

Article

## Europe, epicenter of the COVID-19 pandemic. Democracy and the Therapeutic State

GIOVANNA CAMPANI

Università degli Studi di Firenze

**Abstract.** The paper discusses the measures that have been taken by the European governments in front of the COVID-19 epidemics, raising the issues of the fundamental liberties and the state of law in front of a dominating right to health. Exploring the differences among the lockdown measures – more draconian – Chinese style – as Italy or Spain – or softer as Germany and Northern European countries, the article considers as well the positions of philosophers as Giorgio Agamben or Bernard-Henri Lévy, and jurists, constitutionalists, lawyers. The already ancient debate about medical power in society is also evoked (Thomas Szasz). Finally, the Swedish model is evoked, together with the reactions against lockdowns by the populations, indicating that the draconian lockdown – given the damages inflicted to economy and social life – won't be a model to follow in the future, while more balanced forms of control of the epidemic (more testing, isolation of the clusters, better reception services in the hospital) will represent the democratic answer to the challenge.

**Keywords:** pandemic, lockdown, democracy, Therapeutic State.

---

**Resumen.** El documento discute las medidas que han tomado los gobiernos europeos frente a las epidemias de COVID-19, planteando el problema de las libertades fundamentales y de el estado de derecho frente a el derecho dominante a la salud. Al explorar las diferencias entre las medidas más draconianas de “lockdown” -estilo chino- como Italia o España, o más suaves como Alemania y los países del norte de Europa, el artículo considera también las posiciones de filósofos como Giorgio Agamben o Bernard-Henri Lévy, y juristas, constitucionalistas, abogados. También se evoca el debate -ya antiguo- sobre el poder médico en la sociedad (Thomas Szasz). Finalmente, se evoca el modelo sueco, junto con las reacciones contra el lockdown por parte de las poblaciones, lo que indica que el bloqueo draconiano, dado los daños infligidos a la economía y la vida social, no será un modelo a seguir en el futuro, mientras que formas más equilibradas de control de la epidemia (más tests, aislamiento de los grupos contagiados, mejores servicios de recepción en el hospital) representará la respuesta democrática al desafío.

**Palabras clave:** pandemia, lockdown, democracia, Estado Terapéutico.

---

## 1. Introduction

The global crisis caused by the coronavirus epidemic is undoubtedly the largest faced by most Western societies since the Second World War.

Epidemics and pandemics are nothing new in human history: we know that after the arrival of Christopher Columbus and Hernan Cortes in the Caribbean Islands and in Mexico, dozens of epidemics swept across the continent, devastating the populations of the new world. These infectious diseases introduced by the Spanish sailors and soldiers caused millions of deaths:

The native people of Mexico experienced an epidemic disease in the wake of European conquest, beginning with the smallpox epidemic of 1519 to 1520 when 5 million to 8 million people perished. The catastrophic epidemics that began in 1545 and 1576 subsequently killed an additional 7 million to 17 million people in the highlands of Mexico<sup>1</sup>.

According to recent research, this second epidemic, called “*cocoliztli*” (Nahuatl for “pest”) epidemic, associated with a high death rate, may have been due to indigenous hemorrhagic fevers, transmitted by rodent hosts and aggravated by extreme drought conditions. The harsh conditions imposed on indigenous people by the Spanish rules may have multiplied the death rate. From the demographic point of view, the two epidemics provoked the death of almost 90% of the local population from 22 millions in 1520 to barely two millions sixty years after<sup>2</sup>!

In a more recent era, just one hundred years ago, the 1918 flu pandemic, incorrectly called the Spanish flu, caused by an outbreak of an unknown flu (Influenza) virus, a virus that attacks the respiratory system, infected an estimated 500 million people worldwide – about one-third of the planet’s population – and killed an estimated 20 million to 50 million victims. This tragedy was relatively unexpected: given the advances achieved in hygiene and sanitation, the western authorities proudly considered having developed health services that were capable to avoiding past epidemics of cholera and plague. A highly symbolic victory of science against the horrific consequences of the black death had recently been represented by the identification of the plague bacillus, described and cultivated by Alexandre Yersin in Hong Kong in 1894.

In the absence of effective drugs to treat the “Spanish” flu,

some communities imposed quarantines, ordered citizens to wear masks and shut down public places, including schools, churches and theaters. People were advised to avoid shaking hands and to stay indoors, libraries put a halt on lending books and regulations were passed banning spitting<sup>3</sup>.

In fact, there were some forms of “lockdown”, but limited to some cities or areas.

Two other epidemics, originating from China, hit the world.

---

<sup>1</sup> Megadrought and Megadeath in 16th Century Mexico Rodolfo Acuna-Soto, David W. Stahle, Malcolm K. Cleaveland, and Matthew D. Therrell† <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2730237/>.

<sup>2</sup> Cook and Simpson estimated 16th-century population collapse in Mexico, from 22 million to 2 million. The Mexican population did not recover to pre-Hispanic levels until the 20<sup>th</sup> century. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2730237/>

<sup>3</sup> <https://www.history.com/topics/world-war-i/1918-flu-pandemic>.

In 1957-58, the “Asian flu”, part of the provinces of Guizhou and Yunnan in China. “It went through Iran, Italy, Eastern France, the United States. And it didn’t take it six months to go around the world again. Two million deaths in total, especially among diabetics and heart patients. One hundred thousand in the United States. Between 25,000 and 100,000 in France.” (Lévy, 2020)<sup>4</sup>.

In the case of this pandemic, Maurice Hillemann and his team at the Walter Reed Army Institute could produce a vaccine in a short time, to end quickly the spread of the disease. In the summer of 1968, an unknown virus, also from China, swept the world, causing 1 million deaths, including 50,000 in the United States and at least 30,000 in France.

A head of state, Willy Brandt, is affected. Railway workers, for lack of masks, are at a standstill. We vaccinate, tell the surviving doctors (Liberation, 07/12/2005), “on the sidewalks”, with a fluff. People die, “cyanotic lips”, of pulmonary hemorrhage or suffocation. And the evil goes so fast that there is no time to evacuate the corpses that are piled up in the intensive care units.”(Lévy, 2020) (see footnote 4).

In the case of the Hong Kong flu, the vaccine was developed only after the pandemic had peaked<sup>5</sup> in many countries<sup>6</sup>.

Bernard-Henri Lévy remarks that the memories of these pandemics have vanished except among the doctors. If this is understandable, in normal times, considering the number of events that have changed our societies since then, it is, nevertheless, curious that the COVID-19 pandemic hasn’t refreshed the memory of these events. Why, during the thousand debates and talk shows dedicated to the COVID-9 pandemic, the history of the Asian flu and Hong Kong flu have been hardly mentioned? Why didn’t the European countries look at the way that the two pandemics had been dealt with? What measures had been taken, namely in the phase that had preceded the vaccines?

As Bernard-Henri Lévy reminds us, the press of the time informed us broadly about the impact of the epidemics, but the philosopher also points out that, at the time, no government ever had the idea of stopping all economic, political and social life, contrasting with what has been done when facing COVID-19. In 1957 and in 1968, Western democracies did certainly care about human lives as they do now... but they didn’t consider that it was possible to impose lockdowns to their societies faced with a pandemic with a relatively low rate of mortality. Why, then, has the response to the pandemic been so different today- in spite of the clear damage to the economy? Why did the Western democratic countries follow a “model” to face the pandemic -the quarantine of cities and countries- that was developed and introduced in non-democratic China, instead of following other types of “models”, trying to combine health security, economic and democratic challenges, as South Korea, whose strategy was “test, trace and contain”, without imposing lockdowns (they even held elections during the pandemic)<sup>7</sup>; Taiwan, which controlled the epidemic without shut-

---

<sup>4</sup> <https://laregledujeu.org/2020/04/13/35946/la-memoire-oubliee-du-coronavirus/>.

<sup>5</sup> Estimations for Italy speak of 20.000 deaths- which would probably correspond to the death rate of COVID-19, considering that the in Italy now, the age group of 70 is more represented than in 1968. <https://www.agi.it/salute/news/2020-03-03/influenza-spaziale-1968-italia-morti-7302702/>.

<sup>6</sup> <https://www.britannica.com/event/1968-flu-pandemic>.

<sup>7</sup> South Korea was able to tame the coronavirus “without resorting to lockdowns of the kind imposed in the UK, Italy and France. In contrast to the panic-buying witnessed elsewhere, South Koreans for the most part stayed

ting theaters, department stores, and, most importantly, schools although large gatherings are discouraged, just through a very efficient Central Epidemic Command Center (CECC) composed of medical and public health experts that implemented surveillance, contact tracing, and isolation/quarantine of the sick; or Sweden, which didn't impose lockdowns and chose to adopt a more lenient approach, sharing non-mandatory recommendations that the population was strongly encouraged to follow (the recommendations focusing on self-discipline, solidarity, and patience)? Why was the Swedish "model" so criticised by many European mainstream media, when it represented an attempt to deal with the crisis in a democratic responsible way? It is a fact that Sweden had more deaths than Denmark, Norway and Finland, the Nordic countries, which introduced early lockdowns, but the country didn't have more deaths- proportionally- than Italy or Spain, which introduced "draconian" lockdowns<sup>8</sup>. In fact lockdown has meant different things in different places- as the article tries to show: the draconian lockdowns of Italy and Spain are very different from the "soft" lockdown of Denmark and Norway, or even of Germany.

## 2. China quarantines Wuhan and Europe becomes the epicentre of the pandemic

China informs the World Health Organization (WHO) about a cluster of cases of pneumonia in Wuhan, Hubei Province the 31st of December 2019, when all over the world people are celebrating the new year. The 23rd of January, in an attempt to halt the spread of the disease, which is doomed to fail, because confirmed cases are already announced in Thailand, Korea and USA, Wuhan is locked down by Chinese authorities in a draconian quarantine -with soldiers at the borders forbidding citizens to leave.

