Regional Intergovernmental Organization Response to COVID-19: The Impact of Neoliberalism on Bureaucratic Autonomy

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Abstract
COVID-19 is a transboundary crisis that crosses political boundaries and affects critical infrastructure. Given the ongoing nature of COVID-19, it is vital to recognize the factors that impact an organization’s ability to respond to crises. In this article, we use the concept of bureaucratic autonomy discussed by Bauer and Ege (2016) to examine the response of four regional intergovernmental organizations. We find here that neoliberalism as a dominating global ideology has transformed the autonomy of action dimension into autonomy of finance, with the focus on enabling private firms through adjusting incentive structures, rather than taking direct action. Organizations that lack this autonomy become the benefactors of other dominant neoliberal financing institutions, thus furthering the entrenchment of neoliberalism and neoliberal finance.

JEL Classification: F53, F55, P16

Keywords
COVID-19, institutions, international political economy, crisis management, policy and governance

1. Introduction
The COVID-19 pandemic represents a major challenge to policy makers at all levels. In this article, we examine the response of four regional intergovernmental organizations (IGOs)—the African Union (AU), Asian Development Bank (ADB), European Union (EU), and the Organization of American States (OAS)—through the lens of bureaucratic autonomy (Bauer and Ege 2016). Our focus is the way in which neoliberal dominance as an institutional constraint impacts the bureaucratic autonomy of these regional IGOs, and whether this affects the way they respond to COVID-19. We begin by discussing bureaucratic autonomy as part of the larger field of crisis management theory—connecting this to the underlying assumptions of neoliberalism.
with regard to the role and efficacy of public policy. From here, we examine the responses of these regional IGOs and show how bureaucratic autonomy under neoliberalism is essentially the autonomy of financing, and organizations that lack this capability become benefactors of neoliberal institutions.

2. Crisis Management Theory and Bureaucratic Autonomy

Crisis management theory offers a lens to compare how regional IGOs responded to COVID-19. Crises are disruptive to institutions because they break down the frameworks that legitimize the preexisting sociopolitical order (‘t Hart 1993) and generate conditions of deep uncertainty (Rosenthal, Boin, and Comfort 2001; Lipscy 2020). If organizations are not successful at managing crises, it ends with members withdrawing or the organization disintegrating (Snyder, Bruck, and Sapin 1962; Hermann 1963). Research shows that possessing strong underlying institutional structures and preparation is key in managing crises (Boin and McConnel 2007; see also Barton 1969; Dynes 1970; Drabek 1986). However, a complication of modern crises is their increasing “transboundariness” and how “they affect multiple jurisdictions, undermine the functioning of various policy sectors and critical infrastructures, escalate rapidly, and morph along the way” (Ansell, Boin, and Keller 2010: 195). These types of crises cross political boundaries, affecting many types of critical infrastructures and life-sustaining systems. Further, they do not have clearly demarcated beginnings and ends, therefore requiring sustained responses. Institutions employ different strategies to address transboundary crises, such as sensemaking, networked coordination, surge capacity, and formal scaling procedures (Ansell, Boin, and Keller 2010).

Effectively, crises are defined by the way in which they threaten the viability of existing organizations by placing immense time pressure on the organization to respond, and creating conditions of deep uncertainty (Lipsy 2020).

In this article, we use the concept of bureaucratic autonomy, as discussed by Bauer and Ege (2016), to understand the organization’s institutional structure and its effect on successful crisis management. In their view, bureaucratic autonomy is best examined within an organization’s secretariat, as they are the most administrative branch within a regional IGO. Secretariats simultaneously reflect the intraorganizational structure and the relationship between the member states and the IGO. Bauer and Ege identified two types of autonomy. Autonomy of will refers to the organization’s ability to set its own preferences separate from its member states. Prior to obtaining autonomy of will, it is first necessary to establish administrative cohesion, which allows different parts of the organization to come together as a unified entity. The organization must also establish administrative differentiation, which allows the organization “to develop preferences that can potentially differ from those of the political principals” (Bauer and Ege 2016: 6). Essentially, these two dimensions let the organization act as its own entity and develop preferences separate from its member states.

