forces (Conteh 2021). Although foreign assistance was an important part of the COVID-19 response, interviewees noted that it was much more limited than during the Ebola crisis of 2014–2016 when there was a fear that Ebola could spread beyond West Africa.

However, the international community did provide significant assistance, including sending medical teams, advisors, and military personnel, building treatment facilities, donating a wide range of supplies, and providing direct financial support to ensure that local personnel were paid to assist in the response. But, as one senior officer at NaCOVERC explained, "most of the countries that were major funders of the Ebola response are now themselves victims of COVID-19, struggling to address the carnage in their backyards."[27] As a result, there was less international assistance and "the situation presents financial and logistical constraints regarding equipment and payment of response staff members."[28] For RSLAF members on the front lines of the response efforts the financial constraints, especially in the earliest

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[26] Author interview with RSLAF brigadier general, August 18, 2020.

[27] Author interview with RSLAF colonel, August 19, 2020.

[28] Author interview with RSLAF colonel, August 19, 2020.

phase, meant a shortage of protective gear and other logistical supplies. Senior officers noted their concern about increased COVID-19 risks for soldiers but also commented that their families were also placed at higher risk because of the shortages. As the above points show, Ebola was an important learning experience for COVID-19 but did not provide an exact template. Rather, the template required the RSLAF's significant and ongoing adaptation.

4 Civil-Military Relations

4.1 Securitization of the Pandemic

How the coordination efforts for the COVID-19 response quickly fell under the responsibility of the minister of defence highlights how a securitized response to crises in Sierra Leone has become the norm. During COVID-19 the military was not seen as a last resort but rather the first port of call. As explained above, this must be understood in light of the significant international assistance that the RSLAF has received post-war, its role in international civilian-focused missions, and its experience on the frontlines of Ebola. In this context, the government saw the military as one of the most experienced organizations it could call upon to be at the centre of the response to a national crisis. While the RSLAF's role can be justified, concerns have been raised that the continued reliance on the military in such health crises creates a "vicious cycle" that has limited the opportunities for other civilian-led public institutions, including the Ministry of Health and Sanitation, to build their capacities (Boland et al. 2023).

Leadership roles in NaCOVERC were moved away from the Ministry of Defence when it became clear that the COVID-19 pandemic was not as severe as the Ebola crisis. The RSLAF's role was to have a "lighter touch" than during the Ebola crisis and after the virus's initial phase was over, the MOD's role was minimized. There was limited public debate about the RSLAF's involvement in COVID-19 and this may relate to the soldiers' lower profile public role in this crisis compared to Ebola or the way military engagement in domestic crises has become routine in Sierra Leone.

4.2 Civilian Oversight and Accountability

In Sierra Leone there was some active resistance to government restrictions, particularly during the three-day lockdowns. One of the most significant incidents was a riot that broke out in April 2020 at the Pademba Road prison related to the prohibition of visits and food access due to COVID-19 preventative measures. Five inmates and two officers died in the riot and parts of the prison were burnt (Grieco and Yusuf 2020, 3). In another incident, a riot broke out near Tombo and the police

station was attacked when the government put restrictions on fishing boats over COVID-19 concerns (Kamara 2020). Yet overall, these were not widely destabilizing or indicative of sustained resistance to the government or security forces. This may be because the restrictions were less severe than in other countries that had longer lockdown periods. More common in Sierra Leone was non-compliance with measures out of necessity. For instance, some motorbike drivers continued to operate during the lockdowns and curfews to make their living (Jones 2022, 467–468). The lack of any significant resistance meant that the RSLAF did not bear the brunt of any wide-scale confrontations with the civilian population. There were a small number of reported cases of the RSLAF using heavy-handed tactics during their COVID-19 response efforts, including beating a journalist who was reporting on a COVID-19 facility (https://www.mfwa.org/journalist-beaten-by-soldiers-for-taking-pictures-of-covid-19-quarantine-facility/). It is unclear if any disciplinary actions were taken against those using heavy-handed approaches. Audit reports also criticized the RSLAF's inflated payments for COVID-19-related equipment, but they found similar issues across multiple government agencies involved in the response (Thomas 2020).

4.3   Public Image of the Military

As frequent public polling is limited in Sierra Leone, it is difficult to gauge how the civilian population perceived the military's role in the COVID response. However, as noted, the RSLAF has been involved in a range of domestic deployments over the last decade, which does not appear to have adversely affected the public's trust in the forces. On the contrary, it may have helped build trust. Afrobarometer conducts public surveys every few years in Sierra Leone, which helps track trends in public perceptions across time. Their findings show consistently high trust in the RSLAF, with the highest ratings reported in 2020. The percentage of people answering that they trust the RSLAF either "somewhat" or "a lot" was 64 percent in 2012, 57 percent in 2015, 72 percent in 2020, and 69 percent in 2022 (Afrobarometer 2015; Afrobarometer 2020; Afrobarometer 2022). There was a small dip in trust after COVID-19 but the rates of trust in the RSLAF remain high. To put this into perspective, the army is consistently one of the most trusted state institutions, scoring well above the courts, the police, the Parliament, local government, and the electoral commission; in most survey years, it scores higher than the president. This is a remarkable turnaround from the dismal reputation the military held before and during the civil war.

The latest Afrobarometer survey (2022) also asked participants their views on using the police and military to enforce COVID-19 measures. Seventy-two percent stated they "strongly agreed" or "agreed" with the approach (Afrobarometer 2022). It should be noted that participants were not in favour of other exceptional responses to health emergencies. For example, there was strong disapproval of censoring the media or postponing an election in response to the outbreak. For many in Sierra

Leone, to use the military in the response to the crisis was seen as appropriate, not as severe or exceptional.

5 Lessons Learnt

This chapter has demonstrated that the RSLAF's active role in the COVID-19 response efforts should be seen in relation to past milestones for the organization. Significant reform and associated training, deployment on peacekeeping missions, and its experience with Ebola have been crucial in ensuring the RSLAF's credibility and developing the skills it used during the COVID-19 response. The RSLAF's role in COVID-19 builds on what has become a clear pattern of regular military involvement in domestic crises. What is less clear is what this will mean for the future of the force and its place in the state. The unease that some have with the domestic involvement of the army in Sierra Leone relates to wider theories on civil-military relations that warn that "political armies" can result from over-involvement in domestic affairs. Militaries who are continually called in to respond to crises may become overly involved in political matters and/or view their civilian counterparts and other security agencies as incompetent (Koonings and Kruijt 2002). As Nina Wilén notes, because of the military's involvement in COVID-19, "the civil-military balance may become skewed, resulting in an emboldened and politicized military prone to intervene directly, or at least to use its new position to receive more resources" (Wilén 2021, 28).

A common response to concerns about politicized militaries has been to define their role narrowly, often limiting them to respond to external security threats (Cawthra and Luckham 2003, 322). This draws a clearer line between the work of the police and that of the military. In the case of Sierra Leone, the RSLAF maintains an external mandate but has been regularly needed to supplement the work of the police, which highlights the imbalance between the two security organizations. There is the threat that this pattern could further lower the morale of the police and increase rivalries between the police and military (Kamara 2019). There are also other more pragmatic concerns about the growing use of the armed forces in the "softer" side of security related to training and staffing (Mahé and Wilén 2021, 16). The RSLAF interviewees also highlighted this and argued that more training and exercises should be conducted to prepare the forces for these types of emergency scenarios, which increasingly involve a response from the military. Another suggestion was to recruit a reserve force that could provide such assistance.[29]

There are many paths armed forces can take and there are advantages and positive signs in the RSLAF's COVID-19 response efforts. The RSLAF has demonstrated its versatility and its ability to incorporate a diverse range of experiences in its responses to new challenges. The army's central role highlights the civilian leadership's trust

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[29] Author interview with RSLAF colonel, August 19, 2020.

in the organization and has furthered working relationships with civilian organizations. The army's role in the COVID-19 response may also provide the RSLAF with valuable experience working with civilian populations, which could be applied to other missions such as peacekeeping. There is still some uncertainty about how the RSLAF's efforts to respond to the COVID pandemic will shape its reputation with the wider Sierra Leonean population. While so far there does not appear to be a negative reaction to its involvement from the civilian population, this can change if the military engages in heavy-handed responses or if it becomes associated with unpopular government policies. Still, it is also possible that the military will be viewed even more favourably as a force interested in protecting the country in the face of a deadly pandemic.

Many of the questions raised by RSLAF's involvement in COVID-19 extend beyond one crisis and highlight ongoing civil-military challenges. Central to this is navigating the fine balance between building a strong and effective military and ensuring the organization remains apolitical. The problem and its answer partially lie outside the military as more effective health services, police, disaster relief, and other social services could limit the need for military involvement. Of course, these are financially significant and long-term goals. In the meantime, Sierra Leone will have to grapple with how much military involvement in domestic affairs is "too much."

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South Africa

Lindy Heinecken

Abstract   Following the end of Apartheid, the newly formed South African National Defence Force (SANDF) in 1994 explicitly shifted its primary role to external defence, withdrawing from internal security. However, since 2009, the SANDF has seen an increasing number of domestic deployments, including border control, crime prevention, and disaster relief. The COVID-19 pandemic marked a significant expansion of the SANDF's domestic role, with troops deployed to enforce lockdown regulations, provide health and humanitarian support, and assist with logistical needs. This extensive deployment, coupled with a consistently declining defence budget and pre-existing operational overstretch, raised serious concerns about the SANDF's capacity, readiness, and overall effectiveness. Furthermore, the "securitization" of the pandemic and reported instances of human rights abuses by soldiers severely impacted civil-military relations and the public's trust in the military, highlighting critical issues of civilian oversight and accountability.

1   Introduction

South Africa has a checkered and controversial history when it comes to domestic deployments of the armed forces. Shortly after the Union Defence Force was formed in 1912, the government used the military on numerous occasions to violently suppress industrial unrest, as well as Afrikaner uprisings against British rule (Van der Waag 2015). However, the most extensive domestic deployment came after the 1957 formation of the South African Defence Force (SADF) under Afrikaner National Party rule. Especially during the 1980s, the military was given extraordinary powers to counter Black resistance to the Apartheid regime. Those powers included "intimidation, targeted arrests, prolonged detentions, beatings, torture and assassination of political opponents" (Heinecken 2019, 14). A culture of impunity took hold which affected the legitimacy of the military and civil-military relations.

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With the demise of Apartheid and the end of the Cold War, the new ruling Black majority African National Congress (ANC) made a conscious political decision to demilitarize society and withdraw the defence force from internal domestic roles. With the shift to a new political regime and the formation of the South African National Defence Force (SANDF) in 1994, the tasks of the newly formed Defence Force were defined in the Constitution of the Republic of South Africa, 1996, 200 (2) as "to defend and protect the Republic, its territorial integrity and its people under the Constitution and the principles of international law regulating the use of force" (RSA 1996). The White Paper on Defence (1996) made it clear that the primary role of the SANDF is to defend the country from external aggression and it would be for this purpose that it would be funded, structured, trained and equipped (Heinecken 2019).

The SANDF is an all-volunteer force consisting of approximately 72,000 active duty personnel and 15,000 reserve personnel; in 2022 it was ranked 26th in global military strength (BusinessTech 2022a). The defence force consists of four branches of service. The South African army is by far the largest component of the SANDF and consists of roughly 40,100 regular uniformed personnel, augmented by 12,300 reserve force personnel. The air force has around 9600 personnel, the navy 6500 personnel, and the South African military health service around 7300. The remainder are in other staff posts (DOD 2021,130). It is important to note that, unlike some other countries, South Africa does not have a home guard or any kind of constabulary force. However, the private security sector is one of the largest in the world; those working in the sector far outnumber those serving in both the police force and the military combined (BusinessTech 2022b). However, due to both political and financial considerations, the SANDF cannot make extensive use of private military companies to augment their capacity (Heinecken 2019, 39).

Since 2003, the SANDF has deployed extensively in peace support operations, most notably in Burundi, the Democratic Republic of Congo and Darfur/Sudan, and increasingly since 2019 in domestic operations, most notably in border control and to support the South African police service (SAPS) (Heinecken 2019). More recently, the SANDF was deployed to Mozambique to counter the violent jihadist insurgency in Cabo Delgado (Gerber 2022). All these external and internal deployments have led to a mismatch between means and ends, given the commitments to protect the border, domestic security deployments, and African peace operations (Esterhuyse 2019). To balance resources and fulfil domestic obligations, the South African government reduced the number of troops deployed internationally from an average of 3000 earlier in the decade to 1300 in 2018 (Mandrup 2019). Although it is considered the regional military hegemon, the reality is that the SANDF cannot deploy a credible military on external missions while security conditions within the country are deteriorating (Heinecken 2019). The deployment of the SANDF to help combat the spread of the coronavirus came at a time when the forces were already being severely overstretched.

After the first positive case of COVID-19 was identified in South Africa on March 5, 2020, President Cyril Ramaphosa declared the COVID-19 pandemic a national

state of disaster on March 15, 2020, and instituted measures to constrain the further spread of the virus. One of those measures was Ramaphosa's announcement that the SANDF would be immediately employed to enforce the national lockdown regulations in support of the police and to give their support to other government departments including the Department of Health. Several governance structures were put in place to manage the spread of the disease, including an inter-ministerial committee on COVID-19, an emergency operations centre, and a national coronavirus command council (Sekyere et al. 2020, 1). Based on their recommendations, the government mandated level-5 lockdown measures until April 30, 2020, which restricted the movement of all people except for essential services. Everyone was required to stay home, a strict social distancing policy was enforced, and all religious gatherings, schooling, and other socio-cultural functions were suspended. Even the sale of alcohol and cigarettes was banned. Starting in May the lockdown regulations were eased to level 4, and from June 1, 2020, to level 3, whereafter the regulations were adjusted according to the severity of the spread of the virus (WHO 2021).

Against this background, this chapter sketches the nature, challenges, and concerns arising from the ever-expanding domestic deployments of the SANDF and, more specifically, the nationwide lockdown imposed during the pandemic. The chapter aims to show that the extensive deployment in domestic roles raises several questions about the operational capacity, preparedness, and readiness of the military, which in turn affects its functioning, status, and legitimacy.

2 Domestic Operations

2.1 Constitutional and Legislative Framework

The Constitution of the Republic of South Africa, 1996, section 202 (2) states that the defence force must defend and protect the republic, defend and protect its territorial integrity, and defend and protect its people. Section 201 (2) stipulates that subject to parliamentary oversight, the president may deploy the military, in cooperation with the police, in the defence of the republic and the fulfilment of an international obligation (RSA 1996, 21). When it comes to the employment of the SANDF under section 201 (2), the Defence Act, 42 of 2002, the minister of defence and military veterans have the right to deploy the military domestically and in international waters to preserve life, health, or property in an emergency or humanitarian relief operations; ensure the provision of essential services; support any department of state including support for purposes of socio-economic upliftment; and effect national border control.

The SANDF's support to the police includes conducting search and seizures, setting up roadblocks and checkpoints, controlling borders, and traffic control; using force; and controlling and dispersing gatherings (ACJR 2020). However, SANDF officials cannot investigate crimes though they can arrest or detain any person or seize

any article or object before handing them over to the South African police service (ACJR 2020). The Disaster Management Act (DMA), no 57 of 2002 also regulates the deployment of the SANDF. During a state of disaster, the powers conferred by the DMA are to assist and protect the public, provide relief to the public, protect property, prevent or combat disruptions, and deal with the destructive and other effects of the disaster. Under the DMA, the minister of cooperative governance and traditional affairs can authorize the release of available national government resources to render emergency services. The SANDF was deployed under these regulations to mitigate the effect of the COVID-19 pandemic. However, any deployment is subject to civil oversight and approval.

In this regard, sections 201 (3) and 201 (4) of the Constitution state that when the SANDF is deployed in terms of section 201 (2) of the Constitution, the president must inform Parliament promptly of the reasons, place, number of people involved, and expected period of deployment, as well as the expenditure (RSA 1996, 21). The president and minister of defence must give notice of such employment in the government gazette within 24 hours (Bester et al. 2020, 112). If Parliament does not sit during the first seven days after the defence force is employed as envisaged in subsection (2), the president must provide the information required in subsection (3) to the appropriate oversight committee (RSA 1996, 21). As reflected in Janse van Rensburg, Vrey, and Neethling (2020), there have been some serious violations of these provisions, especially under the Zuma regime, which has raised questions about the effectiveness of these oversight mechanisms and executive overreach. However, these committees have become more vigilant with the increase in the deployment of the military in domestic roles.

2.2 Deployment in Domestic Roles

While initially there was resistance to deploying the military in domestic roles, this changed in approximately 2009 amidst a growing need to boost law enforcement as the country became politically increasingly unstable (Esterhuyse 2019, 3). Both politicians and the military did this with some reluctance as the SANDF is neither structured, funded, nor trained for these domestic internal roles (Heinecken 2021). In this regard, the SANDF faces "critical trade-offs in decisions about the distribution of its resources, sustaining current internal and external deployments, command and control structures, facilities, and key personnel and equipment deficiencies" (Esterhuyse 2019, 3). The nature of these domestic deployments is extensive and includes safeguarding the border, participating in safety and security operations, offering disaster relief and assistance, and working on general crime prevention.

One of the SANDF's ongoing domestic operations is Operation Corona, which safeguards the country's inland borders which it executes as part of its mandate to defend South Africa's territorial integrity. Border control was assigned to the police in 2003, but with the sharp increase in crime and violence in the country and the extra burden this placed on the police, this task was reassigned to the military in

2009—though it received no extra budget to perform this task. The objectives of Op Corona are to prevent the illegal cross-border movements of people, contraband, livestock, weapons, drugs, and vehicles and to create a deterrence to any possible threat of foreign aggression (Sangweni 2021). Due to corruption and lax border control measures, these activities are difficult to control. Approximately 15 companies of soldiers are deployed on the borders, far short of the 22 required (Heinecken 2019).

