

Hard Questions about Hard Lockdowns

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Now that every cat and dog has embraced “science,” let’s see what science is telling us about the efficacy of hard lockdowns to combat COVID-19. Sweden, the Scandinavian kingdom of just 10 million, has found itself at the center of the world’s debate on the effectiveness of lockdowns. Virtually all of the mainstream reportage and opinions have harshly criticized the country’s unique approach to combatting the pandemic. Indeed, Sweden’s strategy has been labeled “disastrous,” “a self-inflicted wound,” and “a failure,” to name a few. So, what exactly has Sweden done to provoke such a bitter reaction from the mainstream press?

Unlike much of the rest of the world, Sweden refused to institute a nationwide lockdown or anything approaching one. Instead, it has pursued a relatively laissez-faire approach to addressing the virus, which has kept businesses open, left domestic travel unconstrained, and allowed healthy citizens to continue living their daily lives as they see fit. Recently, some government mandates have been imposed to moderate capacity limits in gyms, sports centers, shopping malls, private gatherings, and public pools. Additionally, secondary schools for students over the age of 16 (*gymnasier*) have again been closed, as they were for a few months in 2020, while the decision whether to close *högstadiet* (schools typically for pupils age 13-15) for the first time is being taken at the local level. With limited exceptions, universities have again switched to remote education. But these measures fall far short of imposing strict lockdowns. Even now, Sweden’s approach can be characterized as “light touch.”

Why the light touch? Well, you will search in vain to find the answer in the mainstream media. Indeed, in thousands of inches of press routinely trashing Sweden, there is seldom found so much as a word that goes to the heart of Sweden’s distinctive approach. As it turns out, its light touch is rooted in its constitution. Quite simply, while there are exceptions that allow for certain limited measures to be taken locally, the imposition of a strict nationwide lockdown would be unconstitutional in Sweden. It’s all spelled out in Chapter 2, Article 8, of the *Regeringsform* (a critical section of the Swedish constitution), which states: “Everyone shall be protected in their relations with the public institutions against deprivations of personal liberty. All Swedish citizens shall also in other respects be guaranteed freedom of movement within the Realm and freedom to depart the Realm.”

Predictably, this constitutional imperative has been ignored by the mainstream media, which repeatedly cite the “sound science” behind lockdowns to berate the Swedish strategy. What the media fail to report, however, is that there exists no broad scientific consensus concerning the effectiveness of lockdowns — the jury is still out, so to speak.

However, the most recent, rigorous studies on the efficacy of lockdowns raise questions as to just how effective they are. Take, for example, a newly published paper by Stanford University

professors Eran Bendavid, John Ioannidis, Christopher Oh, and Jay Bhattacharya. The authors estimate the impacts of strict lockdown policies on COVID-19 case growth in eight high-income countries in the earlier months of the pandemic (England, France, Germany, Iran, Italy, the Netherlands, Spain, and the United States). Additionally, they estimate the effects of Sweden's light-touch approach.

After comparing infection trajectories in the strict-lockdown nations with Sweden's, Bendavid et al. find that instituting strict lockdown policies reduced COVID-19 case growth by roughly 20 percent on average. However, Bendavid et al. also find that Sweden's lighter restrictions reduced case growth to a similar extent (roughly 25 percent). Their results indicate that Sweden — a nation whose government imposed very few mandatory intervention policies in the spring of 2020 — displayed lower case growth than five out of the eight countries that implemented strict lockdowns. Armed with this evidence, Bendavid et al. suggest that lockdowns are an unnecessarily harsh response measure and that “similar reductions in case growth may be achievable with less restrictive interventions.”

An article in *Nature* by Serina Chang et al. confirms the conjecture of Bendavid et al. Using cell-phone GPS data gathered in the early months of the epidemic to model hourly movements in the U.S.'s ten largest cities, researchers discovered that reducing capacity in gyms, grocery stores, restaurants, and hotels to 20 percent could prevent over 80 percent of new COVID-19 infections. Businesses could therefore remain operational to some degree while nonetheless preventing the vast majority of infections. This approach is clearly preferable to a total lockdown, which can destroy businesses for, at best, only marginal health benefits, and the malign consequences do not end there.

Not surprisingly, the strategy proposed by Chang et al. mirrors the light-touch approach currently embraced by Sweden. Indeed, contrary to the barrage of criticism that has been leveled at the Swedes in the mainstream media, their light-touch approach appears to be the one most consistent with science. And its benefits have allowed Sweden to avoid many of the costs associated with hard lockdowns. By doing its best to leave schools open, Sweden has at least partially preserved the educational integrity of its youth. By avoiding mandatory stay-at-home orders, it has safeguarded its citizens' mental health. By keeping businesses open, Sweden has suffered fewer economic losses than most of its European peers.

Thanks to its constitution, Sweden has experienced COVID-19 caseloads comparable to those that would have occurred under hard lockdowns but has avoided much of the economic and associated collateral damage that comes with hard lockdowns.

In a way, hard lockdowns have been a device to avoid making the far tougher decision as to how to “live with” the virus. The cost of that evasion in economic and human terms has been enormous. And it seems to be all for relatively little, if any, medical advantage. What has always been needed is to strike a balance, something that the Swedes may still, in the end, have managed (and are still managing) to achieve.

This is not to minimize the losses that Sweden has incurred, but nor should the relative Swedish mortality rate when compared with other countries be exaggerated. As at the time of writing, Sweden ranks 27th in the world in per capita COVID-19 cases. Notably, Sweden sits behind myriad pro-lockdown states such as the U.S., Belgium, Switzerland, Spain, the U.K., and the Netherlands. As far as deaths per capita goes, Sweden ranks 23rd in the world — again, far

behind numerous pro-lockdown countries, something difficult to square with the criticism of Sweden's light-touch policies. It is true that Sweden has, relatively speaking, fared worse in this respect than its Nordic neighbors, but there are numerous explanations for this, ranging from (widely acknowledged) early mishandling of the virus in its eldercare homes to specific population density conditions in Stockholm, a city that accounts for nearly 10 percent of the country's population — a figure that increases to around 17 percent, once nearby suburbs are factored in.

It should be stressed that calculating the right balance in devising policies to deal with the pandemic is a continuous process. On the one hand, such calculations must reflect the fact that help, in the form of the vaccines, is on the way, but on the other, the reality that new, more infectious (and possibly more deadly) variants of the virus are among us has to be taken into account. Neither, however, of these developments would appear to justify a return to the strict lockdowns that have delivered so little and destroyed so much.

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