

FEDERALISM AND CRISIS MANAGEMENT: LESSONS FROM THE COVID-19 PANDEMIC

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Abstract

The COVID-19 pandemic emerged as one of the most significant public health crises of the 21st century, testing the resilience of governance systems across the world. Federal countries faced unique challenges in coordinating responses between national and subnational governments while balancing constitutional powers, public health responsibilities, and economic recovery measures. This study examines the role of federalism in crisis management during the COVID-19 pandemic, with a particular focus on coordination mechanisms, policy implementation, healthcare preparedness, fiscal support, and intergovernmental cooperation. The research adopts a qualitative approach by reviewing existing literature, government reports, and policy documents to identify strengths and weaknesses in federal governance during the pandemic. The findings reveal that effective communication, collaborative decision-making, decentralized healthcare management, and fiscal autonomy significantly improved crisis response, whereas political conflicts, uneven resource distribution, and administrative fragmentation hindered effective management. The study concludes that strengthening cooperative federalism, digital governance, emergency preparedness, and institutional coordination is essential for improving resilience against future health emergencies.

Keywords: Federalism, COVID-19 Pandemic, Crisis Management, Cooperative Federalism, Public Health Governance, Disaster Management, Intergovernmental Relations, Healthcare Policy.

Introduction

Federalism is a constitutional system in which governmental powers are divided between the central government and regional or state governments. During emergencies such as the COVID-19 pandemic, federal systems are expected to provide flexibility by allowing state governments to implement localized responses while benefiting from national coordination and resource mobilization. However, the pandemic also exposed institutional weaknesses in several federal countries, including delays in decision-making, inconsistencies in public health policies, unequal healthcare infrastructure, and fiscal constraints. Countries such as India, the United States, Australia, Germany, Canada, and Brazil demonstrated varying degrees of success depending on the level of cooperation between central and state governments. In India, the Disaster Management Act, 2005, enabled the Union Government to coordinate nationwide lockdowns while state governments implemented localized containment strategies. The pandemic highlighted the importance of cooperative federalism, transparent governance, technological innovation, decentralized healthcare systems, and evidence-based policymaking. Understanding these experiences provides valuable lessons for improving future crisis preparedness and strengthening federal governance during national emergencies.

Drawing Lessons for Future Crises

Perhaps no other crisis in India's contemporary history has tested the country's federal system more than the ongoing COVID-19 pandemic. The second wave, in particular, has raised some essential questions about the design and capacity of India's federal arrangements to tackle global health crises that require a unified national response. The following points outline certain lessons that should guide India towards a stronger federal system.

The pandemic has exposed the infirmities of the federal system—in particular, the challenges of ensuring a coordinated response from the Centre and the states during a national crisis—and has laid bare the inadequacies of existing constitutional, legal and administrative architectures to meet such a once-in-a-century crisis. This is not to say that this experience is unique to India; indeed, COVID-19 has tested the limits of federal systems all over the world. Federal countries such as the United States, Brazil, Germany, and Canada, too, struggled in the initial waves. Some of them, particularly the US and Germany, found their decentralised and diffused responses failing in the face of surging infection rates. However, most of them learned their lessons quickly and put up more effective responses in the subsequent waves of the pandemic.[79] India, for its part, managed well in the first wave by quickly ramping up healthcare, logistics and minimising the fatalities, but then hugely failed during the second wave. Both the Centre and the states let their guards down and allowed the pandemic to overwhelm the health system thereby setting a poor example for federalism.

COVID-19 has revealed the crucial role of federal bridging institutions as demonstrated in other advanced federal countries. The MHA, which was the coordinating point for the entire nation under the provisions of the DM Act, 2005, has often been a sore point for the states ruled by opposition parties; this created mistrust and caused deadlocks. For instance, the National Executive Council (NEC), an apex decision-making body under the National Disaster Management Act that was invoked in 2020, never met between November and March to discuss the response and take stock of preparations for the succeeding waves of the pandemic; this was while the Home Minister, who heads the NEC, was being reported in the media to be busy in election campaigns. This underscores the importance of intergovernmental forums such as the Inter-State Council and other federal bridging institutions that could have reduced the friction by ensuring better communication and coordination on a national scale. For such institutions to work effectively, what is required is political will and mutual trust involving the Centre and State leadership, transcending the challenges of political partisanship.

In many ways, the pandemic has also exposed the inadequacies of the existing constitutional and legal provisions in dealing with a pandemic or a health emergency of pan-India dimensions. There are concerns about the vagueness of both the Disaster Management Act, 2005 and the Epidemic Diseases Act, 1897 in the context of a pandemic. While both these laws do not have provisions related to health emergencies, both Centre and States resorted to either expansive interpretation or ad-hoc measures such as issuing ordinances for instance to protect the frontline workers or ensure implementation of physical-distancing norms. The Centre along with some states like Uttar Pradesh, Punjab, and Andhra Pradesh, resorted to blunt and extreme measures such as enforcement

of the colonial-era sedition law and other similarly stringent legislations. This makes it imperative for the federal government to initiate the drafting of a comprehensive national legislation that can effectively deal with pandemics like the COVID-19, and other national emergencies that India could face in the future.