Safety and security operations fall under an operation codenamed Prosper. In this operation, the military deploys in cooperation with the police to support and assist in maintaining law and order, as well as to ensure the safety and security of citizens. To cite some examples, in 2019, the military was deployed to maintain law and order on the Cape Flats to address the rampant violence, crime, and gangsterism in the Western Cape (Heinecken 2019). By far the most significant domestic deployment as part of Op Prosper was the more recent deployment of some 21,525 members in July 2021 to combat widespread violence and looting in the provinces of KwaZulu-Natal and Gauteng (Defence Web 2021b). The "insurrection" was sparked by the incarceration of former president Jacob Zuma for corruption. This was "a deliberate, coordinated and well-planned attack, intended to cripple the economy, cause social instability and severely weaken or even dislodge the democratic state" (Erasmus 2022). No sooner was this dealt with than the SANDF was commissioned to support the police for five days from October 30 to November 3, 2021, to provide a safe and secure environment for the 2021 local government elections (PMG 2021b).

Another role the SANDF fulfils in cooperation with the police involves general crime prevention. In 2015, the South African police service launched Operation Fiela, a multidisciplinary interdepartmental operation aimed at eliminating criminality and lawlessness. Initially, this operation was in response to xenophobic attacks on foreigners but expanded into a crime-fighting effort (Nicolson 2020). The objective of Op Fiela is to prevent and combat crime and other activities that threaten the safety of citizens. Included are tasks such as confiscating counterfeit goods, dismantling illegal power connections, and responding to human trafficking, illegal firearms, drug dealing, liquor-related offences, and other illegal activities. Other domestic deployments include engaging in anti-poaching activities, both in the country's national parks and in the fisheries where abalone and lobster poaching are a problem (Bailie 2022).

As with most other militaries, the SANDF provides support for disaster relief and assistance under Operation Chariot. Examples include support for the Department of Health when the health system is under strain, and to other departments in response to natural disasters such as fires and floods; SANDF personnel are deployed for firefighting, flood relief, cleaning up rivers and sewerage stations, and building bridges. With the recent destructive floods in the province of KwaZulu-Natal in April 2022, the army placed 10,000 personnel on readiness to help erect field accommodation and provide clean water; it deployed a platoon of electricians and plumbers to restore damaged infrastructure. In addition, the air force provided air capabilities to help with search and rescue, extraction, reconnaissance, and transport of humanitarian relief equipment and goods. The South African military health services (SAMHS) provided health support in the disaster area (Defence Web 2022a).

Over and above this, the SANDF is involved in search and rescue operations under the codename Operation Arabella (maritime and aeronautical search and rescue). Under the National Disaster Management Act, all valid requests for a search and rescue service and response where human life is at stake must be provided immediately for the first 72 hours. Such requests can be received from government departments, agencies, institutions, foreign vessels or aircraft, as well as private emergency response companies and private persons. However, South Africa has been criticized for violating international aeronautical and maritime search-and-rescue (SAR) responsibilities, given that they have not been able to maintain its critical defence equipment for life-saving deep-sea operations.

The extensive deployment of the SANDF in both external and internal roles has led to operational overstretch, extending the capacity of the military to breaking point (Esterhuyse 2019). Over the years, the defence budget has consistently declined and the SANDF's extensive deployment has meant that personnel do not have the necessary training, equipment or support for these roles (Bailie 2022). With a defence budget of less than 1 per cent of GDP, the SANDF has not been able to provide the required personnel to safeguard the border, establish a cyber warfare capacity, modernize or maintain mission equipment, and address the deterioration of facilities; instead, it has needed to reduce training and recruitment intakes and cannot maintain set stock levels (Defence Web 2022b). Under these constraints and realities, the entire SANDF was placed on standby during the COVID-19 pandemic in 2020.

3 Military Deployment During COVID-19

3.1 Coordination of the COVID-19 Response

In South Africa, the Department of Health coordinated the national response to the COVID-19 pandemic, which in turn engaged the Cabinet's National Command Council (CNCC) to make decisions and coordinate the management of interventions by various institutions and individuals. A National Joint Operation Centre was established under the CNCC, which were comprised of three work streams: health, safety and security, and economic. Within these, various national and provincial incident management teams (IMT's) were created, which enabled a swift and coordinated response to the pandemic. Through these structures, the president set in motion varied processes to implement an integrated and coordinated disaster mechanism to prevent and reduce the outbreak of the virus throughout the country. Included in this response was the deployment of the military in various roles.

The president announced the deployment of the SANDF in Operation Notlela on March 23, 2020, to mitigate the spread of the COVID-19 pandemic from March 23, 2020, to June 26, 2020 (initially) across the country's nine provinces; he later extended this to September 30, 2020 (Defence Web 2020a; SANDF 2020). This deployment was authorized under the DMA section 27, sub-section 2 (a,b) where the

SANDF was tasked to assist the government in rendering emergency services and to assist and protect the public from the disruptive effects of the COVID-19 disaster. As the SANDF had previously deployed in numerous domestic roles together with other state departments, including the Department of Health, this coordination proceeded without too much difficulty.

3.2   Roles of the Military

Although the presidential order put the entire defence force on high readiness, this was a practical decision to avoid having to obtain approval for adjusted force levels (PMG 2020a). In terms of law enforcement, most of the soldiers deployed were from the South African Army Infantry Foundation with about 33 infantry companies deployed at the height of the COVID-19 lockdown levels 5 and 4 (Defence Web 2020b). Initially, only 2820 soldiers were authorized for deployment, but as the severity of the pandemic increased, the entire SANDF, which included both regular and reserve forces, were placed on standby to assist in the fight against COVID-19. The Joint Standing Committee on Defence approved this deployment, but in actuality, no more than 8000 members were deployed in Ops Notlela; the numbers varied according to the roles they performed (Africa Check 2021).

Initially, their task was to work with the police to ensure compliance with lockdown regulations put in place to limit the spread of COVID-19. These regulations included roadblocks and vehicle control checkpoints on all national routes and major routes that had to be monitored and controlled. Personnel also had to ensure that people adhered to the regulations by conducting foot patrols and vehicle patrols in quarantine areas, shebeens, taxi ranks, beaches, shopping malls, etc. (van Rensburg et al. 2022). In addition to the law enforcement support provided to the SAPS, the SANDF's COVID-19 deployment included health, humanitarian, and logistic support to various other government departments. The first operation involved the repatriation of South African citizens from Wuhan province in China in March 2020 in cooperation with the Department of Health and the Department of International Relations and Cooperation, which repatriated approximately 151 citizens.

In terms of health and humanitarian support, the SANDF assisted several provincial departments of health in various capacities, including decontamination, distribution of food parcels, health screening, and COVID-19 awareness education. Furthermore, the South African Military Health Services helped establish ICU/hi-care facilities and administrative support, capturing data on medical records at 15 overburdened hospitals across the Gauteng and Eastern Cape provinces (van Rensburg et al. 2022). The medical task groups deployed typically consisted of doctors, nurses, and clinical associates (approximately 55 members), who stepped in to provide relief to hospitals under severe strain during the peak of the pandemic (Nkosi 2020, 12).

The SANDF further supported the general operations of hospitals, notably the Charlotte Maxeke Academic Hospital in Johannesburg, with personnel serving as

temperature scanning orderlies, drivers, porters, financial and human resource administration, and safety and security. For this, 39 primary health care teams comprising 185 members (36 doctors, 84 nurses, and 65 auxiliary staff (PMG 2020b) were deployed. Beyond this, the SANDF provided logistical support that included the deployment of 180 SANDF engineers to support the Department of Water and Sanitation in providing water purification and distributing drinkable water to areas where there was a water shortage (PMG 2020a). For example, a total of 16,407,000 L of water were purified, with over 15,058,500 L delivered to communities without access to water (SANDF 2021).

While the main burden fell on the army and military health services, members of the navy and air force contributed to these missions, too. For example, the air force provided just about all of its serviceable aircraft to transport personnel, personal protective equipment (PPE), ventilators, and other medical supplies throughout the country (Makubela 2020a). Beyond this, some air force bases were set up as quarantine sites. These sites included a housing section, medical support component, ablution, and scullery and washing facilities. Setting this up was straightforward as the air force deploys with such facilities and has the technical and logistical support to manage the system (Makubela 2020b, 18; SANDF 2021). The SANDF assisted the government with the vaccine roll-out, mainly to bolster security measures in 2021.

3.3   Readiness and Effectiveness

While the SANDF has been able to perform the various tasks assigned to it, it came at a time when the SANDF was under severe strain from its commitments to protect the border and its involvement in other internal security deployments (such as fighting gangsterism on the Cape Flats) and deployments on African peace missions. For many years, there have been warnings that the increase in domestic deployments is unsustainable (Bailie 2022). The 2015 Defence Review stated that:

> The Defence Force is in a critical state of decline, characterised by force imbalance between capabilities, block obsolescence and unaffordability of many of its operating systems, a disproportional tooth-to-tail ratio [i.e., the ratio of combat soldiers to support personnel], the inability to meet current standing defence commitments and the lack of critical mobility. The current balance of expenditure between personnel, operating and capital is both severely disjointed and institutionally crippling." (DOD 2015,vii).

The question was raised whether the SANDF had the capacity to respond to the call for support during the COVID-19 pandemic (Bester et. Al 2020, 123; Heinecken 2020). The rapid deployment of the SANDF raised concerns that there was not enough time for proper planning and preparation, which affected the training and mission readiness of soldiers (Burger 2020). Despite these concerns, the chief of the army was quoted as saying that SANDF was able to generate sufficient numbers of fully trained, multi-purpose, combat-ready forces to meet South Africa's defence and security objectives (DefenceWeb 2021a; Defence Web 2021b).

How effective they were is difficult to determine except to say that within their capacity restraints, they did what they could with limited resources and under difficult circumstances. In terms of its readiness for other operations, the SANDF continued its training courses at the different military bases, albeit at reduced levels, which raised concerns about its preparations for future operations and its ability to fulfil its constitutional mandate (Defence Web 2022b). Another impact on readiness was the suspension of all recruitment drives during COVID-19, which affected SANDF's ability to rejuvenate its ageing force (Gibson 2022). However, by far the greatest damage of the COVID-19 deployment was to the SANDF's public image, which relates to its military culture and the professional conduct of soldiers (Struwig et al. 2022). This was no doubt influenced by the securitization and militarization of the pandemic.

4 Civil-Military Relations

4.1 Securitization of the Pandemic

When the president announced the deployment of the military to help in the COVID relief efforts, he appeared on national television as commander in chief, in full military regalia, announcing that he was deploying the military to fight the "invisible enemy." At the same time, the acting chief of the army ordered the army to change its footing from "peacetime" to "wartime" status—which is the justification for not only channelling resources to the military to deal with the enemy but also creating the notion of combat-ready forces, well prepared for war. When deployed in a coercive role to enforce compliance and obedience, and when their political masters shape their role as dealing with an enemy, one can expect military personnel, trained for war and the use of violence, to act in a certain way (du Toit et al. 2020; Esterhuyse 2019).

South Africa has a long history of brutality and human rights abuses enacted by security forces that stems from the Apartheid era, which is still fresh in the minds of many (Ramushu 2020). Even today, the organizational culture of the police and army is based on humiliation, aggression, and abuse. During COVID-19, the United Nations (UN) human rights office criticised South Africa for its "heavy-handed" and "highly militarised" approach, especially during the early phase of the lockdown (Karrim 2020). This approach involved human rights abuses including shootings, baton and gun beatings, tear-gassing, humiliation, abusive language, water bombing, invasion of private backyards, and murder cases (McCandless et al. 2020). Especially in the black townships, soldiers were seen using "corrective punishment" on civilians by making them do push-ups and frog-jumps for failing to adhere to lock-down regulations (Cilliers 2020). The tipping point came with the death of Collins Khosa on April 10, 2020, who died from blunt force trauma to the head after

being assaulted and tortured by members of the SANDF and a local municipal law enforcement agency (De Vos 2020).

4.2   Civilian Oversight and Accountability

In South Africa, there are two defence parliamentary portfolio committees, the Joint Standing Committee on Defence and the Portfolio Committee on Defence and Military Veterans (PCDMV), that perform various oversight roles and are important platforms through which political parties and the public can raise issues (Van Rensburg et al. 2020). However, when Ops Notlela commenced neither of the houses of Parliament was sitting due to the lockdown restrictions. Instead, the president sent an official letter to the Joint Standing Committee on Defence on March 25, 2020, detailing the reasons for the deployment, the number of troops involved, the period involved, and the expected expenditure (Bester et al. 2020, 114). While procedurally correct, the official letter was heavily criticized by opposition parties and NGOs who claimed that it effectively handed decision-making power to the executive, reducing the legislature's oversight function. Concerns were raised that this undermined participatory decision-making about the use of the military and the expectations of the security sector, and so constituted executive overreach (van Rensburg et al. 2022).

After this, the number of oversight meetings increased to deal with the flood of complaints stemming from the employment of the military (van Rensburg et al. 2022). The military's conduct affects the trust and legitimacy of the SANDF, so during these meetings, the minister of defence and military veterans came out strongly against the heavy-handedness of soldiers and went as far as to say that soldiers should refrain from using any kind of force, even when provoked. Similarly, the president instructed the military to be supportive of the people and to treat citizens with kindness "even to the point where they may want to give you roses" (Madia 2020). One of the reasons cited for the "misconduct" of some of the soldiers was the absence of a "mission-specific" code of conduct.

Section 19 (c) (i) of the Defence Act states that when the SANDF is deployed in service in cooperation with the police there must be a code of conduct and the minister must approve operational procedures. According to De Vos (2020), this was not in place and was considered a failure by military leadership. The courts subsequently ordered that the Department of Defence institute mechanisms to ensure that the human rights of citizens are respected; that all military members act under the Constitution and the law; that they use minimum force; that established mechanisms be in place for civilians to report allegations of inhumane treatment and to ensure that alleged incidents are investigated and reports submitted to the court within three weeks. Subsequently, a code of conduct was issued. It provided guidelines outlining how soldiers were to deal with public looting or public disturbances, alcohol abuse and consumption, and provocations, insults and disrespectful behaviour. The guidelines also outlined how the military was to behave when engaging with public roadblocks, during armed robberies, and in cases of protection in cash-in-transit.

South Africa's citizens were made aware of the mechanism of the military ombud to report instances of misconduct or cruel treatment. The mandate of the ombudsman as outlined in the Military Ombud Act 4 of 2012 is to investigate complaints lodged by either a member of the public regarding the official conduct of an SANDF member or a serving member of the SANDF (ACJR 2020). As of May 27, 2021, the office of the military ombud had received a total of 56 complaints from members of the public about the misconduct of members of the SANDF, of which 39 had been finalized and the findings made public (SABCNews 2021). That was the highest number of official conduct complaints received since the office of the military ombudsman was established in 2012. Most of the complaints pertained to the deployment of soldiers to enforce COVID-19 lockdown rules (PMG 2021a).

4.3 Public Image of the Military

Before the COVID-19 deployment, most South Africans were relatively proud of the SANDF and there was a high level of support and trust in the military's abilities. A survey conducted among citizens in 2020 showed a relatively high level of trust in the SANDF (18% strongly trust and 46% trust), but declined post-COVID-19 to 16% strongly trust to 40% trust). The Human Sciences Research Council (HSRD) stated that "the COVID-19 pandemic and specifically the role played by the SANDF during the pandemic impacted the perceptions of the SANDF in terms of its fairness, successfulness, professionalism and discipline" (Struwig et al. 2022, 12) (Fig. 1).

These findings correlate with media reports that indicate that there is now a "distrust between the citizens of South Africa and the government, and more specifically the SANDF" (Bester et al. 2020, 120). For many living in poor communities, the deployment of the military during COVID-19 was the first time they came into direct contact with the military. The military, therefore, played "an outsized role"
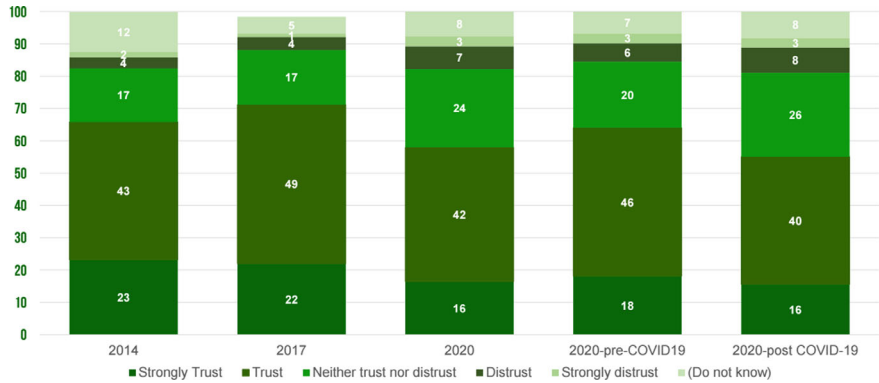

Fig. 1 Trust in the SANDF, 2014–2020. *Source* Struwig et al. 2022, 50

in determining citizens' trust in government during the pandemic (GGA 2020, 1). This affected the willingness of the public to cooperate and adhere to the lockdown (Struwig et al. 2020).

Besides this, the SANDF was subject to public scrutiny over its misuse of state funds to purchase the Cuban drug Heberon Alfa-R to boost the immune system of soldiers. The drug, estimated to cost the state R260 million, was neither registered nor approved for use in South Africa. And when it was transported and brought into the country, it was not kept at the required temperature, leading to over 40 per cent of the doses having to be discarded. The SANDF tried to justify the purchase of the drug on the basis that soldiers needed protection because they were to be involved in "biological warfare" (Bramdeo 2021). The wasteful expenditure and associated claims of corruption associated with the purchase of this and other drugs added to public misgivings about the SANDF (Wa Afrika 2021). This again indicates the importance of civil oversight as a deterrent to slippage and the problems that can arise when these mechanisms are incapacitated.

5   Lessons Learnt

Given South Africa's political volatility, which was exacerbated by the COVID-19 pandemic, the deployment of the SANDF in domestic roles was inevitable. However, as this chapter has explained, there is a growing mismatch between SANDF's responsibilities and its declining capabilities, which highlights "the need for institutional and organizational reforms to facilitate the growing demand to upscale law enforcement in the domestic security domain" (Esterhuyse 2019, 5). The deployment of the SANDF in the COVID-19 crisis, recent violent unrest, and the need to respond to natural disasters all highlight the need to revisit how the military's critical capabilities should be resourced so it can rapidly and effectively respond to crises. Added to this, the SANDF needs to revise the design and structure of the forces so it is more in line with the actual roles and functions it is being asked to play. If it does not, it could face further decline (Heinecken 2020).