The first images of the Chinese city evoked a Hollywood science fiction movie about a dystopian future, which could by no means become the reality of Milan or Paris. However, these images- in their brutality and their frightening force, did not evoke just the future, they dig also into European memories, in a European forgotten past- the quarantine of the Italian cities during the plagues in the XVth, XVIth and XVIIth century<sup>9</sup>, or the erection of a "plague wall", or *mur de la peste*, across the Provence countryside in order to block any communication between Marseille and the rest of the country in 1720<sup>10</sup>. A past that had been stigmatised as "barbarian" or "medieval" by the civilised doctors of the XIXth century, the expression of societies that ignored democratic Constitutions, with their guarantees of individual rights. The authoritarian regime of China could implement meas-

---

calm. There were no reports of hoarding, and the only people queuing were waiting to be tested or to buy face masks ... or to vote. By the time the World Health Organization issued its plea in mid-March for countries to "test, test, test", South Korea had spent weeks doing just that, quickly developing the capability to test an average of 12,000 people – and sometimes as many as 20,000 – a day at hundreds of drive-through and walk-in testing centres. The mobile centres conducted the tests free of charge within 10 minutes, with the results were sent to people's phones within 24 hours. By mid-March more than 270,000 people had been tested." <https://www.theguardian.com/world/2020/apr/23/test-trace-contain-how-south-korea-flattened-its-coronavirus-curve>.

<sup>8</sup> The deaths per million are 447,99 in Sweden, 557,48 in Italy and 580,6 in Spain... <https://www.statista.com/statistics/1104709/coronavirus-deaths-worldwide-per-million-inhabitants/>.

<sup>9</sup> <http://www.rfi.fr/en/europe/20200407-17th-century-florence-when-lockdown-became-the-template-to-fight-pandemics-coronavirus-covid-19-plague>.

<sup>10</sup> The wall was built of dry stone, 2 m high and 70 cm thick, with guard posts set back from the wall. Remains of the wall can still be seen in different parts of the Plateau de Vaucluse.

ures that were unthinkable in democratic countries, where even health security could not be imposed by force. The French philosopher Bernard-Henry Lévy defined the Chinese answer to the epidemic as “Reinvention of an archaic measure”.

At the end of January 2020, no European citizen would imagine that the parks, museums, monuments, bars, restaurants, cinemas, theatres of his/her town would have been locked down... and that he/she would have needed an authorisation to go for a walk. Moreover, very few European citizens would have thought that the pandemic would have found its epicenter precisely in Europe and in the Western developed world.

The continent, rich in technology, proud of its achievements in the medical field, couldn't be badly stricken by an epidemic, hitting only the poor countries. Aren't the European countries endowed with public health systems that are considered the best in the world? Haven't the recent “new” viruses -such as those of SARS and Swine Flu- been easily contained in Europe? During the H1N1 (or “swine flu”) pandemic that occurred from 2009 to 2010, more than 12,000 Americans perished but hardly any Europeans. The pandemic infected just 125,550 people all over Europe, while the deaths could be almost counted on the fingers of one's hand: 43 deaths in France; 2 deaths in Italy, in 618 cases, 49 cases in Germany and no deaths<sup>11</sup>...

The Wuhan lockdown, imposing a huge price in terms of well-being, mental health and social life on the local population, was aimed to stop the virus contagion outside the Chinese province...It didn't stop, however, the virus spreading all over the world: since 31 December 2019 and as of 17 May 2020, 4 597 894 cases of COVID-19 (in accordance with the applied case definitions and testing strategies in the affected countries) have been reported, including 311 588 deaths. Of these cases 1 686 445 are in Europe, most of them in Western Europe, United Kingdom (240 161), Spain (230 698), Italy (224 760) and Germany (174 355). The deaths are 161 420: the five countries reporting most deaths are United Kingdom (34 466), Italy (31 763), France (27 625), Spain (27 563) and Belgium (9 005)<sup>12</sup>. What comes from Wuhan is not only the virus, but also the way to handle the epidemics:

Beijing therefore decides to implement a drastic measure but which, in hindsight, will prove not only decisive, but also a model to follow, appreciated by the WHO<sup>13</sup> and imitated by many other countries in the world<sup>14</sup>.

In fact, in most European countries, lockdowns have been chosen as the main measures to fight the epidemic. This “archaic form of answer” – as Bernard-Henri Lévy defined it – has been followed by a large part of the world – with few exceptions- namely Iran and the already mentioned South Korea, Taiwan, Sweden. It must be stressed, however, that the measures for the lockdown introduced by the different European countries present various *significant* nuances, which express different approaches to the relationship between state and citizens.

<sup>11</sup> [https://en.wikipedia.org/wiki/2009\\_swine\\_flu\\_pandemic\\_in\\_Europe](https://en.wikipedia.org/wiki/2009_swine_flu_pandemic_in_Europe).

<sup>12</sup> <https://infodujour.fr/sante/35174-coronavirus-situation-en-france-et-dans-le-monde-au-16-mai-2020>.

<sup>13</sup> “Pechino decide quindi di attuare una misura drastica ma che, con il senno di poi, si rivelerà non solo decisiva, ma anche un modello da seguire, apprezzato dall'Oms e imitato da tanti altri Paesi del mondo” (il giornale, June 5th, 2020).

<sup>14</sup> <https://www.ilgiornale.it/news/mondo/i-sacrifici-popolo-cinese-nella-lotta-demone-oscuro-1868037.html>.

The article focuses mainly the European responses and the issues that these unprecedented measures raise in respect to health security versus democracy, human rights, children's rights, right to education, economic disruption.

### **3. The European Health systems and their resilience in the face of the pandemic**

Most European countries have public health systems, whose mission is to ensure adequate care for all citizens mainly at the charge of the State: in this respect the health system is one of the core structures of the welfare state. This European health care system is very different from the United States' model that guarantees adequate treatment only to those who have individual insurance. Theoretically, then, every European citizen's health is protected by the public healthcare service. Having the same model doesn't mean having the same resources: when the pandemic arrived, the European healthcare systems revealed profound differences in their capacity to face the pressure of the large numbers of COVID-19 victims on the hospitals. In order to avoid the collapse of the healthcare systems, most European countries introduced some forms of lockdown (closing schools, companies, shops, cinemas and theaters, prohibiting gatherings...) and inviting citizens to stay at home.

There is a clear link between the most draconian lockdown measures and the high risk of collapse of the hospitals. The governments of the countries whose health systems showed sufficient medical resources and high capacities of receiving patients in intensive therapies estimated that it was not necessary to introduce draconian measures in the lockdowns. Even if they closed much of the countries' activities (but not all of them) and citizens were invited to stay at home, they were nevertheless allowed to go out without any certificate or any distance restriction.

On the contrary, the governments of the countries whose healthcare systems did not have the capacity to treat all possible patients, imposed draconian confinement on their populations. Consequently, the way the confinement of populations has been regulated, presents significant variations among the European countries- this has revealed the quality of democracy in each European country - in terms of the idea of the citizen-state relationships and the articulation between security and individual freedom.

The comparison between the Northern and Southern European countries has clearly revealed these differences. Germany and the countries of Northern Europe (Holland, Denmark, Norway, Finland, etc...) introducing a very soft lockdown, preserving as much as possible individual freedoms. This was made easier by the fact that their public health systems have appeared to be strongly resilient, always had the epidemic under control and were never saturated. In Italy, Spain and also France, the health systems were at risk of collapse due to the large burden of patients requiring intensive care. The lockdowns have been draconian – imposing huge limits to citizens' individual freedoms, on a scale going from Spain (the most draconian lockdown), to France, where measures were more mitigated. The Italian case is quite similar to the Spanish one. An interesting case is represented by Portugal, which, in spite of a weak healthcare system, devastated by years of austerity, opted for a soft lockdown, avoiding submitting citizens to the humiliation of constant police checks on their movements. Finally, we must remember that a Northern country- Sweden – chose a different approach, as we will see, rejecting the lockdown policies.

The healthcare systems crisis in the face of the pandemic also revealed the disastrous impact of the health policies that had been implemented in the last twenty years: neo-liberal reforms, promoting privatizations, reducing State investments, suppressing the number of doctors, nurses and of beds for patients. The 2008 crisis forced many European countries to introduce austerity policies, promoted by the European Union itself. The health systems were among the main victims of the state spending cuts, which have always been denounced and now, in the face of the pandemic disaster, even more so, by left-wing parties, such as *Podemos* in Spain or *La France Insoumise* in France. No wonder, since the advice given to the governments to invest in healthcare and medicine, coming from experts and institutions, had not been followed<sup>15</sup>.

#### 4. Italy, the first draconian “democratic” lockdown

The first European country affected by the epidemic, Italy, has regionalised public healthcare, presenting great differences in the services offered according to the areas (there is an internal “migration” of patients from South to North, in order to be treated for some pathologies, the local services having limited resources). Moreover, the healthcare system has been victim of brutal cuts since the 2008 crisis and the introduction of austerity policies, under the governments of Mario Monti, Gianni Letta and Matteo Renzi. The COV-19 epidemic struck the richest areas of the country- namely Lombardy- whose healthcare systems were considered “among the best in the world”. It is extremely sad -after over 30.000 deaths and a draconian lockdown that has destroyed so much of the Italian economy- to look at the Bloomberg 2018 ranking, which placed Italian healthcare in 4th place in the world for efficiency, second in Europe after Spain!

The latest Bloomberg Health Care Efficiency ranking has been published, which calculates on the basis of data from the World Bank, WHO, the United Nations and the IMF which are the most efficient health systems in the world by analyzing the relationship between costs and life expectancy. And our country makes a good impression by gaining two positions compared to the previous year. Hong Kong at the top. In Europe, only Spain overtakes us, which is third in the world. France in 13th place. Bad United Kingdom (35th place) and Germany (45th place). Usa thoroughly ranks at 54th, just before Bulgaria<sup>16</sup>.

So, in 2019, a certain Nucci Paolo published a book, edited by the University of Milan, titled, “The best Healthcare in the world, notes to know, understand the history of our health system and try to read its future (La migliore Sanità del mondo, appunti per conoscere, capire la storia del nostro sistema sanitario e provare a leggerne il futuro)”<sup>17</sup>.

<sup>15</sup> Since 2015, Bill Gates had warned about the risks of pandemic and the need to invest in healthcare, medicine and vaccines. For this reason, by the way, and for the interest of his foundation on vaccines, he is at the center of various theories, accusing him to be promoting a compulsory vaccination campaign aimed to control the world population.

<sup>16</sup> [http://www.quotidianosanita.it/studi-e-analisi/articolo.php?articolo\\_id=65817](http://www.quotidianosanita.it/studi-e-analisi/articolo.php?articolo_id=65817).