Once these preferences are established, the ability for the organization to act on these preferences is referred to as autonomy of action. Prior to obtaining autonomy of action, the organization must first establish statutory powers meaning it must have few, or no, political constraints imposed upon it, allowing it to act without superior oversight (Wilson 1989). Secondly, the organization must also have access to, and control of, its own administrative resources (Ege and Bauer 2017). Action is predicated on the ability to act, and the lack of access to resources hampers the organization’s ability to translate preferences into action. Effectively, autonomy of action asks the question that once the organization has decided how it wants to respond, is it able to carry out that response?

Recent research shows that organizations that lack autonomy of will or action are less responsive than organizations with high levels of autonomy. As Debre and Dijkstra (2021) discuss, policy responses from IGOs are generally dependent upon the authority of the organization.
Hecke, Fuhr, and Wolfs (2021) use this approach in the wake of the COVID-19 pandemic to examine the response of the World Health Organization, the EU, the International Monetary Fund, and the World Bank. They find that bureaucratic autonomy was a key factor in policy effectiveness. For example, the World Health Organization is largely decentralized in its structure and is governed by six regional offices, and since centralized decision making and coordination can be difficult in the organization, it implies a lack of autonomy of will. Further, it faces a limited and tightly controlled budget and does not have the ability to impose sanctions or decisions on members, meaning that any recommendations it provides can be ignored by member states. On the other hand, the authors find that the International Monetary Fund and World Bank were able to act quickly and decisively because they are not as reliant on member states for financing (Park 2018). These organizations generally grant managers considerable levels of autonomy to address crises as they see fit, allowing them to develop their own policy approaches when dealing with crises. These factors allowed them to determine their own path of action and then also to execute that action in response to the COVID-19 crisis (van Hecke, Fuhr, and Wolfs 2021).

Institutional structures and dynamics are key determinants of whether an organization could determine its response to crises and then translate those decisions into effective action. In the next section, we discuss how neoliberal ideologies limit this bureaucratic autonomy for some organizations and expand it for others.

3. Neoliberalism and Bureaucratic Autonomy

It should be noted that our argument here is that under the preexisting neoliberal order, bureaucratic autonomy is defined in neoliberal terms. As we show in the next two sections, organizations that support this neoliberal order end up having greater bureaucratic autonomy while those that do not become subservient to these neoliberal institutions. This is clearly seen throughout the neoliberal era in the context of the Pinochet regime in Chile and the EU response to the Greek debt crisis in the late 2000s (Panageotou 2017). In the context of COVID-19, then, we view organizations’ responses as a way to reinforce the dominance of neoliberal institutions rather than challenging the neoliberal order. However, we contend that bureaucratic autonomy and neoliberalism are not necessarily synonymous with one another. Recent research demonstrates how bureaucratic autonomy can be used to challenge neoliberal policies. For example, Orihuela et al. (2021) examine environmental protections in Peru’s mineral industry and find that the country’s policies have been unable to deliver substantive environmental change because the agencies in the Peruvian government that oversee the environment do not have enough bureaucratic autonomy. From this lens, stronger bureaucratic autonomy for the environmental agencies in Peru is argued as a tactic to combat the neoliberal-friendly policies that are currently in place. Given that the present global order is neoliberal, it is worth discussing and understanding how this neoliberal order has shaped bureaucratic autonomy, and how this has then affected the ability for organizations to manage crises. This is the purpose of the present section.

IGOs must operate within the context of existing global arrangements. In the modern era, these global arrangements are defined in the context of neoliberalism, in which the emphasis for policy making has been largely defined in the context of market-based policies at both the domestic and international level. The hallmark institutional setting of this type of approach is the regulatory state, in which the government sets parameters for action and acts to ensure actors stay within those parameters (Barnett 2020; Vernengo and Nabor-Bhaduri 2020; Jones and Hameiri 2021).