Beyond this, the COVID-19 deployment highlighted how an adversarial mindset on the part of soldiers can have adverse consequences for the armed forces, especially when the soldiers are interacting with the civilian population. As seen in the South African case, the failure to ensure that military personnel behave in a disciplined and professional manner harms the legitimacy of the military and undermines the population's trust in it—and ultimately in the government. As Bailie (2021) highlights, "SANDF leaders and personnel more broadly failed to exercise due diligence and military professionalism during the pandemic in as far as submission to parliamentary oversight (democratic control), respecting human rights, exercising accountability, human resource management and transparent communication were concerned." This affected the image, legitimacy, and support of the military.

The challenge the SANDF now faces, with the increase in domestic deployments, is how to balance its various roles to make it "fit for purpose" under current budgetary constraints (Heinecken 2020; Gibson 2022). Esterhuyse (2019, 12) rightly

asks "which 'enemy' or 'destabilising entity' will inform their future internal deployment doctrine." What the COVID-19 experience demonstrates, is how easily the military can be mobilized and that if sufficient checks and balances are not in place, that this can lead to abuse by both the principal (state) and agent (military) in terms of the protection of civilians and their human rights.

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Civil-Military Relations in Zimbabwe: COVID- 19 Response

Godfrey Maringira

Abstract The Zimbabwe Defence Forces (ZDF) have a pervasive history of domestic deployments marked by violence against civilians, a pattern that continued during the COVID-19 pandemic. Despite constitutional provisions mandating civilian oversight and professionalism, the ZDF remains partisan and serves the ruling ZANU-PF's political agenda. The ZDF has deployed both coercive and peaceful approaches in dealing with the civilian population. During the 2020 COVID-19 lockdown, the military's deployment, though presented as a public health measure, enabled intensified control and brutality. Soldiers enforced restrictions through checkpoints and patrols, resulting in numerous accusations of excessive force, abuse, and even killings of civilians for minor infractions. While the ZDF also undertook non-coercive roles like distributing supplies and providing medical support, the predominant image was one of intimidation. This militarized approach deepened public mistrust, highlighting the critical need for strengthened civilian oversight and accountability to prevent the military's continued weaponization against its own citizens and restore legitimate civil-military relations.

1 Introduction

In post-independence Zimbabwe, internal deployments of the Zimbabwe Defence Forces (ZDF) have been characterized by violence against civilians. The military's deployment during COVID-19 was no different; in fact, it perpetuated the military culture of violence. The ZDF consists of the Zimbabwe National Army (ZNA) and the Zimbabwe Air Force (AFZ). The ZDF's central function, at least on paper, is to defend the country's national security, interests, territorial integrity, people, independence, and state sovereignty. Section 211 (3) of the Constitution of Zimbabwe stipulates how the military is to function in a democratic society; specifically, it is to respect fundamental rights, recognize the freedom of all people, be non-partisan,

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show professionalism, and importantly the military, subordinate itself to civilian authority. However, in actuality, the Defence Force remains partisan.

At the country's independence in 1980, the ZNA membership was drawn from three former belligerent and competing armies: the Rhodesian army and two guerrilla armies. One guerrilla army was the Zimbabwe National Liberation Army (ZANLA). The second was the armed wing of the Zimbabwe African Patriotic Union–Patriotic Front (ZANU-PF), led by Robert Mugabe, and the Zimbabwe Peoples' Revolutionary Army (ZIPRA), an armed wing of the Zimbabwe African Patriotic Union (ZAPU) led by Joshua Nkomo. President Mugabe assigned Lieutenant General George Peter Walls of the Rhodesian army to supervise the integration of the various armed forces into a professional army, though he did not serve for long. He was assisted in the process by the British military advisory and training team (BMATT), which helped ensure the standardization of military training programs. Thus, in the early 1980s the Zimbabwe army was regularized with standardized principles, policies, organization, uniforms, training, etc. through the advice, supervision, and involvement of BMATT (see Alao 1995; Tendi 2013). While the Ministry of Defence does not make the exact number of personnel public, it is estimated that numbers range between 20,000 to 25,000 military personnel, with the majority drawn from the Zimbabwe National Army (Griffiths 2014).

While the military is structured as a professional force (Sarkesian and Conor 2006; Kohn 1997, 2009) the challenge in Zimbabwe is how the military operates in practice and how the army functions in everyday life. Until the BMATT departed in 2001, the Zimbabwe national army was still professional, though it did have some political challenges, especially following the disturbances and the Matabeleland massacres of the early 1980s under *Gukurahundi*[1] (see Young 1997). In the late 1980s, the Zimbabwe national army recruited the first cohort of soldiers who had not participated in the liberation war (Young 1997). The reasons for that recruitment were twofold: first, to support an aging group of liberation veteran soldiers who had served in the liberation army, and second, so they could be deployed for combat fighting in armed conflicts in Mozambique and the war in the Democratic Republic of Congo (DRC). Once the soldiers were withdrawn from the DRC war, the Zimbabwe army became deeply involved in different internal deployments, including, in particular, the COVID-19 deployments.

On March 21, 2020, Zimbabwe's health minister announced the country's first recorded COVID-19 case from someone who had travelled from the UK. The president announced the first 21-day national lockdown on March 30, 2020, which suspended all non-essential activities, and called for people to stay home. Statutory Instrument 83 of 2020 on Public Health (COVID-19 Prevention, Containment,

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[1] *Gukurahundi* literally translates as the first storm of the rainy season that washes away the chaff. In this context, *Gukurahundi* was a massacre of civilians that took place in the early 1980s immediately after Zimbabwe's independence. A North Korean-trained brigade, the 5th Brigade, perpetrated the violence. That brigage was dominated by the Zimbabwe African National Liberation Army (ZANLA), an armed wing of President Robert Mugabe's party, ZANU-PF. The purpose of the brigade was to unleash violence against Matabeleland, the Ndebele-dominated region. Estimates are that more than 20,000 people died during the massacre (CCJPZ 1997).

and Treatment) (National Lockdown) Order, 2020 (Zimbabwe Public Health Act 2020) provided the details that guided the lockdown, including restrictions on the movement of people. On April 4, 2020, the military was deployed to enforce the national total lockdown to combat the spread of the virus (Maulani et al. 2020). While the exact number of soldiers deployed to enforce the COVID-19 rules is not known, analysts assume that at least a battalion of soldiers was deployed in each of the country's 10 provinces. Only active soldiers were deployed during the pandemic, not the reserve forces. These military personnel were deployed on the streets, main highways, and roadblocks, and they patrolled high-density suburbs at night to ensure public compliance with the lockdown measures. The military's deployment was characterized by violence against ordinary citizens (Maulani et al. 2020). However, critically, the pandemic provided an opportunity for the ruling political party, ZANU-PF, to legitimize and intensify the deployment of the military in the streets under the guise of enforcing lockdown rules.

The COVID-19 rules, which were developed to contain and slow the spread of COVID-19, were difficult to transfer easily and apply to Africa. While they were intended to be preventive, such approaches are elitist and may require a rethink of the contexts in which they are applied. In a situation where poverty is pervasive, people face a huge dilemma: they can either stay home and starve, or go out and work (often in the informal sector) and then risk being infected. The government perceived such risk-taking behaviour as "defiance" of its lockdown rules.

2 Domestic Operations

2.1 Constitutional and Legislative Framework

Zimbabwe's government oversees the deployment of the military, as well as its operations and command. Section 212 of the new Constitution of Zimbabwe, 2013, governs the operations of the country's defence forces. Section 213 (1) (a)(b) of the Constitution of Zimbabwe states that only the president, as commander-in-chief of the defence forces, has the power (a) to authorize the deployment of the defence forces or (b) the power to determine the operational use of the defence forces. Thus, as the commander-in-chief, the president has authority over domestic and even foreign deployment of the defence forces. In addition, section 213 (a-c) defines the conditions under which the military may be deployed in Zimbabwe, again, under the authority of the president.

The defence forces may only be deployed in Zimbabwe (a) in defence of Zimbabwe, (b) in support of the police service in the maintenance of public order, or (c) in support of the police service and other civilian authorities in the event of an emergency or disaster. The president is responsible for informing Parliament of the reasons for the deployment without delay. Section 214 (a)(i) states that when the defence forces are deployed in Zimbabwe to help maintain public order, the president

must inform Parliament promptly and in appropriate detail of the reasons for their deployment and when they are deployed within Zimbabwe, the place where they are deployed. However, in Zimbabwe, the deployment of the military is deeply political, and while civil oversight exists in theory, it does not happen in practice. While the Constitution is explicit about how the military should operate, ZANU-PF continues to abuse the military by insisting that it serve ZANU-PF and save the government from electoral defeat by engaging in political violence during and after elections.

2.2 Deployment in Domestic Roles

It is important to note that before the COVID-19 military deployment, Zimbabwe's military was deployed internally largely to deal with opposition political party supporters (Chaumba et al. 2003; Maringira 2021). When Zimbabwe's military engages in either internal or external operations, its military practices are secretive and the numbers deployed are unknown. While the military has been heavily involved in other civic duties such as flood rescue and food relief programs as part of the civic protection unit, the same military tends to perpetuate the challenges that already exist for civilians (see Nyahunda et al. 2022).

There is political history around the internal deployment of the military in Zimbabwe (Maringira 2024; Alexander 1998). It is important to note that military internal deployment in Zimbabwe has always been characterized by violence against civilians. The military has not changed in how it perceives Zimbabwean civilians, especially those who are viewed as sympathetic to the opposition political parties. Thus the history of military violence in Zimbabwe testifies that military internal deployment during COVID-19 perpetuated violence against civilians as it has been the case in the past. Military internal deployment and its violence against civilians dates back to the early 1980s in Zimbabwe. For example, in 1983, immediately after independence, the military was deployed in Matabeleland and Midlands province to perpetrate violence against an ethnic group of the Ndebele people which opposed ZANU-PF and President Robert Mugabe regime. Rumour had it that there were dissidents in those areas who wanted to topple President Robert Mugabe's government (Alexander 1998). This gave the government the political justification it needed to kill the Ndebele people. The operation was called *Gukurahundi,* which means the first rain that washes away the chaff. The military saw itself as the rains and the Ndebele people as the chaff: an estimated 20,000 civilians were killed (CCJPZ 1997).

In the year 2000, the military was internally deployed during the land reform program in which white farmers were forcibly driven off their farms. During the deployment, the military worked alongside war veterans of the liberation struggle and ZANU-PF youth to perpetrate political violence against white farmers. Scholars described the situation as a multiple crisis (Hammar and Raftopoulos 2003) exacerbated by internal state-sponsored political violence. This violence became known as *jambanja*, which refers to an uprising, chaos, disorder, and a general loss of political morality as brutality grew against opposition party supporters (Chaumba et al.

2003). Muzondidya (2009) notes that ZANU-PF deployed the military to shore up support during elections and marshaled the army to ensure electoral obedience.[2] The military was politically deployed to threaten and commit violence against civilians (specifically members of the opposition political party) and perceived enemies of the state, including white farmers (Sachikonye 2011; Ranger 2004; Maringira 2016). This created acrimony and a social distance between soldiers and a large part of the civilian population. Like ZANU-PF, all soldiers were viewed as oppressors due to the violence the military committed during these internal domestic deployments. The Zimbabwean army remained politicized in the post-2000 crisis; the army publicly supported President Robert Mugabe's efforts to stay in power (Ndlovu-Gatsheni 2009).

For the first time in Zimbabwe's post-independence history, the military internally deployed and staged a coup on November 17, 2017. It is critical to discuss the coup and why it happened (see Tendi 2020). The military named it Operation Restore Legacy. The international community, including the African Union, legitimized the coup in and beyond Zimbabwe. Many believed that the coup was not an effort to overthrow President Mugabe, but rather a military intervention aimed at restoring political order (Maringira 2017). This was evident in the aftermath of the June 2018 national elections. On August 1, 2018, the military was deployed to respond to street protests which demanded the Zimbabwe Electoral Commission to announce the delayed Presidential election results (Maringira 2021). Protesters believed the opposition political party led by Nelson Chamisa had won the election (Maringira and Gukurume 2022). In response to the protests, six civilian people were shot dead in the streets of Harare city (Motlanthe Commission 2018).

A commission of inquiry was set up to investigate the circumstances which led to the post-election deployment of soldiers in the streets and the ultimate death of six civilians. Through section 2 (1) of the Commissions of Inquiry Act [chapter 10:07], Proclamation Number 6 of 2018, published in Statutory Instrument 181 of 2018, with defined specific Terms of Reference, the president appointed the former president of South Africa, Kgalema Mothlanthe to lead the commission of inquiry. The main political opposition leaders were invited to testify before the Motlanthe commission, as were the defence forces commander, General Valerio Sibanda, and the presidential brigade commander, Major General Sanyatwe. They testified about the deployment of the soldiers and how they shot civilians dead. The commission found that the deployed soldiers had used "disproportionate and unjustified" force, including the use of live ammunition in responding to protests (Motlanthe Commission 2018).

Drawing from the above evidence on the domestic deployment of the military, it is evident that the military is deployed to serve the interests of the ruling party in a way that includes attacking and berating the opposition political parties. The deployments are not meant to protect the civilians, but to serve military interests and

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[2] The Zimbabwe African National Union (Patriotic Front) was the first political party to rule Zimbabwe after independence in 1980. It is still the country's ruling party, but since February 2008 after a controversial and contested presidential election, the party has become part of a unity government with the opposition Movement for Democratic Change (MDC) led by Morgan Tsvangirai.

ZANU-PF political elites by consolidating their political power. During the COVID-19 lockdowns, the military continued to work to thwart imagined and real political threats.

On the other hand, the military is also deployed to help in the economic development of the country, including distributing agricultural inputs. This has helped people in rural areas and has assisted mostly underdeveloped communities grow their subsistence farming and sustainability (Nkomo and Mangiza 2021). In times of drought, the military has been deployed to help distribute maize to support poor families.

The deployment of the military on Zimbabwe's borders is not a new phenomenon. This form of deployment has colonial legacies, in which borders were safeguarded against any form of counterinsurgency. Such forms of deployment continued during and following COVID and to the present day. The only difference is that during COVID-19, the military helped the police to ensure that people were not illegally crossing the borders without government permits. Thus, during COVID-19, the military increased its activity to help the government control the spread of the coronavirus across borders by limiting the movement of people from other countries.

3 Military Deployment During COVID-19

3.1 Coordination of the COVID-19 Response

The Zimbabwean military was involved in the coordination of the COVID-19 response at various levels. The military established joint operations centers with civilian authorities to coordinate the overall response effort. These centers were responsible for planning, implementing, and monitoring various aspects of the response, such as the distribution of supplies, the enforcement of restrictions, and the management of healthcare facilities. In addition, the military deployed task forces to specific areas to support local authorities in their response efforts (ADBG 2023; Mahomva 2020). These task forces often included medical personnel, engineers, and logistics experts who could assist with various jobs including setting up isolation facilities, providing medical care, and distributing supplies.

Besides this, the military shared information and intelligence with civilian authorities to help them make informed decisions about the response effort. This included data on the spread of the virus, the availability of resources, and potential threats to public health. The military was also involved in communications and public relations, helping to disseminate to the public information about the pandemic and the government's response. While the military's involvement in the coordination of the COVID-19 response was generally positive, it did face challenges and criticisms. Some observers argued that the military's involvement could undermine the role of civilian authorities in managing public health crises. Additionally, there were concerns about the potential for tensions and disagreements between the military

and civilian agencies. Despite these challenges, the Zimbabwean military played a significant role in coordinating the COVID-19 response, contributing to efforts to contain the virus and protect public health.

3.2   Roles of the Military

As noted, the Zimbabwean military played a significant role in the country's response to the COVID-19 pandemic. Its most prominent and controversial role was to enforce lockdown measures, curfews, and other restrictions aimed at limiting the spread of the virus. To do this it set up checkpoints, and patrols, and closed non-essential businesses. Its role was coercive; it worked with the police to staff roadblocks and patrol the streets. In executing their duties, soldiers were accused of using excessive force and abuse of power (Moyo and Phulu 2021). When people defied government orders on COVID-19 rules, the military was brutal in its enforcement of the lockdown. While the idea of enforcing lockdown rules was a way to control the spread of covid-19, the military intimidated people and used violence to enforce the rules (Ndoma 2020). Soldiers are alleged to have tortured ordinary citizens for minor transgressions in the name of enforcing COVID-19 guidelines. Between March and September 2020, plainclothes soldiers and police "systematically used clubs to beat civilians" in the central business district and suburbs for violating curfews, failing to wear masks, or not maintaining social distancing (Nkomo and Mangiza 2021).

Less controversial, but still not without their challenges, were other non-coercive roles the military performed in response to the pandemic. For instance, it helped distribute essential supplies, such as food, medical equipment, and personal protective equipment (PPE), to vulnerable communities. It also provided health-related support, which included the construction of temporary isolation facilities to accommodate COVID-19 patients and prevent the spread of the virus within the community. The military set up temporary healthcare facilities in tents, staffed by military personnel, to ensure medical and psychological support for both patients and their families affected by COVID-19. In addition, the military supported the Ministry of Health by deploying military nurses, troop medics, and military medical doctors in every district around the country to provide medical relief (Ndoma 2020). The military also set up emergency centers for COVID-19 patients in all the major districts and national hospitals. In addition, it participated in public health campaigns to raise awareness about COVID-19, promote hygiene practices, and encourage vaccination.

In response to the planned civil unrest protests during COVID-19, the military increased the visibility of its deployment on the streets; it barricaded all roads leading to the capital city, Harare (Mutsaka 2020). Civilians were torn between adhering to COVID-19 rules and protesting against a political crisis. Those who had instigated the protests were arrested, detained, and imprisoned for an extended period without trial, while the military badly beat others. Human rights lawyers filed a court application against those actions. The high court of Zimbabwe judges heard their complaint

and ruled that soldiers must desist from beating up civilians when enforcing lockdown rules (Ndebele 2020). To date, there have been no reports that soldiers who perpetrated violence against civilians during COVID-19, or who acted with impunity, have been convicted or punished.