<sup>17</sup> [https://www.google.com/search?client=safari&channel=mac\\_bm&sxsrf=ALeKk00RkJwFmsramzTQhWnwGtb1SCrdbg%3A159135\\_0738670&source=hp&ei=0hXaXq3aJoTyaqTxxhJAB&q=Lombardia+sistema+sanitario+migliore+del+mondo&oq=Lombardia+sistema+sanitario+migliore+del+mondo&gs\\_lcp=CgZwc3ktYWIQAzoECMQJzoCCAA6BggjECcQEzoFCAAQywe6BwgAEAoQywe6BggAEBYQHjoiCCEQFhAdEB46CAGAEBYQChAeULALWNVrYOhvaAlwAHgAgAHhAogB2zCSAQkyNy4yNS4yLjGYAQCgAQGqAQdnd3Mtd2l6&scient=psy-ab&ved=0ahUKEwiti\\_W7s-rpAhUEuRoKHaQ4ARIQ4dUDCAo&uact=5](https://www.google.com/search?client=safari&channel=mac_bm&sxsrf=ALeKk00RkJwFmsramzTQhWnwGtb1SCrdbg%3A159135_0738670&source=hp&ei=0hXaXq3aJoTyaqTxxhJAB&q=Lombardia+sistema+sanitario+migliore+del+mondo&oq=Lombardia+sistema+sanitario+migliore+del+mondo&gs_lcp=CgZwc3ktYWIQAzoECMQJzoCCAA6BggjECcQEzoFCAAQywe6BwgAEAoQywe6BggAEBYQHjoiCCEQFhAdEB46CAGAEBYQChAeULALWNVrYOhvaAlwAHgAgAHhAogB2zCSAQkyNy4yNS4yLjGYAQCgAQGqAQdnd3Mtd2l6&scient=psy-ab&ved=0ahUKEwiti_W7s-rpAhUEuRoKHaQ4ARIQ4dUDCAo&uact=5)

It is only after the arrival of the epidemic, that to the term Best Healthcare in the World has been added a question mark:

Does Italy really have one of the best health systems in the EU and in the world?<sup>18</sup> The arrival of the new coronavirus in Italy has placed the quality of hospitals in our country at the center of public and political debate, often promoting our system. But is it really so?<sup>19</sup>

In fact, since the beginning of the epidemic, the healthcare system of Lombardy showed huge difficulties in dealing with the number of patients needing intensive care. And if the problems were so important in Lombardy – among the best healthcare systems of the country – what would eventually happen if the epidemic reached the South? Fearing the collapse of the whole healthcare system, the Italian government (center-left), counselled by a so-called Comitato Tecnico-scientifico (Technic -scientific Board), formed the 3rd of February and gathering a bunch of “experts”<sup>20</sup>, opted for the “Chinese” model of a draconian “lockdown”: citizens prohibited to go out without a certificate, and then only for strict necessity (buying food or health reasons), for a limited time, sitting outside on a bench even for a few minutes prohibited, jogging beyond 200 meters from home prohibited, all religious ceremonies prohibited, very high fines for non-compliance, police controls in the streets and... end of the right to education for the children, who were deprived of fresh air (being forced to stay at home) and social life... This type of confinement was first introduced in some areas of Northern Italy, then in the whole country, *independently* from the presence or not of cases of COVID-19 (even in areas where the virus wasn't present). The approach that has been followed represents a specific idea of the relationship between state and citizens, considered as irresponsible children that had to be controlled and sanctioned if they didn't obey to the orders, alternating stick and carrot, as Mr. Boccia, an Italian minister (relation with Regions), has declared recently.

The official government discourse justified the measures in the name of “*saving lives*”. According to this discourse, which was not based on specific scientific evidence, but on emotional arguments, even walking alone in the street or in a forest or on an empty beach was presented as a violation of the rules and a threat to other people's lives. The only “good” way to behave was staying at home (*I stay at home, io resto a casa*) – as the only effective way to save lives. In order to justify the huge sacrifice required that was not really justified with scientific arguments (how can I contaminate or be contaminated walking alone in a forest or on a beach?), the discourse became warmongering (the war against the invisible enemy, which could be hidden everywhere... even in a tree... given that in Tan-

---

<sup>18</sup> L'Italia ha davvero uno dei sistemi sanitari migliori in Ue e nel mondo? L'arrivo del nuovo coronavirus in Italia ha messo al centro del dibattito pubblico e politico la qualità degli ospedali del nostro Paese, promuovendo spesso il nostro sistema. Ma è davvero così?

<sup>19</sup> <https://www.agi.it/fact-checking/news/2020-02-27/coronavirus-sistema-nazionale- ssn-7243927/>

<sup>20</sup> This board include the head of the Civil Protection Angelo Borrelli, various scientists. It is defined as a cencile of wise men “at the service of the emergency”, but it is not transparent: In fact it is not always known who is part of the Committee and what decides. <https://www.linkiesta.it/2020/04/ comitato-tecnico-scientifico-coronavirus-lockdown/> There is in fact the high risk that political decisions are abandoned to technical experts who do not have the holistic vision of the country's problems.



zania a papaya<sup>21</sup> and a goat tested positive)<sup>22</sup> and nationalist: Italians were encouraged to put flags out of their balconies and to sing the national hymn in the evenings (from their balconies).

As a matter of fact, the Italian lockdown has been characterized by a large number of bureaucratic measures that had no scientific justification, as these two medical journalists remark:

Without prejudice to the need to slow down the contagion and the difficulty, in situations of epistemological darkness, to discern between what is effective and what is not, the Italian provisions have arrived at the absurd: ban on going out together for those who live in the same home; to walk alone in the parks or in the woods; to be outdoors; to get the kids out; to shop outside the neighborhood; to go to the beach. Absurdities of dubious constitutional integrity, which have criminalized the affections and family networks and forced clandestine territorial realities, which guaranteed the survival of the weakest and most marginalized groups. And which, consequently, could only be enforced by authorizing the controllers to abuse. Similarly, some of the hypothesized and widely mediated measures – washing the streets with ammonia, leaving the groceries outside the door for days, disinfecting the clothes you go out with – can only sound reasonable in a delusional project, and with horrible assonances, of sanitation of the world. The press has chosen to admonish and reinforce rather than explain and discuss critically” (Consigliere and Zavarone, 2020)<sup>23</sup>.

The two journalists point out the risk that the decisions – in respect to the lockdown – and, now, to the following phase post-lockdown – have been taken by the government, largely following the recommendations of the Technical-Scientific Board, whose members are not always known – without a democratic debate in the Parliament. Few voices – among politicians, intellectuals and the media – have dared to oppose the government’s draconian lockdown decision, the measures that have been introduced and the absence of a broad democratic debate in Parliament. The Mp Vittorio Sgarbi (center-right) and Sara Cunal (independent) are among the few. As far as intellectuals are concerned, we refer to the next chapter. Among the media, while mainstream media have strongly supported the government, alternative – or anti-system – media – as Byoblu – the citizens’ television-have found a new important audience among that part of the Italian population that considered the lockdown as a bad choice -for the terrible consequences on the economy and on the life of millions of Italian men, women and children.

This is how Byoblu describes the Italian lockdown:

We have never reached a level of deprivation of personal liberties as fierce as in this devastating 2020. We suffered the humiliation of seeing that in almost all parts of the world, governments left the fundamental freedoms of citizens unchanged, trusting in their sense of responsibility, as we were treated as whimsical and rebellious children, while real children (those who did not have a private park available) were rotting in small concrete apartments without anyone thinking about it. We have been detained, deprived of the possibility of exercising, deprived even of public parks, when it is

<sup>21</sup> <https://www.ilprimatonazionale.it/esteri/tanzania-capre-papaya-positivo-test-coronavirus-presidente-licenzia-consulente-sanitario-155515>.

<sup>22</sup> A few Italian newspapers reported the news that a papaya and a goat were positive to coronavirus in Tanzania...<https://www.youtube.com/watch?v=Dn79u2HgcTY>.

<sup>23</sup> [wumingfoundation.com](https://www.wumingfoundation.com) Stefania Consigliere e Cristina Zavarone Ammalarsi di paura. L’«effetto nocebo» dello #stareincasa e della malainformazione sul coronavirus Ruggie 2 giugno 2020.

clear that we are infected much more indoors than outdoors, respecting safety distances. We were terrified by the media that attributed the coronavirus to any death from any cause, only to have the relatives of the victims prove that they were wrong; we were scoffed if we dare to doubt<sup>24</sup>.

### 5. State of exception and bare life. Towards the Therapeutic State?

The introduction of the lockdowns in Italy, then in France and Spain, as in many non-European countries, such as India, for example, has been questioned by a number of intellectuals in respect to the relationship between state and citizens, the individual rights and the easy acceptance of the loss of freedom in the face of a threat. In the implementation of the lockdowns, the issue of self-certification and police control is not a detail, but an indicator of the type of relationship that may exist between citizens and the State<sup>25</sup>.

Without entering into the debate on the scientific evidence of the impact of the “lockdown” measures for the fight against the disease (the debate between doctors in favour of quarantines and their opponents existed in the 18th and 19th centuries<sup>26</sup>), the draconian lockdown limiting so much individual freedom – introduced first in China, at the beginning of the epidemic – then in Europe – something that had never happened in democracies – raises different problems in terms of proportionality of the threat to health compared to other factors (economic, social and psychological) and also in terms of rights (a right – to health that would be more important than all other rights, and, in the end, of democracy, given the banning of all gatherings, demonstrations, etc.)... Especially considering that this measure was new in the contemporary world:

The whole idea of isolating the healthy members of the population to counter the spread of a highly-contagious virus is delusional. There's no historical precedent to the policy at all. There was no lockdown during the Spanish Flu in 1918 (when 50 million died), no lockdown during the Asian Flu in 1957, no lockdown during the Hong Kong Flu in 1969, no lockdown during SARS in 2002, no lockdown during the Swine Flu in 2009, no lockdown during MERS outbreak in 2012, and no lockdown during Ebola epidemic in 2014 (Withney, 2020)<sup>27</sup>.

We have seen that Italy was the first European democratic country to introduce the draconian lockdown. No wonder that a few Italian intellectuals reacted first. In March 2020, the Italian philosopher Giorgio Agamben declared to an Italian newspaper:

<sup>24</sup> <https://www.byoblu.com/2020/05/05/la-sfida-cui-tutti-siamo-chiamati-a-rispondere-adesso/>.

