## Introduction: Social Policy Responses and Institutional Reforms in the Pandemic

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An experience such as a pandemic can be used as an X-ray image of society if the effect on the skeleton is closely investigated. What is normally hidden or ignored in everyday observations and experiences becomes visible through the pandemic. COVID-19 was first reported in Wuhan (China) in December 2019 and soon spread worldwide. Mutations of the virus caused multiple waves, and as of February 2023, the World Health Organisation reported more than 6.8 million deaths. Although the death-to-case ratio is 1.02 per cent, the lock-down measures that countries adopted to contain the virus resulted in irreparable loss of livelihoods. Moreover, access to vaccines developed for prevention was unequal. The unprecedented external shock that the pandemic posed challenges even for the best of welfare regimes.

Governments responded differently by introducing changes that aimed to provide their citizens with health, income, and labour protection, but with significant variations in their outcomes. Meanwhile, families and individuals had to take emergent actions to cope with the shock and to adapt to the presence or absence of state protection. This themed section examines how the policies and programmes created and implemented in response to the pandemic can be evaluated as institutional reforms.

While citizens are too preoccupied with their emotions and well-being and unable to engage with the government, the welfare responses from the state are likely to be a function of the robustness of the regime. Therefore, some authors have argued that shocks like the pandemic can serve as opportunities for welfare retrenchment (Klein, 2007). On the other hand, climate shocks and humanity's collective efforts also may suggest efforts to build resilient societies. Social policy interventions in the context of COVID-19 are a fit case to examine these two divergent positions. In fact, social policy is recognised as an institutionalised response to the inherent challenges of a Risk Society (Beck, 1992). But is social policy a strong enough instrument when the shock is external and global, such as COVID-19?

This themed section aims to explore how social policy responses to the external shock of the pandemic translated to institutional reform across various welfare systems in the Global North and South. The cases of Australia, Spain, Italy, Argentina, and the UK are presented in different articles. The thematic policy issues from these contexts reported here are two articles about cash transfers for relief, two on long-term care, and a fifth on a non-state safety net. This themed section consists of six articles and a brief document with some useful sources to study social policy responses, evaluate the degree of their institutionalisation, and measure their outcomes. The first article is a systematic review by the editors (Cruz-Martínez *et al.*, 2023). Thirty-nine articles are selected through a systematic keyword search in Scopus and Web of Science to identify social policy responses to COVID-19. These articles are grouped into four clusters: 1) social policy responses were limited or none after the pandemic; 2) social policy response was not strong enough to make a pathbreaking change; 3) institutionalisation of at least one of the newly introduced reforms; and 4) recognition of the need for reforms though reform was not undertaken.

The second article included in this themed section is about policy action against COVID-19 in nursing homes in Lombardy (Italy) and Madrid (Spain). León *et al.* (2021) provide a historical institutionalist analysis for both these contexts to show how nursing homes were kept out of the purview of the welfare state. The Long Term Care (LTC) system was historically poorly embedded in both Italian and Spanish welfare states. Spain made significant policy changes and innovations in the LTC system but was hampered by the financial crisis, devolution of powers, and insufficient public funding. The LTC system has suffered from inertia in Italy and has seen very few policy changes. It is understood that nursing homes are not recognised as an essential part of the LTC system. Institutional innovation focused on home care and cash-for-care services, marginalising residential care services. The article shows how path dependency created through policy choices proved difficult to change when the pandemic struck.

The third article in this themed section examines the LTC care question in the disability domain. There have been policy preferences for domiciliary care for disabled people inspired by the independent living movement. Pearson *et al.* (2022) study of disabled persons in England and Scotland during COVID-19 reveals that the individualised services experienced a complete breakdown, and families or civil society organisations had to take over those roles. The article provides a detailed description of how the lives of people with disabilities and their families have been disrupted by the pandemic, the weakness of the NHS and the social care crisis in general.

The fourth article included in this themed section is from the Argentinian context (Cena and Dettano, 2022). The authors examine the distance between policy intention and implementation through a policy ethnography. The relief measures introduced by the government as Emergency Family Income (EFI) are the subject matter of policy. The waiting process recipients undergo for these relief measures allows them to 'construct' a policy process of their own. These felt experiences are essential inputs to the design of policy reforms.

The fifth article included in this themed section is a critique of a food bank that became a safety net during the COVID-19 crisis. Beck and Gwilym (2022) focus on an unconventional form of what has been considered as 'social policy by other means' (Seelkopf and Starke, 2019). The authors examine food banks in the UK as a fundamental safety net for food security, which is not guaranteed by the welfare state (before or during the pandemic). Authors question the institutionalisation of such measures from civil society. They point out how COVID-19 may be used as a cover-up to roll back the welfare state. Strengthening the welfare state requires addressing the root cause of hunger, such as the inability to guarantee a minimum wage that meets the cost of living.

The final article included in this themed section is from Australia. Ramia and Perrone (2021) examine the social policy response by the conservative government in Australia.

The authors show how the urgency and scale of the crisis shaped the institutional change of cash transfers in an anti-welfarist government. The major policy turnaround with increased welfare generosity is the case to explain here. Taking a historical institutional approach, the authors point out how the Australian government shifted from neo-liberal policies before the pandemic. In sum, the pandemic expedited the process of policy changes.

All the articles present evidence to reflect whether COVID-19, as a critical juncture, created permissive conditions and productive conditions (State of the art article in this themed section) to effect institutional reforms. Path dependency may have prevented institutional reforms as a response to COVID-19, which is expected to pass rather than create a permanent 'new normal'. However, the pandemic has forced recognition of policy lacunae for several sectors, particularly responding to the needs of marginalised segments of society. This recognition and cognisance will be a centripetal force for policy scholarship for some time.

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