As Barnett discusses, markets in a neoliberal world shape values and “can become an ethic in itself and eventually replace or diminish previously held ethical beliefs” (2020: 3). Neoliberalism, he argues, replaced “the idea of society comprised of mutual obligations with a view that it
consists of nothing more than voluntary, self-interested exchanges, and that when members fall on hard times they must look to themselves, their neighbor, or charity, and rarely to the government” (Barnett 2020: 8). In the context of the pandemic, this becomes especially important in determining how relief aid will be allocated as well as how the burdens and pains of the pandemic will be apportioned. For example, when COVID-19 vaccines were made available, developed countries had access to them first while developing country access lagged—as of October 2021, only 3 percent of individuals in low-income countries had received at least one dose of the vaccines (Ritchie et al. 2021). Meanwhile, the health and economic burdens of COVID-19 have primarily fallen to more marginalized groups in terms of race, class, and gender (Dionne and Turkmen 2020). As such, Barnett (2020) argues that neoliberal responses to pandemics have divided the populace into those who are asked to sacrifice (those who are asked to shelter in place and take other precautions) and those who are asked to be sacrificed (those who are asked to continue to go to work and put themselves at risk), with aid and support generally given to the former group rather than the latter.

Jones and Hameiri (2021) argue that neoliberalism has also weakened pre-crisis institutional structures. In their view, “the shift from government to governance entailed key pathologies, including: the deliberate reduction of popular expectations of public authority; the outsourcing of responsibility to technocratic, private and quasi-autonomous actors, weakening lines of control and accountability; and the hollowing-out of state capacities and authority to the benefit of frequently inept large-scale corporations” (Jones and Hamieri 2021: 3). This has been seen in several ways. For starters, the neoliberal approach to governance through parameter setting allows it to absolve itself of responsibility for any specific, individual issue (Flinders and Buller 2006). Further, the neoliberal state operates primarily through public-private partnerships, funding activities but allowing the private firm to choose how to best use those funds (Lazonick and Hopkins 2020). Finally, crisis management under neoliberalism involves the outsourcing of what would normally be government responsibility. For example, in the United Kingdom, the production and distribution of personal protective equipment at the start of the pandemic was largely left in the hands of the private sector, rather than directly produced and distributed by the state. As a result, orders went unfilled and prices skyrocketed (Jones and Hameiri 2021: 17).

Neoliberalism in our view has led to states intentionally limiting their ability to set preferences and engage in direct policy. An adherence to purely market values and limiting the role of the state to simply parameter setting is a way to restrict the state’s autonomy of will—its preferences are limited to market-based policies. Further, its actions are limited to the ability to work through the private sector in the form of public-private partnerships and outsourced production. It should be recognized, however, that these limits are largely institutional as the result of policy makers intentionally choosing to not use their full bureaucratic autonomy in addressing crises. From this perspective, neoliberalism has led to a transformation of the use of bureaucratic autonomy. In the next section, we discuss the bureaucratic autonomy of four different regional IGOs, using this framework as a lens to understand their responses to COVID-19.

4. Regional IGOs’ Response to COVID-19

Regional IGOs are well placed within the international structure to respond to COVID-19, as they serve as bridges between local and global politics (Amaya and De Lombaerde 2021). In this way, they play important roles in coordinating response in the crisis management networks. Amaya and De Lombaerde (2021) find that during COVID-19, regional IGOs assisted with disease surveillance, helped with supply chain issues, oversaw trade network issues, and ensured medical supplies were delivered and distributed. As such, they play an important, yet less researched, role in pandemic response. Most research on this topic has focused on how individual countries or global IGOs have responded to COVID-19. While there are case studies that focus
on one specific regional IGO or focus on one specific region, very few studies have comparatively examined regional IGO responses to the pandemic.