In September 2020, it was alleged that a civilian in Chivhu, a small farming town, shot and killed a soldier and wounded another while they were enforcing COVID-19 lockdown rules (Karombo 2020). The soldiers responded by hunting down the two suspects, killing them, and parading them in the street (Dube 2020). The killing of the suspected civilian assailants was legitimized and celebrated by the government spokesperson, Nick Mangwana, on his Twitter account. In his statement, he said that.

> ZNA's Lorance Mupanganyama was murdered in cold blood while Peter Zvirevo sustained serious injuries in a Chivhu attack. Just like when Lee Rigby was killed in a similar attack in Britain or when Michael Zehaf-Bibeau attacked servicemen in Canada, we stand with our soldiers. (Nick Mangwana, government spokesperson)

That legitimization indicates that soldiers not only had the right to kill but that such killing was celebrated as an acceptable way to respond to violence directed at the military. It reveals how not just the military, but more importantly the state, views the use of violence. Zimbabwe's military has a culture of violence and seems to believe that using violence to intimidate and threaten civilians will resolve any socio-economic and political challenges the country might be facing. Added to this, mistrust of the military deepened when it was revealed that government ministers were implicated in widespread corruption and theft of COVID-19 funds earmarked for citizens (BBC 2020). Some of the allegations of corruption and theft included the involvement of the health minister in a US$60 million scandal over COVID-19 personal protective equipment (PPE). Eventually, Minister of Health Obadiah Moyo was arrested and dismissed from his job because of his alleged scandalous involvement in the scheme (Cassim 2020). Civil society and the opposition political party led by Nelson Chamisa threatened the government with street protests to register their disapproval of the corrupt government ministers. However, the protests could not happen as the military was heavily deployed in all urban streets of Zimbabwe.

3.3 Readiness and Effectiveness

While the military provided some health personnel for Zimbabwean districts and provincial hospitals, overall it maintained a combative approach towards civilians. The military was not well prepared to control people in a way that enhanced civilian security and safety. The Zimbabwean military's preparedness to deal with the COVID-19 outbreak was mixed. While it has experience in disaster response and has been involved in various domestic operations, its readiness for a specific pandemic of this scale was subject to scrutiny.

The military was successful in enforcing lockdown measures and curfews that helped to limit the spread of the virus, but in doing so, it was accused of human

rights abuses and excessive force. Similarly, the military's involvement in distributing essential supplies was generally positive because it helped reach vulnerable communities, but it faced challenges in ensuring equitable distribution of certain items and in addressing shortages. Further, the high level of militarization in society led to problems as the military tried to coordinate activities with civilian health authorities, which created tensions and disagreements between the two sectors.

4 Civil-Military Relations

4.1 Securitization of the Pandemic

Zimbabwe's government presented COVID-19 as a national security threat that required a military response (Maulani et al. 2020). By presenting COVID-19 that way, the government could justify deploying the military—and with it, the brutality of the military's approach against civilians. On state television senior army officials buttressed the president's assertion that COVID-19 was an enemy. Even though civilians felt they could contribute to the balance between care and surveillance, the military believed that it alone bore responsibility for guarding the purity of the country in the name of national security. However, the military's continued presence in the streets blurred the line between the secure and the insecure. The military's deployment represented the "spectre of surveillance," packaged under the facade of care—a spectre that continues to hang heavy over public streets and private homes (Couch et al. 2020). COVID-19 widened, solidified, and fortified the existing boundaries between the military and Zimbabwe's citizens. In the absence of domestic military deployments, does the state trust its citizens to keep each other safe? The military in Zimbabwe has become the "pure eyes" of the state (Toyoda et al. 2020). The military's violence continued remorselessly during the COVID-19 pandemic (Nkomo and Mangiza 2021). The trajectory of civil-military relations during COVID-19 and its aftermath leads to a question: how do we bridge a distance that so many are unwilling to close?

4.2 Civilian Oversight and Accountability

Section 213 (1) (a)(b) of the Constitution of Zimbabwe gives the president the authority to deploy the defence forces; Section 213 (c) outlines the conditions for such deployment in Zimbabwe, including the support of the police service, when emergency or disaster arises. However, the president is obliged to inform Parliament of the reasons for such deployment. Interestingly, in Zimbabwe the president does not always adhere to this requirement; soldiers continue to patrol streets without Parliament being debriefed on their presence. While a parliamentary portfolio committee

on defence and security does exist, it does not have the power to determine the deployments or conduct of the defence forces. Neither was there any military accountability for the violence that soldiers perpetrated against unarmed civilians because the military is an extended armed appendage of the ZANU-PF political party (Maringira 2019; Moyo and Phulu 2021; Marawako and Mupasu, 2022). Civil society and the media reported that the military was deployed to perpetrate violence, but the Ministry of Defence provided no response to those concerns.

4.3   Public Image of the Military

While the 2020 "Afrobarometer" suggests that the Zimbabwean public viewed the military's deployment in domestic operations positively, Nkomo and Mangiza (2021, p. 136) argue that during COVID-19, as the internal deployment of the military intensified so did violence against unarmed citizens—essentially a "war against civilians" (see also Amnesty International 2020). Thus the deployment of the military during COVID-19 did not change how civilians interact with the army. COVID-19 provided a political space, in which the military took the opportunity to reconsolidate political power and control. Because of the military's past actions, civilians never supported the deployment of soldiers to enforce lockdown rules. Several civil society organizations and the opposition political party criticized the government for deploying soldiers to enforce lockdown rules in an economy that was already under severe strain and where most people depended on the informal economy. Military legitimacy remained an issue throughout the pandemic, as the military continued to pounce on civilians in the name of enforcing COVID-19 rules.

5   Lessons Learnt

The deployment of Zimbabwe's military during the COVID-19 pandemic offers valuable insights into domestic deployment, especially during times of crisis. When deploying the military, respect for human rights and the rule of law should remain. Respect for human rights will strengthen the relationship between the military and civilians. To improve trust, the state and the military must communicate to ensure that the public is well aware of the purpose of the deployment, especially during crises like the COVID-19 pandemic. Such communication not only helps ensure public trust, but also wards off any social and political anxiety about military patrols in the streets. Any such deployment should be subject to parliamentary oversight so that the military can be held accountable for its actions. The problem comes when there is an over-reliance on the military to respond to crises, a situation that allows them to act with impunity.

Unlike many other countries, there is no balance between the "principal" and the use of the military as an "agent." In Zimbabwe, the civilian government (principal)

has historically been the primary authority overseeing the military (agent). The relationship has been characterized by alternating periods of tension and cooperation, and the military has been accused of interfering in Zimbabwean politics on several occasions. Although the government has employed various mechanisms to monitor and oversee the military, including appointments, promotions, and the allocation of resources, oversight is weak and there is little counter-balance in the form of civil society acting as a watchdog.

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Namibia

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Abstract The Namibia Defence Force (NDF), formed in 1990 from a merger of former adversaries, is mandated to defend national interests and assist civilian authorities in emergencies. With a personnel strength of 13,000 across its army, air force, and navy, the NDF has previously been deployed for counter-insurgency, border control, and disaster relief. The COVID-19 pandemic prompted a significant, protracted nationwide deployment of approximately 2000 NDF members (15% of its strength) to support the Ministry of Health and Social Services and the Namibian Police Force. Code-named Operations Hornkrantz, Kalahari Desert, and Namib Desert, the NDF's involvement spanned enforcing lockdowns, managing mobile hospitals, and distributing essential supplies. While praised for its efficiency and coordination with civilian agencies, this extensive deployment, the longest in NDF history, strained financial resources and disrupted training. Moreover, the securitization of the pandemic and reported instances of NDF members using excessive force and human rights abuses eroded civil-military relations. Despite constitutional provisions for civilian oversight, challenges in accountability and a backlog of investigations persist, highlighting the complexities of military involvement in public health crises and its impact on public trust.

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1   Introduction

Established on September 3, 1990, following the independence of Namibia from South Africa, the Namibia Defence Force (NDF) is a relatively new defence force and is the product of the merger of the People's Liberation Army of Namibia (PLAN)—the armed wing of the South West African People's Organization (SWAPO)—and the South West African Territorial Force (SWATF), which was the defence force of South Africa's colonial administration. However, it derives its existence from the Defence Act of 1957 (Act No. 44 of 1957), which was repealed by the Defence Act of 2002 (Act No. 1 of 2002). The NDF has a personnel strength of about 13,000, consisting of the Namibian army, air force and navy. It is a regular volunteer force with the mandate to defend the territory and national interest of Namibia. Despite the repeal of the Defence Act of 1957, the functions assigned to the three arms of service remained unchanged. Chapter VI of the Defence Act of 2002 mandates the Namibian army to defend the sovereignty and territorial integrity of the Namibian state through the prevention or suppression of terrorist activities, suppression of internal disorder or public disturbances, preservation of life, health, and property, and maintenance of essential services.

Other functions of the NDF include safeguarding Namibian borders, transportation, evacuation of persons during emergencies, and other functions that may be assigned to it by the president of the Republic of Namibia. These functions may include being used in police roles as provided in Section 13 of the Police Act of 1990 (Act No. 19 of 1990) as amended (Republic of Namibia 1990b). In performing assigned non-military services, the three arms of service have different yet coordinated roles. The Namibian Air Force (NAF), for example, provides critical support to the Namibian army and the navy during operations. The NAF carries out roles such as surveillance, transportation of supplies and equipment, and training of personnel. The NAF is also mandated to provide support to communities such as airlifting victims out of danger in the event of human or natural disasters. The Namibian navy provides maritime protection, safeguards the country's rich marine resources, and carries out surveillance of a coastline of about 1500 km. The three service branches efficiently coordinate their roles towards achieving the overall goal of protecting and defending Namibia against domestic insurrection and attack by foreign adversaries during war and peacetime. This coordination was demonstrated during the NDF's deployment to combat the COVID-19 pandemic. The NDF deployed 2000 of its members to assist in the fight against the virus. For a military force of about 13,000 men and women, that number accounted for 15% of the NDF's personnel size.

The first confirmed case of COVID-19 in Namibia was reported on March 13, 2020 and came from travellers entering the country. Based on confirmed cases, the Ministry of Health and Social Services (MoHSS) officially declared COVID-19 a pandemic in Namibia on March 14, 2020 (United Nations Namibia 2020). The pandemic prompted the government to declare a state of emergency on March 17, 2020, based on the provisions of Article 26(1) of the Namibian Constitution, read together with Section 30(3) of the Disaster Risk Management Act, 2012 (Act No.

10 of 2012). The virus quickly spread in the country. Within a space of three months (March–June) the number of confirmed cases had risen to 539 with the Khomas and Erongo regions being the most affected. The prevalence rate of infections prompted the speedy implementation of crucial public health and safety measures. Among these were a ban on international travel and mass gatherings, mandatory quarantine for those who had come into contact with confirmed cases, and isolation for those who had tested positive for the virus.

Namibia enforced a Stage 1 Lockdown in Khomas and Erongo regions from May 5 to June 1, 2020; then a Stage 2 Lockdown from June 8 to June 22, 2020. However, rapid increases in the number of cases placed pressure on quarantine and isolation facilities and hospitals. The increase in COVID-19-related deaths prompted a nationwide lockdown between June 29 and September 17, 2020, with the closing of non-essential services and tightening of immigration control. The magnitude of the emergency that the COVID-19 pandemic created led to the shutdown of some land borders to minimize cross-border infections, and the closure of schools, universities, and some categories of businesses. The pandemic resulted in a serious crisis in the Namibian health sector. Hospitals were overwhelmed by the number of infected patients who required treatment amid limited rooms, beds, and medical personnel in hospitals across the country. There was also a lack of drivers to transport health essentials where they were required. The situation called for the deployment of the military to support the MoHSS and the Namibian police force (NAMPOL) in implementing lockdown measures and providing necessary medical assistance. The deployment of the NDF on March 17, 2020, was necessitated by the lack of adequate NAMPOL personnel to effectively enforce lockdown measures, maintain law and order, and prevent or limit the spread of the virus.

2 Domestic Operations

2.1 *Constitutional and Legislative Framework*

Deployment of the Namibian military in war and peace times is constitutionally guaranteed.

Chapter 5, Article 27(1) and (2) of the Namibian Constitution provides that the Namibian president is both head of state and government as well as command-in-chief of the NDF (Republic of Namibia 1990a). Consequently, the deployment of the NDF in domestic and international operations is based on the constitutional powers of the commander-in-chief complemented by General Regulations 200 and 201 following Section 5(2) of the Defence Act of 2002 (Ministry of Defence 2011, 30).

Domestic deployment of the NDF falls into two main categories—primary and secondary roles. The primary or traditional role refers to deployment in defence of the country against external military aggression and domestic armed insurrection. The secondary role, outlined in Chap. 15, Article 118 of the Namibian Constitution,

includes assisting civilian authorities in domestic support operations when required, as well as undertaking the Southern African Development Community (SADC), African Union (AU) and United Nations (UN) peace support missions. According to the Defence Act of 2002 (Act No. 1 of 2002) the NDF can also be deployed in domestic roles as provided for under Section 27 and Section 5 (2) of the Defence Act. Furthermore, Section 200 of the Defence Act of 2002 provides for members of the NDF to participate in police operations aimed at the preservation of internal security, maintenance of law and order, and prevention of crime. Nevertheless, operational orders are guided not only by relevant sections of the Defence Act but also by memoranda of understanding (MOUs) which outline the guidelines or rules of engagement for these operations. These roles are further explained and elaborated on in the Defence Policy of 2011. Among other things, the Defence Policy provides that "the secondary role of the Defence Force includes assisting civil power and local authorities in domestic support operations when required." The formal processes within the NDF to guarantee the systematic and efficient use of resources are termed the "war campaign and planning for joint operations."

Any deployment of the military is subject to civilian oversight. Civilian oversight of the NDF entails parliamentary approval of the defence budget as well as a review of the decision to deploy the NDF to critical operations. As Negonga (2003) notes, the minister of defence is responsible for the Namibian government's defence functions and is accountable to the president, the Cabinet and Parliament in the management and execution of these functions.

2.2   Deployment in Domestic Roles

Within this framework, the NDF has served in many domestic roles. For example, NDF members were deployed to suppress an insurgency in the Caprivi region on August 2, 1999, by the Caprivi Liberation Army, which remains one of the most dangerous existential threats to the Namibian state due to its military nature. In this operation, the NDF was tasked with capturing the rebel fighters and their leaders and suspected civilian sympathizers. Similarly, the NDF was also deployed to fight rebels from the National Union for the Total Independence of Angola (UNITA) who were crossing Namibia's border with Angola to attack Namibian citizens in the Kavango region between 1999 and 2002. The mission was specific: to pursue and capture UNITA bandits along the Namibian-Angolan border and thereby prevent further cross-border attacks and the killing of Namibian citizens.

Besides its domestic deployment to combat military threats, the NDF has also deployed internally to combat non-military threats. For example, the services and capability of the NDF were required on several occasions to search for and rescue victims of floods in the country. In this regard, members of the NDF were deployed to the Oshana area and Kunene region on February 22 and 23, 2006, to respond to flood emergencies stemming from heavy rainfalls in the central regions of Namibia. The NDF helped airlift necessities and evacuate flood victims in the two regions.

The NDF also provided temporary shelters for flood victims. The flood adversely affected 14,000 people. Reports showed that 2100 people (330 households) were displaced from their homes, and 122 residential houses and about 80 business premises were submerged. Furthermore, the flood destroyed water and sanitation systems and around 30 irrigation schemes; about 300 households required shelter, protection from mosquito bites, and good drinking water as drinking water sources had been contaminated and stagnant water was ever-present (IFRCRCS 2006).

In 2016 the NDF was also deployed in a secondary role on June 24 following the declaration of a state of emergency due to severe droughts. The severity of the situation could be measured by the fact that the lives of more than 300,000 people, or 12% of Namibia's population, were at risk of food insecurity due to a 48% drop in crop production. Moreover, the country's main water reservoirs were almost empty, which resulted in the increased death of livestock and loss of crops. The economy was severely affected when multinational companies such as Coca-Cola, Meatco, and others suspended operations in Namibia, leading to the loss of jobs in different sectors of the economy. Furthermore, water consumption restrictions, especially for industrial use, forced many small- and medium-sized enterprises (SMEs) out of business, while others were forced to drastically reduce their operations (van Rensburg and Tortajada 2021).

Again, on May 6, 2019, drought forced the Namibian government to declare another state of emergency. According to the presidency, "the State of Emergency exists on account of the natural disaster of drought in all regions of the Republic of Namibia" (Shaban 2019). The drought affected an estimated 556,000 people (22.24% of the Namibian population) across different regions. As a result, various government offices, ministries, agencies and other stakeholders were mobilized to ensure that affected communities received necessary assistance. The NDF was one of the stakeholders mobilized; about 5–15% of the personnel strength of the NDF was deployed to transport and distribute food to severely affected communities.

The NDF's deployment to COVID-19 operations was a continuation of other domestic operations. Code-named Operation Hornkrantz, Operation Kalahari Desert, and Operation Namib Desert, these operations were launched in December 2018, May 2019, and March 2020 respectively. These operations involved members of the NDF, NAMPOL, the correctional services, and city police with the primary objective of combating criminal activities in Windhoek and other major Namibian cities. According to NAMPOL, these operations resulted in the arrest of 1996 suspects for murder, attempted murder, rape, housebreaking and theft, assaults and gender-based violence (GBV), drug trafficking, and illegal possession of wild animal products. Furthermore, NAMPOL reported that joint operations with the NDF led to the confiscation of around 1711 dangerous weapons such as knives, screwdrivers, pangas, and spears; about 4454 summonses were issued and 284 livestock were recovered (Amakali 2019). Illicit drugs such as cannabis, mandrax, and cocaine confiscated during these operations had a combined street value of about N\$683,072 (about US\$38,000) (Amakali 2019). Table 1 summarizes the domestic operations deployment of the NDF.