<sup>25</sup> In Spain, for example: “The objective of the certificate of self-responsibility is for the citizens to be able to explain the reason for their displacement during the lockdown, and for the agents to be able to verify whether or not it is in accordance with reality and the legal cases allowed in the current situation of health crisis due to coronavirus. The document includes seven specific circumstances: acquisition of food, pharmaceuticals and basic necessities, assistance to a health center, service or establishment, travel to the workplace, return to the place of habitual residence, assistance or care for the elderly, minors, dependent, disabled or vulnerable, displacement to a financial or insurance entity and cause of force majeure or situation of need. In the event that there is a cause of force majeure or a situation of need, it must be specified which one.” [https://www.elnacional.cat/es/politica/coronavirus-detalles-documento-responsabilidad-llevar-desde-hoy-exit-casa\\_483666\\_102.html](https://www.elnacional.cat/es/politica/coronavirus-detalles-documento-responsabilidad-llevar-desde-hoy-exit-casa_483666_102.html).

<sup>26</sup> In the book *Contagion and the State in Europe, 1830-1930* the historian Peter Baldwin reconstructs, among many other aspects, the impact of the eighteenth-nineteenth century “debate” between “contagionists-quarantines” and their opponents on the strategies to contain devastating epidemics-pandemics such as cholera, smallpox, and syphilis.

<sup>27</sup> <https://www.unz.com/mwhitney/is-the-lockdown-is-the-greatest-policy-disaster-in-u-s-history/>.

From many sides, the hypothesis is formulated that we are actually experiencing the end of a world, that of bourgeois democracies, based on rights, the parliaments and the division of powers, which is giving way to a new despotism, that as for the omnipresence of controls and the cessation of all political activity, it will be worse than the totalitarianisms that we have known so far. American political scientists call it the Security State, which is a state in which “for security reasons” (in this case “public health”, a term suggested by the notorious “public health committees” during the Terror), any limit can be imposed on individual liberties)<sup>28</sup>.

Faced with the measures introduced in Italy, Agamben returned to some concepts elaborated in his thinking: the state of exception (now justified by the pandemic and the protection of health) and the naked life, reduced to a pure biological existence<sup>29</sup>.

What for a society the one that does not believe in anything more than that bare biological life, prepared to put aside, in order not to lose it, friendship, affection, convictions ... what for a society the one that has no other value than survival?<sup>30</sup>

In another interview, Agamben also warns of the excessive power of doctors in the various scientific committees consulted by governments:

It is always dangerous to trust doctors and scientists with decisions that are ultimately ethical and political. You see, scientists, rightly or wrongly, pursue their reasons in good faith, which are identified with the interest of science, and in whose name – history proves it –, they are willing to sacrifice any scruples of a moral order. I need not recall that under Nazism highly respected scientists led eugenic policy and did not hesitate to take advantage of the concentration camps to carry out lethal experiments that they believed were useful in advancing science and caring for German soldiers. In the present case, the situation is particularly puzzling, because in reality, even if the media hide it, there is no agreement among scientists<sup>31</sup>.

Echoing Agamben, the anthropologist Roberto Beneduce points at

the singular willingness” (expressed by the citizens) “to accept, even on the basis of stammering information, a state of exception, although this is only nowadays implemented in a disconnected way, although it is expressed chaotically, dispersed as it is among invisible sovereignties, supranational bodies, governments, regions, municipalities ...

And he continues:

From here we must start to understand how medicine and politics continue to intersect, and the power of diagnosis to invisibly penetrate bodies, behaviors, shaping our experience, as Rose (1989) suggested in reference to psychiatric diagnoses. Of course, all this happens today in a different way from the time when public hygiene, birth rate or mortality were the object of precise interventions by the State, and yet the rule continues to be the same: “between knowledge and power strategies there is no externality” (Foucault, 1976)<sup>32</sup>

<sup>28</sup> <https://www.quodlibet.it/giorgio-agamben-nuove-riflessioni>.

<sup>29</sup> <http://revistasantiago.cl/pensamiento/la-epidemia-vista-por-agamben/>

<sup>30</sup> Ibidem.

<sup>31</sup> [https://www.lemonde.fr/idees/article/2020/03/24/giorgio-agamben-l-epidemie-montre-clairement-que-l-etat-d-exception-est-devenu-la-condition-normale\\_6034245\\_3232.html](https://www.lemonde.fr/idees/article/2020/03/24/giorgio-agamben-l-epidemie-montre-clairement-que-l-etat-d-exception-est-devenu-la-condition-normale_6034245_3232.html).

<sup>32</sup> [http://www.treccani.it/magazine/atlane/cultura/Le\\_lezioni\\_di\\_una\\_pandemia.html](http://www.treccani.it/magazine/atlane/cultura/Le_lezioni_di_una_pandemia.html).

Beneduce mentions a “cahotic state of exception” – characterised by multiple sovereignties – in which medicine and politics intersect, which is not going to end up in totalitarianism. This “chaotic state of exception” raises, however, important questions, perfectly expressed by the French philosopher Bernard-Henri Lévy:

Il serait capital que, sans remettre en question l’union sacrée due à nos infirmières, infirmiers et autres personnels hospitaliers, nous mettions au programme de nos débats futurs la question de savoir quels privilèges, mais aussi quels droits et libertés, nous sommes prêts à sacrifier sur l’autel de notre rêve d’un État sanitaire nous guérissant de tout, jusqu’à la mort. Et puis, s’il est vrai que gouverner c’est, non seulement prévoir, mais choisir, il ne serait pas inutile enfin que nos décideurs aient le courage de dire ce que la mise à l’arrêt de la production coûterait, si elle se généralisait, en termes de destruction de richesse, donc de chômage de masse, donc de misère et de souffrance sociale et, donc, de vies humaines<sup>33</sup>.

Which liberties, which rights are we ready to sacrifice for a “Therapeutic State” (Etat sanitaire) that would cure all of us until our death? which will be the price to pay in terms of destruction of richness and well being for the lockdown?

Bernard-Henri Lévy concludes:

Sauf à céder à l’ivresse d’une guerre au virus dont on ne mesurerait pas les dégâts collatéraux, ce sont ces questions que doit poser une démocratie responsable et digne de ce nom (Bernard Henry Lévi, 2020)<sup>34</sup>.

In the criticisms addressed to the lockdown policies by several European intellectuals, two issues are intersecting each other: the risk of the abandon of the rule of law in name of health security and the rise of the technocratic power of the medical caste. The alarm in the face of the risk that the pandemic will be used by authoritarian governments to suppress people’s freedom- especially outside Europe- is given by the liberal Peruvian intellectual Mario Vargas Llosa<sup>35</sup>, even if he hopes that in the democratic countries the restrictions will be limited in time and will disappear with the end of the pandemic:

The coronavirus delights, it is true, all the enemies of freedom! It is the ideal pretext to reduce it and to allow the State to intervene in the field of our private lives. I observe the situation with concern, not only because of the appalling economic crisis which will follow, but by seeing these states which bluster by indexing these restrictions of freedom to the effectiveness against the virus. Still it should be demonstrated! (...) In our free world, if state control is accepted, it is only because the situation is extraordinary and we know it is temporary.

Clearly, states whose leaders already presented authoritarian tendencies are using the health crisis to strengthen their hand.

However, even democratic countries may be at risk of a shift towards a “Therapeutic state”, where a technocratic power would impose a broader control on citizens – for example through new informatics instruments aimed to protect them from illness:

<sup>33</sup> <https://laregledujeu.org/2020/04/13/35946/la-memoire-oubliee-du-coronavirus/>.

<sup>34</sup> Ibidem.

<sup>35</sup> <https://www.franceculture.fr/geopolitique/le-monde-dapres-ruptures-ou-accentuation-de-tendances-preexistantes-1>.

In recent weeks, we have clearly witnessed the phenomenon of medicalization of society, that is, the protection of one's whole life, which makes health an object coveted but alienated from the subject, whether suffering or not. Thus, autonomous reflection on health is denied, having already predetermined which values and codes it should respond to. Medicalization, in short, which entails the expansion of medical categories to all those areas of life that previously did not become part of it. This intrusive medicalization, which is accompanied by the omnipresent therapeutic state, has authoritarianism at its roots, aimed at social control; established by the technical rationality of medical knowledge and power<sup>36</sup>.

The term Therapeutic State has been originally developed by the work of the psychiatric Thomas Szasz<sup>37</sup>, but the critical voices make also reference to the work of Michel Foucault. Let's quote some of the Thomas Szasz words about the Therapeutic State:

The combination of the natural authority of the superiors, the natural nonconformity of the subordinates and their need to learn the rules of the game and to adhere to them, and the supreme importance of the welfare of the group (family, society, nation), which rests on conformity to social convention, form the template for religious, political, and medical justifications of coercive domination. Three familiar ideologies of legitimation result: theocracy (God's will); democracy (consent of the governed); and socialism (economic equality, "social justice"). In 1963, in *Law, Liberty, and Psychiatry*, I suggested that modern Western societies, especially the United States, are developing a fourth ideology of legitimation: "Although we may not know it, we have, in our day, witnessed the birth of the Therapeutic State" (212). Since then, in articles and books, I have described and documented the characteristic features of this polity: medical symbols playing the role formerly played by patriotic symbols and the rule of medical discretion and "therapy" replacing the rule of law and punishment (see Szasz 1965, [1970] 1977, 1980, 1982, 1984, 1994a, 1994b, 1995, 1996)." (Szasz 2001, p. 485)<sup>38</sup>

Szasz points out the fact that war metaphor has become congenial in thinking about illness and treatment:

In the case of infectious diseases—the microbe as alien pathogen threatening the host (the patient's body)—the war metaphor helps us understand the mechanism of the disease and justifies the coercive segregation (quarantine) of contagious persons, animals, or materials (Szasz, 2002, p. 488).

## 6. Health emergency and rule of Law

In respect to the Coronavirus crisis, the Law professor Paolo Becchi<sup>39</sup> has spoken of the "abolition of the rule of law in favor of the therapeutic state", being governed by an

<sup>36</sup> <https://www.radiocittafujiko.it/il-mondo-dopo-contro-lo-stato-terapeutico/>.

<sup>37</sup> Szasz T. (1994), *The Therapeutic State, Psychiatry in the mirror of current events*, Prometheus Books, New York. The work of Szasz focuses mainly psychiatry. His work aims to make evidence about the need to disarm psychiatrists, "much as the Founding Fathers disarmed priests. Nothing less can free us from the "benefits" and "harms" of the Therapeutic State." However, the concept of "therapeutic state" can be applied to the present context of the pandemia, when virologists decide the agenda of governments. <https://www.amazon.it/Therapeutic-State-Psychiatry-Mirror-Current/dp/0879752424>.

<sup>38</sup> Szasz Thomas, (2001), *The Therapeutic State, The Tyranny of Pharmacracy*, in *The Independent Review*, v. V, n. 4, Spring 2001, pp. 485–521.