Of the four regional IGOs we examined, the ones that demonstrate the highest levels of autonomy of will and action during COVID-19 are the EU Commission and the ADB Board of Directors. The EU Commission had approximately 250 policy responses to COVID-19 that ranged from policies assisting member states, programs to help EU citizens, and aid to help non-EU members. The EU Commission created numerous initiatives such as the Corona Response Investment Initiative, the Emergency Support Instrument, NextGenerationEU (which devoted €750 billion to EU member states), and the Support to mitigate Unemployment Risks in an Emergency program (which provided €100 billion in financial assistance to workers and small firms who lost income during the pandemic). The EU Commission was highly active in responding to the pandemic by providing international financial assistance, including €34 billion to COVAX and creating the Coronavirus Global Response, an EU-based foreign assistance program that gave €16 billion worldwide (EU 2020).

The ADB also demonstrated high levels of bureaucratic autonomy. In April 2020, the Board of Directors announced $20 billion in aid to support member nations’ responses to COVID-19, while in December 2020, an additional $9 billion was announced for the Asia Pacific Vaccine Access Facility to help developing member nations secure and distribute the COVID-19 vaccine. As of December 2021, $19.61 billion had been committed to 224 projects. The main recipients of these funds have been Public Sector Management and the Finance Sector, with much of the overall aid—$14.41 billion—coming in the form of loans to governments implementing reforms to address COVID-19. Among other things, these reforms included social relief, fiscal space, creating food security, and upgrading health and testing facilities. For example, $4.41 billion was used as guarantees to the financial sector for two programs: the Trade Finance Program and the Supply Chain Finance Program. Both of these programs served as liquidity provisioning to support market activity in developing countries. As part of the Asia Pacific Vaccine Access Facility program, $2.21 billion has been loaned so developing member countries can access, procure, and deliver the vaccine (ADB 2021).

In contrast, the AU and the OAS demonstrated lower levels of autonomy of will and action in comparison to the EU and ADB. The AU Commission initiated ambitious policies to combat COVID-19, including the Africa Task Force for the Novel Coronavirus, the COVID-19 Response Fund, and the Africa Medical Supplies Platform. For example, the Africa Task Force for the Novel Coronavirus program partnered with the African Centre for Disease Control and the WHO in order to link medical experts with AU health ministers. A notable result from this program was the Partnership to Accelerate COVID-19 testing, which standardized the testing protocols across the continent and provided millions of testing kits (AU 2021). As for the OAS, the General Secretariat responded to COVID-19, but it was less ambitious than other regional IGO secretariats. For example, they created reports, disseminated information for member states, and established an online portal to increase communication between members. Arguably, the most significant response from the General Secretariat was participating in the Joint Summit Working Group, a collection of thirteen Inter-American and global organizations that meet to discuss economic and political issues relevant to the Americas. To reinforce their minimal role, the autonomous Inter-American Commission on Human Rights has been arguably more active in responding to COVID-19 than the General Secretariat.

5. Neoliberalism and Regional IGO Responses to COVID-19

How has the spread of neoliberalism impacted regional IGO responses to COVID-19? Neoliberalism rests on several assumptions regarding the efficacy of markets relative to governmental and IGOs. In the context of crisis management theory, these assumptions lead to
preference setting and actions that focus on adjusting incentives through tax credits, subsidies, and partnerships that empower the private sector to act. Governing institutions can set preferences as to what outcomes they want to achieve, but they limit their ability to directly achieve these outcomes to those actions of the private sector. As such, autonomy of action under neoliberalism can really be considered autonomy of financing—what is the ability for the public organization to finance private sector action? For the EU and ADB, these financing arms are quite powerful—hence why these organizations were able to be more active in responding to COVID-19.

Along these lines, it is important to examine the role of the private sector within regional IGO responses to COVID-19. One of the key observations is that organizations like the AU and OAS do not have high levels of autonomy of action like the ADB and EU, and because of this, they relied on external sources of funding. This is evident in the number of public-private partnerships that emerged within these regional IGOs after COVID-19. Within the AU, the Commission partnered with private firms in the AU COVID-19 Response Fund in order for members to receive medical supplies, test kits, and monetary assistance to pay community healthcare workers and contact tracers (AU 2020). The African Medical Supplies Platform was another joint venture between the AU and private investors that gave AU member states access to medical supplies at subsidized rates. The OAS General Secretariat also partnered with private enterprises, including a collaboration with social media companies that provided training and informational sessions for businesses. One partnership included the OAS teaming up with WhatsApp and Facebook to help medium-sized firms across Latin America in order for those firms to gain technical skills that would increase their digital presence and assist in pivoting to an online commercial setting (OAS 2020).