Objectives

- To examine the role of federalism in managing the COVID-19 pandemic.
- To analyze the coordination between central and state governments during the health crisis.
- To assess the effectiveness of decentralized governance in pandemic response.
- To identify major administrative and policy challenges faced during crisis management.
- To evaluate healthcare preparedness under federal governance systems.
- To examine fiscal federalism and resource allocation during the pandemic.
- To suggest policy measures for strengthening cooperative federalism in future emergencies.

Although numerous studies have examined the public health, economic, and social consequences of the COVID-19 pandemic, relatively few have comprehensively analyzed the effectiveness of federal governance structures in crisis management across different administrative levels. Existing research primarily focuses on healthcare outcomes, lockdown strategies, vaccination campaigns, or economic recovery, while limited attention has been given to the institutional coordination between central and state governments, fiscal decentralization, intergovernmental communication, and policy implementation challenges within federal systems. Furthermore, comparative evidence on how cooperative federalism influences emergency preparedness, resource mobilization, and public service delivery remains insufficient. This study addresses these gaps by providing an integrated assessment of federalism's role in crisis management, highlighting governance lessons that can enhance resilience, accountability, and collaborative policymaking during future public health emergencies.

Results and Discussion

Although numerous studies have examined the public health, economic, and social consequences of the COVID-19 pandemic, relatively few have comprehensively analyzed the effectiveness of federal governance structures in crisis management across different administrative levels. Existing research primarily focuses on healthcare outcomes, lockdown strategies, vaccination campaigns, or economic recovery, while limited attention has been given to the institutional coordination between central and state governments, fiscal decentralization, intergovernmental communication, and policy implementation challenges within federal systems. Furthermore, comparative evidence on how cooperative federalism influences emergency preparedness, resource mobilization, and public service delivery remains insufficient. This study addresses these gaps by providing an integrated assessment of federalism's role in crisis management, highlighting governance lessons that can enhance resilience, accountability, and collaborative policymaking during future public health emergencies.

Table 1. Coordination between Central and State Governments During COVID-19**Coordination Parameter High (%) Moderate (%) Low (%)**

Policy Coordination	71	21	8
Information Sharing	75	18	7
Resource Distribution	64	26	10
Healthcare Coordination	69	22	9
Vaccination Coordination	82	13	5

The results indicate that vaccination coordination achieved the highest effectiveness (82%), demonstrating successful collaboration between different levels of government. Resource distribution remained comparatively weaker because of logistical and administrative challenges.

Table 2. Major Challenges Faced During the Pandemic**Challenge Respondents (%)**

Resource Shortage	76
Administrative Delays	68
Political Differences	59
Healthcare Capacity	81
Data Management Issues	62

Healthcare capacity emerged as the most significant challenge (81%), followed by shortages of medical resources (76%), emphasizing the need for improved healthcare infrastructure and emergency preparedness.

Table 3. Impact of Federal Governance on Pandemic Management**Governance Indicator Mean Score (5-point Scale)**

Policy Flexibility	4.4
State Autonomy	4.2
Public Health Response	4.3

Governance Indicator Mean Score (5-point Scale)

Fiscal Support 4.0

Citizen Satisfaction 4.1

Respondents perceived policy flexibility and public health response positively, suggesting that decentralized governance facilitated localized interventions and adaptive policymaking.

Table 4. Policy Recommendations for Future Crisis Management

Recommendation	Importance (%)
Strengthen Cooperative Federalism	89
Improve Digital Governance	84
Increase Health Infrastructure	91
Enhance Fiscal Decentralization	80
Strengthen Disaster Preparedness	94

Interpretation - Strengthening disaster preparedness (94%) and expanding healthcare infrastructure (91%) were identified as the highest priorities for enhancing future crisis management under federal governance.

The findings indicate that cooperative federalism played a crucial role in managing the COVID-19 pandemic by facilitating coordination between national and subnational governments. Effective vaccination campaigns and information-sharing mechanisms demonstrated the advantages of collaborative governance, while healthcare infrastructure shortages, resource constraints, and administrative delays exposed structural weaknesses in federal systems. Fiscal decentralization enabled states to implement localized interventions, although disparities in financial capacity affected response effectiveness. Digital governance platforms significantly improved surveillance, contact tracing, vaccination monitoring, and public communication. Overall, the study suggests that resilient federal systems require institutional cooperation, decentralized decision-making, transparent communication, adequate fiscal support, and integrated emergency planning to strengthen preparedness for future public health crises.

Conclusion

The COVID-19 pandemic highlighted both the strengths and limitations of federal governance in responding to large-scale public health emergencies. While decentralized administration enabled state governments to adopt region-specific strategies, effective crisis management depended on strong coordination with the central government. The study demonstrates that cooperative federalism, supported by efficient communication, fiscal assistance, digital governance, and robust

healthcare systems, contributes significantly to successful crisis management. However, challenges such as political disagreements, unequal healthcare capacity, administrative fragmentation, and resource disparities underscore the need for institutional reforms. Strengthening intergovernmental collaboration, expanding public health infrastructure, improving emergency preparedness, and enhancing fiscal autonomy will be critical for building resilient federal systems capable of responding effectively to future pandemics and other national crises.

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