<sup>39</sup> <https://formiche.net/2020/04/fase-2-becchi-governo-liberta/>.

executive who takes care of our health without giving us the opportunity to refuse treatment<sup>40</sup>. Becchi recalls as well how the abolition of the rule of law for the therapeutic state has devastating economic effects. From the health emergency we will move to the economic emergency, and this will create perhaps fewer deaths, but certainly many social problems.

The fact that problems do exist in respect to the rule of Law and the measures taken in the Italian lockdowns has been evoked in respect to the intervention of the very “moderate” president of the Constitutional Court Marta Cartabia, who’s recently recalled the principles of constitutional jurisprudence on fundamental rights.

There is no hierarchy of rights in the Constitution; there is no “more equal” right than others. The right to health is enshrined in article 32 (The Republic protects health as a fundamental right of the individual and a collective interest), but this is not a “tyrant” right. The Court stated that absolute law becomes a tyrant and that therefore it is necessary “to keep together what apparently could not find a balancing act, the protection of health, the environment, but also the right to work and the economic rights of the company. All good instances but which, if affirmed in an absolute way, break the social fabric, and the need to balance<sup>41</sup>.

According to Giuliano Cazzola, labor law expert, this is precisely what happened with the lockdown: the containment measures of the Covid-19 epidemic have transformed the right to health into a “tyrant” right, in the name of which all the other prerogatives that the Constitution recognizes have been suspended.

The Parliament is effectively de-authorized, it has become an organ of pure ratification of government decisions; important decisions for the life of citizens, for the economy, for the normal functioning of the institutions are made by the executive, through a secondary regulatory source that escapes both the control of Parliament and the acknowledgment by the Head of State; the exercise of jurisdiction is suspended; the right of active and passive electorate is suspended; citizens’ right to mobility is severely conditioned, so as to be impracticable; a sort of total but surreptitious criminal law has been created, with at least improper if not even illegitimate measures, the administration of which is subtracted from the judge and entrusted to the police and their discretion; the right to worship is suspended; the exercise of the right to express one’s thoughts is prohibited; family and interpersonal relationships must be subject to inadmissible prohibitions; the right to work and freedom of enterprise are limited<sup>42</sup>.

The right to health is enshrined in Article 32 (The Republic protects health as a fundamental right of the individual and an interest of the community), but this should not become a “tyrant” right.

The balance between rights has not been respected: the right to the health of the collectivity (art. 32) has been considered predominant in front of the individual rights that should be a priority. Cazzola doesn’t mention the violation of children’s rights – confined in their houses, deprived of the right to play in the open air and, de facto, deprived of the right to education in spite of the attempts by the government to implement distance

---

<sup>40</sup> Ibidem.

<sup>41</sup> [https://www.huffingtonpost.it/entry/le-misure-di-contenimento-hanno-trasformato-il-diritto-alla-salute-in-un-diritto-tiranno\\_it\\_5ea68082c5b6a30004e485db](https://www.huffingtonpost.it/entry/le-misure-di-contenimento-hanno-trasformato-il-diritto-alla-salute-in-un-diritto-tiranno_it_5ea68082c5b6a30004e485db).

<sup>42</sup> Ibidem.

learning. Unfortunately, as several paediatric doctors associations denounce, evidence is accumulating on the collateral damage caused to children by the consequences of the lockdown and above all of the prolonged closure of educational services and schools.

For all, except those few who can boast good technological equipment at home and parents able to accompany them in lessons and homework, an educational delay is accumulating, which for the majority (according to Save the Children and Sant'Egidio, at least 6 out of 10) is very relevant, and cannot be hidden behind the necessary distance teaching efforts. Educational damage is associated with manifestations of psychological distress, an increased risk of violence suffered or assisted, a reduction in the quality of food supplies, a reduction in qualifying and sometimes strictly medical support for children with disabilities or chronic diseases, naturally in close relationship with the quality and pre-existing offer of services, already lacking in many parts of Italy<sup>43</sup>.

In Spain too,

the lockdown has been among the strictest, and was no less strictly observed in the countryside than in cities. Outdoor exercise was banned and children under the age of 13 were not allowed to leave home for 45 days. Some Spaniards embraced the restrictions with inquisitorial fervour. The media began using the phrase “balcony police” to describe people who hurled insults at passersby who seemed to be breaking lockdown rules. In Madrid, even medical staff on their way to work were sometimes pelted with eggs<sup>44</sup>.

In Spain, Law professors and constitutionalists have asked the question whether “the state of alarm” that has been introduced in the country to face the pandemic, on the basis of the articles of the Constitution, could limit at this point the individual liberties, or what the government introduced was in fact “a state of emergency”<sup>45</sup>. Carlos Flores Juberías, Professor of Constitutional at the University of Valencia and the director of the magazine ‘Cuadernos Constitucionales’, is one of them. In an interview with *El Confidencial*, he detects a distortion of the terms established by the law, which caused, in his opinion, the replacement of what should be a regime of liberties subject to limits justified by the health crisis with a generic regime of limitations in which freedom is precisely the exception<sup>46</sup>.

According to Javier Albar García, magistrate of the Administrative Litigation Chamber of the Superior Court of Justice of Aragon, the constitutional and legal regulation of the state of alarm has been violated, exceeding its scope and content: “The state of alarm allows” a) Limit the movement or permanence of people or vehicles at certain times and places, or condition them to fulfill certain requirements “(article 11 LO 4/1981), but does not foresee that it can be absolutely prohibited. Here, the Government has inverted the equation, from a right with specific limitations to a deprivation of the right with exceptions”. And he continues: “Not only freedom of movement has been suspended. The rights

<sup>43</sup> <https://www.byoblu.com>.

<sup>44</sup> <https://www.theguardian.com/world/2020/jun/04/spain-la-rioja-small-town-one-of-europes-worst-covid-19-hotspots>

<sup>45</sup> must be stressed that the children's rights have been badly violated in Italy and Spain without any scientific evidence.

<sup>45</sup> represent a great risk of contagion that they would.

<sup>46</sup> [https://www.elconfidencial.com/espana/2020-04-14/entrevista-carlos-flores-estado-alarma-coronavirus.libertad-limites\\_2544576/](https://www.elconfidencial.com/espana/2020-04-14/entrevista-carlos-flores-estado-alarma-coronavirus.libertad-limites_2544576/).

to assembly and demonstration (articles 19.1 and 21.1. CE) have been consequently suspended, as groups are not allowed to form on the street, nor in the private sphere, with its sequel of restriction of political liberties<sup>47</sup>”.

The question of the proportionality between disease and measures is very important in face of a government that takes such draconian measures. As the aforementioned Spanish professor Carlos Flores Juberias asks: (The state of alarm) “Was declared at the right time, or should it have been declared earlier, when the number of those affected was lower and the severity of the measures to be adopted could have been also less? Are these measures within those that the law allows to adopt under a state of alarm? Are they proportional to the intended objective or could this have been achieved with less damaging measures for fundamental rights? Are they being effective in fighting the pandemic? And the effects that they are generating on the productive system, do they also justify their adoption? Of course, some of these questions are still unanswered today. But with respect to others, on the other hand, it does begin to be peremptory to reflect<sup>48</sup>”.

In France, various constitutionalists have been very critical of the lockdown measures. Dominique Rousseau, professor of constitutional Law at Paris I Sorbonne, criticises the excessive role of doctors in the decision processes that have been taken to fight the pandemic. The judges are the custodians of the individual liberties, who should define a balance between the need to protect public health and the preservation of individual liberties. Doctors are experts: they cannot take decisions in this important matter<sup>49</sup>. Also in France, the National Advisory Commission on Human Rights revealed its concern that “The state of health emergency does not justify such disproportion in the violation of rights.” To identify possible violations by the authorities, an observatory has been established. Commission President Jean-Marie Burguburu has told the newspapers *Le Monde* and *Liberation*:

With the establishment of a state of health emergency to fight the Covid-19 epidemic, our rule of law is undermined by exceptional measures that they violate our fundamental rights – freedom of movement, assembly, work... Our mission is to verify that the application of these measures continues to be necessary, proportionate, exceptional, non-discriminatory and temporary. And to monitor possible violations of rights and freedoms. This instrument, created with urgency, allows immediate feedback from the associations in the field. Our recommendations aim to alert authorities, hoping they will react quickly<sup>50</sup>.

## **7. A proportional answer in the face of the epidemic? The role of “media terrorism”**

The question of the proportionality between the disease and the measures taken is crucial in order to have a relatively objective judgment in respect to the choices done and, eventually, not to repeat the same errors in the future.

<sup>47</sup> [https://www.lespanol.com/opinion/tribunas/20200418/excepcion-encubierto/483321669\\_12.html](https://www.lespanol.com/opinion/tribunas/20200418/excepcion-encubierto/483321669_12.html).

<sup>48</sup> [https://www.elconfidencial.com/espana/2020-04-14/entrevista-carlos-flores-estado-alarma-coronavirus-libertad-limites\\_2544576/](https://www.elconfidencial.com/espana/2020-04-14/entrevista-carlos-flores-estado-alarma-coronavirus-libertad-limites_2544576/).

<sup>49</sup> <https://www.franceculture.fr/geopolitique/le-monde-dapres-ruptures-ou-accentuation-de-tendances-preexistantes-1>.

<sup>50</sup> [https://www.liberation.fr/france/2020/05/01/jean-marie-burguburu-l-urgence-sanitaire-fait-passer-la-justice-au-second-plan\\_1787028](https://www.liberation.fr/france/2020/05/01/jean-marie-burguburu-l-urgence-sanitaire-fait-passer-la-justice-au-second-plan_1787028).



Objectively COVID 19, however serious and anomalous, represents a small percentage of the risk of death that each of us faces, each day of his life, knowing that the dreaded event will occur on a certain day and with increasing probability with the years that go by. This has nothing to do with judging the severity of the disease, which in fact causes very variable damage, ranging from a simple cold to the most egregious death, but it has to do with the political and media representation of the virus, with the language of “war” used by European politicians, with the media definition of the virus as “invisible enemy”, with the chilling images of hospitals and patients<sup>51</sup>.

Gilberto Corbellini, professor of History of Medicine in the Sapienza University in Rome declares:

At the beginning, an unjustified fear spread, in the wake of the emotion aroused by communication. It was the most mediated virus in the history of medicine. If there is one thing you can be sure of, it is that this virus does not pose a threat to the species, as someone has said. When I look at the numbers, we also assume that they are 100 million infected, I think: for the Asian in 1958, we had between one and three million deaths, with over 500 million cases<sup>52</sup>.

