



Article

Securitization of COVID-19 as a Security Norm: WHO Norm Entrepreneurship and Norm Cascading

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Abstract: In this article, we analyze the emergence of a global security norm of the COVID-19 epidemic as a threat to international security. This crisis is one of the gravest crises that humanity has experienced since the end of World War II in terms of the number of people infected and died, but also in terms of the economic consequences. Here, we provide a framework for understanding the securitization of the COVID-19 epidemic as an international norm defined and promoted by the World Health Organization as a norm entrepreneur, and cascaded down to the level of member states. We identify the actors who developed the main strategic prescriptions of the security norm and the international mechanisms that promoted the cascading of its contents throughout the international system. We further develop the notion of primary and secondary norms, which explain the striking differences amongst industrialized states with regard to the contents, scope, and implementation timeline of the various measures aiming to curb the spread of the virus.

Keywords: securitization; COVID-19; international norms; health security; WHO



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1. Introduction

This article analyzes the emergence of a global security norm of the COVID-19 epidemic as a threat to international security. The article provides a framework for understanding the securitization of the COVID-19 epidemic as an international norm defined and promoted by the World Health Organization as a norm entrepreneur, and cascaded down to the level of member states. The article identifies the actors who developed the main strategic prescriptions of the security norm and the international mechanisms that promoted the cascading of its contents throughout the international system. It further develops the notion of primary and secondary norms, which explain the striking differences amongst industrialized states with regard to the contents, scope, and implementation timeline of the various measures aiming to curb the spread of the virus. The COVID-19 norm can be analytically divided into two parts: (1) the primary norm, which defines COVID-19 as a security threat and integrates it as part of a larger global norm to stop communicable diseases, which presupposes rights and obligations of a norm; and (2) the secondary norm, which includes recommendation for interpreting the primary norm, but leaves a wide spectrum of potential choices for policies to be implemented at the global and national levels to combat the security threat posed by the epidemic. The international norm is deterministic in terms of defining a shared understanding of what the COVID-19 epidemic is, but leaves a wide spectrum of potential responses to it.

This fact that the UN Security Council has not yet taken a resolution on COVID-19 explains this developments partially for the global level (Enemark 2017; Davies et al. 2015). However, even more importantly, it is explained by the fact that the WHO only provides

recommendations—it does not have legal enforcement powers (Davies et al. 2015). Thus, we can see a striking manifestation of differences amongst industrialized states with regard to the contents, scope, and implementation timeline of the various measures aiming to curb the spread of the virus. This article identifies these variations and seeks to explain them by drawing upon securitization theory as well as norm emergence, norm cascades, and norm entrepreneurship, which provide the framework to analyze the process of how the issue of COVID-19 has been transformed to an existential threat at the global level. Thus, our research question is to what extent and by which means has COVID-19 been securitized? By which actor? How has this process been cascaded down to the level of UN member states? As the current pandemic crisis is not the first time that a disease has been securitized, as other pandemics have been, such as influenza (Kamradt-Scott and McInnes 2012), HIV/AIDS (McInnes and Rushton 2011), Ebola (Enemark 2017; Wenham 2016, 2017; Kamradt-Scott et al. 2015; Kamradt-Scott 2020; Maclean 2008), and SARS (Hanrieder and Kreuder-Sonnen 2014), this article argues that the various measures aiming at curbing the spread of the virus were taken by the governments of industrialized states following a process of securitization of health and human life at the global level by norm entrepreneurs, notably in the WHO.

The article first reviews the literature on health security in order to establish a theoretical framework for the analysis of COVID-19 as an emerging security norm. The article then analyses the role of the WHO in acting as a norm entrepreneur in the emergence of the international norm. It further outlines the cascading of the international norms to the national level, and by drawing upon the analytical distinction between primary and secondary norms, it explains the spectrum of responses across industrialized Western countries. Nonetheless, it is an extraordinary finding that, despite the differences in reactions to the COVID-19 crisis, the primary security norm has become accepted across the globe, albeit interpreted differently due to variations in secondary norms.

2. Health Security, Norms, and Securitization Processes

The concept of “securitization” was initially developed by Ole Wæver to make a major contribution to the so-called “widening–deepening” debate in security studies, which had begun in the 1980s and intensified with the end of the Cold War. The “widening” dimension was defined as the extension of security to issues or sectors other than the military, such as the global health, the environment, or the economy, whereas the “deepening” dimension addressed the question of whether entities other than the state, such as society or individual human beings, should be able to claim security threats (Krause and Williams 1996, p. 230). Together with the concept of “security sectors” previously developed by Buzan (1991), “securitization” is at the heart of a new theoretical framework that, according to Wæver and Buzan, enables researchers to simultaneously widen and deepen the concept of security without rendering it too broad or meaningless. The key idea underpinning the securitization framework is that security is not about objective threats that “really” exist out there. Rather, still for Wæver and Buzan, it is about “the processes of constructing a shared understanding of what is to be considered and collectively responded to as a threat” (Buzan et al. 1998, p. 26). In other words, according to Buzan and Wæver (also known as the Copenhagen School), security is a “speech act” (Buzan et al. 1998, p. 26) (see also Wæver 1995, pp. 54–55; Roe 2008, p. 617; Stritzel 2007, p. 358; Balzacq 2005, pp. 174–79; 2008). It is an intersubjective and socially constructed phenomenon. Key concepts in the securitization framework are the “securitizing actor”, who socially constructs a specific issue as a threat to the survival of a given entity, known as the “referent object”, which therefore requires urgent protection through the use of extraordinary measures. Another important concept is that of the “audience”. According to the Copenhagen School, “[a] discourse that takes the form of presenting something as an existential threat to a referent object does not by itself create securitization—this is a securitizing move, but the issue is securitized only if and when the audience accepts it as such” (Buzan et al. 1998, p. 25). To sum up, securitization is understood as a process whereby a given actor frames a specific issue as an “existential

threat”, which is then presented to a target audience for approval in order to employ extraordinary means and measures to tackle it (Léonard and Kaunert 2019).

