Public Health to Serve as Powerful Force in 21st Century Ireland

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In recent decades, the green and environmental movements have become powerful forces in modern politics. In this way, related concerns have managed to permeate, with good reason, all aspects of public policy. No longer is pollution the sole responsibility of select government departments; rather, it is a consistent consideration and tangible presence in ministries of housing, health, foreign affairs, finance, and many others.

In light of current events, is it thus possible that the concepts of public health and health security, rather than fading away, are going to become more and more an issue for 21st Century Ireland — as for many other countries — in the same way as the environment was at the end of the 20th? If this is the case — judging by the recent epidemiological climate — such developments stand to be potentially divisive ones; ones on which political parties and reputations may stand or fall.

Such divides, in the political arena, of attitudes towards public health or epidemic control or health security, will not, perhaps, be on the scale of Brexit in the UK — but, nonetheless, these are considerations that threaten to split public opinion into extreme and possibly polarized camps. There are those, already, who lobby for airline profitability and tourism; those who lobby for pub and restaurant openings. Those, also, who are primarily concerned with children's education; and those who would prefer efforts and resource across all government departments to put public health, rather than gross national product (though the two invariably inter-relate) first.

Such trade-offs, however, are not easy to predict. Those who claim that the economy has to be put before public health may be making short-sighted gambles. Should epidemic conditions develop in certain specific ways, the reverse may in fact be true: countries such as New Zealand, that have managed to keep their epidemics under close control, may profit from a significant public health dividend as restaurants, pubs, and sporting events open again. If this can be combined with efficient and effective border testing, low-risk countries become increasingly attractive for tourism — without putting home populations at risk. Irish GDP and economic performance can only improve if it is built on a healthy society to start with – healthy countries result in healthy economies.

Yet, even with such seemingly straightforward demarcations in attitudes – many of which will likely become more and more entrenched over the coming months – there are further considerations in play. Other elements of epidemic and infection control debates stand to raise the stakes even further, as related events and policy decisions play in to arguments about immigration, hard borders, diplomacy, international relations, surveillance societies, and even housing — these issues can now all be traced back to health and health security issues, in some way.

One of the greatest ironies in this new political *milieu* are the new alliances that are forming – unusual partnerships, to say the least. Those more to the left of the political spectrum, for example — which might traditionally advocate for increased public spending on health, but who might also hold more liberal views on surveillance or borders — may be forced, based on outbreaks, to reconsider their positions.

Epidemic control may thus, ironically, be served best by the interests of those conservative political elements traditionally less supportive of public health. If infection control is associated with less movement of human populations, and therefore harder borders; if public health is served by a more surveillance society in which personal data can be fed back to the general public in details regarding precise outbreak numbers and locations – a number of political realignments will have to be made.

But, as we have seen worldwide and in our own locales, public health and security considerations have also been used – sometimes rightly, sometimes wrongly – to advance other agendas. Councils wanting to limit accesses or change parking protocols have, in many cases, leveraged the opportunities presented by the epidemic. A further set of examples in this regard relates to housing and rental rates: should remote working become commonplace in the future, even if only partially, logic suggests that a signficant amount of commercial real estate will be freed up in a way that, with some effort, might help to address housing issues – thereby, in turn, driving down rents and property prices.

Some will welcome this, others not – the construction sector may slow down; those who bought houses just before the epidemic may end up paying more than those who do so in the aftermath. In all cases — whatever the rights or wrongs about how the situation plays out — the theme remains the same: public health is an increasingly political issue.

A final consideration in this regard relates to populism – the election of candidates and parties on single-issue tickets such as domestic economic growth, national reunification, or leaving the European Union (to name by but a few). The political implications of the pandemic in this regard are clear: single-issue parties are not always to be trusted on other issues. Our elected governments thus perhaps need to back away from extremism and over-specialization to include a broad range of skills, expertise and agendas in their DNA.