Table 1 Deployment to domestic operations, 1999–2020

Region	Operation code	Mission specific	Duration	Resource strength
Zambezi	Ops Clandestine	Repel the attack by the secessionists of the Caprivi Liberation Army rebel fighters and round up suspected civilian sympathizers	August 2–30, 1999	Full combat status
Kavango region	Ops Mandume ya Ndemufayo	Urgently pursue UNITA bandits along Angola-Namibia border	2001–2002	Full combat status
Hardap	Aid to civil power	Evacuating flood victims in Mariental areas	February 28–March 3, 2006	Two sorties per day
Oshana and Kunene	Aid to civil power	Airlifting basic necessities and evacuating flood victims in the two regions	February 1–10, 2008	One sortie per day
Zambezi and Kavango	Aid to civil power	Fighting African migratory locust in the two regions	September 11–25, 2020	One sortie per day and by vehicle
Erongo and Khomas	Ops Hornkrantz	Crime prevention and law and order maintenance in the two regions	December 2018–May 2019	Vehicle and foot patrol
All 14 Regions	Ops Kalahari Desert	Crime prevention and enforce COVID-19 compliance in all 14 regions	July 2019–February 2020	Vehicle and foot patrols
All 14 Regions	Ops Namib Desert	Crime prevention and enforce COVID-19 compliance in all 14 regions	March 2020–March 2021	Vehicle and foot patrols

Source Authors' compilation

Table 1 summarizes the major domestic operations in which the NDF were deployed in support of civilian authorities. The operations were varied and to a large extent demonstrate the capability that exists in the NDF. The NDF is also relatively well resourced—certainly better than other agencies in terms of state funding, availability of equipment, and combat expertise. As a result, the state relies on the NDF to help combat crime in cases where the police appear overwhelmed and unable to curb the criminal activities carried out by more sophisticated crime syndicates. These operations also involve the NDF because they fall within the sphere of its secondary constitutional mandate—to support civil power and local authorities whenever and wherever required in Namibia's national interest (Ministry of Defence 2011).

Although some NDF members dislike the idea of frequent domestic deployment because it leads to operational overstretch and is believed to undermine military professionalism, this is not openly discussed as it would negate military discipline and the oath of office. Like other militaries in the world, NDF members are trained to

take orders from superiors on behalf of the commander-in-chief of the armed forces. Therefore, personal feelings, emotions, or opinions do not affect assigned tasks. Moreover, whenever members of the NDF are deployed to domestic operations, the government gives its full support, which is essential for ensuring that the operations are successful.

3 Military Deployment During COVID-19

The declaration of the COVID-19 outbreak in Namibia in March 2020 did not take the Namibian government by surprise as it was an inevitable outcome of the virus's global prevalence; it was just a matter of time before the virus hit Namibia. This realization, coupled with the experience of countries in Europe, North America, and Asia, as well as adherence to experts' knowledge and advice sufficiently prepared the Namibian government to respond to the outbreak quickly and effectively.

3.1 Coordination of the COVID-19 Response

First, the government initiated a national health emergency coordination committee under the leadership of the MoHSS. Second, it introduced an incident management system (IMS) and made efforts to improve the capacity of the National Public Health Emergency Operation Centre (NPHEOC). These structures were under the leadership of the MoHSS. The MoHSS took the initiative to bring together and coordinate the efforts of different stakeholders in the country to manage the outbreak and prevent further spread of the virus. The World Health Organization (WHO) described the Namibian response under the leadership of the MoHSS as a "multi-sectoral National Response Plan for COVID-19." The inclusive, all-hands-on-deck approach to the fight involved both public and private institutions in what was described as the "whole-of-government, whole-of-society" response strategy. This strategy is composed of many mutually reinforcing technical pillars. The main pillars were country coordination and planning, risk communication and community engagement, surveillance, case investigation, and rapid response. Other pillars included points of entry; national laboratory, infection prevention and control; case management, operations, logistics, and procurement; mental health and psychosocial support, security, and provision of essential services (WHO 2020). The interventions developed within these pillars were coordinated, communicated, and channelled toward preventing, limiting, and effectively managing the outbreak (WHO 2020).

3.2   Roles of the Military

The NDF played various roles during the COVID-19 deployment. Along with other uniformed forces such as NAMPOL and the Namibian correctional services (NCS), the NDF's role was located within critical pillars of the response strategy like points of entry, logistics and procurement, security and provision of essential services, infection prevention and control, as well as case management. First, through the ministry of defence and veteran affairs (MoDVA) the NDF participated in the design and implementation of a virtual training program to prepare frontline workers so they could respond appropriately to the pandemic outbreak in collaboration with the WHO and other Namibian and international institutions such as the MoHSS, the office of the prime minister (OPM), and the centre for disease control (CDC). Other institutions included the United Nations Population Fund (UNFPA), the United Nations International Children Education Fund (UNICEF), the United Nations Development Programme (UNDP), the University of Namibia, the Namibia Institute of Pathology, the Namibia Statistics Agency, the ministry of agriculture, water and land reform, the city of Windhoek, and the Namibia Airports Company (WHO 2020).

The NDF deployed about 2000 of its members to assist civilian authorities. Included in this number were health professionals, logistics experts, drivers, engineers, and other professionals who worked closely with the MoHSS and the National Health Emergency Management Committee. Specifically, NDF health professionals erected and managed a military mobile hospital at the Hosea Kutako International Airport as an isolation facility. A similar facility was also set up in Walvis Bay, which became the epicentre of the COVID-19 pandemic in Namibia and required extraordinary measures (Hartman 2020). Initially, the mobile field hospital could accommodate 18 patients and was mainly used to treat asymptomatic patients. However, the increased rate of infection forced the NDF to increase the size of the facility from an 18- to a 32-bed capacity to meet the growing demand for the hospitalization of infected persons. Although this facility was handed over to the Erongo region's emergency response team, it was staffed by five military health professionals. Besides the mobile field hospital, the NDF also managed 700 patients in isolation wards at Henties Bay (Hartman 2020). The NDF was assigned the task of setting up and managing mobile field hospitals and isolation wards because the Defence Health Services Directorate (DHSD), which provides medical services, training, and placement of all medical staff within the NDF, has the necessary infrastructure, funding, and medical expertise and resources to carry out these roles. Specifically, the MoHSS and the National Health Emergency Management Committee valued the directorate's experience in disease prevention, management, and control. As one example of its experience, the DHSD had earlier played a significant role in preventing, managing, and controlling HIV/AIDS prevalence in the NDF.

Furthermore, as the number of infections, hospitalizations, and deaths began to rise in the country, the NDF's assistance was requested. The NDF assigned its members to the MoHSS to be trained as undertakers. Additionally, the NDF deployed troops to assist the NAMPOL in operating checkpoints and enforcing lockdown regulations

throughout the country such as curfews and the sale of liquor. The NDF assisted the police in enforcing emergency regulations because doing so falls within its constitutional mandate. The Defence Act provides for the NDF to assist civil authorities in times of emergency.

Thus, with the outbreak of the COVID-19 pandemic, the NDF put a reasonable number of its members and resources at the disposal of the state. Deployment was done on a rotational basis, however, specifically to ensure that at least 30% of NDF members remained on military bases. This extensive deployment underlined the severity of the COVID-19 situation in Namibia. The NDF's professionals such as doctors, nurses, lawyers, engineers, intelligence and operations officers, as well as combat troops, were deployed to assist in various capacities. Infantry units in Windhoek and Walvis Bay, the air force in Karibib, and the navy in Walvis Bay deployed members at various points to help in the fight against the virus. The army infantry and artillery units were deployed to assist NAMPOL and the MoHSS in enforcing lockdown regulations. Further, NDF members worked alongside NAMPOL, city police, Namibia's central intelligence agency, and correctional services members (security clusters) in the Joint Operations Center (JOC) where they shared intelligence relating to COVID-19 and the national security of Namibia. Military assets such as mobile field hospitals, defence force ambulances, personal protective equipment (PPE), patrol vehicles, helicopters, transport trucks, communication equipment, and other forms of technology were deployed and placed at the services of the state during the pandemic.

From the foregoing, it can be seen that the NDF's COVID-19 deployment was unusual for several reasons. First, unlike previous domestic deployments in response to natural disasters or domestic insurrection, COVID-19 required a large percentage of NDF's human and material resources. Second, it required more personnel and material resources than had been needed in previous domestic deployments because the operation was nationwide, unlike deployments that targeted specific towns or regions. Third, it was by far the longest domestic deployment in NDF's history. It began on March 17, 2020, and ended on December 31, 2020, covering the first and second waves of the pandemic (Amakali 2019). While the military has been praised for the level of efficiency it exhibited in responding to the pandemic, it was not prepared for that degree of deployment or involvement. It succeeded in its mission in part due to loyalty, perseverance, patriotism, the willpower of its members, the contribution of resources from different stakeholders within the country, as well as support from international partners.

3.3   Readiness and Effectiveness

The combat readiness of the NDF is founded, sustained, and assessed by regular recruitment, suitable, uninterrupted, and standardized training, regular and systematic military exercises, strategic simulations, acquisition of modern equipment and weaponry, appropriate funding, high morale, and willpower. Military activities—for

example, training exercises and simulations—are carried out in groups or involve large gatherings of military personnel and equipment. The discouragement of mass gatherings meant that the NDF could not conduct regular recruitment drives over the 2020/2021 financial year even though a number of NDF members were retiring. Furthermore, the outbreak of COVID-19 led to the suspension of planned military training, group exercises, and simulations. NDF members' annual leave was also suspended because many soldiers were deployed to support the COVID-19 response effort. Notwithstanding those facts, the NDF remained committed to fulfilling its peace support operations in Africa. For example, the Namibian government gave N$5.8 m to the Southern African Development Community to fight a jihadist insurgency in northern Mozambique and also sent staff officers and military observers to the UN missions in Darfur, South Sudan, and Ivory Coast.

Besides the impact of COVID-19 on military training, exercises, and simulations, NDF's COVID-19 deployment had a serious impact on its financial resources and management. The COVID-19 outbreak happened just when the Namibian economy was contracting instead of growing. The pandemic further hurt the economy as business activities became paralyzed. Yet the military needed the resources to procure sufficient sanitation and personal protective equipment (PPE) for deployed soldiers to protect them from getting infected. Thus, the NDF's financial resources were exhausted by unbudgeted extra expenditures and added responsibilities.

4 Civil-Military Relations

4.1 Securitization of the Pandemic

President Hage Geingob framed the pandemic outbreak as an existential threat to the Namibian state in his declaration of a state of emergency. On the occasion of the 31st Anniversary of Namibian Independence, March 21, 2021, the president reiterated the seriousness of the threat of COVID-19 to the Namibian state by stating that:

> At present, we are in the midst of a war against COVID-19. Although the pandemic has tempered our celebrations, our spirits remain high because no unwelcome visitor can ever diminish the pride and love that we share for Namibia. The arrival of the Coronavirus on our shores on March 13, 2020, has compounded the already existing challenges (Namibian Presidency, March 21, 2021)…

While military deployment was intended to enforce compliance with COVID-19 regulations, especially those related to unauthorized public gatherings and movements, the militarized response to the pandemic led to other social problems. During COVID-19 operations, there were reported cases of assault and gross human rights abuses committed by NDF members (The Namibian 2020a, b). The NDF found it challenging to determine what level of minimum force it was to use when dealing with civilians who contravened lockdown rules, just as it found it challenging to tolerate civilians who questioned the authority of NDF members at roadblocks.

Consequently, cases of brutality by NDF members were well documented (Amakali 2021; Kaure 2020; Amupadhi 2019). Deployment to secondary operations such as COVID-19 response where tolerance, empathy, and negotiating skills are required posed serious challenges to NDF members not used to receiving orders or being questioned by civilians. For example, NDF members deployed to Kasika, Ngoma, Kapani, Mbilajwe, and Mbambazi areas to patrol the Namibia-Botswana border were reported to have assaulted the residents. The assaults included, among others, physical beating, and pouring sanitizer and Tassenberg (alcohol) on residents. Cases of lack of discipline were also recorded against NDF members. For example, some soldiers were arrested for buying alcohol during the Stage 1 Lockdown when the sale of alcohol was prohibited (Ikela 2020).

Beyond this, some NDF members were condescending towards other members of the security clusters, confirming the observation of Kamradt-Scott et al. (2016) that the military is not too keen on joint operations as they see such roles as secondary to their primary function. In this regard, some NDF members considered their deployment to assist the police as an indication of the poor capacity of the police to maintain law and order. There also unreported cases of distrust, unhealthy rivalry, and disagreements over methods between NDF members and other agencies within the security cluster during joint domestic operations. To some extent, these acrimonious relations undermined joint domestic operations and necessitated the establishment of a centralized system to coordinate the activities of joint domestic operations.

4.2 Civilian Oversight and Accountability

The reported cases of unprofessional behaviour from some NDF members run counter to the spirit of the Namibian Constitution and laws which make it clear that the NDF and other security agencies must not act as though they are "beyond any level of accountability." Of course, during emergencies laws and constitutional provisions may be implicitly or explicitly suspended if the government deems it necessary to achieve its intended objectives. The COVID-19 crisis provided a good illustration of this. Effective civilian oversight of the military during COVID-19 was lacking due to several reasons. For example, parliamentary sessions were suspended at different times during the pandemic before reverting to virtual sessions. Similarly, in practice, the civilian police authority (NAMPOL) did not arrest soldiers, especially senior officers, while in uniform or inside military bases; the police had to liaise with the military police to effect such arrests. Depending on the nature of the case or crime committed, arrested NDF members were either handed over to the police for further investigation and trial or tried by the NDF itself according to the military code of conduct. This standard practice was observed during the COVID-19 pandemic.

Nevertheless, NAMPOL was tasked with investigating reported cases of unprofessional behaviour from some NDF members and presenting its findings to the office of the prosecutor-general which decided whether or not to press charges (Mbathera 2021; Kaure 2020; US State Department 2020; US State Department 2021). Still,

several human rights abuse cases dating to the COVID-19 deployments are either pending, under investigation, or awaiting trial decisions from the relevant authorities (US State Department 2021). Furthermore, complaints of human rights violations, abuse of power, unfair, harsh, insensitive or discourteous treatment by both the NDF and other security agencies during COVID-19 operations were also sent to the office of the ombudsman for investigation and resolution. The backlog of cases is clogging the wheels of justice and weakening judicial processes.

Despite reported cases of the military overstepping its mandate during the COVID-19 pandemic, the Namibian Constitution and laws do ensure that arbitrary killing, assault, homicide, or the use of excessive force by the NDF and other security agencies in carrying out their constitutional mandates are punished Neither the NDF nor other security agencies can act with impunity, as though they are above the law. It was against this backdrop that the MoDVA tried to reassure the public in 2020 that the NDF would investigate allegations of wrongdoing and deal with those found guilty of assaulting civilians according to its disciplinary code (Mbathera 2021). While the MoDVA's statement of reassurance illustrates the military's preference to handle issues of misconduct by its members internally, it is instructive to point out that the outcomes of the NDF's internal processes are rarely made public.

4.3 Public Image of the Military

The deployment of the NDF to assist civil authorities in enforcing lockdown regulations triggered debate across Namibian society. According to the national coordinating committee on the COVID-19 outbreak in Namibia, the NDF was brought in to ensure that the public strictly adhered to lockdown regulations and to prevent violence from breaking out during the lockdown period. In stating the role the NDF was to play, the committee also acknowledged the fact that the public distrusts the military (The Namibian 2020a). The public was forewarned that during periods of emergency, the military "is tasked with taking charge and human rights issues such as freedom of movement are put aside" (The Namibian 2020a). This warning was necessary because concerns were raised about the possibility of violence breaking out between NDF members and the public, particularly the youth, that may result in assault and death as had been the case in the past.

Those who disliked the idea of NDF's deployment to combat COVID-19 argued that frequent deployment to domestic operations in support of civilian authorities would affect military professionalism (The Namibian 2020b). The memory of the shooting of a taxi driver during Operation Kalahari Desert in 2019 played a critical role in the public opposing the NDF deployment. Similarly, the media and the public also raised concerns about human rights abuses during previous domestic joint operations. In this regard, some questioned the legality and mandates of the NDF's participation in domestic deployments, especially in crime prevention, which falls within the constitutional mandate of NAMPOL. Among groups that raised concerns about the NDF's excessive use of force on Namibian citizens during COVID-19 were the

Legal Assistance Centre, the Society of Advocates, and the Namibian Law Association. Similarly, Namibia's ombudsman and various opposition political party leaders raised concerns about the military's deployment. For example, opposition political parties called for the termination of Operation Kalahari Desert due to alleged violations of human rights (LAC 2019, 1). They also opposed the NDF's deployment to assist the police in enforcing law and order during the 2019 presidential elections. Opposition political parties alleged that NDF deployment to assist NAMPOL is tantamount to politicization of the military and outright intimidation of voters. Apart from politicians, other critical sections of the Namibian public felt that the deployment of the military during presidential elections sent the wrong signal to Namibians and the international community.

These views were reinforced by alleged cases of unprofessional conduct by the NDF and other law enforcement officers during Operation Kalahari Desert, including the killing of civilians. In this case, two NDF members faced murder charges for killing civilians on separate occasions while participating in joint domestic operations. The NDF also faced lawsuits stemming from alleged brutal assaults on civilians during Operation Hornkranz. Some of those cases are still pending; at the time of writing, there has been no conviction against any member of the NDF for alleged assaults during joint domestic operations.

Members of the public who welcomed NDF deployment cited its role in cracking down on crimes as part of joint operations, especially in 2019. According to NAMPOL, "the public at large is appreciative of the positive impact the joint law enforcement forces have made towards the provision of safety and security… this has resulted in calls from the public that such joint operations with Namibia Defence Force (NDF) must continue." (New Era 2019) NAMPOL further claimed that joint operations deployment improved the public image of Namibia's security agencies because of the tangible results such operations produced. For example, joint domestic operations made a positive impact on crime prevention in Namibia and helped maintain lockdown regulations during the COVID-19 outbreak.

Despite claims by NAMPOL of positive results, it must be stated that media reports of physical assaults on civilians by some NDF members during the COVID-19 deployment left the public with a negative view of the military as a disciplined institution that serves the interest of all Namibians (The Namibian 2020b).

5   Lessons Learnt

Military operations often come with unintended consequences as well as lessons to be learnt by the military and society in general. Among the lessons that the NDF learnt during the COVID-19 deployment is that every operation requires some level of training and preparation. NDF members require regular training in civil-military relations to understand what constitutes minimal force and its application. The COVID-19 operations required the deployment of a large contingent of NDF members, many of whom had no training on how to conduct themselves in civilian environments, or

in joint operations with the police and other security agencies. Many NDF members could not understand why they were to be guided by NAMPOL's standing orders and operational guidelines on the use of force during NAMPOL-led joint domestic operations.