It should be noted that the ADB and the EU were also active in partnering with private enterprises. For example, the EU worked with numerous pharmaceutical companies such as BioNTech, Moderna, Johnson & Johnson, and Pfizer. The EU Commission gave €300 million to Gavi, the Vaccine Alliance, and awarded innovative firms with funds through the European Innovation Council Accelerator Pilot and Horizon 2020 programs. The Commission created the HERA Incubator, which is a bio-defense preparedness plan to link researchers, biotech companies, and public authorities to better respond to future adaptations of the virus. The ADB also focused on private partnerships, as much of their programs were providing liquidity and financial support in their role as a regional bank. The guarantees made were for similar liquidity provisioning purposes, designed to incentivize private sector agents to engage in markets in developing countries they otherwise would not operate in by providing and guaranteeing loans for banks that provide this financing. It should be noted that, while autonomy of action is closely linked to financing ability, the method of financing is different under neoliberalism. The focus is more trickle down, issuing funds and letting private sector agents determine how to best use them, rather than direct action. For example, rather than develop the networks and capital necessary for crisis management themselves, regional IGOs finance private firms to build the desired capacity.

However, it is important to stress that the power dynamics of how neoliberal policies were utilized across these four regional IGOs differ. In the examples of the AU and the OAS, the low levels of autonomy of action forced these organizations to partner with private enterprise in order to gain access to necessary medical supplies. In the examples of the ADB and the EU, the role of neoliberal policies is different. In the ADB, loans within the organization were focused on incentivizing public-private partnerships within recipient countries because of the ideological role that neoliberalism plays within the ADB. In the role of the EU, neoliberal responses were followed not because of need but rather because of want. Even though there is economic variability across EU member states, most EU countries have the resources to pay for medical supplies and vaccines, and provide aid to not only their own and other EU citizens but also non-EU citizens. The EU did not need private firms to provide their countries with aid; instead, the EU initiated programs to incentivize private sector innovation.
Overall, there are two notable observations from this article. First, the lack of bureaucratic autonomy by the AU and OAS contributes to the dominance and entrenchment of neoliberalism in the region. Without autonomy of action, the AU and OAS became the beneficiary of external, neoliberal public and private organizations. It will be interesting to note going forward if this reliance on external aid might limit the ability for such organizations to set their own preferences. In other words, could a lack of autonomy of action lead to a lack of autonomy of will? Second, the financing in each of these cases is primarily either raised or distributed through private financial market channels, thereby placing banks and central banks in central roles in crisis response. This, further, works to strengthen neoliberal views toward the role of financial markets and institutions in the economy, which argue that policy in times of crisis should operate through monetary policy measures and liquidity provisioning, rather than direct intervention from federal governments (Marshall and Correa 2020).

6. Conclusion

This article examined the response of regional IGOs to COVID-19 and recognized the role neoliberalism had on the bureaucratic autonomy of those IGOs. We find two main outcomes. First, organizations with stronger bureaucratic autonomy are better able to respond in a wider variety of ways, as seen in the responses of the EU and ADB relative to the AU and the OAS. Second, neoliberalism transforms autonomy of action to autonomy of finance. Organizations that have strong financing arms—specifically, neoliberal financing arms—are better positioned to respond to crises. Meanwhile, organizations without those arms become subservient to neoliberal financing institutions to carry out policy. In both cases, neoliberal views toward finance and the central position of financial institutions in modern economies become increasingly entrenched. Future research should examine more closely this link between bureaucratic autonomy and neoliberalism, emphasizing how neoliberalism has shaped IGO policy and expanding to other types of organization with a more forward-looking approach.

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