Providing a reminder of the 1957 and 1968 epidemics, Bernard-Henri Lévy analyses the positive aspects of the measures taken with this pandemic:

The planet, first, has progressed. It considers unbearable the hecatombs which appeared yesterday in the natural order of things. The concern for public health is made a sovereign task of the States in the same way as security or questions of peace and war between nations. Huge resources are mobilized there for, as with AIDS, which has caused, by the way, a total of 25 million deaths, invent remedies and vaccines. And humanity, as one man, puts life before the economy. That’s wonderful<sup>53</sup> (Lévy 2020).

Nevertheless, on the other side, Lévy considers that:

too much is being done on the subject of the “unprecedented pandemic. We are mistaken when we are told that we are facing, with this Covid-19, the “worst health disaster in a century.

And he points out very crucial questions:

We should ask ourselves, all together, if the just fight against the epidemic really requires the black-out, in our heads, on the return of Daesh to the Middle East, the progress of the Russian and Chinese empires or the fatal deconstruction of the European Union<sup>54</sup>.

<sup>51</sup> <https://comedonchisciotte.org/la-sospensione-dellincredulita-nella-grande-truffa-della-pandemia/>.

<sup>52</sup> [https://www.huffingtonpost.it/entry/come-finisce-una-pandemia-quando-la-gente-si-stanca-del-virus-o-quando-non-ce-piu-rischio\\_it\\_5ec3de33c5b68f63e9cc9d7a?utm\\_hp\\_ref=it-homepageG](https://www.huffingtonpost.it/entry/come-finisce-una-pandemia-quando-la-gente-si-stanca-del-virus-o-quando-non-ce-piu-rischio_it_5ec3de33c5b68f63e9cc9d7a?utm_hp_ref=it-homepageG).

<sup>53</sup> (La planète, d’abord, a progressé. Elle juge insupportables des hécatombes qui paraissaient, hier, dans l’ordre naturel des choses. On y fait du souci de la santé publique une mission régaliennne des États au même titre que la sécurité ou les questions de paix et guerre entre nations. On y mobilise des moyens gigantesques pour, comme avec le sida qui a fait, soit dit en passant, un total de 25 millions de morts, inventer remèdes et vaccins. Et l’humanité, comme un seul homme, fait passer la vie avant l’économie. C’est magnifique).

<sup>54</sup> (Il faudrait que nous nous demandions, tous ensemble, si la juste lutte contre l’épidémie nécessite vraiment le black-out, dans nos têtes, sur le retour de Daesh au Proche-Orient, le progrès des empires russe et chinois ou la fatale déconstruction de l’Union européenne).

Both Corbellini and Lévy denounce the role of the media in spreading terror about the pandemic. They are not an isolated voice. Critics to the campaign of terror that the media have promoted, come from different sources. In Italy, the Italian Society of Psychologists has warned about media terrorism in respect to coronavirus.

Besides the virus, which we all know by now, like Covid19, there seems to be another virus, which is gripping our lives: we are talking about the virus of fear, which also seems to be fueled by what we see every day, on TV and in various talk shows : we are subjected to a media terrorism made of sensationalist headlines, ad hoc news and war bulletins; this can only generate feelings of anxiety and fear in us<sup>55</sup>.

As a matter of fact, the COVID19 virus received unprecedented media coverage. This is the first pandemic of the global village, in a world that has ceased to be global due to the exchanges of travelers crossing airports, but continues to be so through internet networks... As borders close and planes remain on the ground, what remains of globalization is the media, ubiquitous in the homes of inmates. This supremely mediated pandemic has occupied the networks of the world. The virus has eliminated all other issues – the attacks by Isis on Ivdil, the war in Yemen, the condition of Syrian refugees on the Greek islands.

All over the world, the media have a serious responsibility in this type of coverage, concentrated on the virus as a terrific enemy, ignoring all the important events taking place in the world.

The hysterical 24-7 coverage has people so terrified they've locked themselves in their homes inflicting catastrophic damage on the economy. That disaster never would've taken place if the media hadn't focused all their energy on scaring people to death (Withney, 2020)<sup>56</sup>.

We quote again Bernard-Henri Lévy:

The news channel showcrates would have to rethink the unnecessarily anxiety – provoking staging of a global and daily death toll that we have never been subjected to, for example, for cancer victims<sup>57</sup>.

As a consequence of the media coverage, the idea shared by the majority of the populations subjected to very strict lockdown – forced to stay at home – is that we face a monster of terrifying dimensions, from which we can only defend ourselves with the extreme measure of confinement and social distance from waiting for the panacea of the mass vaccine, possibly mandatory. In this scenario there are no spaces for civic participation of young people (who are known to be rarely victims of the disease) for solidarity actions, support for vulnerable groups, children deprived of school, or even support for the police, to explain, pedagogically, the importance of social distancing.

The “terror” against the virus alters the normal priority scale of life, dwarfing any other primary value that is not the mere physical survival of the here and now (the bare life

<sup>55</sup> <https://psicologi-online.it/terrorismo-mediatico-quali-effetti/>.

<sup>56</sup> <https://www.unz.com/mwhitney/is-the-lockdown-is-the-greatest-policy-disaster-in-u-s-history/>.

<sup>57</sup> (Il faudrait que les showcrates des chaînes d'information en continu repensent la mise en scène, inutilement anxiogène, d'un décompte des morts, planétaire et quotidien, que l'on ne nous a jamais infligé, par exemple, pour les victimes du cancer“).

of Giorgio Agamben), and not that of future generations, who are left with the rubble of ruined economies.

Experts in all sectors bring us pedantic analyses, aimed above all at marking their place in the media space. Articles abound, adding words to words. The interpretations and future scenarios resemble – in their contradictory statements – the incipit of Dickens's novel: a Tale of the Two Cities: it was the best of times, it was the worst of times: everything will change; all will remain the same; societies will be better, societies will know barbarism; ecology will guide political decisions, the crisis will force governments to abandon the ecological transition...

What will happen to borders? Will they open up again in an imperative of universal brotherhood? Or does an Orwellian universe await us, under the control of Big Brother, prefigured by the lockdown to which so many populations are subjected even in democratic countries (Harari, 2020)<sup>58</sup>?

### **8. The example of Germany, the Northern European Countries and Sweden. Can there be a democratic management of pandemics?**

The questioning about the legitimacy of a centralized and militarized management of the epidemic, as the one that China followed, ignoring the human rights of the people that were confined (and all the risks of psychological problems), a model that was, unfortunately, accepted by WHO, and the more acceptable adaptations of the draconian lockdowns introduced in some European countries (namely Italy and Spain, partly France) has just started. It must be stressed that the debate about the proportionality between epidemiological contention at any cost, on one side, and citizens freedom and socioeconomic preservation, on the other side, are, in many ways, the extension (the current version) of the 19th century debate between anti-quarantinists and pro-quarantinists.

Among the countries that have shown that the disease can be overcome or at least controlled without the imposition of strict confinement, are the countries of Northern Europe, Holland and especially Sweden. None has imposed confinement, although restrictions on mobility and social distance have been imposed, especially in Denmark and Norway, and all have had success in containing the epidemic, which has already translated into a gradual and slow reopening of society in these two countries.

Sweden has adopted a milder line against the coronavirus than the rest, following the criteria of the health authorities, with many recommendations and some restrictions, but without closing schools, kindergartens, bars or restaurants, although setting limitations on activity. The model chosen by the Swedish PM Stefan Lofven and by Anders Tegnell, Sweden's government epidemiologist and architect of its coronavirus containment strategy is based on an assumption that the virus would be around for a long time – a fair assumption considering we don't yet have a vaccine – rendering any short-term lockdowns effectively useless.

Far from the figures for Spain, Italy or France, Sweden (with just over 10 million inhabitants) nevertheless exceeds 5,000 deaths, with a death rate that is double that of Denmark and four times that of Norway and Finland.

---

<sup>58</sup> <https://www.ft.com/content/19d90308-6858-11ea-a3c9-1fe6fedcca75>.

However, as the debate around what might constitute a more “sustainable” model for dealing with the outbreak rages, the coming back of the virus is clear in countries that have tried to introduce a “new” normal after the lockdown. This is clearly the case in Spain, a country that had done a strict lockdown, and that, after a period of “new” normal (with masks and other restrictions), experience so coming back of the virus and sees its economy bound towards disaster.

Sweden is an atypical case on the European scene that has shown how individual freedom can be combined with protection of the health of citizens and the rule of law, in a collaboration between politics and scientists<sup>54</sup>. The Swedish model has been praised by Mike Ryan, the WHO’s top emergency expert, who considers it should be followed especially by countries that are beginning to relax the restrictions, which become unsustainable after a month and a half. “I think if we want to achieve a new normal, Sweden represents a model to return to a society in which we do not have confinements”, he said.

In spite of the attacks to Sweden by most Italian media, some Italian scholars, after the Italian experience, where the lockdown has provoked a dramatic fall in the economy (the GP has fallen of up to 15%), provoking a drama for millions of Italians, increased poverty, and already some suicides, recognise that the Swedish choice might have been the best<sup>59</sup>.

The evidence they had available said that it was much wiser to go in that direction, risking paying with a certain number of deaths, which were more than what they expected and recognized it. They are also intellectually more honest than our politicians and experts. They assessed that the damage would have been greater if they were in a condition of having one lockdown after another and choking in front of a virus whose lethality, however, is still hardly understood<sup>60</sup>.

After the lockdown, Italy has quite successfully contained the virus for a few months, but, in August, in front of growing new cases, they have been forced to introduce restrictive measures, some of which clearly absurd, namely in terms of masks, mandatory outdoors from 6 p.m. to 6 a.m.. Matteo Bassetti, Director of the Clinic of Infective Diseases in Genova had this comment:

know that in Italy the virus works and infects only in the evening and at night. During the day, however, he rests. a baker virus? I laugh so as not to cry<sup>61</sup>.

Even in the UK, after the disaster of the management of the COVID-epidemic, which has produced a high number of deaths and an economic collapse, critical voices, supporting the Swedish model, have appeared, as the one of Allister Heath who, in the Telegraph, argued that Sweden’s success at fighting the virus while minimizing economic damage elu-

<sup>59</sup> Moreover, looking at the comments on the articles published on mainstream media, more and more citizens criticise the government and support the Swedish model...For example, the «Corriere della sera» published an article that criticised the Swedish model, attributing more deaths than to the other European countries (in fact manipulating the data). The comments of the lectors were mostly in favour of the Swedish model and against the journalist.