Another key lesson that the NDF learned from COVID-19 is that reliance on local small- and medium-sized enterprises (SMEs) can be detrimental to its strategic operations. There is a need, therefore, to diversify and build a resilient supply chain that will sustain its operations at all times. During the COVID-19 outbreak, the NDF's supply chain was seriously disrupted due to the country-wide lockdown. Before the COVID-19 outbreak, the NDF relied on SMEs as its main suppliers, in part because they are agile and innovative. However, COVID-19 showed that to a large extent, SMEs are vulnerable to disruption by invisible enemies. Their vulnerability comes mainly from what is usually their small staff count and limited production sizes. During the COVID-19 outbreak many SMEs that served as NDF suppliers closed, which in turn caused serious delays in the delivery of the supplies the forces needed.

The suddenness of the COVID-19 outbreak exposed the NDF's lack of proper strategies and tactics for combating emergency health crises. The NDF engages in regular and systematic exercises, strategic simulations, and acquisition of modern weapon systems to develop high morale and willpower so it is prepared to fight foreign and domestic adversaries. While this is encouraging and highly beneficial to the NDF, its experience from the COVID-19 deployment revealed the need for recruitment, training, and retention strategies for health and allied professionals in the NDF. Shortages of PPE and other medical supplies showed that the NDF needs to stockpile critical medical supplies as they may be needed to fight future health emergencies. During COVID-19, the NDF could only deploy and staff two field hospitals when the country needed more to effectively combat the pandemic. This was an indicator of the NDF's limited resources and personnel capacity. Further, the NDF experienced a high turnover of health professionals and an unwillingness by some to deploy to COVID-19 operations. The main cause of that unwillingness, particularly among nurses, was the NDF's poor financial incentives compared to those offered by counterparts in civilian agencies such as MoHSS.

The NDF also learnt that regular strategic exercises for non-military emergency responses are as important as regular exercises for emergency responses to military threats. The military operations terrain is expanding, requiring constant training and upgrading of knowledge and skills for better adaptability. Among the important skills needed in domestic operations and which members of the NDF should acquire are listening, mediation, negotiation, and communication skills. These skills are necessary when dealing with civilian populations who are not used to a military command structure. Even though the military is associated with strict discipline at all times, during domestic operations NDF members have exhibited unprofessional behaviour rather than adhering strictly to the rules of engagement. The number of cases of human rights abuses recorded against the NDF underscores the need for training in civil-military relations.

Furthermore, the NDF has learnt that the deployment of a small contingent well-equipped with modern technologies can be more efficient and better organized than

a large contingent poorly equipped troops without the necessary tools. This is in line with the argument of Walt (2020) that military engagement in domestic deployment requires modification of the *modus operandi* to fit into civilian settings. Through the use of diverse technologies such as drones, NDF members were able to deliver medical supplies to frontline workers from a safe distance and still achieve the goal and objective of combating COVID-19.

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Comparative Perspectives on Domestic Emergencies, the Pandemic Response, and Civil-Military Relations

Martin Bricknell, Lindy Heinecken and Christian Leuprecht

Abstract   While domestic military operations used to be rare, their frequency, length, and complexity have expanded significantly since the end of the Cold War, driven by new threat vectors such as pandemics, climate change, and terrorism. Drawing on 26 country case studies of military deployments in response to the COVID-19 pandemic, the conclusion highlights a global pattern of extensive military deployments in non-combat roles. It details how varying legal frameworks inform the extent of military involvement in domestic emergencies, public order, and law enforcement. Anglo-Saxon states tend to be more reticent in drawing on their militaries to support civil authorities than some countries in East Asia, Latin America, and Africa. Irrespective of region, the authority to deploy military forces domestically typically rests with the political executive, with varying levels of legislative oversight to ensure account-ability. During COVID-19, roles performed by the military were almost universal: medical support (e.g., testing, vaccination, patient care), logistical and infrastruc-tural support (e.g., distributing supplies, creating facilities, repatriation), and law enforcement (e.g., border control, enforcing restrictions). States tended to draw on existing military capabilities or repurposed personnel ad hoc. The pandemic also exposed weaknesses in inter-ministerial coordination and reliance on the military as "surge capacity" in the face of undercapitalized and overstretched civilian emer-gency services. The unprecedented global deployment of militaries during COVID-19 underscores a growing expectation for their involvement in domestic emergencies. This trend has implications for civil-military relations, particularly concerns about military overreach, diminished civilian control, human rights violations, and the impact on force sustainment. This necessitates a re-evaluation of military posture, structure, funding, and training, and a careful balancing act to prevent the erosion

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of combat readiness while ensuring robust civilian oversight to maintain democratic principles and prevent securitizing and militarizing domestic policy.

1   Introduction

The goal of this book was to establish the extent to which militaries are deployed in domestic operations in support of civilian authorities, how this translated to the use of the military to respond to the global COVID-19 pandemic, and the effect on civil-military relations. The country contributions of leading Western allies, NATO member countries, East Asia, South America, and Africa, provide a rich empirical dataset from which to draw general conclusions while highlighting different endogenous effects related to governance, past histories of respective countries, and readiness to respond to disasters. The case studies provide a comprehensive overview of domestic deployments and the challenges these pose not only for capacity but also for overall governance and multisectoral cooperation. Drawing on the response to the global COVID-19 pandemic as a natural experiment, this chapter distils patterns in domestic deployments.

The significance of this research stems from the unprecedented nature of the response by militaries to the pandemic. Never before have armed forces been deployed domestically on a global level in response to the same hazard. Rather, domestic military deployments in support of civilian authorities usually occur following local or regional emergencies, often in response to natural disasters or civil unrest. The international nature of the pandemic and the extensive use of the armed forces in domestic military operations enables comparison across continents, political systems, cultures, etc. The book is guided by a most-different systems design to compare trends in the internal use of armed forces and their impact on the structure of the forces, and on national resilience and emergency management across the globe. Over time, countries and international organizations will want to reflect on the global response to the pandemic and the role the armed forces played, while drawing on lessons learnt to position their militaries for future domestic deployments.

Since the end of the Cold War, and notably since the turn of the millennium, domestic military operations have been expanding in frequency, length, and complexity (Dahlberg and Dalgaard-Nielsen 2025; Kuehn and Levy 2021; Matei et al. 2022), which has made them a matter of debate in civil-military relations. These debates include whether domestic operations diminish civilian control (Desch 1999), or enhance it to the point of subjugating the armed forces to civilian authorities (Levy 2012); and whether the increase in involvement in the domestic sphere leads to greater securitization and consequent militarization. In this regard, Pion-Berlin and Trinkunas (2005, 7–8) cautioned against the use of the military in democratic societies based on four main concerns, namely, that (1) the role expansion will lead to increased military prerogatives and autonomy from civilian oversight; (2) increased participation in internal roles can lead the military to having an increased sense of entitlement to and doctrinal justification for a role in national decision-making,

possibly leading to its intervention in politics; (3) the military role expansion into internal security is linked to increased violations of human rights, including intelligence activities against civilians, illegal detentions, and excessive use of force; (4) militaries that perform internal security roles are often poorly prepared to conduct external defence missions." However, they acknowledge that "the linkages between domestic roles for the armed forces and deteriorating civil-military relations were never drawn with sufficient clarity and empirical depth to establish direct causality" (Pion-Berlin and Trinkunas 2005, 8). The lessons learnt during the COVID-19 pandemic tie into this, which to date has received scant attention.

In this concluding chapter, we draw on the general structure of the country case study contributions in this volume to reflect on emerging themes, highlighting general trends and divergent patterns. We begin with the legal frameworks that regulate domestic deployments and the extent to which armed forces across the globe serve in non-combat roles in response to domestic emergencies. Thereafter the focus shifts to the deployment of the militaries in response to the COVID-19 pandemic, specifically their mandate, the coordination of the response, various roles in which the military served, readiness to deploy, and the impact of the deployment on overall effectiveness. The last section considers how and whether the extensive deployment of the military affected civil-military relations and the lessons learnt from this.

Given the growing likelihood for the armed forces to serve in domestic roles, from a multilevel-governance perspective the pandemic response identified widespread shortcomings in inter-ministerial planning and coordination, including with private and third-party stakeholders. Similarly, robust and seasoned civilian oversight and accountability proved indispensable to ensuring that the civil-military balance was not disrupted and, in specific countries, prevented a rise in militarism and democratic backsliding as the military becomes (ever) more involved in domestic emergencies. The rise in domestic and geopolitical instability makes it more important than ever to raise the quantity and quality of debate on these issues.

2 Comparing Domestic Military Operations

This section compares the legal and political framework that regulates military deployment in domestic operations, the oversight mechanism, and the general extent of military deployment.

2.1 Legal Provisions Regulating Domestic Deployment

Legal obligations differ by country and are described in emergency and state-of-disaster legislation. The level of support from the military in an emergency depends on the scale of the threat, whether it is national or regional, and the political autonomy afforded to the state, region, or province. Roles that involve public order

and law enforcement are especially controversial. Anglo-Saxon countries, including the United States, Canada, Australia, and New Zealand, and larger NATO countries, notably Germany, but not France, are particularly reticent to deploy the military in domestic coercive roles (Dahlberg and Dalgaard-Nielsen 2025). In smaller NATO countries there is more support for using the military in these roles, with limited constabulary powers being assigned to military personnel under police authority and leadership. In contrast, some countries in East Asia (Pakistan, Philippines), but all in Latin America and African countries in this study routinely used their military to undertake public order and law enforcement tasks, which includes the authorization to use lethal force (Levy 2022; Esterhuyse 2019; Isacson 2020; Herrera and Croissant 2021; Heinecken 2021).

In all the countries included in this volume, the power to authorize domestic military deployments is vested in the head of state or government. While the political executive approves such deployments, the details are subject to legislative review, oversight, and accountability, notably through government or parliamentary committees that maintain scrutiny and transparency through regular reporting (Kuehn and Croissant 2023; Leuprecht and McNorton 2021). While the political executive provides terms of engagement within which the armed forces (in their capacity as an administrative branch of government) carry out an operation, Parliament must vote on fiscal appropriation, with the expectation that the armed forces and political executive must report, regularly, on issues such as the nature of the mission, number of personnel deployed, roles in which the military serves, and length of deployment, as well as expenditure and probity of allocated resources. The legislative branch also has the right to monitor the deployment and progress of such missions against the direction and expectations established by the executive branch, initiate investigations, and set up special committees of inquiry. However, the level of this oversight differed and in most cases was post facto, subject to review after the event or activity occured. In line with Feaver's principal-agent theory, these mechanisms provide a mix of monitoring checks and balances to avoid slippage and shirking and to ensure that the military respects the authority of the principal and acts accordingly (Feaver 2003). Although the extent of review, oversight, and accountability differ by country, all case studies in this volume have legal frameworks to monitor deployments. However, where the military was more extensively involved in the leadership of the pandemic, this strenghtened their influence in decisionmaking and weakened civilian oversight.

2.2   Nature of Domestic Deployments

All countries deploy their military in domestic roles when confronted with emergencies, but the actual deployments vary. They are contingent on historical influences, the character and prevalence of natural disasters, as well as external and internal threats to state security. For politicians (as principals), the military (as agent) provides a valuable surge capacity in a resource-constrained environment when faced with an emergency and when other state entities lack the capacity or capability to respond.

That is, domestic deployments are ultimately demands by the government on the military to achieve specific political objectives. As reflected in this book, these demands have increased significantly in recent years due to the compound effect of anthropogenic and naturogenic threats globally along with a concurrent underinvestment in civilian response capabilities. However, by and large, supply has not matched the growing political and societal expectations of the armed forces: there has been little or no additional investment in funding, training, or the restructuring of the forces for the concomitant expansion in domestic missions. What is more, expectations of the armed forces have been growing—not just for domestic operations, but across a spectrum of missions—at a time when most armed forces already find themselves overstretched and under-capitalized.

In virtually all countries the military assists in large-scale disaster relief if civilian response structures have been overwhelmed, or if the armed forces have discrete specialized capabilities. Search-and-rescue and disaster-relief operations typically follow natural disasters such as large-scale floods, storms, fires, hurricanes, earthquakes, and sudden releases of pollution. The range of disaster relief tasks that the military performs and that were identified in this study comes in three broad forms: (1) a surge in general labour for non-specialist tasks such as sandbagging or firefighting, (2) transport in geographically large countries, especially by airlift, and (3) specialist engineering and medical support. Humanitarian relief includes setting up mobile hospitals and kitchens and providing temporary housing and relief camps. In many countries, the military now forms a permanent part of their disaster management structures, which is indicative of the level of changing societal thinking and expanding popular support for the armed forces in these roles.

In some countries, the military has been deployed in response to other diseases. When the Ebola virus broke out in 2014, Nigeria and Sierra Leone tasked the military with monitoring home quarantines, constructing treatment centres, providing security for hospital and medical centres, staffing checkpoints, and conducting health checks. Similarly, in South Korea, the military was involved in the medical response to outbreaks of cholera and typhoid by providing quarantine facilities and vaccines. The military's role in containing disease extends beyond humans to livestock epidemics. In the UK, Korea, and Japan, the military has been deployed to contain the foot-and-mouth disease, which involves the slaughter and disposal of infected animals. In Africa, where droughts have caused severe loss of livestock and crop failure, militaries in Zimbabwe and Namibia have provided food and drought relief, and have even assisted in eradicating migratory locust plagues. Given the disproportionate impact of climate change on Africa, we can expect such roles for the military to persist, expand, and become more frequent and prominent. Increasingly there are now calls that climate change presents a major threat to global security and needs to be included in defence planning (Scott and Kahn 2016; Gosling Clarke 2023; Vergun 2022).

More controversial is the blurring or convergence of police and military roles which raises concerns about the militarization of both the police and society on the one hand—and the constabularization of the armed forces on the other, with attendant risks to the military's functional imperative. The military is increasingly

involved in anti-terrorist operations and related law-and-order functions (particularly in France, Estonia, Italy, Spain, and the United Kingdom) and other security-related tasks including, to varying degrees, border control to combat illegal immigration and the smuggling of illicit goods (notably in Denmark, Estonia, Slovenia, South Africa, and Brazil). In Italy, for example, in the 1990s the military was involved in containing crime syndicates that threatened the state's stability. In South Africa, the military has been drawn into general crime prevention to support the police during periods of widespread looting and violence, and into combating gang violence.

Deployments in which the military is used to support public order and law enforcement, including the police, and to provide crowd control, during riots and protests, are also on the rise. The US National Guard, for instance, supported law enforcement during civil unrest after the murder of George Floyd, but some countries are more hesitant to do likewise. On the one hand, new NATO members such as Slovenia and Estonia have been reticent to deploy the military in law enforcement functions or during riots for fear of escalating tensions. On the other hand, smaller NATO members with limited public safety surge capacity, such as Belgium, Denmark, and Sweden, have enlisted the support of the military, albeit subject to strict regulations or limiting the military to protecting key government institutions, providing brown-water navy security (i.e., providing security to the navy when it conducts military operations in littoral waters, such as rivers and coastal areas), or rendering essential services. Since most countries with a maritime boundary maintain a brown-water navy that largely performs the function of a coast guard—rather than a blue-water expeditionary navy—an (a)typical function of many armed forces is to protect its nation's agriculture and fisheries, which affect citizens' food security.

In contrast, countries of the global South, many of which are replete with internal political volatility and insecurity, deploy the military in public order roles more readily, but not without controversy. The contributions from Brazil, South Africa, Namibia, the Philippines, and Sierra Leone show that militaries are deployed to support the police in public order and law enforcement duties during instances of urban violence, protests, strikes, and elections. However, the use of force is a measure of last resort and is often only permitted for self-defence. In stark contrast are Nigeria and Zimbabwe, where soldiers visibly deploy alongside the police in daily life. In these countries, the military often abuses its coercive power to suppress the population, using brutal force and violating citizens' human rights—all without the suspension of the Constitution or the rule of law (Musa and Heinecken 2022; Nyathi and Ncube 2020).

There is a shared belief that the military must help the people and they have been involved in rice planting, supplying labour to farms, as well as constructing hospitals, schools, roads and bridges. In Brazil, the military is regularly involved in social assistance missions to promote the well-being of communities, especially in remote locations in the Amazon that are difficult for civilian agencies to access. The Brazilian armed forces' motto in support of populations is "strong arm, friendly hand" and in Brazil, there is a general expectation of dependency: that the military should be involved in socially oriented service to society. A similar culture exists in Portugal, where the military is expected to serve in public interest missions to protect

and safeguard people from poverty. In the Philippines, the military is extensively involved in developmental tasks under the mantra of a "do-it-all" military. Without an external threat, this para-militarization is a deliberate strategy to justify a greater allocation of scarce state resources to the military.

The different country contributions document the expanding range of domestic roles for the armed forces as they work to assist other government agencies to protect the public safety and security of citizens. However, as mentioned in the introduction, the impulse to use the military in an ever-widening array of domestic tasks results in governments using a very expensive, improperly equipped (for domestic duties), and overqualified emergency response body at the cost of a functional military and expeditionary force. This effectiveness should not be confused with suitability as this can have the additional negative effect in that it can lead to the atrophy of other agencies. Such increased involvement is bound to upset the balance between civilian and military authorities. Critics argue that these expanded roles for the military pose risks to "combat readiness, morale, recruitment, and civilian control" (Dahlberg and Dalgaard-Nielsen 2025, 11). Some of these risks and challenges become more apparent as we examine the military's involvement in the response to a global biosecurity health emergency.

3 Military Response to the COVID-19 Pandemic

The observations in this study align with those of other scholars on the military's response to the pandemic (Acacio et al. 2023; Erickson et al. 2023; Gad et al. 2021; Gibson-Fall 2021; Passos and Acacio 2021; Levy 2022; Wilén 2021). The contribution depended on their relative size, both full-time "active duty" forces and part-time or reserve forces. In many countries, the reserves provide structural mass to the armed forces for large-scale war and represent a saving against the routine operating costs for the defence budget. In addition to reserve forces mobilizing to augment the active duty forces, many countries have geographically orientated paramilitary reserves for local territorial defence or crisis response. Examples include the Canadian Rangers, the Estonian Defence League, the Swedish Home Guard, and the US National Guard.