Health issues have become of significant importance to securitization scholars (Balzacq et al. 2016), often due to global mobility, which can be affected by global pandemics such as COVID-19. In this debate, questions about the normative and methodological dimensions of securitization of global health have been at the forefront, for instance: should health problems be securitized? Have securitizing moves in relation to health issues been successful? (Balzacq et al. 2016). Sjöstedt (2008) explains the securitization process of HIV/AIDS in Russia in the face of policy makers who did not believe the threat narrative and dismissed it as a Western construction. In her contribution, she utilizes Finnemore and Sikkink’s account of “norm cascade” (Finnemore and Sikkink 1998). This article follows Sjöstedt (2008) and, in particular, Vieira (2007), who provides a framework for analyzing the securitization of the HIV/AIDS epidemic as an international norm defined and promoted by multilateral bodies. The article agrees with Enemark (2017), positing that the UNSC, as an important actor in establishing the global health security norm, framed the health issue in security terms, but also aimed to replace one kind of security logic with another as a basis for remedial action. His article provides the seeds for this article’s argument: that varying interpretations of health security are possible at the national level, and, thus, the logic of securitization at the national level needs to be interpreted. This article suggests that a distinction between primary and secondary norms is, therefore, necessary. In his article (Enemark 2017), he suggests that in 2014, the logic of strict border controls was overridden by the logic of governmentality at the international level, leading to increased mobility. However, this *interpretation is situational* and can be varied across different cases.

Why do we need the insights from the norm literature within the securitization framework? The answer is simple—the securitization framework on its own does not provide any answer to the “why” of the securitization, nor does it analyze the actors of securitization to any significant extent. From the very beginning, the Copenhagen School’s work on securitization has had an important normative dimension. It largely questions whether it is a good idea “to frame as many problems as possible in terms of security” (Wæver 1995, pp. 63–64). At the end of their book *Security: A New Framework for Analysis* (Buzan et al. 1998, pp. 179–89), a few methodological issues are discussed in order to check whether the securitization framework is operational. Firstly, they argue that, to analyze cases of securitization, “the obvious method is discourse analysis since [they] are interested in when and how something is established by whom as a security threat” (Buzan et al. 1998, p. 176). However, in their view, it suffices to read and look for arguments taking the rhetorical and logical form of security. Indeed, Buzan and Wæver suggest that the security argument is so powerful that “it is against its nature to be hidden” (Buzan et al. 1998, p. 177). Moreover, as what is at stake in securitization is claiming the pre-eminence of an issue over all others, this attempt should be made on important occasions. Buzan and Wæver emphasize that such an approach will not enable them to find intentions, motives, or tactics, but only discourses. This is unproblematic in their view as they aim to study phenomena characterized by discursive moves. Nevertheless, the Copenhagen School acknowledges that discourse analysis may be supplemented by more traditional political analysis of, for example, facilitating conditions and interactions of units. This article is certainly interested in finding intentions, motives, and tactics, but the Copenhagen School does not provide the methodological tools for this. Parts of the aforementioned theoretical literature have acknowledged this implicitly by focusing on norms. This article acknowledges this explicitly by integrating norms and norm entrepreneurship into the securitization framework. Furthermore, one additional potential benefit might be in differentiating between securitizing actors, with some being “norm entrepreneurs” and others having internalized those norms or circulating/contesting them (McInnes and Rushton 2011). The work of McInnes and Rushton (2011) on the securitization of HIV/AIDS notably challenges the idea of securitization as a neatly successful process—something that can be conceptualized better by integrating the norm scholarship. In addition, the nomenclature

of internalization and circulation better captures the process of securitization: audience acceptance, the enactment of emergency measures, as well as contestation in either of these “steps”. Thus, the current articulation of the conceptual argument in the securitization framework is not as convincing as it needs to be, and the linkages to the norm literature will significantly strengthen the securitization framework.

Norms are often defined as “a standard of appropriate behavior for actors with a given identity” (Finnemore and Sikkink 1998, p. 891). Thus, after the process of securitization and the establishment of security norms, these then become a standard of appropriate behavior for the relevant actors with a given identity, from the securitizing actor to multiple or single audiences, depending on the relevant case. One can distinguish between different types of norms. The most common distinction is between regulative norms, which order and constrain behavior, and constitutive norms, which create actors, interests, or action (Ruggie 1998). Actors “are socialized to accept new norms, values and perceptions of interest” (Finnemore 1996, p. 5). These security norms thus may have both dimensions to themselves: they constrain and regulate the behavior of actors, but they also constitute both actors, such as the securitizing actor or the audience, as well interests and action. It has been convincingly demonstrated how different types of actors, e.g., non-governmental organizations (NGOs), inter-governmental organizations (IGOs), and transnational advocacy networks, can contribute to major changes in norms and thus social actor behavior (Finnemore 1996; Price 1998; Keck and Sikkink 1998), but how do norms come about? Finnemore (1996) suggest a three-stage model of a norm “life cycle”. According to this, the first stage involves “norm emergence”; the second stage involves “norm acceptance”, which she terms as “norm cascade”; and the third stage involves “internalization”. The second stage of the norm life cycle, according to Finnemore (1996), is characterized by a socialization process—norm leaders are imitated by the followers. After a certain “tipping point”, more actors adopt the norm. In order to achieve this socialization, praising as well as ridiculing those who deviate from the norm is involved. During the third stage—the internalization—norms acquire a taken-for-granted status and are no longer an issue of public debate.

Thus, this provides answers from the norm literature for the “intentions, motives or tactics” that are missing from the securitization framework (Buzan et al. 1998, p. 177). Buzan and Wæver themselves emphasize that their approach focused primarily on discourse will not enable them to find intentions, motives, or tactics, but only discourses. They suggest themselves to supplement the securitization framework with more traditional political analysis of, for example, facilitating conditions and interactions of units. This article, in line with their own thinking, thus suggests to link it to the constructivist literature on norms.

How does this provide answers from the norm literature for the “intentions, motives or tactics” that are missing from the securitization framework (Buzan et al. 1998, p. 177)? This is linked to the work of political or norm entrepreneurs, which are in fact the securitizing actors of security norms. The mechanism of persuasion is an attempt to convince a critical mass of actors to embrace a norm by what Finnemore (1996) terms as “norm entrepreneurs”, but which can just as easily be called securitizing actors based on norm entrepreneurship, or just security norm entrepreneurs. The securitization framework does not include any mechanism of persuasion—Buzan and Wæver merely suggest that the security argument is so powerful that “it is against its nature to be hidden” (Buzan et al. 1998, p. 177). A mechanism of persuasion is in fact necessary for security norms to establish themselves—for securitization to be successful. These entrepreneurs are thus necessary; they have strong notions of appropriate behavior, and are absolutely critical for success. Norms never enter a normative vacuum but instead access a highly contested space in which they need to compete with other norms, which this article also demonstrates when discussing how health security norms compete with other norms, such as economic security norms or civil liberties. One condition for entrepreneurs at the international level is some kind of organizational platform from which to promote their norm. This article follows Finnemore (1996) and Payne (2001), linking their work to Vieira’s argument (2007) in analyzing the

securitization of epidemics as an international security norm. Indeed, we accept that most international norms are part of normal public debate and policy making, but they “can be moved further up the list of policy priorities” (Vieira 2007, p. 140) through securitization processes. Thus, the “*process of constituting international security norms is analogous to the image of a pendulum that swings from politicization to securitization and vice-versa in terms of the perceived levels of urgency and threat that are allocated to a specific issue*” (Vieira 2007, p. 140).