<sup>60</sup> [https://www.huffingtonpost.it/entry/come-finisce-una-pandemia-quando-la-gente-si-stanca-del-virus-o-quando-non-ce-piu-rischio\\_it\\_5ec3de33c5b68f63e9cc9d7a?utm\\_hp\\_ref=it-homepage](https://www.huffingtonpost.it/entry/come-finisce-una-pandemia-quando-la-gente-si-stanca-del-virus-o-quando-non-ce-piu-rischio_it_5ec3de33c5b68f63e9cc9d7a?utm_hp_ref=it-homepage).

<sup>61</sup> <https://www.ilgiornale.it/news/cronache/bassetti-politica-terrore-non-serve-quarantena-chi-torna-1883932.html>

cidates the depth of the British medical establishment's incompetence, as it was Britain's health experts whose advice PM Johnson assiduously followed:

So now we know: Sweden got it largely right, and the British establishment catastrophically wrong. Anders Tegnell, Stockholm's epidemiologist-king, has pulled off a remarkable triple whammy: far fewer deaths per capita than Britain, a maintenance of basic freedoms and opportunities, including schooling, and, most strikingly, a recession less than half as severe as our own (...). Allister Heath (2020/08/12).

Allister Heath considers Tegnell as one of the few genuine heroes of this crisis: he identified the correct trade-offs, because he chose the best option, an approach that

involves imposing proportionate restrictions to facilitate social distancing, banning certain sorts of gatherings while encouraging and informing the public. The Swedes pursued a version of this centrist strategy: there was a fair bit of compulsion, but also a focus on retaining normal life and keeping schools open. The virus was taken very seriously, but there was no formal lockdown.

The third option is the full-on statist approach, which imposes a legally binding lockdown and shuts down society. Such a blunderbuss approach may be right under certain circumstances – if a vaccine is imminent – or for some viruses – for example, if we are ever hit with one that targets children and comes with a much higher fatality rate – but the latest economic and mortality statistics suggest this wasn't so for Covid-19. Allister Heath (2020/08/12).

The result of the Swedish policy was relatively moderate damage to the economy:

Almost all economists thought that Sweden's economy would suffer hugely from its idiosyncratic strategy. They were wrong. Sweden's GDP fell by just 8.6 per cent in the first half of the year, all in the second quarter, and its excess deaths jumped 24 per cent. A big part of Sweden's recession was caused by a slump in demand for its exports from its fully locked-down neighbours. One could speculate that had all countries pursued a Swedish-style strategy, the economic hit could have been worth no more than 3-4 per cent of GDP. That could be seen as the core cost of the virus under a sensible policy reaction.

By contrast, Britain's economy slumped by 22.2 per cent in the first half of the year, a performance almost three times as bad as Sweden's, and its excess deaths shot up by 45 per cent. Spain's national income slumped even more (22.7 per cent), and France's (down 18.9 per cent) and Italy's (down 17.1 per cent) slightly less, but all three also suffered far greater per capita excess deaths than Sweden. The Swedes allowed the virus to spread in care homes, so if that major failure had been fixed, their death rate could have been a lot lower still. Allister Heath (2020/08/12).

As a matter of fact, there is no dichotomic opposition between "saving lives" and "saving the economy", as the supporters of the lockdown argue. On the contrary, both the «Economist» and the «Financial Times» have insisted on the fact that saving lives has also economic advantages...and that in any case, the analysis costs-benefits of each provision taken must be carefully analysed. What is important is to find the right point of balance...When the European countries began to abandon the lockdown, some German politicians asked for more balance between the health aspects and the economic and social aspects in the measures to be taken in the face of the pandemic.

The Parliament Speaker Wolfgang Schaeuble called it "a mistake to subordinate everything to the protection of human life." "When I hear that everything has to give in to the defence of life, I have to say that this is not an absolute truth. Fundamental rights place

limitations on each other. If there is absolute value in our constitution, it is human dignity, "Schäuble said in an interview with the newspaper «Der Tagesspiegel» (26 April 2010). "This is inviolable, which does not exclude that we have to die".

Schäuble argues that in the current crisis decisions should not be left entirely to virologists since the economic, social and psychological consequences must also be considered. "To paralyze everything for two years would have terrible consequences".

According to the leader of the Greens in the Bundestag, Katrin Goering-Eckardt, Schaeuble is right because "a life must be lived". He also referred to the untouchability of human dignity, guaranteed by the German Constitution.

The idea that draconian lockdowns represent an overestimation of the damage to health and an underestimation of the economic and social damage, as a vulnus in the rule of law and for democracy begins to make its way in Europe.

The question is: to what extent is democratic management of the pandemic possible - like the Swedish one - with the participation of the population in the effort, while guaranteeing the lowest possible number of victims?

## 9. What next? Freedom over fear

In May, protests against coronavirus lockdown measures spread in the UK and across Europe. According to the mainstream media, participants go from the extreme left to the extreme right. However, looking at the description that the French journal *Le Monde* of a recent demonstration in Germany, Constitution and democracy seem to be the main topics: "At ten euros the T-shirt crossed out with the word "Grundgesetz" ("Basic Law"), the young woman is ready to crack. But his companion prefers the other model, the one where it is written: "Don't give [Bill] Gates a chance!"<sup>62</sup> They won't buy either. But the seller still managed to pass on a leaflet to them. Above: a photo of three pawns, one black, one red and one yellow, the colors of the German flag. And then this sentence: "Who falls asleep in a democracy, wakes up in a dictatorship"<sup>63</sup>.

In London protesters displayed placards with words as Freedom over fear... which is not especially an extreme right slogan. Even if some conspiracy theories may fuel the protests, the deep causes have mainly to do with democracy.

In the USA, as well, reactions against the lockdowns have been frequent: "Lockdowns are meant to condition people to obey without question. A nation of people who just do what they are told by the "experts" without question is a nation ripe for a descent into total tyranny." Declared the libertarian Ron Paul<sup>64</sup>.

<sup>62</sup> Bill Gates' role in the promotion of vaccines is very controversial in the public debate. See the article of James Corbett: "The takeover of public health that we have documented in How Bill Gates Monopolized Global Health and the remarkably brazen push to vaccinate everyone on the planet that we have documented in Bill Gates' Plan to Vaccinate the World was not, at base, about money. The unimaginable wealth that Gates has accrued is now being used to purchase something much more useful: control. Control not just of the global health bodies that can coordinate a worldwide vaccination program, or the governments that will mandate such an unprecedented campaign, but control over the global population itself." (James Corbett, *The Off-Guardian*). <https://off-guardian.org/2020/05/18/watch-bill-gates-and-the-population-control-grid/>.

<sup>63</sup> [https://www.lemonde.fr/international/article/2020/05/17/coronavirus-a-stuttgart-des-opposants-manifestent-contre-les-mesures-liberticides\\_6039917\\_3210.html](https://www.lemonde.fr/international/article/2020/05/17/coronavirus-a-stuttgart-des-opposants-manifestent-contre-les-mesures-liberticides_6039917_3210.html).

<sup>64</sup> <https://www.unz.com/mwhitney/is-the-lockdown-is-the-greatest-policy-disaster-in-u-s-history/>.

In Italy, demonstrations of owners of restaurants and bars are taking place in many cities. New movements – such as the orange jackets – are born: they protest against the way how the all crisis has been managed: the risk of social unrest is very high.

Citizens have realised that the situation they have found themselves in because of measures for prevention of Covid-19 virus epidemic raises the question of whether European societies have embarked on a “therapeutic state” that is more authoritarian and, damaging the economy, end up producing more inequalities. If the idea of protecting the most vulnerable groups of the population is noble, government policies of lockdowns produce huge damage on other vulnerable groups, such as women who are victims of domestic violence, children deprived of education, precarious workers, etc...

Even if many citizens have accepted such measures to be urgent, their prolongation is worrying and many become aware that must by no means they must accept them as normal. Such radical restricted fundamental rights and freedoms should be extremely limited in time.

Doubts have also been raised on the systems of informing the public that should be particularly accurate, providing access to credible information, enabling free, critical and responsible operation of the media, and setting the requirements for high standards of public communications, especially for those with decision-making powers. This hasn't so far been the case.

The possibility to use the crisis to strengthen democracy and solidarity in social relations, passes *necessarily* by a rapid end of the state of exception and the therapeutic state.

It passes also by the re-establishment of the right relationship between politicians, constitutional judges and experts from the medical sector. Some words must be spent about the role of science during all the crisis. In front of the painful show of virologists, epidemiologists, medical doctors fighting and defending opposite theories<sup>65</sup> (this was especially bad in Italy, but it took place even in France, namely around the use of a specific medicine, the hydroxychloroquine and in the UK), it is important that “Science” does not proclaim dogmas, but accepts to question itself civilly. Refuting – of course, with the burden of proof – “truth” taken for granted is by no means unscientific<sup>66</sup>. Political representatives have a responsibility to ensure an anti-dogmatic environment conducive to a free, transparent and conflict-of-interest scientific debate, as a guarantee of real progress in the knowledge and well-being of society.

Even if European politicians cannot admit the great errors that have been made, voices that suggest the lockdown is an experience that shouldn't -in any case- be repeated, do appear. In a recent article, a journalist of the French newspaper Les Echos, Serge Michel, speaks of “confinement” as a solution dépassée (outmoded). “The cost of confinement was exorbitant, both economically and socially. It was the price to pay to face a situation unprecedented in history. Today, we know that only cognitive immunity will allow us to face an epidemic<sup>67</sup>”.

<sup>65</sup> As an Italian journalist -Vittorio Feltri has declared: “I am scared. The virologists, who are certainly respectable people, are many. They went on television against each other so I never understood which of them was right and who was wrong – remark – It is clear, I was thrilled from all this. They should stay instead of in television studios in research laboratories, so virologists would perhaps find a vaccine that will free us from the nightmare of the coronavirus.

<sup>66</sup> <https://www.liberoquotidiano.it>.

<sup>67</sup> [https://www.lesechos.fr/idees-debats/cercle/le-confinement-une-solution-depassee-1206017#utm\\_source=newsletter&utm\\_medium=email&utm\\_campaign=idees2\\_cercle-20200527](https://www.lesechos.fr/idees-debats/cercle/le-confinement-une-solution-depassee-1206017#utm_source=newsletter&utm_medium=email&utm_campaign=idees2_cercle-20200527).