3.1 Coordination of the COVID-19 Response

Many armed forces embedded military personnel in key government departments to support the administrative planning and management of the response to the pandemic. At the political level, current and retired military personnel, including senior military personnel, were drafted into critical leadership positions in the national COVID civilian health response. For example, in Australia, Lieutenant-General Frewen became co-coordinator general of the national COVID vaccine task force; in Brazil, General Eduardo Pazuello was appointed interim minister of health; in Canada,

Major-General Dany Fortin was put in charge of vaccine logistics at the Public Health Agency of Canada; in Estonia, a military medical colonel was appointed medical chief of the health board crisis staff; in Pakistan, Lieutenant-General Hamood uz Zaman Khan took on the coordination of the national command and operations centre; in Portugal, Vice-Admiral Gouveia e Melo was selected as leader of the vaccination taskforce; and in Sierra Leone, the minister of defence took on the role of chairman of the national COVID emergency response centre. In some countries, militaries were extensively involved in policy-making, ranging from assuming total control, as in Brazil, to more subtle roles influencing the agenda and shaping the conversation and policy as in Italy, where the post of special commissioner was transferred to the military indicating the increasing role the military played.

The precise mechanisms for command, control, and coordination of the military contribution to the response to COVID-19 depended on the constitutional structure of government in each country, especially in federal systems with their constitutional division of jurisdictional powers. This influenced the relationship between the national (or federal) government and regional (or state) government, including the delegations of autonomy regarding the responsibility and authority over the control of health services. Similarly, the relationship between ministries of health, social insurance funds, local government, and individual health services providers (hospitals, ambulance services, community care services, etc.) varied across countries and affected the level of federal government control and response to the health crisis. Many countries distinguish health services from public health, even though both need to be synchronized during a public health crisis. In most countries, the military ended up being involved in the decision-making, management, logistical, and administrative response to the COVID-19 emergency to varying degrees and at different levels.

In terms of the actual deployment of the military, ministries of defence often assigned specific names for individual military operations to support the national COVID response, which meant that they operated under a clear mandate. For example, Operation COVID Assist—Australia; Operation COVID-19—Brazil; Operation LASER—Canada; Operation Résilience—France; Operation Protect—New Zealand; Operation Balmis and Operation Baluate—Spain; Op Notlela—South Africa; Operation Rescript and Operation Broadshare—UK. The scale and scope of the undertaking were reflected in the distinct command and control structures set up for these deployments. However, as exemplified in the Australian case study, a missing link between the strategic level and the tactical level needed to be filled by an operational-level headquarters. The use of Australian Defence Force staff in cross-government management and management support tasks helped to address this capability shortfall.

Such operational support in surveillance, planning, and assisting civilian operations was a universal role but differed by country. Many states designated a national-level military headquarters to coordinate the allocation of tasks from the national ministry of defence to military units. In most cases, this was a joint headquarters (i.e., composed of army, navy, and air force personnel with authority over units from all three services). Examples include the Brazilian National Joint Operations Centre and

subordinate regional joint commands, the Canadian Joint Operations Command, the French *Organisation Territoriale Interarmees de defence* (OTIAD), the US Northern Command, the UK Standing Joint Command, and South African Joint Operations HQ. These joint headquarters commanded a designated task force that was formed from military units assigned to the operation: the COVID-19 taskforce—USA and Denmark; the COVID support force—UK; and *Unidad Militar deEemergencia*—Spain. These task forces also liaised with regional local governments for local activities by military units.

Nonetheless, in virtually all countries there was problems with coordination due to a range of issues. Where there were established structures and military and civilian agencies were more familitiar with emergency procedures this was less so, but still problematic. A key factor, was that unlike most other disasters, there was no immediate end stage against which to plan for, given the protacted nature of the pandemic. Other reasons included a lack of understanding of military culture, the need for a more uniform language and terminology and overlapping mandates. In this regard the COVID-19 pandemic provided many lessons on how to strengthen interministerial and agency coordination, when faced with prolonged emergencies.

3.2   Military Deployment During COVID-19

During the pandemic, the primary mission of the armed forces—to protect the external security of their country—remained unchanged. Where there were specific military capabilities, governments used their armed forces to support the wider national response to the crisis, with particular emphasis on supporting their health and social care services, logistical and infrastructural support, public order and law enforcement roles, and other administration, management, and coordination support (see Table 1).

3.2.1   Medical and Health Support

Many countries undertook the same activities (i.e., military support to those testing the population for COVID-19, or for civilian COVID-19 vaccination programs), which suggests there is an almost universal role for the armed forces in providing a surge of additional personnel during a national crisis. The use of military hospitals to treat civilian COVID-19 patients is a notable example that requires pre-existing skills and facilities. Although Western militaries maintain their primary health systems, they have no excess capacity, which meant that the deployment of military physicians, nurses, pharmacists, and medical technicians to support the COVID response cannibalized the military's health care system.

Countries with designated military hospitals were able to assign them to specific COVID tasks. For example, France, Italy, and Korea used military hospitals for quarantine early in the pandemic. Other countries used military hospitals to ensure access

Table 1 Military roles and COVID-19 deployment by country

Function	Roles	Country
Medical support	Equipment supplies (face masks, ventilators, PPE)	AUS, BEL, BRA, CAN, EST, FRA, ITYA, KOR, NLD, NZ, NGA, PHL, ESP, ZAF, SVN, SWE, GBR, USA
	Health support (testing, vaccination, screening, treatment, sanitation, water purification disinfection, laboratories, contact tracing)	AUS, BEL, BRA, CAN, DNK, EST, FRA, DEU, ITA, JPN, KOR, NAM, NL, NGA, PAK, PRT, PHL, SLE, SVN, ZAF, ESP, SWE, GBR, USA, ZWE
	Quarantine support	AUS, BEL, BRA, CAN, DNK, ITA, JP, KOR, NAM, NLD, NZ, PAK, PRT, PHL, SLE, ZAF, ESP, GBR, USA
	Care (homes, centres, food parcels, care for homeless)	BEL, CAN, DEU, ITYY, NLD, NZ, PRT, PHL, SVN, GBR, US
Logistical and infrastructural support	Logistical support (distributing supplies)	AUS, BEL, BRA, CAN, EST, FRA, DEU, ITA, KOR, NAM, NLD, NZ, NGA, PAK, PRT, PHL, SLE, ZAF, SVN, ESP, SWE, USA
	Repatriation	BEL, CAN, DEU, ITA, JPN, NLD, NZ, ZAF
	Transportation (patients, materials)	AUS, CAN, DNK, FRA, ITA, KOR, NZ, PRT, PHL, KOR, SWE, ZAF, SVN, ESP, GBR
	Creation of facilities (mobile and field hospitals, shelters, vaccination centres)	BEL, EST, FRA, DEU, ITA, JP, KOR, NAM, NGA, NLD, PAK, PRT, PHL, SLE, ESP, ZAF, SVN, SWE, GBR, USA
	Manufacturing of supplies	AUS, ITA, KOR, PRT, GBR, USA
	Support overseas territories	DNK, EST. FRA, NLD, NZ, GBR
Law enforcement	Border control and roadblocks	AUS, BEL, BRA, CAN, DNK, EST, ITA, NAM, NGA, NLD, NZ, PAK, PHL, ZAF, SLE, SVN, SWE, ZWE
	Law and order (enforcement of Covid-restrictions)	AUS, BEL, EST, ITA, NAM, NGA, PAK, PHL, SLE, ZAF, ESP, USA, ZWE
	Guard duties	NZ
	Civil unrest	USA, ZWE
Administration, coordination, management support	Communication	AUS, PAK, PHL
	Awareness campaigns	BRA, PAK, PRT, ZAF

(continued)

Table 1 (continued)

Function	Roles	Country
	Communication and intelligence support	AUS, BRA, USA, DNK, PAK, PHL, GBR
	Operational support (Surveillance, planning support, and assisting civilian operations)	AUS, CAN, EST, FRA, ITA, NAM, NLD, NZ, NZ, PAK, PRT, PHIL, SLE, ESP, SWE, GBR, USA
	Recruiting volunteers	PRT

AUS Australia, *BEL* Belgium, *BRA* Brazil, *CAN* Canada, *DNK* Denmark, *EST* Estonia, *FRA* France, *DEU* Germany, *JPN* Japan, *ITA* Italy, *JPV* Japan, *KOR* Korea, *NAM* Namibia, *NLD* Netherlands, *NZL* New Zealand, *NGA* Nigeria, *PAK* Pakistan, *PHL* Philippines, *PRT* Portugal, *SLE* Sierra Leone, *SVN* Slovenia, *ZAF* South Africa, *ESP* Spain, *SWE* Sweden, *GBR* United Kingdom, *USA* United States, *ZWE* Zimbabwe

to clinical services as the civilian health system came under pressure (i.e., Brazil, France, Germany, Sierra Leone, South Korea, USA). Many countries embedded military health care personnel in the civilian system (i.e., Canada, UK, Australia, New Zealand, Sweden, and South Africa). They had limited flexibility to redeploy armed forces personnel already embedded in civilian hospitals as this would denude the parent hospital of clinical capacity. By way of example, Australia deployed only 935 military medical personnel (half of whom are reservists) out of over 16,000 military personnel in support of the COVID response. Most countries assigned military healthcare personnel to increase the capacity of civilian hospitals.

Support by military personnel was universal in every country we included in this book. Most militaries provided health support in the form of testing, vaccinations, and patient screening, but they also performed tasks such as sanitation and disinfection of facilities. Slovenia and Brazil used military personnel to screen patients for signs of COVID-19 before they entered a hospital. Hospital laboratories established COVID testing, and many countries used military personnel and laboratory equipment to augment capacity. Emergency departments were transformed into red/amber/green zones to isolate COVID-19 patients, just like a military hospital is organized to care for biological weapons casualties. Intensive/critical care units (ICUs) were expanded to all parts of a hospital where oxygen could be administered (i.e., the temporary conversion of operating departments). The armed forces were used widely to carry out COVID testing in the community (and, in some countries, temperature screening at COVID checkpoints). In Australia, Germany, Estonia, and Pakistan, the armed forces contributed to contact tracing in call centres or for community follow-up. Slovenia is the outlier, insofar as the military's offer to support contact tracing was rejected by the civilian epidemiological service.

Depending on existing capacity some military medical services were involved in the manufacture, storage, and distribution of medical supplies using existing military laboratories or pharmaceutical plants. Examples included Brazil's navy pharmaceutical laboratory, Portugal's military laboratory of chemical and pharmaceutical

products, and the US invoking the Defence Production Act to prioritize industrial production for the COVID-19 response. Military production ranged from general supplies such as PPE or sanitizers to specific commodities such as drugs, oxygen, and respiratory ventilators, and the development and production of new therapies such as vaccines or concentrated convalescent plasma. The extent of military support to the health sciences industry depended on the military's size and its pre-existing capabilities. The military also contributed to health sciences research, either to meet specific armed forces' needs or to use the military as a controlled population for general medical research. Perhaps the largest research and innovation program in this book is the US's Operation WARP SPEED led by Lieutenant-General Gustave Perna, previously the commander of the US Army Materiel Command, to develop US-made COVID vaccines.

Many countries experienced vulnerabilities or a collapse of their out-of-hospital social and nursing care support for the elderly and disabled and used military personnel to maintain services. During the second wave of the pandemic in late 2020 as community nursing and social care services came under extreme pressure some countries re-purposed their intensive care temporary hospitals as "step-down" care for recovering elderly or vulnerable COVID patients (for example, the UK's Nightingale hospitals). Mortuary services are the final component of the community care pathway that the armed forces supported, and they did so especially when mortality was greatest before the rollout of the vaccination campaign. In addition, militaries provided various forms of care support to retirement care homes, the homeless, and refugees (i.e., Belgium, Canada, Germany, Netherlands, Portugal, Slovenia, and South Africa) or delivered food parcels and potable water to vulnerable groups affected by the pandemic.

3.2.2   Logistical and Infrastructural Support

In terms of logistical support, almost invariably the first military task at the beginning of the COVID pandemic was to provide airlift and escorts to repatriate citizens from across the world as international borders were closing. Initially, these efforts concentrated specifically on China but expanded as cruise ships became "human incubators" for the COVID-19 virus. The next phase included responding to surging global demand for PPE, which required an expansion of procurement, storage, and distribution of material. Armed forces contributed logistic support to move material by land, air, and sea. Dependence on the military's logistical system to provide transport for those in need was universal.

Many countries used their armed forces to assist ambulance services, either to transport patients to or between medical facilities. Military transport included wheeled ambulances, helicopters, aircraft, and converted rail carriages. In March 2020, images of military trucks collecting the dead in Bergamo, Italy, one of the countries hardest hit in the initial phase of the pandemic, went around the world. Military transport also provided support to isolated or vulnerable populations. For example, the Australian defence force sent a 50-person medical team to Tasmania

after civilian staff in the North West Regional Hospital in Burnie had been placed in quarantine; in Brazil, the armed forces helped Amazonian communities; in Canada, 54 long-term nursing care homes were supported and care was arranged for isolated First Nations communities; in Denmark, military assistance was planned for Greenland; in Estonia, a field hospital was set up for the island of Saaremaa; New Zealand arranged aid for Pacific Islands; and the UK provided military assistance to overseas territories (the Falklands, Gibraltar, Cyprus, and embassies). Brazil is the only country with a record of military medical assistance to civilian community health centres.

In terms of infrastructural support, countries with military hospitals initially designated them as COVID hospitals to mitigate the risk of contamination of the civilian hospital system (which France, Korea, Sierra Leone, and Pakistan did). Once contagion spread, access was expanded to include all civilian patients (i.e., Brazil, France, Germany, Italy, Korea, Sierra Leone, Pakistan, and Spain). In Portugal, this also included access to haemodialysis as a non-COVID clinical service. In Belgium, the military hospital became the national receiving hospital for burn patients. The UK, Canada, Sweden, Australia, and New Zealand do not have stand-alone military hospitals and active-duty military hospital personnel are already employed within the public hospital system. Military medical services could thus only offer extra capacity to the civilian health system by redeploying military staff if the justification for a new location for their work exceeded the impact on their primary hospital employer.

In the first phase of the COVID-19 pandemic, many countries used their armed forces to support the construction of temporary hospitals in large open buildings such as exhibition centres to provide intensive support to COVID-19 patients. An immense logistic effort was involved in setting up central services to support clinical services such as water, sanitation, distributed electrical points, and oxygen (i.e., Slovenia and South Africa). War stockpiles of medical equipment and pharmaceuticals were deployed to supply these hospitals. In Sweden, there was a concern about the quality of medical equipment released from the war stockpile, and not a single person ended up being treated in the purpose-built field hospital. Once built, military medical personnel in countries other than Sweden contributed to staffing these hospitals and, in a smaller number of cases, also managed their operation. As well as building temporary hospitals, some countries deployed military field hospitals to areas facing high numbers of COVID cases or isolated communities requiring hospital services (i.e., Estonia, France, Italy, Slovenia, Spain, USA, Brazil, and South Africa). The United States deployed its two hospital ships and France its amphibious ship, which had hospital facilities.

In practice, few temporary hospitals received many COVID-19 cases because demand was met by the surge capacity augmenting the formal hospital system. There has been subsequent criticism in the UK, Slovenia, and Sweden over the waste of money and other resources to build these facilities. Sick intensive care patients may need clinical services available from elsewhere in a hospital (such as specialist scanning) that were unavailable in these temporary hospitals. Finally, it was too challenging to mimic the complexity of team-delivered intensive care as part of the preparation to open these facilities (despite personnel having the appropriate

qualifications); consequently, the clinical risk to individual patients outweighed them receiving care in hard-pressed intensive care units in established hospitals.

3.2.3   Law Enforcement-Related Tasks

During COVID, many countries retained a separation between the use of police for public-facing activities that restricted movement or imposed quarantine and the use of the armed forces for other internal security activities. Typical security-related tasks included the use of the military in roadblocks alongside police or other law enforcement officers and for border control. These included patrolling the border and supporting police in controlling interstate travel, as well as assisting health services in screening passengers at border crossing points and airports. The extent to which military personnel were involved in actual law enforcement differed, depending on whether the task was one routinely performed by the military or gendarmerie and the extent to which police could not enforce lockdown restrictions. In some cases, this led to human rights abuses. In Namibia, for example, members of the Namibian defence force assaulted residents on the Namibia-Botswana border, which included physical beating and pouring sanitizer over residents.

The use of the armed forces to provide publicly visible internal security duties in direct support of the police was contentious. These tasks involved restricting the movement of people and enforcing health measures to mitigate the spread of the contagion by enforcing curfews and other lockdown measures, setting up check-points, and determining patrol routes. Half the countries in this volume deployed their armed forces in law enforcement roles, but where this occurred soldiers were typically unarmed. For example, in Sydney, Australia, 300 ADF personnel were deployed to help New South Wales police; an additional 500 were added subsequently. However, neither were they deputized as law enforcement officers nor were they enabled to enforce state health orders; they simply supported police. In Italy, the military was also deployed in law enforcement roles, to control access to areas that had high infection rates and to ensure compliance with COVID-19 containment rules.

The reticence to deploy the armed forces in law enforcement is that these tasks are not compatible with their professional training. Acacio et al. (2023, 376) reiterate: "Soldiers may encounter difficulties in calibrating their use of force, let alone resisting its use entirely because they are familiar with more violent routines engrained in them from years of regimented education and training." In South Africa, for example, rapid deployment of the military raised concerns about insufficient lead time for planning and preparing the soldiers for deployment, which led to human rights violations. These included soldiers using "corrective punishment" on civilians if they failed to adhere to lockdown regulations by making them do push-ups and frog jumps, and sometimes by beating them, which ultimately resulted in the death of civilians. Similarly in Nigeria, lack of formal authorization and clear rules of engagement resulted in the military using excessive force when dealing with civilians. The trend is the same in Zimbabwe but with an added political dimension: the government

exploiting the COVID-19 regulations to have the military assault and kill civilians, especially those sympathetic to the opposition. Contrary to expectations, the Brazilian armed forces refrained from security-related tasks but were extensively involved in the health response. Their ineptitude caused a spike in COVID-19-related deaths (Acacio et al. 2023, 381).