How does the international socialization of security norms work at the domestic level? Again, the securitization framework is largely silent on that question—we need answers from the norm literature for the “intentions, motives or tactics” that are missing from the securitization framework (Buzan et al. 1998, p. 177). The securitization framework does not, by and large, deal with a multi-level governance framework, which is inherent in the norm literature. Morin and Gold (2016) stipulate that it is based on a set of consensual assumptions: (1) international socialization is a social process directed towards the internalization of ideas arising elsewhere in the international system; (2) these ideas take various forms, “causal beliefs” and “principled beliefs”; (3) “internalizing” ideas means following them autonomously; (4) in a two-way process, alien ideas may well be rejected at the domestic level; (5) prevailing ideas held by powerful actors tend to diffuse globally. While there is significant disagreement in the literature as to whether states can be seen equivalent to a person in its actions and dynamics (Morin and Gold 2016), logically, the state can be composed of several individuals, none of whom fully controls the state. There are two levels of internalization: acculturation, whereby a role is learned and behaved in accordance with the expectations, and persuasion, whereby the norm is genuinely accepted as legitimate.

With regard to the term “norm internalization”, this article follows this concept since, as we show in the section below, the norm of global health security has been internationally institutionalized or internalized. Finnemore and Sikkink’s (1998) norms life cycle model, while very helpful in many ways and thus a global reference point, is problematic with regard to internalization of international norms. Iommi (2020), drawing on Wiener’s Theory of Contestation, reconceptualizes the norm internalization stage as the extreme of the norm cascade, whereby inherently contested norms simultaneously enjoy formal validity, social recognition, and cultural validation. Thus, Iommi (2020) does not assume “almost automatic” compliance. Instead, she highlights the role of applicatory contestation under conditions of high contestedness, which leads to her reconceptualization of internalized norms as continuously contested. Additionally, norms might regress in her conceptualization.

In this article, we follow the aforementioned conceptualization by Iommi (2020). However, we make a further distinction between primary and secondary norms which exist at all levels of the international system, whether that be international, European (or other continental), national, regional, or even local. At the global level, each developed norm contains two elements: (1) the primary norm, which defines the content, scope, and modality of the security threat and links it to a fundamental global norm (such as “avoidance of harm”, “though shall not kill”, or similar moral judgements), thus presupposing rights and obligations derived from this norm, and (2) the secondary norm, which includes an interpretive frame for interpreting the primary norm, but which may leave a wide spectrum of potential choices for implementing the rights and obligations from this norm at the global to the national level. The international primary norm defines a shared understanding of the security threat, but leaves a wide spectrum of potential responses to it. Furthermore, in the norm internalization stage, as conceptualized by Iommi (2020), these norms continue to be contested. Norms do not enter a normative vacuum, but they are in a competition with pre-existing norms at all levels—be that the international, the continental, the national, or the regional/local level. These pre-existing domestic norms are also used as interpretative frames for the primary norm, and, thus, have the capacity to alter the secondary norms.

How do we define contestation? Has contestation taken the form of applicatory contestation or validity contestation? Zimmermann et al. (2017) argue that the former reinforces

the norm and better defines its scope and proper implementation, which emphasizes our distinction between primary and secondary norms. In relation to Garcia Iommi's conceptualization of internalization, it is argued that norms are inherently contested and that successful internalization (norms simultaneously acquiring formal validity, social recognition, and cultural validation) involves applicatory contestation under conditions of high contestation.

This is in line with Acharya's (2013) model of norm circulation. The emphasis on national differences and their effects on national responses poses the question: How do these responses, if at all, reshape the primary norm? In his view, global norms offered are "contested and localized to fit the cognitive priors of local actors (localization), while this local feedback is repatriated back to the wider global context along with other locally constructed norms and help to modify and possibly defend and strengthen the global norm in question (subsidiarity)" (Acharya 2013, p. 469). "Norm circulation occurs when the less powerful actors feel marginalized in the norm creation process or feel betrayed by the abuse of the norm by the more powerful actors in the implementation stage. Norm circulation is thus a combination of my prior concepts of localization and subsidiarity" (ibid). Furthermore, norm circulation requires:

1. **Sources:** Norms come from a variety of sources, involving a complexity of actors, issues, and contexts.
2. **Contexts:** What matters in norm circulation is not just the security norm entrepreneur, but also the context from which he/she draws the norms.
3. **Agents:** There should be attention not only to how norms originate, but also how they diffuse. The first mention of a new term or concept of a norm is important, but agency can also lie in who and how the norm in question is being promoted.
4. **Contestations and Feedback:** "Resistance that leads to the redefinition, contextualization and localization of a norm is a form of agency. Norms are seldom likely to be adopted wholesale, even though the very idea of a 'universal' norm in the sense of 'applying to all' masks important variations in the implementation of the norm and the instruments, institutions and processes used for its propagation" (ibid).

In the following section, we outline how this contestation continues to grow as counter-securitization moves are being made by opponents. Those argue that the measures taken against COVID-19 are threatening the survival of national economies and call for a depoliticization of coronavirus and a return to normality. The emergence, evolution, and socialization of norms and practices involve numerous, at times, competing actors bound in symbiotic relationships that are often marked by simultaneous contestations and negotiations. Hence, the development of security norms and practices involves dynamic processes, which are dependent on and shaped by the distinctive local political dynamics and distinctive contexts. In fact, a key component of securitization theory is the context in which securitization moves occur. At the ontological level, the relevant literature focuses on the various layers (Balzacq et al. 2016) of the context, and the context is suggested to take two forms (Buzan et al. 1998). According to ontological positioning, on the one hand, context is synonymous with sectors (political, military, etc.); on the other hand, it refers to "conditions historically associated with the threat". Another ontological standing is the possible conception of the context as the political regime within which securitizing moves occur (Balzacq et al. 2016). The securitization literature also engages the epistemological aspects of the context, which is viewed as a "facilitating condition", which is a condition which has the capability to influence the fate of a securitizing move (Buzan et al. 1998). According to this view, security is contextually shaped, and the context not only determines the reception of the securitizing moves, but also the perception of those who receive and amplify them—essentially, context empowers or disempowers security actors (Balzacq 2011).