Even the French Scientific Council that has so far advised the government during the epidemic, considers that confinement should be avoided in the future<sup>68</sup>. In an interview with the Parisian, Professor Delfraissy, President of the Scientific Council, estimated that “whatever happens, we will not be able to redo a general confinement in France”. “The first time, it was essential, we had no choice, but the price to pay is too heavy,” he added.

“The population would certainly not accept it, the economic consequences would be major and, even from a health point of view, this is not desirable”, he argued, recalling “that apart from Covid, there were all the other patients who had delays in diagnosis during this period”. “After we say that, what do we do if the situation gets worse?” So there needs to be a big prevention plan” he concluded.

Even in the case of the diffuse resumption of the epidemic, the confinement shouldn't be reintroduced<sup>69</sup>, “for reasons of health, societal and economic issues”. Even in face of the “Disaster scenario, when the epidemic reaches a critical stage. The Council shows doubts about a possible new lockdown. “The Council nonetheless warns of the impact of such a serious decision on the health of other patients, the economy and society. “This scenario 4 must absolutely be avoided but it cannot be eliminated, hence the importance of anticipating,” The Council finally leaves the decision to the politicians, opening the way to a possible choice of a “Swedish model” or something in between”. In this situation, the public authorities will have to define the objective: limit the Covid-19 mortality at all costs – with immediate containment – or else assume an excess mortality linked to the setting in tension of hospital resuscitation.

It is definitely too early to give a final judgement on the European experience of the lockdowns. Nevertheless, copying the Chinese model – with draconian lockdown measures as Italy did – followed by Spain and partly by France – stretching at such a point the democratic freedoms, wasn't probably the best choice, considering that other options did exist – as South Korea and Taiwan had shown, the Swedish approach and also the “soft” lockdown of Germany and the Northern European countries: at the end of the day, many of these countries have reached better results or, as Sweden, better results – in terms of saving lives – than Italy or Spain.

Sacrificing practically all the rights, recognised by democratic Constitutions, in the name of the right to health (and just for the victims of coronavirus, considering that the other sick people were no longer correctly attended), has been definitely too high a price to pay. Moreover, we still do not know the dramatic economic consequences and, eventually – especially in Italy – the social unrest that is growing.

Let's hope that, in the difficult post-lockdown phase, the “therapeutic state” – with its experts – will not try to impose – dogmatically – the mantra of social distancing, intervening not merely in the physical distance in public spaces, but also in the relational life of the individuals. There again, Italy has introduced some dangerous measures, aimed to control the types of relations people have: the state doesn't have to decide who are the persons I am authorised to visit or to host in my car, as the Italian rules still establish. This

---

<sup>68</sup> [https://www.lesechos.fr/economie-france/social/coronavirus-et-deconfinement-quatre-scenarios-et-un-plan-pour-se-preparer-au-pire-1208361#utm\\_source=newsletter&utm\\_medium=email&utm\\_campaign=nl lec\\_18h-2020060\\_4](https://www.lesechos.fr/economie-france/social/coronavirus-et-deconfinement-quatre-scenarios-et-un-plan-pour-se-preparer-au-pire-1208361#utm_source=newsletter&utm_medium=email&utm_campaign=nl lec_18h-2020060_4).

<sup>69</sup> [https://www.lemonde.fr/planete/article/2020/06/05/l-epidemie-de-covid-19-est-controllee-en-france-declare-le-president-du-conseil-scientifique\\_6041844\\_3244.html](https://www.lemonde.fr/planete/article/2020/06/05/l-epidemie-de-covid-19-est-controllee-en-france-declare-le-president-du-conseil-scientifique_6041844_3244.html).



is even more than a “therapeutic” state... it shifts towards a sort of “ethical state” (that imposes some rules with the strength of religious dogma, while by the way, has forbidden religious ceremonies).

The democratic approach must prevail in this phase of “life with the virus”. A dogmatic approach of social distancing would forever sanction

a universal and devastating anthropological modification, with the indistinct demonization of otherness and the celebration of digital egotism, existential atomism and dematerialisation of reality.” (E. Lorenzi, 2020)<sup>70</sup>.

We can hope that the resilience of Homo sapiens and of the Aristotelian “zoon politikon” will be stronger than the Orwellian universe that might be around the corner with the rise of the “therapeutic state”.

As Janet Daley (2020) beautifully writes:

The material privations that are being imposed on our society may be nothing like as severe as those of the Second World War, nor are they likely to last anything like so long. But they are much more unnatural and especially alien to the human impulses that prevail in times of anxiety and loss of life. With very little apparent concern or consideration of the possible consequences, we are engaging in an unprecedented social experiment. In effect, the government is coercing an entire population into behaving in ways that were once manifested only by people with pathological conditions like agoraphobia or extreme anxiety about personal contact. It is quite remarkable how little general discussion there has been of this.

Pointing out clearly at the risks represented by the suspension of normal human interactions, the social distancing rule making an aberration of the most basic emotional need.

## 10. References

- Acuna-Soto, R. Cleaveland D.M.K., Matthew D. Therrell, (2002), *Megadrought and Megadeath in 16th Century Mexico*, *Emerg Infect Dis*. 2002 Apr; 8(4): 360–362.
- Agamben, G. (2020a), *L'invenzione di un'epidemia*, in <https://www.quodlibet.it/giorgio-agamben-l-invenzione-di-un-epidemia>, 26 February 2020.
- Agamben, G. (2020b), *Nuove riflessioni*, in <https://www.quodlibet.it/giorgio-agamben-nuove-riflessioni>, 22 April 2020.
- Agamben, G. (2020c), *La medicina come religione*- in <https://www.quodlibet.it/giorgio-agamben-la-medicina-come-religione>, 2 May 2020.
- Baldwin, P. (1999) *Contagion and the State in Europe, (1830-1930)*, Cambridge University Press, Cambridge.
- Becchi, P. (2020), *Dallo stato di diritto allo stato terapeutico*, in [formiche.net 27/04/2020](https://formiche.net/27/04/2020).
- Beneduce, R. (2020), *Storie virali. Le lezioni di una pandemia*. In *Atlante*, Treccani, 3rd of April 2020.
- Corbellini, G. (2020), *La pandemia non è hegeliana, ma darwiniana*, *Scienza in rete*, 5/04/2020

<sup>70</sup> <http://www.grognards2011.it/2020/05/another-brick-in-the-wall-un-altro-mattone-nel-muro-con-una-sola-finestra-overton/>.

- Daley J. (2020) *Tell MPs 'not in my name' if you are horrified by this social experiment. Are we going to stand for the pathological coercion of our nation – or finally start organising against it?*, «The Telegraph», 6th of June, 2020.
- Harari, N.Y. (2020), *The world after coronavirus*, «Financial Times», 20th March 2020.
- Lévy, B.H. (2020a), *La mémoire oubliée du coronavirus*, La règle du jeu
- Lévy, B.H. (2020b) *Ce Virus qui rend fou*, Grasset, Paris.
- Szasz, T. (1994), *The Therapeutic State, Psychiatry in the mirror of current events*, Prometheus Books, New York.
- Whitney, M. (2020), *Is the lockdown the greatest disaster in USA history?*, in [www.unz.com](http://www.unz.com).

## 11. Sitography

- <https://infodujour.fr/sante/35174-coronavirus-situation-en-france-et-dans-le-monde-au-16-mai-2020>
- <https://www.bbc.com/news/world-middle-east-51651454>
- <https://www.history.com/topics/world-war-i/1918-flu-pandemic>
- <https://www.britannica.com/event/1968-flu-pandemic>
- [https://en.wikipedia.org/wiki/2009\\_swine\\_flu\\_pandemic\\_in\\_Europe](https://en.wikipedia.org/wiki/2009_swine_flu_pandemic_in_Europe)
- [http://www.quotidianosanita.it/studi-e-analisi/articolo.php?articolo\\_id=65817](http://www.quotidianosanita.it/studi-e-analisi/articolo.php?articolo_id=65817)
- <https://www.agi.it/fact-checking/news/2020-02-27/coronavirus-sistema-nazionale-ssn-7243927/>
- [https://www.lemonde.fr/idees/article/2020/03/24/giorgio-agamben-l-epidemie-montre-clairement-que-l-etat-d-exception-est-devenu-la-condition-normale\\_6034245\\_3232.html](https://www.lemonde.fr/idees/article/2020/03/24/giorgio-agamben-l-epidemie-montre-clairement-que-l-etat-d-exception-est-devenu-la-condition-normale_6034245_3232.html)
- <https://comedonchisciotte.org/la-sospensione-dellincredulita-nella-grande-truffa-della-pandemia/>
- [http://www.treccani.it/magazine/atlanter/cultura/Le\\_lezioni\\_di\\_una\\_pandemia.html](http://www.treccani.it/magazine/atlanter/cultura/Le_lezioni_di_una_pandemia.html)
- [https://www.huffingtonpost.it/entry/le-misure-di-contenimento-hanno-trasformato-il-diritto-alla-salute-in-un-diritto-tiranno\\_it\\_5ea68082c5b6a30004e485db](https://www.huffingtonpost.it/entry/le-misure-di-contenimento-hanno-trasformato-il-diritto-alla-salute-in-un-diritto-tiranno_it_5ea68082c5b6a30004e485db)
- [https://www.elnacional.cat/es/politica/coronavirus-detalles-documento-responsabilidad-llevar-desde-hoy-exit-cada\\_483666\\_102.xhtml](https://www.elnacional.cat/es/politica/coronavirus-detalles-documento-responsabilidad-llevar-desde-hoy-exit-cada_483666_102.xhtml)
- <https://www.franceculture.fr/geopolitique/le-monde-dapres-ruptures-ou-accentuation-de-tendances-preexistantes-1>
- [https://www.telegraph.co.uk/politics/2020/06/06/tell-mps-not-name-horrified-social-experiment/?WT.mc\\_id=e\\_DM1254155&WT.tsrc=email&etype=Edi\\_Edi\\_New\\_Reg&utm\\_source=email&utm\\_medium=Edi\\_Edi\\_New\\_Reg20200608&utm\\_campaign=DM1254155](https://www.telegraph.co.uk/politics/2020/06/06/tell-mps-not-name-horrified-social-experiment/?WT.mc_id=e_DM1254155&WT.tsrc=email&etype=Edi_Edi_New_Reg&utm_source=email&utm_medium=Edi_Edi_New_Reg20200608&utm_campaign=DM1254155)