3.2.4   Administration and Management Support

In terms of administrative and management support, some roles were unique, such as using military personnel to provide "general duties support" to medical facilities (France) and to communicate public health messages to the public (Brazil). Many armed forces introduced additional means of communicating urgent health messages (new websites or smartphone applications) to dispersed populations (especially those working at home). These communication channels also provided information on how to access medical care.

The use of military capability in intelligence, cybersecurity, and strategic communications domains to identify threats and provide national strategic defence was less frequently cited in this study. The Australian Signals Directorate (ASD), the UK's government communications headquarters (GCHQ) and Canada's Communication Security Establishment (CSE), which support military and cyber operations and provide information security, assisted in countering COVID-19-related cyber scams, online fraud, and phishing campaigns, and offered practical advice for protecting individuals and organizations, particularly while working from home and using web conferencing systems. Five Eyes signal intelligence also used active and offensive cyber capabilities to disrupt foreign cybercriminals responsible for COVID-19-related malicious cyber activities. Some countries used defence, cyber, and IT capabilities to enhance the digital protection of critical civilian national infrastructure. Military intelligence also provided insight into the behaviour of domestic populations and identified malevolent actors operating within countries. There were examples of armed forces being deployed very visibly as part of the government's strategic communications plan to inform their citizens of the effectiveness of the national crisis response. This use of military capability provoked controversy in Canada, for example, after it was revealed that the armed forces had incorporated "information operations."

3.3   Impact on Readiness and Effectiveness

The extensive involvement of the military in supporting civilian institutions during the COVID-19 pandemic raised concerns over how this would affect the health of the armed forces, and their readiness and effectiveness to fulfil their primary mandate. The concern was two-fold, how to prevent infections and how to deal with those infected to prevent the spread within military units. In some countries (Australia, UK)

this was resolved by establishing "COVID hotels" where military personnel with mild COVID cases could be quarantined. Many armed forces established internal COVID testing programs for military personnel and families, separate from the public health arrangements for citizens, including military laboratory diagnostic services. Clinical health services within the military community health system and hospital system adopted similar COVID mitigation measures to the civilian health services. Electronic methods of remote consultation were speedily introduced, personal protective equipment (PPE) was issued to personnel working with the public, and less urgent clinical services were reduced (such as dental care, occupational health assessments, and preventive medicine measures such as routine vaccinations).

Arrangements for COVID-19 vaccination of those in the military health system varied. Vaccinations were provided through the civilian public health system in some countries, which might have been augmented by military health services (i.e., Canada, and the UK). In others, the armed forces conducted their own vaccination programs (i.e., France, Korea, and the US). This variation also applied to national decisions about the prioritization and compulsion for COVID-19 vaccination by occupational groups. In some countries, employees of essential services who dealt with the public (i.e., those in health care, social care, police, and armed forces) were given priority for vaccination and this was linked to making the vaccination a condition of employment to protect both the individual and the effectiveness of the occupational group (i.e., Canada, Korea, South Africa, the US). Other countries restricted the prioritization of vaccines based solely on an assessment of individual risk (i.e., pre-existing health condition, age) with no weighting for occupational factors (i.e., the UK). The administration of COVID-19 vaccinations to overseas military personnel and national citizens (i.e., diplomatic staff) was often addressed using military resources (i.e., the UK). This introduced some interesting challenges concerning the obligations of states towards their citizens overseas and the policies of sovereign states over the recognition of COVID-19 tests, vaccinations, and certification.

Besides the health of military personnel, the extensive deployment of the military during COVID-19 raised concerns about the impact this would have on their core mission. As discussed in the introduction, deployment in domestic roles draws resources and personnel away from other tasks, which undermines the forces' readiness, training, and deployability. The first duty of the armed forces discussed in this paper remained the protection of their nation from external threats through military operations or activities. Many countries explicitly maintained core defence and security outputs, including expeditionary military missions. External security tasks such as patrols to protect national airspace and sea lanes and to reinforce security at borders were maintained. NATO bolstered its Eastern border through air policing and additional deployment of land forces. The impact of the pandemic was greater on "discretionary" overseas military operations. Some countries reduced the size of their contingents on UN and NATO operations, for example, the UK did for its contribution to the UN peacekeeping mission in South Sudan, and Spain did for its contribution to the NATO training mission in Iraq. Countries also delayed troop rotations for overseas missions and imposed quarantine restrictions on troops engaged

with local populations. Significant outbreaks of COVID amongst military contingents affected the functions of military units and immobilized American, British, and French aircraft carriers.

COVID restrictions also had a significant impact on routine military training. Many residential and field training courses and exercises were cancelled, including major multi-national events such as the NATO Defender Europe exercise in 2020. During 2020/2021, militaries learned hard lessons about pre-emptive quarantine, "cohorting" groups of military personnel, and using asymptomatic testing to enable essential military activities to occur using a risk-based approach to social interaction. In most cases, the recruiting cycle was adversely affected, and training exercises either needed to be scaled back or cancelled, which disrupted the normal rhythm of ensuring operational readiness for combat roles, as well as commitments to peacekeeping and NATO operations. These findings were universal across countries. More broadly speaking, the risk of COVID forced the adoption of hybrid work, the expansion of flexible work arrangements, and the adoption of remote work and working from home. These changes reflected broader workplace adaptations across the labour market that continue to reverberate across the armed forces.

Most countries reported that their armed forces were ready and able to respond to their government's request for help to address the domestic crises that the pandemic spawned, even though this was enormously different from other domestic operations. Since military domestic operations with civilian authorities had already become routine, the armed forces were able to respond relatively quickly. On the one hand, the rapid deployment of the forces highlighted their versatility and adaptability in responding to national emergencies (Wilén 2021). On the other hand, the coordination of the response, the lack of capacity, training gaps, and the unsuitability of the military to perform civilian roles were cause for concern as was how domestic deployments in general were seen to interfere with the forces' planned activities and preparations for their core functions. However, there were some benefits for the armed forces: the COVID-19 deployment provided a unique opportunity to gain tactical experience in imposing curfews, managing border control, logistics, and difficulties in sustaining domestic operations over an extended period.

4 Civil-Military Relations

4.1 Impact of Securitization and Militarization

The greater domestic deployment of the military over the past decade is raising critical issues about the power of the state over citizens, the threat to legal rights, and the erosion of civilian control over the military (Head and Mann 2009; Kuehn and Levy 2021). These concerns were highlighted during the COVID-19 pandemic, especially when the pandemic was securitized (Erickson et al. 2023; Gibson-Fall 2021). Securitization refers to the process through which an issue is labelled a security

issue by the political elite, a process that moves the issue out of the normal political sphere and into the security sphere (Weaver 1995, 52). When an issue is securitized, it is usually associated with the implementation of emergency measures to address the threat and enable the government to prioritize this on the political agenda, as well as authorize the use of the military as its agent (Levy 2022).

As reflected in this volume, most states securitized the COVID-19 pandemic. That is, it was framed as extenuating circumstances requiring extraordinary measures. However, the extent and nature of securitization and, in some cases, the associated militarization varied significantly across countries, reflecting different political contexts, cultural norms, and levels of trust in government. In the US, UK, France, Italy, Denmark, Portugal, Spain, Slovenia, and South Africa, for example, the pandemic was portrayed as an invisible enemy that posed a national security threat, thereby justifying the emergency measures, which in turn often led to disproportionate restrictions on citizens' civil liberties. The use of strong language served to ensure that citizens complied with the strict measures imposed on them to ensure "victory" over the enemy. While these countries did invoke the military in various roles, it did not translate into militarizing the pandemic as was the case in some other countries. Using Feaver's theory, many "principals" (governments) used war rhetoric, but this did not necessarily translate into allowing the "agents" (the military) to assume a leading role in policy- or decision-making during the pandemic, nor did it result in agency slack. However, in some other countries, the military did become a primary agent of the principal to enforce lockdown regulations or manage the pandemic.

In countries such as Brazil, the Philippines, Pakistan, Italy, and Sierra Leone, the pandemic was not only securitized but also militarized, although the level of involvement in decision-making and managing the pandemic response varied. In Brazil, for example, the military (in)effectively managed the pandemic response, with the government seemingly trusting the armed forces more than civilian institutions to handle the pandemic. Akin to Brazil where the military officers had no public health credentials, in the Philippines the military and police assumed a prominent role in managing the pandemic in an overly militarized and warlike manner. In Italy, an army general was appointed as special commissioner for the COVID-19 pandemic, which afforded the military influence over coordination, planning, and management. In Pakistan, policy-makers implemented military-led measures to enforce lockdowns and ensure disease surveillance via intelligence units, which political parties, civil society, and the media all accepted as necessary. Pakistan's hybrid political-military governance system enabled it to implement a militarized response as military leaders already had an outsized role in public policy decision-making.

In Sierra Leone, coordination efforts fell on the military, not as a last resort but as a first choice given their previous experience in dealing with an Ebola outbreak. This illustrates that when the government (principal) does not trust other government agencies to deal with emergencies, the military becomes the agent of choice. When these roles are insufficiently overseen and monitored and the military is left to its own devices, agency slack is evident in both instances of slippage and shirking. Sierra Leone differed from some of the other African countries, especially the more

autocratic and weaker ones. As seen in the case studies of Nigeria, Zimbabwe, and Namibia, this led to excessive use of force as the military became a law unto itself.

On the contrary, more mature democracies neither securitized nor militarized their response and merely used the military to augment capacity; in those countries, the military had no decision-making role. For example, in some Anglo-Saxon countries (Canada, New Zealand, and Australia) civilian leaders avoided war rhetoric and used language like "standing side-by-side" to explain to the public how the military was helping get the pandemic under control. Belgium and the Netherlands adopted a similar stance. In those countries, the military complemented the state's efforts in dealing with the health crisis. Given their history and rejection of militarism, Germany and Japan resisted both labelling the pandemic as a kind of "warfare" and using the military to respond to it. Their citizens also rejected using the military in law enforcement roles. Correspondingly, these countries have strong civil oversight and monitoring of their armed forces, and no evidence of agency slack was detected.

4.2 Civilian Oversight and Accountability

A concern was whether the expanded use of the military increased their power and influence and undermined civil control and oversight, thereby opening the possibility for the military to intervene in politics and commit human rights abuses. Some interesting trends emerged from the various country case studies regarding how existing constitutional and legal arrangements were enacted during COVID-19, and how those arrangements were affected by regime type. Civil oversight and control are necessary to prevent agency slack and require "a constant process of training, detecting and monitoring military behaviour to prevent military agents from acting against the preferences of the civilian principles" (Bell et al. 2022, 704).

Although not all chapters in this volume specifically addressed the issue of civilian oversight of the military, some pertinent lessons emerged nonetheless. In the initial stages of the pandemic, civil oversight occurred mostly *after* an action or event had occurred (*post facto*). At the time parliamentary sittings had been cancelled due to the lockdown and the need for expediency did not allow for prior approvals. However, opposition parties and constitutional experts in most countries heavily criticized the sidelining of parliaments by the political executive (i.e., the UK, France, Netherlands, Denmark, and South Africa). The COVID-19 pandemic raised many questions regarding the effectiveness of oversight mechanisms, especially where there was over-reliance on the military (i.e., Italy). These concerns were overcome once there were regular reporting and media briefings, which provided a greater sense of transparency and accountability. Also, in more stable democracies the military served in subordinate roles to other government agencies and there were few reports of the military shirking, overstepping its mandate, or engaging in other forms of military misconduct during the pandemic.

In contrast, in countries where civil oversight is weak and where the military is deployed extensively in law enforcement roles, the opposite occurred. This was

particularly evident in African countries where the military is integral to state power and where the "principal" actively uses the military as a tool, or where the latter routinely abuses its power and mandate. As demonstrated in the Nigerian and Zimbabwean cases, this underscores the need for more explicit legislative and judicial oversight to ensure that military deployment complies with constitutional and legal standards. In this regard, the judiciary, media, and civil society can serve as a strong countervailing force to hold the military accountable. In both South Africa and Pakistan civil society members and human rights activists, including institutions like the military ombudsman, came to provide a degree of civil oversight to address the civil-military balance and democratic backsliding.

Nonetheless, overall the deployment of the military during COVID-19 did not pose a threat to civilian control, democracy, the rule of law or human rights. However, this could change when there is an over-reliance on the military to perform various duties rather than investing in civilian agencies to perform specific tasks. Acacio et al. (2023, 374) point out that "should this occur, the military can conceivably parlay that dependence to leverage, expanding its influence over policy discussions and planning at higher levels of governance. Additionally, their expanded role could be used to justify larger defence budget shares at the expense of other priority sectors." When the public supports the deployment of the military and praises its effectiveness, that can end up bolstering the influence of the military in the public domain, resulting in militarizm.

4.3   Public Image of the Military

As reflected in the different country case studies, politicians saw the military as "a safe pair of hands" due to its planning capabilities and logistical support, especially during the vaccination rollout. Most but not all countries reported an increase in public trust in the military during the COVID-19 deployment and a high level of appreciation for its support of civilian bodies. However, this support was not universal; there were criticisms of the quality of support and the competency of the military to manage or in some cases coordinate the pandemic response, as well as the conduct of soldiers.

Although atypical, the competency of the military to perform certain tasks, the standard of medical equipment, and the working conditions of medical staff in field hospitals were called into question. Where the military was perceived to lack the technical or logistical capacity to run vaccination centres, for instance, the military's public image was tarnished. These are examples of agency slack, not due to responsibility being shirked, but due to a lack of capacity. Where the military assumed a central role in coordinating and managing the pandemic, the consequences of slippage were more profound. In Brazil, for example, the military was the most consequential institution handling health policies during the pandemic. The Bolsonaro government's militarization of the pandemic and lacklustre approach to mask-wearing, lockdown measures, and social distancing eventually meant that the healthcare system could

not cope with spiralling rates of infection. In this example, the agent (military) also served as the principal, which severely strained civil-military relations.

Of far greater concern was the deployment of the military in law enforcement roles. Few Western countries used the military in public order roles. Some deem it unacceptable to deploy the military in those roles as doing so could occasion human rights violations. This was not the case in the African countries, all of which deployed the military in law enforcement roles. Similarly, in some Asian countries (the Philippines) the military watched and controlled those who defied lockdowns, often using excessive violence or some form of punishment to enforce compliance. Corrective punishments then led to physical abuse and even the murder of civilians. In some cases, the same attitude of impunity was reflected in the military's misuse of state funds, wasteful expenditure, corruption, and extortion, which together with the conduct of soldiers on the ground eroded the military's public image and civil-military relations. Again, this comes back to the importance of oversight and accountability measures to ensure that neither the principal nor the agent abuses their power in times of domestic emergencies.

5   Lessons Learnt and Future Scenarios

Some central themes emerge from the various countries' contributions to the domestic deployment of the military and lessons learnt from the COVID-19 deployment. The first relates to debates over the core function of the armed forces and the extent to which they can or should respond to an ever-widening spectrum of threats to human security. The main concern revolves around the ability of the military to maintain warfighting skills when personnel are increasingly deployed on domestic emergency tasks that not only absorb resources but also degrade training and reduce exercises. An over-reliance on the military to accomplish disaster relief and other related tasks on short notice and with efficiency highlights a mismatch between the military's growing responsibilities and atrophying capabilities. Civilian authorities need to review the adequacy of resources allocated to the military's critical capabilities for a rapid and effective response to crises. At present, the military is an easy and convenient instrument for politicians confronted with crises; governments can turn to the military without having to commit additional resources to deal with such instances.

Beyond resource constraints, a second central theme that emerges from these chapters is the need to strengthen military logistics and improve distribution capacity, operational structure, and interoperability with other departments. Virtually all countries highlighted wide-ranging problems with coordination. Tensions arose over differences in strategic goals and unrealistic expectations about the military's roles and capabilities that arose from a lack of connection and understanding of how the military operates. This highlights the need for more dialogue between civilian and military actors to improve civil-military coordination which can both speed up requests for assistance; and improve civilian oversight and control during crises.

COVID-19 also highlights the need to strengthen interministerial coordination to improve responsiveness, through planning and setting up regular interministerial exercises to anticipate and manage crises. Coordination, information sharing, and crisis management structures were all identified as having shortcomings, indicating the need for better communication channels between military and civilian authorities to improve coordination and optimize resource allocation. This includes the need to have well-established pandemic response plans in place, and an understanding of each other's roles, capabilities and limitations, and management cultures. Civilians typically do not have a sense of the military's ability to plan strategically or manage crises and may be unaware of the range of capabilities it can offer. A better understanding of the military's versatility and capabilities would not only improve civil-military relations and increase the armed forces' legitimacy but also create awareness of the concerns of using the military long-term in domestic emergencies.

The first concern is that the over-reliance on the military places civilian authorities at risk when they do not develop civilian capacities. The US and UK chapters highlight concerns that relying on the military is contributing to an atrophying of civilian public health and emergency response agencies. When the military becomes the default first response it elevates the military service over other forms of public service. In some of the country case studies the military is seen as more capable and trusted than other civilian agencies. This not only undermines long-term civilian capacity but opens the opportunity for the military to play a larger role in policy-making, not just policy execution. The consequence is a rise in militarism where military solutions to problems are given priority and disrupt the civil-military equilibrium. Militaries that are constantly called upon to respond to crises invariably become involved in political matters, which may lead to other government agencies being viewed as incompetent (Koonings and Kruijt 2002).

The military may be effective in conducting domestic operations. But are the armed forces suitable for these roles given their primary mandate? This tension features prominently in the debates emanating from the various chapters around the "all-purpose" use of the military and the need to balance domestic roles with the need for a battled-hardened military ready to face the toughest challenges, including a major confrontation. This study highlights difficult questions that countries must confront in the division between internal and external security—both military and civilian—and the role of the military as the first responder to domestic crises. These debates affect future force design, sustainment, and generation, which in turn affect the ability of the armed forces to respond to competing international, regional, and domestic demands as these become even more pronounced. Given the changing and volatile geopolitical environment since the Russian invasion of Ukraine. The lessons learnt from COVID-19, along with the rise in domestic and international threats, necessitate a review of how militaries are positioned to confront the evolving challenges of the twenty-first century.

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