3. Methodology

This research article is built upon a hypothetico-deductive research strategy, developed by Popper ([1935] 2002), which encourages a structured approach to data collection and analysis. The methodology of this project is based on the principle of methodological triangulation between the relevant secondary literature, official documents and governmental reports, and news analysis, as outlined below (Byrne 2004). In designing our qualitative study, we used a “purposeful selection” method. It is “[a] strategy [where] particular settings, person, or activities are selected deliberately to provide information that is particularly relevant to . . . questions and goals” (Maxwell 2013, p. 98). During our research, purposeful selection enabled us to recruit a relatively representative and heterogeneous perspective of individuals who are/were active in the health sector. Data were collected through a comparative analyses of securitization processes across industrialized Western countries (Germany, U.K., USA, and Israel), which were chosen for exhibiting differences in their responses to the COVID-19 threat—a method of difference. They vary in terms of the secondary norms that they had previously adopted, and, as a result, they interpreted the primary norm in different ways. Thus, various measures aiming at curbing the spread of the virus were taken by the governments of industrialized states following a process of securitization of health and human life, but this process was contested from the beginning. In addition, this contestation continued to grow, as counter-securitization moves were being made by opponents. The data, as demonstrated below, generate understandings of why secondary norms were adopted differently across Western countries despite the fact that they agreed on the primary norm. We decided to only include Western countries in that particular analysis because this makes the differences in secondary norms even more surprising. Including countries outside of the West would almost naturally provide a significant difference in the responses to the primary norm change, and, thus, a wide variety of responses would be expected given the difference in structural conditions. In this article, the Western countries share a lot of economic and political structural conditions—and yet, they provide significant differences in secondary norms anyway. The data were collected in 2020, followed by an additional analysis over an extended period of 12 months (December 2020–December 2021). The data were recorded in English and thematically analyzed using the securitization framework. The next section presents the research’s key findings and analysis.

3.1. *The Securitization of a Pandemic—COVID-19 and the World Health Organization*

This section of the article analyzes the role of the WHO as a norm entrepreneur in the securitization of the COVID-19 pandemic. In line with the theoretical framework in the previous section, one condition for security norm entrepreneurs at the international level is some kind of organizational platform from which to promote their norm. Thus, the WHO is the most logical place from where a transnational global health security norm could be emanating, given that the emerging COVID-19 health security norm is functionally linked to the pre-existing health security norm, as described by Davies et al. (2015). McInnes (2015) argues that the WHO’s authority was traditionally based on the “expert” and “delegated” models, which led to a shift in the nature of the WHO’s authority as a global governor whereby “exogenous shocks can certainly change governors and governing arrangements” (Avant et al. 2008). Thus, it acts as the lead governor in global health. Following Avant et al. (2008), the WHO is a global health governor because it possesses the authority to exercise power over borders for the purposes of affecting policy.

3.2. *WHO and the Global Health Security Norm*

Kamradt-Scott (2010) analyzed the WHO Secretariat as a norm entrepreneur in establishing a new norm in global communicable disease control. In his work, he utilized Finnemore and Sikkink’s (1998) “norm life cycle” theory and analyzed the revising of the International Health Regulations (IHR). Due to some favorable convergence of events, such as Gro Harlem Brundtland’s appointment as Director-General and the successful

dealing with the 2003 SARS outbreak, this norm managed to embed itself at the heart of contemporary global disease outbreak control. Notably, [Kamradt-Scott \(2010\)](#) contends that during the revisions of the IHR 2005, a new practice was established as a norm in the WHO—the use of nongovernmental sources of information. Given this prior argument about the establishment of global health norms by the WHO, it could be expected that a new crisis could be another opportunity to push global security norms and to establish new norms, or variants thereof.

Founded in 1948, the WHO is one of several specialized agencies established by the United Nations (UN) after World War II to coordinate global policy ([WHO 1958](#)). According to [Kamradt-Scott \(2016\)](#), its secretariat has promoted its ability to manage global health security. The emerging COVID-19 health security norm is functionally linked to the pre-existing health security norm, as described by [Davies et al. \(2015\)](#). The WHO was established in 1948 with the express objective of improving the health of all populations worldwide ([Kamradt-Scott 2016](#), p. 402). Within the mandate of its objective, the containment and eradication of infectious diseases was considered to be the WHO's primary task, for which it was provided with considerable authority and autonomy in order to achieve this as a precondition for peace and security. Thus, the WHO was provided with the objective of eliminating infectious diseases wherever they arose. Furthermore, it has achieved important successes, for instance, in relation to smallpox, polio, and Ebola ([Kamradt-Scott 2020](#)). At the same time, its response to a number of pandemics has been criticized ([Kamradt-Scott 2016](#)), such as the 2003 Severe Acute Respiratory Syndrome (SARS) outbreak, the 2009 H1N1 pandemic, and the 2014 outbreak of Ebola Virus Disease (EVD) in West Africa. [McInnes \(2015\)](#) suggests that criticisms of the WHO's performance, including during the subsequent 2014 Ebola crisis, but also during earlier epidemics, reflected tensions between different forms of authority.

3.3. COVID-19 Security Norm Emergence by the WHO

The COVID-19 global health security norm is functionally linked to the pre-existing global health security norm in global disease control, as described above. The WHO's "ringing the alarm bells", as we outline below, arguably represents a securitizing move, with the referent community as the international community. This is in line with the general literature on global communicable disease control as a security norm, as explained in the previous section. The WHO promotes a notion of global health security, a norm that it has been propagating for the past 20 years and that has been well mapped ([Kamradt-Scott 2010](#); [Davies et al. 2015](#)). The security norm linked to COVID-19, outlined below, contains two elements: (1) the primary norm, which defines the content, scope, and modality of the security threat; and (2) the secondary norm, which includes an interpretive framework for interpreting the primary norm. This section examines how COVID-19, as a security threat that needs to be contained, becomes linked to this pre-existing global health security norm. This security norm, eventually during the norm cascading process, is then interpreted by a secondary norm, which depends on local conditions and counter-securitization moves at the national level. The behavioral prescriptions of the primary norm are, firstly, containment.

The 2019–2020 pandemic is an ongoing pandemic of coronavirus disease 2019 (COVID-19) caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). Medically, this is a related virus to the 2003 SARS outbreak. Allegedly first identified in Wuhan, China, in December 2019, it was subsequently declared as a Public Health Emergency of International Concern on 30 January 2020, and acknowledged as a pandemic by the World Health Organization on 11 March 2020. Health authorities in Wuhan reported a cluster of pneumonia cases of unknown cause on 31 December 2019, followed by an investigation in early January 2020. The cases mostly had links to the Huanan Seafood Wholesale Market, and the virus has been discovered to be closely related to bat coronaviruses.

The WHO first rang the alarm bells over the Wuhan outbreak on 5 January 2020; from 7 January 2020, it started briefing public health officials from the U.S. and other national governments on the outbreak in regular teleconference calls ([The Guardian 2020a](#)). The

WHO provided guidelines to member states on the 9 January 2020. The WHO warned the U.S. and many countries about the risk of human-to-human transmission of COVID-19 as early as 10 January 2020 ([The Guardian 2020a](#)). On 14 January 2020, at WHO headquarters, the WHO's technical lead on COVID-19, Maria Van Kerkhove, told reporters of the risks of human transmission between family members ([The Guardian 2020a](#)). On 23 January 2020, the WHO confirmed human-to-human transmission and warned that the global risk was high. The subsequent week, it formally declared a global emergency ([The Guardian 2020a](#)).

The WHO declared the outbreak a Public Health Emergency of International Concern (PHEIC) eventually on the 30 January 2020, the sixth PHEIC since the measure was first invoked during the 2009 swine flu pandemic. The PHEIC explicitly warned of the risk of global spread ([The Guardian 2020a](#)). On 11 February 2020, the WHO established COVID-19 as the name of the disease, and UN Secretary-General António Guterres had agreed to provide the power of the entire UN system in the response. A UN Crisis Management Team was activated as a result. On 25 February 2020, the WHO urged the world to do more to prepare for a possible coronavirus pandemic, followed by WHO officials raising the coronavirus threat assessment at the global level from “high” to “very high” on 28 February. On 11 March 2020, the WHO declared the coronavirus outbreak a pandemic ([The Guardian 2020a](#)). This declaration officially institutionalized the securitization of COVID-19 as a global security norm.

3.4. Norm Cascading at the Member State Level—The Spectrum of Responses

The second stage of the “life cycle” in the adoption of a security norm is what [Finnemore and Sikkink \(1998\)](#) have termed a norm cascade. This happens when governments adopt the norm in the absence of pressure from domestic populations. A norm cascade works as a process of international socialization whereby states conform to a type of “peer pressure”, adopting the new norm as it is perceived to be in their interests to do so. Esteem, arguably, encourages norm compliance ([Kamradt-Scott 2010](#)). Where norm cascades appear, countries acting as early adopters are viewed as norm leaders, while late adopters are classed as norm followers; those that continue to resist adopting are categorized as norm violators. The following section analyses the process of norm cascading in several countries, demonstrating the wide spectrum in security norm adoption, all as a result of norm contestation at the local level.

The next section will explicitly discuss how the COVID-19 norm acquired formal validity, social recognition, and cultural validation in our cases. In order to operationalize the security norm for this article, we can specify them as follows:

- Primary norm: COVID-19 is a security threat that needs to be contained along the lines of accepted, pre-existing, global health security norms linked to communicable diseases.
- Secondary norm: There are several ways to contain the COVID-19 spread, including international cooperation, investment in health capacities (detection, treatment, etc.), interruption of global mobility to contain human-to-human infections, etc.
- Competing secondary norms: economic security, human security, civil liberties, and democratic governance (and many more).

Thus, this article argues that the various measures aiming at curbing the spread of the virus were taken by the governments of industrialized states following a process of securitization of health and human life, but that this process was contested from the beginning. Unlike what is sometimes expected, global norms do not mean a standardization of implementation or even understanding. They also show the importance of the political system at the national level, as we can find significant differences in federal states compared to centralized states. In the context of federal states, such as the USA and Germany, the main security competences of this global security norm were implemented only at the regional level, with the national level only occupying a coordinating role. Containment means at the lowest possible level—for federal states, this implies the regional “state” level. The methodology of this articles combines comparative analysis with process tracing.

3.4.1. Israel

Israel became one of the very early adopters of the COVID-19 security norm. The primary security norm about COVID-19 as a security threat that needs to be contained along the lines of accepted, pre-existing, global health security norms linked to communicable diseases was derived from the global level, notably the heeding of the warning of the WHO. The national government explicitly acted in accordance with the role of a security norm entrepreneur. On 30 January 2020, before the virus had reached Israel, the Israeli health minister Yaakov Litzman declared that a person returning from China to Israel should stay in home isolation for two weeks (Tviser and Blumenthal 2020). Thus, clearly the virus was being securitized and presented as a security threat that necessitated the isolation of people in their own home, thus restricting accepted norms of free circulation. As time passed, the Ministry of Health continued its struggle against the coronavirus' spread and hence ordered further steps, restricting more liberties. On 12 February 2020, the director general of the Ministry of Health signed an order, with a valid duration of 60 days, allowing the state to impose isolation in the hospital on a person suspected of carrying the coronavirus (Ministry of Justice 2020a). On 17 February 2020, the Ministry of Health decided to extend the isolation provision not only to returnees from China, but also to those from Singapore, Macau, Thailand, and Hong Kong (Ministry of Justice 2020b), thereby extending the circle of restrictions, which continued over time. On 26 February 2020, the Ministry of Health issued a new directive to all the people who returned to Israel from Italy, regardless of the development of virus symptoms, to enter home isolation for two weeks (Haroni 2020a). On 27 February 2020, after a first case of coronavirus was discovered in Israel, Israel's interior minister, Aryeh Deri, decided to ban the entry of tourists from Italy (Efrat et al. 2020). On 4 March 2020, the Ministry of Health announced a stricter policy in the fight against the coronavirus, in which home isolation would be expanded to all returnees in the past two weeks from France, Austria, Germany, Switzerland, and Spain, and to ban the organization of mass events of more than 5000 people (Haroni 2020b). On 9 March 2020, the Israeli government decided to impose a domestic isolation obligation for all those returning from abroad for two weeks (Eichner et al. 2020). This is a clear example of normative entrepreneurship on the level of secondary security norms—there are several ways to contain the COVID-19 spread, and the primary focus here was on restricting mobility. These were clearly presented as emergency measures—the restriction of civil liberties as an extraordinary action that is necessary to deal with a very severe security threat.

Further examples of normative entrepreneurship on the level of secondary security norms and the ways to contain the COVID-19 spread were subsequently enacted. The next day, the ban on mass events was extended to events involving more than 2000 people (Hilaie and Senior 2020). On 12 March 2020, as the number of infected people had grown to 109, Prime Minister Netanyahu announced that schools and universities would be closed until further notice (Jaffe-Hoffman 2020). On 14 March 2020, Netanyahu announced new restrictions to the public as part of the fight against the spread of the coronavirus, whereby all venues would be closed and all gathering of more than ten people would not be allowed. In addition, Netanyahu noted that he would seek governmental approval for the use of technology to track patients, measures that had only been used to combat terrorism before. In that context, Netanyahu strongly securitized the COVID-19 virus: *“the enemy is invisible, but we can locate it. We use every means we have, including technological and digital means that we have used to fight terror, I have avoided using them in the civilian public, but there is no choice. The war against the virus requires us to take extraordinary measures. There is a certain violation of the privacy of those people who we check . . . It provides an effective tool for detecting the virus and trying to isolate it, rather than isolating the entire country”* (Yarkechi 2020). One can notice how the measure are being presented as emergency measures—which means that the subsequent restrictions of civil liberties represent an extraordinary action necessary to deal with a very severe security threat.

Eventually, on 19 March 2020, with the number of infected persons at 677, the Israeli government approved emergency regulations for combating the coronavirus, which

prohibited exiting homes except for situations of purchasing food, medication, and receiving medical services. In announcing the regulations, Israeli Prime Minister Netanyahu continued to securitize the virus through his speech: *“the epidemic continues to spread . . . Fortunately, until now, no one in Israel has died from the coronavirus, but unfortunately, it is unlikely to continue . . . Today I am announcing additional measures in the war against the coronavirus. Under these restrictions, you citizens of Israel are required to stay home. Now this is no longer a request, it is not a recommendation, but a mandatory guideline enforced by enforcement agencies.. I am asking that you cooperate with these regulations. Their goal is to ensure that fewer people become infected with the virus . . . If anyone thinks I’m exaggerating take a look at the pictures coming from Spain and Italy . . . Everything has to be done so it doesn’t happen here, and therefore, tonight these regulations will come into effect as soon as they are approved by the government . . . This extraordinary measure has not been executed since the establishment of the state, however, there has been no such epidemic since the establishment of the state and in the last 100 years”* (Eichner 2020). The Israeli Prime Minister makes it very clear—the virus is a very grave security threat and several measures are necessary on the level of secondary security norms. Several ways to contain the COVID-19 spread were enacted, with the primary focus on restricting mobility. The speech also indirectly securitizes the virus by pointing at the serious security consequences that can be ascertained from Spain and Italy, clearly suggestive of an extraordinary measure. The speech further clearly presents the measure as extraordinary—the restriction of civil liberties as an extraordinary action that is necessary to deal with a very severe security threat, the most severe security threat since the establishment of the State of Israel. This statement in itself is extraordinary in a state that has been under attack by several Arab-Israeli wars and long-term terrorist campaigns—despite this, the health security threat is seen as even greater. Clearly, while heeding the warnings of the global level and the WHO, the Israeli government also acts as a security norm entrepreneur at the secondary norm level.

3.4.2. Germany

Germany became one of the early adopters of the COVID-19 security norm, albeit behind Israel in its timeline. The primary security norm about COVID-19 as a security threat that needs to be contained along the lines of accepted, pre-existing, global health security norms linked to communicable diseases was derived from the global level, notably the heeding of the warning of the WHO. The national government explicitly acted in accordance with the role of a security norm entrepreneur, similar to the case of Israel. Initially, there was a delay in its adoption in comparison to Israel. On 22 January 2020, the German government did not consider the virus a serious threat to the country (RP Online 2020). Even five days later, on 27 January 2020, Berlin believed that there was a very low likelihood that the virus would spread to Germany. In this context, German Health Minister Jens Spahn stated that the government would take the issue very seriously and that there was no reason for the German public to panic (Ettel and Turzer 2020). Two weeks later, on 13 February 2020, the German government continued to adhere to the position that there was no danger of the virus spreading in the country. Even when the coronavirus began to spread in Italy (12 dead and 470 infected) on 26 February 2020, the German government still believed that there was no room for concern, and no travel warning for Italy was declared (Thomasson and Stevenson 2020). However, two days later, on 28 February 2020, the German government started to enact concrete steps to combat the coronavirus, which included requiring passengers from South Korea, Italy, Japan, and Iran to report their health status before entering Germany, as was the case with those arriving from China. Again, in this case as well in addition to Israel, the virus is securitized and presented as a security threat that required the confinement of people to their own home, thus restricting accepted norms of free circulation. The German government also called to cancel imminent large-scale international events in the country (Welt 2020a). On 4 March 2020, seemingly, the German minister of health did not perceive COVID-19 as a security threat, warning that *“the consequences of fear can be far greater than those of the virus itself”* (Ludwig 2020). On 10 March

2020, a day after the first two deaths from the coronavirus were recorded in the country, the German government began to change its approach regarding the danger from the virus, as German Chancellor Angela Merkel warned that 60–70% of the country's population could be infected with the virus (Schuler 2020). In parallel, various states in Germany, to which the German constitution bestows domestic legal powers within the federal government in Germany, began to implement measures in order to prevent the continuing spread of COVID-19. On 14 March 2020, all 16 states in Germany closed all schools, and some even shut down entertainment venues (Spiegel 2020). Again, this provides us with another example of normative entrepreneurship on the level of secondary security norms, just as seen in the case of Israel—while Germany could have contained the COVID-19 spread in a variety of ways, the main focus was put on restricting mobility. The aforementioned measures were thus presented as emergency measures, as was the case of Israel, and the resulting restrictions of civil liberties were portrayed as an extraordinary action necessary to deal with a very severe security threat. On 15 March 2020, the German government decided that the country's borders would be closed, except for the flow of goods (BBC 2020a). The next day, 16 March 2020, with the aim of slowing down the infection process and to not overload the health system, the German government and the federal states agreed to close most public facilities in the country, such as bars, cinemas, museums, and clubs, while supermarkets, pharmacies, and drugstores would remain open (Rzepka 2020). On 20 March 2020, Bavaria was the first state in Germany to impose a soft curfew on its inhabitants (Sullivan 2020). Two days later, on 22 March 2020, in order to prevent the spread of the virus, the German government and the federal states decided to tighten the restrictions on the public, in which meetings of more than two people were prohibited, and restaurants and hairdressers had to be closed. In this regard, German Chancellor Merkel stated that *"since there is currently no vaccine and no medication, such measures are currently the most effective means in the fight against the virus. This is how we save lives! These are not recommendations of the state, but rules"* (Welt 2020b). The German Chancellor, just like the Israeli Prime Minister before her, makes it also very clear—the virus is a very grave security threat and several measures are necessary on the level of secondary security norms. Several ways to contain the COVID-19 spread were enacted, primarily focused on restricting mobility. The speech also indirectly securitizes the virus by suggesting that lives will be saved in this way, clearly suggestive of an extraordinary measure in order to protect human life. The speech clearly presents the measure as extraordinary—the restriction of civil liberties as an extraordinary action that is necessary to deal with a very severe security threat. Thus, while heeding the warnings of the global level and the WHO, the German government also acts as a security norm entrepreneur at the secondary norm level at the national level. The federal character of the state also implied that various regional actors, such as the state of Bavaria, were also necessary in order to diffuse the global security norms at the national, regional, and local levels.

3.4.3. United Kingdom

The U.K. was one of the slightly delayed adopters of the COVID-19 security norm, behind Israel and Germany in its timeline, but still relatively quick in a global perspective. Almost in the same way as Israel and Germany, the primary security norm about COVID-19 as a security threat that needs to be contained along the lines of accepted, pre-existing, global health security norms linked to communicable diseases was derived from the global level, notably the heeding of the warning of the WHO. The U.K. national government explicitly acted in accordance with the role of a security norm entrepreneur at the national level, thereby diffusing the norm locally and nationally. Yet, initially, there was a delay in its adoption in comparison to Israel. On 31 January 2020, the first two cases of coronavirus were discovered in the United Kingdom (BBC 2020b). A week later, on 6 February 2020, as the virus continued to spread in Asia, the U.K.'s chief medical officers called on all returnees from China, Thailand, Japan, South Korea, Hong Kong, Taiwan, Singapore, Malaysia, and Macau in the past 14 days to be self-isolated at home (Boseley et al. 2020). On 10 February

2020, declaring that coronavirus poses a serious and imminent threat to public health in the U.K., the British government introduced the Health Protection (Coronavirus) Regulation 2020, enabling the state to implement public health measures (such as forcibly quarantining people) for the purpose of reducing the public health risks arising from the coronavirus. In that respect, British Health Secretary Matt Hancock stated that these new measures were “*an effective means of delaying or preventing further transmission*” of the virus (Stubbley 2020). Thus, as shown by the prior examples of Israel and Germany, the virus was presented as a severe security threat, i.e., securitized. The consequence of this, again, required the restriction of accepted norms of free circulation. We can therefore speak of a clear example of normative entrepreneurship, again on the level of secondary security norms. While it is theoretically possible to contain the COVID-19 spread in different ways, the UK government also put an emphasis on restricting mobility. On 3 March 2020, the British government launched its plan to respond to the coronavirus, which included four possible dimensions (contain, delay, research, and mitigate). At that time, the U.K. government’s main focus was to prevent the virus from taking hold in the country (contain phase), and researching the virus’s origins and lessen its effect on the population (research phase) (Department of Health and Social Care 2020). On 5 March 2020, the first case of death from coronavirus was recorded in the U.K. (BBC 2020c). A week later, on 12 March 2020, the British government decided to move to the “delay” phase of its plan to tackle the epidemic, hoping to slow its spreading in the country. In that context, British Prime Minister Boris Johnson said that COVID-19 is “*the worst public health crisis for a generation*” and warned that “*it is going to spread further . . . many more families are going to lose loved ones before their time*” (BBC 2020d). On 16 March 2020, the British government announced new stringent measures in which schools would be closed and people would be asked to work from home as far as possible, avoiding gatherings, using the National Health Service (NHS) only in urgent cases. In addition, people with symptoms of persistent cough or fever were asked to stay at home for 14 days. Announcing these new measures, Prime Minister Johnson said that “drastic action” was needed as the U.K. approached “the fast growth part of the upward curve” in the number of cases (BBC 2020e). Only on 23 March 2020, the British government imposed movement restrictions on the British public in order to slow the spread of the virus in the country, in which people had to remain at home as much as possible, all shops selling non-essential goods would have to be closed, and all gatherings of more than two people in public would be forbidden. British Prime Minister Johnson stated that “*the coronavirus is the biggest threat this country has faced for decades . . . if too many people become seriously unwell at one time, the NHS will be unable to handle it—meaning more people are likely to die, not just from coronavirus, but from other illnesses as well. So it’s vital to slow the spread of the disease . . . If you don’t follow the rules, the police will have the powers to enforce them, including through fines and dispersing gatherings . . . I urge you at this moment of national emergency to stay at home, protect our NHS and save lives*” (The Guardian 2020b). The British Prime Minister, just like the Israeli Prime Minister and the German Chancellor before him, makes it also very clear that the virus is a very grave security threat—the biggest the U.K. has faced for decades—and several measures are necessary on the level of secondary security norms. Several ways to contain the COVID-19 spread were enacted, mainly focused on restricting mobility. The aforementioned speech act also indirectly constructed the virus as a security threat through the use of language indirectly implying that lives would be saved in that way, suggestive of what could be perceived to be an extraordinary measure in order to protect human life. Similar to the German case, while heeding the warnings of the global level and the WHO, the British government also acts as a security norm entrepreneur at the secondary norm level at the national level. The devolved character of the state with special powers on health matters devolved to Scotland, Wales, and Northern Ireland also implied that various regional actors, such as the aforementioned regional governments, were also necessary in order to diffuse the global security norms at the national level, as well as the regional and local levels.

3.4.4. United States

The U.S. was one of the delayed adopters of the COVID-19 security norm, behind Israel, Germany, and the U.K. in its timeline, but still relatively agile in a global perspective. Almost in the same way as Israel, Germany, and the U.K., the primary security norm about COVID-19 as a security threat that needs to be contained along the lines of accepted, pre-existing, global health security norms linked to communicable diseases was derived from the global level, notably the heeding of the warning of the WHO. Of course, the global level was initially contested, and much blame was laid at the feet of the WHO. However, the U.S. national government eventually diffused the norm locally and nationally. Yet, initially, there was a delay in its adoption in comparison to many Western countries, with the U.S. being one of the latest Western adopters of the COVID-19 security norm. On 29 January 2020, nine days after the first case of coronavirus infection was recorded in the U.S. (Abutaleb et al. 2020), President Donald Trump announced the formation of the President's Coronavirus Task Force, aiming to lead the government's endeavors to tackle the spread of the epidemic (White House 2020a). On 31 January 2020, a day after the Chinese government decided to lock down the entire Hubei province, the Trump administration imposed a quarantine, the first one ever issued in the past 50 years, for up to 14 days on American citizens who returned from Hubei (Jackson 2020). In addition, the American government announced restrictions prohibiting any non-U.S. citizens who visited China in the past 14 days from entering the United States. In the US, just like in the cases of Israel, Germany and the UK before it, the virus was presented as a security threat, one that made it necessary to restrict the free movement of people, hence, violating a settled domestic norm. Again, as in the prior cases, this is suggestive of normative entrepreneurship on the level of secondary security norms. The measures were presented as emergency measures, requiring a restriction of civil liberties as an extraordinary action against a very severe security threat. However, while doing so, the U.S. government also counter-securitized the economy. While some figures in the U.S. government called for the travel ban to be extended to visitors from Italy and other EU countries, the U.S. Treasury, supported by President Trump, opposed the proposal on the grounds that it could hurt the U.S. economy (Abutaleb et al. 2020). The counter-securitization of the economy took on much stronger focus in the U.S. case than with regards to Israel, Germany, and the U.K. This counter-securitization also explains the mixed message rhetorically from the U.S. government. On 26 February 2020, nominating Vice President Mike Pence to coordinate the administration's response to the coronavirus, Trump stated that *"the risk to the American people remains very low"*. Others in his administration were more cautious about the danger from the virus and warned that there would be more infections in the future (Shear et al. 2020). On 29 February 2020, the first case of death from coronavirus was recorded in the U.S. Yet, the U.S. administration and its head did not appear to be concerned about the coronavirus and certainly did not see it as a security threat to the U.S. In that context, President Trump tweeted on 9 March 2020 that, although the common flu kills tens of thousands each year, nothing would be shut down and life and economy would go on. This was clearly pitting the securitization of the secondary security norm against the counter-securitization of the economy. While the U.S. government did bring in extraordinary measures along the lines of the primary security norm about COVID-19 as a security threat that needs to be contained along the lines of accepted, pre-existing, global health security norms linked to communicable diseases, which they also derived from the global level, this was not a straightforward process in the U.S. As the evidence showed, the Trump administration continuously counter-securitized the economy, which explains the mixed messages in U.S. President Trump's speeches. Only on 12 March 2020, Trump ordered the halt to incoming travel from Europe (Singh et al. 2020). On 16 March 2020, the American government launched "national social distancing guidelines", recommending people at risk (old and/or sick people) to stay at home for the attempt to help prevent the spread of the virus (White House 2020b). While some U.S. states began to impose movement restrictions on their residents, such as California (19 March 2020), New York, and New Jersey (21 March 2020), requiring people to avoid

all nonessential outing and stay home as much as possible (Ortiz and Hauck 2020), the Trump administration avoided imposing a curfew on the entire country or several states individually. The American President contemplated imposing a quarantine on New York, where the percentage of virus casualties accounted for 40% of the U.S. Subsequently, on 29 March 2020, with the goal of preventing the spread of the pandemic throughout the U.S., Trump stated that instead of quarantine, a “strong travel advisory” would be issued (BBC 2020f). Nevertheless, although no curfew has yet been imposed by the federal government, the U.S. government has come to view COVID-19, perhaps belatedly, as a security threat to the U.S. President Trump warned on 31 March 2020 that *“I want every American to be prepared for the hard days that lie ahead . . . this is going to be a very painful, very, very painful two weeks”* (Smith 2020). The U.S. President, eventually, just like the Israeli Prime Minister, the British Prime Minister, and the German Chancellor before him, makes it also clear that the virus is a very grave security threat. However, this message is continuously watered down with a counter-securitization of the economy. Several ways to contain the COVID-19 spread were enacted, with emphasis on restricting mobility, but several other measures were delayed with the aim to not harm the economy. Similar to the British and the German cases, the U.S. government also acts as a security norm entrepreneur at the secondary norm level at the national level, but equally does the same with a focus on counter-securitizing the economy. Given the federal character of the state with special legislative powers on health and related matters on the level of U.S. states, ultimately, U.S. states implemented the secondary security norms rather differently and at different speeds. The norm diffusion of the global security norms at the national level, as well as the regional and local levels, was far from straightforward.

4. Conclusions

We developed a new conceptual framework to help our analysis of the international responses to the COVID-19 epidemic. We combined insights from the scholarship on international norm emergence, cascading, and entrepreneurship with the securitization framework, bringing it into one coherent framework. In this article, we analyzed this security norm emergence as a global security norm, demonstrating the significance of the World Health Organization as a norm entrepreneur in the emergence of the security norm, and outlining the norm cascading down to the level of member states. The article suggested that this health security norm consists of two elements: (1) the primary norm, which defines the content, scope, and modality of the security threat; and (2) the secondary norm, which includes an interpretive framework for interpreting the primary norm. We examined a selection of countries to demonstrate the following: (1) countries implemented the global security norm on COVID-19 by focusing on domestic measures, albeit at times taken at the regional level, to contain the disease; (2) the measures taken varied significantly, but all consisted of emergency powers, border closures, and variations of lockdowns to stop people’s mobility, which is completely in line with what should be expected within a securitization framework.

The article also suggested that norms continue to be contested. Norms are in competition with pre-existing norms that are used as interpretative frames for the primary norm. This underlines Acharya’s (2013) argument about norm circulation, demonstrating the importance of local context in the adoption of norms, especially security norms. Unlike what is sometimes expected, global norms do not mean a standardization of implementation or even understanding. It also shows the importance of the political system at the national level, as we can find significant differences in federal states compared to centralized states. In the context of federal states, such as the USA and Germany, the main security competences of this global security norm were implemented only at the regional level, with the national level only occupying a coordinating role. The article demonstrated the differences amongst industrialized states with regard to the contents, scope, and implementation timeline of the various measures aiming to curb the spread of the virus. The four case studies of norm cascading discussed in the article clearly emphasize that each country cascaded

the COVID-19 security norm differently, both in terms of duration of the identification and mobilization stages and in terms of the types of the extraordinary measures and their severity. This is to be expected, as the interpretive frame for the COVID-19 health security norm in each country differed significantly. Furthermore, in the context of federal states, such as the USA and Germany, but also the U.K., to a lesser extent, the main security competences of this global security norm were implemented only at the regional level, with the national level only occupying a coordinating role.

However, as a caveat, we analyzed only the beginning of the pandemic state of affairs globally that will undergo and has already undergone different, additional phases, which may be characterized by further counter-securitization and de-securitization moves by a multitude of actors at the international, continental, national, and regional/local levels. Western countries have been affected by counter-securitization moves by opponents who argue that the measures taken against COVID-19 are themselves threatening the survival of national economies and call for a depoliticization of coronavirus and a return to normality. Begg (2020) outlines the three distinct, overlapping economic effects of COVID-19: (1) macroeconomic: he expects a sharp fall in GDP to lead to an increase in public and private debt due to very significant economic stimulus packages, potentially leading to renewed financial instability; (2) an uneven incidence of the lockdown of economies—aviation, tourism, leisure activities, and non-food retail face an extended period of inactivity; (3) a significant effect on households with job losses and loss of income.

Additionally, as a further caveat, we analyzed only the securitization of COVID-19, i.e., the emergence of COVID-19 as a global health security norm. Subsequently, we also outlined the norm cascading down to the level of UN and WHO member states. However, we did not analyze the opening up of the lockdown measures in the various WHO member states. This article does not, therefore, deal with the subsequent counter-securitization of the economy in the face of the COVID-19 pandemic. As demonstrated above, there are already significant signs that the economy is concurrently being securitized as under threat by the lockdown from the pandemic. As a result of that, the health security norm from the pandemic will enter a competition with the increasing economic and financial security arguments made by economic international actors, such as the International Monetary Fund, or others. While economic scenarios seem to suggest economic depression on a scale not seen since the Great Depression of the 1920/30s as a result of the COVID-19 crisis, this analysis of competing norms—the health security norm versus the financial security arguments—will need to be made in another article.

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